

# PATIENT RIGHTS

Weiser Memorial Hospital's employees and health care providers will show you respect, maintain your dignity and make you feel as comfortable as possible while you are a patient. Good health care is a partnership. We encourage you and your family to participate actively in the decision making process and your plan of care.

This brochure outlines your rights and responsibilities as a patient at Weiser Memorial Hospital.



**MISSION:**  
*We save lives, improve health,  
and build community.*

**VISION:**  
*People serving the community,  
getting results,  
here for the future.*

**VALUES:**  
*Integrity · Compassion · Excellence*



**WEISER**  
MEMORIAL HOSPITAL

645 East 5th Street, Weiser, Idaho  
(208) 549-0370



**WEISER**  
MEMORIAL HOSPITAL  
SURGICAL & SPECIALTY CLINIC

645 East 5th Street, Weiser, Idaho  
(208) 549-3152



**WEISER**  
MEMORIAL HOSPITAL  
FAMILY MEDICAL CENTER

360 East Liberty, Weiser, Idaho  
(208) 414-1124



## PATIENT RIGHTS — and — PATIENT RESPONSIBILITIES

**WEISER**  
MEMORIAL HOSPITAL

↑ MAIN ENTRANCE  
↑ SURGICAL & SPECIALTY CLINIC  
→ EMERGENCY



**WEISER**  
MEMORIAL HOSPITAL

## RESPECT AND CONSIDERATION

It is the intention of all hospital staff to treat all patients and visitors with the utmost respect and consideration. You will be informed of the names of the people involved in your care. You will be listened to when you have a problem or question and receive an appropriate response. If you do not understand the response, please ask for clarification.

We ask that you show consideration for other patients, visitors, and staff by following hospital policies regarding visiting hours, smoking, and hand-held wireless devices.

## PERSONAL BELONGINGS

You are encouraged to leave valuables, including jewelry and money, at home. If you do have such items with you, please ask your nurse for assistance in placing them in safekeeping. It is your responsibility to ask for all items in safekeeping to be returned to you. We regret that Weiser Memorial Hospital cannot be responsible for replacement of lost or damaged personal property.

## CONFIDENTIALITY

Information about you and your care will be treated with the strictest confidence. Your medical records are private, and only you or authorized persons or agencies are allowed to see them. You have the right to access information contained in your clinical records within a reasonable time frame, with your written request. (Please refer to the Weiser Memorial's Notice of Privacy Practices for more information.)

## COMMUNICATION

Weiser Memorial Hospital's staff and health care providers will communicate information about your condition, treatment, and outcome with you in a manner that allows you to fully understand what is being communicated. When appropriate, your family will be notified of the same information. If you do not understand what is being communicated to you, it is your responsibility to ask for clarification. In an emergency, if it is not medically possible to provide such information, the information will be made available to an appropriate person on the patient's behalf. When needed, language interpretation will be made available to all hearing-impaired and non-English speaking patients. Any restrictions on communication should be made known to the hospital.

## NOTIFICATION

You have the right to have a family member, physician, or any other persons notified of your admission to the hospital.

## PERSONAL PRIVACY

In order to be as comfortable as possible while being examined, you are entitled to have the door closed or the curtains drawn, to have visitors excused, and to know who and why any observer is present.

## SPIRITUAL BELIEFS

You and your family may express your spiritual beliefs and cultural practices as long as these do not harm others or interfere with treatment. Clergy are available upon request.

## INFORMATION, CONSENT AND REFUSAL OF CARE

You have the right to receive enough information from your physician about your condition and treatment to make informed decisions about your care. Prior to any treatment or procedure requiring your informed consent, your caregiver will verify that your physician has answered any questions you might have. If you have additional questions, please let your caregiver know.

You have the right to refuse treatment. If you refuse treatment, you will be informed of the medical consequences of such action. You may be asked to sign a form indicating that you wish to refuse the recommended treatment.

You, or when appropriate, your family, will be kept informed of unanticipated medical events or outcomes which adversely affect, or may later affect your health.

