

17685 TOMBALL PARKWAY HOUSTON, TX 77064 PHN: 832-779-5433 FAX: 832-604-5433

3820 NORTH SHEPHERD DR. SUITE A. HOUSTON, TX 77018 PHN: 281-766-8911 FAX: 832-742-9896 Patient Label

*PLEASE PRINT FRONT AND BACK

PATIENT'S RIGHTS AND RESPONSIBILITIES

Lifesavers Emergency Room Patients have the right to:

- be informed of their rights and responsibilities
- have a family member, chosen representative and/or their physician promptly of arrival to the Life Savers Emergency Room
- receive treatment and medical services without discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, or gender identity or expression.
- be treated with consideration, respect, and recognition of their individuality.
- be informed of the names and functions of all physicians and other healthcare professionals providing their direct care.
- Receive the services of a translator or interpreter to facilitate the communication between the patient and the hospital's healthcare professionals.
- Receive visitors that they designate, including, but not limited to, a domestic partner (including a same-sex domestic partner), another family member, or a friend, and they have the right to withdraw or deny this visitation consent at any time.
- participate in the development and implementation of their plan of care as well as make informed decisions regarding their care.
- be informed of their health status, involved in care planning and treatment, and allowed to request or refuse treatment.
- be included or to refuse to be included in experimental research.
- Have a full explanation if they are being transferred to another facility.
- be informed if the hospital has authorized other institutions to participate in their treatment. Patients have the right to know the identity and function of theses institutions, and to refuse to allow the institutions to participate in their treatment.
- formulate advance directives and have physicians and other healthcare professionals comply with these directives.
- be informed by their physician and other health care professionals about any continuing health care requirements after their discharge.
- receive assistance from their physician and other healthcare professionals about any continuing healthcare requirements after their discharge.
- receive assistance from their physician and appropriate healthcare professionals in arranging for required follow-up care.
- have their medical records kept confidential as well as have access to their medical records within a reasonable time frame.
- be free from all forms of abuse and harassment.
- receive care in a safe setting.
- examine and receive an explanation of their bill and may receive information relating to financial assistance available.
- be informed in writing about the hospital's policies and procedures for initiation, review and resolution of patient complaints, including the address and telephone number of where to file complaints with the Department of Health and Human Services.

Patients have the responsibility to

• provide information, follow instructions, follow the facility's rules and regulations, ask questions and meet financial obligations.

Should you have a complaint or grievance related to Life Savers Emergency Room, you may request to speak with the facility's Patient Representative or Administrator

if your complaint is not resolved to your satisfaction, you may contact:			
Department of State Health Health Facility Compliance Texas Department of State H	Group (MC 1979)	Complaint hotline: (888) 973-0022	
Patient Signature		Date	
Signed behalf of patient	Relationship		Date