Welcome

Welcome to Memorial Hospital and Health Care Center. Thank you for giving us the opportunity to meet your health care needs. Our dedicated physicians and caregivers are committed to your physical, emotional, and spiritual healing as they strive to live out the mission of Memorial Hospital and Health Care Center. For over 70 years, we have earned a reputation for providing compassionate, quality care to the communities we serve.

To assist you and your loved ones during your stay, we have prepared this guide to answer many of the questions you and your family may have about Memorial Hospital and Health Care Center. If you cannot find the answer in this guide, please feel free to ask your caregiver, who will be happy to assist you.

On behalf of our board of directors, our physicians, and caregivers, I wish you a speedy recovery and a life filled with wellness.

Sincerely,

Lori Persohn
Vice President of Patient Services & Chief Nursing Officer
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## Patient Privacy Practices

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Visitor Policy

PURPOSE:

Memorial Hospital recognizes that most of our patient’s time in the hospital is spent receiving care and treatment. We allow for the presence of a support person of the patient’s choice, unless the individual’s presence infringes on others’ rights, safety, or is medically or therapeutically inadvisable. The individual may or may not be the patient’s surrogate decision-maker or legally authorized representative.

Limiting the number of visitors may be necessary for the patient’s safety. Visitation will not be restricted based on race, national origin, religion, sexual orientation, color, gender identity, or disability. Memorial Hospital encourages families to be involved in the health care of their loved one.

Guidelines:

Visitors are encouraged to stay with the patient for emotional support during the course of the stay unless the patient’s condition or treatment requires a limitation to visitors. Visitation will be limited only if it infringes on the patient’s or others’ rights and/or safety.

Use of all tobacco products including cigarettes, pipes, cigars, all forms of smokeless tobacco, hookahs, electronic cigarettes, vaping pipes, and all tobacco products as deemed by the FDA are prohibited on all property owned, managed, or leased by Memorial Hospital.
# Hospital Directory

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<td>Chaplain/Pastoral Care</td>
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<td>Pediatrics</td>
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<td>Post-Surgical Services</td>
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</tbody>
</table>

| Level 5          | Medical Services         | T2/T3 |

| Level 6          | Phillip R. Dawkins Heart & Vascular Center | T2/T3 |

**Room Number Identification**

Example Room Number: 2318
2 references the building the room is in (1 = Barrett Building / 2 = LCM Tower);
3 is the level; 18 is the room number.
MyChart is...

MyChart is a digital way for you to communicate with your doctor and with Memorial Hospital. You can access MyChart as an App on your smartphone or mobile device. You can also access all the features of MyChart on the MyChart webpage at mychart.mhhcc.org. See below for features, benefits and frequently asked questions.

What can I do with MyChart?
MyChart offers patients personalized and secure online access to portions of their medical records. It enables you to securely use the Internet to help manage and receive information about your health. With MyChart, you can use the Internet to:

• Schedule and request medical appointments.
• Check in for appointments online.
• View your health summary from the MyChart electronic health record.
• View test results.
• Request prescription renewals.
• Conduct video visits or E-Visits with your provider.
• Access trusted health information resources.
• Pay bills and request financial assistance.
• Communicate electronically and securely with your medical care team.
• And more!

Is there a fee to use MyChart?
MyChart is a free service offered to our patients.

Can I use MyChart for medical emergencies?
No, MyChart should not be used for urgent situations. Please contact your medical center if the situation requires immediate attention, or dial 911 if it is an emergency.
Frequently Asked Questions

How do I sign up?
Patients who wish to participate will be issued a MyChart activation code during their clinic visit. This code will enable you to log in and create your own username and password. If you were not issued an activation code, you may call your primary care clinic to get one or ask to sign up during your next office visit.

Who do I contact if I have further questions?
You may e-mail us at MyChartSupport@mhhcc.org, or you can call our MyChart Patient Support Line at (812) 996-5536. The MyChart Patient Support Line can assist you with password resets, login issues, questions about MyChart, and site navigation.

When can I see my test results in MyChart?
Most of your test results are shared to your MyChart account as soon as we receive the final result, which may mean your provider has not seen them yet. Your provider may reserve the right to review certain results with you via a phone call before they are shared to your MyChart account.

If some of my health information on MyChart is not correct, what should I do?
Your MyChart information comes directly from your electronic medical record at your doctor’s office. Ask your doctor to correct any inaccurate information at your next clinic visit. Your health information is reviewed and updated in your electronic medical record each visit.

If I send a message to my doctor or nurse, when can I expect a reply?
You will generally receive an answer within 1-3 business days. Please note that MyChart should not be used for urgent situations. Please contact your medical center if the situation requires immediate attention or dial 911 if it is an emergency.

Can I view a member’s health record in MyChart?
Yes, you can. This is called proxy access and allows a parent (or guardian) to log in to their personal MyChart account and then connect to information regarding their family member. Select “Share My Record” from the Health menu. From there you can select “Friends and family access” and modify or add new access to your health record. If you want your child to be added to your MyChart account, contact your child’s Provider office or call MyChart Support Line at (812) 996-5536.

Can I ask questions regarding a family member from my MyChart account?
No, you cannot ask through your own account, but you can message on behalf of a family member if you have proxy access to their MyChart account. MyChart offers direct access to your personal health record, and if you communicate about another individual’s information, that communication would be placed in your health record. This information would not appear in the correct health record and could potentially jeopardize medical care. That is why you should message through proxy access.

Can my spouse and I share one MyChart account?
No, due to the sensitive nature of medical information, each adult must establish his/her own MyChart account.

I forgot my password. What should I do?
You may contact our MyChart Patient Support Line at (812) 996-5536 to request a new, secure password. You may also click the “Forgot Password” link on the sign-in page to reset your password online.

Can you send me a new activation code as I have lost it, let it expire or did not receive it?
Contact us at MyChartSupport@mhhcc.org or our MyChart Patient Support Line at (812) 996-5536.

Where can I update my personal information (e.g., home address, e-mail or change my password)?
Log into MyChart and from the left menu, go to the Preferences section and select the appropriate option.

How is MyChart secure?
We take great care to ensure your health information is kept private and secure. Access to information is controlled through secure activation codes, personal usernames, and passwords. Each person controls his/her password, and the account cannot be accessed without that password. Unlike conventional e-mail, all MyChart messaging is done while you are securely logged on to our website.

What is your Privacy Policy?
MyChart is owned and operated by MyChart and is fully compliant with federal and state laws pertaining to your privacy. Your name and e-mail address will be treated with the same care and privacy given your health records and will never be sold or leased by MyChart.

I was logged out of MyChart, what happened?
We aim to protect your privacy and security of your information. While logged into MyChart, if your keyboard remains idle for 15 minutes or more, you will be automatically logged out of MyChart. We recommend that you log out of your MyChart session if you need to leave your computer for even a short period of time.

What do I need to use MyChart?
You need access to a computer connected to the Internet and an up-to-date browser (such as Chrome, Firefox, Safari, or Microsoft Edge). You can also use MyChart on your mobile phone by using the browser on your phone or the MyChart mobile app.

My activation code does not work, what should I do?
For your security, your activation code expires after 30 days and is no longer valid after the first time you use it. If you still have problems, email us at MyChartSupport@mhhcc.org or call our MyChart Patient Support Line at (812) 996-5536.

Is MyChart the only way to communicate with my doctor or access my patient record?
No! All your favorite ways of communicating with Memorial Hospital will remain. MyChart is a complimentary resource added for your convenience to engage with your doctor and Memorial Hospital.
Your Stay With Us

PARKING

Free parking is available for patients and visitors in the parking lots in front of and to the east of the hospital. A shuttle service is operated Monday – Friday mornings by volunteer services. Look for the friendly volunteer driving a golf cart through the parking lot!

TOBACCO-FREE CAMPUS

As a major employer and regional health care leader, Memorial Hospital must take a leadership role in the promotion of quality health care including the prevention of disease. With this commitment comes the responsibility of providing a safe and healthy environment for patients, visitors, and caregivers. As such, the use of all tobacco products including cigarettes, pipes, cigars, chewing tobacco, e-cigarettes, snuff, vaping pipes and all tobacco products as deemed by the FDA are prohibited on all property owned, managed, or leased by Memorial Hospital. This includes all buildings and grounds and applies to all caregivers, patients, visitors, vendors, volunteers, and the general public.

THE 800 GIFT SHOP

The 800 Gift Shop, staffed by volunteers, is open Monday - Friday from 9:00 a.m. - 6:00 p.m., Saturday 10:00 a.m. - 4:00 p.m. and Sunday noon - 3:00 p.m. The shop, located inside the main lobby, has a delightful collection of floral arrangements, gift items, home decor, greeting cards, stamps, trendy jewelry, clothing, handbags, toiletries, snacks, toys, books, stuffed animals, and seasonal items.

