Thank you for choosing the Hospital of the University of Pennsylvania.

In our ongoing effort to provide you and your loved ones with the best experience, we want to be sure you have all the tools you need to make your stay as comfortable as possible. This guide provides important information about the services and amenities available to you. Thank you for choosing Penn Medicine as your trusted health care provider.
PATIENT AND GUEST RELATIONS

HUP’s staff continually strives to meet patients’ needs and provide comfort and peace of mind to patients and their families. The Patient and Guest Relations staff serves as a liaison between HUP and patients, families, and visitors. They address concerns, forward suggestions and extend compliments. Patient and Guest Relations staff can also help patients receive special services such as notary and TTY phone support. For assistance, please contact:

**Patient and Guest Relations**

South Pavilion, 2nd Floor
Perelman Center
3400 Civic Center Boulevard
Philadelphia, Pennsylvania 19104
215.662.2575

**AMBASSADORS IN RED**

The Reception teams at HUP (main entrance and Silverstein 1, Mezzanine) and Perelman Center for Advanced Medicine (ground lobby and 1st floor atrium) are happy to assist you and your family members by providing information, wheelchair assistance, and escort to your destination, if requested. These members of the Patient and Guest Relations team are our ‘welcoming partners’ and want to meet the needs of our guest. Please do not hesitate to ask any of our Reception team members for assistance.

For urgent needs, please call HUP security at 215.662.2677 (COPS).

PERSONAL ITEMS

Bring only necessary items. Patients may be moved to different care areas during their hospital stay. Labeling all personal items helps to keep track of them. At times, the nursing staff may need to do an inventory of patient belongings. Please do not bring valuables such as jewelry and electronics.

**MEDICATIONS**

Patients’ medication history is very important. Doctors and nurses will ask repeatedly about medications taken at home.

Medications taken while in the hospital are prescribed specifically for the hospital stay. Some may be new or different compared to a patient’s medication history. A hospital pharmacist reviews all medications and dispenses them. The nurse explains them and gives them to patients. Always ask about the medications you are given before taking them.

Patients should never take medication from home without discussing this with the doctor or nurse first. If the doctor wants a patient to take their medication from home, a pharmacist will make sure it does not interfere with the other medications they are taking.

**FAMILY**

Patients are asked to define their family and explain how they will be involved in patient care, care planning and decision making. Patients should plan to keep their family informed about their care—they are advised to identify one person who can communicate with family members. Patients should share their plan with HUP staff.

**SUPPORT PERSON(S)**

Patients are asked to identify their support person(s) whose presence will provide emotional support, comfort and help alleviate fears. With patient permission, this person may stay throughout the inpatient stay, participate in planning for care and discharge, and provide support by learning new information.

Clinical rounds, patient education sessions and discharge planning will accommodate having the support person(s) present. The support person(s) may be present throughout the stay unless their presence infringes on others’ rights, safety, or is medically or therapeutically contraindicated.

**VISITORS**

Visiting hospitalized loved ones is a way of showing support and offering encouragement. Patients should discuss with family and friends when they would like to receive visitors and who should visit.

WHAT TO BRING:

- Photo identification
- Health insurance information
- Copy of any advance directive, durable power of attorney and living will documents
- List of medications with doses and frequency
- List of doctors and relatives with phone numbers and email addresses
- Robe, slippers and toiletries (toothbrush, toothpaste, etc.)
- Eye glasses, hearing aids and dentures (and cases labeled with full name)
- Cane and walker (labeled with full name)
- Medical equipment if absolutely necessary

*U.S. News & World Report Best Hospitals Honor Roll
THE PHYSICIAN TEAM
Performs a daily medical history and physical exam, and orders tests and treatments.

» Attending: Doctor in charge of patient care.
» Fellow: Doctor receiving advanced training in a specific area.
» Resident: Doctor who supervises the intern to direct patient care.
» Intern: Doctor responsible for coordinating all aspects of patient care.
» Medical Student: Student learning to become a doctor.

DISCHARGE PLANNING TEAM:

» Case Manager: Nurse who sets up home needs (medications, medical equipment, visiting nurses and home therapists), transportation and can help with insurance issues.
» Social Worker: Offers support, makes referrals to community support agencies, and arranges patient transfers to nursing homes, rehab centers and other facilities.

THERAPIST TEAM:

» Physical Therapist: Works with patients to maintain and improve strength, walking and balance. They are dressed in light blue uniforms.
» Occupational Therapist: Works with patients on self-care activities such as feeding, bathing and grooming. They are dressed in light blue uniforms.
» Respiratory Therapist: Evaluates and treats patients with breathing disorders.
» Speech Therapist: Helps patients with a variety of speech and swallowing disorders.
» Nutritionist: Evaluates and recommends dietary changes that will promote recovery and maintain health.
» Pharmacist: Reviews all aspects of patients’ medications, including education about new medications and their side effects.

ADVANCE PRACTICE PROVIDER TEAM:

» Nurse Practitioner (NP): Registered nurse with advanced education and clinical training who provides a wide range of preventive and acute health care services.
» Physician Assistant (PA): Trained and licensed to practice medicine under the supervision of a physician.
» Certified Nurse Midwife (CNM): Provides counseling and care during preconception, pregnancy, childbirth and the postpartum period.

OTHER IMPORTANT MEMBERS:

» Phlebotomist: Collects blood tests ordered by physicians.
» Transport Staff: Takes patients to tests and studies around the hospital. They are dressed in teal uniforms.
» Chaplain: Brings expertise in helping patients and families draw upon their own spiritual resources, values and traditions for healing. Care is provided for all persons, not only those who identify as religious or spiritual.
» Catering Associate: Delivers made-to-order meals for breakfast, lunch and dinner, according to the patients’ diets. They are dressed in blue button-up shirts and black pants.
» Housekeeping Associate: Thoroughly sanitizes patient rooms and common spaces daily. They are dressed in light green polo shirts and black pants.
ROOM ACCOMMODATIONS
Room assignments are based on medical needs and bed availability. During hospitalization, patients may be asked to change rooms to accommodate their medical needs or the medical needs of other patients.

