



# PATIENTS RIGHTS AND RESPONSIBILITIES

 St. Catherine  
SPECIALTY HOSPITAL



THE LEADING HOSPITALS  
OF THE WORLD



**We want to encourage you, as a patient at St. Catherine Hospital, 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. We want you to consider yourself as a partner, therefore we encourage you to know your rights as well as your responsibilities during your stay at our hospital. We invite you and your family to join us as active members of your care team.**

## Access to Care

- To receive care regardless of your age, race, color, national origin, culture, ethnicity, language, socioeconomic status, religion, physical or mental disability, sex, sexual orientation, or gender identity or expression, or manner of payment.
- To ask for a change of provider or a second opinion.
- To understand your diagnosis, condition and treatment and make informed decisions about your care after being advised of material risks, benefits and alternatives.
- To knowingly refuse any care, treatment and services.

- To say “yes” or “no” to experimental treatments and to be advised when a physician is considering you to be part of a medical research program. All medical research goes through a special process required by law that reviews protections for patients involved in research, including privacy. We will not involve you in any medical research without going through this special process. You may refuse or withdraw at any time without consequence to your care.
- To legally appoint someone else to make decisions for you if you should become unable to do so, and have that person approve or refuse care, treatment and services.
- To have your family or representative involved in care, treatment and service decisions, as allowed by law.

## Personal Privacy/Visitation

- To have your personal dignity respected.
- To the confidentiality of your identifiable health information.
- To enjoy personal privacy and a safe, clean environment



and to let us know if you would like to restrict your visitors or phone calls.

- To receive visitors of your choosing that you (or your support person, where appropriate) designate, including a spouse, a domestic partner, or another family member or a friend, and the right to withdraw or deny your consent to receive such visitors at any time.
- To be informed (or your support person to be informed, where appropriate) of your visitation rights, including any clinically necessary restriction or limitation on such rights.
- To designate a support person who will designate visitors on your behalf, should you be unable to do so.

## Cultural and Spiritual Values

- To have your cultural, psychosocial, spiritual, and personal values, beliefs and preferences respected.
- To have access to pastoral and other spiritual services.

## Communication

- To receive information you can understand.
- To have access to an interpreter and/or translation services at no charge.
- To know the reasons for any proposed change in the attending physicians/professional staff responsible for your care.



- To know the reasons for your transfer either within or outside the hospital

## **Concerns, Complaints or Grievances**

- To receive a reasonably prompt response to your request for services.
- To be involved in resolving issues involving your own care, treatment and services.
- To express concerns, complaints and/or a grievance to your providing hospital personnel.

## **Asking Questions and Following Instructions**

- To let us know if you don't understand the information we give you about your condition or treatment
- To speak up. Communicate your concerns to any employee as soon as possible - including any member of the patient care team, manager or administrator.

## **Refusing Treatment and Accepting Consequences**

- To follow our instructions and advice, understanding that you must accept the consequences if you refuse.

## **Explanation of Financial Charges**

- To pay your bills or make arrangements to meet the financial obligations arising from your care.

## **Following Rules and Regulations**

- To follow our rules and regulations.
- To keep your scheduled appointments, or let us know if you are unable to keep them.
- To leave your personal belongings at home or have family members take all valuables and articles of clothing home while you are hospitalized.

## **Respect and Consideration**

- To be considerate and cooperative.
- Providing accurate and complete information about medical complaints, past illnesses, hospitalizations, medications, pain, and other matters relating to their health.
- Following the treatment plan recommended by those responsible for their care.
- Their actions if they refuse treatment or do not follow the healthcare team's instructions.
- Seeing that their bills are paid as promptly as possible; following hospital rules and regulations.
- Being considerate of the rights of other patients and hospital personnel.
- Seeking information, and in the event they have questions, asking them.



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**365**  
days of excellence

**St. Catherine Specialty Hospital**  
Bračak 8 / 49210 Zabok / Croatia  
phone +385 49 296 600 / Fax +385 49 296 699  
info@svkatarina.hr

Trpinjska 7 / 10000 Zagreb / Croatia  
phone +385 1 286 74 00 / Fax +385 1 286 74 99  
info@svkatarina.hr

[www.svkatarina.hr](http://www.svkatarina.hr)

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