Respecting the unique individuality of every patient is a major goal of Springfield Hospital Center. To attain this goal, we have determined that the rights and responsibilities of every patient should be protected and preserved.

**You Have The Right:**

To be informed of the rules and regulations as they apply to your conduct.

To expect privacy and dignity in treatment consistent with providing you with good medical and psychiatric care.

To receive considerate, respectful care at all times and under all circumstances.

To expect prompt and reasonable responses to your questions.

To know who is responsible for authorizing and performing your procedures or treatments.

To know the identity and professional status of your care giver.

To know what patient support services are available, including access to an interpreter if language is a problem.

To have access to your medical record according to Hospital Policy.

To be informed of the nature of your condition, proposed treatment or procedure, risks, benefits and prognosis, and any continuing health care requirements after your discharge in terms you can understand.

To be informed of medical alternatives for care or treatment.

To refuse treatment, except as otherwise provided by law, and to be informed of the consequences of your action.

To receive impartial access to medical treatment or accommodations regardless of race, sex, creed, sexual orientation, national origin, religion, physical handicap, or sources of payment.

To know if the medical treatment prescribed is for experimental purposes and to give your written consent to participate if you choose.

To participate in the decision-making process related to the plan of your care.

To have access to professionals to assist your with emotional and/or spiritual care.

To exercise your cultural values and spiritual beliefs as long as they do not interfere with the well-being of others, or the planned course of any medical care.

To participate in the discussion of ethical issues that arise.

To express concerns regarding any of these rights in accordance with the grievance process.

To formulate advance directive and appoint a surrogate to make health care decisions on your behalf to the extent permitted by law.

**You Are Responsible For:**

Providing accurate and complete information about present and past medical conditions and all other matters pertaining to your health.

Reporting unexpected changes in your condition to your health care providers.

Informing your health care provider whether or not you understand the plan of care and what is expected of you.

Following the treatment plan recommended by your health care provider.

Keeping appointments and, if you cannot, notifying the proper person.
Knowing the consequences of your own actions if you refuse treatment or do not follow the health care provider’s instructions.

Being considerate of the rights of other patients and hospital personnel and to follow hospital policy and regulations affecting care and conduct.

We welcome your comments. If you have concerns about the care you or your family member have received, we encourage you to speak with your physician or with the supervisor of the area you are in. If you are uncomfortable or cannot resolve your concerns. Please feel free to contact one of our professionals in the Performance Improvement Department at (410) 970-7040. If you urgently need to reach us, please call the hospital operator at (410) 970-7000 and request that the appropriate person contact you.