TELEPHONE
A telephone is located at every bedside. Local calls are free within area codes 215, 267, 610, 484, 856, 609 and 302. All other calls require operator assistance and are charged to a home phone bill, credit card, calling card (available in the gift shop) or the call recipient (calling collect).

TELEVISION
Patients have access to a television with closed captioning free of charge. The unit secretary can provide headsets—to be used while watching TV late at night or at a high volume. Please call 215.662.3900 for repair service.

PASTORAL CARE
Interfaith chaplains are available to visit with patients and families 24 hours-a-day. They can be reached at 215.662.2591. After 5 pm, please contact the hospital operator for the chaplain on call. An interfaith chapel is located on the first floor of the Dulles building and is open 24 hours-a-day.

VALUABLES
HUP staff strive to provide a safe and secure environment, but strongly recommend that patients’ valuables be sent home. Valuables that must remain should be secured with the security department. HUP is not responsible for belongings or valuables that are not secured with the security department.

SAFETY
As part of HUP’s emergency management system, alarms may be activated and announcements made over the loud speaker. Fire and disaster drills are conducted regularly. If an alarm occurs, please follow the direction of HUP staff. The hospital is a fire-resistant building. HUP staff is trained in fire protection, fire safety and disaster response to ensure safety for patients and visitors.

SECURITY
HUP security staff is focused on the safety and welfare of everyone utilizing HUP facilities and services.

 Locations:
 » HUP Security Office
 » Emergency Department, Silverstein Building, Ground Floor
 » Perelman Center Security Office
 » Atrium Lobby, Ground Floor

SMOKE-FREE ENVIRONMENT
The Hospital of the University of Pennsylvania discourages smoking and supports a smoke-free environment for patients, staff and visitors. Patients are not permitted to smoke in or near the hospital. Smoking is prohibited in and around all Penn Medicine facilities and property, including sidewalks along 34th Street and 50 feet from any entrance.

STOP SMOKING RESOURCES
Pennsylvania Quitline: 1.877.724.1090
 « SmokeFree Philly: 1.800.QUIT.NOW, smokefreephilly.org
 « Centers for Disease Control and Prevention: cdc.gov/tobacco/quit_smoking
 « American Lung Association: lungusa.org/stop-smoking
 « American Heart Association: heart.org/quitsmoking

LEAVING THE HOSPITAL (DISCHARGE)
Planning for discharge begins when patients are admitted to the hospital. Patients and their family members/support persons have the right to request a discharge planning evaluation. Throughout the hospital stay, HUP staff will work with patients, their support person(s), and their family to assess patient needs and identify resources to meet these needs. Patients may meet with a social worker or case manager who will discuss options for discharge, recommend a plan and coordinate the arrangements.

Social workers and case managers are part of the interdisciplinary care team at HUP. Social workers can link patients to community resources (such as skilled nursing and rehabilitation facilities) that meet health-related needs or concerns. They can help patients and families cope with illness or injury during their stay, and provide referrals to agencies at discharge. Case managers work with patients and families to arrange home care such as home nursing care and home medical equipment.

DISCHARGE
The doctor and nurse provide patients with detailed instructions about post-hospital care. Questions about diet, activities or other matters should be directed to the nurse. The entire care team works with patients to support their transition out of the hospital.

PHARMACY SERVICES
If you are admitted to a Penn Medicine hospital as an inpatient, have your prescriptions delivered directly to you! Ask any staff member to request service.

OUTPATIENT PHARMACY SERVICES
We deliver personalized pharmacy care to all of our patients, whether it’s a one-time prescription or a recurring prescription need.

CONVENIENT RETAIL PHARMACY LOCATIONS
Hospital of the University of Pennsylvania
3400 Spruce St, Ravdin Building, 1st Floor
Telephone: 215.662.2920
Hours of Operation:
 » Monday through Friday: 7 am to 5:30 pm
 » Saturday & Sunday: 9 am to 2 pm

Perelman Center for Advanced Medicine
3400 Civic Center Blvd, 1st Floor West
Telephone: 215.662.6260
Hours of Operation:
 » Monday through Friday: 8 am to 6 pm

IMPORTANT TELEPHONE NUMBERS
FOR EMERGENCY SITUATIONS OF ANY TYPE, PLEASE CALL 215.662.2677 (COPS).

Operator .......................... 215.662.4000 or (0)
Patient room number ............... 215.662.4000 or (0)
Patient and Guest Relations
(see page 2) ......................... 215.662.2575
Security ....................... 215.662.2677 (COPS)
Admissions office .................. 215.662.2335
Business office .................. 215.662.2672
Gift shop .................. 215.662.2701
Patient accounts ............... 215.662.2672
Housekeeping .................. 215.776.5871
Food Services .................. 215.662.3962
PUBLIC TRANSPORTATION

SEPTA
SEPTA regional rail lines, Airport, Wilmington/Newark, and Media-Elwyn and most Warminster and West Trenton trains provide direct service to the University City Station on the Hospital of the University of Pennsylvania campus. From other regional rail lines, passengers should transfer to the Airport, Wilmington-Newark or Media-Elwyn. The train ticket serves as the transfer ticket.

Northeast corridor AMTRAK trains stop at 30th Street Station. From there, the SEPTA regional rail lines Airport, Wilmington-Newark or Media-Elwyn travel to the University City Station. Taxi services are available from 30th Street Station.

» SEPTA Market/Frankford blue line (train/subway) stops at 34th and Market Streets. Once above ground, walk south on 34th Street exactly three blocks to HUP.

