# Patient Rights and Responsibilities

**Southwest Health believes that as a patient:**

- You have the right to be informed of your patient rights prior to the institution or discontinuance of care including beneficiary notice of non-coverage, and the right to appeal premature discharge. The Medicare Outpatient Observation Notice (MOON) is a standardized notice to inform beneficiaries (including Medicare health plan enrollees) that they are an outpatient receiving observation services and are not an inpatient of the hospital. The Notice Act (MOON) requires all hospitals to provide written and oral notification under specified guidelines.
- You have the right to receive treatment without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, gender identity, source or payment, or age. Southwest Mississippi Regional Medical Center (Southwest Health) will recognize all state-sanctioned marriages and spouses for purposes of compliance with the Conditions of Participation, regardless of any laws to the contrary of the state or locality where the organization is located.
- You have the right to have a family member or representative of your choice and your own healthcare provider be notified about your visit to the hospital.
- You have the right to receive information and explanation concerning the need for and alternatives for care prior to transfer to another facility if necessary and medically permissible.
- You have the right to receive considerate and respectful care in a safe and clean environment, free from all forms of physical or mental abuse, harassment, corporal punishment, or unnecessary restraints.
- You have the right to receive emergency care if you need it.
- You have the right to be informed of the name and position of the doctor who will oversee your care in the hospital.
- You have the right to know the names, positions and functions of any hospital staff involved in your care and refuse their treatment, examination, or observation.
- You have the right to receive complete information about your diagnosis, treatment, and prognosis.
- You have the right to receive all the information that you need to give informed consent for any proposed procedure or treatment. This information shall include the possible risks and benefits of the procedure or treatment.
- You have the right to receive all the information you need to give informed consent for an order not to resuscitate or an advanced directive. You have the right to create an advanced directive and to have hospital staff and practitioners comply with these directives. You also have the right to designate an individual to give this consent on your behalf if you are too ill to do so. If you would like additional information on advanced directives, please ask your care provider.
- You have the right to make informed decisions regarding your health care, including being informed of your health status, being involved in care planning and treatment and being able to request or refuse treatment, and to be told what effect this may have on your health.
- You have the right to complain without fear of reprisals about the care and services you are receiving and to have the hospital respond to you. If assistance is needed, contact our Grievance Coordinator at 601-249-1802. If we are unable to resolve your complaint/grievance to your satisfaction, please contact the Mississippi State Department of Health at 1-800-227-7308 or DNV Healthcare, Inc. at 1-866-496-9647 or by fax at 1-281-870-4818, by email at healthcarecomplaint@dnv.com or by regular mail at DNV Healthcare USA Inc., Attn: Hospital Complaints, 4435 Aicholtz Road, Suite 900, Cincinnati, OH 45245.
- You have the right to refuse to take part in research. When deciding whether to participate you have the right to a full explanation.
- You have the right to privacy while in the hospital and confidentiality of all information and records regarding your care.
- You have the right to participate in all decisions about your treatment and discharge from the hospital, including the development and implementation of your plan of care. The hospital must provide you with a written discharge plan and written description of how you can appeal your discharge.
- You have the right to request and receive an itemized explanation of your total charges for the services rendered in the facility regardless of source of payment.
- You have the right to review your medical record without charge within a reasonable time frame of your request. You may obtain a copy of your medical record for which the hospital can charge a reasonable fee. You cannot be denied a copy solely because you cannot afford to pay.
- You have the right to consent to receive visitors, either orally or in writing, and to receive the visitors so designated, including, but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member,

or a friend. You have the right to not restrict, limit, or otherwise deny visitation, privileges based on race, color, religion, sex, sexual orientation, gender identity, or disability; and to ensure that all visitors enjoy full and equal visitation privileges consistent with patient preferences.

- You have the right to make known your wishes regarding anatomical gifts. You may document your wishes in your health care advance directives.
- You have the right to effective pain management.
- You have the right to receive and request medical information in your preferred language. This includes interpreter services, translation of information, and vision or hearing accommodations.

**Admission Process:** You will be asked to provide all pertinent information for billing purposes and to ensure safe care. We will need your hospitalization insurance identification cards, your correct name, address, birth date, and other important information. If you have an Advanced Directive, you will be asked to provide that to be placed in your record so we will know what your treatment wishes are. If you do not have an advanced directive but would like information on executing one, the staff will provide you with that information. You will be asked to sign forms and be given your identification band.

**Smoking:** Southwest Health is a tobacco free campus. If you are a tobacco user, you may be provided with nicotine replacement during your stay.

**Visitation:** To promote the efficient treatment, rest, and well-being of our patients, the visitation guideline is written in the Hospital Visitation Guidelines. The hospital will explain the reason for any restrictions or limitations if imposed.

**Pastoral Services:** The Department of Pastoral Services offers spiritual and emotional support for our patients and their families. Our chaplains provide pastoral care recognizing and respecting varied personal beliefs. A chaplain is on call 24 hours a day. You may contact a chaplain by dialing zero (0) for the operator. Your nurse will also be glad to forward your request.

**Patient Responsibilities:** Doctors and the staff of Southwest Health care for the sick and injured. They recognize that to be effective, the effort must be a partnership with the patient and the health care team working together towards a common goal. As a patient you will be expected, within the limits of your abilities, to assume a share of the responsibility for your healthcare.

- You have the responsibility to the best of your ability, to provide information about past illnesses, advanced directives, including individual instructions, past hospitalizations, medications, designations of a surrogate and/or primary physicians, and other matters relating to your health.
- You have the responsibility to participate in decisions regarding care, openly expressing any concerns or questions.
- You have the responsibility to keep appointments or to telephone when you cannot keep a scheduled appointment.
- You have the responsibility for your own actions if you refuse treatment or do not follow the physician’s instructions.
- You have the responsibility to be prompt in payment of your hospital bills, to provide the information necessary for insurance processing and to be prompt about asking questions you have concerning your bill.
- You have the responsibility to abide by Southwest Health rules and regulations and to see that your visitors do likewise.
- You have the responsibility to be considerate of other patients and to see that your visitors are considerate as well, particularly regarding noise.
- You have the responsibility to be respectful of others, and other people's property, and that of the facility.
- You have the responsibility to discuss pain relief options with your physician or caregiver and help them measure your pain.
- You have the responsibility to help your doctors, nurses, and all other health care team members in their efforts to improve your health by following their instructions.
- You have the responsibility to advise the staff and your physician of any dissatisfaction you may have regarding your rights as a patient or your care.
- You will be responsible for valuables kept in your room. We suggest you send money or jewelry home with your family or deposit them in the hospital safe until you leave. Southwest Health cannot assume responsibility for lost property.