



Providence  
SWEDISH

Providence Regional  
Medical Center Everett

# Helpful Information for Patients and Families



# Welcome

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Dear Patient & Family Members:

We know that a hospital stay can be a stressful experience, but while you are here with us, we will do everything we can to make your visit as pleasant and positive as we can. Whether you're having a baby, getting surgery or facing a serious illness, our sole purpose is to take care of you with competence and compassion.

Our facilities are equipped with state-of-the-art technology, but we are so much more than that. Guided by the philosophy of the Sisters of Providence, we live their Mission of caring for the poor and vulnerable right here in our community. We strive to be a place of inclusion, where every person feels that they belong and are heard and represented. Here, difference is a safe and welcomed attribute.

Thank you for allowing us to care for you during this stay and, we hope, anytime in the future that you or your loved ones have a need.

If you have questions, please don't hesitate to reach out to any one of your caregivers or use this booklet to find a helpful phone number. We are here to assist you – just ask!

Kristy Carrington, RN  
Chief Executive  
Providence Swedish North Puget Sound

Thank you for trusting us to care for you and your loved ones.

As your caregivers at Providence, we follow a call to be expressions of healing love and to support you with compassion and care. We want to meet you in this vulnerable time as a healing presence. As we partner with you in your care, please help us understand what is most helpful to you and your loved ones with you. We are listening for how we can better know you, care for you and ease your way.

Peace,













Barry Stueve  
Chief Mission Officer  
Providence Swedish North Puget Sound





# What you'll find in this booklet

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# Be a Partner in Your Care

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**Learn the names of the providers** who are caring for you here.

**Share your current medical history** and any changes in your health with all who treat you.

**Speak up** if you don't understand your care or treatment. Let us know if something doesn't seem right.

**Ask questions** if you don't understand the answer, please ask again. Include in your questions:

- Do I still need my IV? My catheter?
- How is my skin? When will I have a bath?
- How is my blood sugar?
- When can I eat?
- Am I on antibiotics? Why?

## **Avoid falls**

Call us to help every time you want to get out of bed or can't reach something. Help us make sure everything you need is within reach.

## **Make sure you receive the right care**

For your safety, we will ask your name and birth date before any procedure and before giving you any medicine.

## **Help us manage your pain**

As part of your plan of care, you may be prescribed opioids to relieve your pain. Your comfort is important to us, but we know that you may be concerned about opioid addiction. We strive to treat your pain by minimizing opioid use and by offering other treatment options. How we use opioids will be discussed with your provider during your care. Opioids have side effects, such as sedation and constipation, which may delay your healing. If you have questions about opioids, please discuss with your provider. Once you have finished opioid use, it is important that they are properly disposed of. Providence retail pharmacy, along with other community pharmacies, have medication take-back bins available to return any unused medicine.

We want you to be as comfortable as possible. Let us know what helps your pain and any medicines you have recently taken. We will ask you often about your level of pain.

## **Help prevent infection**

**Properly cleaned hands prevent the spread of infection. We invite you to ask your caregivers if they have clean hands.** Help us make sure everyone (staff, you, family and visitors) cleans their hands when entering and leaving your room.

Wash with soap and water or use hand sanitizer often, especially after using the bathroom and before you eat.

- Tell us if you have any signs or symptoms of illness.
- Allow no visitors who are ill.
- Clean your hands before and after caring for your wound.
- Don't allow family or visitors to touch your surgery site or dressings.
- Ensure visitors wear gowns, gloves and/or masks if instructed by staff.



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## Food from home

- Use disposable, covered, single-serving containers.
- **Label container** with date and patient's name and room number.
- Food will be thrown away after 48 hours or if not labeled.
- **Please leave food with a staff member before entering the patient room.**  
(To prevent diseases, no food may be stored in our refrigerator once it has been taken into a patient room.)

## Photos and videos

- Please respect the privacy of others. Only take photos or videos if everyone involved, including staff, agrees.
- Providence Swedish reserves the right to ask that taking of photos or videos be stopped at any time.
- Providence Swedish is not responsible for loss or damage of any equipment.

## Rapid Response Team - Dial 66

Our Rapid Response Team brings critical care experts to the bedside when there is a serious change in a patient's condition. Anyone can call the Rapid Response Team - including family. No one knows the patient better than their loved ones. If you have a concern about your loved one's condition:

- Tell the provider or nurse caring for them. You may also ask for the charge nurse.
- If you are still concerned - or if there is a sudden change in your loved one's condition that you feel is not being addressed - **dial 66 from any hospital phone and ask for the Rapid Response Team.** They will respond within 5-10 minutes.



## Physician-assisted dying

Providence Swedish does not participate in physician-assisted death. However, some routine aspects of care such as documenting a patient's diagnosis and prognosis, providing information to patients about the range of treatments and interventions available to them, documenting patient-physician conversations about their condition and their care options, and professional communication to a clinician receiving a new patient may incidentally coincide with current requirements of the Washington State Death with Dignity process. Providence Swedish will not participate in prescribing, providing, or administering a lethal prescription or provide a presence when a lethal medication is taken.

Patients who choose to exercise their rights under the Washington Death with Dignity Act are still eligible to receive the full range of services provided by Providence Swedish.



# Staying in the Hospital

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## Who will be my doctor in the hospital?

Many patients are cared for by our hospitalist team. A hospitalist is a provider who specializes in caring for patients in the hospital. Your hospitalist will work with your personal provider and any needed specialists to care for you. Members of your care team meet each morning to discuss your overall care plan and progress.

## Meeting with your hospitalist

A hospitalist will visit you every day. If your family members would like to talk with your hospitalist, ask your nurse to arrange a call or meeting between 7 a.m. and 5 p.m.

## Specialists

For some patients, a specialist such as a surgeon may provide your care. Your hospitalist will choose the specialist that you, your family or your personal provider believes would be best for you.

## Know your medicines

- If you did not bring a list of your medicines with you, please ask someone to bring a list, or if that is not available, your pill bottles, to the hospital. Include all the medicines you take and the doses, even over-the-counter (non-prescription) medicines, vitamins and herbal remedies.
- The hospital will provide your medications unless you are taking a medication we cannot substitute.
- Always ask questions about any medicine that is new to you. Know what it is and why you are taking it.
- If you have a reaction to a new medicine, report it to your provider or nurse right away.
- Remind your provider or nurse about any allergies or bad reactions to medicines you have had in the past.
- While you are in the hospital, your medicines may change from what you were taking at home. Before you go home, be sure you know if there are medicines you need to stop taking,

which medicines to keep taking and any new medicines you will be taking. If you have any questions, **be sure to ask!**

## Preventing falls

**Falls are a real risk in the hospital. Tell us if you:**

- Have fallen in the last year.
- Feel dizzy, weak or unsteady.

**Being in the hospital places you at a much higher risk for a fall due to:**

- Being weaker.
- Having lines, drains, catheters.
- Dizziness from certain medicines.
- Unfamiliar surroundings; being in a new place.

**You are a key factor to help prevent a fall:**

- Use the call light for help.
- Tell us your needs while caregivers are in the room.
- Avoid getting up alone UNLESS cleared by your team.

## Tips for success in fall prevention

- When getting up, do so in 3 stages:
  - 1) Sit up slowly
  - 2) Sit at the edge of the bed for a moment
  - 3) Stand slowly
- Always wear nonskid socks or shoes when out of bed.
- Keep often used personal items and call bell in reach.
- Allow our team to support you while getting up, which likely will include a gait belt.

## Tips for visitors and family

- Keep personal items in the same place and always in reach.
- Do not assist in moving the IV pole or other equipment, ask a staff member for help.
- Do not assist in walking unless the staff have specifically directed you on safety precautions.

## Help us support healing

There is a lot more noise in the hospital than you may be used to at home. We want to help you heal by decreasing as much noise as we can. Please let us know if noise is keeping you from being able to rest. **Ask any caregiver if you would like ear plugs or an eye mask.**

## Keeping your belongings safe

- **Valuables (e.g. jewelry, money):** For security, please ask a loved one to keep your valuables while you are in the hospital. If this is not possible, ask a staff member to put them in the hospital safe.
- **Personal items:** You are responsible for all personal items you keep with you (including glasses, hearing aids and dentures). Please keep only what you need during your stay.

## Bedside report

Your nurses change shifts every 8-12 hours. At each shift change, both nurses will come to your room to discuss important information about your care.

Your involvement is important to ensure that your new nurse receives correct information and input from you, and your family is included.

## Purposeful rounds

For your comfort and safety, staff will check (round) on you often. They will help you to the bathroom, help position you in bed, ask about your pain and make sure that everything you need is within reach.

## Planning for your discharge

Our goal is for you to be able to leave early in the day. However, if your provider needs to see you or you still need a test or procedure this may not be possible.

- If you feel you will need help planning for your discharge, ask your nurse to contact a discharge planner for you.
- The day before your discharge, let your nurse or discharge planner know who will be taking you home.
- Have comfortable clothes ready to wear home.

## Have a plan for getting your discharge prescriptions

For patients at Colby Campus, the lobby retail pharmacy can fill your prescriptions before you go home and deliver them right to your room. They accept most insurance plans, co-pays can be paid at time of delivery.

The Colby Campus pharmacy is located on the 1st floor between the cafeteria and gift shop. It is open Monday-Friday, 9 a.m. - 7 p.m., Saturday 9 a.m. - 5 p.m, and Sunday 9 a.m. - 4 p.m.

Let your hospitalist and nurse know if you would like your prescriptions delivered to your room. For questions you may call the pharmacy phone number at 425-261-3555.

## Keeping your personal provider informed

When you are discharged, your hospitalist will send your personal provider a written report of your stay and will discuss further treatment. Be sure to keep your follow up appointment with your personal provider. If you do not have a personal provider, we will help you to find one before you leave. If you had surgery, you may also be seen in your surgeon's office after discharge.

After discharge, if you have medical questions, call your primary care physician.

## Care management

Care management consists of both social service professionals and registered nurses who are collaborative in approach, as they provide support to patients and families as the patient transitions through the hospital to the next level of care. The primary purposes of the of the care management team are to evaluate a patient's capacity for self-care, assess their continuing care needs, and, if indicated, coordinate post-acute care services. The goal is to plan a course of action to meet the patient's clinical, medical, nursing, psychosocial, therapeutic, supply, and pharmaceutical needs as the patient transitions from the acute care setting to the next level of care. If you feel you could benefit from our services, please contact your medical team (doctor, nurse, therapist) and a referral will be made for our team to meet with you and discuss your care and transition plans.



# Emergency Services

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The following information will help you understand how emergency care works.

## What is triage?

Triage is how we quickly assess patients to decide in what order they need to be seen. A specially-trained nurse evaluates patients to identify their needs as:

- **Resuscitation:** Has a life-threatening condition
- **Emergent:** Has a critical condition
- **Urgent:** Is stable but may have a major illness or injury
- **Less urgent:** Is stable now but could become less stable
- **Non-urgent:** Is stable and able to walk and communicate

## Will I have to wait long to be treated?

Our goal is to see every patient as soon as possible – however, those with the most critical needs will be seen first. We will do our best to keep you informed of wait times. Please remember that even though someone may look well to you, he or she may have a serious problem that needs to be taken care of right away. We appreciate your understanding if someone is taken to a room or receives care before you.

## How long does it take to get test results?

In general:

- **X-rays and CT scans:** 90 to 180 minutes.  
Emergency services has its own x-ray and CT staff and equipment. Your x-ray will be read while you are here.
- **Blood tests:** 1 to 2½ hours
- **Urine tests:** 1 hour

Times may vary depending on the number of patients needing tests. Doctors will review your test results. We will do our best to let you know what to expect next and how long your visit will last.

## How can my family find out about my condition?

With your permission, staff will update your family and friends about your condition. Because your needs as a patient come first, they may sometimes have to wait for information. We appreciate their understanding.

## Are visitors allowed?

Your family and friends are welcome to support you during your visit:

- Visitors must be approved, follow current health guidelines, and wear their visitor I.D. sticker at all times.
- They may be asked to leave during an examination or treatment.
- Please consider if the visit is appropriate for children under the age of 12 before bringing them as guests.
- Our rooms are designed for up to two family members at any time.
- Visitors should remain at your bedside in the treatment area.
- If family and friends leave and wish to return they need to check in at the front desk.

## Who works in emergency services?

Emergency services is staffed with board-certified emergency providers, certified physician assistants, RNs, ARNPs, emergency room technicians, social workers, chaplains, respiratory therapists, lab staff, X-ray techs, admitting clerks, health unit coordinators, financial counselors and volunteers. All can be identified by their badges.

## What if I have to be admitted to the hospital?

If your caregiver feels you should be admitted, a hospital bed will be reserved for you on a floor prepared to give you specialized care.

Your doctor will be a specialist or one or more of our hospitalists.

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## **Pain medicine in emergency services**

We know that relieving your pain is important. However, providing pain relief is often complex. This is especially true if you have been hurt or need emergency care. Mistakes or misuse of pain medicine can cause serious health problems and even death. We will only give you what is safe.

### **For your safety, we do not:**

- Give pain shots for sudden increases in chronic pain.
- Refill stolen or lost prescriptions.
- Give methadone.

We will help you reconnect with your primary care physician or your pain management clinic.

## **What can I expect if I am discharged from emergency services?**

We will give you a written copy of special instructions for your home care and follow-up. You may also receive a prescription for medicine.

You may view your plan of care, notes, summaries, and discharge instructions in your Providence Swedish MyChart account.

## **How much does emergency care cost?**

The cost will depend on how much care you need. A financial counselor may visit you during your stay to answer questions, accept any co-pays, or help you make payment arrangements. If this is not possible, you may stop by their offices as you leave.

To talk with a financial counselor, call 866-747-2455 or 877-418-6419.



## **Spiritual Care**

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### **Spiritual Care**

Our chaplains have completed extensive training to serve in healthcare. They are available 24/7 to provide spiritual and emotional support to people of all faiths, spiritualities and world views, as well as those with no specific faith or formal spiritual tradition. Their role is supportive, with deep respect for your values and beliefs. You may ask a staff member or the hospital operator at any time to contact a chaplain for you. You may visit our chapels found on each campus.

They are open to all seeking time for reflection or prayer.

### **Therapeutic music**

Our certified music practitioners use harp, guitar or voice to create an atmosphere of peace for patients and families. Therapeutic musicians are available to patients at their request and relaxing music is also available on a free CD or media player. To request this support, please call the chaplain phone number at 425-404-7000.

# Observation Status

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## What is observation status?

“**Observation status**” means you are treated as an **outpatient in the hospital** until we know if your condition will allow you to be discharged, or whether you meet medical criteria to be admitted as an “inpatient”. Examples of conditions leading to observation status include, but are not limited to:

- Chest pain
- Syncope (fainting)
- Nausea and vomiting
- Complications after an outpatient procedure
- Severe pain
- Headache
- Fever
- Breathing problems

Medicare and other payers have rules about what qualifies for inpatient treatment based on both the severity of your illness and the treatments you need. Inpatient status is determined by the rules of the payer. It may not be clear right away if you qualify for inpatient status.

## How long does observation status last?

Observation usually lasts no longer than 24-48 hours; At that point a decision will be made whether you can go home, should stay in the hospital, need care by home health or in a nursing home. If observation is needed beyond 48 hours, you may be asked to sign a form called “Advanced Beneficiary Notice of Noncoverage.”

## Why is this important?

During observation you will be in a hospital room, but for billing purposes Medicare and many other payers will **consider you an outpatient**.

- Observation is billed as an outpatient service or Medicare Part B.
- Inpatient hospital admission is billed under Medicare Part A.

## Why does this matter to me?

Since **observation is billed as an outpatient service**:

- Outpatient co-pays and deductibles apply.
- Medicines you are given may not be covered.
- It does not count toward the three-day qualifying inpatient stay needed for Medicare coverage at a skilled nursing facility.

## What if I have more questions?

Call your insurance company or the Medicare Hotline (800-633-4227 or 800-MEDICARE or visit [www.medicare.gov](http://www.medicare.gov)).

You may also ask to speak with a discharge planner or care coordinator, or contact our billing office.

To talk with a financial counselor, call 866-747-2455 or 877-418-6419.





# Patient, Family and Visitor Services

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## Visiting hours

- **General Hours of visitation:** 7 a.m. -10 p.m.  
Depending on the patient's condition, staff may need to limit the number or age of visitors, or visiting hours.

