

# JEFFERSON RADIOLOGY

DIAGNOSTIC & INTERVENTIONAL SPECIALISTS

## Patient's Bill of Rights and Responsibilities

Jefferson Radiology recognizes that a personal relationship between the physician and the patient is essential for the provision of proper medical care. It is our objective to uphold the rights of all patients. We hope that the mutual understanding of these rights and responsibilities will contribute to the best in patient care and satisfaction.

### At Jefferson Radiology, you have the right to:

- Considerate and respectful care in a safe, comfortable environment
- Be treated with dignity and respect
- Receive complete, current information concerning your diagnosis and care you will need after discharge in terms you can reasonably expect to understand
- Receive information necessary for you to give informed consent prior to the start of any procedure and/or treatment
- Refuse care, treatment, or services in accordance with law
- Know the names of the health care providers and their role in your care
- Treatment by compassionate, skilled, qualified health professionals
- Be informed about and participate in your care and treatment plans
- Be free from all forms of abuse or harassment
- Know what safety measures may be used during your care
- Proper assessment and management of your pain or discomfort
- Receive treatment in an environment that is sensitive to your beliefs, values, culture, and preferences
- Confidentiality of your medical records
- Review and obtain copies of your medical records within a reasonable time frame
- Receive a copy of a reasonably clear, itemized bill and, upon request, have the charges explained
- Request information about the grievance process at Jefferson Radiology

### Patient Responsibilities:

- To give Jefferson Radiology complete information about your medical history, including any medications you may be taking
- To fully participate in decisions involving your health care; It is important for you to tell us how you want to partner in your care
- To tell us if you are not satisfied with your care
- To follow up on your doctor's instructions, take medication when prescribed, follow our guidance in helping you get well
- To ask if you do not understand information or instructions about your care or treatment
- To be responsible for your actions if you refuse treatment or refuse to follow treatment instructions
- Be considerate of the rights of other patients, families, and Jefferson Radiology personnel
- To give us any insurance information we may need to help get your bill paid, and to fulfill your financial obligations to Jefferson Radiology promptly

**If you have a concern, please let our staff know during your visit or ask to speak with the Site Manager.**

**You may contact Jefferson Radiology at 860-289-3375 and ask for the Chief Quality & Safety Officer**

**You may contact the Joint Commission as follows:  
Mail - Office of Quality Monitoring, The Joint Commission  
One Renaissance Blvd, Oakbrook Terrace, IL 60181  
E-Mail: [complaint@jointcommission.org](mailto:complaint@jointcommission.org)  
Fax: Office of Quality Monitoring - 630-792-5636**

**You may contact the American College of Radiology  
Attn: Accreditation Program Patient Comments  
1891 Preston White Drive  
Reston, VA 20191-4326  
E-Mail: [www.acr.org](http://www.acr.org)  
Telephone: 703-648-8900**