

- PFR.8.8 The hospital respects patients' demands and needs including their preferences in personal issues such as food, drink, clothing, and self-care.

PFR.9 The hospital informs patients, and families as appropriate, of the outcome of care.

- PFR.9.1 The hospital has a defined process for informing patients, and families as appropriate, of the outcome of care including adverse events or unanticipated negative outcomes.
- PFR.9.2 The disclosure process is documented in the patient's medical record.

PFR.10 Informed consent is obtained prior to high risk treatments/procedures.

- PFR.10.1 The hospital has a policy and form(s) for obtaining the informed consent from the patient or a legal representative prior to starting high risk treatments and procedures.
- PFR.10.2 The informed consent process includes explanation of the nature of the treatment or procedure, expected benefits and risks, alternative courses of action, and the likely consequences of not undergoing the treatment.
- PFR.10.3 The informed consent is always obtained before any invasive surgery/ procedure, sedation/ anesthesia, and transfusion of blood and blood components.
- PFR.10.4 The hospital identifies a list of high risk treatments and procedures that require informed consent including, but are not limited to, the following:
- PFR.10.4.1 Endoscopy (e.g., colonoscopy, bronchoscopy, cystoscopy, J-tube placement, nephrostomy).
 - PFR.10.4.2 Biopsy (e.g., bone marrow, breast, liver, kidney, prostate).
 - PFR.10.4.3 CT examination with contrast.
 - PFR.10.4.4 MRI examination with or without contrast.
 - PFR.10.4.5 Invasive radiological procedures (e.g., angiography, angioplasty, drainage of an abscess under CT guidance).
 - PFR.10.4.6 Percutaneous aspiration of body fluids or air through the skin (e.g., arthrocentesis, bone marrow aspiration, lumbar puncture, chest tube, paracentesis).
 - PFR.10.4.7 Epidural injections and anesthesia.
 - PFR.10.4.8 Treatment with chemotherapy and radiation oncology procedures.
 - PFR.10.4.9 Use of radio-active material.
 - PFR.10.4.10 Central line placement.
- PFR.10.5 When a patient is incapable of giving informed consent (e.g., minors or mentally incompetent patients), consent is sought from the patient's next of kin or guardian.

PFR.11 The hospital has a policy to deal with patients who refuse or discontinue the treatment.

- PFR.11.1 There is a policy and procedure that addresses the patient's right to refuse or discontinue treatment offered.
- PFR.11.2 The consequences of treatment refusal are explained to the patient.
- PFR.11.3 Patients are informed about available care and treatment alternatives.
- PFR.11.4 Whenever appropriate, family members are involved in the process.
- PFR.11.5 Patient and family choices are respected.
- PFR.11.6 The relevant discussion is documented in the patient's medical record.