» SEPTA Green Line (trolley) stops at 37th and Spruce Streets, three blocks from HUP. Use any westbound trolley except Route 10.

» LUCY Gold & Green buses run from 30th Street Station to HUP at 34th and Spruce streets.

Mass Transit Telephone Numbers
SEPTA information: 215.580.7800
PATCO information: 215.922.4600
AMTRAK information: 800.872.7245

PARKING FOR PATIENTS AND VISITORS
Self-parking for our patients and visitors is available at the Perelman Center for Advanced Medicine garage or the 3600 Civic Center Boulevard parking garage.

Self Park
Perelman Center for Advanced Medicine
Open 24/7.

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3600 Civic Center Boulevard Parking Garage
Penn patients pay $5. Non-patient rate is $20.
Opens Monday at 5am, and remains open through Friday at midnight. Saturday and Sunday closed.

Perelman Center for Advanced Medicine
Monday through Friday 5:30 am to 9 pm.
Saturday and Sunday closed.

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LONG-TERM PARKING
For patients requiring an extended hospitalization, parking passes are available to family members at a discounted rate:

» 15 day pass — allows unlimited in/out parking in the Perelman Center garage for 15 consecutive days.
  (Cost: $80)

» 7 day pass — allows unlimited in/out parking in the Perelman Center garage for seven consecutive days.
  (Cost: $45)

There is no reimbursement for days not used or lost/stolen cards.

Long-term parking passes can be purchased at the Perelman Center’s Valet Cashier booth located on the ground floor of the Perelman Center for Advanced Medicine.

Valet Parking
Hospital of the University of Pennsylvania
Main Entrance
Monday through Friday 5:30 am to 10 pm.
Saturday and Sunday 10 am to 9 pm.

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New Jersey PATCO Trains
PATCO provides transportation to 8th and Market streets. Follow the underground concourse to the SEPTA Market East Station. From there take SEPTA regional rail lines Airport, Wilmington-Newark or Media-Elwyn to the University City Station on HUP campus.
Alternate Route: Take SEPTA Market/Frankford blue line westbound to 34th and Market Streets. Once above ground, walk south on 34th Street exactly three blocks to HUP at the corner of 34th and Spruce streets.

Mass Transit Telephone Numbers
SEPTA information: 215.580.7800
PATCO information: 215.922.4600
AMTRAK information: 800.872.7245

BEAUTY AND GROOMING SERVICES
A hair stylist provides services for both men and women at bedside or the hospital salon located on the first floor of the Maloney Building. Hair services are available during regular business hours and cash payment is expected at the time of service. A care provider can assist in scheduling appointments for patients.

THE PAVILION
The Pavilion is an inpatient unit designed for patients requesting amenities usually found at deluxe hotels. Amenities include express check-in and check-out, private rooms, chef-prepared meals and a concierge to assist in scheduling personal services. There are additional fees associated with The Pavilion that are not covered by insurance. To reserve a room, please contact a Pavilion representative by calling 215.662.4141.

PARKING FOR PATIENTS AND VISITORS
Self-parking for our patients and visitors is available at the Perelman Center for Advanced Medicine garage or the 3600 Civic Center Boulevard parking garage.

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Alternate Route: Take SEPTA Market/Frankford blue line westbound to 34th and Market Streets. Once above ground, walk south on 34th Street exactly three blocks to HUP at the corner of 34th and Spruce streets.

Mass Transit Telephone Numbers
SEPTA information: 215.580.7800
PATCO information: 215.922.4600
AMTRAK information: 800.872.7245
A quiet room with a massage chair, providing a private space to rest, reflect, and recharge. Trained volunteers, available to provide emotional support and assistance. Information about many topics ranging from caregiver wellbeing of family members and friends caring for a loved one during hospitalization. Services include:

- A quiet room with a massage chair, providing a private space to rest, reflect, and recharge.
- Refreshments and business center free of charge.
- Trained volunteers, available to provide emotional support and assistance.
- Information about many topics ranging from caregiver distress that could arise during a hospital stay.

THE FAMILY CAREGIVER CENTER
Ravdin Building, 1st Floor
The Family Caregiver Center supports the health and wellbeing of family members and friends caring for a loved one during hospitalization. Services include:

- A quiet room with a massage chair, providing a private space to rest, reflect, and recharge.
- Refreshments and business center free of charge.
- Trained volunteers, available to provide emotional support and assistance.
- Information about many topics ranging from caregiver distress that could arise during a hospital stay.

PENNSYLVANIA PROGRAM FOR MINDFULNESS
The Penn Program for Mindfulness has partnered with the Hospital of the University of Pennsylvania’s Video Services to create a series of guided mindfulness practices for HUP’s new mindfulness channel. The channel (#16), now part of HUP’s closed circuit television system for hospital patients, helps patients to manage physical, emotional or mental discomfort associated with illness and distress that could arise during a hospital stay.

LOST AND FOUND
Lost and found items are accepted and stored in the ground floor of the Silverstein building, next to the Emergency Department entrance. Reasonable effort is made to contact owners of lost property and return identifiable items. Employees, patients and visitors can call HUP Security at 215.662.2677 to inquire about lost items.

AFTER HOURS ACCESS
On a daily basis, all entrances to the hospital are locked from 11 pm to 5 am. During this time, everyone must enter through the Emergency Department entrance on 34th Street.

Patient care send separate bills for their services. Patients may receive bills from their primary physician, anesthesiologist, radiologist and/or pathologist. Charges for some specialized services are also billed separately. Payments or payment questions about these bills should be directed to the appropriate physician’s office.

QUESTIONS ABOUT THE BILL?
For any questions about the hospital bill prior to or during hospitalization, please contact a business services representative. Please note that explanations of charges for hospital services are available for review in the Business Services office during regular working business hours. After leaving the hospital, patients may call 877.433.5299.