Hours are subject to change. For more specific information or to place an order, please call 812-996-0403.

CHAPEL

A beautiful chapel is located next to the main lobby and is open 24 hours each day. Visitors of all faiths are welcome to visit this chapel for prayer and quiet reflection. A Catholic Mass is held every Wednesday at 4:30 p.m. and is broadcast in-house on channel 98 on patient televisions. On occasion if Mass is not able to be held, a Holy Rosary will be recited on Wednesdays at 4:30 p.m.
**TELEPHONES**

Telephones are provided in each room. Patients may place and receive calls in their rooms anytime. Patient phone numbers match their room numbers. For example, room 2502 has a phone number of 812-996-2502. Local and long-distance calls may be made by dialing 9, the area code, and the seven digit number. Long-distance and toll-free calls can be made at any time if your calling card has a toll-free number. Long distance calls cannot be charged to your room. You may call the hospital operator by dialing 2345 at any time for assistance.

**CELLULAR DEVICES**

Memorial Hospital allows the use of cellular devices in most areas of the hospital. Due to the potential interference with patient equipment, we restrict the use of cellular devices in some areas of the hospital, including the Critical Care Unit. When you are in the Critical Care Unit, you may use your cellular devices only in the waiting area.

Memorial Hospital respects our patients' right to privacy. No photography or videotaping of patients or procedures will be allowed without the consent of the patient, family, representative, and at the discretion of the provider and caregivers.

**INTERNET**

Memorial Hospital offers free wireless Internet access for hospital guests.  
*Wi-Fi Network Name: Memorial-Guest*

**TELEVISION**

Televisions are provided in each patient room. Please be considerate of others and keep the TV volume down.

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**TV Channel Guide**

<table>
<thead>
<tr>
<th>Channel</th>
<th>Channel Name</th>
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Dining Services

THE TOWER CAFÉ

The Tower Café is complete with a Chef’s Table, Entrées and Sweet Endings, The Grille, Soups and Salads, many self-serve items, sandwiches, and sides. The Tower Café also offers specialty pizzas and homemade soups.

The Tower Café is conveniently located on the lower level of the LCM Tower.

HOT MEALS ARE AVAILABLE:

Monday through Friday
Breakfast: 6:30 a.m. – 9:30 a.m.
Lunch: 11:00 a.m. – 1:30 p.m.
Dinner: 4:30 p.m. – 6:30 p.m.

*The Grille is open between 2:00 p.m. and 4:30 p.m. Monday through Friday.

Weekends and Holidays*
7:00 a.m. – 2:00 p.m.
Easter, Thanksgiving and Christmas 11:00 a.m. – 6:00 p.m.

Vending Services: Snacks and beverages are available near waiting areas on each floor, as well as near the Tower Café.

Guest Meals May be Purchased by Calling Ext. 3663 (FOOD)
ROOM SERVICE DINING

“The Choice is Yours” room service dining allows you to order a freshly prepared meal when you are ready to eat. You can choose from a variety of made-to-order meals ranging from breakfast selections, salads, deli sandwiches, and grill items to meet your nutritional needs.

The ordering process is very simple. Once you’ve made your selection, dial extension 3663 (FOOD) on the telephone provided in your room. Orders can be placed anytime between 6:30 a.m. and 6:30 p.m. daily. All meals are made when ordered and delivered directly to the patient’s room. Breakfast service ends at 9:30 a.m. with lunch and dinner available throughout the rest of the day.

The following are suggested meal times:

- Breakfast: 6:30 a.m. – 9:30 a.m.
- Lunch: 11:00 a.m. – 1:30 p.m.
- Dinner: 4:30 p.m. – 6:30 p.m.

Note: Behavioral Health Center and Inpatient Rehab Center have set meal times.

ADVANCED MEAL ORDERS

Loved ones can help by pre-ordering a patient’s meal. Simply call extension 3663 (FOOD) from a hospital phone or 812-996-2882 from outside the hospital. Advanced meal orders can be placed at the following times:

- 9:00 a.m. – 10:30 a.m.
- 2:00 p.m. – 6:30 p.m.

These times are for advanced meal ordering only. When calling, indicate to the call center specialist you are calling to place an advance meal order.

GUEST TRAYS

Guest trays are available for purchase in the Tower Café to allow dining with your family member. Please visit the Tower Café to obtain a meal voucher for your guest tray. The cost for breakfast is $5 and $10 for lunch and dinner.

YOUR DIET

Your physician will order a specific diet for you. When you place your order by phone, our room service staff will assist you in selecting food items allowed on your specific diet.

We offer specialty menus, including our pediatric menu, which is designed for our littlest patients. Some foods may need to be modified or restricted if your physician would like you to follow a special diet or if you are undergoing certain medical tests.

For our Patients with Diabetes

- Please notify the nursing staff after ordering each meal so we can best help you manage your diabetes.
- As you know, timing of your blood sugar checks and medication is critical in keeping your blood sugar under good control. Please do not consume your meal until your nurse has checked your blood sugar.
- Please note that the number of carb servings is listed after each food item, for example: (1). One carb serving equals 15 grams of carbohydrates.

MEDICAL NUTRITION THERAPY

Both inpatient and outpatient medical nutrition therapy services are available by registered dietitians, who are highly trained in the science of medical nutrition therapy. An individual consultation with a registered dietitian will focus on nutrition areas related to disease prevention and management. Our skilled professionals will personalize recommendations to help you meet your personal health and wellness goals.

Our staff provides nutrition and lifestyle management for a variety of medical conditions such as wellness and healthy lifestyle, hypertension, high blood cholesterol, heart failure, diabetes, celiac disease, weight management, bariatric surgery, cancer, and home enteral/tube feeding.
Special Services

**INTERPRETERS**

The hospital uses an electronic audio or video communication service that utilizes qualified medical interpreters for a number of languages to ease the communication barriers between caregivers and patients and their families.

**HEARING-IMPAIRED**

A variety of communication options and tools are available to assist with in-person, written, and digital communication. If you or a family member is in need of assistance, please ask your nurse to make arrangements for you.

**DISCRIMINATION IS AGAINST THE LAW**

Memorial Hospital and Health Care Center complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

**Español (Spanish):** Memorial Hospital and Health Care Center cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

**ETHICS COMMITTEE**

There may be a time when you are called on to make a decision about health care for yourself or for a loved one. This can often be a confusing, frightening, or painful task. Increased understanding among patients, families, and health care providers may lessen your fears and help relieve the burden that such difficult decision-making may cause. Our Ethics Committee has been formed to help in such circumstances. This committee is a group of people who are prepared to assist and listen to you. They can help get all the facts you need to make a decision, and they can offer feedback and suggestions. They will never come up with a final answer or tell you what to do. However, they have been educated in medical ethics and can bring their ideas together in a forum for discussing clinical decisions. To request assistance from the Ethics Committee, please contact your nurse, social worker, or hospital chaplain, and he/she will assist you.

**Patient Experience Officer**

While you are our guest at Memorial Hospital, it is our goal to meet your health care needs with a firm commitment to excellence, competence, compassionate care, and respect for your dignity and rights. Your comfort and satisfaction are of the utmost concern to us.

The Patient Experience Officer is generally available in the hospital between 7:00 a.m. and 3:30 p.m., Monday through Friday, or you may leave a voice message anytime. He/she will act as a liaison between you and the hospital's staff and physicians to help address any concerns you or your family have with your care and treatment. We want your stay here to be as positive as it can possibly be.

Memorial Hospital Patient Experience Officer  
Call: 812-996-8513 • Toll Free: 800-852-7279, ext. 8513 • Email: patientexperience@mhhcc.org

12 : 812-996-2345
Your Hospital Team

**THE MEDICAL STAFF**

During your hospital stay, you may be treated by providers from our hospitalist services team. They will be directing your care while you are in the hospital. If you have had surgery, your care may also be directed by your surgeon. Please direct questions regarding your care to these providers.

**THE NURSING STAFF**

A team of professional nurses and nursing assistants provide 24-hour nursing care as well as education about your condition. A department director is responsible for leading and coordinating nursing care on each unit. Please feel free to contact your nurse or department leadership if you have questions or concerns.

Your caregivers will use the communication tool, AIDET (acknowledge, introduce, describe, explain, and thank you), regarding your care and treatment.

Memorial Hospital's nursing staff also practices bedside shift reporting in order to ensure a safe handoff of care between nurses by involving patients and families. At the end of each shift, your nursing staff will meet in your room to introduce your new nursing staff for the next shift. At this time, they will also discuss and provide a brief overview of the events during the previous shift as well as specifics regarding your illness and treatment. It is important that you feel included in your bedside shift report. Your input is invaluable.

