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Patient's Rights and Responsibilities

Roper St. Francis Healthcare would like to assure you of your rights and responsibilities as a patient.

A copy of this is also available in Spanish.

Una copie de este anuncio esta' disonible tambien en Espanol.

PATIENT RIGHTS.

As a patient, you have the right to:

• Personal Dignity and Respect for Your Values, including:

- Receiving respectful, non-discriminatory, quality care regardless of age, race, ethnicity, culture, language, socioeconomic status, color, nationality, creed, sex, religion, physical or mental disability, sexual orientation, gender identity or expression, or source of payment for care.
- Having your cultural, spiritual and personal values, beliefs and preferences respected.
- Being treated in a dignified and respectful manner, in an environment that preserves dignity and contributes to a positive self-image.
- Protecting personal privacy as well as privacy of your health information. Your health information is treated as private, in compliance with South Carolina and Federal laws. Additional information about the privacy of your health information is contained in our Notice of Privacy Practices. For a copy, please visit www.rsfh.com.
- Accessing religious and other spiritual services, with the ability to request and receive pastoral counseling.
- Having a family member, friend or other individual to be present with you for emotional support during the course of your stay, unless that person's presence either (i) infringes on others' rights or safety, or (ii) is medically or therapeutically contraindicated. The support individual does not have to be your surrogate decision-maker or legally-authorized representative.
- Being free from neglect, exploitation, and verbal, mental, physical, and sexual abuse. The hospital will evaluate all allegations, observations and suspected cases of neglect, exploitation and abuse that occur within the hospital. The hospital will report allegations, observations and suspected cases to appropriate authorities based on the evaluation of the event, or as required by law.
- Accessing protective and advocacy services.

• **Information and Communication, including:**

- Receiving information in a manner that meets your needs if you are impaired by vision, speech, hearing, or cognitive impairments.
- Being informed about the care you will receive, in a manner you understand, tailored to your age, preferred language, and ability to understand. The hospital provides language interpreting services via telephone and/or video.
- Being informed of your status and to obtain from your physicians(s) and providers material information concerning diagnosis, treatment, services and outcomes of your care.
- Being informed of the general nature of the procedures and treatment, the material risks and benefits of the treatment or procedure, unanticipated outcomes, the probability of success of your procedure and your alternatives, including not receiving care.
- Accessing, requesting amendment to, and obtaining information on disclosures of your healthcare information, in accordance with law and regulation.
- Being informed of your visitation rights which include the right to receive the visitors designated by you, including, but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend. Also included is the right to withdraw or deny such consent at any time.
- Receiving Information about Advance Directives such as a Living Will and/or a Health Care Power of Attorney. If you have an Advance Directive, we will work with your doctor to honor your wishes as stated in your directive. If you wish to formulate an Advance Directive, hospital personnel will assist you with the South Carolina forms.
- Being notified of unanticipated outcomes in your care, treatment or services that are sentinel events, as defined by the Joint Commission. This information is provided by the practitioner responsible for your care, or the practitioner's designee.

- Receiving the names of your physician(s), clinical psychologist or other practitioner(s) who have the primary responsibility for your care and the names of other physician(s), clinical psychologists or other health-care providers involved in your care, treatment and services and receiving information about the licensure and relationships of those individual(s) and Roper St. Francis Healthcare.
- Being able to know if your care is affected by the Roper St. Francis Healthcare relationship with another healthcare organization or educational organization.
- If you are unable to understand or communicate, someone who can make decisions on your behalf (known as the “surrogate decision-maker”) has the right to receive this information on your behalf.

• **Participate in Your Care, including:**

- Participating in your health-care decisions and being involved in making decisions about your care, treatment, and services, including the right to have your family and your personal physician promptly notified of your admission to the hospital.
- Refusing care, treatment, and services, in accordance with law and regulation, and receiving this information in writing.
- If you are unable to make decisions on your own, having someone make decisions on your behalf (known as a “surrogate decision-maker”). Your surrogate decision-maker also has the right to refuse care, treatment, and services on your behalf, in accordance with law and regulation, and receive that information in writing.
- Having your family involved in your care, treatment and services decisions to the extent permitted by you or, if applicable, your surrogate decision-maker, in accordance with law and regulation.
- Giving or withholding consent and having the ability to discuss and request information related to the procedure and/or treatment.
- Having issues addressing autopsy and organ donation conducted in a sensitive manner.

