

MEDICAL AND INFORMATION AND CONSENT

Know the name of his/her primary physician and the name and professional relationships of other physicians and people involved in his or her care at the time care is rendered. Information about the illness, course of treatment and prospects for recovery in terms that the patient can understand. Information about treatments or procedures as needed in order to give informed consent or refusal. Except in emergencies, this information shall include a description of the procedures or treatments, the medically significant risks, alternate courses of treatment or non-treatment and the risks involved in each. The patient shall know the name and professional status of the person who will perform the treatments or procedures. Be informed if the hospital and personal physician plans to perform human experimentation affecting care or treatment, and his or her right to refuse participation.

PROVISIONS OF INFORMATION

Knowledge of the hospital rules and policies which apply to patient conduct.

MEDICAL TREATMENT DECISIONS

Active participation in decisions regarding medical care. The extent permitted by law, this includes the right to refuse treatment, execute an Advance Directive, or leave the hospital against the advice of physicians and be informed of the consequences of his/her refusal for care. To the extent permitted by law, this right also applies to a patient's surrogate decision-maker. Consult with specialists at his/her own request and expense. Be advised of his/her rights in the event of terminal illness.

These rights address privacy, confidentiality, treatment for the primary and secondary symptoms of illness, pain management, psychosocial and spiritual concerns. Consent for their family's involvement, as appropriate and as allowed by law, in making decision regarding the care, treatment and services the patient receives. Have their surrogate decision-maker presented with the option to donate tissues or organs when appropriate. Right to seek second opinion concerning any aspect of your treatment. We will make every reasonable effort to accommodate your request to be seen by a specific provider.

ADVANCED DIRECTIVES

The right to have an advanced directive, such as a living will or health care proxy; these documents express your choices about your future care or name someone to decide if you are incapable of making them for yourself. For additional information on advanced directives, contact our Patient Administration Division.

CONTINUITY OF CARE

Reasonable continuity of care and advanced knowledge of the time and location of appointments, including the name of the physician providing the care. Be informed by the physician of the patient's continuing health care requirements following discharge from the hospital. Receive a complete explanation of the need for transfer to another medical facility and of the alternatives to such a transfer.

MEDICAL RECORDS

All medical records documenting care are property of the U.S. Government. For copies of records, contact Correspondence Clerk at Patient Administration Division.

REFUSAL OF TREATMENT

Leave the hospital, even against the advice of physicians.

PERSONAL/PROPERTY SAFETY

Expect reasonable safety of their person according to hospital practices and environment, and to be placed in protective privacy when the hospital determines it necessary for personal safety. Expect reasonable safety and security of their property according to hospital practices and environment. Protection from real or perceived abuse, neglect or exploitation from anyone, including staff, students, volunteers, other patients, visitors or family members. Receive care in a safe setting, free from mental, physical, sexual or verbal abuse and neglect, exploitation or harassment.

ISSUES/CONCERNS

Voice complaints freely and recommend changes regarding the quality of services and without being subject to coercion, discrimination, reprisal, or unreasonable interruption of care, treatment and services. This can be accomplished by seeking with the unit or clinic Officer in Charge (OIC), the Noncommissioned Officer in Charge (NCOIC) or by contacting the Patient Representative Office.

PATIENT RESPONSIBILITIES

The patient has the responsibility to:

FINANCIAL INFORMATION

Examine and receive an explanation of the bill, regardless of the source of payment. Assure the financial obligation of their health care are fulfilled as promptly as possible.

PROVISION OF INFORMATION

The patient is to provide, to the best of their knowledge, accurate and complete information about the present complaint, past illnesses, hospitalizations, medications and other health matters. Report unexpected changes in his/her condition to the responsible caregiver. Make it known whether he/she clearly understands a course of action regarding medical care, and in what ways he/she is expected to cooperate.

COMPLIANCE WITH INSTRUCTION

Follow the treatment plan agreed upon with his/her primary health care professional. This includes following instructions of other health care providers as they carry out the orders of the primary health care professional and enforce hospital rules and regulations. Keep appointments with the responsible practitioner and whenever unable to do so to notify him or her. Patients who are non-complaint, who behave in a disruptive manner so as to threaten their own or another's safety, who pose a threat to their environment, or who are verbally and/or physically abusive, will be informed of the existing mechanisms available for registering complaints; be transferred in accordance with established policy; be discharged and /or denied future non-emergent admission; and /or be subject to the actions and decision of the hospital interdisciplinary team.

REFUSAL OF TREATMENT

Patient is responsible for the consequences and outcomes if refuses treatment or does not follow the care, service, or treatment plan. When refusal of treatment prevents the appropriate care in accordance with professional standards, the relationship with the patient may be terminated upon reasonable notice.

(PATIENT RESPONSIBILITIES CONTINUED)

Taking responsibility for maximizing health habits, such as exercising, not smoking and eating a healthy diet and avoiding knowingly spreading diseases.

Become knowledgeable about coverage and health plan options, including covered benefits, limitations and exclusions, rules regarding use of network providers, coverage and referral rules, appropriate processes to secure additional information, and process to appeal coverage decisions. Contact TRICARE Service Center for more information at 1-800-44-5445 or www.humana-military.com.

RESPECT

Show respect for other patients and health workers. Be considerate of the rights of other patients and hospital staff. Follow all hospital rules and regulations.

PAIN MANAGEMENT

Responsible to ask your doctor regarding expectations regarding pain and pain management. You need to help the medical staff evaluate your plan.

REPORTING ISSUES

To assist the Hospital Commander provide the best possible care to all beneficiaries, please report any care problems or concerns to the OIC, the NCOIC or contact the Patient Representative Office.

Reynolds Army Community Hospital is in full compliance with all applicable standards.

“Accredited” is awarded to a health care organization that is full compliance with all standards at the time of the on-site survey. Our last survey was 12-15 Jun 2012. If an individual has any concerns about patient care and safety in the hospital, he or she is encouraged to contact the hospital’s management. If the concerns cannot be resolved through the hospital management, the individual is encouraged to contact the Joint Commission at 1-800-994-6610 or complaint@jointcommission.org.

PATIENT RIGHTS AND RESPONSIBILITIES



REYNOLDS ARMY COMMUNITY HOSPITAL

CMDR, USA MEDDAC
4301 WILSON STREET
FORT SILL, OK 73503

PATIENT ADVOCATE OFFICE

558-2390/2483/3161
[usarmy.sill.medcom-rach.mbx.patient-repo@
mail.mil](mailto:usarmy.sill.medcom-rach.mbx.patient-repo@mail.mil)

PATIENT RIGHTS

The patient has the right to:

MEDICAL ACCESS

Exercise his or her rights without regard to sex, cultural, economic, educational or religious background. Effective and safe care, respectful treatment and services. Have a family member or representative and your own physician notified promptly of your admission to the hospital. Have access to spiritual counseling and pastoral visits. Have access to people outside the hospital through visitors, interpreters, verbal and written communication. If capable designate visitors of their choosing unless no visitors are allowed or a visitors would endanger the health or safety of the operations of the hospital.

However, RACH may establish reasonable restrictions upon visitation hours and number of visitors. When the hospital serves a population of patients who often need protective services (guardianship and advocacy services, conservatorship, and child or adult protective services), it provides resources to help the family and the courts determine the patient's needs for such services.

COMMUNICATION

Patients who desire private telephone conversations have access to space and telephones appropriate to their needs and the care or treatment being provided. Effective communication and interpretation, including access to translation services and services to address vision, speech, hearing, language and cognitive impairment.

MANAGEMENT OF PLAN

Appropriate assessment and management of pain, information about pain, pain relief measures, to participate in pain management decisions, request or reject the use of any or all modalities to relieve pain.

RESPECT AND DIGNITY

Considerate and respectful care at all times with recognition of his or her personal dignity. Reasonable responses to any reasonable requests made for service. To be made comfortable and be respected for their psychosocial, spiritual, cultural and personal values., beliefs and preferences. Be free from restraints and seclusion of any form used as a means of coercion, discipline, convenience or retaliation by staff.

PRIVACY AND CONFIDENTIALITY

Full consideration of privacy concerning his/her medical care program. Case discussion, consultation, examination and treatment are confidential and conducted discretely. Advised why any individual is present during a consultation, examination or treatment. Confidential treatment of all communications and records pertaining to care and stay in the hospital.

Patient's written consent shall be obtained before medical records can be made available to anyone not directly concerned with the care. Request, access, amend and receive accounting of disclosures regarding his/her medical record or health information as permitted under applicable law.