**PASTORAL CARE**

We believe that total patient care demands attention to the body, mind, and spirit. This includes caring for the emotional and spiritual needs of each patient. Members of the Pastoral Care staff are available to assist you, whatever your religious preference. Your pastor, priest, minister, or rabbi is always welcome to visit while you are here at Memorial Hospital.

**DIETITIANS**

The hospital maintains a staff of registered dietitians to meet your dietary needs during your stay. If you have questions regarding your meals or diet, please ask your nurse to contact a dietitian.

**SOCIAL WORKERS**

Social workers are assigned to each patient care area and are trained to help patients and family members deal with financial, social, and emotional problems that relate to illness and hospitalization. Members of the department work with patients and families to help assist with long-term illnesses, rehabilitation, and end-of-life issues, as well as discharge planning.

**HOUSEKEEPING**

A member of our Environmental Services staff will clean your room throughout your stay. If you have any housekeeping needs, such as the room temperature changed, or any other room needs, please tell your nurse, and it will be taken care of as quickly as possible. It is our goal to keep you comfortable during your stay.

**OTHER PERSONNEL**

During your stay, other health care professionals may visit you, including personnel from the Laboratory, Radiology, Rehabilitation Services, or Respiratory Therapy. There are many other caregiver members who also contribute to your well-being during your hospital stay.
Pain Management

We are committed to managing your pain. During your stay, members of your health care team will ask you about your pain level. We rate patient pain level on a scale from 0 to 10. The staff will ask you frequently, “on a scale of 0 to 10, how would you rate your pain?” The 0 is equal to no pain and 10 is the worst possible pain you can imagine.

Another way to visualize the pain scale is by the FACES pain rating scale:

<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>2</th>
<th>4</th>
<th>6</th>
<th>8</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No Hurt</td>
<td>Hurts Little Bit</td>
<td>Hurts Little More</td>
<td>Hurts Even More</td>
<td>Hurts Whole Lot</td>
<td>Hurts Worst</td>
</tr>
</tbody>
</table>


Wong-Baker FACES® Pain Rating Scale

Why is pain management important during your stay at Memorial Hospital? It is important to control your pain to a tolerable level in order for you to carry out functions comfortably and to participate in your rehabilitation. Pain that is managed allows for walking, doing breathing exercises, and performing other activities that promote strength and prevent complications during your hospital stay.

You can be involved in your pain management by doing the following:

- Discuss pain management options with your physician or nurse.
- Let your physician know what pain medications have worked best for you in the past or if you had any adverse reactions to any medications that should be avoided.
- Discuss any concerns that you have about taking pain medications.
- Let your physician and nurse know what makes your pain more tolerable and what makes the pain worse.
- Discuss your comfort goal. This is the level of comfort you need to be at in order to carry out your activities of daily living, deep breathing, getting in and out of bed, and walking.

Every person has an individual response and reacts differently to pain medication. It is important to let your physician and/or nurse know if you are not getting pain relief to a tolerable level with the medications that are being given.
Patient Safety

While you are hospitalized, many individuals from our health care team will enter your room. The following information will assist in making your stay safe.

SAFETY AND MEDICATIONS

Medication safety is a priority and an ongoing process that involves many members of the health care team. We continually review our performance and implement new strategies to maintain your safety.

It is important we have an accurate record of all of your medications, including the medications you were taking at home. Your provider will then order those that should be continued based on your present condition. Do not take your home medications while in the hospital; only take medications given to you by your nurse. Be sure your health care team knows all of your allergies and the type(s) of reaction.

Your nurse will scan your identification bracelet before administering all medications, as this verifies correct patient identification. The nurse will then explain what medication(s) are ordered for you and educate you on any side effects of the new medication(s).

Standard medication administration times have been developed to coincide with meals, procedures, and activities. If you have a medication that must be administered at a specific time, please share this information with your nurse. Some medications are only given upon request, such as pain medications. All medications must be ordered by your provider.

At the time of discharge, the nurse and provider will review all your medications and determine which ones you are to take at home. You will receive a copy of your discharge medications.

Antibiotics may be prescribed for you. These treat bacterial infections only. Viral illnesses cannot be treated with antibiotics. When antibiotics are taken when not needed, they will not help and side effects could still hurt you. Taking antibiotics creates resistant bacteria. If you need antibiotics, take them exactly as prescribed. Don’t be afraid to ask questions; remember, you play an important role in medication safety.

INFECTION PREVENTION: OUR PRIORITY AND YOUR ROLE

The most important thing to stop the spread of germs and prevent infections is hand washing. Clean hands prevent infections and maintain safe health care environments. It is your right as a patient to ask all those entering your room, including family and health care providers, to clean their hands.

Patients and visitors should wash hands: before and after visiting, after touching objects/surfaces in the hospital room, before and after eating, after using the restroom, and any time you feel your hands are unclean. Proper hand hygiene techniques include:

- Hand Washing Technique: Routine hand washing includes: wet hands, apply soap, and vigorously rub together surfaces of lathered hands for a least 15-20 seconds, followed by a thorough rinsing under a stream of water.

- Alcohol-Based Hand Rub Technique: Apply golfball size of product to palm of hand, dip fingernails, rub hands together, and cover all surfaces of hands and fingers until hands are dry.

Soap/water and hand sanitizer are located in and near patient rooms.

For the safety of our patients, visitors, and community, we may restrict visitors due to influenza, COVID-19, or other contagious illnesses. Everyone plays an important role in infection prevention!
Patient Safety

YOUR CONDITION AND RECOVERY:

OUR PRIORITY AND YOUR ROLE

Our goal at Memorial Hospital is to take steps to address issues and concerns as quickly as possible. Although patients are monitored closely by the health care team, changes may occur in an instant, and either the patient or family may be the first to notice. Don’t hesitate to use the call button to reach the nurse caring for you or your family member. If this does not resolve your concerns, you may also ask to speak to the charge nurse. Additional options are to request to speak to the department director, clinical manager, or house supervisor.

Memorial Hospital also has specially trained nurses who are members of a Rapid Response Team. These nurses are a “second set of eyes” and can assist the patient’s nurse in assessing the changes that were noticed. This team can take action quickly when needed. Your nurse can call this team for assistance at any time.

FALL PREVENTION:

OUR PRIORITY AND YOUR ROLE

Due to your condition while hospitalized, there are factors that can potentially increase the risk for falls. Patient falls can result in injury and potentially lengthen your hospital stay. Memorial Hospital utilizes an organizational approach to prevent falls and improve patient safety. Thus, every caregiver is looking out for your safety and will respond to call lights. There may be times that a caregiver may offer assistance, but the request is not within the scope of their training. The caregiver member will then assist you in contacting the appropriate person to complete the requested task.

- MHHCC utilizes a fall scale for all inpatients to identify your risk for falling.
- A "No Pass Zone" improves patient safety and attentiveness to your needs, as all caregivers will respond to call lights.
- If you are considered a risk for falls, a yellow clasp with “Fall Risk” will be attached to your arm band.
- We utilize safety measures such as call buttons, side rails, and non-skid footwear to contribute to your safety.
- Please call first by using your call light and wait for help before you get out of bed or up from a chair.
- Non-slip footwear is available and encouraged to prevent your feet from slipping on the floor.
- Your hospital bathroom is not like yours at home, and unfamiliar places can increase your risk of falling.
- There are grab bars and emergency cords located next to the commode and in the shower for your safety.
- Depending on your level of risk for a fall, nursing staff may be required to stay with you in the bathroom for your safety.
- Please arrange for family to bring in assistive devices normally used at home, such as a walker, cane, glasses, hearing aids, etc.
- If a patient experiences a fall, nursing staff will complete a post-fall huddle to determine the reason for the fall and implement additional safety measures to prevent future falls.

Remember, Call Don’t Fall!

Memorial Hospital strives to provide safe, high-quality care. Everyone on the health care team is working to attain this goal. Thank you for the vital role you play in patient safety.
Your Visitors

Tower Café

(Lower Level of LCM Tower)

Monday through Friday (Except Holidays*)
6:30 a.m. - 6:30 p.m.

Saturday and Sunday
7:00 a.m. - 2:00 p.m.

* Easter, Thanksgiving, and Christmas
11:00 a.m. - 6:00 p.m.

The 800 Gift Shop

(Level 1)

Monday - Friday: 9:00 a.m. - 6:00 p.m.
Saturday: 10:00 a.m. - 4:00 p.m.
Sunday: Noon - 3:00 p.m.

Hours are subject to change.
The 800 Gift Shop is closed on holidays.

