

THE CARE YOU RECEIVE DEPENDS PARTIALLY ON YOU. IN THE SPIRIT OF MUTUAL TRUST AND RESPECT, YOU HAVE CERTAIN RESPONSIBILITIES

AS A PATIENT IT IS YOUR RESPONSIBILITY TO....

- Provide accurate and complete information concerning present complaints, past illnesses and hospitalizations and other matters relating to health.
- Make known whether you clearly comprehend the course of medical treatment and what is expected of you.
- Follow the treatment plan established by the physician, including the instructions of nurses and other health professionals as they carry out the physician's orders.
- Keep appointments and notify the hospital or physician when unable to do so.
- Be accountable for your own actions should you refuse treatment or not follow the physician's orders.
- Assure that the financial obligations of hospital care are fulfilled as promptly as possible.
- Follow hospital policies and procedures, as directed.
- Be considerate of the rights of other patients and hospital staff.
- Be respectful of the property, materials and equipment of other persons and of the hospital.

PATIENT VISITATION RIGHTS

- You have the right, subject to your consent, to receive visitors whom you designate, and it is your right to withdraw or deny such consent at any time.

VISITORS:

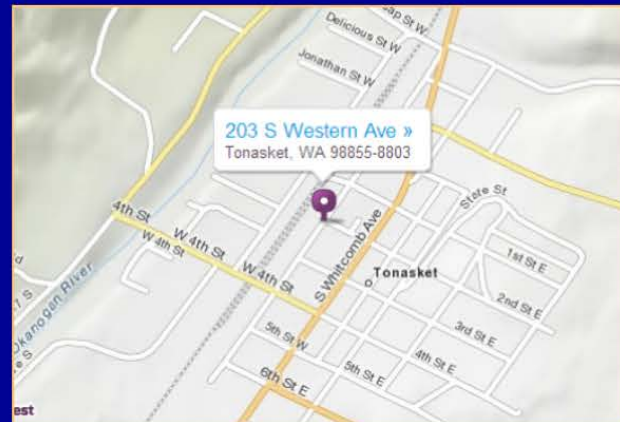
- You have the right to enjoy full and equal visitation privileges consistent with patient preferences and at the care providers discretion.

OUR MISSION

"Provide quality patient care and education that enhances the health and well-being of our communities."

NORTH VALLEY HOSPITAL DISTRICT (NVHD) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. NVHD does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-509-486-2151 (TTY: 1-800-833-6384).



NORTH VALLEY HOSPITAL

Okanogan County Public Hospital Dist. #4
203 S. Western Ave.
Tonasket, WA 98855
PH: 509-486-2151
Fax: 509-486-3102



"Growing Healthcare Close to Home"

www.nvhospital.org

Rights & Responsibilities



PATIENT RIGHTS & RESPONSIBILITIES

Our mission is to put you as our first priority by caring for you with respect and dignity, working with your doctor in providing medical treatment and assisting you with other needs related to your care.

We accept the responsibilities of providing you with quality health care, and at the same time we need your help. Patients and caregivers working together achieve the best results from treatment.

The rights and responsibilities in this brochure state what you and our hospital staff should expect of each other. We recommend that you read them carefully. They can help you and your family learn about your treatment and make decisions about your care.



Version 7.2021

You HAVE THE RIGHT TO...

- Exercise these rights without regard to race, color, national origin, religion, sex, sexual orientation, disability or source of payment for care.
- Receive care in a safe setting, free from all forms of abuse or harassment, including access to protective services.
- Knowledge of the name of the physician coordinating your care including the names of all health providers who will see you.
- Have a family member or representative notified if admitted to the hospital.
- Receive as much information about any proposed treatment or procedure as you may need in order to give informed consent or to refuse the course of treatment.
- Participate actively in the development and implementation of a plan of care. To the hospital extent permitted by law, this includes the right to refuse treatment and to leave the hospital against the advice of the physician.
- Full consideration of personal privacy concerning your medical care program including case discussion and consultation. You have the right to know the reason for the presence of any individual.
- Confidential treatment of all communications and records pertaining to your health care. Written permission will be obtained before medical records can be made available to anyone not directly concerned with your care.
- Healthcare without the use of restraints, except as a last resort is an emergency or if in immediate danger of hurting yourself or others.
- Be advised of any treatment of an experimental or research nature.
- Be informed by a physician or a representative of the continuing health care requirements following discharge from the hospital.
- Be informed of unanticipated outcomes.
- To file a complaint regarding your health care at this facility without fear of discrimination call the Quality Manager at 509-486-3196.
- Examine and receive an explanation of his/her bill regardless of source of payment.
- Have all patient's rights apply to the person who may have legal responsibility to make decisions regarding medical care on behalf of the patient.
- To formulate an Advance Directive, defined as a written instruction on how you want your health care directed, in case you become incapacitated that the hospital will follow.
- All personnel shall observe these patients' rights while treating patients with dignity and respect.
- Designate visitors of your preference, including being informed of clinical restrictions to your visitation rights.
- To spiritual Care.
- For communication, and that if communication restrictions are necessary the hospital will document and explain the restrictions to you and your family.
- Request to no resuscitation or life-sustaining treatment.
- End of life care.
- Donate organs and tissues including medical staff input and direction by family or surrogate decision-makers.