## Facility Specific Visitor Restrictions

- **Behavioral Health Unit, 4A** 7 p.m. - 8:30 p.m.
- **Family Maternity Center**
  - Family Centered Healing Environment  
7 a.m. - 10 p.m.
  - 3rd floor\* - High Risk (301-310).  
One support person may stay past 10 p.m.
  - 3rd floor\* - Labor (eminent delivery of baby).  
Four total labor support persons may stay after 10 p.m.
  - 4th floor\* - Postpartum (post-delivery).  
One support person may stay past 10 p.m.  
At transition to postpartum after visiting hours (10 p.m.). One person 16 years or older may stay until opening of visiting hours next day (7 a.m.).
- **Number of Visitors\***
  - 3rd floor - High risk (301-310).  
Four total visitors  
3rd floor - Labor. Four total labor support persons during labor process. Labor support person(s) must be over 16 years of age, unless father of baby.
  - 4th floor - Postpartum. Open visitation between 7 a.m. -10 p.m.
- \* *To ensure a safe, healing environment, visitors may be limited at the nurse's discretion based on the patient's condition.*
- **Cesarean Section\***
  - One adult support person will be allowed in the operating room. *Requests for additional support persons require prior approval from the charge nurse and are made on a case-by-case basis.*
  - One support person in PACU for medical stable patients

## After Hours:

- Permission from the attending charge nurse is required in order to stay beyond regular visitor hours and communicated to administrative supervisors.
- A visitor badge is required for after-hours visitation.

## Animals

We understand pets are important, but to decrease the risk of infection, only animals in these special roles are allowed in the hospital:

- Service dogs trained to perform tasks for a disabled person.
- Registered Therapy Dogs in our visiting therapy dog program through volunteer services.

## Wifi

Free Wifi is available in most areas. To access the Wifi, look for "provguest" in the Wifi connections on your device. No password is required.

## Phone use

To make a local call from a hospital phone, first dial 9. To make a long-distance call, please dial 90 and use a calling card or call collect. (Exceptions apply in the Providence Substance Use Treatment and Recovery Services. Patients should check with their caregivers.)

If needed, iPads may be available upon request to help you communicate with your family.

## Tobacco-free campus

For the health of our community, the use of tobacco and marijuana products and e-cigarettes are not permitted anywhere at Providence Swedish - including in private vehicles parked in our parking garages and lots.

## Gifts and Flowers

Our gift shops carry gifts, flowers, books, candy and magazines. Call for hours of operation.

- **Colby Campus Gift Shop**  
Located in the C-wing, floor 1, across from the chapel; 425-261-4588.
- **Pacific Campus Gift Shop**  
Pavilion for Women and Children, floor 1; 425-258-7302.

## PRMCE Food and Nutrition Services for Patients

We work hard to meet the nutritional needs of all our patients. If you have a special diet for religious, cultural or medical reasons, please tell your doctor, nurse, registered dietitian or diet assistant.

### To order your meals:

- At our Colby Campus, your meal choices are chef selected to meet your nutritional needs by the prescribed diet order your doctor issues. If you would like to adjust or add preference to your dietary profile, please inform your nurse. Someone from food and nutrition services will update your information in our system to ensure your needs are met
- At the Pacific Campus, the Pavilion, you can enjoy a room service from a restaurant-style menu for yourself and one additional guest, per meal by dialing 88888 from your room phone between 7 a.m. and 6:55 p.m.

Breakfast: 7 a.m. -10:50 a.m.  
 Lunch: 11 a.m. - 3 p.m.  
 Dinner: 4 p.m. - 7 p.m.

## Food and Nutrition Services for Family and Visitors

You are welcome to visit our cafeterias at either site during operational hours. Each site features a cafeteria offering a variety of hot and cold food options, including rotating menu selections.

Additionally, our bistros at both locations provide coffee and tea options, along with a selection of pastries and light food options.

Colby Campus		
<b>Cafeteria</b>	C-wing Floor 1	Monday-Friday 6:30 a.m.-7 p.m. Saturday-Sunday 7 a.m.-2 p.m.
<b>Bistro/café</b>	D-wing Floor 1	Daily 6:30 a.m. -11 p.m.
Pacific Campus		
<b>Cafeteria</b>	Pacific Floor 1	Monday-Friday 7 a.m.-2 p.m. (closed weekends)
<b>Bistro/café</b>	Pavilion for Women & Children - Floor 1	Daily 9 a.m.-3:30 p.m.

*Please note: Hours of operation are subject to change.*

Vouchers which may be used to order room service for guests may be purchased in the cafeteria and bistros.

Many floors have vending machines; ask a staff member for the one nearest you.

We look forward to providing your with excellent care and nutrition during your stay. Your health and satisfaction are our top priorities



# Billing Questions

## Your hospital bill

Please contact customer service at 866-747-2455 or 877-418-6419 for help with:

- Applying for financial aid
- Questions about your bill
- Interpreter services are available

## Insurance questions

Please contact customer service at 800-878-4445 for help with: Applying for Medicaid or other public insurance programs

## Bills from other providers

Many providers, ambulance companies and labs who work with the hospital are separate businesses with their own billing departments. Some of them are listed below. If you have questions about their bill, please contact them directly.

Name	Phone Number
North Sound Emergency Medicine (Emergency Medicine Providers and Provider Assistants)	800-225-0953
PacLab Network Laboratory	800-752-8994
Radia Medical Imaging	888-927-8023
Cellnetix Pathology	800-374-4045
Providence WA Anesthesia Services	877-476-6642 (option 6)
Lab Corp	800-845-6167

## Bills from primary care providers or specialists

If your personal provider or a specialist treated you during your hospital stay, you may also receive a bill from them. Please contact their offices for questions about their bills.

## Health insurance

If you have questions about your health insurance statement, please contact your insurance company.



To talk with a financial counselor, call 866-747-2455 or 877-418-6419.

# Your Rights and Protections Against Surprise Medical Bills and Balance Billing In Washington State

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*When you get emergency care or get treated by an out-of-network provider at an in-network hospital or ambulatory surgical center, you are protected from surprise billing or balance billing.*

## **What is “balance billing” (sometimes called “surprise billing”)?**

When you see a doctor or other health care provider, you may owe certain out-of-pocket costs, such as a copayment, coinsurance, and/or a deductible. You may have other costs or have to pay the entire bill if you see a provider or visit a health care facility that isn't in your health plan's network.

“Out-of-network” describes providers and facilities that haven't signed a contract with your health plan. Out-of-network providers may be permitted to bill you for the difference between what your plan agreed to pay, and the full amount charged for a service. This is called “balance billing.” This amount is likely more than in-network costs for the same service and might not count toward your annual out-of-pocket limit.

“Surprise billing” is an unexpected balance bill. This can happen when you can't control who is involved in your care—like when you have an emergency or when you schedule a visit at an in-network facility but are unexpectedly treated by an out-of-network provider.

Insurers are required to tell you, via their websites or on request, which providers, hospitals, and facilities are in their networks. Hospitals, surgical facilities, and providers must tell you which provider networks they participate in on their website or on request.

## **You are protected from balance billing for:**

### **Emergency services**

If you have an emergency medical condition, mental health or substance use disorder condition and get emergency services from an out-of-network provider or facility, the most the provider or facility may bill you is your plan's in-network cost-sharing amount (such as copayments and coinsurance). You can't be balance billed for these emergency services. This includes care you receive in a hospital and in facilities that provide crisis services to people experiencing a mental health or substance use disorder emergency. You can't be balance billed for these emergency services, including services you may get after you're in stable condition.

### **Certain services at an in-network hospital or ambulatory surgical center**

When you get services from an in-network hospital or ambulatory surgical center, certain providers there may be out-of-network. In these cases, the most these providers may bill you is your plan's in-network cost-sharing amount.

***You also aren't required to get care out-of-network. You can choose a provider or facility in your plan's network.***

### **When can you be asked to waive your protections from balance billing:**

Health care providers, including hospitals and air ambulance providers, can **never** require you to give up your protections from balance billing.

If you have coverage through a self-funded group health plan, in some limited situations, a provider can ask you to consent to waive your balance billing protections, but you are **never** required to give your consent. Please contact your employer or health plan for more information.

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**When balance billing isn't allowed, you also have the following protections:**

- You are only responsible for paying your share of the cost (like the copayments, coinsurance, and deductibles that you would pay if the provider or facility was in-network). Your health plan will pay out-of-network providers and facilities directly.
- Your health plan generally must:
  - Cover emergency services without requiring you to get approval for services in advance (prior authorization).
  - Cover emergency services by out-of-network providers.
  - Base what you owe the provider or facility (cost-sharing) on what it would pay an in-network provider or facility and show that amount in your explanation of benefits.
  - Count any amount you pay for emergency services or out-of-network services toward your deductible and out-of-pocket limit.

**If you believe you've been wrongly billed,** you may file a complaint with the federal government at <https://www.cms.gov/nosurprises/consumers> or by calling 1-800-985-3059; and/or file a complaint with the Washington State Office of the Insurance Commissioner at their website (<https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status>) or by calling 1-800-562-6900.

Visit <https://www.cms.gov/nosurprises> for more information about your rights under federal law.

Visit the Office of the Insurance Commissioner Balance Billing Protection Act website for more information about your rights under Washington state law.



