

McLaren Print System Order

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PATIENT RIGHTS AND RESPONSIBILITIES

McLaren Lapeer Region wants you to be a partner in your hospital care. We believe the more you know and the more you participate and talk with your doctors and healthcare team, the more effective and satisfactory your hospital experience will be. The following statements of rights and responsibilities will help you understand what you can expect from us and, in turn, what your responsibilities are as a patient. If at any time you or your advocate need help understanding or asserting your rights and responsibilities, please talk with your doctor or nurse.

ASSURING ACCESS TO CARE
 You have the right to receive consistent, respectful and medically necessary care and to not be discriminated against for any reason. You have the right to request privacy with anyone who enters if you do not speak English or you hearing, vision or speech impaired an interpreter, sign or reader will assist you.

RESPECTING COMPLAINTS
 Each patient has the right to be informed of hospital policies and practices that relate to patient care, treatment and responsibilities. Each patient has the right to be informed of available resources for resolving complaints, conflicts and other issues. Patients unable to provide feedback have the right to have someone to provide someone, if appropriate.

UNDERSTANDING YOUR CARE
 You have the right to know the names of all providers who care for you. You have the right to information about your diagnosis, treatment and possible medical outcomes. We encourage you to talk with your physician and healthcare team about procedures and treatments and their risks and benefits. Except in emergencies or in the following situations, you must sign or consent form for all major procedures, and you have the right to change your mind and withdraw that permission at any time before the procedure.

REFUSING TREATMENT
 You have the right to refuse any treatment or medications, as permitted by law. The staff will help you understand the possible medical consequences of your refusal but do not responsible for any resulting harm. You have the right to be free from restraint unless a physician determines an urgent need exists in that of others. Physical restraints are used only by trained healthcare professionals who will document the reason in your medical record and promptly call your physician. Medication will be used for the reason and only under a physician's order.

PROTECTING YOUR PRIVACY AND CONFIDENTIALITY
 You have the right to privacy and your healthcare team will discuss tests and treatments in such a way so to protect this right. Your medical records are for your use only and your permission for their release is in cases of suspected abuse or public health threats after reporting is permitted or required by law. All other uses of your health information are documented in the Notice of Privacy Practices.

PLANNING YOUR CARE
 You have the right to request your doctor to coordinate your care with the help of the hospital staff and other specialists as needed. You also have the right to be involved in planning your care, your discharge or any transfer or referral to another care provider as recommended by your healthcare team. You have the right to request quick response to requests of pain.

DECIDING YOUR FUTURE
 You have the right to have an Advanced Directive, signed by the State of Michigan, which is a Written Plan of Advance Health Care Decision Making. This document expresses your wishes and allows about your future care and names an alternate decision maker who will make healthcare decisions for you if you are unable to make your own decisions.

UNDERSTANDING BILLING AND PAYMENT
 You have the right to a full explanation of your hospital bill and written information about financial aid for healthcare. We are responsible for providing reasonable and timely information about methods of payment for hospital services or for working with the hospital to arrange payment.

Michigan Department of Licensing and Regulatory Affairs (LARA)
 Bureau of Community and Health Systems
 PO Box 30084
 Lansing, MI 48909
 • Call 800-893-8900 (toll free)
 • The Joint Commission
 • Mail to: Office of Quality Monitoring, One Renaissance Boulevard, Oakbrook Terrace, IL 60181
 • Fax to 800-793-8438 or
 • www.jointcommission.org, using the "Report a Patient Safety Event" link in the "Action Center"

McLaren LAPEER REGION

Spec Info: