

## **Patient Rights and Responsibilities**

We at the Alaska Native Medical Center want you to know about Patient Rights and Responsibilities so you can make the best choices about your health and receive the highest quality health care possible.

### **As a patient at ANMC you have a right to:**

- Receive care in a safe environment free from all forms of abuse, neglect, mistreatment, or safety issues in the environment.
- Be given facts about your care and be provided an interpreter or help if you need assistance seeing, hearing or reading.
- Ask your health care providers for their name and role in your health care to discuss how they are going to take care of you.
- Informed consent and to ask for information to make choices about your care. You must give permission for tests, surgery and medicines. Examples include information on treatment choices and risks, the name of the providers involved in your treatment, and how long it could take you to get better.  
Refuse treatment if the law allows. Your providers will tell you how this could affect your treatment.
- Have a chosen person to make decisions for your care. Messages between you and your provider, hospital charts, tests results and X-rays must be kept private. You must give permission and designate a privacy password before anyone not directly involved in your care is given information about you.
- Make a complaint and receive a response regarding your care without fear of it affecting your care. Give us an opportunity to address your complaint by calling (907) 729-3990 or by contacting your provider.
- Pain relief and to receive the appropriate pain management treatments. Receive your care in private. You may restrict access of your support person or visitors at any time.
- Have someone remain with you for emotional support during visiting hours, unless safety or health is compromised by their presence.
- Receive treatment at this hospital and you will be given a reason if you are transferred to another hospital. You are able to communicate with people outside of the hospital, except when doing so would interfere with your care.
- Agree or refuse to take part in research studies. If you refuse, your care will not change.
- Ask for a different provider if you do not feel your current provider and you are able to establish a trusting and therapeutic relationship. Another provider will be arranged for you in as timely of a manner as provider scheduling allows.

**As a patient at ANMC you have a responsibility to:**

- Maintain a safe and quiet environment for healing of yourself and others by conducting yourself in a respectful manner in interactions and communications with staff, patients and visitors.
- Maintain your safety and the safety of others by following ANMC rules, regulations and policies affecting patient care and conduct.
- Comply with ANMC's policies prohibiting weapons, tobacco, marijuana, alcoholic beverages and illegal drugs on campus.
- Be respectful of others by not using or allowing inappropriate, discriminatory, harassing or abusive language and behaviors toward staff, patients and visitors.
- Partnering with your providers by giving full and honest facts about your health and your health history. Your health history includes illnesses, hospital stays, medications, supplements or alcohol, illicit drugs you take or have taken, life support instructions to your providers about your care (advance directive) and other health matters you feel are important.
- Partner in your health care plan by maintaining a healthy lifestyle. Talk about your treatment.
- Follow the plan of care. Tell your providers about any changes in your health.
- Be on time for your appointments by arriving early or canceling as soon as possible if you are not able to keep your appointment. Refill your medications on time.
- Tell us about changes in your contact and insurance information in a timely manner, including addresses and phone numbers for you and your emergency contact. This also includes information about your health care coverage, (Medicare/Medicaid/private insurance) and to notify ANMC of any changes.
- Provide an advance directive in writing describing your choices about the treatments you want or do not want, or about how health care decisions should be made for you including if you do not want to receive life support care.
- Tell us what we can do better. This is also an opportunity to tell your provider thank you for a great health care experience. If you want to share your compliment or address a complaint call (907) 729-3990 or by contacting your provider.
- Accept the limits that may affect our efforts to relieve your pain. These include laws, safety issues, ethics codes and your appropriate assessment and management of your pain.
- Ensure your visitors obey all hospital policies and report inappropriate behavior to staff members.
- Respect your staff, patients' and visitors' right to privacy and discuss extended visiting with your health care providers if you have questions.
- Provide contact information for people you would like notified of your admission to the hospital.
- Respect the privacy of staff, patients, and visitors and exercise care if posting pictures through social media. The use of any type of camera or video recording device, including cellular phone cameras, in any area of ANMC where patients or those visitors or staff

could be recorded without their knowledge or consent is not allowed without ANMC authorization and written permission.

### **Concerns, Complaints or Grievances**

If you have a concern about the quality and safety of your care, please talk about this with your doctor or health care provider. If you still are concerned, please talk with your nurse or the nurse manager of the area.

You have a right to use the ANMC complaint process for submitting a written or verbal complaint to our Customer Experience Department at (907) 729-3990 or email [Customercontact@anthc.org](mailto:Customercontact@anthc.org). You may also express your concerns, complaints and/or grievance in writing to:

ANMC Customer Experience Department  
Alaska Native Medical Center  
4315 Diplomacy Drive  
Anchorage, AK 99508

You can expect to receive a response within seven days regarding your complaint from Customer Experience.

Patients also have a right to contact the following agencies:

Office of Quality Monitoring  
The Joint Commission  
One Renaissance Boulevard  
Oakbrook Terrace, Illinois 60181  
Email: [complaint@jointcommission.org](mailto:complaint@jointcommission.org)  
Phone: 1-800-994-6610  
Fax: (630) 792-5636

Medicare Beneficiaries (QIO)  
Livanta BFCC-QIO Program, Area 5  
9090 Junction Drive, Suite 10  
Annapolis Junction, MD 20701  
Phone: 1-877-588-1123