# A Guide to Patient Rights & Responsibilities

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## **OUR COMMITMENT TO YOU, OUR PATIENT:**

At Providence, we believe health is a human right. Every person deserves to live their healthiest life. Our Mission calls for us to care for all by honoring the dignity and diversity of each person. We welcome you, at every stage of life, and we are committed to providing care that recognizes and affirms you as a whole person. We strive to create a welcoming, safe and respectful environment for you to celebrate life's most sacred moments and for us to stand by you when times are tough. You can count on us to hear you, understand you and work with you to meet your health goals. More than a place of healing and health, we're committed to eliminating health inequities, including giving everyone equitable access to safe, high-quality, effective care. We will not discriminate, and you can expect care that is free of prejudice. We thank you for entrusting us with your care – it is our greatest responsibility and honor.

## **AS OUR PATIENT, YOU HAVE THESE RIGHTS:**

### **To respect, dignity, and justice**

You have the right to receive considerate, compassionate, confidential and respectful care. You will be treated with dignity, and therefore be free from neglect, exploitation, abuse, harassment, racism, or discrimination. All patients have the right to be free from physical or mental abuse, and corporal punishment. Providence will provide high-quality, inclusive care to all that visit us. We see you as the unique person you are, and we will provide your care in a culturally responsive manner.

We are committed to removing the causes of oppression. We respect and diligently care for all individuals accessing services. We welcome people of all races, ages, creeds, ethnicities, cultures, national origins, citizenship, languages and/or immigration statuses, economic statuses, the source of payment for care, religions, traditions, practices, and ancestries. We honor and respect all marital, domestic partnership, or civil unions, appearances and body sizes, sexes, sexual orientations and gender identities or expressions. We welcome and provide equitable care for all physical or psychiatric or intellectual disabilities, handicaps or abilities, medical conditions (including HIV/AIDS status, cancer, genetic, substance use and eating disorders), family medical histories, veteran or military statuses, and any characteristic protected by federal, state, or local law.

### **To a safe environment**

You have the right to receive care in a safe setting, to access protective and advocacy services, and to be free from abuse and harassment.

### **To be free of restraint or seclusion**

You have the right to be free from restraint or seclusion. The use of restraint or seclusion for the following reasons is prohibited: based on the pa-

tient's race, color, national origin, age, disability (recognized by anti-discrimination laws), or sex (including pregnancy, sexual orientation, gender identity, and expression), and all other categories protected under the law. Hospital and professional staff members receive education and training (in accordance with statutory and regulatory requirements) on assessment of patients who exhibit behaviors that may inhibit the patient's ability to protect themselves and others from harm or injury.

### **To your chosen visitors**

In accordance with applicable hospital and clinic policies, you have the right to receive visitors of your choice. These visitors include, but are not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend. These visitors will not be restricted or otherwise denied visitations privileges because of race, color, national origin, sex, sexual orientation, gender identity or expression, age, or disability. You hold the right to withdraw or deny such consent at any time. You also have the right to have a family member or representative of your own choice and your own primary care physician notified promptly of inpatient admission to the hospital.

### **To access medical care responsive to your unique needs**

You have the right to access services, treatment or accommodations that are available at our facilities and that are medically necessary. Our goal is to align with your personal health and life goals and take into account all of who you are. In accordance with applicable hospital policies, patients with disabilities have the right to designate at least three support persons, including at least one support person to be present at all times in the emergency department and/or during a hospital stay.

### **To discuss and participate in your health care decisions**

You have the right to discuss, ask questions about, and make decisions regarding your care. You know yourself best, which is why we listen to your health goals and partner with you to achieve them. You will have your personal, cultural and spiritual values, preferences and beliefs honored when deciding about treatment. If you desire, your trusted decision maker or others of your choosing may participate in decisions about your care. You also have the right to request the consultation of a specialist, ethicist and/ or chaplain. And, to help ensure you understand the care being given or proposed, interpreter services are available at no cost to you.

### **To have your wishes honored**

You have the right to have your treatment decisions respected. If you become unable to speak for yourself in making decisions about your care, we will respect the decisions of the person you named as your power of attorney for health care, health care agent, or trusted decision maker. If your advance directive or other advance care planning document indicates preferences regarding specific treatments, we will honor your choices within the limitations imposed by your condition. If you do not have an advance directive or similar advance care planning document on file, we will offer to help you in completing one. Providence's focus for care through the end of life is on meeting the needs of patients and their loved ones, alleviating their suffering, and improving the quality of their lives. We will provide access to spiritual care, palliative care and hospice care within a full continuum of care. When appropriate, we will help coordinate donations of organs and other tissues as in accordance with your directives while providing compassionate end-of-life care.

### **To informed consent and declination of care**

You have the right to be informed by your doctor of your diagnosis, treatment and prognosis in a way that you understand, so that you can make informed decisions regarding your care. To the degree possible, this should be based on an explanation of your condition and all proposed procedures and treatments, including the possibility of any serious risks or side effects, problems related to recovery and the probability of success. In addition, you have the right to understand the risks and benefits of not having the proposed procedures and treatment. Your right to receive treatment is not conditioned upon having and advanced di-

rective, POLST, or an order withdrawing or withholding life support such as a Do Not Resuscitate order. Patients and designees have the right, to the greatest extent possible, to participate in decisions concerning their medical care, including any research projects or ethical issues that may arise. This includes the right to decline treatment or leave the hospital, even if advised not to do so by your provider for medical reasons.

### **To continuity of care**

You have a right to receive information that allows you to understand the choices that you have as we assist you in planning for continued health care needs that may exist when you leave our care and facilities. This includes coordinating treatment, evaluations, and if necessary, transferring to another facility.

### **To adequate pain control**

You have the right to have your pain managed while receiving care and services.

### **To communicate about your care**

You are encouraged to learn and ask questions about the treatment you are receiving. If necessary, our staff will obtain an interpreter at no cost to you or provide other means for you to fully understand the care being given to you or proposed. Unless you tell us not to, we retain the right to notify your established primary care practitioner, primary care practice group/entity, or other practitioner group/entity, as well as all applicable post-acute care services providers and suppliers of your admission, discharge, or transfer from the hospital. Upon your request, we will notify the family member of your choice of your admission, discharge, or transfer from our hospital.

### **To your medical records**

You have right to receive information about your health status, diagnosis, prognosis, course of treatment, prospects for recovery and outcomes of care in terms you can understand. You have the right to access your medical records. You will receive a separate Notice of Privacy Practices that explains your rights to access your records. You have the right to effective communication and to participate in the development and implementation of your plan of care. You have the right to participate in ethical questions that arise during your care, including issues of conflict resolution, withholding resuscitative services and forgoing or withdrawing of life-sustaining treatment. In addition, you have the right to sign up for the MyChart patient portal. MyChart provides up-to-

date information on appointments, medications, health conditions, labs, studies, after-visit summaries, clinical notes and other information in real time with no unique access request. Please visit [Providence.org](http://Providence.org) for more information.

### **To privacy and confidentiality**

You have the right to confidential treatment of all communications and records pertaining to your care and stay. You will receive a separate Notice of Privacy Practices that explains your privacy rights in detail and how we may use and disclose your medical information. You have the right to have personal privacy respected. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. You have the right to know the name of the licensed healthcare practitioner acting within the scope of his or her professional licensure who has primary responsibility for coordinating the care, the names and professional relationships of physicians and nonphysicians who will see the patient and to be told the reason for the presence of any individual.

### **To voice complaints about your care and receive a response from us**

You have the right to voice concerns or complaints about your care and to receive a response from us,

without impacting the quality or delivery of your care. You may report or contact any of the listed leadership agencies below. Further contact information for complaint and grievance reporting is available at your chosen health care facility or location.

### **To understand your financial responsibility and options for assistance**

As our patient, you can request a cost estimate and you have the right to receive a copy of a clear, understandable itemized bill. Upon request, you can also have charges explained. If you are experiencing financial hardship, please contact our customer service center at 1-866-747-2455. You can find out about payment options or whether you qualify for financial assistance, regardless of insurance coverage. We are committed to working with any of our patients who ask for assistance to pay a medical bill.

### **To information on care facility policies**

If requested, you will receive information about our policies, rules or regulations applicable to your care, including the use of service animals in public spaces within care facilities, based on federal law.