INSURANCE INFORMATION
Insurance and third party payer information must be provided. Patients should have their insurance cards with them when speaking with a pre-admission representative by phone or when arriving at the hospital. HUP staff contacts insurance carriers to verify patient benefits, co-pay and deductible information and assist with any required approvals and referrals. HUP staff may contact patients to review this information.

PAYMENT DUE PRIOR TO SERVICE
Payments of deductibles, co-payments and non-covered services (such as transportation) are expected at or prior to the time of service. Payments can be made by cash, credit card or check.

FILING AN INSURANCE CLAIM
The Hospital of the University of Pennsylvania files insurance claims on patients’ behalf. Patients can be provided with patient benefits, co-pay and deductible information and payments due from the patient, if any. Insurance and third party payer information must be provided. Patients should have their insurance cards with them when speaking with a pre-admission representative by phone or when arriving at the hospital. HUP staff contacts insurance carriers to verify patient benefits, co-pay and deductible information and assist with any required approvals and referrals. HUP staff may contact patients to review this information.

INSURANCE AND BILLING
Patients are responsible for providing necessary insurance information and for working with the hospital to make payment arrangements when necessary. Penn Medicine provides financial counseling and, where appropriate, significant discounts to uninsured and underinsured persons in accordance with the Patient Protection and Affordable Care Act. Patients’ concerns about their ability to pay their hospital bill should be directed to HUP’s Patient Financial Services Office at 877.433.5299.

PAYMENT DUE PRIOR TO SERVICE
Payments of deductibles, co-payments and non-covered services (such as transportation) are expected at or prior to the time of service. Payments can be made by cash, credit card or check.

FILING AN INSURANCE CLAIM
The Hospital of the University of Pennsylvania files insurance claims on patients’ behalf. This does not release patients from responsibilities for charges billed to their account. Insurance contracts are between patients and insurance companies. Regardless of the type of insurance, bills are ultimately the responsibility of patients. Any portion of the bill not paid promptly by insurance companies is charged directly to patients, such as co-payments and deductibles.

UNDERSTANDING THE HOSPITAL BILL
Shortly after returning home, patients will receive a statement, or bill, listing the charges for the hospital stay. Depending on the services received, there may be more than one bill. In addition to the daily charge for the room, this statement includes charges for such services as anesthesia, X-rays, laboratory work, blood transfusions and the operating room. The initial statement also shows an estimate of payments expected from insurance companies. Later statements show payments received from insurance companies and payments due from the patient, if any.

PHYSICIANS’ BILLS
Charges for physicians’ services are not included in the hospital bill. Most of the physicians involved in patient care send separate bills for their services. Patients may receive bills from their primary physician, anesthesiologist, radiologist and/or pathologist. Charges for some specialized services are also billed separately. Payments or payment questions about these bills should be directed to the appropriate physician’s office.

QUESTIONS ABOUT THE BILL?
For any questions about the hospital bill prior to or during hospitalization, please contact a business services representative. Please note that explanations of charges for hospital services are available for review in the Business Services office during regular working business hours. After leaving the hospital, patients may call 877.433.5299.
STATEMENT OF PATIENT’S RIGHTS

You have the right to respectful care given by competent personnel which reflects consideration of your cultural and personal values and belief systems and which optimizes your comfort and dignity.

You have the right, upon request, to be given the name of your attending physician, the names of all other physicians or practitioners directly participating in your care, and the names and roles of other health care personnel, having direct contact with you.

You have the right to every consideration of privacy concerning your medical care program. Case discussion, consultation, examination, and treatment are considered confidential and should be conducted discreetly, away from objectionable visual and auditory privacy when possible. This includes the right, if requested, to have someone present while physical examinations, treatments, or procedures are being performed, as long as they do not interfere with diagnostic procedures or treatments. This also includes the right to request a room transfer if another patient or a visitor in the room is unreasonably disturbing you and if another room equally suitable for your care needs is available.

You have the right to have all information, including records, pertaining to your medical care treated as confidential except as otherwise provided by law or third-party contractual arrangements.

You have the right to know what hospital policies, rules and regulations apply to your conduct as a patient.

You have the right to expect emergency procedures to be implemented without unnecessary delay.

You have the right to good quality care and high professional standards that are continually maintained and reviewed.

You have the right to full information in layperson’s terms, concerning diagnosis, treatment, and prognosis, including information about alternative treatments and possible complications. When it is not medically advisable that such information be given to you, the information shall be given on your behalf to your designated/legally authorized representative. Except for emergencies, the physician must obtain the necessary informed consent prior to the start of any procedure or treatment, or both.

You have the right to not be involved in any experimental, research, or donor program unless you have, or your designated/legally authorized representative has, given informed consent prior to the actual participation in such a program. You or your designated/legally authorized representative may, at any time, refuse to continue in any such program to which informed consent has previously been given.

You have the right to accept medical care or to refuse any drugs, treatment, or procedure offered by the institution, to the extent permitted by the law, and a physician shall inform you of the medical consequences of such refusal.

You have the right to medical and nursing services without discrimination based upon age, sex, race, color, ethnicity, religion, gender, disability, ancestry, national origin, marital status, familial status, genetic information, gender identity or expression, sexual orientation, culture, language, socioeconomic status, domestic or sexual violence victim status, source of income, or source of payment.

You have the right to appropriate assessment and management of pain.

You have the right, in collaboration with your physician or health care provider, to make decisions involving your health care. This right applies to the family and/or guardian of neonates, children, and adolescents. Decisions may include the right to refuse drugs, treatment, or procedure offered by the hospital, to the extent permitted by law. Your health care provider will inform you of the medical consequences of the refusal of such drugs, treatment, or procedure.

