

Cowlitz Indian Tribe Health & Human Services – Patient Rights and Responsibilities

Patient Rights

1. You have the right to safe, high quality medical care without discrimination that is compassionate and respects your personal dignity, values, and beliefs.
2. You have the right to participate and make decisions about your care and pain management including refusing care to the extent permitted by law. Your care provider will explain to you the medical consequences of refusing recommended treatments.
3. You have the right to have your illness, treatment, pain, alternatives, and likely outcomes explained to you in a manner you can understand including provision of interpretation services if needed.
4. You have the right to know the name and title of your health care providers. At your request, you have the right to a second opinion.
5. You have the right to request that a family member, friend, or outside physician be notified that you are under the care of this facility.
6. You have the right to be informed if your care will be provided by another organization or facility including an explanation of alternatives to a transfer.
7. You have the right to know about the policies used by the organization that may affect your care and treatment.
8. You have the right to participate in, or decline to participate in, research studies. You may decline participation without compromising your access to care, treatment, or services.
9. You have the right to private and confidential treatment, communications, and patient records as permitted by law.
10. You have the right to receive information concerning advance directives (living wills, power of attorney, and mental health advance directives) and these will be respected during treatment to the extent permitted by law.
11. You have the right to access your personal medical records within a reasonable timeframe to the extent permitted by law.
12. You have the right to be informed of charges and receive counseling on the availability of known financial resources for your health care.
13. You have the right to be free from abuse including accessing advocacy or protective service agencies.
14. You have the right to voice compliments, concerns, or complaints without compromising your access to care, treatment, or services. (For concerns/complaints/grievances please see the Patient/Client Grievance Policy.)
15. You have the right to change providers if other qualified providers are available.
16. You have the right to refuse observation or treatment by student or other non CITHC credentialed provider.

Patient Responsibilities:

1. You are responsible for providing accurate and timely information about your health, any medications, including over-the-counter products and dietary supplements, and any allergies or sensitivities, and insurance benefits.
2. You are responsible for asking our health care provider if you do not understand the medical terminology being used or instructions relating to your plan of care.
3. You are responsible for following your plan of care. If you are unable or unwilling to follow this plan, you are responsible for informing your health care provider. The provider will then explain the medical consequences of not following the recommended treatment and you are responsible for any outcomes related to not following your plan of care.
4. You are responsible for following the rules, regulations, and policies of the facility.
5. You are responsible for acting in a manner that is respectful to other patients, staff, and Tribal property.
6. You are responsible for meeting your financial obligations to the facility.