Chapel Schedule

MASS: Every Wednesday at 4:30 p.m. (View on Channel 98)
Please Note: if a Mass is not able to be held, a Holy Rosary will be recited.

The chapel is open 24 hours every day for private prayer and reflection.
Please note that occasionally the chapel hosts special services and events.
Hotel Information

**Comfort Inn**
(812) 556-2888
1970 Hospitality Drive
Jasper, IN 47546

**Clarion Pointe**
(812) 482-6000
272 Brucke Strasse
Jasper, IN 47546

**Fairfield Inn & Suites by Marriott**
(812) 250-5155
333 River Centre Landing
Jasper, IN 47546

**Hampton Inn**
(812) 481-1888
355 3rd Avenue
Jasper, IN 47546

**Holiday Inn Express**
(812) 482-3344
2000 Hospitality Drive
Jasper, IN 47546

**Super 8 by Wyndham**
(812) 827-2764
75 Indiana Street
Jasper, IN 47546

**SureStay Plus Hotel by Best Western**
(812) 482-5555
951 Wernsing Road
Jasper, IN 47546

Be sure to ask if the hotel offers special discounted rates for families of patients at Memorial Hospital.
Discharge Guide

GETTING READY TO GO HOME

Preparation for the day you go home begins when you are admitted. The transition from a hospital stay to home requires careful planning and communication to be sure your recovery continues well at home.

Your health care team will work diligently to inform you of what you and your family need to know. They will also take the time to make sure you and your family understand the details of your care, including such information as properly taking medications or how to obtain needed home medical equipment.

When the doctor writes the order for you to go home, keep in mind this is an initial step in a process that can still take a few hours to complete.

Before you go home, your team will:

- Review the reason you were admitted.
- Talk about your condition at discharge.
- Let you know what you can do to help you get better and stay well.
- Clarify your activity level or restrictions in activity.
- Find out about any allergies you may have.
- Go over your medicines - including the dose, how often to take, when you last took the medicine, and any possible side effects.
- Make all your follow-up appointments with providers (some offices don’t open until 9 a.m.).
- Schedule outpatient tests and complete necessary paperwork.
- Review signs/symptoms to report to your provider.
- Help you understand how to manage your pain.
- Show you how to care for wounds/incisions.
- Prepare for any equipment you need at home, including such items as shower chairs, bedside toilets, etc., AND they can help arrange delivery of equipment.

YOUR DISCHARGE TEAM

Your discharge team is made up of several people including:

- Provider (doctor, nurse practitioner, physician assistant)
- Nurse
- Family
- Social Worker/Discharge Planner
- Case Manager/Utilization Review

We know a hospital admission means you will have a lot to absorb and remember, sometimes about a condition or disease that is new to you. Your discharge team will meet with you and your family as much as necessary to make sure you are well prepared to go home. The social worker/discharge planner will make arrangements for home care, home medical equipment, and other home needs.

MAKE SURE TO ASK QUESTIONS

We recommend that you or your family members make a list of questions that arise during your stay. Write down anything you want to ask your doctor or nurse and be sure to get the answer before you leave for home.
Post-Acute Services

IF YOU CAN’T GO HOME SAFELY

There are occasions when patients need additional treatment or care after they are discharged from the hospital. For your convenience, a representative from Memorial Hospital’s Post-Acute Services can meet with you and your family while you are still at the hospital and make arrangements for after-care services.

INPATIENT REHABILITATION SERVICES

Memorial Hospital’s Inpatient Rehabilitation Center is designed for patients who require intensive inpatient rehabilitation. Your social worker can provide you with further information. A free, pre-admission screening by a post-acute services representative will help determine your potential to benefit from our intensive rehabilitation program.

OUTPATIENT REHABILITATION SERVICES

Memorial Hospital’s Outpatient Rehabilitation Services is designed for patients who are able to go home but continue to need additional therapy to return to their prior level of function. Services include physical, occupational, and speech therapy.

HOME HEALTH CARE

As an affiliate of Deaconess Health System, Memorial Hospital offers home health care services through Deaconess Home Health, a Medicare-certified home care agency which supplies nurses, home health aides/CNAs, and occupational, physical and speech therapies for home health care in Dubois and surrounding counties. They also provide medical social worker services.

HOME MEDICAL EQUIPMENT

Deaconess Home Medical Equipment supplies durable medical equipment (DME) in order to provide patients with a wide range of medical equipment supplies and oxygen therapy equipment for their homes.

CARE TRANSITIONS/FAMILY PALLIATIVE CARE

Care Transitions is a free service which provides discharge assistance to patients with acute and chronic illness by assisting with the transition from hospitalization to home. A nurse provides support to the patient by phone contact or home visit.

Family Palliative Care is a free service which provides skilled nursing to patients who have chronic illness. The goal is to improve the patient's quality of life in their home by providing support and care of the patient and family.
Your nurse will go over any last-minute instructions with you and your caregiver(s). Once you are ready to leave, your driver will be asked to pull up in the front circular drive, and your nurse will assist you to the front door by wheelchair.

**DISCHARGE CHECKLIST**

Make sure you know the answer to these questions before you leave the hospital:

- What is my main health problem?
- When are my follow-up appointments?
- What activities can I do? What can’t I do?
- What should/can I eat?
- What medicines should I take at home?
- Which medicines are new?
- What are the new medicines for?
- What are the possible side effects of the new medicines?
- Where will my prescriptions be filled?
- What signs and symptoms should prompt a call to my provider?
- What if I need help at home?
- What equipment/supplies do I need for home?
- Do I have follow-up tests scheduled?
Financial Services

PREPARING FOR DISCHARGE

Memorial Hospital and Health Care Center provides financial counselors who are dedicated to assisting you with your financial concerns and/or questions. Our financial team can help with:

- Understanding your bill.
- Explaining what you can expect during the billing process.
- Accepting payment.
- Applying for financial assistance.

FINANCIAL SERVICES CONTACT INFORMATION

For more information about your bill:

812-996-0651
8:30 a.m. – 4:00 p.m. • Monday – Friday
closed daily from 12:30 - 1:15 p.m.

For questions regarding applying for financial assistance:

800-467-6802
option 5, then option 4
Your Feedback

PATIENT EXPERIENCE SURVEY
Watch for a survey from our partner, PRESS GANEY, and please tell us what we did well and how we could improve. This survey may come by mail, e-mail, or text message. The email will be from noreply@patients.pgsurveying.com and the texting number will be 91994. Our goal is to provide safe, quality care and an excellent patient experience. Thank you in advance for taking the time to partner with us in doing so!

The survey will ask questions regarding:
- Nursing care
- Provider care
- Medicines and side effects
- Neat, calm, and restful room
- Discharge information
- Overall stay

CONNECT: A DISCHARGE CALL
We want to ensure a safe transition home after you leave our care. You will receive an automated call within three days of discharge asking about your current condition and stay. Your participation will help improve quality of care for future visits.

You may be asked questions similar to the following:
- Compared to yesterday, would you say your health is better, worse, or about the same?
- Do you have any questions about your medications?
- Were you satisfied with the care you received at the facility?
- Do you have all the information you need to schedule and attend a follow-up visit with your provider?

Want to say Thank You to an Extraordinary Team Member?
Share your story of what your nurse or another team member has meant to you, and they may be selected to receive this very meaningful recognition.

Ask for a nomination form or visit us online at www.mhhcc.org/nursing/daisy-and-gardener-awards/
(No cost involved. Just a great way to honor.)
MEMORIAL HOSPITAL AND HEALTH CARE CENTER is a faith-based, not-for-profit health center offering a comprehensive range of acute medical services in a 128-bed facility located on Ninth Street in Jasper. As a regional health center with over 250 physicians and advanced practice providers practicing a variety of specialties, over 1,600 employees, and 250 volunteers, Memorial Hospital serves Dubois and surrounding counties in Southern Indiana. Established in 1951, the hospital annually provides care for approximately 6,000 inpatients and 250,000 outpatients.