## **AS A PATIENT, FAMILY MEMBER, OR VISITOR YOU HAVE RESPONSIBILITIES:**

Providence Swedish is a place of healing where caregivers, patients, family members and visitors are welcomed, and can feel safe and respected. We ask and expect all people who come through our doors or seek care with us to behave in a manner that honors everyone's dignity, and helps us to provide high-quality, compassionate care. Our caregivers are chosen for their skill and expertise and their safety is paramount. Harassment or mistreatment of our caregivers will not be tolerated. While in our care or visiting someone who is, we expect the following of you:

- Be considerate and respectful of those around you, including to those providing care or receiving it.
- Understand that caregivers will not be reassigned for reasons unrelated to their professional role.
- Refrain from using discriminatory and/or derogatory language or behavior of any kind. It will not be tolerated and may result in your exclusion or removal from the facility.
- Inform your doctor or advance practice clinician about your health priorities, so you can create a plan together.
- Provide your medical history and treatment information accurately and completely.
- Report unexpected changes in your condition, take part in decisions, and ask doctors or caregivers questions about your care.
- Consider your doctors' or advance practice clinicians' advice and follow the treatment plan that is recommended. This includes notifying your providers if you are unable to keep an appointment or follow medical guidance.
- Provide us with a copy of your medical advance directive, living will and/or the identity and contact information of your designated trusted decision maker, if you have one.
- Work with your caregiver to complete a medical advance directive, if you don't have one.
- Understand your financial responsibilities and options for financial assistance.
- Follow care facility policies.
- Leave all personal belongings at home.

You can file a grievance with us at your providing health facility in person or by mail, fax, or email.

**Providence Regional Medical Center Everett**

Patient Safety Department

Email Address:

NWRPatientSafety@providence.org

Phone Number: 425-261-3927

You can also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at:

**U.S. Department of Health and Human Services**

200 Independence Avenue SW

Room 509F, HHH Building

Washington, DC 20201

800-368-1019 or 800-537-7697 (TDD).

Complaint forms are available at:

<http://www.hhs.gov/ocr/office/file/index.html>

If a patient or family member wishes to lodge a formal complaint with the Washington State Department of Health, they may do so by mail, online form, or Email Address:

**Washington State Department of Health**

Health Systems Quality Assurance

Complaint Intake

P.O. Box 47857

Olympia, WA 98504-7857

Form:

<https://fortress.wa.gov/doh/providercredentialsearch/ComplaintIntakeForm.aspx>

Email Address:

[hsqacomplaintintake@doh.wa.gov](mailto:hsqacomplaintintake@doh.wa.gov)

**The Joint Commission**

The public may contact The Joint Commission's Office of Quality and Patient Safety to report any concerns or register complaints about a Joint Commission accredited health care organization.

Report a patient safety concern or file a complaint:

**The Joint Commission Office of Quality and Patient Safety**

The Joint Commission Online Form

(NEW Incident):

<https://apps.jointcommission.org/QMSInternet/IncidentEntry.aspx>

Online Form (UPDATE or ASK Question on Previous Incident Submitted – Incident Number is Required):

<https://apps.jointcommission.org/QMSInternet/IncidentUpdate.aspx>

Mail to:

**Office of Quality and Patient Safety**

The Joint Commission

One Renaissance Boulevard

Oakbrook Terrace, Illinois 60181



# Rights of Involuntary Adult Patients

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Insofar as danger to the individual or others is not created, each person involuntarily detained, treated in a less restrictive alternative course of treatment, or committed for treatment and evaluation pursuant to Chapter 71.05 RCW shall have, in addition to other rights not specifically withheld by law, the following rights:

- To wear his or her own clothes and to keep and use his or her own personal possessions, except when deprivation of same is essential to protect the safety of the resident or other persons.
  - To keep and be allowed to spend a reasonable sum of his or her own money for canteen expenses and small purchases.
  - To have access to individual storage space for his or her private use
  - To have visitors at reasonable times
  - To have reasonable access to a telephone, both to make and receive confidential calls
  - To have ready access to letter writing materials, including stamps, and to send and receive uncensored correspondence through the mails
  - To have the right to individualized care and adequate treatment
  - To discuss treatment plans and decisions with professional persons
  - To not be denied access to treatment by spiritual means through prayer in accordance with the tenets and practices of a church or religious denomination in addition to the treatment otherwise proposed
  - To dispose of property and sign contracts unless such person has been adjudicated an incompetent in a court proceeding directed to that particular issue
- Not to have psychosurgery performed on him or her under any circumstances
  - Not to consent to the administration of antipsychotic medications beyond the hearing conducted pursuant to RCW 71.05.320(4) or the performance of electroconvulsant therapy or surgery, except emergency lifesaving surgery, unless ordered by a court of competent jurisdiction pursuant to the following standards and procedures:
    - (i) The administration of antipsychotic medication or electroconvulsant therapy shall not be ordered unless the petitioning party proves by clear, cogent, and convincing evidence that there exists a compelling state interest that justifies overriding the patient's lack of consent to the administration of antipsychotic medications or electroconvulsant therapy, that the proposed treatment is necessary and effective, and that medically acceptable alternative forms of treatment are not available, have not been successful, or are not likely to be effective.
    - (ii) The court shall make specific findings of fact concerning:
      - (A) The existence of one or more compelling state interests;
      - (B) the necessity and effectiveness of the treatment; and
      - (C) the person's desires regarding the proposed treatment. If the patient is unable to make a rational and informed decision about consenting to or refusing the proposed treatment, the court shall make a substituted judgment for the patient as if he or she were competent to make such a determination.

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- (iii) The person shall be present at any hearing on a request to administer antipsychotic medication or electroconvulsant therapy filed pursuant to this subsection. The person has the right:
- (A) To be represented by an attorney;
  - (B) to present evidence;
  - (C) to cross-examine witnesses;
  - (D) to have the rules of evidence enforced;
  - (E) to remain silent;
  - (F) to view and copy all petitions and reports in the court file; and
  - (G) to be given reasonable notice and an opportunity to prepare for the hearing.

The court may appoint a psychiatrist, physician assistant working with a supervising psychiatrist, psychiatric advanced registered nurse practitioner, psychologist within their scope of practice, physician assistant, or physician to examine and testify on behalf of such person. The court shall appoint a psychiatrist, physician assistant working with a supervising psychiatrist, psychiatric advanced registered nurse practitioner, psychologist within their scope of practice, physician assistant, or physician designated by such person or the person's counsel to testify on behalf of the person in cases where an order for electroconvulsant therapy is sought.

- (iv) An order for the administration of antipsychotic medications entered following a hearing conducted pursuant to this section shall be effective for the period of the current involuntary treatment order, and any interim period during which the person is awaiting trial or hearing on a new petition for involuntary treatment or involuntary medication.

- (v) Any person detained pursuant to RCW 71.05.320(4), who subsequently refuses antipsychotic medication, shall be entitled to the procedures set forth in this subsection.

- (vi) Antipsychotic medication may be administered to a nonconsenting person detained or committed pursuant to this chapter without a court order pursuant to RCW 71.05.215(2) or under the following circumstances:

- (A) A person presents an imminent likelihood of serious harm;
- (B) Medically acceptable alternatives to administration of antipsychotic medications are not available, have not been successful, or are not likely to be effective; and
- (C) In the opinion of the physician, physician assistant, or psychiatric advanced registered nurse practitioner with responsibility for treatment of the person, or his or her designee, the person's condition constitutes an emergency requiring the treatment be instituted before a judicial hearing as authorized pursuant to this section can be held.

If antipsychotic medications are administered over a person's lack of consent pursuant to this subsection, a petition for an order authorizing the administration of antipsychotic medications shall be filed on the next judicial day. The hearing shall be held within two judicial days. If deemed necessary by the physician, physician assistant, or psychiatric advanced registered nurse practitioner with responsibility for the treatment of the person, administration of antipsychotic medications may continue until the hearing is held.



# Important Contacts

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## Phone numbers

- Hospital Switchboard: ..... 425-261-2000
- Financial Assistance: ..... 866-747-2455 or 877-418-6419
- Medical Records: ..... 425-317-0700
- Providence Hospice & Home Care of Snohomish County:
  - Home Care: ..... 425-261-4780
  - Hospice: ..... 425-261-4777

## Support after discharge

Providence Swedish offers several groups and services for continued support after discharge. Please call for more information about:

- Cardiac Rehabilitation: ..... 425-261-3780
- Stroke Support Group: ..... PRMCE.Stroke@providence.org
- Cancer Support Group: ..... 425-297-5500

## Access your health care information online with My Chart

MyChart offers patients personalized and secure on-line access to portions of their medical records.

MyChart allows you to review your After Visit Summary, view future appointments with Providence Swedish clinics, and pay your bills. If your doctor or advance practice clinician uses Providence Swedish software in their clinic, you may also be able to send secure messages to them, view your clinic-ordered lab results, renew prescriptions and schedule appointments.

Information to sign up for MyChart and a personal access code will be available on the After Visit Summary you receive at discharge.

