

## **Patient Rights and Responsibilities**

1. To be informed of these rights at the time of admission, as evidenced by the patient's written acknowledgement, or by documentation by staff in the medical record, that the patient, or the patient's representative or surrogate, was offered a copy of these rights and given a written or verbal explanation of them, in terms the patient could understand. The facility shall notify patients of any rules and regulations it has adopted governing patient conduct in the facility. The patient has the right to participate in planning his or her care and treatment. If a patient is adjudged incompetent under applicable state laws by a court of proper jurisdiction, the rights of the patient are exercised by the person appointed under state law to act on the patient's behalf. If a state court has not adjudged a patient incompetent, any legal representative or surrogate designated by the patient in accordance with state law may exercise the patient's rights to the extent allowed by state law.
2. The patient or the patient's representative or surrogate has the right to be informed of services available in the facility, and to be given the name and professional status of his attending practitioner and of all other practitioners participating in his care. The patient or the patient's representative or surrogate is entitled to be given an explanation of his/her bill, and facility fees and charges, including payment, fee, deposit and refund policy, and any charges for services not covered by sources of third-party payment or the facility's basic rate.
3. The patient has the right to safe care; to be treated with courtesy, consideration, respect and recognition of the patient's dignity, individuality and right to privacy, including but not limited to auditory and visual privacy. The patient's privacy shall also be respected when facility personnel are discussing the patient.
4. The patient has the right to have records pertaining to medical care treated as confidential. Information in the patient's medical record shall not be released to anyone outside the facility without the patient's approval, unless another health care facility to which the patient was transferred requires the information, or unless the release of the information is required by law, a third-party payment contract, or peer review, or unless the information is needed by the State of NJ Dept. of Health for statutorily authorized purposes. The facility may release data for studies containing aggregated statistics when the patient's identity is masked.
5. Patients have the right to know what facility rules and regulations apply to their conduct as a patient.
6. Patients have the right to expect emergency procedures to begin without unnecessary delay.
7. The patient has the right to good quality care and high professional standards that are continually maintained and reviewed, and to expect and receive appropriate assessment, management and treatment of pain as an integral component of that person's care in accordance with N.J.A.C. 8:43E-6, including education for the patient and the patient's significant others regarding pain and symptom management.
8. The patient or the patient's representative or surrogate has the right to full information in layman's terms, concerning his/her diagnosis, treatment or procedure, and the expected outcome before it is performed, including information about alternative treatments and possible complications. Except for emergencies, the practitioners shall obtain informed consent prior to the procedure. When it is not medically advisable to give the information to the patient, it will be given on his behalf to the patient's representative or surrogate.
9. A patient, or if the patient is unable to give informed consent, the patient's representative or surrogate, has the right to be advised when practitioner is considering the patient as part of a medical care research or donor program. The patient or responsible person shall give informed consent prior to actual participation in the program. A patient, or responsible person, may refuse to continue in a program to which he has previously given informed consent. The patient has the right to refuse drugs or participate in investigation of drugs, devices or procedures, and shall be informed of the medical consequences of refusal of drugs or procedures.
10. A patient has the right to medical and nursing services, without discrimination or reprisal based upon age, race, color, religion, national origin, sex, sexual orientation, gender identity, sex stereotypes, handicap, source of payment, or disability, including the need to be accompanied by a service animal.
11. The patient has a right to voice grievances regarding treatment or care that is, or fails to be, furnished, or to recommend changes in policies and services to facility personnel, the governing authority, and/or outside representatives of the patient's choice, either individually or as a group, and to be free from restraint, interference, coercion, discrimination or reprisal.

12. A patient who does not speak English shall not be the subject of discrimination on the basis of language, limited English proficiency, or cultural or linguistic characteristics, and shall have access to an interpreter.
13. The facility shall provide the patient, or the patient's representative or surrogate, upon request, access to the information contained in his medical records, unless access is specifically restricted by the attending practitioner for medical reasons.
14. The patient has the right to expect good management techniques to be implemented within this surgery center. These techniques shall make effective use of the time of the patient and avoid the personal discomfort of the patient.
15. If an emergency occurs and the patient is transferred to another facility, the responsible person shall be notified. The hospital to which the patient is to be transferred shall be notified of the patient's transfer.
16. The patient the patient's representative or surrogate has the right to expect that the surgery center will provide information for continuing health care requirements following discharge and the means for meeting them.
17. The patient has the right to obtain information as to any relationship of the facility to other health care and educational institutions insofar as his/her care is concerned. The patient has the right to information about any professional or ownership relationships among individuals, by name, who are treating him/her.
18. The patient has the right to make recommendations or lodge a complaint about any aspect of care. The patient may make a complaint to the Center's Administrator, Joyce Kozacik, RN, at (973) 325-6716, or to the Medical Director, Douglas Grayson, MD at (973) 325-6716. The patient may also file a complaint with the NJ Department of Health at their Complaints Hotline, (800) 792-9770, or on line at [www.doh.state.nj.us/fc](http://www.doh.state.nj.us/fc); or with the Office of the Medicare Beneficiary Ombudsman, [www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html](http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html); or with the Accreditation Association for Ambulatory Health Care (AAAHC) at (847) 853-6060.

### **Statement of Patient Responsibilities**

1. The patient is responsible for informing the surgery center staff of any changes in their health status that could affect their treatment.
2. The patient is responsible for adhering to the prescribed treatment plan and/or advising the surgery center staff of any intention/desire not to adhere to the prescribed treatment plan.
3. The patient is responsible for asking questions and seeking clarification regarding areas of concern.
4. The patient is responsible for completing health status questions requested by the facility. The patient will supply current and accurate information about allergies, and a complete list of medications and dosages.
5. The patient is responsible for acting in a considerate and respectful manner with health center staff.
6. The patient is responsible for informing the facility of the existence of an advance directive, if the directive would influence care decisions
7. The patient is responsible for keeping scheduled appointments. Patients are responsible to ensure that they are accompanied by a responsible adult at discharge, unless exempted by the surgeon, who will accompany the patient from this facility, and who will stay with the patient for 24 hours after surgery if required by the patient's physician.
8. The patient is responsible for notifying the surgery center if they are unable to keep an appointment.
9. The patient is responsible for reading information provided by health center staff, following the instructions contained in the written materials, and completing quality of care questionnaires.
10. The patient is responsible for providing complete and accurate insurance verification information on all possible insurance payers, and when deductibles and co-pay amounts are due, for paying those fees and charges associated with surgery center services. Self-pay patients are responsible for payments as agreed upon before surgery.