While this health care facility recognizes your right to participate in your care and treatment to the fullest extent possible, there are circumstances under which you may be unable to do so. In these situations for example, if you have been adjudicated incompetent in accordance with the law, are found by your physician to be medically incapable of understanding the proposed treatment or procedure, are unable to communicate your wishes regarding treatment, or are an un-emancipated minor) your rights are to be exercised to the extent permitted by law, by your designated representative or other legally authorized person.

You have the right to make decisions regarding the withholding of resuscitative services or the foregoing of or the withdrawal of life-sustaining treatment within the limits of the law and the policies of this institution.

You have the right to receive care in a safe setting, and be free from all forms of abuse and harassment.

You have the right to be free from restraint and seclusion not medically necessary or used as a means of coercion, discipline, convenience or retaliation by staff.

You have the right to have your medical record read only by individuals directly involved in your care, by individuals monitoring the quality of care, or by individuals authorized by law or regulation.

You have the right to receive written notice that explains how your personal health information will be used and shared with other health care professionals included in your care. You or your designated/legally authorized representative, may, upon request, have
You have the right to decide whether you want visitors or not during your stay here. You may designate those persons who can visit you during your stay. These individuals do not need to be legally related to you. They may include, for example, a spouse, domestic partner, including a same sex partner, another family member, or a friend. The hospital will not restrict, limit, or deny any approved visitor on the basis of race, color, national origin, religion, sex, gender identity or expression, sexual orientation or disability. The hospital may need to limit or restrict visitors to better care for you or other patients. You have the right to be made aware of any such clinical restrictions or limitations.

You have the right to designate a family member, friend, or other individual as a support person during the course of your stay or during a visit to a physician or other ambulatory care treatment.

You have the right to give or withhold informed consent to produce or use recordings, films or other images of you for purposes other than your own care, treatment or patient identification.

You have the right, without recrimination, to voice complaints regarding your care, to have those complaints reviewed, and, when possible, resolved.

FOR FURTHER INFORMATION
If you have questions or problems concerning your healthcare please speak with your physician, nurse or other hospital or ambulatory practice representative before you leave the clinical site.

You may also direct questions, concerns regarding your healthcare, or questions about the Patient Bill of Rights and Responsibilities to the Patient and Guest Relations office located at the Hospital of the University of Pennsylvania, 1 Silverstein, 3400 Spruce Street, Philadelphia, PA 19104 or by telephone at: (215) 662-2575.

You may direct questions or concerns regarding the Health Insurance Portability and Accountability Act (HIPAA) / privacy related matters to the UPHS Privacy Office:

Electronic Mail: privacy@uphs.upenn.edu
Telephone: 215.573.4492

You may direct questions or concerns regarding accessibility or accommodations to the University of Pennsylvania Health System Disability Access Officer at (215) 615-4317.

If you or a family member thinks that a complaint or grievance remains unresolved through the hospital resolution process, or regardless of whether you have used the hospital's grievance process, you have the right to contact the following organizations about any concerns which may include but are not limited to: quality of care; patient safety; life safety; premature discharge; and/or safety of the environment.

The Pennsylvania Department of Health Division of Acute and Ambulatory Care
P.O. Box 90
Harrisburg, PA 17120
800.254.5164

The Centers for Medicare and Medicaid Services 800.633.4227

The Joint Commission
Office of Quality and Patient Safety
One Renaissance Boulevard
Oakbrook Terrace, Illinois 60181
Fax: 630.792.5636
E-mail: patientsafetyreport@jointcommission.org

For concerns related to disability accessibility or accommodations, contact:

The United States Department of Justice
950 Pennsylvania Avenue, NW
Civil Rights Division, Disability Rights Section – 1425 NYAV
Washington, D.C., 20530
Facsimile: 202.307.1197
E-mail: ADA.complaint@usdoj.gov

For concerns related to discrimination or any civil rights concerns, contact:

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:

Centralized Case Management Operations
U.S. Department of Health and Human Services
200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201
Telephone: 1-800-868-1019, 800-537-7697 (TDD)
Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html
In order to facilitate your care and the efforts of the health care personnel, you are expected to help the physicians, nurses, and other health care personnel in their efforts to care for you by following their instructions and medical orders.

Duly authorized members of your family or designated/legally authorized representative are expected to be available to UPHS personnel for review of your treatment in the event you are unable to properly communicate with your health caregivers.

It is understood that you assume the financial responsibility of paying for all services rendered. You are required to abide by the terms of this Notice (“Notice”) so long as it remains in effect. We reserve the right to change the terms of this Notice as necessary and to make the new notice effective for all PHI. You may receive a copy of any revised notice at any of our hospitals, doctors’ offices, or ambulatory care facilities.

The terms of this Notice apply to Penn Medicine, consisting of the Perelman School of Medicine at the University of Pennsylvania and the University of Pennsylvania Health System, and its subsidiaries and affiliates, including but not limited to the Hospital of the University of Pennsylvania, Pennsylvania Hospital, Penn Presbyterian Medical Center, Chester County Hospital, Lancaster General Hospital, the Clinical Practices of the University of Pennsylvania (“CPUP”), Clinical Care Associates (“CCA”), Penn Home Care and Hospice, Good Shepherd Penn Partners, Clinical Health Care Associates of New Jersey, and the physicians, licensed professionals, employees, volunteers, and trainees providing treatment and/or procedures.

Our Facility Directory. We use information to maintain an inpatient directory listing your name, room number, general condition and, if you wish, your religious affiliation. Unless you choose to have your information excluded from this directory, the information, excluding your religious affiliation, may also be provided to members of the clergy, even if they don’t ask for you by name. If you wish to have your information excluded from this directory, please contact your patient services associate.

Uses and Disclosures of Your PHI

The following categories describe the ways we may use or disclose your PHI without your consent or authorization. For each category, we will give you illustrative examples.

Uses and Disclosures for Treatment, Payment, and Health Care Operations.