For more information visit [mychartwa.providence.org](http://mychartwa.providence.org)

## Proxy access in MyChart

Only you have access to your MyChart account. If you wish someone else (your spouse or another family member) to be able to see your record you can request proxy access for that person.



# Important Phone Numbers

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## Hospital Phone Numbers:

Chaplains .....	425-404-7000
<b>EMERGENCY – Rapid Response Team dial “66” on hospital phone</b>	
Family Interpreter Services Line .....	888-574-7127
Gift Shop – Colby Campus .....	425-261-4588
Gift Shop – Pacific Campus .....	425-258-7302
Hospital Switchboard dial “0”, or .....	425-261-2000
Local phone calls from hospital phone first dial “9”	
Medical Records .....	425-317-0700
Music Thanatologists .....	425-404-7000
Patient Room Services dial .....	“88144”
Pharmacy .....	425-261-3555
Food Service for Patients .....	“88888”
Volunteer Services Colby – activity cart .....	425-261-4580 or “84580”
Family Maternity Center Pavilion .....	425-258-7550

## Billing & Insurance:

Cellnetix Pathology .....	800-374-4045
North Sound Emergency Medicine .....	800-225-0953
PacLab Network Laboratory .....	800-752-8994
Providence WA Anesthesia Services .....	877-476-6642 (option 6)
Radia Medical Imaging .....	888-927-8023
Financial Assistance .....	866-747-2455 or 877-418-6419
Hospital Bill .....	866-747-2455 or 877-418-6419
Insurance Questions .....	800-878-4445
Medicare Hotline .....	800-633-4227 (800-MEDICARE)

## Support Groups:

Cardiac Rehabilitation .....	425-261-3780
Stroke Support Group .....	PRMCE.Stroke@providence.org
Cancer Support Group .....	425-297-5500

## Complaints/Feedback:

Patient Feedback Hotline .....	425-261-3927
WA State Department of Health .....	800-633-6828
Qualis Health (Medicare Patients) .....	800-445-6941
Joint Commission Office of Quality Monitoring .....	800-994-6610
Office of Civil Rights .....	800-363-1019 or TDD 800-537-7697



# Interpreter Services & Auxiliary Aids

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Providence Regional Medical Center Everett (PRMCE) provides Language Services and Auxiliary Aids free of charge for individuals who do not speak English, or who are hard of hearing or have speech, or vision loss (signing and non-signing deaf, hard of hearing, Late-Deafened, DeafBlind, low/no vision, close visual and minimal language).

PRMCE offers qualified medical interpretation in over 200 languages, in addition to sign language interpreters and other communication aids, such as assistive listening devices, translated patient materials, Braille and CART services, and closed captioning (where available). Please let us know your specific communication needs.

PRMCE offers a free Family Interpreting Line at 1-888-311-9127 (TTY: 711) for you or your family to call the hospital. **This number is not for emergencies.**

## Spanish:

El Providence Regional Medical Center Everett (PRMCE) ofrece servicios de interpretación y asistencia adicional sin costo para quienes no hablan inglés o tienen dificultades auditivas, del habla o visuales (incluyendo personas sordas, con pérdida de audición, sordoceguera, visión limitada o lenguaje mínimo).

PRMCE proporciona interpretación médica en más de 200 idiomas, además de intérpretes de lenguaje de señas y otros recursos para facilitar la comunicación, como dispositivos de asistencia auditiva, materiales traducidos, servicios en Braille y CART, y subtítulos (cuando estén disponibles). Por favor, indíquenos sus necesidades específicas de comunicación.

PRMCE también ofrece una Línea Gratuita de Interpretación Familiar al 1-888-311-9127 (TTY: 711) para que usted o su familia puedan comunicarse con el hospital. **Este número no debe usarse para emergencias.**

## Russian:

Региональный медицинский центр Everett (PRMCE) предоставляет языковые курсы и вспомогательные средства лицам, не говорящим по-английски, или страдающим потерей слуха, речи или зрения (глухие говорящие и не говорящие на языке жестов, слабослышащие, поздно оглохшие, слепоглухие, слабо/невидящие, с языком визуального общения и с минимальным языком).

PRMCE предлагает медицинский перевод на более чем 200 языков, а также услуги сурдопереводчиков и иные средства коммуникации, такие как вспомогательные слуховые устройства, переведенные материалы для пациентов, услуги шрифта Брайля и CART, а также субтитры (при наличии). Пожалуйста, сообщите нам о своих коммуникационных потребностях.

PRMCE предлагает бесплатную линию семейного перевода по телефону 1-888-311-9127 (TTY: 711) по которому вы или ваши близкие можете позвонить в больницу. **Данный номер не предназначен для экстренных случаев.**

# Find Your Language

Unë flas Shqip	I speak Albanian	አማርኛ አናገራለሁ	I speak Amharic
أتكلم العربية	I speak Arabic	Հայերէն կը խօսիմք	I speak Armenian
Ja govorim bosanski	I speak Bosnian	Аз говоря Български	I speak Bulgarian
ကျွန်ုပ် မြန်မာစကားပြောပါသည်။	I speak Burmese	我講廣東話	I speak Cantonese
من فارسی صحبت میکنم	I speak Farsi	Je parle français	I speak French
Ich spreche deutsch	I speak German	Μιλάω ελληνικά	I speak Greek
હું ગુજરાતી બોલું છું	I speak Gujarati	मैं हिन्दी बोलता हूँ	I speak Hindi
Kuv hais lus Hmoob	I speak Hmong	Beszélünk magyarul	I speak Hungarian
Parlo italiano	I speak Italian	私は日本語が話せます	I speak Japanese
저는 한국말을 합니다	I speak Korean	ຂ້າພະເຈົ້າປາກພາສາລາວ	I speak Lao
我讲国语	I speak Mandarin	म नेपाली बोल्छु	I speak Nepali
Oromo Duddah	I speak Oromo	Mówię po polsku	I speak Polish
Falo português	I speak Portuguese	ਮੈਂ ਪੰਜਾਬੀ ਬੋਲਦਾ ਹਾਂ	I speak Punjabi
Vorbesc românește	I speak Romanian	Я говорю по-русски	I speak Russian
Waxaan ku hadlaa Soomaali	I speak Somali	Hablo español	I speak Spanish
Nasema Kiswahili	I speak Swahili	ข้าพเจ้าพูดภาษาไทย	I speak Thai
Türkçe konuşuyorum	I speak Turkish	Я говорю українською мовою	I speak Ukrainian
میری زبان اردو ہے	I speak Urdu	Tôi nói tiếng Việt	I speak Vietnamese
Ij kōnono ilo Kajin Majol	I speak Marshallese	ខ្ញុំនិយាយភាសាខ្មែរ	I speak Cambodian

**English text being translated:**

ATTENTION: If you speak [insert language], language assistance services, free of charge, are available to you. **Call 1-888-311-9127 (TTY: 711) FOR PRMCE.**

Last updated: January, 2025

American Sign Language	All states, all regions		
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**Providence (AK/CA/MT/OR/WA)/Kadlec/PacMed Translated Taglines:**

Español (Spanish)	ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 888-311-9127 (TTY: 711).
繁體中文 (Chinese)	注意：如果您講中文，我們可以給您提供免費中文翻譯服務，請致電 888-311-9127 (TTY: 711 )
Tiếng Việt (Vietnamese)	CHÚ Ý: Nếu bạn nói Tiếng Việt, các dịch vụ hỗ trợ ngôn ngữ miễn phí có sẵn dành cho bạn. Gọi số 888-311-9127 (TTY: 711).
Tagalog (Tagalog – Filipino)	PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 888-311-9127 (TTY: 711).
(Korean)	주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 888-311-9127 (TTY: 711) 번으로 전화해 주십시오.
Русский (Russian)	ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 888-311-9127 (телетайп: 711).
Հայերեն (Armenian)	ՈՒՇԱԴՐՈՒԹՅՈՒՆ. Եթե խոսում եք հայերեն, ապա ձեզ կարող են տրամադրվել լեզվական աջակցության անվճար ծառայություններ: Ձանգահարեք 888-311-9127 (հեռատիպ (TTY)՝ 711).
العربية (Arabic)	يُرجى الانتباه: إذا كنتم تتكلمون اللغة العربية، فأعلموا أن خدمات المساعدة اللغوية متوفرة مجاناً لكم. اتصلوا برقم الهاتف 1-888-311-9127 (أو بخط المبرقة الكاتبة TTY لضعاف السمع والنطق على الرقم 711).
فارسی (Farsi) Persian (Farsi)	توجه: اگر به زبان فارسی صحبت می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با شماره 888-311-9127 (TTY:711) تماس بگیرید.
日本語 (Japanese)	注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。888-311-9127 (TTY:711) まで、お電話にてご連絡ください。
ਪੰਜਾਬੀ (Punjabi) Panjabi*	ਧਿਆਨ ਧਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਿੰਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਧਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 888-311-9127 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।
ខ្មែរ (Cambodian) Mon-Khmer, Cambodian	សូមចាំអារម្មណ៍: ប្រសិនបើលោកអ្នកនិយាយភាសាខ្មែរ នោះសេវាជំនួយផ្នែកភាសានឹងមានផ្តល់ជូនលោកអ្នកដោយឥតគិតថ្លៃ។ សូមទូរស័ព្ទទៅលេខ 888-311-9127 (TTY: 711)។
हिंदी (Hindi)	ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 888-311-9127 (TTY: 711) पर कॉल करें।
Hmoob (Hmong)	LUS CEEV: Yog tias koj hais lus Hmoob, koj tuaj yeem siv cov kev pab txhais lus pub dawb. Hu rau 888-311-9127 (TTY: 711).
ภาษาไทย (Thai)	โปรดทราบ: หากคุณพูดภาษาไทย คุณสามารถใช้บริการความช่วยเหลือทางภาษาได้โดยไม่มีค่าใช้จ่าย โทร 888-311-9127 (TTY: 711)

