

ROME MEMORIAL HOSPITAL

1500 North James Street, Rome, New York 13440

PATIENTS' BILL OF RIGHTS

As a patient in this hospital, you have the right, consistent with law, to:

1. Understand and use these rights. If for any reason you do not understand or you need help, the hospital **MUST** provide assistance, including an interpreter.
2. Receive treatment without discrimination as to race, color, religion, sex, national origin, and disability, and sexual orientation, source of payment, age and to be free from all forms of abuse or harassment.
3. Receive considerate and respectful care in a clean and safe environment free of unnecessary restraints.
4. Receive emergency care if you need it.
5. You and/or your representative has the right to make informed decisions regarding care, this includes being informed of your health status, being involved in care planning and treatment, and being able to request or refuse treatment. This right must not be construed as a mechanism to demand the provision of treatment or services deemed medically unnecessary to inappropriate.
6. To have a family member or representative of your choice and your own physician be notified promptly of your admission to the hospital.
7. Be informed of the name and position of the doctor who will be in charge of your care in the hospital, know the reason for any proposed change in the Professional Staff, the reason for a transfer either within or outside the hospital and relationship(s) of the hospital to other persons or organizations participating in the provision of your care.
8. Know the names, positions and functions of any hospital staff involved in your care and refuse their treatment, examination or observation.
9. A no smoking room.
10. Receive complete information about your diagnosis, treatment and prognosis.
11. Receive all the information that you need to give informed consent for any proposed procedure or treatment. This information shall include the possible risks and benefits of the procedure or treatment.
12. The right to formulate advanced directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives. Receive all the information you need to give informed consent for an order not to resuscitate. You also have the right to designate an individual to give this consent for you if you are too ill to do so. If you would like additional information, please ask for a copy of the pamphlet "Deciding About Health Care — A Guide for Patients and Families."
13. Refuse treatment and be told what effect this may have on your health.
14. Refuse to take part in research. In deciding whether or not to participate, you have the right to a full explanation.
15. Privacy while in the hospital and confidentiality of all information and records regarding your care.
16. Participate in all decisions about your treatment and discharge from the hospital. The hospital must provide you with a written discharge plan and written description of how you can appeal your discharge.
17. Review your medical record without charge. Obtain a copy of your medical record for which the hospital can charge a reasonable fee. You cannot be denied a copy solely because you cannot afford to pay.
18. Receive an itemized bill and explanation of all charges and to be informed of the source of the hospital's reimbursement of the patient's advance of separate billings.

19. Complain without fears of reprisals about the care and services you are receiving and to have the hospital respond to you and if you request it, a written response. If you are not satisfied with the hospital's response, you can complain to the New York State Health Department. The hospital must provide you with the State Health Department telephone number. Senior Behavioral Health patients may complain to the New York State Office of Mental Health. The hospital must provide you with the Office of Mental Health's telephone number upon request.
20. Authorize those family members and other adults who will be given priority to visit consistent with your ability to receive visitors. Visiting regulations and policies are in place and noted in the patients information packet.
21. Make known your wishes in regard to anatomical gifts. You may document your wishes in your health care proxy or on a donor card, available from the hospital. Your family has the right of informed consent of donation for organs and tissues.
22. Informed of the right to have pain treatment as effectively as possible.
23. Identify a caregiver who will be included in your discharge planning and sharing of post-discharge care information or instruction.
24. View a list of the hospitals' standard charges for items and services and the health plans the hospital participates with.
25. You have the right to challenge an unexpected bill through the Independent Dispute Resolution process.

If you have any questions about the *Patient Bill of Rights* call the Social Services Department at 315-338-7131 between 8:00 am and 4:00 pm, Monday through Friday or the Nursing Supervisor by dialing "0" at any time.