Treatment. We use and disclose your PHI as necessary for your treatment. For instance, doctors, nurses, and other professionals involved in your care – within and outside of Penn Medicine – use information in your medical record that may include procedures, medications, tests, etc. to plan a course of treatment for you.

Payment. We use and disclose your PHI as necessary for payment purposes. For instance, we may forward information regarding your medical procedures and treatment to your insurance company to arrange payment for the services provided to you. Also, we may use your information to prepare a bill to send you or to the person responsible for your payment.

Health Care Operations. We use and disclose your PHI for health care operations. This is necessary to operate Penn Medicine, including by ensuring that our patients receive high quality care and that our health care professionals receive superior training. For example, we may use your PHI to conduct an evaluation of the treatment and services we provide, or to review the performance of our staff. Your health information may also be disclosed to doctors, nurses, medical students, residents, fellows, and others for education and training purposes.

The sharing of your PHI for treatment, payment, and health care operations may happen electronically. Electronic communications enable fast, secure access to your information for those participating in and coordinating your care to improve the overall quality of your health and prevent delays in treatment.

Use of your PHI for Marketing Purposes. We may use or disclose your PHI to contact you about health care products or services that may be of benefit to you if you have not expressly objected. If you do not wish to be contacted in this manner, please notify our patient services associate.

Personnel Involved In Your Care. Unless you object, we may, in our professional judgment, disclose to a member of your family, a close friend, or anyone you identify your PHI, to facilitate that person’s involvement in your care or payment for the care you receive. We may use or disclose your PHI in these situations to help in notifying a family member, personal representative, or any person responsible for your care of your location, condition, or death. In the event you are involved in a disaster, we may also disclose limited PHI to a public or private entity that is authorized to assist in disaster relief efforts: to locate a family member or other persons who may be involved in some aspect of caring for you.

Implementation. You have the right to request a revision of any PHI we have about you. We will consider your request, but are not required to make the revision if we disagree. If we deny your request, you have the right to request that we include a statement in your medical record describing the request and our denial. We will comply with your request in a reasonable time.

Notice of Privacy Practices: Our entire Penn Medicine team thanks you for choosing to receive your care here. It is our pleasure to serve and care for you.

– THE LEADERSHIP TEAM at the Hospital of the University of Pennsylvania

STATEMENT OF PATIENT’S RESPONSIBILITIES

To foster our ability to provide safe, quality care you should act in accordance with UPHS policies, rules, and regulations and assume responsibility for the following:

This health care facility expects that you or your designated/legally authorized representative will provide accurate and complete information about present complaints, past illnesses, hospitalizations, medications, advance directives, and other matters relating to your health history or care in order for you to receive effective medical treatment.

In addition, you are responsible for reporting whether you clearly understand the planned course of action and what is expected of you.

It is expected that you will cooperate with all your hospital personnel and ask questions if directions and/or procedures are not clearly understood.

You are expected to be considerate of other patients and health care personnel, to assist in the control of noise and visitors in your room, and to observe the non-smoking policy of this institution. You are also expected to be respectful of the property of other persons and the property of the University of Pennsylvania Health System. Threats, violence, disruption of patient care or harassment of other patients, visitors or staff will not be tolerated. You are also expected to refrain from conducting any illegal activity on UPHS property. If such activity occurs, UPHS will report it to law enforcement.

We understand that information about you and your health is very personal. Therefore, we strive to protect your privacy as required by law. We will only use and disclose your personal health information (“PHI”) as allowed by law.

We are committed to excellence in the provision of state-of-the-art health care services through the practice of patient care, education, and research. Therefore, as described below, your health information will be used to provide you and may be used to educate health care professionals and for research purposes. We train our staff and work force to be sensitive about privacy and to respect the confidentiality of your PHI.

We are required by law to maintain the privacy of our patients’ PHI and to provide you with notice of our legal duties and privacy practices with respect to your PHI. We are required to abide by the terms of this Notice (“Notice”) so long as it remains in effect. We reserve the right to change the terms of this Notice as necessary and to make the new notice effective for all PHI maintained by us. You may receive a copy of any revised notice at any of our hospitals, doctors’ offices, or ambulatory care facilities.

The terms of this Notice apply to Penn Medicine, consisting of the Perelman School of Medicine at the University of Pennsylvania and the University of Pennsylvania Health System and its subsidiaries and affiliates, including but not limited to the Hospital of the University of Pennsylvania, Pennsylvania Hospital, Penn Presbyterian Medical Center, Chester County Hospital, Lancaster General Hospital, the Clinical Practices of the University of Pennsylvania (“CPUP”), Clinical Care Associates (“CCA”), Penn Home Care and Hospice, Good Shepherd Penn Partners, Clinical Health Care Associates of New Jersey, and the physicians, licensed professionals, employees, volunteers, and trainees providing treatment and/or procedures.

It is our pleasure to serve and care for you.
– THE LEADERSHIP TEAM

HIPAA: Notice of Privacy Practices

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– THE LEADERSHIP TEAM at the Hospital of the University of Pennsylvania

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Fundraising. We may contact you, at times in coordination with your physician, to donate to a fundraising effort on our behalf. If we contact you for fundraising purposes, you have the right to opt-out of receiving any future solicitations.

Appointments and Services. We may use your PHI to remind you about appointments or to follow up on your visit.

Health Products and Services. We may, from time to time, use your PHI to communicate with you about treatment alternatives and other health-related benefits and services that may be of interest to you.

Research. We may use and disclose your PHI, including PHI generated for use in a research study, as permitted by law for research, subject to your explicit authorization and oversight by the University of Pennsylvania Institutional Review Boards (IRBs), committees charged with protecting the privacy rights and safety of human subject research, or a similar committee. In all cases where your specific authorization has not been obtained, your privacy will be protected by confidentiality requirements evaluated by such a committee. For example, the IRB may approve the use of your health information with only limited identifying information to conduct outcomes research to see if a particular procedure is effective. As an academic medical center, Penn Medicine supports research and may contact you to invite you to participate in certain research activities. If you do not wish to be contacted for research purposes, please inform your patient services associate. In such case, we will use reasonable efforts to prevent this research-related outreach. This will not apply to the use of your PHI for research purposes as described above and will not prevent your care providers from discussing research with you.

