All patients have the right to the following:

Access: The right to receive care without discrimination due to age, ancestry, color, culture, disability (physical or intellectual), ethnicity, gender, gender identity or expression, genetic information, language, military/veteran status, national origin, race, religion, sexual orientation, socioeconomic status, or source of payment.

Respect and Dignity: The right to considerate, respectful care given by competent personnel, which optimizes the patient’s comfort and dignity while contributing to a positive patient self-image.

Communication: The right to:
- Be informed of Patient Rights and Responsibilities at the earliest possible time of the patient’s first clinic visit in a manner and form that the patient understands.
- Know the name of the provider who has primary responsibility for the patient’s care, and the identity and function of all individuals providing their care, treatment and services.
- Be communicated with in a manner that is clear, concise and understandable. Information provided will be appropriate to the age and cognition of the patient.
- Be provided with a qualified interpreter free of charge; either in person or on the phone as deemed appropriate if the patient has limited English proficiency.
- Be provided with a certified Deaf and Hard of Hearing interpreter for patients with speech, hearing and/or cognitive impairments.
- Be informed about unanticipated outcomes of care, treatment and services. The provider responsible for the patient’s care, or the patient’s designee, informs the patient about the unanticipated outcome when the patient is not already aware of the occurrence or when further discussion is needed.
- Have assistance in accessing and designating a support person or agency to act as needed to assert and protect the patient’s rights.
- Delegate decision making to a specific person/s. The clinic will respect the patient’s wishes to the maximum extent practicable, and to the degree permitted by law.
- Designate a lay caregiver, who is a person chosen by the patient to receive health information about the patient due to their unique role as the patient’s primary caregiver if applicable. When a patient is unable to make decisions about care, treatment, and services, a surrogate decision maker will be involved in making those decisions. This includes the surrogate decision maker’s right to refuse care, treatment and services on the patient’s behalf, in accordance with law and regulation.

Quality Care Delivery: The right to:
- Receive care in a safe and secure environment which incorporates current standards of practice for patient environmental safety, infection control and security.
- Be free from all forms of mental, physical, sexual, and verbal abuse, neglect and exploitation.
- Expect good management techniques to be implemented to effectively use the patient’s time and to avoid the personal discomfort of the patient.
- Be informed about Patient Rights and Responsibilities at the earliest possible time of the patient’s first clinic visit in a manner and form that the patient understands.
- Be provided with a qualified interpreter free of charge; either in person or on the phone as deemed appropriate if the patient has limited English proficiency.
- Be provided with a certified Deaf and Hard of Hearing interpreter for patients with speech, hearing and/or cognitive impairments.
- Be informed about unanticipated outcomes of care, treatment and services. The provider responsible for the patient’s care, or the patient’s designee, informs the patient about the unanticipated outcome when the patient is not already aware of the occurrence or when further discussion is needed.
- Have assistance in accessing and designating a support person or agency to act as needed to assert and protect the patient’s rights.
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Participation in Care: The right to:
- Participate with the providers in the development, implementation and revision of the patient plan of care.
- Receive information about current health status, care needs, outcomes, recovery, ongoing healthcare needs and future health status.
- Be informed about proposed care options including the risks and benefits, other care options, what could happen without care, and the expected outcome(s) of any medical care provided, including any outcomes that were not expected.
- Be involved in all aspects of care and to take part in decisions about care.
- Request care. This right does not mean the patient can demand care or services that are not medically needed.
- Participate in the consideration of ethical issues surrounding his/her care.
- Receive assistance to obtain consultation with another provider at the patient’s request and own expense.
- Pain Management: The right to appropriate assessment, management and relief of pain, including providing feedback on pain control in accordance with medical standards of care and applicable laws.

Consent: The right to:
- Give informed consent. This information shall include the name of the person performing the procedure or treatment, a description of the procedure or treatment, the medically significant risks involved, alternate courses of treatment or non-treatment and the risks involved in each.
- Refuse any care, therapy, drug, treatment or procedure that a provider is recommending. The provider will discuss the medical consequences of such refusal. There are times when care must be provided by law or regulation.
- Give consent prior to the start of any experimental, research, donor program or educational activities in which the patient may be asked to participate. The patient or the patient’s legal representative may, at any time, refuse to continue in any such study/program to which informed consent has previously been given. Refusal to participate or discontinuation of participation will not compromise the patient’s right to access care, treatment or services.
- Give consent for providers and/or staff to take photos, make recordings, or film patients if the purpose is for something other than patient identification, care, diagnosis or treatment.

Privacy: The right to:
- Be interviewed, examined, treated and have care discussed in places designed to protect privacy.
- Expect all communications and records related to care to be treated as confidential except as otherwise provided by law or third-party contractual arrangements.
- Receive notice that explains how personal health information will be used and shared with other health care professionals involved in the patient’s care.
- Request an accounting of circumstances in which information about the patient has been disclosed or reported due to law or regulation.
- Limit who can receive information about the patient, including demographic information, the patient’s presence or location in the clinical area or information about the patient’s medical condition.

Medical Record: The right to:
- Access all information contained in the patient’s medical record other than psychotherapy notes unless access is restricted by the attending provider for medical reasons.
- Request a copy of the patient’s medical record (note: there may be a fee for the copying of the medical record). If the patient feels that the information is incorrect, they may request that the information be amended. Tulane Doctors may deny the request to amend information under certain specific circumstances as permitted by law.

Financial Charges: The right to examine and receive a detailed explanation of the patient’s bill. Referral for counseling on the availability of known financial resources to help the patient in payment of healthcare bills.