SERVICES OF MEMORIAL HOSPITAL:

- Advance Care Planning
- Ambulance Services
- Anesthesiology
- Audiology
- Behavioral Health
- Bone Densitometry
- Breast MRI
- Cancer Center
- Cardiac Angioplasty, Catheterization & Rehab
- Cardiopulmonary
- Chapel
- Computerized Tomography (CT)
- Counseling Center
- Critical Care
- Dermatology
- Diabetes Education
- Ear, Nose & Throat
- Emergency Services
- Employer Services
- Facial Plastics and Reconstruction
- Family Medicine
- Fitness Classes
- Foundation
- Gastroenterology
- General Surgery
- Gerontology
- Health Screenings
- Heart & Vascular Center
- Hematology
- Home Health Care
- Hospitalist Services
- Inpatient Rehab Center
- Internal Medicine
- Laboratory
- Lactation Consultation
- Lung Screening
- Magnetic Resonance Imaging (MRI)
- Mammography (2D & 3D)
- Maternity
- Medical
- Medication Resource Center
- Multi-Specialty Clinic
- Nephrology (Kidney)
- Neurology
- Nuclear Medicine
- Nutrition Counseling
- Occupational Therapy
- Ophthalmology
- Oral/Maxillofacial Surgery
- Orthopaedic Surgery
- Outpatient Center
- Outpatient Surgery Center
- Palliative Care
- Parish/Faith Community Nursing
- Pastoral Care
- Pathology
- Patient Financial Services
- Pediatrics
- Perinatal Services
- Pharmacy/IV Therapy
- Physical Therapy
- Plastic Surgery
- Podiatry
- Post-Surgical Services
- Prayer & Presence Program
- Psychiatry
- Pulmonology
- Radiology/Medical Imaging
- Rehabilitation
- Respiratory Home Care/DME
- Respiratory Therapy
- Sleep Center
- Social Work
- Speech Therapy
- Spine Specialist
- Support Groups
- Surgical Services
- Telemedicine
  - TeleNeurology (Stroke)
- Trauma Services
- Ultrasound
- Urgent Care
- Urology
- Volunteers/Auxiliary
- Wellness Classes/Coaching
- Women and Infant Services
- Women's Center
- Wound Care
- X-Ray

Information regarding providers who are accepting new patients may be obtained by calling 812-996-CARE (2273).
Hospital Patient Safety Grade of “A” in 2023 and spring 2024 The Leapfrog Group
Top 10% in Nation for Medical Excellence in General Surgery in 2024 CareChex®
Top 10% in Region for Medical Excellence in Vascular Surgery in 2024 CareChex®
Top 10% in State for Patient Safety in Cancer Care 2023 and 2024 CareChex®
Top 20 Rural and Community Hospital in 2018-2024 The Chartis Center for Rural Health
Top 20% for Overall Patient Satisfaction for Strategic Healthcare Programs Strategic Healthcare Programs
Memorial Hospital Foundation Four-Star Rating and 100/100 score Charity Navigator
Memorial Hospital Foundation 2023 Platinum Seal of Transparency Candid
Get With the Guidelines® - Stroke Gold Plus Award 2021/2022/2023 The American Heart Association
Top 10% in Nation for Medical Excellence in Cancer Care Treatment in 2023 CareChex®
Top 10% in Nation for Medical Excellence in Gall Bladder Removal in 2023 CareChex®
Top 100 in Nation for Medical Excellence in Neurological Care in 2023 CareChex®
Top 10% in Nation for Medical Excellence in Stroke Care in 2020/2021/2022/2023 CareChex®
Top 100 in Nation for Medical Excellence in Heart Failure Treatment in 2018/2020/2021/2022 CareChex®
Top 100 in Nation for Medical Excellence in Heart Attack Treatment in 2022 CareChex®
Top 10% in Nation for Medical Excellence in Neurological Care in 2020/2021/2022 CareChex®
Top 10% in Region for Trauma Care in 2022 CareChex®
Outstanding Patient Experience Award™ 2008 - 2022 Healthgrades®
Hip Fracture Certification The Joint Commission’s Gold Seal of Approval®
Excellence in Infant and Maternal Health Indiana Hospital Association (IHA)
Lung Cancer Screening Center American College of Radiology (ACR)
Primary Stroke Certification The Joint Commission’s Gold Seal of Approval®
Top 10% in Nation for Medical Excellence in Heart Attack Treatment in 2021 CareChex®
Top 10% in Nation for Medical Excellence in Heart Failure Treatment in 2021 CareChex®
Top 10% in Nation for Medical Excellence in Overall Surgical Care in 2020/2021 CareChex®
Top 10% in Nation for Patient Safety in Overall Hospital Care in 2018/2020/2021 CareChex®
Top 10% in Nation for Patient Safety in Major Bowel Procedures in 2020/2021 CareChex®
Magnet® Recognition 2020 The American Nurses Credentialing Center (ANCC)®
Malcolm Baldrige National Quality Award Recipient 2018 National Institute of Standards and Technology
Our Mission
Christ’s healing mission of compassion empowers us to be for others through quality and excellence.

Our Vision
We are committed to being the preferred health and wellness provider; transforming lives through faith-based, compassionate care.

Our Core Values

RESPECT FOR HUMAN DIGNITY
...to recognize each person as a unique and valued individual
“So God created humankind in his image, in the image of God he created them…” Genesis 1:27a

COMPASSIONATE CARING
...to continue Christ’s healing mission
“Rejoice with those who rejoice, weep with those who weep.” Romans 12:15

QUALITY
...to excel in all our actions
“Whatever your task, put yourselves into it, as done for the Lord and not for your masters…” Colossians 3:23

JUSTICE
...to create an environment guided by integrity, honesty, and fairness
“...What does the Lord require of you but to do justice, and to love kindness, and to walk humbly with your God.” Micah 6:8b

STEWARDSHIP
...to use responsibly all resources
“Like good stewards of the manifold grace of God, serve one another with whatever gift each of you has received.” 1 Peter 4:10
THE RISEN CHRIST CRUCIFIX

While there are many different styles of crucifixes, the one hanging on the walls throughout Memorial Hospital and Health Care Center is called the Resifix, or resurrection crucifix, because Christ is depicted as the Risen Christ – clothed in robes rather than stripped as for His execution, arms outstretched as if they had just been nailed to the cross and at the same time spread out in praise, embracing His people. The resurrected Christ saved the world with His death. The Resurrection crucifix praises this redemption. Jesus Christ remaining on the cross represents the eternal presence of God on earth, reminding us that He still lives within all of us.

STATUE REPLICA OF VENERABLE MARY POTTER

The bronze statue in the front lobby of the hospital is a life size replica of Venerable Mary Potter, the founder of the Little Company of Mary Sisters. Mary Potter was born on November 22, 1847, in England in the wake of the Industrial Revolution. The youngest of five children, Mary Potter had four brothers and was raised largely by her strict, but loving, mother.

As an adult, Mary set about her life’s work of serving God. In doing so, she sought to establish a congregation of religious Sisters whose lives are centered on prayer and care for those who were sick, dying, and in need. When she went to Rome in 1882 to gain approval for the constitutions of her new congregation, Mary Potter also worked among the poor of the area, establishing a hospital - called the Calvary Hospital - as well as the Chapel of the Maternal Heart.

On April 9, 1913, after suffering from ill health for many years, Mary Potter died in Rome, where her body lay until 1997 when it was returned to the Cathedral of St. Barnabas in Nottingham. In 1988, Pope John Paul II declared Mary Potter Venerable, the first step to canonization in the Catholic faith.

THE LITTLE COMPANY OF MARY SISTERS,

founded by Venerable Mary Potter in Nottingham, England on July 2, 1877, is an International Marian Congregation of Women Religious who have committed their lives to pray and care for the suffering and dying of the world. The Congregation is named for the “little company” of faithful followers who remained with Mary, the Mother of Jesus, at the foot of the cross. They minister in countries throughout the world and strive to make visible the healing presence of Jesus in the midst of human suffering through prayer, compassion, and presence. The Little Company of Mary Sisters founded Memorial Hospital and Health Care Center in 1951 and continued its support for over 70 years.
Volunteer with us

Volunteers are an essential part of living our mission in being for others through quality and excellence. They come from a wide variety of backgrounds, but share a common desire to help others. Volunteers are retirees, teenagers, former patients, homemakers, husband and wife teams, those who are busy and those who are not so busy...volunteers are people just like you!

Volunteer Opportunities:
• Auxiliary Events
• Departmental Projects
• Blood Drives
• Clinics
• Emergency Department
• Food and Nutrition Services
• The 800 Gift Shop
• Human Resources
• Lange-Fuhs Cancer Center
• Linen Services/Sewing
• Pastoral Care
• Patient Financial Services
• Patient Floors & Clerical Assignments
• Prayer and Presence
• Quality Services
• Recycling
• Shuttle Services
• Information Desk

We make every effort to match unique gifts and talents of our volunteers to the unique needs of our hospital and the communities we serve.  

To learn more about the benefits, requirements, or to request a volunteer application, please contact the Volunteer/Guest Services Supervisor at 812-996-0504.
Advance Directives

Questions? Contact Memorial Hospital’s Health Ministry Office at 812-996-8422.

