

# Johns Hopkins Medicine

Johns Hopkins Community Physicians

Johns Hopkins Regional Physicians

Johns Hopkins University School of Medicine

## Patient Rights and Responsibilities

To promote patient safety, we encourage you to speak openly with your health care team, be well-informed, and take part in care decisions and treatment choices. Join us as active members of your health care team by reviewing the rights and responsibilities listed below for patients and patient representatives.

### You or your designee have the right to:

#### Respectful and Safe Care

- 1 Be given considerate, respectful and compassionate care.
- 2 Have a family member/friend and your doctor notified when you are admitted, transferred or discharged from the hospital or emergency department.
- 3 Be given care in a safe environment, free from abuse and neglect (verbal, mental, physical or sexual).
- 4 Know the names and roles of your health care team.
- 5 Have your culture and personal values, beliefs and wishes respected.
- 6 Be treated without discrimination based on race, color, national origin, age, gender, sexual orientation, gender identity or expression, physical or mental disability, religion, ethnicity or language.
- 7 Be given a list of protective and advocacy services, when needed. These services help certain patients (e.g., children, elderly, disabled) exercise their rights and protect them from abuse and neglect.
- 8 Ask for an estimate of charges before care is provided.

#### Effective Communication and Participation in Your Care

- 9 Get information in a way you prefer and clearly understand (examples: sign language, vision assistance, language interpretation). These services will be provided free of charge.
- 10 Get information from your doctor/provider about:
  - Your diagnosis
  - Your test results
  - Outcomes of care
  - Unanticipated outcomes of care
- 11 Be involved in your plan of care and treatment.
- 12 Involve your family in decisions about care.
- 13 Ask questions and get a timely response to your questions or requests.
- 14 Have your pain assessed and addressed.
- 15 Refuse care.
- 16 Have someone with you for emotional support, unless that person interferes with your or others' rights, safety or health.
- 17 Ask for and be provided a chaperone during exams, tests or procedures.
- 18 Choose your support person and visitors, and change your mind about who may visit.
- 19 Select someone to make health care decisions for you if at some point you are unable to make those decisions (and to have all patient rights apply to that person).

#### Informed Consent

- 20 Give permission (informed consent) before any nonemergency care for procedures requiring informed consent, including:
  - Risks and benefits of your treatment
  - Alternatives to that treatment
  - Risks and benefits of those alternatives
- 21 Agree or refuse to be part of a research study without affecting your care.
- 22 Agree or refuse to allow pictures, videos, or voice recordings for any other reason than your personal care.

#### Privacy and Confidentiality

- 23 Have privacy and confidential treatment and communication about your care.
- 24 Be given a copy of the HIPAA Notice of Privacy Practices.

#### Complaints and Grievances

- 25 Complain and have your complaint reviewed without affecting your care. If you have a problem or complaint, you may talk to your doctor, a practice administrator/manager, nurse manager or a department manager.
- 26 For any complaints or concerns please contact:
  - Johns Hopkins Community Physicians (JHCP):  
410-735-4093  
jhcpfeedback@jhmi.edu
  - Johns Hopkins Regional Physicians (JHRP):  
410-955-2273  
patientrelations@jhmi.edu
  - School of Medicine (SOM):  
JHUpracticefeedback@jhmi.edu
- 27 To address discrimination concerns, you may also file a civil rights complaint with the U.S. Department of Health and Human Services:  
Office for Civil Rights  
200 Independence Ave., SW  
Room 509F, HHH Building  
Washington, DC 20201  
1-800-368-1019, 1-800-537-7697 (TDD)  
OCRMail@hhs.gov  
Complaint forms are available at:  
<http://www.hhs.gov/ocr/office/file/index.html>



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### You have the responsibility to:

- 1 Provide accurate and complete information about your health, address, telephone number, date of birth, insurance carrier and employer.
- 2 Notify us if you cannot keep your appointment.
- 3 Be respectful of your health care team, from the doctors, nurses and technicians to the people who deliver your meals and the cleaning crew.
- 4 Be considerate in language and conduct of other people and property, including being mindful of noise levels, privacy and number of visitors.
- 5 Be in control of your behavior if feeling angry.
- 6 Provide us with a copy of your advance directive.
- 7 Ask questions if there is anything you do not understand.
- 8 Report unexpected changes in your health.
- 9 Follow clinic rules.
- 10 Take responsibility for your care.
- 11 Understand the consequences of refusing care.
- 12 Leave valuables at home.
- 13 Keep all information about staff or other patients private.
- 14 Do not use cellphones/other devices to take pictures, videos or recordings without permission from staff.
- 15 Submit payments in a timely manner or contact us to discuss your financial obligations.