- Requesting and expecting the hospital to arrange for the prompt and orderly transfer of your care to others when the hospital cannot meet your request or needs for treatment or services. Transfer will occur only after the hospital has given you complete information about the transfer, has explained to you other choices other than the transfer, and another doctor and/or hospital has accepted you as a patient.
- Agreeing or declining to participate in research studies and receiving the following information to help you decide whether or not to participate in research, investigation, or clinical trials: an explanation of the purpose of the research, expected duration of your participation, a clear description of the procedures to be followed, a statement of the potential benefits, risks, discomforts, and side effects, and alternative care, treatment, and services available to the patient that might prove advantageous to you.
- Giving or withholding informed consent to produce or use recordings, films, or other images of yourself for purposes other than your care.
- **Have Complaints and Ethical Considerations Addressed, including:**
 - Expressing any complaint or concern, without being subject to coercion, discrimination, reprisal, or unreasonable interruption of care.
 - Having your, or your family's, complaint or concern reviewed by the hospital and investigated in a fair and impartial manner.
 - Discussing with your doctor any ethical issues that arise in the course of your care.
 - Requesting access to the Roper St. Francis Healthcare Ethics Committee by contacting the Pastoral Care Office.

PATIENT RESPONSIBILITIES.

As a patient, you are responsible for:

• Information and Communication, including:

- Providing information that facilitates your care, treatment, and services.
- Informing your nurse or doctor of all information which may affect your care and safety.
- Providing accurate and complete information regarding any past illnesses, hospitalizations, medications and other matters about your health to the hospital and your doctor.
- Asking questions or acknowledging when you do not understand the treatment course or care decisions.
- Taking an active role in making decisions about services provided to you by discussing your condition and treatment with your doctor, reporting any changes in your condition, and providing your Advance Directive, and/or expressing your wishes about using life support.

• Cooperation and Assisting with Your Care, including:

- Cooperating with your healthcare providers and staff, following directions about your care, and asking questions if you do not clearly understand the plans and directions of your care.
- Being aware that if you refuse treatment or do not follow your doctor's instructions, you are responsible for the consequences.

• Respecting the Dignity and Rights of Others

- Follow instructions, policies, rules, and regulations in place to support quality care for patients and a safe environment for all individuals.
- Be considerate and respectful in your interactions with staff and providers by maintaining civil language and conduct.
- Follow and respect Roper St. Francis Healthcare rules and regulations concerning patient care and conduct.

- Be considerate of the rights of other patients and hospital staff. Please help us by controlling noise and the number of visitors, honoring the no-smoking regulations and using telephone, television, air conditioning and lighting in a manner considerate of other people and acceptable to the hospital.
- Follow guidelines with respect to cameras. Other patients and providers have a right to privacy also. The camera on your mobile phone is never to be used while on the premises, unless otherwise permitted by authorized Roper St. Francis Healthcare personnel. If it is discovered that an employee, vendor, patient or visitor is taking pictures or video with their mobile phone or device, the device is subject to immediate confiscation and erasure of those photos that were taken while on premises. Vendors, patients, and/or visitors can retrieve confiscated mobile devices from Security upon their departure from the hospital.

- **Financial and Property Responsibilities**

- Honor your financial commitments to Roper St. Francis Healthcare.
- Give the hospital complete information to process insurance claims, be prompt in asking questions about your bill, and make arrangements to pay Roper St. Francis Healthcare bills within an acceptable time period.
- Begin planning early for your hospital discharge, so you can leave when you are well enough to be discharged.
- You are responsible for your own belongings, keeping them safe during your stay, and taking them with you upon discharge. It is important that you not bring unnecessary items or anything of value to the hospital. Please send home any valuable or unnecessary items or, if you cannot, notify the nurse of such items so they can be locked in the safe during your visit.

Lewis Blackman Patient Safety Act

A copy of this is also available in Spanish.

Una copie de este anuncio esta' disonible tambien en Espanol.

The following is intended to serve as information to be provided to each Roper St. Francis patient presenting for inpatient services or outpatient surgical services. The purpose of such information is to communicate with each patient the role of the clinical medical providers for the patient and provide a mechanism whereby the patient may contact his or her attending physician or clinical manager, if necessary.

The following individuals may be involved with patient care during the patient's visit with Roper St. Francis. This list does not include all clinical staff that may be involved in the patient's care, but should provide each patient with a sound understanding of the role of the primary medical providers.