Business Associates. We may contract with certain outside persons or organizations to perform certain services on our behalf, such as auditing, accounting, legal services, etc. At times it may be necessary for us to provide your PHI to one or more of these outside persons or organizations. In such cases, we require these business associates, and any of their subcontractors, to appropriately safeguard the privacy of your information.

Other Uses and Disclosures. We are permitted or required by law to make certain other uses and disclosures of your PHI without your consent or authorization. Subject to conditions specified by law, we may release your PHI:

• for any purpose required by law;
• for public health activities, such as required reporting of disease, injury, birth and death, and for required public health investigations;
• to certain governmental agencies if we suspect child abuse or neglect, or if we believe you to be a victim of abuse, neglect, or domestic violence;
• to entities regulated by the Food and Drug Administration, if necessary;
• for public health activities, such as required reporting of disease, injury, birth and death, and for required public health investigations;
• to certain governmental agencies if we suspect child abuse or neglect, or if we believe you to be a victim of abuse, neglect, or domestic violence;
• to entities regulated by the Food and Drug Administration, if necessary;

• to your employer when we have provided health care to you at the request of your employer for purposes related to occupational health and safety. In most cases you will receive notice that your PHI is being disclosed to your employer;
• if required by law to a government oversight agency conducting audits, investigations, inspections, and related oversight functions;
• in emergency circumstances, such as to prevent a serious and imminent threat to a person or the public;
• if required to do so by a court or administrative order, subpoena, or discovery request. In most cases you will have notice of such release;
• to law enforcement officials, including for purposes of identifying or locating suspects, fugitives, witnesses, or victims of crime, or for other allowable law enforcement purposes;
• to coroners, medical examiners, and/or funeral directors;
• if necessary, to arrange an organ or tissue donation from you or a transplant plant for you;
• if you are a member of the military for activities set out by certain military command authorities as required by armed forces services. We may also release your PHI, if necessary, for national security, intelligence, or protective services activities; and
• if necessary for purposes related to your workers’ compensation benefits.

Your Authorization. Except as outlined above, we will not use or disclose your PHI for any other purpose unless you have signed a form authorizing the use or disclosure. The form will describe what information will be disclosed, to whom, for what purpose, and when. You have the right to revoke your authorization in writing. This revocation will be effective only to the extent that we have already relied upon it. These situations can include:

• uses and disclosures of psychotherapy notes;
• uses and disclosures of PHI for marketing purposes, including marketing communications paid for by third parties;
• uses and disclosures of PHI specially protected by state and/or Federal law and regulations;
• uses and disclosures for certain research protocols;

Disclosures that constitute a sale of PHI.

Confidentiality of Alcohol and Drug Abuse Patient Records, HIV-Related Information, and Mental Health Records. The confidentiality of alcohol and drug abuse treatment records, HIV-related information, and mental health records maintained by us is specifically protected by state and/or Federal law and regulations. Generally, we may not disclose such information unless you consent in writing, the disclosure is allowed by a court order, or in limited and regulated other circumstances.

Rights to Modify Your PHI. You have the right to request modifications to certain disclosures we have made to health plans, if you believe the information is incorrect or incomplete. If we deny your request, we will provide you with a written explanation of our position. You may have the right to have such denial included in any future disclosures of your PHI to the health plan.

Rights to Request Restrictions. You have the right to request restrictions on disclosures of your PHI for treatment, payment, and health care operations. We are not required to agree to your request unless it does not adversely affect our ability to carry out treatment, payment, or health care operations. If we agree to your restriction request, we will respect your request except as required by law or for purposes of treatment, payment, or health care operations or if certain other limited exceptions. If we agree to your restriction request, we will respect your request except as required by law.

Rights to Request an Accounting of Disclosures. You have the right to request an accounting of certain disclosures made to any health plan, except for disclosures made for purposes of treatment, payment, and health care operations or for certain other limited exceptions. This accounting will include all disclosures made in the six years prior to the date on which the accounting is requested. Requests must be in writing and signed by you or, when applicable, your personal representative. The first accounting in any 12-month period is free; you will be charged a reasonable, cost-based fee for each subsequent accounting you request within a 12-month period. You may obtain the appropriate form from the doctor’s office or entity where you received services.

Restrictions on Use and Disclosure of Your PHI. You have the right to request restrictions on certain disclosures of your PHI for treatment, payment, or health care operations. We are not required to agree to your restriction request, unless otherwise described in this notice, but will attempt to accommodate reasonable requests when appropriate. We retain the right to terminate an agreed to restriction if we believe such termination is appropriate. In the event that we have terminated an agreed upon restriction, we will notify you of such termination. The appropriate form can be obtained from the doctor’s office or entity where you received services and must be signed by you or, when applicable, your personal representative.

Restrictions on Uses and Disclosures of Your PHI. You have the right to request a restriction on certain disclosures of your PHI to your health plan. We are required to honor such requests for restrictions only when you or someone on your behalf either accepts or does not opt-out of your health plan, pays for the health care item(s) or service(s) in full. Such requests must be made in writing and signed by you and, when applicable, your personal representative. You may obtain the appropriate form from the doctor’s office or entity where you received services.

Confidential Communications. You have the right to request communications regarding your PHI from us by alternative means or at alternative locations and we will accommodate reasonable requests by you. You, or when applicable, your personal representative must request such confidential communication in writing to each department to which you would like the request to apply. You may obtain the appropriate forms from the doctor’s office or entity where you received services.

