



Hospice of Warren County

2 Crescent Park West, P.O. Box 68, Warren PA 16365
Phone: (814) 723-2455 Fax: (814) 723-6259

BILL OF RIGHTS AND RESPONSIBILITIES

The patient has the right - To receive information about services covered under hospice

- To receive information about scope of services hospice will provide and well as limitations
- To have his or her property and person treated with respect
- To choose his or her attending MD
- To receive effective pain management and symptom control from the hospice for conditions related to the terminal illness
- To refuse care or treatment
- To voice grievances regarding treatment of care that is (or fails to be) furnished and the lack of respect for property by anyone who is furnishing services on behalf of the hospice
- To exercise his or her rights as a patient of the hospice
- To not be subjected to discrimination or reprisal for exercising his or her rights.

Hospice has the responsibility -

- To inform and distribute written information to patient concerning its policy and procedure on advance directives
- To maintain confidentiality of clinical records

PATIENT SIGNATURE

DATE

PATIENT'S LEGAL REPRESENTATIVE
SIGNATURE

DATE

WITNESS SIGNATURE

DATE