You have the right to choose the medical care and treatment you receive. Advance Directives helps make sure you have a say in your future health care and treatment if you become unable to communicate. Even if you do not have written advance directives, it is important to make sure your physician and family are aware of your health care wishes.

An Advance Care Directive lets you designate a health care representative. A health care representative is a person chosen by you to make healthcare decisions, including end-of-life decisions, if you are unable to make your own. It is a good idea to talk with this person about your preferences ahead of time. A doctor will determine if you are unable to make your own decisions.

• You can choose one or more healthcare representatives to be your advocate. Sometimes, they are also called a medical decision maker, surrogate, healthcare power of attorney, agent, or proxy.

• Advance Care Directives choose the kind of health care you want. This way, those who care for you will not have to guess what you want if you are not able to tell them yourself.

• The Advance Care Planning form must be signed before it can be used. This is a legal form that lets you have a voice in your health care. It will let your family, friends, and medical providers know how you want to be cared for if you cannot speak for yourself.

If you complete an Advance Directive form, make sure your healthcare representative, immediate family members, physician, attorney, and other healthcare providers know that you have an Advance Directive. Be sure to tell them where it is located. You should ask your physician and other healthcare providers to confirm your Advance Directive is part of your permanent medical chart. If you have a power of attorney, you should give a copy of your Advance Directive to your power of attorney. You may wish to keep a small card in your purse or wallet that states you have an Advance Directive, where it is located, and who to contact for your power of attorney or healthcare representative if you have named one. For additional information on Advance Directives, visit the Indiana State Department of Health Advance Directives Resource Center located at https://www.in.gov/health/cshcr/indiana-health-care-quality-resource-center/advance-directives-resource-center/ The site includes links to state forms, links to Indiana statutes, and links to other web sites.
This notice describes how medical information about you may be used and disclosed and how you can access this information. Please read and review carefully.

**OUR PLEDGE REGARDING MEDICAL INFORMATION:**
We understand that medical information about you and your health is personal. We are committed to protecting medical information about you. We create a record of the care and services you receive.

This record is needed to provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care generated by Memorial Hospital and Health Care Center, whether made by Memorial Hospital personnel or your personal physician. Your personal physician may have different policies or notices regarding the physician’s use and disclosure of your medical information created in the physician’s office or clinic. This notice will tell you about the ways in which we may use and disclose medical information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of medical information.

We are required by law to:
- ensure that medical information identifying you is kept private
- give you this notice of our legal duties and privacy practices with respect to medical information about you
- follow the terms of the notice that are currently in effect
- notify affected individuals if a breach of unsecured medical information occurs

**HOW WE MAY USE AND DISCLOSE MEDICAL INFORMATION ABOUT YOU:**
The following categories describe different ways that we use and disclose medical information. In each category of uses or disclosures, we will explain and try to give some examples. Not every use or disclosure in every category will be listed. However, all of the ways we are permitted to use and disclose information will fall within one of these categories.

**For Treatment** We may use medical information about you to provide you with medical treatment or services. We may disclose medical information about you to physicians, nurses, technicians, medical students, clinical students, or other hospital personnel who are involved in your care at Memorial Hospital and Health Care Center. For example, a physician treating you for a broken leg may need to know if you have diabetes because it may slow the healing process. In addition, the physician may need to tell the dietitian if you have diabetes so that we can arrange for appropriate meals. Different departments of the hospital may also share medical information about you in order to coordinate the things you need, such as prescriptions, lab work and X-rays. We may also disclose medical information about you to people outside the hospital who may be involved in your medical care after you leave the hospital, such as family members, clergy or others who provide services that are part of your care.

**For Payment** We may use and disclose medical information about you so that the treatment and services you receive at the hospital may be billed to and payment collected from you, an insurance company or a third party. For example, we may need to give your health plan information about surgery you receive at the hospital so your health plan will pay us or reimburse you for the surgery. We may also tell your health plan about a treatment you are going to receive in order to obtain prior approval or determine whether your plan will cover the treatment.

**For Health Care Operations** We may use and disclose medical information about you for Memorial Hospital and Health Care Center operational reasons. These uses and disclosures are necessary to run the hospital and ensure that all of our patients receive quality care. For example, we may use and disclose medical information to review our treatment and services, evaluate the performance of our staff in caring for you, or to accrediting agencies that evaluate our performance. We may also combine medical information about many hospital patients to evaluate current services, decide what additional services the hospital should offer, and whether certain new treatments are effective. We may also disclose information to physicians, nurses, technicians, medical students, clinical students, and other hospital personnel for review and learning purposes. We may also combine the medical information we have with medical information from other health care providers to compare how we are doing and areas for improvement in the care and services we offer. We may remove information that identifies you from this set of medical information so others can use it to study health care and health care delivery without patient identification.

**Appointment Reminders** We may use and disclose medical information to contact you as a reminder that you have an appointment for treatment or medical care.

**Treatment Alternatives** We may use and disclose medical information to tell you about or recommend possible treatment options or alternatives that may be of interest to you.

**Health-Related Benefits and Services** We may use and disclose medical information to tell you about health-related benefits or services that may be of interest to you.
**Fundraising Activities** We may disclose information to the Memorial Hospital and Health Care Center Foundation so that the Foundation may contact you in raising money for the hospital. We would only release contact information, such as your name, address and phone number and the dates you receive treatment or services at the hospital; and your age, gender, and insurance status. If you do not want the hospital to contact you for fundraising efforts, you have the right to opt-out of receiving such communications by notifying our Privacy Officer in writing at the address at the end of this notice.

**Hospital Directory** We may include certain limited information about you in the hospital directory while you are a patient at the hospital. This information may include your name, location in the hospital, your general condition (e.g., fair, stable, etc.) and your religious affiliation. The directory information, except for your religious affiliation, may be released to people who ask for you by name. Your religious affiliation may be given to a member of the clergy, such as a priest or rabbi, even if they don’t ask for you by name. This will allow your family, friends, and clergy to visit you in the hospital and generally know how you are doing. You will have the opportunity to have your information not listed in the directory.

**Individuals Involved in Your Care or Payment for Your Care** We may release medical information about you to friends and family members who are involved in your medical care. We may also give information to someone who helps pay for your care. We may also tell your family or friends your condition and that you are in the hospital. If possible, we will ask your permission prior to discussing your care with others. In addition, we may disclose medical information about you to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status and location.

**Research** Under certain circumstances, we may use and disclose medical information about you for research purposes. For example, a research project may involve comparing the health and recovery of all patients who receive one medication to those who receive another for the same condition. All research projects, however, are subject to a special approval process. This process evaluates a proposed research project and its use of medical information, trying to balance the research needs with patients’ need for privacy of their medical information. Before we use or disclose medical information for research, the project will have been approved through this research approval process. Medical information about you may be disclosed to people preparing to conduct a research project; for example, to help them look for patients with specific medical needs, so long as the medical information they review does not leave the hospital. We will ask for your specific permission if the researcher will have access to your name, address or other information that reveals who you are, or will be involved in your care at the hospital.

**As Required By Law** We will disclose medical information about you when required to do so by federal, state or local law.

**To Avert a Serious Threat to Health or Safety** We may use and disclose medical information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.

**SPECIAL SITUATIONS**

**Organ and Tissue Donation** If you are an organ donor, we may release medical information to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank, as necessary, to facilitate organ or tissue donation and transplantation.

**Military and Veterans** If you are a member of the armed forces, we may release medical information about you as required by military command authorities. We may also release medical information about foreign military personnel to the appropriate foreign military authority.

**Workers’ Compensation** We may release medical information about you for workers’ compensation or similar programs. These programs provide benefits for work-related injuries or illness.

**Public Health Risks** We may disclose medical information about you for public health activities. These activities generally include the following:

- to prevent or control disease, injury or disability
- to report births and deaths
- to report reactions to medications or problems with products
- to notify people of recalls of products they may be using
- to notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition
- to notify the appropriate government authority if we believe a patient has been the victim of abuse, neglect or domestic violence. We will only make this disclosure if you agree or when required or authorized by law.

**Health Oversight Activities** We may disclose medical information to a health oversight agency for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.

**Lawsuits and Disputes** If you are involved in a lawsuit or dispute, we may disclose medical information about you in response to a court or administrative order. We
may also disclose medical information about you in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.

➤ **Law Enforcement** We may release medical information if asked to do so by a law enforcement official for the purpose of:
- Responding to a court order, subpoena, warrant, summons or similar process;
- Identifying or locating a suspect, fugitive, material witness, or missing person;
- Assisting the victim of a crime if, under certain limited circumstances, we are unable to obtain the person’s agreement;
- Reporting a death we believe may be the result of criminal conduct;
- Reporting criminal conduct at the hospital; and
- In emergency circumstances to report a crime, the location of the crime or victims, or the identity, description or location of the person who committed the crime.

