

TDD/TTY #711 or RI Relay # 1-800-745-5555. phones are available at this hospital. Please ask a hospital staff member to assist you.



Sign Language - you have a right to a sign language interpreter if you need one.



Patient Rights & Responsibilities

Bradley Hospital
English



Bradley Hospital

A Lifespan Partner

Bradley Hospital
1011 Veterans Memorial Parkway
East Providence, RI 02915
401-432-1000

BradleyHospital.org

These are your rights and responsibilities as a patient. To receive an oral or written translation of this document, please call the Family Liaison Program at 401-432-1205 or call 432-1000.

You have the right to:

1. Kind, safe and respectful care
2. Treatment and information without discrimination based on age, color, culture, ethnicity, gender identity or expression, language, national origin, physical or mental disability, race, religion, sex, sexual orientation, socioeconomic status, or source of payment
3. Interpreter and translation services at no cost if your English is limited
4. The name of any physician, provider, or institution that is responsible for, or involved in, your care or treatment
5. Personal privacy and confidentiality of your medical records, in accordance with law and hospital policy
6. Participate in your care and make informed decisions, including the right to refuse treatment as permitted by law
7. Choose someone to make health care decisions for you
8. Make advance directives ("Durable Power of Attorney for Health Care" or "Living Will") and include them in your medical record
9. Assessment and management of your pain
10. A reasonable response if your health care provider requests medical services for you or if you request additional services

11. Freedom from restraints and seclusion that are not medically necessary or that are used as a means of coercion, discipline, convenience, or retaliation by staff
12. Give or refuse informed consent to participate in human subjects research as required by law
13. Be informed about the reasons and alternatives before you are transferred to another facility
14. Review your hospital bill and be given an explanation of the charges, regardless of the source of payment; you will be provided with a summarized medical bill within 30 days of discharge, and an itemized bill on request
15. Examine and obtain a copy of your medical records, at no charge in certain cases
16. Examine any hospital rules and regulations that govern your treatment
17. The presence of someone whom you choose to give you emotional support, and visits from people you choose, unless it interferes with others' care or your own

You have the responsibility to:

- Provide the hospital or your physician with information about past illnesses, hospitalizations, medications, allergies, and other matters related to your health care
- Inform the hospital if you do not understand or will be unable to carry out medical instructions
- Not take any drugs unless they are prescribed by your physician and administered by hospital staff

- Treat staff and licensed independent practitioners with respect, and use civil language
- Be considerate of other patients and their visitors, particularly respecting privacy, not smoking, and keeping noise at a reasonable level
- Keep all appointments and provide advance notice if you are unable to keep an appointment
- Let hospital staff know if you have prepared advance directives ("Durable Power of Attorney for Health Care" and/or "Living Will") and provide a copy to the hospital
- Provide complete insurance information
- Take financial responsibility for paying for all services rendered, either through your insurance, or by personally paying for any services that are not covered by insurance
- Participate in the process of medical education of future health care professionals, as authorized by the hospital

The hospital will provide you with an interpreter if you need one, at no cost. Please ask your provider to page 350-2688 weekdays 8 a.m. – 3:30 p.m., or to contact the hospital supervisor after hours at 401-432-1000.

If you have a concern or feel your rights have been violated, you may make a complaint through the hospital's complaint procedure. Please visit or call the Family Liaison Program at 401-432-1205, or after hours call the hospital operator at 401-432-1000. You may also contact the Rhode Island Department of Health, 3 Capitol Hill, Providence, RI 02908, 401-222-5200, or The Joint Commission (hospital accreditation), 1-800-994-6610.