



## *Your Rights:*

Federal and state law provide for specific patient rights. At Sturdy Memorial Hospital, we recognize our responsibility to respect these rights as well as to inform you of them. The following summarizes both federal law and the Massachusetts Patients' Bill of Rights.

You have, among other rights, the right to:

- Be treated in a caring and polite way, with respect and to have questions or requests for information answered courteously
- Be informed of your health status and participate in the development and implementation of the plan of care
- Request the name and specialty of the doctor responsible for coordinating your care and the role of all others involved in that care
- Make informed decisions regarding your care, not to be construed as a mechanism to demand treatment or services deemed medically unnecessary or inappropriate.
- Refuse diagnostic and treatment procedures; nevertheless, to still receive the best care that your health care team can offer under the circumstances
- To have your cultural, psychosocial, spiritual, and personal values, beliefs, and preferences respected.
- The right to full and equal visitation, and the right to deny or withdraw consent from such visitation.
- To request pastoral and other spiritual services.
- An interpreter to meet your communication needs. This right provides for those who do not speak English, for those who are deaf, and those who are blind.
- To receive care in a safe environment and to be free from all forms of abuse or harassment
- To expect evaluation and treatment of pain.
- To be examined in private by your doctor or other health care giver and you have the right to talk to your doctor in private.
- To refuse to serve as a research subject and to refuse any care or examination when the primary purpose is educational or informational rather than therapeutic
- To have an advance directive, such as a health care proxy, which tells the hospital and doctor how you want to be treated and whom you want to make decisions for you if you cannot speak for yourself at the time. The person you choose in your proxy is your Health Care Agent.
- Have a family member or personal representative and your own physician notified of your admission to the hospital
- To confidentiality of all records and communications concerning your medical history and treatment to the extent provided by law.
- To a prompt response to all reasonable requests.



- To request and receive an explanation as to the relationship, if any, of this hospital and your doctor to any other health care facility or educational institution, insofar as any such relationship relates to your care.
- To request and receive information about financial assistance and free health care.
- To obtain a copy of any rules or regulations of this hospital, this may apply to your conduct as a patient.
- To receive written notice of how your health information will be used and shared in order for you to receive the highest quality of care. This is called our Privacy Notice and it contains patient rights and our legal duties regarding your health information.
- Beneficiary notices: Of non-coverage and right to appeal pre-mature discharge and Medicare Outpatient Observation Notice (MOON).
- Upon request to inspect your medical records, request an amendment to, or receive an accounting of disclosures regarding personal health information, and for a reasonable fee, receive a copy of your record.
- To access your medical record, including current medical records, upon oral or written request, in an acceptable available format within a reasonable time frame.
- To refuse to be observed, examined or treated by students or any other staff without jeopardizing your access to care.
- To prompt life-saving treatment without discrimination due to economic status or source of payment.
- If you are a female rape victim of childbearing age, to receive medically and factually written information prepared by the commissioner of public health about emergency contraception; to be promptly offered emergency contraception; and to be provided with emergency contraception upon request.
- To informed consent to the extent provided by law.
- You have a right, if suffering from any form of breast cancer, to complete information on all alternative treatments that are medically viable.
- You have a right, if you are a maternity patient, to receive information about the hospital's rate of cesarean sections and related statistics.
- To request and receive an itemized explanation of your medical bill.
- You, your family, your significant other or your guardian have the right to tell us when something is wrong, and to seek assistance when you or your family member's condition seems to be changing or deteriorating. You can do this by informing your nurse, or any healthcare personnel, or by calling the extension located on the bottom of the patient's white board.
- To file a quality of care complaint/grievance with the hospital or if you have concerns regarding your care and treatment. If you present a complaint/grievance, your care will not be affected in any way. If you have a problem that you cannot solve with your doctor, nurse, nurse manager or other caregiver, please contact the Medical Staff Office at 508-236-7910.



- In addition, if you choose not to use the internal complaint/grievance process you have the right to file a quality of care complaint/grievance with the following:
  - Massachusetts Department of Public Health, Division of Health Care Quality, (617-753-8000) 99 Chauncy Street, 2<sup>nd</sup> Floor, Boston, MA 02111,
  - Massachusetts Board of Registration in Medicine, 200 Harvard Mill Square, Suite 330, Wakefield, MA 01880,
  - DNV Healthcare, 400 Techne Center Dr., Suite 100, Milford, OH 45150, Attn: Complaints, telephone (866) 496-9647, online [www.dnvglhealthcare.com](http://www.dnvglhealthcare.com) (“File Hospital Complaint” link on right side) or email [hospitalcomplaint@dnvgl.com](mailto:hospitalcomplaint@dnvgl.com).
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