

McLaren Print System Order

Order No: 74681
 Order Date: 2023-01-17
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Ship Location: McLaren Macomb Hospital- 1st Floor Imaging Services
 1000 Harrinton Blvd
 Mount Clemens, MI 48043

Brochures
 Quantity: 3
 Paragon Dept No: 91160
 Dept Name: Imaging Services
 Company Number: 260

Order Total Price: 24.00

Item Number: MHCC-540-MAC (MO-419)
 Item Description: Patient Rights and Responsibilities - Macomb
 Revision Date: 3/2020
 Print:
 Paper:
 Size:
 Fold:
 Finish:
 Drill:
 Poster: 11x17 laminated
 Misc Info:

PATIENT RIGHTS AND RESPONSIBILITIES

McLaren Macomb 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 to know 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 speak privately with your care provider. 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 ethical 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 and roles 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 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.

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 you must give permission for their release in or copies of information about your health records after signing a permission or request form. All other uses of your health information are described in the Notice of Privacy Practices.

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 we are not responsible for any resulting harm. You have the right to have your refusal written in your medical records and to be informed of the consequences of your refusal. Refusal will be noted for the medical records only under a physician's order.

PLANNING YOUR CARE
 You have the right to request you desire to coordinate your care with the help of the hospital staff and other agencies as needed. You also have the right to be notified in advance 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 care.

ENDING YOUR FUTURE
 You have the right to have an Advance Directive signed by the State of Michigan, which is a written Power of Attorney for Health Care Decision Making. This document appoints your wishes and directs about your future care and enables an advance healthcare proxy 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 information about financial aid for healthcare. You are responsible for providing accurate and timely information about methods of payment for hospital services or for working with the hospital to arrange payment.

Patient Safety Concerns Can Be Reported the Following Ways:
 McLaren Macomb Patient Experience Line: 586-653-0200
 Michigan Patient Safety Reporting Center
 Mail to:
 Bureau of Community and Health Systems
 PO Box 30864, Lansing, MI 48906
 Call: 800-653-6008 (toll free)
 email: BCHS-Complaints@michigan.gov
 The Joint Commission
 Mail to:
 Office of Quality Monitoring
 One Renaissance Boulevard
 Oakbrook Terrace, IL 60181
 Fax to: 630-792-5038 or
 email: customerexperience@jointcommission.org
 www.jointcommission.org, using the "Report a Patient Safety Event" link in the "Action Center"

Spec Info: For Harrington Center