

# YOUR RIGHTS AND RESPONSIBILITIES AS A PATIENT

English - Spanish - Korean

YOUR WELL BEING AND HEALING ARE OUR PRIMARY CONCERN. WE BELIEVE THAT  
A POSITIVE HOSPITAL EXPERIENCE IS A RESPONSIBILITY THAT IS SHARED BY YOU  
AND YOUR HEALTHCARE PROVIDERS.

## YOUR RIGHTS

- You have the right to request and receive information on patient rights, responsibilities and ethics.
- You have the right to considerate, respectful care and compassionate medical care, regardless of your race, religion, national origin, any disability or handicap, gender, sexual orientation, gender identity or expression, age, military service or the source of payment for your care.
- You have the right to have a family member or representative of your choice and your own physician promptly informed of your hospital admissions.
- You have the right to an identified surrogate decision-maker, as allowed by law, when you cannot make decisions about your own care, treatment, and service.
- You, your family, and/or surrogate decision maker have the right, as appropriate and as allowed by law, to be involved in care, treatment, and service decisions, including the assessment and treatment of your pain.
- Upon admission, you have the right to identify a care partner/lay caregiver to be involved in the discharge planning process.
- You have the right to request an environment that preserves dignity, including room accommodations as available, reasonable and medically appropriate.
- You have the right to request privacy and confidentiality as reasonable and appropriate under the circumstances.
- You have the right to visitors, subject to clinically necessary, reasonable restrictions established by the hospital and you have the right to refuse visitors.
- You have the right to have a support person, who may be different from your surrogate decision maker, who can exercise your rights to receive or refuse visitors when you are unable to communicate.
- You have the right to communication that you understand, including qualified medical interpretation services and other reasonable accommodations, free of charge, if you have special communication needs due to vision, speech, hearing, language, or cognitive barriers or impairments.
- You have the right to telephone and mail services, as reasonable, available and appropriate within the hospital setting and patient population.
- You have the right to know the identity and professional status of the individuals providing service to you and to know which physician or other practitioner is primarily responsible for your care. You have the right to know information about any professional relationship among individuals who are treating you as well as any relationship of the hospital and staff to other healthcare and educational institutions, as it relates to your care.
- You have the right to request consultation with another physician or specialist, including a pain specialist.
- You and, when appropriate, your family have the right to be informed about the care you receive, including treatment, services and anticipated and unanticipated outcomes.
- You or your surrogate decision-maker have the right to accept or refuse medical or surgical treatment to the extent permitted by law, including foregoing or withdrawing life-sustaining treatment or withholding resuscitative services, in accordance with law and regulation.
- You have the right to execute, review and revise an advance directive, and, upon admission, receive information on the extent to which the organization is able, unable or unwilling to honor advance directives. (The existence or lack of an advance directive does not determine an individual's access to care, treatment and services.)
- You have the right to access, request amendment to, and receive an accounting of disclosures regarding your own health information as permitted under applicable law, including current information concerning your diagnosis, treatment and prognosis (*Health Information Portability & Accountability Act 1996*).
- You and your family have the right to consultation to assist in resolving any ethical issues, concerns or dilemmas regarding your care, treatment and services.
- You have the right to receive pastoral care and other spiritual care services while you are a patient in this hospital.
- You have the right to be considered as a candidate for organ/tissue/eyes donation.
- You have the right to have your wishes concerning organ donation honored, within the limits of the law or organizational capacity.
- You have the right to reasonable personal safety while you are a patient in this hospital, including access to protective services, as allowable by law and as reasonable under the circumstances.
- You have the right to be informed of hospital rules and regulations that apply to you as a patient, and to speak to a Patient Relations Representative to have complaints, suggestions for improvements or concerns heard.
- You have the right to be free from physical or mental abuse and corporal punishment.
- You have the right to be free from restraint or seclusion, of any form, imposed as a means of coercion, discipline, convenience, or retaliation by staff. Restraint or seclusion may only be imposed to ensure the immediate physical safety of the patient, staff member or others, and must be discontinued at the earliest possible time.
- You have the right to freely voice complaints and recommend changes without being subject to coercion, discrimination, reprisal, or unreasonable interruption of care, treatment, and services.
- You have the right not to be transferred to another facility or organization, except in an emergency, without your consent to the transfer, including a complete explanation and alternatives to a transfer. (The other facility and you must accept the transfer.)
- You have the right to informed consent for certain care, treatment and services provided to you, and the right to refuse participation in clinical trials or research programs and recording and filming for internal and/or external purposes.
- You have the right to rescind consent for care, treatment, and services provided, including your participation in clinical trials or research programs and recording or filming for internal and/or external purposes.
- You have the right to receive an itemized and detailed explanation of hospital charges for services rendered, and to be provided with financial counseling, free of charge as appropriate.
- Northside Hospital strives to provide satisfactory care, however if you have a concern that you feel was not satisfactorily addressed, you have the right to contact a Patient Relations Representative. You also have the right to file a concern with the Georgia Department of Community Health. You may reach them at 404-656-4507 or by mail at 2 Martin Luther King Jr. Drive SE, East Tower, Atlanta, GA 30334. Patient safety concerns can be reported to The Joint Commission:
  - At [www.jointcommission.org](http://www.jointcommission.org), using the "[Report a Patient Safety Event](#)" link in the "Action Center" on the home page of the website
  - By fax to 630-792-5636
  - By mail to Office of Quality and Patient Safety, The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, IL 60181



