

# Patient Rights and Responsibilities

Edward-Elmhurst Health respects the following rights and responsibilities of its patients and is committed to providing these rights to every patient.

## You Have the Right to:

- Receive care, treatment, and services in a safe setting.
- Access to care, treatment, and services that are available and medically indicated, regardless of age, race, creed, sex, sexual preference, gender identity and/or preference, religious preference, national origin, disability, veteran status, sources of payment for care or any other basis prohibited by federal, state, or local law.
- Respect for your personal values and beliefs, and to exercise your cultural and spiritual beliefs in a manner that does not interfere with the care, treatment, and services of you and other patients.
- Treatment that is medically necessary or effective, ethically appropriate, and consistent with the standards of good medical care. Care consistent with sound nursing and medical practices within EEHealth capacity, its stated mission, and applicable laws and regulations. All patients have the right to care which optimizes their comfort and dignity.
- Knowledge of the identity and professional status of healthcare professionals providing service to you, including which physician is primarily responsible for your care.
- Have a family member or other individual and your physician notified promptly if you are admitted to the Hospital.
- Communication with the physician responsible for your care and to receive information concerning diagnosis, nature and extent of your medical problem.
- Informed consent regarding:
  - Nature and purpose of a procedure that is to be performed
  - Who will perform the procedure
  - Medically significant risks and benefits of the procedure
  - Reasonable alternatives and their risks and benefits
  - Use of recordings, films, or other images for purposes other than for care, treatment, and services
- Participate in or make decisions about your plan of care prior to and during the course of your care, treatment, and services.
- Designate an individual to serve as your representative in making decisions concerning your care.
- Designate visitor(s)/support person(s), unless the person(s) presence infringes on others' rights, safety or is medically contraindicated (including a spouse, a domestic or same-sex domestic partner, parent, another family member or a friend). You also have the right to stop or change your choice at any time. This may be someone other than your surrogate decision-maker or legally authorized representative.
- Accept or refuse treatment and to be informed of the medical consequences of any refusal.
- Decide whether to participate in research, investigation, or clinical trial projects after receiving a full explanation.
- Be free from neglect, exploitation, and verbal, mental, physical, and sexual abuse or harassment.
- Receive information about your care, treatment, and services in a language or manner that you or your representative can understand.
- Prompt investigation and resolution of any complaint/grievance. To initiate an investigation of a complaint or grievance, you or your representative may contact: Your nurse, charge nurse, department manager or by calling: Edward Hospital Patient Experience Line: (630) 527-7225; Elmhurst Hospital Patient Experience Line (331) 221-1115; Linden Oaks Behavioral Health Patient Experience Line: (630) 305-5115; Corporate Compliance Hotline (800) 901-7422. You may also contact by phone or in writing: Illinois Department of Public Health Central Complaint Registry Division of Healthcare Facilities and Programs 525 West Jefferson Street Springfield, IL 62761-0001 24-hour toll free: (800) 252-4343 TTY: (800) 526-4372 Email: Dph.Ccr@illinois.gov; Joint Commission Office of Quality and Patient Safety, www.jointcommission.org, using the "Report a Patient Safety Event" link in the Action Center (on home page of the website) or by fax to (630) 792-5636 or by mail to Office of Quality and Patient Safety, The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, IL 60181. Medicare patients who believe that they are being prematurely discharged have the right to contact: Illinois Foundation for Quality Healthcare 2625 Butterfield Road, #102E Oak Brook, IL 60523 Toll free: (800) 647-8089 Fax: (630) 571-5611.

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- Be informed of any continuing healthcare recommendations following discharge.
- Request and receive an itemized copy and/or explanation of your charges.
- Receive information and participate in decisions related to effective management of pain.
- Formulate advance directives (Do Not Resuscitate, Living Will, Durable Medical Power of Attorney, or Mental Health Care Advance Directive) for the purpose of guiding decisions concerning your healthcare. The hospital will provide you this information upon request. The provision of care will not be conditioned on whether or not you have an advance directive.
- Privacy concerning your medical care and to expect that communications and records pertaining to your care, treatment, and services will be treated as confidential.
- Be free from restraint or seclusion of any form used as a means of coercion, discipline, convenience, or retaliation.
- Consultation concerning ethical issues that affect your care, treatment, and services.
- An environment that preserves personal privacy, dignity and comfort, and contributes to a positive self-image.
- Be informed about the unanticipated outcomes of care, treatment, and services.
- Review your record within a reasonable time frame and have the information explained or interpreted as necessary, except when restricted by law and regulation.
- Access protective and advocacy services (guardianship or advocacy services, conservatorship or child/adult protective services).

### You Have the Responsibility to:

- Provide, to the best of your knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, other matters relating to your health, and unexpected changes in your condition and report them to the responsible practitioner.
- Participate in your plan of care and ask questions about your treatment plan and/or what is expected of you to accomplish that plan. This may include instructions of nurses and other hospital personnel as they carry out the coordinated plan of care, treatment, and services, and implement the practitioner's orders.
- Follow the treatment plan recommended by those primarily responsible for your care.
- Accept personal responsibility if you refuse treatment or do not follow your treatment plan.
- Follow all hospital rules and regulations.
- Assume financial obligations for services received.
- Respect the rights and privacy of patients, staff, and others you may contact. EEHealth has zero tolerance for threats or verbal abuse towards staff or other patients.
- Patients and visitors may not use recording devices, including the recording feature of a mobile phone, in any Edward Elmhurst facility or in a patient care area without EEHealth consent.
- Notify your physician and/or a member of the healthcare team if you have executed a Living Will or Durable Medical Power of Attorney, and assure that a copy any such document is provided.