

# PATIENT RIGHTS & RESPONSIBILITIES

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Welcome to the University of Chicago Medicine (UCM).  
We share with you your rights and responsibilities as our patient.

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## **As our patient, you have the right to:**

### **Patient Rights**

- no person shall be refused admission or treatment on the basis of his or her race, ethnicity, culture, language, color, age, sex, sexual orientation, gender identity or expression, physical or mental disability, socioeconomic status, national origin, marital status, veteran status, religion, or any other classification protected by applicable law.

### **Quality Health Care**

- receive quality health care, regardless of race, ethnicity, culture, language, color, age, sex, sexual orientation, gender identity or expression, physical or mental disability, socioeconomic status, national origin, marital status, veteran status, religion, or any other classification protected by applicable law, and to be treated with dignity and courtesy.
- receive foreign language or sign language interpretation or other reasonable accommodation of special needs or disabilities.
- access protective and advocacy services and receive pastoral care and/or spiritual services.
- request and participate in an Ethics consultation.
- request a second opinion or consultation from another physician as well as to request a transfer to another health care facility.

### **Information about Your Health Care Team and Treatment**

- receive information about diagnosis and treatment plans, in language easily understood, including risks and benefits, and with an explanation of any alternatives, to be able to make an informed decision.
- know the names and professional responsibilities of your health-care team and the role they perform in your care.
- receive information about the outcomes of care, treatment and services, including unanticipated outcomes.
- be informed about continuing health care requirements -- such as return visits -- following hospital treatment.
- receive an explanation for, and alternatives to, a proposed transfer, if a transfer to another facility becomes necessary.
- receive written notice of your rights upon admission or as soon thereafter as practicable.
- understand that you may receive separate bills for UCM hospital and physician services and obtain a reasonable explanation of such bills, including an itemization of charges.

### **Make Informed Decisions**

- participate in the development and implementation of your plan of care and treatment.
- provide informed consent to, or to refuse, medical treatment to the extent allowed by law.
- formulate advance directives (with the right to amend or revoke your advance directive at any time) and have hospital staff and practitioners who provide care at UCM comply with those directives, including end-of-life wishes. UCM will provide you with information about advance directives, including statutory living wills or powers of attorney as requested.
- have a family member or representative and your physician notified promptly upon your admission to the hospital.

***Please see reverse side.***

- participate voluntarily in research projects, the possible risks and consequences fully explained in advance, and for which informed consent will be requested.

### **Be Safe and Comfortable**

- receive information about pain relief measures and to access appropriate pain assessment and pain management by dedicated pain control specialists.
- be free from restraints of any form that are not medically necessary or not used to prevent harm to self or others, or are used as a means of coercion, discipline, convenience or retaliation by staff.
- receive care in a safe setting, free from all forms of abuse or harassment.

### **Privacy**

- have personal privacy respected and confidentiality of medical records maintained.
- request restrictions or limitations on the medical information UCM uses or discloses about you and to receive confidential communications from UCM.
- examine and copy your medical record within a reasonable time frame after discharge, and request amendment to your health information and an accounting of disclosures.
- consent to, or refuse to consent to, being filmed or recorded without such a decision affecting the health care received.
- receive visitors, mail and telephone calls as long as they do not interfere with treatment.

### **Be Heard**

- file a grievance by either verbally contacting or writing to the UCM Patient and Family Insights Department, any UCM representative, or the UCM Hospital Operations Administrator on Call (HOA) at 773-702-1000, page 7500. You or your representative may also directly file a grievance with the Illinois Department of Public Health (“IDPH”) at 525 W. Jefferson St., Springfield, IL 62761-0001, fax (217) 524-2913 or telephone (800) 252-4343. TTY—(hearing impaired use only) (800) 547-0466; and The Joint Commission at One Renaissance Blvd., Oakbrook Terrace, IL 60181, telephone (800) 994-6610 or email at [complaint@jointcommission.org](mailto:complaint@jointcommission.org). If you are a Medicare beneficiary, you or your representative may file a grievance regarding the quality of care or coverage decisions, or appeal a premature discharge with KEPRO (a Medicare-approved Quality Improvement Organization (“QIO”) at 855-408-8557 or email complaints to [beneficiary.complaints@hcqis.org](mailto:beneficiary.complaints@hcqis.org).

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## **Patients have the responsibility to:**

- notify a family member or representative if you have established an advanced directive and to notify caregivers upon your admission to UCM.
- provide accurate and complete information about your present condition and past medical history to your physician.
- follow the treatment plan and notify your physician or nurse of changes in your health.
- ask questions to clarify understanding.
- express concerns and /or disagreement with health care recommendations and accept responsibility for health care decisions.
- ask for pain relief intervention when pain first begins and discuss pain management options to assist in developing an appropriate pain management plan.
- keep appointments for follow-up care or notify the clinic in advance if a cancellation is necessary.
- be considerate of other patients; respect their privacy and property.
- provide UCM with complete and accurate financial information and comply with agreed-upon payment arrangements.