



PATIENT BILL OF RIGHTS

These rights can be exercised on the patient's behalf by a designated surrogate or proxy decision maker if the patient lacks decision-making capacity, is legally incompetent, or is a minor.

1. The patient has the right to considerate and respectful care.
2. The patient has the right to and is encouraged to obtain from physicians and other direct caregivers relevant, current, and understandable information concerning diagnosis, treatment, and prognosis. Except in emergencies when the patient lacks decision-making capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedures and/or treatments, the risks involved, the possible length of recuperation, and the medically reasonable alternatives and their accompanying risks and benefits. Patients have the right to know the identity of physicians, nurses, and others involved in their care, as well as when those involved are students, residents, or other trainees. The patient also has the right to know the immediate and long-term financial implications of treatment choices, insofar as they are known.
3. The patient has the right to make decisions about the plan of care prior to and during the course of treatment and to refuse a recommended treatment or plan of care to the extent permitted by law and health center policy, and to be informed of the medical consequences of this action. In case of such refusal, the patient is entitled to other appropriate care and services that the health center provides or transfer to another provider. No patient shall be coerced into making a treatment decision. The health center should notify patients of any policy that might affect patient choice.
4. The patient is entitled to all services provided at the health center once registered as a patient. Eligibility to receive a service is not dependent upon receipt of another service. For example, acceptance of family planning services is not required to receive any other service, assistance, or participation in any other program of the health center.
5. The patient has the right to have an advance directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that the health center will honor the intent of that directive to the extent permitted by law and health center policy. Patients must be advised of their rights under state law and health center policy to make informed medical choices, ask if the patient has an advance directive, and include that information in patient records. The patient has the right to timely information about health center policy that may limit its ability to implement fully a legally valid advance directive.
6. The patient has the right to every consideration of privacy. Case discussion, consultation, examination, and treatment should be conducted so as to protect each patient's privacy.
7. The patient has the right to expect that all communications and records pertaining to his/her care will be treated as confidential by the health center, except in cases such as suspected abuse and public health hazards when reporting is permitted or required by law. The patient has the right to expect that the health center will emphasize the confidentiality of this information when it releases it to any other parties entitled to review information in these records.
8. The patient has the right to review the records pertaining to his/her medical care and to have the information explained or interpreted as necessary, except when restricted by law.
9. The patient has the right to expect that, within its capacity and policies, the health center will make reasonable response to the request of a patient for appropriate and medically indicated care and services. The health center must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically appropriate and legally permissible or when a patient has so requested, a patient may be transferred to another facility. The institution to which the patient is to be transferred must first have accepted the patient for transfer.



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The patient must also have the benefit of complete information and explanation concerning the need for, risks, benefits, and alternatives to such a transfer.

10. The patient has the right to ask and be informed of the existence of business relationships among other health centers, educational institutions, other health care providers, or payers that may influence the patient's treatment and care.
11. The patient has the right to consent to or decline to participate in proposed research studies or human experimentation affecting care and treatment or requiring direct patient involvement, and to have those studies fully explained prior to consent. A patient who declines to participate in research or experimentation is entitled to the most effective care that the health center can otherwise provide.
12. The patient has the right to expect reasonable continuity of care when appropriate and to be informed by Physicians and other caregivers of available and realistic patient care options when the health center's care is no longer appropriate.
13. The patient has the right to be informed of the health center's policies and practices that relate to patient care, treatment, and responsibilities. The patient has the right to be informed of available resources for resolving disputes, grievances, and conflicts available in the health center. The patient has the right to be informed of the health center's charges for services and available payment methods.