PATIENT
BILL OF RIGHTS

NORTH SHORE MEDICAL CENTER

NSMC Salem Hospital
NSMC Union Hospital
MassGeneral for Children at North Shore Medical Center
PATIENT’S BILL OF RIGHTS

We, your health care team, promise to preserve your individual rights listed here and ask for your cooperation. We also ask you and your visitors to understand your responsibilities as a patient of North Shore Medical Center (NSMC) and to be considerate of the rights of others.

As a patient at NSMC, you have these rights:

Care and Treatment:

- To be involved in all aspects of your care and treatment.
- To equitable, considerate, respectful care that includes consideration of your psychosocial, spiritual, cultural and personal values and beliefs.
- To know the identity and specialty of individuals involved in your care. To refuse to be observed, examined, or treated by students or by any other staff without jeopardizing your access to medical care.
- For patients suffering from any type of breast cancer, to receive information on all alternative treatments which are medically viable.
- To receive prompt, life-saving treatment without delay and to receive the most appropriate medical treatment and care available without regard to your economic status or the source of payment.
- To make decisions about the plan of care prior to and during the course of treatment and to refuse treatment to the extent permitted by law and NSMC policy, and to be informed of the medical consequences of this action. This includes limitation of life sustaining treatment, for example withholding or withdrawing life sustaining measures.
- To include or exclude any or all family members from participating in your health care decisions.
- To consult with specialists (in addition to any already involved in your plan of care) at your own request and expense.
- To expect a reasonable response to requests for appropriate and medically indicated care and services, within the capacity of NSMC.
- To expect that your pain and symptoms will be assessed and treated with the goal of minimizing your experience of pain and discomfort, to the extent clinically possible.
- For dying patients, to care which optimizes dignity through the treatment of symptoms (as desired by you or your Health Care Proxy), the management of pain, and the acknowledgement of psychosocial and spiritual concerns of you and your family.
- To expect reasonable continuity of care, and to be informed by physicians and other caregivers of available and realistic patient care options when hospital care is no longer appropriate.
- To participate or have your designated representative participate in the consideration of ethical issues which arise in your care.
- To exercise cultural and spiritual beliefs that do not interfere with the well being of others.
- To receive medically and factually accurate information prepared by the Commissioner of Public Health about emergency contraception if you are a female rape victim and of
childbearing age, to be promptly offered emergency contraception; and to be provided with emergency contraception upon request.

**Choice:**
- To request that another physician treat you in the event that you are not satisfied with the medical treatment you are receiving from a particular physician. However, the physician is free to accept, or not accept, the transfer of your care to him/her and must have the benefit of complete information and explanation concerning the risks, benefits, and alternatives to transferring your care to another physician.
- To transfer to another facility when medically appropriate or upon your request if medically viable. However, the receiving facility must first accept the transfer, and you must also have the benefit of complete information and explanation concerning the risks, benefits, and alternatives to such transfer.

**Consent:**
- To received adequate explanation of your health problems, the proposed treatment, and the risks and benefits of treatment, so that you may give voluntary and informed consent. You also have the right to have your questions answered and long term financial implications of treatment choices explained, in so far as they are known, except in emergency situations.
- To designate an agent to make health care decisions for you in the event you can no longer make or communicate such decisions (Health Care Proxy, Living Will, and Durable Power of Attorney for health care decisions or advance directives).
- To refuse to serve as a research subject, and to refuse any care or examination when the primary purpose is educational or informational rather than therapeutic. A patient who accepts participation has the right to have the proposed studies fully explained prior to consent. A patient who declines participation is nonetheless entitled to the most effective care that the NSMC can provide.

**Information:**
- To obtain from physicians and other caregivers, relevant and current information that you can reasonably be expected to understand. When it is not medically possible to provide you with such information, the information should be made available to an appropriate person on your behalf.
- To obtain from a person designated by the NSMC, a copy of any rules and regulations of NSMC which apply to your conduct as a patient.
- To review and obtain, upon request, a copy of your medical record for a reasonable fee and within a reasonable timeframe. To have such information explained or interpreted as necessary, except when restricted by law.
- To be informed of NSMC policies and practices that relate to patient care, treatment or responsibilities.
- To be informed of available resources for resolving disputes, grievances and conflicts, such as the Customer Service Department, or other methods available within NSMC.
- To receive from a person designated by the NSMC, upon request, any information that the facility has relative to financial assistance, payments and free care.
To receive, upon request, a copy of an itemized bill or statement of charges submitted to a third party payor.

