CASS COUNTY HEALTH DEPARTMENT PATIENT RIGHTS AND RESPONSIBILITIES

YOU HAVE THE RIGHT:

- > To receive considerate and respectful care
- > To receive information about the Cass County Health Department (CCHD) its services, its providers, and your rights and responsibilities.
- > To receive an explanation of your diagnosis and treatment in terms you can understand.
- > To receive the necessary information to participate in decisions about your care and to give your (or, as appropriate, your parents/legal guardians) consent before any diagnostic or therapeutic procedure is performed.
- > To expect that your personal privacy will be respected by all staff
- > To expect that your medical records will be kept confidential and will be released only with your (or, as appropriate, your parents/legal guardians) written consent except as otherwise required by law.
- > To know the names and positions of people involved in your care by official name tag and/or personal introduction.
- > To ask and receive an explanation of any charges, even though they may be covered by insurance.
- > To obtain another medical opinion prior to any procedure.
- > To review records concerning your care and treatment
- > To express complaints about CCHD or the care received.
- > To refuse treatment and know the effect of such refusal.
- To refuse to sign a release authorization as a condition of treatment.

YOU ARE RESPONSIBLE:

- > For providing accurate information about your past health history.
- For asking questions if you (or your parents/legal guardians) do not understand the explanation of your diagnosis, treatment, prognosis, or any instructions.
- > For following the plans for care that you have agreed to with your provider.
- > For providing the necessary personal information to complete your file.
- For any charges billed to you (or your parents/legal guardians).
- > For treating CCHD staff with courtesy and respect.
- > For following rules and regulations that are posted within the CCHD