➤ **Coroners, Medical Examiners and Funeral Directors** We may release medical information to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. We may also release medical information about patients of the hospital to funeral directors as necessary to carry out their duties.

➤ **National Security and Intelligence Activities** We may release medical information about you to authorized federal officials for intelligence, counterintelligence and other national security activities authorized by law.

➤ **Protective Services for the President and Others** We may disclose medical information about you to authorized federal officials so they may provide protection to the President, other authorized persons of foreign heads of state to conduct special investigations.

➤ **Inmates** If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release medical information about you to the correctional institution or law enforcement official. This release would be necessary (1) for the institution to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.

➤ **Psychotherapy Notes** We must obtain an authorization for any use or disclosure of psychotherapy notes except for use by the originator of the notes for treatment; use or disclosure by us for our own training programs; use or disclosure by us to defend ourselves in a legal action brought by you; disclosure to the Secretary of Health and Human Services to determine our compliance with the Privacy Regulation; disclosure required by law; disclosure permitted for health oversight activities; disclosure to a coroner, medical examiner or funeral director in carrying out their duties; or disclosure to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.

**YOUR RIGHTS REGARDING MEDICAL INFORMATION ABOUT YOU.**

You have the following rights regarding medical information we maintain about you:

➤ **Right to Inspect and Copy** You have the right to inspect and obtain copies of medical information that may be used to make decisions about your care. Usually, this includes medical and billing records, but does not include psychotherapy notes.

To inspect and receive copies of medical information that may be used to make decisions about you, you must submit your request in writing to our Health Information Management department. If you request a copy of the information, we may charge a fee for the cost of copying, mailing or other cost associated with your request.

We may deny your request to inspect and copy in certain very limited circumstances. If you are denied access to medical information, you may request that the denial be reviewed. Another licensed health care professional chosen by Memorial Hospital and Health Care Center will review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.

➤ **Right to Amend** If you feel that medical information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for Memorial Hospital and Health Care Center. To request an amendment, your request must be made in writing and submitted to our Health Information Management department. In addition, you must provide a reason that supports your request.

We may deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that:
- Was not created by us, unless the person or entity that created the information is no longer available to make the amendment
- Is not part of the medical information kept by or for Memorial Hospital and Health Care Center
- Is not part of the information which you would be permitted to inspect and receive copies of
- Is accurate and complete

➤ **Right to an Accounting of Disclosures** You have the right to request an “accounting of disclosures.” This is a list of the disclosures we made of medical information about you, excluding disclosures for purposes of treatment, payment or health care operations. This list will also exclude any disclosures you authorize in writing. To request an accounting of disclosures you
must submit your request in writing to our Health Information Management department. Your request must state a time period. Your request should indicate in what form you want the list (for example, on paper or electronically). The first list you request within a 12-month period will be free. For additional lists, we may charge you for the cost of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred.

➤ **Right to Request Restrictions** You have the right to request a restriction or limitation on the medical information we use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the medical information we disclose about you to someone who is involved in your care or the payment for your care, like a family member or friend. For example, you could ask that we not use or disclose information about any surgical procedures you may have had. We are not required to agree to your request except as set out below. If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment. To request restrictions, you must make your request in writing to our Privacy Officer at the address listed at the end of this notice. In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure, or both; and (3) to whom you want the limits to apply, for example, disclosure to your spouse. **We must agree to your request to restrict disclosure of medical information about you to a health plan if the disclosure is for the purpose of receiving payment or other health care operations, the disclosure is not required by law, and the medical information relates to services for which you have made payment in full.**

➤ **Right to Request Confidential Communications** You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by mail. To request confidential communications, you must make your request in writing to our Privacy Officer at the address listed at the end of this notice. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

➤ **Right to a Paper Copy of This Notice** You have the right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time. Even if you have agreed to receive this notice electronically, you are still entitled to a paper copy of this notice. You may obtain a copy of this notice at our website, www.mhhcc.org.

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**CHANGES TO THIS NOTICE**

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for medical information we already have about you as well as any information we receive in the future. We will post a copy of the current notice in the hospital. The notice will contain on the fourth page, in the bottom left-hand corner, the effective date. In addition, each time you register at or are admitted to the hospital for treatment or health care services as an inpatient or outpatient, we will offer you a copy of the current notice in effect.

**COMPLAINTS**

If you believe your privacy rights have been violated, you may file a complaint with Memorial Hospital and Health Care Center or with the Secretary of the Department of Health and Human Services. To file a complaint with the hospital, contact our Privacy Officer at the number below. All complaints must be submitted in writing. You will not be penalized for filing a complaint.

**OTHER USES OF MEDICAL INFORMATION**

Other uses and disclosures of medical information not covered by this notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose medical information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose medical information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission.

We must obtain written permission for any use or disclosure of protected health information for marketing unless the communication is a face-to-face communication made by us to you or is a promotional gift of nominal value provided by us to you. If the marketing involves financial remuneration to us, the written permission signed by you must state that such remuneration is involved. We must obtain written permission from you for any disclosure of protected health information which is the sale of protected health information and such written permission must state that the disclosure will result in remuneration to us.

If you have any questions about this notice, please call or contact: Privacy Officer at 812-996-0474.
Address: Memorial Hospital and Health Care Center
Attn: Privacy Officer
800 W. 9th Street, Jasper, Indiana 47546

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Reviewed/Approved: 05/2024
Last Revised: 01/2019
OBJECTIVE

It is the policy of Memorial Hospital and Health Care Center to preserve the rights and responsibilities of patients and to facilitate staff awareness of these rights and responsibilities. Memorial Hospital and Health Care Center respects patient values and dignity. It is the intent of Memorial Hospital to help a patient be well-informed, communicate openly with health professionals, and to participate in treatment decisions leading to more effective health care. In all aspects of patient care, the fundamental dignity and value of each patient will be honored and respected. MHHCC maintains high standards of patient care which are enhanced by recognition of and adherence to the Ethical and Religious Directives for Catholic Health Care Services, as well as to this Patient Rights Policy.

ACCESS TO IMPARTIAL TREATMENT:
No person shall be denied access to treatment or accommodations that are available and medically indicated on the basis of such considerations as race, culture, ethnicity, religion, sex, age, physical or mental disability, socioeconomic status, sexual orientation or expression, or the nature of the source of payment for care. All individuals shall be informed of the Patient’s Rights upon admission in a language or method of communication they understand. They shall also be informed of the process to follow if a quality of care issue arises.

PATIENT PRIVACY: Each individual who enters Memorial Hospital and Health Care Center for care has the right to receive care in a private, safe setting, free from all forms of abuse or harassment. Representatives of agencies not connected with the Hospital, and who are not directly or indirectly involved in the patient's care, shall not be permitted access to the patient for the purpose of interviewing, interrogating, or observing in any way that is detrimental to the patient's condition or obstructive to the care being provided. This right shall prevail in all areas of the Hospital, the Emergency Department and Outpatient Service areas.

COMMUNICATION: The patient has the right to communicate with those responsible for providing care and to receive from them adequate information concerning the nature and extent of the medical problem, the planned course of treatment and the prognosis. In addition, the patient has the right to be instructed and counseled regarding the discharge plan. When a language barrier or hearing impairment exists, services are available electronically for interpretation services. Information is provided to the patient with speech, vision, hearing, or cognitive impairments in a manner that meets his/her needs.

PATIENT RIGHTS

1. You and your family have the right to participate in the planning of your care including treatments and services, effective pain management, end-of-life decision making, and to be treated with consideration and respect. You or your representative, when appropriate, have the right to be informed in advance of initiating or discontinuing care whenever possible.

2. You have the right to have a family member or representative of your choice and your primary care provider notified promptly of your admission.

3. You have the right to obtain from your provider complete, current information concerning your diagnosis, treatment and prognosis tailored to your preferences and ability to understand, and to know the names and roles of people treating you. You have the right to be informed about the outcomes of your care, including unanticipated outcomes.

4. You have the right to receive information about pain prevention and pain relief. You have the right to expect that your report of pain will receive a prompt response.

5. You and your designated representative have the right to receive from your provider information necessary to enable you to make a decision as to whether to consent to a procedure or treatment. You and your surrogate decision-maker have the right to information about outcomes of your case and treatments in order to participate in current and future health care decisions.

6. You and your designated representative have the right to consent to or refuse a treatment, as permitted by law, throughout your hospital stay. If you refuse a recommended treatment, you will receive other needed and available care. This right must not be construed as a mechanism to demand the provision of treatment or services deemed medically unnecessary or inappropriate.
7. You have the right to expect unrestricted access to communication. Sometimes, however, it may be necessary to restrict visitors, mail, telephone calls, etc., as a component of patient care (for example, to prevent injury or deterioration in the patient, damage to the environment, or infringement on the rights of others). You will be included in any such decision. Clinical justification of such restriction is documented in the medical record.