Attending Physician – medical physician directly responsible for admitting patient to hospital and/or responsible for patient's care;

Resident Physician – medical physician who has graduated from a medical education program who may assist the attending physician with patient care under the direction of the attending physician and an ongoing further medical educational program;

Intern Physician – individual who is an advanced student or graduate of a medical education program and is participating in direct patient care for the purpose of gaining practical medical experience under the direction and supervision of the attending physician;

Consulting Physician – an individual physician that may be assisting or called to consult with the patient for a specific medical purpose, but who is not necessarily taking the role of attending physician;

Clinical Trainees – included individuals who may be observing or seeking advanced clinical training in a medical field or hospital environment, such as nursing, medical training or other training. Such trainees are supervised by the attending physician (as described here) or directly supervised by a licensed nurse or clinical manager during the care of the patient.

Medical Student – individual who observes the medical care provided by the attending physician, working with and under the direct supervision of the attending physician.

A list of approved abbreviations for use on the clinical and medical staff's identification badges has been provided with this written information for your benefit and review.

Please note: Your attending physician may change during your hospitalization, please check with your nurse or clinical manager if you have any questions regarding your attending physician. You may also have one or multiple consulting physicians taking part in your medical care; however, these consulting physicians are not considered your attending physician unless informed otherwise. Also, medical students and interns may be rounding with your attending physician during normal rounds, these individuals are not your attending physician, but may participate in the clinical treatment you receive.

You may contact your attending physician or his/her designee, at any time, by asking your nurse the following:

You may request that the nurse place a call to your attending physician, or his/her designee, to inform the attending physician or his/her designee of the patient's concern; OR

You may request that the nurse provide you with the attending physician's telephone number so that the patient may contact the attending physician or his/her designee directly; OR

If you are unable to place a call yourself, you may request that your nurse assist you with placing the call to the attending physician or his/her designee.

Finally, you may access the clinical manager for your current nursing unit to discuss any clinical concern you may have that may not require the need of the attending physician or his/her designee. Please see the following document for information.

PATIENT ASSISTANCE PROGRAM LEWIS BLACKMAN PATIENT SAFETY ACT

The following is intended to serve as a written procedure for Roper St. Francis patient's access to the Patient Assistance Program. The purpose of this Program is to provide clinical assistance to patients, at their request, that may not require the attending physician's assistance. This Program will be available at all times to the patient while hospitalized with Roper St. Francis.

There is always a house-nursing supervisor on duty that can be reached by telephone.

Bon Secours St. Francis Hospital: (843) 402-1015

Roper Hospital & Roper Rehabilitation Hospital: (843) 724-2702

Roper St. Francis Berkeley Hospital: (843) 529-3141

Roper St. Francis Mount Pleasant Hospital: (843) 214-9284

The clinical manager or house-nursing supervisor should promptly assess the patient's concern based on the contact made by the patient and document appropriately in the patient's chart.

The clinical manager shall be available to patients during normal scheduled hours. The house nursing supervisor(s) shall be available during outside of the scheduled working hours pursuant to the hospital's employee schedules.

Telephone number and pager number will be available for the appropriate clinical manager or house-nursing supervisor 24-hours a day, 7-days a week.

The purpose of this program is not intended to replace or in any way act as the method for handling general patient complaints, this is for clinical assistance only.

This policy shall be made available in the written information provided to each patient upon admission for inpatient services and outpatient surgery. The contact information for each unit's clinical manager or house- nursing supervisor, and the times in which each is available for contact, shall be posted at the nursing unit on a specially prepared location and made available for the patients without requesting assistance.

The patient may use the telephone located within each patient room or area or may use any personal telephone system available to contact the clinical manager or house-nursing supervisor when necessary.

A patient may contact the listed individual during the hours provided for prompt assistance with personal medical care concerns.

PARTIAL LIST OF GENERALLY ACCEPTED CLINICAL ABBREVIATIONS FOR DEPARTMENTS AND JOB TITLES

General	Abbreviation
Administrator.....	Adm
Assistant Vice President.....	Asst VP, AVP
Assistant.....	Asst
Associate.....	Assoc, Assc
Certified.....	Cert
Clinical.....	Clin
Coordinator.....	Coord
Counselor.....	Coun
Director.....	Dir
Health.....	Hlth
Home.....	Hm
Medical.....	Med
Manager.....	Mgr
Outpatient.....	OP
Patient.....	Pt
Procedure.....	Proc
Registered.....	Reg
Representative.....	Rep
Specialist.....	Spec
Senior.....	Sr
Supervisor.....	Supr, Supv
Surgical, Surgery.....	Surg
Services.....	Svcs
Technician, Technologist.....	Tech
Therapy.....	Ther