<b>Deutsch (German)</b>	ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 888-311-9127 (TTY: 711).
<b>اُردُو (Urdu)</b>	توجہ: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 888-311-9127 (TTY: 711).
<b>Українська (Ukrainian) Ukrainian*</b>	УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 888-311-9127 (телетайп: 711).
<b>Français (French)</b>	ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 888-311-9127 (ATS: 711).
<b>Diné Bizaad (Navajo)</b>	Díí baa akó nínízin: Díí saad bee yáníłti'go <b>Diné Bizaad</b> , saad bee áká'ánída' áwo'déé', t'áá jiik'eh, éí ná hóló, koji' hódíłnih 1-888-311-9127 (TTY: 711.)
<b>ລາວ (Lao) Laotian</b>	ໝາຍເຫດ: ຖ້າທ່ານເວົ້າພາສາລາວ, ມີການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໂດຍບໍ່ເສຍຄ່າໃຫ້ແກ່ທ່ານ. ໂທ 888-311-9127 (TTY: 711).
<b>ગુજરાતી (Gujarati)</b>	સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 888-311-9127 (TTY: 711).
<b>Cushite*</b>	XIYYEEFFANNA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 888-311-9127 (TTY: 711).
<b>አማርኛ (Amharic) Amharic*</b>	ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በገጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ 888-311-9127 (ማስማት ለተሳናቸው: 711)
<b>Română (Romanian) Romanian*</b>	ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 888-311-9127 (TTY: 711).
<b>Gagana fa'a Sāmoa (Samoan) Samoan*</b>	MO LOU SILAFIA: Afai e te tautala i le Gagana Samoa, o loo iai auaunaga fesoasoani, e leai se totogi mo oe, Telefoni mai i le: 888-311-9127 (TTY:711)
<b>Ilokano (Ilocano) Ilocano*</b>	AGATENSION: No agsasaokayo iti Ilocano, dagiti serbisio para ti tulong iti pagsasao nga awan ti bayadan ket siaadda para kadakayo. Tawagan ti 888-311-9127 (TTY: 711).
<b>Italiano (Italian)</b>	ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 888-311-9127 (TTY: 711).
<b>Polski (Polish)</b>	UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 888-311-9127 (TTY: 711).
<b>Norsk (Norwegian) Norwegian*</b>	MERK: Hvis du snakker norsk, er gratis språkassistanstjenester tilgjengelige for deg. Ring 888-311-9127 (TTY: 711).
<b>Deitsch (Pennsylvania Dutch)</b>	Wann du schwetscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 888-311-9127 (TTY: 711).
<b>Marshallese</b>	KAJELĀ: Ñe kwoj kōnono ilo Kajin Majol, jermal in jipañ ko kin kajin, kin ejjelok wonean, re belok ñan eok. Kalle 1-888-311-9127 (TTY: 711)

# Notice of Nondiscrimination and Accessibility Rights

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Providence St. Joseph Health and its Affiliates<sup>1</sup> (collectively "PSJH") comply with applicable Federal civil rights laws and do not discriminate against, exclude, or treat differently any individuals accessing any PSJH Program or Activity on any basis prohibited by local, state or federal laws, including but not limited to on the basis of race, color, religious creed (including religious dress and grooming practices), national origin (including certain language use restrictions), ancestry, disability (mental and physical including HIV and AIDS), medical condition (including cancer and genetic characteristics), marital status, age, sex (including pregnancy, childbirth, breastfeeding and related medical conditions, gender, gender identity, gender expression and sexual orientation, genetic information (including family medical history), or military/veteran status as those terms are defined under federal and state laws and rules.

In compliance with the Americans with Disabilities Act (ADA), PSJH provides qualified interpreters and other auxiliary aids and services free of charge:

- (1) to people with disabilities to communicate effectively with us, such as: (a) Qualified sign language interpreters; and (b) Written information in other formats (large print, audio, accessible electronic formats, other formats); and
- (2) to people whose primary language is not English, such as: (a) Qualified interpreters; and (b) Information written in other languages.

If you need any of the above services, please contact the Civil Rights Coordinator below. If you need Telecommunications Relay Services, please call 1-800-833-6384 or 7-1-1.

If you believe that PSJH has failed to provide these services or discriminated in another way on the basis race, color, religious creed (including religious dress and grooming practices), national origin (including certain language use restrictions), ancestry, disability (mental and physical including HIV and AIDS), medical condition (including cancer and genetic characteristics), marital status, age, sex (including pregnancy, childbirth, breastfeeding and related medical conditions, gender, gender identity, gender expression and sexual orientation, genetic information (including family medical history), or military/veteran status, you can file a grievance with PSJH by contacting the Civil Rights Coordinator for NW Washington:

## **Civil Rights Coordinator**

1321 Colby Avenue  
Everett, WA 98201

Tel: 1-844-469-1775

[Nondiscrimination.NWR@providence.org](mailto:Nondiscrimination.NWR@providence.org)

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the above-noted Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue SW.

Room 509F, HHH Building

Washington, DC 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at: <http://www.hhs.gov/ocr/office/file/index.html>.

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<sup>1</sup>For purposes of this policy, "Affiliates" is defined as any entity that is wholly owned or controlled by Providence St. Joseph Health (PSJH), Providence Health & Services, St. Joseph Health System, Western HealthConnect, Covenant Health Network, Inc., Providence Global Center, Northern HealthConnect, or is jointly owned or controlled by PSJH or its Affiliates and bears the Providence, Swedish Health Services, Swedish Edmonds, St. Joseph Health, Covenant Health Network, Covenant Health, Kadlec Regional Medical Center, or PacMed Clinics name (includes Medical Groups, Hospice, Home Health, etc.).



# Your Feedback is Important to Us

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## Patient surveys

In a few weeks, you may receive a survey about your hospital stay. Please take the time to complete and return this survey. This information is used throughout Providence to identify areas for improvement.

## Comments or concerns

If you have concerns or complaints about any part of your care, please feel free to speak with a manager or caregiver. This will result in no retaliation or barrier to service. You may also file a grievance with our patient safety department by contacting us at:

Providence Regional Medical Center Everett  
Patient Safety Department  
1321 Colby Avenue  
Everett, WA 98201  
Phone: 425-261-3927  
[nwrpatientsafety@providence.org](mailto:nwrpatientsafety@providence.org)

## Medicare

If you are a Medicare patient and have a complaint about the quality of your care, your Medicare coverage, or a concern about your discharge date, you can ask us to refer your concern to Medicare's Quality Improvement Organization (QIO) by contacting us at:

Providence Regional Medical Center Everett  
Patient Safety Department  
1321 Colby Ave  
Everett, WA 98201  
Phone: (425) 261-3927

## Concerns about discrimination

- If you have concerns about possible discrimination, please contact the patient safety department at 425-261-3927.
- If your issue remains unresolved, you have the right to call the Office of Civil Rights at 800-368-1019 or TDD 800-537-7697