**NORTHSIDE  
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## YOUR RESPONSIBILITIES

*In order to create a partnership that will improve your care, we ask that you give careful consideration of your responsibilities to:*

- Provide, to the best of your knowledge, accurate and complete information about your health history, current condition and current medication and adverse reactions.
- Ask questions if you do not understand any aspect of the care, treatment, or services provided for you.
- Cooperate with your doctor, nurse, and other caregivers.
- Follow the recommended treatment plan.
- Request pain relief when pain first begins and immediately report when pain is not relieved.
- Report changes in your condition or anything you think might be a risk to you.
- Ask the doctor or nurse what to expect regarding pain and pain management.
- Take responsibility for the outcome if you decline or refuse the recommended treatment.
- Communicate your wishes regarding end of life decisions, including advance directives, with your family, physician, personal attorney and spiritual advisor.
- Discuss your wishes regarding organ/tissue/eye donation with your family, physician, personal attorney, and spiritual advisor.
- Show respect and consideration of others.
- Follow the hospital's policies and regulations.
- Fulfill the financial obligations of receiving care, including accepting financial responsibility for any consultations with physicians or specialists, including pain specialists.
- Request interpretation services when necessary.

## BE AN ACTIVE PARTNER IN YOUR HEALTHCARE

*We believe that you need to be an active and full partner in your care. Listed below are tips to help prevent medical errors.*

- Make sure that all of your doctors know about everything you are taking. This includes prescription and over-the counter medicines, and dietary supplements such as vitamins and herbs.
- Make sure your doctor and nurse know about any allergies and adverse reactions you have had to medicines.
- Be sure you can read all prescriptions your doctor prescribes.
- Ask if you have any questions about the directions on your medicine label.
- Ask your doctor or nurse to explain your home treatment.
- If you are having surgery make sure that you, your doctor, and your surgeon all agree and are clear on exactly what will be done.
- Speak up if you have any questions or concerns.
- Be sure that all health professionals involved in your care have important health information about you.
- Ask a family member or friend to be there with you and to be your advocate (someone who can help get things done and speak up for you if you can't).
- Know that "more" is not always better. It is a good idea to find out why a test or treatment is needed and how it can help you.
- If you have a test, don't assume no news is good news. Ask for the results of all tests.
- Learn about your condition or treatments by asking your doctor and nurse, and by using other reliable sources.

## TEN QUESTIONS TO ASK BEFORE TAKING A NEW MEDICATION

1. What is the name of the medicine and what is it for?
2. Is the generic version of the medicine available?
3. How and when do I take it and for how long?
4. Will this work safely with my other medications?
5. What food, drinks, activities, and dietary supplements should I avoid while taking it?
6. When should I expect this medicine to begin to work, and how will I know if it is working? Are there any tests required with this medication?
7. Are there any side effects, what are they and what do I do if they occur?
8. Can I get a refill? If so, when?
9. How should I store the medicine?
10. Is there any written information available about this medication?

## IMPORTANT PHONE NUMBERS

### Atlanta

Northside Hospital-Atlanta	404-851-8000
Patient Relations	404-851-8904
Pastoral Care	404-851-8754
Home Care Pharmacy	404-851-8897
Security	404-851-8797
Health Resource Library	404-851-6431

### Forsyth

Northside Hospital-Forsyth	770-844-3200
Patient Relations	770-844-3686
Pastoral Care	770-844-3341
Home Care Pharmacy	770-844-3396
Security	770-844-3444
Health Resource Library	404-851-6431

### Cherokee

Northside Hospital-Cherokee	770-224-1000
Patient Relations	770-224-2080
Pastoral Care	770-224-1100
Home Care Pharmacy	770-224-1250
Security	770-224-4444
Health Resource Library	404-851-6431

### Gwinnett

Northside Hospital-Gwinnett	678-312-1000
Patient Relations	678-312-4399
Pastoral Care	678-312-4332
Security	678-312-4590
Health Resource Library	678-312-4337

### Duluth

Northside Hospital-Duluth	678-312-6800
Patient Relations	678-312-6756
Pastoral Care	678-312-6990
Security	678-312-8099
Health Resource Library	678-312-4337

### Glancy

Northside Glancy Rehabilitation Center	678-312-6000
Patient Relations	678-312-6756
Pastoral Care	678-312-6990
Security	678-312-8099
Health Resource Library	678-312-4337



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