



1044 N. Francisco Ave.
Chicago, IL 60622
773-292-8200

Your Rights and Responsibilities as a Hospital Patient

Norwegian American Hospital supports and protects the basic human civil, constitutional and statutory rights of each of our patients.

The exercise of patient rights provides for:

- **Impartial access to treatment, regardless of race, religion, sex, sexual orientation, ethnicity, age or handicap;**
- **The receipt of care or treatment in the hospital without coercion, discrimination or retaliation;**
- **A surrogate (parent, legal guardian, person with medical power of attorney) to exercise your rights when you are unable to do so, without coercion, discrimination or retaliation.**
- **Written information about your rights in advance of receiving treatment or discontinuing your care.**

In addition to these rights, you also have the right to:

- considerate and respectful care.
- be well informed about your illness, possible treatment and likely outcome and to discuss this information with your doctor. You have the right to know the names and roles of people treating you.
- consent or refuse a treatment, as permitted by law, throughout your hospital stay. If you refuse a recommended treatment, you will receive other needed and available care.
- have an Advance Directive, such as Living Will or Durable Power of Attorney. These documents express your choices about your future or name someone to decide if you cannot speak for yourself. If you have a written Advance Directive, please provide a copy to the hospital, your family and your doctor.
- expect that treatment records are confidential unless you give permission to release information or reporting is required or permitted by law. When the hospital releases records to others, such as the insurers, it emphasizes that the records are confidential.
- review your medical records and have the information explained, except when restricted by the law.
- expect the hospital will give you necessary health services to the best of its ability. Treatment, referral or transfer may be recommended. If transfer is recommended or requested, you will be informed of the risks, benefits and alternatives. You will not be transferred until the other institution agrees to accept you.
- privacy. The hospital, your doctor and others caring for you will protect your privacy as much as possible.
- know if this hospital has relationships with outside parties that may influence your treatment and care. These relationships may be with educational institutions, other healthcare providers or insurers.
- consent or decline to take part in research affecting your care. If you choose not to take part, you will receive the most effective care the hospital otherwise provides.
- be told of realistic care alternatives when hospital care is no longer appropriate, access to the ethics committee.
- receive treatment without discrimination to reason of race, religion, sex, sexual orientation, ethnicity, age, handicap or source of payment. This includes the right to meaningful communication. If necessary, the hospital will make every effort to provide interpreters when you have difficulties communicating with the staff.
- to file a complaint (grievance). You have the right to receive a prompt resolution. The nurse will assist you or call the hospital operator. Presentation of a grievance will not compromise your future access to care.
- discuss pain relief management and education with your doctor and nurse. You are encouraged to be involved in your medical care. Expect appropriate information about pain prevention and management.
- informed consent of donation of organs and tissues.

You Have the Responsibility to:

- provide information about your health, including past illness, hospital stays and use of medicine.
- ask questions when you do not understand information or instructions. If you believe you cannot follow through with your treatment, you are responsible for telling your doctor.
- be considerate of the needs of the other patients by allowing roommates their privacy, limiting visitors, observing hospital rules, and controlling interruptions of noise and light.
- provide information regarding insurance and for working with the hospital to arrange payment when needed.

Norwegian American Hospital Complaint Procedure

If you have a complaint about your care or treatment at Norwegian American Hospital, we are available anytime to discuss your concerns. The Nurse Supervisor on duty, the Risk Management Coordinator, the Director of Pastoral Care, or the Vice President of Patient Care is available to help our patients and may be reached by telephone by dialing "0" on any in-house telephone or in writing at: Norwegian American Hospital, 1044 N. Francisco Avenue, Chicago, IL 60622. (The nursing supervisor is available evenings, nights and weekends.) If you are unable to resolve your complaint in this manner, contact the Illinois Department of Public Health's 24-hour, tollfree Central Complaint Registry at 800-252-4343, or TTY (hearing impaired use only) 800-547-0466 or contact the Joint Commission on Accreditation of Healthcare Organizations at: 1-800-994-6610 or complaint@jcaho.org.

Or you may write to one of the following addresses:

Illinois Department of Public Health
Division of Health Care Facilities and Programs
525 W. Jefferson St.
Springfield, IL 62761-0001 Fax: 217-782-0382

Office of Quality Monitoring
Joint Commission on Accreditation of Healthcare Organizations
One Renaissance Boulevard
Oakbrook Terrace, IL 60181 Fax: 630-792-5636

The posting of this information is required by the Hospital Licensing Act, 210 ILCS 85/6.14c.(2) and JCAHO Accreditation Participation Requirements.