Annual Review of Patients' Rights and Responsibilities

Date: [Insert Date]

Dear [Patient's Name],

We are conducting our annual review of Patients' Rights and Responsibilities. This is an important opportunity to ensure that you are aware of your rights and responsibilities as a patient in our facility.

Patients' Rights

- The right to receive considerate and respectful care.
- The right to be informed about your diagnosis, treatment, and prognosis.
- The right to participate in decisions regarding your care.
- The right to privacy and confidentiality.
- The right to receive information regarding hospital policies and procedures.

Patients' Responsibilities

- The responsibility to provide accurate and complete information about your health.
- The responsibility to follow the treatment plan agreed upon with your healthcare provider.
- The responsibility to be considerate of the rights of other patients and staff.
- The responsibility to report any unexpected changes in your condition.
- The responsibility to ask questions if you do not understand your care.

We encourage you to take a moment to reflect on these rights and responsibilities. If you have any questions or would like to discuss them further, please do not hesitate to reach out to us.

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Sincerely,

[Your Name]

[Your Position]

[Facility Name]

[Contact Information]