8. You have the right to full and equal visitation privileges consistent with your preferences, not restricted on the basis of race, ethnicity, religion, sexual orientation, color, gender identity, or disability. You have the right to withdraw consent for visitors at any time.

9. You have the right to formulate, review, or revise an advance directive, such as a living will or health care proxy, with the expectation that the Hospital will honor the intent of the directive to the extent permitted by law and hospital policy. These documents express your choice about your future care or name someone to make decisions about your care if you cannot speak for yourself. If you have a written advance directive, you should provide a copy to the Hospital, your family, and your physician. Existence or lack of an advance directive does not determine your right to access care, treatment, and services.

10. You have the right to expect that all communications and records pertaining to your care will be treated as confidential by the hospital, except in cases such as suspected abuse and public health hazards when reporting is permitted or required by law. You have the right to expect that the hospital will emphasize the confidentiality of this information when it releases it to any other parties entitled to review information in these records.

11. You and your family or surrogate decision-makers, if appropriate, have the right to be informed about unanticipated outcomes of care, treatment, and services.

12. You have the right to review the records, request an amendment to, and obtain information pertaining to your medical care and to have the information explained or interpreted as necessary, except when restricted by law. The hospital will provide access as quickly as our record-keeping system allows.

13. You have the right to expect that the hospital will provide you with necessary health services to the best of its ability. Treatment, referral, or transfer may be recommended. If transfer is recommended or requested, you will be informed of risks, benefits, and alternatives. You will not be transferred until the other institution agrees to accept you.

14. You have the right to a discharge planning evaluation. This will be placed in your medical record and utilized to establish an appropriate discharge plan; this evaluation and plan will be discussed with you and your family or surrogate decision-maker, if appropriate.

15. You have the right to know if this hospital has relationships with outside parties that may influence your treatment and care. These relationships may be with educational institutions, other health care providers, or insurers.

16. You have the right to consent or decline to take part in research affecting your care. If you choose not to take part, you will receive the most effective care the hospital otherwise provides.

17. You have the right to expect reasonable continuity of care when appropriate and to be informed by physicians and other care givers of available and realistic patient care options when hospital care is no longer appropriate.

18. You have the right to examine and receive an explanation of your bill regardless of source of payment.

19. You have the right to know about hospital policies that affect you and your treatment, and about charges and payment methods.

20. You and/or family have the right to present concerns/suggestions and to be informed of the mechanism to do so. You have the right to expect that corrective action is taken when indicated, and to receive a response from the hospital that substantially addresses the concern. Presentation of a concern will, in no way, compromise your future access to care.
21. How to file a concern/suggestion:
   a. If at all possible, please address your concern immediately to the staff present and give them the opportunity to resolve your concern.
   b. If that is not feasible or should that attempt not result in resolution of your concern in a timely manner, call or request to see the Patient Experience Officer (Call: 812-996-8513, or Email: patientexperience@mhhcc.org) or the supervisor/director of the area for which you have a concern/suggestion. You may also write a letter to the hospital, directing it to the attention of the Patient Experience Officer outlining the nature of your concern/suggestion.
   c. You will then receive a follow-up call as soon as possible but certainly within 72 hours of receipt of the concern.
   d. Within seven (7) days (on average), the patient will be provided with written communication of the hospital’s intent to review and will include the name of the hospital contact person.
   e. If the grievance is not resolved, if the investigation is not complete, or if the corrective action is still being evaluated beyond the initial 7 days, every effort will be made to resolve all grievances within 30 days, if possible. The patient or their representative will be informed that resolution of the grievance is ongoing and follow-up with a written response will ensue within a stated number of days.
   f. Upon completion of the Grievance Committee review, the Grievance Committee will send a resolution letter to include:
      i. The steps taken on behalf of the patient to investigate the grievance
      ii. The results of the grievance process, and
      iii. The date of completion.
   g. You have the right to lodge your grievance with the Indiana State Department of Health, 2 North Meridian St., Indianapolis, IN 46204-3006, phone 1-317-233-1325, or the Joint Commission, Office of Quality and Patient Safety, 1 Renaissance Blvd., Oakbrook Terrace, IL 60181, phone 1-630-792-5000, regardless of whether or not you first utilize the hospital’s grievance process.

22. You and/or your family have the right to be informed of hospital policies implementing these rights and the right of your family or legally authorized representative to exercise these rights if you become legally incompetent, medically incapable of understanding proposed treatment or procedures, unable to communicate your wishes regarding treatment, or are a minor.

23. You have the right to request and receive religious and other spiritual services. You have the right to request a consultation to obtain guidance in determining your medical care with the Ethics Committee of Memorial Hospital and Health Care Center. This is accomplished by contacting the supervisor of pastoral care at 812-996-0219.

24. You have the right to be free from violence, verbal, and non-verbal threats, and related actions. Upon request, you have the right to receive information regarding protective services available.

25. You have the right to be free from restraints or seclusion of any form that are not medically necessary.

**MEDICARE OR MEDICAID RECIPIENTS:**

The hospital will provide you with timely notice of discharge during your hospital stay, notice of non-coverage for any care/procedures, and notice of your right to appeal premature discharge. If you have a concern regarding quality of care, disagree with a coverage decision, or wish to appeal a premature discharge, you may contact the Quality Improvement Organization (QIO) contracted by the Centers for Medicare & Medicaid Services (CMS) to lodge your concern. The procedure for referral to the QIO is: request an immediate review by telephone or in writing. You may make this request by calling 1-888-524-9900 or by writing to:

Livanta LLC
BFCC-QIO Program
10820 Guilford Road, Suite 202
Annapolis Junction, MD 20701-1105

Contact must be made within 30 days of the event or, for immediate review, within 3 calendar days. Case Management or Social Work may assist the patient with this process if requested.
PATIENT RESPONSIBILITIES

1. You are responsible to provide the hospital with information about your health including past illnesses and hospital stays, medications you take, and to communicate about any pain you have, to the best of your ability.

2. You are responsible for asking questions when you do not understand information or instructions. If you believe you can’t follow through with your treatment, you are responsible for telling your provider.

3. You and your visitors are responsible for abiding by hospital policies and rules, and for being considerate of other patients and staff to support quality care in a safe environment. Violence, verbal and/or non-verbal threats and related actions will not be tolerated.

4. You are responsible for providing information to your insurance company, for working with the hospital to arrange payment when needed and for meeting financial commitments.

5. You are responsible for reporting any perceived risks in your care and unexpected changes in your condition to your nurse or provider.

6. Your health depends not just on your hospital care but, in the long term, on the decisions you make in your daily life. You are responsible for recognizing the effect of lifestyle on your personal health.

7. You are responsible to support mutual consideration and respect by maintaining civil language and conduct in all interactions with hospital staff and providers.

All rights and privileges under the hospital’s patient rights and responsibilities policy will be extended to neonates, pediatrics, and adolescents through their parents, legal guardians and others under guardian authority.

EDUCATION

1. When pediatric/adolescent patients are admitted for more than 30 days, they will have the right to continuance of their education.

2. The continuation of educational activities will be the responsibility of the parent to make arrangements with the teacher with assistance from social services, if requested.

3. The Hospital will arrange scheduling of treatments/procedures around the teachers/parents’ schedules when possible.

4. Regular communication between teachers, nurses, and parents will take place if possible.

5. If pediatric/adolescent patients are moved from one unit to another, education needs are reassessed.

CARE OF PEDIATRIC PATIENTS

1. Parents of pediatric/adolescent patients will be actively informed and/or involved in the assessment, treatment, continuing care and discharge of the patient and will be informed by the physician(s) of patient’s condition, treatment, and progress.

2. Social services will aid the family in coping with illnesses that may affect the patient/family’s physical or psychological development, or referral will be made to appropriate resources.

3. A patient who requires services which are not available in this facility will be transferred in a timely manner to another facility which has the available resources. The hospital will aid the patient/family in the transfer process by making transfer arrangements and communicating to patient/family the reason/need for the transfer.

4. If pediatric/adolescent patients are hospitalized for a significant period of time, their peers will be allowed to visit on a limited basis which may be set by the patient’s guardian or hospital personnel.

5. Activities appropriate to the age of the patient will be offered and included in the plan of care insofar as is practicable and economical.

RECREATION

1. The hospital will provide school-age patients with time for play and recreational activities. Toys, crafts and games are also provided.

2. Recreational activities will be based on the age and capabilities of the patient.