

PATIENTS' BILL OF RIGHTS AND RESPONSIBILITIES: CHILDREN AND ADOLESCENTS

RIGHTS

1. Medical Care. Children have the right to receive quality care and treatment consistent with available resources and generally accepted standards, regardless of race, creed, color, natural origin, religion, sex, age, handicap, diagnosis or source of payment. The parent(s) has the right also to refuse treatment of the child to the extent permitted by law and Government regulations and to be informed of the consequences for their refusal. When concerned about the care received, the child and/or parent(s) have the right to request a review of the adequacy of care. The parent(s) has the right to expect reasonable continuity of care.

2. Alleviation of Pain. The right to techniques for the alleviation of pain and discomfort to the maximal extent consistent with proven safety and benefit.

3. Respect and Dignity. Children have the right to courteous and respectful care with recognition of the individual's personal dignity as well as the physical, emotional, social, spiritual needs and cultural values.

4. Privacy and Confidentiality. The right, within the laws, parameters of the child's medical/dental care, the Naval Hospital Camp Lejeune policy, and military regulations, to every consideration of personal and informational privacy and confidentiality concerning the medical/dental care and all treatment records. The child has the right to have a parent(s) present during an examination and to be interviewed in surroundings designed to assure reasonable visual and auditory privacy.

5. Identity. The parent(s) of the patient has the right to know, at all times the identity, professional status, and professional credentials of health care personnel, as well as the name of the health care provider primarily responsible for their care.

6. Expression of feelings. The right to express their feelings of anxiety, happiness or sadness.

7. Explanation of Care. The right to information in a language appropriate to their ethnic background and developmental level concerning patient's diagnosis, planned treatment, alternative treatments, prognosis of illness, regarding the reason for hospitalization, hospital routines, items/equipment used, procedures and events. When it is not medically advisable to give such information to the patient, the information should be provided to the parent(s). When the child or parent(s) does not speak or understand the predominant language of the community, they will have access to an interpreter.

8. Minimal Separation. The patient and their parent(s) have the right to minimal physical separation from the time of admission through discharge from the hospital. Separation of the patient from the parent(s) shall be only for specifically indicated medical or nursing evaluation or therapy.

9. Emotional Support. Parent(s) of children with special conditions have the right to emotional support from the Naval Hospital Camp Lejeune staff, including social work, psychiatric and religious/spiritual counseling.

10. Informed Consent. The right to be advised in non-clinical terms of information needed to make knowledgeable decisions on consent or refusal for treatments. Such information should include significant complications, risks, benefits, and alternative treatments available.

11. Research Projects. The right to be advised if the facility proposes to engage in or perform research associated with his/her care or treatment. The patient has the right to refuse to participate in any research projects.

12. Medical Treatment Facility (MTF) Rules and Regulations. The right to be informed of the facilities' rules and regulations that relate to patient or visitor conduct. The patients should be informed about smoking rules and should expect compliance with those rules from other individuals. Children and parent(s) are entitled to information about the mechanism for the initiation, review, and resolution of patient complaints concerning any aspect of their care.

13. Safe Environment. The right to care and treatment in a safe environment.

14. Advance Directive. Under North Carolina State law, parent(s) have the ability to make sure the wishes regarding their child's health care will be known even if they are no longer able to communicate or make decisions themselves. The parent(s) has the right to formulate advance directives to the extent permitted by the law.

RESPONSIBILITIES

1. Providing Information. Children and parent(s) have the responsibility to provide to the best of their knowledge accurate and complete information about complaints, past illnesses, hospitalizations, medication, and other matters relating to the child's health. The child and parent(s) have the responsibility to make known to the primary health care provider whether they clearly understand the course of treatment and what is expected of them during the course of hospitalization.

2. Respect and Consideration. Children and parent(s) have the responsibility for being considerate of the right of other patients and MTF health care personnel and for assisting in the control of noise, smoking and the number of visitors. The children and parent(s) are responsible for being respectful of the property of other persons and of the medical treatment facility.

3. Compliance with Medical Care. Children and parent(s) have the responsibility for complying with the medical and nursing treatment plan, including follow-up care, recommended by health care providers. This includes keeping the child's appointments on time and notifying the MTF when appointments cannot be kept.

4. Medical Records. Children and parent(s) have the responsibility for ensuring that medical records are promptly returned to the medical facility for appropriate filing and maintenance when records are transported for the purpose of obtaining medical appointments or consultation, etc. All medical records documenting care provided by any MTF are the property of the U.S. Government.

5. MTF Rules and Regulations. Children and parent(s) have the responsibility for following the MTF rules and regulations. If rules and regulations of the MTF are not followed by the patient or parent they may be asked to leave the MTF.

6. Financial Obligations. Parent(s) are responsible for assuring that the financial obligations incurred for their child's health care are fulfilled as promptly as possible.

7. Reporting of Patient Complaints. Children and parent(s) have the responsibility for helping the MTF Commander provide the best possible care to all beneficiaries. The child's and/or parent(s) recommendations, questions, or complaints should be reported to the Area Patient Relations Representative or Patient Relations Office promptly.