To notification, upon request, of your eligibility for reimbursement by any third party payor for the cost of your care.

To obtain, upon request, an explanation as to the relationship, if any, between the NSMC and any other health care institution, facility, or educational institution as long as said relationship relates to care or treatment.

To receive competent interpreter services and other aids to communication when seeking health care at the NSMC.

Privacy and Confidentiality:

To privacy during medical treatment or other rendering of care within the capacity of the NSMC.

To confidentiality of all medical, financial, and other information related to your care. You may refuse release of medical records to any individual outside the NSMC except in the case of patient transfer to a healthcare facility or as required by law or third party payment contract and regulatory or accrediting agencies.

To transfer to another room, upon availability, if another patient or visitors in your room are unreasonably disturbing you.

Safety:

To expect reasonable safety insofar as the NSMC practices and environment are concerned.

To report concerns about your safety or that of others. Family members may also report concerns for your safety.

To be free from any form of restraints that are medically unnecessary or used as a means of coercion, discipline, convenience, or retaliation by staff. A restraint may only be used if needed to protect you and/or others from harm and only if less restrictive interventions have been determined to be ineffective. This right does not apply to patients who are prisoners of local, state, or federal law enforcement agencies or correctional facilities.

As a patient, you have these Responsibilities:

To provide accurate and complete information about your present symptoms, past illness including pain and response to treatment, hospitalizations, medications, and other matters relating to your health.

To report unexpected changes in your condition to those responsible for your care.

To tell us if you do not understand the proposed plan of care and what is expected of you.

To follow the treatment plan recommended by the practitioner primarily responsible for your care.

To accept responsibility for your actions if you refuse treatment or do not follow your practitioner’s instructions.

To assure the financial obligations of your health care are fulfilled as promptly as possible; to give the NSMC all necessary information we will need about the payment of your care.
• To follow NSMC rules and regulations affecting patient care and conduct, including the No Smoking Policy.
• To be considerate of the rights of other patients and NSMC personnel by assisting with the control of noise and number of visitors.
• To respect the property of others and of the NSMC.
• To ask questions if you do not understand instructions given to you at discharge about the treatment plan that you will use at home, including the medications that you will take and the activities that you can perform.

**Notice of Non-discrimination:**
In accordance with state and federal laws and regulations, NSMC does not discriminate on the basis of race, color, national origin, handicap, gender, age in admission or access to, or to treatment or decision regarding advance directives (Health Care Proxy) or employment in its programs and activities.

**Health Care Proxy:**
The Health Care Proxy is a simple legal document that allows you to name someone you know and trust to make health care decisions for you if, for any reason and at any time, you become unable to make or communicate those decisions. If you would like more information or assistance completing the Health Care Proxy, please speak with a member of your healthcare team.

**Interpreter Services:**
The mission of the Interpreter Services/Community Outreach Department is to act as a bridge between the community and the North Shore Medical Center network.

To reach an interpreter for any language, call 781-477-3882. We have the following languages available on staff:

- Spanish
- Portuguese
- Russian
- Cambodian (Khmer)
- French
- Haitian Creole
- Vietnamese
- **American Sign Language (ASL)** for hearing impaired patients

We will arrange interpreters for other languages needed.

**Grievances, Complaints, and Compliments:**
The Patient and Family Relations Department oversees patient satisfaction at NSMC. The Patient and Family Relations staff acts as a liaison between the patient and the hospital in their expressions of commendation or dissatisfaction and facilitate(s) the response necessary to assure all parties are treated with respect.
The following is a list of available resources for patients and families if they have a concern regarding the quality of service and care received or their safety within NSMC.

**Patient and Family Relations**  
NSMC  
81 Highland Avenue  
Salem, MA 01970  
978-354-2025

The agencies listed below are also available to provide additional assistance to patients and families with concerns about their services and care.

**Massachusetts Department of Public Health**  
Division of Healthcare Quality  
99 Chauncy Street, 2nd floor  
Boston, MA 02111  
800-462-5540

**Massachusetts Board of Registration in Medicine**  
200 Harvard Mill Square, Ste. 330  
Wakefield, MA 01880  
Consumer hotline: 800-377-0550

**The Joint Commission**  
One Renaissance Boulevard  
Oakbrook Terrace, IL 60181  
Complaint hotline: 800-994-6610 or complaint@jointcommission.org  
Customer Service: 630-792-5800 or customerservice@jointcommission.org