## MEDICATION SAFETY

You have the right to know the name of any prescribed drug, the reason it was prescribed and the known possible side effects. You have the responsibility for verifying that the medication and dosage of a prescribed drug is correct and for letting your caregiver know if it is incorrect. You are responsible for informing your caregiver of any other drugs, herbal products, food supplements or vitamins you are taking and any allergies to food or medicine you may have.

## EQUIPMENT SAFETY

Patients and all visitors are asked to refrain from touching or making adjustments to medical equipment. If assistance is needed, please use the call light.

## PAIN MANAGEMENT

While a patient at Weiser Memorial Hospital, we want you to be as comfortable as possible. Your caregiver will work with you regarding pain control. You should always inform your caregiver when you are in pain.

## SECURITY

You have the right to receive care in a safe setting and to be free from all forms of abuse, neglect or harassment. Likewise, it is expected that our patients and their family members will refrain from any form of abuse or harassment towards our employees or any other individual on Weiser Memorial Hospital's premises. Individuals who fail to meet this expectation may be asked to leave or to seek care elsewhere. If you need information on protective services contact your caregiver.

## ADVANCE DIRECTIVES

Advance Directives are documents, such as a Living Will or a Durable Power of Attorney, that allow you to make decisions regarding your end of life care. These are directives that you want followed in the event you are unable to communicate your wishes at a later date. You may request information about Advance Directives at the time of admission or during your hospitalization. You have the right to have your Advance Directives made a part of your medical record and to have hospital staff and physicians comply with those directives.

## CONCERNS REGARDING YOUR CARE

We will try to address any concerns or complaints you may have regarding your care in a prompt and fair manner. We encourage you to discuss your concerns with your caregiver or, if you prefer, with a management staff representative. If your concerns are not addressed to your satisfaction, you may contact Patient Relations at 208-549-4449 or send a letter to Weiser Memorial Hospital, Patient Relations, 645 E 5th St, Weiser, ID 83672. A review will be initiated and you will receive an acknowledgment of your concerns within 3 days and notification of resolution within 10 days unless further investigation is required, in which case you will be notified of the status of your case and that we may take up to 30 days to seek resolution. You may also submit your complaint to DNV, our accrediting organization.

If you are not satisfied with the care provided by your caregiver, you have the right to request to be cared for by another physician from our medical staff or request a different nurse, therapist or assistant, and we will make every attempt to accommodate your request.

## CODE OF ETHICAL BUSINESS AND PROFESSIONAL BEHAVIOR

Weiser Memorial Hospital has policies to ensure that clinical decision-making is not compromised as a result of any compensation method or risk sharing among its leaders, management, clinical staff, and licensed independent practitioners. In addition, clinical decisions about your care will not be influenced by any compensation arrangement with our employees, your doctor, or others involved in your care.

## NON-DISCRIMINATION

You will receive the care ordered by your physician without discrimination because of your race, color, national origin, religion, age, sex, sexual orientation, diagnosis, or ability to pay for your care. Additionally, Weiser Memorial Hospital's facilities are accessible to patients with special needs.

## RESEARCH

If you are asked to participate in research or a clinical trial regarding your condition or treatment, the risks, benefits, and alternatives of participating in this research or trial will be discussed with you. You have the right to refuse to participate in research or clinical trials without impacting the quality of your care and treatment. If you choose to participate, you will be asked to sign a form indicating your understanding of consent.

## RESTRAINTS

You have the right to be free from restraints of any form unless they are medically indicated in accordance with your physician's plan of care.

## BILLING AND FINANCIAL INFORMATION

As a taxing district organization, Weiser Memorial Hospital maintains an "open door" policy. This means we provide necessary hospital care to everyone, regardless of ability to pay. Patient Financial Services staff will assist you in making financial arrangements for payment, and when appropriate, will assist you with obtaining financial assistance through governmental programs. An explanation of any portion of your bill will be provided when requested. If a service or item is suspected to not being covered by your insurance company, you will be notified by your physician prior to administering the service or item. You have a right to deny any item or service to your care.

## VISITATION AND SUPPORT

Visitation of patients is an extremely important aspect of Weiser Memorial Hospital's dedication to patient support. Visitation depends on the patient's condition, the activity of the unit he or she is on, the prevention of infection, and at the discretion of the health care team.

You have the right to designate an individual as your Patient Representative or Support Person.