



## Patient Rights and Responsibilities:

### As a patient, you have the right to:

- take part in your health care and treatment plan
- know the names of the people caring for you
- be treated with respect and dignity in a safe and private setting
- be provided treatment without regard to race, color, birthplace, language, gender, age, religion, or disability
- be informed about your illness and treatment, including options for your care
- to refuse to participate partially or fully in the recommended treatment or therapy
- to be informed of the risk, benefits, and consequences of treatment or non-treatment
- change medical providers at Chota Community Health Services (CCHS)
- get another opinion about your illness or treatment
- to disclosure of unanticipated events related to your care
- privacy of your health records
- to ask for and receive information about your medical record, review the record, ask for corrections to your medical record, and to receive copies of your record
- talk with the clinic manager about any questions or problems with your care
- know about services available through CCHS
- respect for your cultural, social, spiritual and personal values and beliefs
- know about legal reporting requirements
- ask for special arrangements if you have a disability
- ask for help with a living will or durable power of attorney for health care
- know the cost of your care and ways you may pay for your care
- refuse to be included in any research program without limiting medical care or treatment

### As a patient, you have the responsibility to:

- tell your medical provider about all of your illness or problems including your health concerns, all medications including over-the-counter medications and herbal or dietary supplements, and all of your allergies and sensitivities
- ask questions about your illness or care
- show respect to both care givers and other patients
- cancel or reschedule appointments so that another person may have that time slot
- accept personal financial responsibility for charges not covered by insurance, and to pay your bills on time
- use medications or medical devices for yourself only
- inform the medical provider if you become worse or you have an unexpected reaction to a medication
- give written permission to release your other health records to CCHS when necessary
- provide PHC a copy of your living will or durable power of attorney for healthcare matters
- follow your treatment plan as prescribed
- to voice complaints about your service without fear of receiving inadequate treatment