## Anyone may report a patient safety event or concern to

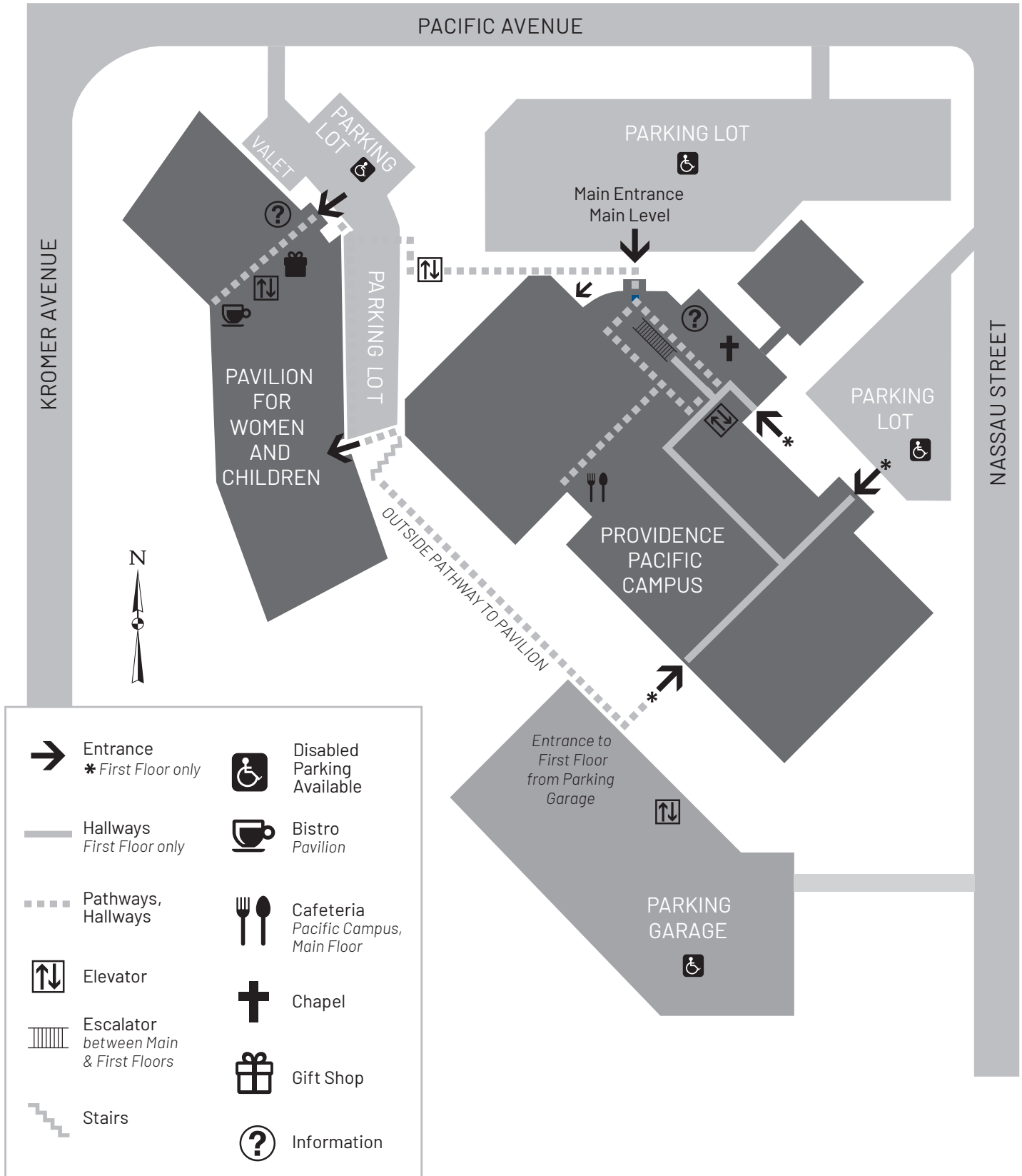
- The Washington State Department of Health Health Systems Quality Assurance  
P.O. Box 47857  
Olympia, WA 98504  
Phone: (800) 633-6828
- The Joint Commission Office of Quality and Patient Safety: Call 800-994-6610 or visit [jointcommission.org](http://jointcommission.org)
- Mail: Office of Quality and Patient Safety  
The Joint Commission  
One Renaissance Boulevard  
Oakbrook Terrace, IL 60181



# Pacific Campus Map

916 Pacific Avenue, Everett, WA 98201

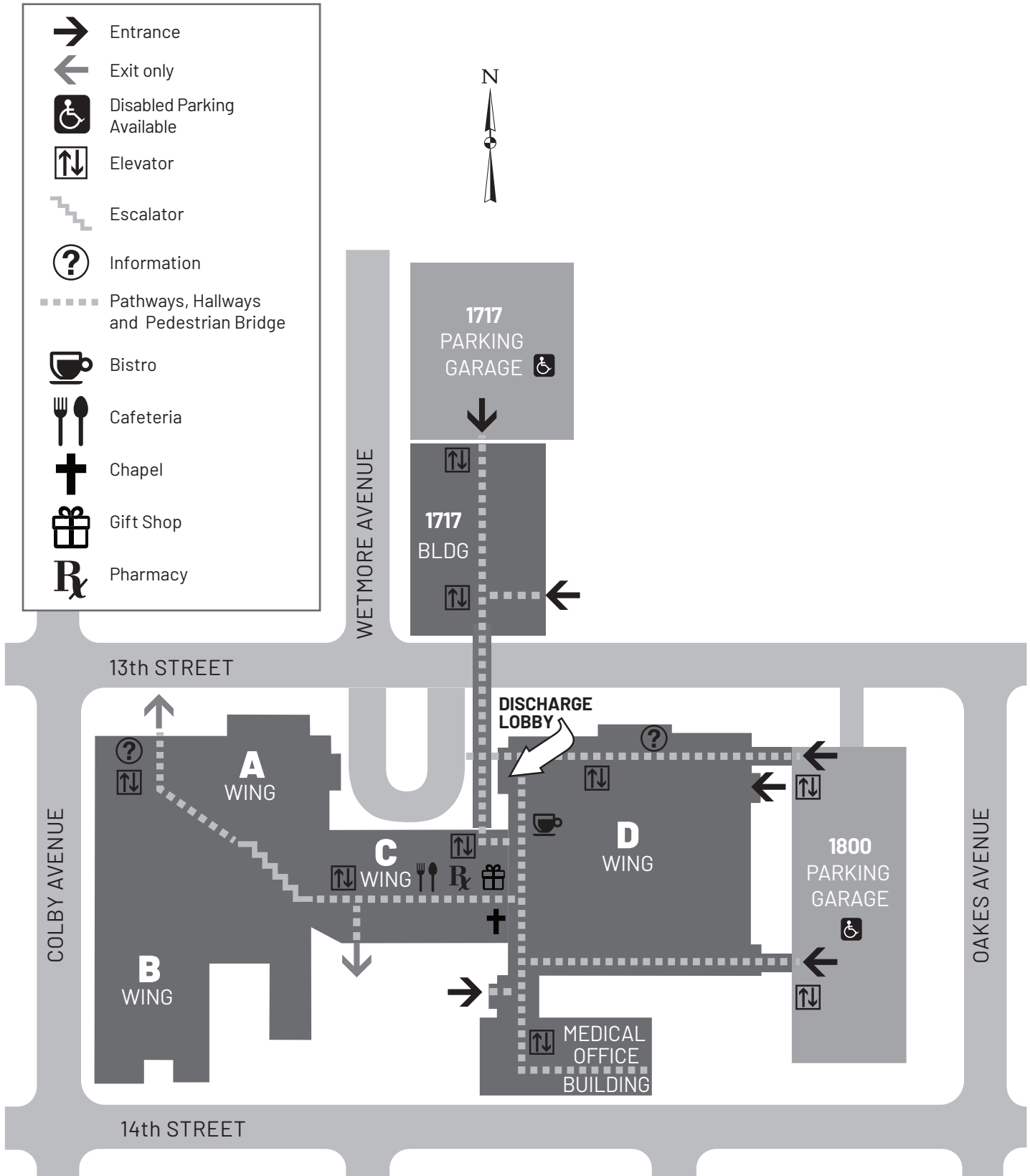
[providence.org/everett](http://providence.org/everett)



# Colby Campus Map

1700 13th Street, Everett, WA 98201

[providence.org/everett](http://providence.org/everett)



#### OUR MISSION

As expressions of God's healing love, witnessed through the ministry of Jesus, we are steadfast in serving all, especially those who are poor and vulnerable.

#### OUR VALUES

Compassion, Dignity, Justice, Excellence, Integrity

425-261-2000

[Providence.org/everett](https://www.providence.org/everett)



**Providence**  
**SWEDISH**

Providence Regional  
Medical Center Everett

We do not discriminate on the basis of race, color, national origin, sex, age, or disability in our health programs and activities.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 888-311-9127 (TTY: 711).

注意：如果您講中文，我們可以給您提供免費中文翻譯服務，請致電 888-311-9127 (TTY: 711)