

Memphis Center for Reproductive Health

Patient Rights and Responsibilities

Thank you for trusting the Memphis Center for Reproductive Health (MCRH) to serve your reproductive health care needs. We want to encourage you, as a patient at MCRH, to speak openly with your health care team, take part in your treatment choices, and promote your own safety by being well informed and involved in your care. Because we want you to think of yourself as a partner in your care, we want you to know your rights as well as your responsibilities. If you have questions, problems, safety concerns, or unmet needs, please let us know.

Patient Rights

- You have the right to receive considerate, respectful and compassionate care in a safe setting regardless of your age, gender, race, national origin, religion, body size, sexual orientation, gender identity, or disabilities.
- You have the right to receive care in a safe environment free from all forms of abuse, neglect, or mistreatment.
- You have the right to be called by your proper name and to be in an environment that maintains dignity and adds to a positive self-image.
- You have the right to be told the names of your medical practitioners, nurses, and all health care team members directing and/or providing your care.
- You have the right to be told by your medical practitioner about your diagnosis and possible prognosis, the benefits and risks of treatment, and the expected outcome of treatment, including unexpected outcomes.
- You have the right to be free from restraints and seclusion in any form that is not medically required.
- You can expect full consideration of your privacy and confidentiality in care discussions, exams, and treatments. You may ask for an escort during any type of exam.
- You have the right to access protective and advocacy services in cases of abuse or neglect.
- You, and family, and friends with your permission, have the right to participate in decisions about your care, treatment and services provided, including the right to refuse treatment to the extent permitted by law. If you leave the facility against the advice of your medical practitioner, the facility and medical practitioners will not be responsible for any medical consequences that may occur.

- You have the right to communication that you can understand. MCRH will work with you to provide the best form of communication for your needs. Information given will be appropriate to your age, understanding, and language.
- You have the right to make an advance directive, appointing someone to make health care decisions for you if you are unable. If you do not have an advance directive, we can provide you with information and help to complete one.
- You have the right to be involved in your discharge plan. You can expect to be told in a timely manner of the need for planning your discharge or transfer to another facility or level of care. Before your discharge, you can expect to receive information about follow-up care that you may need.
- You have the right to receive detailed information about your medical charges.
- You can expect that all communication and records about your care are confidential, unless disclosure is permitted by law. You have the right to see or get a copy of your medical records. You have the right to request a list of people to whom your personal health information was disclosed.
- You have the right to give or refuse consent for recordings, photographs, films, or other images to be produced or used for internal or external purposes other than identification, diagnosis, or treatment. You have the right to withdraw consent up until a reasonable time before the item is used.
- You have the right to voice your concerns about the care you receive. If you have a problem or complaint, you may talk with your medical practitioner or a member of the leadership team. You have the right to file a Client Grievance and to receive a copy of our Client Grievance Policy. If your concern is not resolved to your liking, you may contact: **State of Tennessee Division of Consumer Affairs Complaint Line**; 500 James Robertson Parkway, Nashville, TN 37243-0600; <http://tn.gov/consumer> or call 1-800-342-8385.

Patient Responsibilities

- You are expected to provide complete and accurate information, including your full name, address, home telephone number, date of birth, Social Security number, insurance carrier and employer, when it is required.
- You should provide MCRH with a copy of your advance directive if you have one.
- You are expected to provide complete and accurate information about your health and medical history, including present condition, past illnesses, hospital stays, medicines, vitamins, herbal products, and any other matters that pertain to your health, including perceived safety risks.

- You are expected to ask questions when you do not understand information or instructions. If you believe you can't follow through with your treatment plan, you are responsible for telling your medical practitioner.
- You are responsible for outcomes if you do not follow the care, treatment and services plan recommended.
- You are expected to treat all MCRH staff, other patients and visitors with courtesy and respect; abide by all MCRH rules and safety regulations; and be mindful of noise levels, privacy and number of visitors.
- You are expected to provide complete and accurate information about your health insurance coverage.
- You are expected to pay your for any and all medical treatment and services provided to you by our staff and clinicians in a timely manner.
- You have the responsibility to keep appointments, be on time, and call your health care provider if you cannot keep your appointments.

If you would like further clarification of the "Patient Rights and Responsibilities" as they pertain to you, or would like more information regarding our complaint and/or grievance process please contact our facility at 901-274-3550 and ask to speak with our Director of Quality Assurance.