



RIGHTS

1. Always be treated with dignity, respect, and cordiality.
2. Receive humane, attentive, and respectful care, without prejudice of origin, race, creed, sex, sexual orientation, color, age, diagnosis, and any other forms of prejudice from all professionals who work in the Institution. Care should be provided by the teams in a way that respects the dignity and self-esteem of the patient, guaranteeing basic human needs.
3. Be identified by name, surname, or social name. Not to be identified by the name of your disease or health problem, number, or code, or other improper, disrespectful, or prejudiced ways.
4. To have their safety, physical, psychological, and moral integrity, rest, privacy and individuality and preservation of their image ensured.
5. To be aware of the rules and regulations of the Institution, as well as to receive clarifications on the documents and forms that are presented to be signed, in order to allow their understanding and comprehension for a conscious choice.
6. Know the name, professional category, specialty, function, and position of the person who is providing health care and identify the professionals by means of visible and legible badges.
7. Have clear, objective, and comprehensible verbal and/or written information about diagnostic actions, therapies, proposed treatments, risks, treatment alternatives and prognosis.
8. Be informed about risks, benefits and alternatives of the treatment(s) and procedure(s).
9. Request a second medical opinion.
10. Consent or refusal after receiving adequate information on diagnostic, preventive, or therapeutic procedures, except in cases that pose a risk to their life and to public health.
11. Have access to their medical record in accordance with current legislation and in accordance with the institution's internal rules. The medical record should include a set of documents and standardized information about the patient's history, principles and evolution of the disease, therapeutic practices, and other clinical notes.
12. Receive information about medicines administered to the patient, as well as the origin of blood and blood products before receiving them, with the right to refuse them, attested in the course of the testimony, except when there is a risk to the patient's life.
13. Express and be heard in their complaints, claims, needs, suggestions and other manifestations through the Ombudsman's Office and any other existing mechanism, respecting their privacy and confidentiality.
14. Confidentiality and professional secrecy, as long as it does not entail risks to third parties or to Public Health.
15. Have access to any and all diagnostic and therapeutic procedures available at the Institution, as long as they are indicated by responsible physicians.
16. Be informed, guided and, if necessary, trained on how to conduct their self-care, receiving clear and legible medical instructions on the continuity of their treatment, aiming at cure, rehabilitation, and secondary prevention and sequelae or complications.
17. Have access to detailed accounts of their treatment expenses, including tests, medications, hospital fees, and other arrangements. When they are hospitalized in the "private" regime, the Hospital itself will provide such information; and when the hospitalization is financed by a health plan or health operator, such information must be obtained directly from the health plan or operator, according to current legislation.

18. Have the right to a companion of your own choice, in consultations and exams and during hospitalization, in the cases provided for by law, as well as in those in which the person's autonomy is compromised, in accordance with the institution's rules and current legislation, such as the Statute of the Elderly.
19. Receive visits from friends and relatives, in accordance with the rules of the institution and regulatory bodies.
20. Receive or refuse religious assistance.
21. Indicate, by their own free choice, to whom they will entrust decision-making in the event that they become unable to exercise their autonomy, also with regard to treatments, care, procedures and resuscitation or other life-sustaining care (applicable to those over 18 years of age or legally emancipated).
22. Receive appropriate treatment to minimize pain when there are means to relieve it.
23. To be treated with dignity and respect after death and not to have any organ or tissue removed from their body without prior authorization, that of their family or legal guardian.
24. Have an environment of care that favors recovery, with silence respected at all times.
25. Receive protection and security, as far as procedures and facilities allow.

DUTIES

1. Know and respect the rules and regulations of the Institution.
2. Participate in their treatment and discharge plan or appoint decision-makers in their place.
3. The patient or legal guardian must provide complete and accurate information about his/her health history, previous illnesses, previous medical procedures, use of medications or any other substances, as well as other problems related to his/her health.
4. If there is one, inform who the attending physician responsible for your follow-up is, knowing that this physician will have full access to your medical records, including previous consultations, diagnostic exams and procedures performed at the Institution.
5. Report unexpected changes in their current health status to the professionals responsible for their treatment and care.
6. Request clarification if they have not understood the information and guidance received.
7. Follow the guidelines, health care protocols and treatment proposed by the multidisciplinary team responsible for their care and assume responsibility for refusing recommended procedures, exams or treatments and for non-compliance with the health care team's guidelines.
8. Respect the rights of other patients, employees and service providers of the Institution, treating them with civility and courtesy, regardless of creed, ethnicity, sex, sexual orientation, age, color and any other forms of prejudice.
9. Contribute to a healthy environment, prohibiting noise, use of alcoholic beverages, cigarettes and derivatives, in any and all environments of the hospital, whether internally or in external areas such as balconies and solarium, extending to companions and visitors.
10. To care for and take responsibility for the properties of the Institution placed at their disposal for the purpose of their comfort and treatment during hospital care.
11. Take responsibility for their objects (of value or not) brought to the Institution.
12. Consume only food provided by the hospital, and it is strictly forbidden to offer to the hospitalized patient food from an external source without medical authorization.
13. Communicate to the nurse and/or pharmacy the need for use of one's own medication and not take them without the knowledge of the teams so that there is no medication-related event.

14. It is forbidden to film or photograph and broadcast images of professionals, procedures, and hospital premises.
15. It is forbidden for the companion to use the patient's bed to rest.
16. Do not handle materials and equipment such as serum, gas valves, among other others.
17. Accept medical care or hospital discharge when the process or treatment is considered finalized.
18. Be responsible for any and all expenses incurred during hospitalization and/or care or indicate the legal and financial person responsible for your hospital treatment, informing the hospital of any changes in this indication.

ADVANCE DIRECTIVE (ADV)

Resolution 1,995/2012 regulates the advance directives of patients suffering from a terminal illness. According to Art. 1, the advance directives of will or living testament, this is the set of desires, previously and expressly expressed by the patient, who is in the enjoyment of their mental capabilities, with the aim of providing evidence about the care, treatments and medical and therapeutic procedures that you wish, or not, to undergo while you are alive, however, if you are unconscious as a result of illness or accident. According to § 4, the doctor must record in the medical record the advance directives that were directly communicated to them by the patient.

It is a public document (Public Declaratory Deed), drawn up at the Notary's Office that expresses the will of a person that ensures respect for the dignity of the human person, as it allows the patient to choose in advance what type of medical treatment they want or not. be submitted, preserving the right to a dignified life and death. Any individual considered to be in a conscious state can make their living will before a notary. Simply present your personal documents and state what types of clauses you want to include.

The deed will be presented to doctors by family members or whoever the declarant indicates, if in the future he is affected by a serious illness or becomes unable to express his wishes as a result of an accident.

It is recommended that interested parties seek out a Notary's Office, make their Advance Directive (ADV), present the document during their appointment and ensure that you are only subjected to the treatments you desire.

Special Situations:

In the case of children, adolescents or adults considered incapable, the related responsibilities must be exercised by their legal guardians, duly qualified.

It is the physician's right to renounce the care of a patient, provided that there is no imminent risk of death and that he/she communicates this attitude in advance to the patient or his/her guardian, assuring him/her of the continuity of care and providing all the necessary information to the physician who succeeds him.

When any right is breached or responsibility is not fulfilled, the unit leader will seek to ensure its adequacy, as a representative of the institution.