

Patients' Rights IN CALIFORNIA

You have the right to...

- 1 Exercise these rights** without regard to sex, age, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation, gender identity or marital status, or the source of payment for care.
- 2 Considerate and respectful care.**
- 3 Know the name of the physician** who has primary responsibility for coordinating your care and the names and professional relationships of other physicians and nonphysicians who will see you.
- 4 Receive information** about your illness, your course of treatment, and prospects for your recovery in terms that you can understand.
- 5 Receive as much information** about any proposed treatment or procedure as you may need in order to give informed consent or to refuse this course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved in this treatment, alternate courses of treatment or nontreatment and the risks involved in each, and to know the name of the person who will carry out your procedure or treatment.
- 6 Participate actively in decisions** regarding medical care. To the extent permitted by law, this includes your right to refuse treatment.
- 7 Full consideration of privacy** concerning your medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. You have the right to be advised of the reason for the presence of any individual.
- 8 Confidential treatment** of all communications and records pertaining to your care and your stay in the hospital. Written permission shall be obtained before your medical records can be made available to anyone not directly concerned with your care.
- 9 Reasonable responses** to any reasonable requests you make for service.
- 10 Leave the hospital,** even against the advice of physicians.
- 11 Reasonable continuity of care** and to know in advance the time and location of your appointments as well as the identity of persons providing your care.
- 12 Be advised** if hospital/personal physician proposes to engage in or perform human experimentation affecting care or treatment. You have the right to refuse to participate in such research projects.
- 13 Be informed** of continuing health care requirements following your discharge from the hospital.
- 14 Examine and receive an explanation** of your bill regardless of source of payment.
- 15 Know which hospital rules and policies apply** to your conduct while you are a patient.
- 16 Have all patients' rights apply** to the person who may have legal responsibility to make decisions regarding medical care on your behalf.
- 17 Designate visitors** of your choosing, if you have decision-making capacity, whether or not the visitor is related by blood or marriage, unless:
 - No visitors are allowed.
 - Our medical facility reasonably determines that the presence of a particular visitor would endanger your health or safety, or the health and safety of a member of our medical facility staff or other visitor to our medical facility; or would significantly disrupt the operations of the facility.
 - You have indicated to our medical facility staff that you no longer want this person to visit.
- 18 Have your wishes considered** for purposes of determining who may visit if you lack decision-making capacity, and to have the method of that consideration disclosed in the medical facility policy on visitation. At a minimum, our medical facility shall include any persons living in your household.
- 19 The above information** may not be construed to prohibit a health facility from otherwise establishing reasonable restrictions upon visitation, including restrictions upon the hours of visitation and number of visitors.

Adapted from California Code of Regulations, Title 22, Section 70707. For detailed information about your rights to privacy, please refer to your Notice of Privacy Practices and your hospital patient handbook.

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If you have concerns regarding your hospital care or services, you may contact the staff providing your care, or file a complaint with the California Department of Public Health, Licensing and Certification Division at: **Insert Local CDPH address and phone number.** (XXX) XXX-XXXX (Red text changed to black when information is inserted)