

§ 35.1

Subpart C—Disposition of Articles Produced by Patients

- 35.31 Retention by patients.
- 35.32 Board of appraisers.
- 35.33 Sale; prices; deposit of proceeds.
- 35.34 Resale.
- 35.35 Unsalable articles.

Subpart D—Disposal of Money and Effects of Deceased Patients

- 35.41 Inventory.
- 35.42 Notice upon death.
- 35.43 Delivery only upon filing claim; forms; procedure.
- 35.44 Delivery to legal representative; to other claimants if value is \$1,000 or less.
- 35.45 Disposition of effects; exceptions.
- 35.46 Conflicting claims.
- 35.47 Disposition of Government checks.
- 35.48 Deposit of unclaimed money; sale of unclaimed effects and deposit of proceeds.
- 35.49 Sale of unclaimed effects; procedures.
- 35.50 Disposition of unsold effects.
- 35.51 Manner of delivery; costs, receipts.
- 35.52 Delivery of possession only; title unaffected.

Subpart E—Contributions for the Benefit of Patients

- 35.61 Applicability.
- 35.62 Acceptance of contributions.
- 35.63 Report of and accounting for contributions.
- 35.64 Donors.
- 35.65 Acceptable personal property.
- 35.66 Expenditure of cash contributions.

AUTHORITY: Sec. 215, 58 Stat. 690, as amended; 42 U.S.C. 216, sec. 321, 53 Stat. 695, as amended; 42 U.S.C. 248, unless otherwise noted.

SOURCE: 21 FR 9830, Dec. 12, 1956, unless otherwise noted.

Subpart A—General

§ 35.1 Hospital and station rules.

The officer in charge of a station or hospital of the Service is authorized to adopt such rules and issue such instructions, not inconsistent with the regulations in this part and other provisions of law, as he deems necessary for the efficient operation of the station or hospital and for the proper and humane care and treatment of all patients therein. All general rules governing the conduct and privileges of patients, and of members of the public while on the premises, shall be posted in prominent places.

42 CFR Ch. I (10–1–09 Edition)

§ 35.2 Compliance with hospital rules.

All patients and visitors in stations and hospitals of the Service are expected to comply with the rules and instructions issued under the authority of the officer in charge.

§ 35.3 Noncompliance; deprivation of privileges.

Any patient who wilfully fails or refuses to comply with rules or instructions of a hospital or station or with regulations of the Service, may, by the direction of the officer in charge, be deprived of recreational or other privileges accorded patients. Any visitor who wilfully fails or refuses to comply with any such rules, instructions, or regulations may, by direction of the officer in charge, be denied visiting privileges.

§ 35.4 Noncompliance; discharge or transfer.

(a) If the officer in charge finds, upon investigation, that a patient other than a leprosy patient, by willful and persistent failure or refusal to comply with such rules, instructions, or regulations is seriously impeding the course of his own care and treatment, or that of other patients, he may (1) discharge the patient, or (2) if the patient is not a voluntary patient, arrange for his transfer to the custody of the authority responsible for his admission to the station or hospital. No patient shall be discharged or transferred on account of noncompliance if to do so would seriously endanger his life or health, nor shall any patient be discharged if his failure to comply is due, in the opinion of the officer in charge, to a mental disease or disorder.

(b) If the discharge or transfer of a patient is likely to endanger the health of persons other than the patient or officers or employees of the station or hospital, the officer in charge shall give advance notice to appropriate State, county, or municipal authorities of the discharge or transfer.

§ 35.5 Entitlement to care after discharge or transfer by reason of noncompliance.

No person otherwise entitled to care, treatment, or hospitalization at Service facilities, or in other facilities at

Public Health Service, HHS

§ 35.11

the expense of the Service, shall be denied such care or treatment by reason of his prior discharge or transfer from any such facility under the provisions of § 35.4.

§ 35.6 Admissions; determination of eligibility for care.

Except as may otherwise be provided for specific classes of patients by the regulations of this chapter, the officer in charge of the station or hospital to which application is made is authorized to determine the eligibility of applicants, as beneficiaries of the Service, for care and for treatment. Such determinations shall be subject to review by the chief of the division of the Service responsible for administration of the station or hospital concerned upon referral made by the officer in charge in doubtful cases or upon appeal made by an applicant who has been denied care or treatment.

§ 35.7 Admissions; designation of person to be notified.

Every in-patient, at the time of admission to the hospital or station or as soon thereafter as practicable, shall be requested to designate a person or persons to be notified in case of emergency.

§ 35.8 Safekeeping of money and effects; withdrawals.

(a) A place for the safekeeping of money and effects of patients shall be provided at each station or hospital, and an itemized receipt therefor shall be furnished to the patient and to any other person who places money or effects therein for the benefit of the patient.

(b) Money and effects may be withdrawn only by or on behalf of the patient, by his legally appointed representative authorized to receive or dispose of his property (including the money and effects in the custody of the station or hospital), or by a person who is authorized, under the law of the State in which the station or hospital is located, to receive or dispose of the patient's money and effects. In any case in which the officer in charge has had actual notice of the appointment of a legal representative, withdrawals may be made only by such representa-

tive or in accordance with his written directions. No delivery shall be made under this paragraph unless (1) the person receiving the money or effects shall sign an itemized receipt therefor, or (2) the delivery is witnessed by two persons. The provisions of this paragraph do not prohibit withdrawals made necessary by the provisions of this part for the disposition of money and effects left by patients on death or on departure from the station or hospital, or by the provisions of § 35.10.

§ 35.9 Disposition of money and effects left by other than deceased patients.

Money and effects left on the premises by a patient shall be forwarded promptly to him. If because his whereabouts are unknown his money and effects cannot be delivered to him within 120 days after his departure, his money shall be deposited into the Treasury and credited to the account entitled "Money and Effects of Former Patients (PHS (T) name of patient)," and his effects shall be held for him for six months and then sold in accordance with § 35.49, and the proceeds deposited into the Treasury and credited to the above account.

§ 35.10 Destruction of effects dangerous to health.

The officer in charge shall cause to be destroyed effects brought into or received in the station or hospital area by patients which, in the judgement of such officer, are dangerous as a source of disease to the health or life of patients or personnel of the station or hospital or visitors therein and cannot otherwise be safely disposed of or rendered harmless by disinfection or other means. The destruction of effects shall be witnessed by at least one officer or employee designated for that purpose by the officer in charge, and appropriate records of the destruction shall be maintained.

§ 35.11 Clinical records; confidential.

A complete clinical record shall be maintained for each patient admitted to a station or hospital of the Service. Such records shall be confidential and shall not be disclosed except as may be