

ENCLOSURE 2

DOD PATIENT BILL OF RIGHTS AND RESPONSIBILITIES

1. PATIENT RIGHTS

a. Medical Care. Patients have the right to quality care and treatment that is consistent with available resources and generally accepted standards, including access to specialty care and to pain assessment and management.

b. Respectful Treatment. Patients have the right to considerate and respectful care, with recognition of personal dignity, psychosocial, spiritual, and cultural values and belief systems.

c. Privacy and Security. Patients have rights, defined by Federal law, DOD 5400.11-R (Reference (g)), Public Law 104-191(Reference (h)), and section 552a of title 5 U.S.C. (also known as “The Privacy Act of 1974, as amended”) (Reference (i)), to reasonable safeguards for the confidentiality, integrity, and availability of their protected health information, and similar rights for other PII, in electronic, written, and spoken form. These rights include the right to be informed when breaches of privacy occur, to the extent required by Federal law.

d. Provider Information. Patients have the right to receive information about the individual(s) responsible for, as well as those providing, his or her care, treatment, and services. The hospital may inform the patient of the names, and as requested, the professional credentials of the individual(s) with primary responsibility for, as well as those providing, his or her care, treatment, and services.

e. Explanation of Care. Patients have the right to an explanation concerning their diagnosis, treatment, procedures, and prognosis of illness in terms that are easily understood. The specific needs of vulnerable populations in the development of the patient’s treatment plan shall be considered when applicable. Such vulnerable populations shall include anyone whose capacity for autonomous decision making may be affected. When it is not medically advisable to give such information to the patient due to vulnerabilities or other circumstances, the information should be provided to a designated representative.

f. Informed Consent. Patients have the right to any and all necessary information in non-clinical terms to make knowledgeable decisions on consent or refusal for treatments, or participation in clinical trials or other research investigations as applicable. Such information is to include any and all complications, risks, benefits, ethical issues, and alternative treatments as may be available.

g. Filing Grievances. Patients have the right to make recommendations, ask questions, or file complaints to the MTF/DTF Patient Relations Representative or to the Patient Relations Office. If concerns are not adequately resolved, patients have the right to contact The Joint Commission at 1-800-994-6610.

h. Research Projects. Patients have the right to know if the MTF/DTF proposes to engage in or perform research associated with their care or treatment. The patient has the right to refuse to participate in any research projects.

i. Safe Environment. Patients have the right to care and treatment in a safe environment.

j. MTF/DTF Rules and Regulations. Patients have the right to be informed of the facility's rules and regulations that relate to patient or visitor conduct.

k. Transfer and Continuity of Care. When medically permissible, a patient may be transferred to another MTF/DTF only after he or she has received complete information and an explanation concerning the needs for and alternatives to such a transfer.

l. Charges for Care. Patients have the right to understand the charges for their care and their obligation for payment.

m. Advance Directive. Patients have the right to make sure their wishes regarding their healthcare are known even if they are no longer able to communicate or make decisions for themselves.

2. PATIENT RESPONSIBILITIES

a. Providing Information. Patients are responsible for providing accurate and complete information about complaints, past illnesses, hospitalizations, medications, and other matters relating to their health to the best of their knowledge. Patients are responsible for letting their healthcare provider know whether they understand the diagnosis, treatment plan, and expectations.

b. Respect and Consideration. Patients are responsible for being considerate of the rights of other patients and MTF/DTF healthcare personnel. Patients are responsible for being respectful of the property of other persons and of the MTF/DTF.

c. Adherence with Medical Care. Patients are responsible for adhering to the medical and nursing treatment plan, including follow-up care, recommended by healthcare providers. This includes keeping appointments on time and notifying MTF/DTF when appointments cannot be kept.

d. Medical Records. Patients are responsible for returning medical records promptly to the MTF/DTF for appropriate filing and maintenance if records are transported by the patients for the purpose of medical appointments, consultations, or changes of duty location. All medical records documenting care provided by any MTF/DTF are the property of the U.S. Government.

e. MTF/DTF Rules and Regulations. Patients are responsible for following MTF/DTF rules and regulations affecting patient care and conduct.

f. Refusal of Treatment. Patients are responsible for their actions if they refuse treatment or do not follow the practitioner's instructions.

g. Healthcare Charges. Patients are responsible for meeting financial obligations incurred for their healthcare as promptly as possible.