

PATIENT'S RIGHTS AND RESPONSIBILITIES

The patient has the right to:

1. Be informed of their patient rights during the admission process.
2. Receive courteous, considerate, respectful and safe care by competent personnel. Patients shall be free from all forms of abuse, neglect, harassment, and exploitation.
3. Obtain from his/her physician complete and current information concerning their diagnosis, treatment and prognosis in terms the patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person on their behalf. He/she has the right to know, by name, the physician and all others who provide care, or are responsible for coordinating care. He/she has the right to know if a decision has been made to transfer or discharge.
4. Receive from his/her physician information necessary to give informed consent prior to the start of the procedure and/or treatment. Except in emergencies, such information should include but not necessarily be limited to, their diagnosis, the specific procedures and/or treatments, the medically significant risks, prognosis and the probable duration of incapacitation. The patient has the right to information regarding alternatives to care and treatments.
5. Participate in decisions involving his/her care, except when contraindicated for health reasons, to refuse treatment to the extent permitted by law and to be informed of the medical consequences of his/her actions.
6. Every consideration of privacy concerning his/her own medical care program, case discussion, consultation, examination and treatment are confidential and will be conducted discreetly. Those not directly involved in his/her care must have the permission of the patient to be present.
7. Expect that communications and records pertaining to his/her care and financial information will be treated as confidential.
8. Have their physician, a family member or representative of his/ her choice notified promptly of his/her admission.
9. Expect the facility must make a reasonable response to their request for services. The facility must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically permissible, a patient may be transferred to another health care facility after he/she has received complete information and explanations concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for transfer.
10. Obtain information regarding the relationship of the facility to other health care and educational institutions, which are providing care. The patient has the right to obtain information regarding the existence of any professional relationships among individuals, by name, which is providing care.
11. Be advised when the facility proposes to engage in or perform human experimentation affecting his/her care or treatment. The patient has the right to refuse to participate in such research projects.

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12. Expect reasonable continuity of care and to know in advance their appointment times and which physicians are available. The patient has the right to expect the facility will provide a mechanism to inform his/her physician or a delegate of the physician, of the patient's continuing health care requirements following discharge.
13. Receive continuity of care and information on options for care when the facility is no longer appropriate.
14. Know what facility rules and regulations apply to his/her conduct as a patient; e.g., the patient is responsible for providing information about past illnesses, hospitalizations, medications, and any other matters relating to their health. The patient must answer all questions concerning these matters to the best of their ability. The patient is responsible for asking questions to seek information or clarification of things not understood and for advising the physician if the decision is made to stop the treatment plan.
15. Receive service(s) without regard to age, race, color, sexual orientation, religion, marital status, sex, national origin, psychological or physical handicap, source of payment or sponsor.
16. Receive service(s), if deemed incompetent, under the state health and safety laws. The rights of the patient are exercised by the person appointed under the state law, to act on the patients' behalf. If a state court has not adjudged a patient incompetent, any legal representative designated by the patient in accordance with state law may exercise the patients' right to the extent allowed by state law.
17. Expect that the staff, which is all committed to pain prevention and management, will believe your report of pain and will respond quickly to provide information about pain and relief measures.
18. Be informed of the support services available at the facility, including the availability of an interpreter.
19. Be informed of the provisions for off-hour emergency coverage.
20. Be informed of his or her visitation rights, (or support person, where appropriate) including any clinical restriction or limitation on such rights, when he or she is informed of his or her rights under this section.
21. Be informed of his or her (or support person, where appropriate) right, subject to his or her consent, to receive the visitors whom he or she designates, including, but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend, and his or her right to withdraw or deny such consent at any time.
22. Not restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender, identity, sexual orientation, or disability.
23. Receive visitors and that those visitors enjoy full and equal visitation privileges consistent with patient preferences.
24. Formulate advance directives – a Living Will or a Power of Attorney for Health Care – that states one's treatment choices if one cannot speak for themselves. In preparation for your operative procedure and the immediate postoperative period, your advance directive (such as "Do Not Resuscitate") may need to be modified. If you currently have such an advance directive, it should be discussed with your surgeon and anesthesiologist prior to the operative procedure. If you would like additional information on Advance Directives please request a booklet at the front desk.
25. Be free from chemical and physical restraints of any form or seclusion that is not medically necessary. Seclusion or a restraint can only be used, when ordered by the physician, if needed to improve the patient's well-being or in emergency situations if needed to ensure the patient's physical safety or the safety of others and less restrictive interventions have been determined to be ineffective.

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26. Be informed of the charges for service eligibility for third-party reimbursements and, when applicable, the availability of free or reduced-cost care.
27. Receive an itemized copy of his/her account statement upon request. Billing Inquiry Line 402-484-9025.
28. Discuss facility payment plans and to examine and receive an explanation of his/her bill. The patient is responsible for providing payment information and making arrangements to pay, regardless of the source of payment or sponsor.
29. Voice grievances and recommend changes in policies and services to the facility's staff and the governing state agency without fear of reprisal. The patient has the right to prompt resolution of a grievance and shall receive an initial response within 7 days. You may contact the Director of Quality Improvement and/or Risk Manager at 402-484-9091 to voice a grievance.
30. Express complaints about the care and services provided and to have the facility investigate such complaints. The facility is responsible for providing the patient, or his/her designee, with a written response within 30 days, if requested by the patient, indicating the findings of the investigation. The facility is also responsible for notifying the patient, or his/her designee, that if the patient is not satisfied by the facility response, the patient may complain to the Department of Health and Human Services, Regulation and Licensure Credentialing Division at 402-471-0316 or contact the Beneficiary Ombudsman. Email: ombuds@oc.fda.gov.
31. Review his/her record, in a reasonable time frame, and to approve or refuse the release or disclosure of the contents of his/her medical record to any health care practitioner and/or health care facility except as required by law or third-party payment contract.
32. Expect that marketing and/or advertising conducted by the facility is not misleading.

The Patient has the responsibility for:

1. Being considerate of other patients and to see that family members are also considerate, especially in regards to smoking, noise, and visitation policies.
2. Being respectful of others, their property, the property of the facility and its personnel.
3. Promptly arranging for the payment of bills and provide necessary information for insurance processing.
4. Keeping all appointments promptly at their scheduled time or contacting staff as early as possible if a scheduled appointment cannot be kept.
5. Following instructions and the health care plan recommended by the health care provider and for asking questions if information is not understood.
6. Informing staff of physical changes experienced during treatment.
7. Maintaining follow-up treatment recommended by staff at the time of discharge.
8. Asking for pain relief when the pain first begins and for providing help in assessing and notification if the pain is not relieved as expected.
9. Following surgery, I will have a responsible adult drive me home. I realize impairment of full mental alertness may persist for several hours following the administration of anesthesia and I will avoid making decisions, or taking part in activities that depend upon full concentration or judgment, during this period.

A COPY OF THIS DOCUMENT CAN BE OBTAINED AT THE RECEPTION DESK.