Patient Responsibilities

As a patient, you are responsible for:

- providing accurate and complete information about present physical complaints, past illnesses, hospitalizations, medications and other matters relating to your health;
- reporting unexpected changes in your condition to your doctors and nurses;
- reporting your pain and working with the staff to manage your pain;
- asking questions if you do not understand your treatment or what is expected of you;
- following the treatment plan recommended by the hospital staff and/or physicians;
- your actions if you refuse treatment or do not follow the healthcare provider’s instructions;
- thoughtful consideration of your wishes about end-of-life care and for communicating those wishes through advance directives;
- providing accurate insurance and payment information to the hospital and physicians at the time of registration or service;
- complying with the hospital’s rules and regulations affecting patient care and conduct;
- ensuring that the financial obligations of your healthcare are fulfilled as promptly as possible;
- being considerate of the rights of other patients and hospital personnel and for assisting in the control of noise and the number of visitors;
- being respectful of the property of other people and the hospital;
- keeping appointments and, when unable to do so for any reason, notifying your healthcare provider or doctor’s office;
- safeguarding your belongings (valuables should be sent home or to the Security Office).

References:
Florida Statute
The Joint Commission
Centers for Medicare and Medicaid Services

Baptist Health South Florida and each of the entities listed below comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex.

If you have questions or concerns about your rights and responsibilities, please call the Patient and Guest Services Representative at the applicable number below, or TTY: 1-800-955-8771, or after hours dial “0” and ask for the nursing supervisor.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al número que aparece abajo para la persona apropiada o TTY: 1-800-955-8771.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele nimewo a ki nan lis pi ba a pou antite ki apwopriye a, oswa TTY: 1-800-955-8771.

Baptist Children’s Hospital
Ext. 66527 (786-596-6527)
Baptist Health Medical Group
Ext. 79220 (786-527-9220)
Baptist Health South Florida
Ext. 79169 (786-527-9169)
Baptist Hospital
Ext. 66527 (786-596-6527)
Baptist Outpatient Services
Ext. 63750 (786-596-3750)
Doctors Hospital
Ext. 83193 (786-308-3193)
Homestead Hospital
Ext. 38057 (786-243-8057)
Mariners Hospital
Ext. 41646 (305-434-1646)
Miami Cancer Institute
Ext. 77545 (786-527-7545)
South Miami Hospital
Ext. 25046 (786-662-5046)
West Kendall Baptist Hospital
Ext. 72107 (786-467-2107)
Patient Rights

As a patient you have the right to:

- be treated with courtesy and respect for your cultural, psychosocial, spiritual and personal values, beliefs and preferences, as well as with appreciation of individual dignity and protection of privacy and informational confidentiality within the law;
- a prompt and reasonable response to questions and requests;
- have a family member or representative of your choice and your own physician notified promptly of your admission to the hospital;
- know who is providing medical services and who is responsible for your care;
- know what patient support services are available, including access to a phone for private telephone conversations, interpreters, translators and resources for the disabled;
- impartial access to medical treatment or accommodation regardless of race, national origin, religion, physical handicaps or sources of payment;
- treatment for any emergency medical condition that will get worse from failure to provide treatment;
- know what rules and regulations apply to your conduct;
- be given information concerning the diagnosis, prognosis, planned course of treatment, benefits, risks and alternatives presented in a language and manner that you can understand;
- have your family involved in decision making with permission from you or your surrogate;
- the presence of support individuals of your choice, unless the individuals’ presence infringes on others’ rights or safety, or is medically or therapeutically contraindicated;
- appropriate assessment and management of your pain, and to be involved in decisions about managing pain;
- be free from restraints or seclusion unless necessary for your safety or to prevent injury to others;
- initiate or amend an advance healthcare directive;
- participate in decisions about your care at the end of life with competent attention to your physical, psychosocial, spiritual and cultural needs;
- refuse any treatment, except as otherwise provided by law;
- know if medical treatment is for a clinical trial and to give your informed consent or refusal to participate in experimental research;
- information about accessing protective services if you feel you are in physical danger, or have been abused, neglected or exploited by anyone, including family members, visitors, other patients, staff, students or volunteers. Contact the social worker through the hospital operator by dialing “0”;
- receive, upon request, prior to treatment, a reasonable estimate of charges for medical care;
- receive, upon request, information and counseling on the availability of known financial resources for your care;
- know, upon request, in advance of treatment, whether the healthcare provider or facility accepts the Medicare assignment rate if you are eligible for Medicare;
- receive, upon request, a copy of a reasonably clear and understandable itemized bill and to have the charges explained;
- access to the Ethics Committee and the option to participate in the process to resolve ethical issues. Contact the Ethics Committee through the hospital operator by dialing “0”;
- expect reasonable safety insofar as the hospital practices and environment permit;
- consult with a specialist, at your request and expense;
- receive a complete explanation about the need for or alternative to a transfer (transfer must be acceptable to the other facility);
- be informed by your healthcare provider of continuing healthcare requirements after your discharge;
- express a complaint or grievance regarding safety, quality of care or any violation of your rights as stated in Florida law, through the grievance procedure at this Baptist Health facility, to the appropriate state licensing agency or The Joint Commission.

Baptist Health believes it’s important for you to take an active part in your healthcare. By becoming familiar with your Patient Rights and Responsibilities, you can better participate in your care and act as a vital part of the healthcare team. If you have any questions or concerns about your rights and responsibilities, please call any of the numbers listed on the back.

The Joint Commission, the accrediting agency for Baptist Health hospitals and outpatient centers, can be contacted by filing an online complaint at JointCommission.org/GeneralPublic/Complaint/ or by writing The Joint Commission, Office of Quality Monitoring, One Renaissance Blvd., Oakbrook Terrace, IL 60181; by faxing at 630-792-5636; by email at Complaint@JointCommission.org; or by calling 800-994-6610 any time.

You can file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office of Civil Rights Compliant Portal, available at http://ocrportal.hhs.gov/ocr/portal/lobby.jsf