



Patient Rights

As a patient of Alpine Health, you have certain rights that you need to be made aware of and understand to ensure that you are able to fully benefit from the services we offer. If for any reason you feel that one of your rights has not been fully respected by Alpine Health staff, please let us know immediately.

- You have a right to be informed of your rights prior to the furnishing of services.
- You have the right to participate in the development and implementation of your treatment **plan** with the treatment designed to maximize your opportunity for improvement.
- You have the right to receive services that are delivered in accordance with the standards of professional practice and which are appropriate to your individual needs.
- You have the right to know the nature of your treatment or habilitation program offered.
- You have the right to know the effects of receiving and not receiving the treatment or habilitation.
- You have the right to information regarding alternative treatments or habilitation, if any.
- You have the right to be treated without regard to religious preference, sexual orientation, race, creed or color.
- You have the right to practice your own religion.
- You have the right to refuse treatment.
- You have the right to personal privacy.
- You have the right to receive humane care in a safe setting.
- You have the right to be free from all forms of abuse or harassment, including intimidation and coercion.
- You have the right to be free from seclusion and/or restraints of any form that are not necessary to prevent danger of abuse or injury, to yourself or others, or are used as a means of coercion, discipline, convenience or retaliation by staff.
- You have the right to confidentiality of your clinical records as provided by Indiana Code 16-39-2-3 and 42CFR2.
- You have the right to access your clinical records, provided such access would not be detrimental to your physical or mental health, and would not be likely to cause you or another individual harm.

- You have the right to file a grievance regarding any violation of your rights or other care-related issues and have the grievance fully investigated by Alpine Health. The grievance process may be initiated by writing the Medical Director at 3660 Rome Dr., Lafayette, IN 47904.
- You have the right to exercise your constitutional, statutory, and civil rights.
- You have the right to contact and consult with legal counsel and/or private practitioners of your choice at your own expense.

My signature confirms that these Patient Rights have been verbally explained to me.

Signature of Patient or Personal Representative

Witness

Patient's Name

Date

Patient's Address

Description of Representative's Authority to Act
For the Patient (If applicable)

Personal Representative (if applicable)
Please Print