

# Patients Rights & Responsibilities

## YOUR RIGHTS...

### **The right to respectful, skillful and compassionate care.**

- You will receive health care that meets professional standards in a safe hospital environment.
- You will receive care without regard to race, color, creed, sex, national origin, beliefs, age, handicap, diagnosis or ability to pay.
- Your pain will be assessed and managed.

### **The right to personal privacy and confidentiality of records.**

- Any conversation regarding your care will be discreet and professional in nature.
- You have protection from unauthorized review of your records and unauthorized communication about your care.
- You will receive privacy in communicating with any person of your choice and the right to accept or refuse visitors.
- If it is necessary to restrict visitors, mail, or telephone calls as a component of your care, you and your family will be included in this decision.
- Your property will be treated with respect and your personal and physical privacy maintained.
- You will receive mail that is unopened and have access to stationery and postage at your own expense.
- With your permission, a family member or person of your choice will be notified of your admission.

### **The right to information that will enable you to participate in making appropriate decisions about your care.**

- Information about your diagnosis, prognosis and treatment, including

alternatives to care and risks involved will be provided in terms you and your family can understand.

- You have the right and responsibility to participate in the development and implementation of your plan of care.
- Information about Advance Directives, including a Living Will and Medical Power of Attorney, will be provided.
- You have the opportunity to formulate Advance Directives and to expect your wishes will be followed to the full extent authorized by law.
- You may refuse any treatment or procedure as permitted by law.
- Proposed research studies or human experimentation that affects your care must be fully explained to you before you give your consent or refusal.
- Information regarding the name, titles, and qualifications of anyone providing your care will be provided at your request.
- A Second opinion and/or consultation will be provided at your request (and at your expense) if not covered by your insurance.
- You will be given the reason for transfer to another facility and the alternatives to such a transfer.
- You have access to your medical and financial records in an expedient manner and may have them explained to you.
- You will have the right to accept visitors regardless of race, creed, color, religion, sex, age, disability, national origin, marital status, veteran status, gender identity or sexual orientation.
- You have the right to alternative communication of this notice and the information can be provided in an alternative format if requested.

- Information will be given to you upon request regarding how to file a grievance, whom to contact.  
For Quality of Care concerns contact KEPRO toll-free at 1-855-408-8557  
5201 West Kennedy Blvd, Suite 900  
Tampa, FL 33609
- The Right to expect that, within its capacity, Iowa Specialty Hospital must make a reasonable response to the request of a patient for services that are appropriate and medically indicated.

### **The right to be free of abuse or mistreatment of any kind including:**

- Freedom from neglect, involuntary seclusion, physical, mental, sexual and verbal abuse.
- Freedom from any form of chemical or physical restraints that are not medically necessary for a specific purpose and are not ordered by a medical provider.
- Freedom from misappropriation of your personal property.

### **The right to education regarding your condition, causes and treatments including how to manage your health care at home.**

### **The right to social service including:**

- Assistance in discharge planning.
- Contacting outside agencies for assistance.
- Obtaining medical supplies, equipment and medication.

# YOUR RESPONSIBILITIES...

- To provide, to the best of your ability, complete and truthful health information including any complications or side effects from care received.
- To tell the hospital or medical staff if you have prepared an Advance Directive and to provide a copy of such directive.
- To participate in your plan of care and cooperate with your medical provider and other caregivers.
- To accept responsibility if you refuse treatment or fail to comply with instructions.
- To sign the required consents and releases for care as you agree to them.
- To provide the hospital with your financial and insurance information.
- To fulfill your financial obligation to Iowa Specialty Hospital as soon as possible.
- To make it known if you do not understand the education and instructions provided to you.
- To protect valuables by sending them home with family members or placing them in the hospital safe.
- To be considerate of the rights of others, including hospital staff and other patients, and to respect the property of others.

*\*Iowa Specialty Hospital includes any of its partners, subsidiaries and affiliates.*

## The vision of Iowa Specialty Hospital is to be the best rural hospital in America.

If you have any questions about your rights and responsibilities as a patient, please ask your nurse. She will refer you to the appropriate person.

Iowa Specialty Hospital is committed to providing quality and compassionate care.



## Iowa Specialty Hospital

*Specializing in You*

[www.iowaSpecialtyHospital.com](http://www.iowaSpecialtyHospital.com)

### Hospital Locations

#### **Belmond**

403 1st Street Southeast  
Belmond, Iowa 50421  
Toll Free: (844) 474-4321

#### **Clarion**

1316 South Main Street  
Clarion, Iowa 50525  
Toll Free: (844) 474-4321

### Other Clinics

#### **Clear Lake**

401 S 17th Street  
Clear Lake, Iowa 50428  
(641) 357-1800

#### **Fort Dodge**

2700 1st Avenue S, Suite 100  
Fort Dodge, Iowa 50501  
(515) 955-6767

#### **Hampton**

700 2nd Street SE, Suite 101  
Hampton, Iowa 50441  
(641) 812-1094

#### **Webster City**

815 Des Moines Street  
Webster City, Iowa 50595  
(515) 832-1200

#### **West Des Moines**

4949 Westown Parkway,  
Suite 100  
West Des Moines, Iowa 50266  
(515) 327-2000