Breach Notification. We are required to notify you in writing of any breach of your unsecured PHI without unreasonable delay, but in any event, no later than 60 days after we discover the breach.

Paper Copy of Notice. As a patient, you have the right to obtain a paper copy of this Notice. You can also find this Notice on our website at: http://www.pennmedicine.org/health/system/about/organization/policies/notice-of-privacy-practices.html.

Additional Information

Complaints. If you believe your privacy rights have been violated, you may file a complaint in writing to the doctor’s office, ambulatory care facility, or Guest Services department of the hospital/facility you visited. You may also file a complaint with the Secretary of the U.S. Department of Health and Human Services in Washington, DC. All complaints must be made in writing and in no way will affect the quality of care you receive from us.

For Further Information. If you have questions or need further assistance regarding this Notice, you may contact the Penn Medicine Privacy Office in the Office of Audit, Compliance and Privacy by telephone at (215) 573-4492 or by e-mail at privacy@uphs.upenn.edu.

Effective Date

This Notice is effective June 27, 2016.
We value your presence and participation in the care of your loved one. To ensure a safe, collaborative, and comfortable experience, please review our following guidelines.

RESPECT
Please be respectful and courteous at all times. The Hospital of the University of Pennsylvania supports a culture where people and property are always treated with respect. To promote a quiet and healing environment, please keep noise levels to a minimum.

VISITATION
Visiting hours are from 6:00am until 10:00pm.

SUPPORT PERSON(S)
Our patients are encouraged to identify a person(s) who can provide support and may choose to stay in the hospital overnight. If your loved one has asked you to be a support person, we will provide a badge allowing you to be in the hospital outside of normal visiting hours. Please keep the badge on at all times. You will be required to show the badge to security upon re-entry to the hospital if outside of visiting hours.

The number of visitors/family members/support person(s) permitted at one time vary by unit based on space and the ability to provide a safe environment. Please see your unit’s specific guidelines.

CHILDREN
Children are welcome to visit, but should be supervised by an adult (other than the patient) at all times. Note: Some clinical settings may limit child visitation. Please see your unit’s specific guidelines to learn more about child visitation.

USE OF COMMON AREAS
Our waiting rooms are shared spaces for all families and guests. Please be courteous and respectful to others sharing the space. Please limit personal belongings which take up space that could be used by other families. Please use the provided waste receptacles for any trash prior to leaving the waiting area.

CLEAN HANDS SAVE LIVES — PREVENTING INFECTION
Please clean your hands prior to entering/exiting the patient room using the handwashing stations or hand sanitation dispensers located throughout the unit. Please review and adhere to any posted signs on the patients’ door regarding specific isolation precautions. If you are sick, do not visit.

Tobacco Use
Penn Medicine is a smoke-free environment. Do not smoke or use tobacco products, including electronic cigarettes and vapors, anywhere except in designated smoking areas outside of the hospital.

Banned Items
Alcohol, drugs, firearms, and weapons (including pepper spray) are not permitted in any Penn Medicine facility. Any individual carrying a firearm and/or weapon must surrender it to the Security Department upon entering the facility.

Photography/Videography
Photographing and/or videotaping or recording daily operations of the healthcare environment by patients and visitors is prohibited. Additionally, you may not photograph, videotape, or record audio of any staff member without their permission.

Threatening/Disruptive Behavior
Any disruptive behavior that can compromise the safety of our patients, visitors, or staff may result in the restriction of visitation. Verbal abuse and/or physical violence directed toward anyone at the hospital will not be tolerated and will result in immediate restriction of visitation rights.

Thank you for your cooperation in providing a healing and respectful environment for all.
If you believe that the Hospital of the University of Pennsylvania has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with a Patient and Guest Relations Coordinator at:

1 Silverstein
3400 Spruce Street
Philadelphia, PA 19104
215.662.2575

You may file a grievance in person, mail, electronic mail, and/or telephone. If you need help filing a grievance, a Patient and Guest Relations Coordinator is available to help you.

You may 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:

200 Independence Avenue, SW
Room 5009, HHH Building
Washington, D.C. 20201
800.368.1019, 800.537.7697 (TTD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html
PATIENT SURVEY
Hospital of the University of Pennsylvania staff is interested in patients’ feedback about their stay. When patients share their experiences, HUP staff learns what was helpful and can identify opportunities for improvement. Some patients will receive a formal survey by mail—HUP staff asks that they complete the survey and return as indicated.
Any patients not receiving a survey may send feedback by mail to:
Hospital of the University of Pennsylvania
Patient and Guest Relations
South Pavilion, 2nd Floor
Perelman Center
3400 Civic Center Boulevard
Philadelphia, Pennsylvania 19104

VOLUNTEER
The volunteers at the Hospital of the University of Pennsylvania are an integral part of life in the hospital. These members of the health care team visit patients, as well as staff the Emergency Department, Welcome Center, Surgical Waiting Lounge and various office areas. Volunteers are always welcome to give of their time during the weekday and evenings. For more information, please call 215.662.2576.

PHILANTHROPY — GIVING TO PENN
Every day, the physicians, nurses and staff at Penn Medicine work tirelessly to improve the health of every patient. The costs of this work can seem staggering, and they are not covered by billing, insurance and government funds alone. From the research that leads to cures and compassionate care that promotes healing, to the technology that saves lives—donations from patients and families make critical advances possible.
Each gift, large or small, to the Penn Medicine Friends Fund makes a difference. Making a gift is also a wonderful way to honor a physician, nurse, friend or family member.
To learn more or make a gift:
VISIT PennMedicine.org/Giving
E-MAIL UPHSGift@upenn.edu
CALL 215.898.0578

myPENN MEDICINE
Through myPennMedicine, the region’s first patient-accessible, online health records, Penn patients have easy and secure online access to the information they need: refills, test results, appointments, referrals and more.
Learn more at myPennMedicine.org.