

Patient Rights

As my patient you have the right to:

KNOW WHAT I AM RECOMMENDING, INCLUDING:

- the nature and purpose of the treatment;
- the intended outcome and possible side effects;
- the risks and anticipated benefits; and
- reasonable alternatives.

AT ANY TIME, ASK A QUESTION.

REFUSE OR STOP TREATMENT AT ANY TIME.

CONSENT, OR WITHDRAW YOUR CONSENT, TO ALL ASSESSMENTS INCLUDING PHYSICAL EXAMINATIONS OR LABORATORY TESTS.

ENSURE THAT YOUR PERSONAL HEALTH INFORMATION REMAINS CONFIDENTIAL AND THAT YOUR PRIVACY IS RESPECTED.

OBTAIN A SECOND OPINION FROM ANOTHER HEALTH PROFESSIONAL.

BE LISTENED TO.

EXPRESS CONCERNS ABOUT CARE/SERVICE AND BE INFORMED OF THE PROCESS FOR DOING SO.

KNOW THE NAMES AND ROLES OF THE MEMBERS OF YOUR HEALTH CARE TEAM.

TO FILE A COMPLAINT WITH THE COLLEGE OF NATUROPATHS OF ONTARIO, THE REGULATORY BODY FOR NATUROPATHS IN OUR PROVINCE.

BE FREE OF MENTAL, PHYSICAL, SEXUAL AND FINANCIAL ABUSE.

PROFESSIONAL CARE FREE FROM BIAS.

A CLEAR EXPLANATION OF THE SERVICES YOU WILL RECEIVE AND WHO WILL PROVIDE THEM.

ACCESS A COPY OF YOUR PERSONAL HEALTH RECORD.