Vice President.....	VP
Volunteer.....	Vol

Departments	Abbreviation
Cardiology Services & Neurophysiology Services	
Cardiac.....	Cardio
Cardiovascular.....	CV
Cardiovascular Registered Nurse.....	CVRN
Cardiovascular Technician.....	CV Tech, CVT
Echocardiogram Technologist.....	Echo Tech
Electroencephalogram Technician	EEG Tech
Electrocardiogram Technician.....	EKG Tech
Monitor Technician.....	Mon Tech

Departments	Abbreviation
<i>Health Information Management</i>	
Registered Health Information Administrator.....	RHIA
Registered Health Information Technician.....	RHIT
Certified Coding Specialist.....	CCS
<i>Laboratory Services</i>	
American Society of Clinical Pathologist.....	ASCP
Cytotechnologist.....	Cyto Tech
Histology Technician, Technologist.....	Histo Tech
Laboratory.....	Lab
Laboratory Technical Specialist.....	Lab Tech Spec
Medical Laboratory Technician.....	Med Lab Tech, MLT
Medical Lab Technician I & II.....	MLT or CLT
Medical Lab Technologist	
Medical Lab Technologist I & II.....	MT or CLS Medical
Office Assistant – OSA	
Medical Records Analyst	
Medical Records Specialist	
Medical Social Worker.....	LMSW or LISW
Medical Staff Coordinator	
Medical Technologist	
Medical Office Assistant – OSA.....	Med Off Asst
Medical Technologist.....	Med Tech, MT
Pathology Assistant.....	Path Asst
Phlebotomist	Phleb
Specimen, Procurement and	
Procedure Technician.....	SP & P Tech

Nursing, Surgical & Related Services

Anesthesia.....	Anes, Anest, Anesth
Adult Nurse Practitioner.....	Adult NP; ANP
Care Team Technician.....	Care Team Tech, CTT
Certified Medical Assistant.....	Cert Med Asst, CMA
Certified Nursing Assistant.....	Cert Nursing Asst, CNA
Certified Registered Nurse Anesthetist.....	CRNA
Certified Surgical Technologists.....	Cert Surg Tech, CST
Clinical Nurse Specialist.....	Clin Nurse Spec, CNS
Employee Health Nurse.....	Emp Hlth Nurse
Endoscopy Technician.....	Endo Tech
Licensed Practical Nurse.....	LPN
Neonatal Nurse Practitioner.....	NNP
Nurse Practitioner.....	NP

Pharmacy Services

Certified Pharmacy Technician.....	Cert Pharm Tech
Clinical Pharmacist.....	Clin Pharm
Doctor of Pharmacy.....	Pharm D
Intravenous Pharmacist.....	IV Pharmacist
Intravenous Pharmacy Tech.....	IV Tech, IV Pharm Tech
Pharmacy.....	Pharm
Registered Pharmacist.....	RPh

Physician and Physician Extenders

Doctor of Osteopathy.....	DO
Medical Doctor.....	MD
Physician Assistant.....	PA
Resident Physician.....	Resident
Physician Intern.....	Intern
Medical Student	

Departments	Abbreviation
<i>Radiology Services</i>	
Computerized Tomography Technologist.....	CT Tech
Magnetic Resonance Imaging Technician.....	MRI Tech
Mammography Technician.....	MMO Tech, Mammo Tech
Nuclear Medical Technologist.....	Nuc Med Tech
Radiation, Radiologic or Radiological Technologist or Technician.....	Rad Tech, RT
Special Procedures Technologist.....	Spec Proc Tech
<i>Rehabilitative Services</i>	
Athletic Trainer.....	AT
Certified Occupational Therapist Assistant.....	Cert OT Asst, COTA, OTA, OTAC
Occupational.....	Occ
Occupational Therapist Registered.....	OTR, OT
Physical Therapist.....	PT, RPT
Speech Language Pathologist.....	SLP
<i>Respiratory Therapy Services</i>	
Certified Respiratory Therapist/Technician.....	Cert Resp Ther/ Tech, CRTT
Respiratory.....	Resp
Registered Respiratory Therapist.....	Reg Resp Ther, RRT

Social Services

Licensed Bachelor Social Worker.....	LBSW, BSW
Licensed Independent Social Worker.....	LISW
Licensed Master Social Worker.....	LMSW, MSW
Licensed Professional Counselor.....	LPC
Social Worker.....	SW

Other Departmental Abbreviations

Behavioral.....	Behav
Emergency Department.....	ED or spell out
Emergency Trauma Center.....	ETC
Endoscopy.....	Endo
Home Health.....	HH
Neurophysiology.....	Neuro
Occupational Health.....	Occ Hlth
Oncology.....	Onc
Operating Room.....	OR
Orthopaedic.....	Ortho
Pathology.....	Path
Pediatric.....	Ped
Pulmonary.....	Pulm

Advance Directives

Living Will and Healthcare Power of Attorney

A copy of this is also available in Spanish.

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WHAT IS AN ADVANCE DIRECTIVE?

An advance directive is a legal document that tells your doctor what treatments you may or may not want if you are no longer able to make decisions for yourself or you are no longer capable of communicating your wishes.

WHO SHOULD HAVE AN ADVANCE DIRECTIVE?

Anyone who is legally competent and over the age of 18 has the legal right to make an advance directive.

WHAT IF I AM PREGNANT?

South Carolina law requires that life-saving treatment be CONTINUED while you are pregnant.

WHAT ARE THE LEGAL ADVANCE DIRECTIVE DOCUMENTS IN SOUTH CAROLINA?

Healthcare Power of Attorney – A Healthcare Power of Attorney is a document in which you give another person (“your agent”) the power to make decisions related to your healthcare if you cannot speak for yourself and also allows you an opportunity to express your desires regarding future medical decisions.

Living Will – This form allows you to express your wishes regarding the use or withholding of life-sustaining procedures, including artificial nutrition and hydration, in the event you are diagnosed with a terminal condition or are in a state of permanent unconsciousness and in the further event that you are incapacitated or otherwise unable to express your desires. The statutory form for this purpose is called a “Declaration of a Desire for a Natural Death.” This document is commonly referred to as a “living will.”

WHAT IF I CHANGE MY MIND?

You can revoke your Advance Directive at any time while you are competent by informing your agent, your doctor, destroying your

Advance Directive, or writing revoked across your Advance Directive. Be sure to tell anyone who has a copy of your advance directive and, if you are in the hospital, tell your doctor or nurse so that the hospital can make a note in the chart containing a copy of your advance directive

WILL A HOSPITAL HONOR AN ADVANCE DIRECTIVE FROM ANOTHER STATE?

Yes, if it: (i) complies with the South Carolina Advance Directive requirements, (ii) was executed in another state where you were a resident and the execution complied with the law of that state or (iii) complies with the requirements for a military power of attorney.

WHO SHOULD HAVE A COPY OF MY ADVANCE DIRECTIVE?

You should always give one to a family member, your doctor, your agent and your attorney. **ALWAYS BRING A COPY WHEN YOU ARE ADMITTED TO THE HOSPITAL.**

WHAT IS OUR FACILITIES' POLICY ABOUT ADVANCE DIRECTIVES?

Our facilities will honor a patient's Advance Directives according to South Carolina law and will not condition the provision of care or otherwise discriminate against a patient based on whether or not the individual has executed an Advance Directive.

HOW CAN I FORMULATE AN ADVANCE DIRECTIVE IF I AM ALREADY IN THE HOSPITAL?

You can contact the Pastoral Care Office in your hospital.

NOTE: *The Patient Self-Determination Act is a Federal law that requires hospitals to ask each patient if they have an Advance Directive. This law also requires that patients be given Advance Directive information.*

Roper St. Francis Healthcare is committed to providing the care and service that meets our patients' needs and expectations. If you have any concerns about patient care and safety at Roper St. Francis Healthcare, please contact your nurse, your doctor, the hospital administration, the risk manager or the compliance officer.

If we are not resolving concerns to your satisfaction, you may contact:

Mail:

The Joint Commission
One Renaissance Blvd., Oakbrook, IL 60181

To report a patient safety event or concern about a health care organization to the Joint Commission:

(630) 792-5636 **F**
patientsafetyreport@jointcommission.org

Other agencies that you have the right to contact, without penalty:

Carolinas Center for Medical Excellence (Quality Improvement
Organization for Center for Medicare Services)
246 Stoneridge Drive Suite 200
Columbia, SC 29210
(800) 922-3089 | (803) 212-7600 **F**
www.thecarolinascenter.org

SC Department of Health and Environmental Control (DHEC)
Division of Health Licensing
2600 Bull Street
Columbia, SC 29201
(803) 545-4370
www.scdhec.com