

Patient Rights and Responsibilities

Essex Specialized Surgical Institute, (the “Facility”)

1. The patient has a right to be informed of these rights at the time of admission, as evidenced by the patient's written acknowledgement, or by documentation by Facility 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.
2. The patient has the right to participate in planning his or her care and treatment, and to refuse medication and treatment. Such refusal shall be documented in the patient’s medical record. 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.
3. 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 or her attending physician and of all other practitioners participating in his or her care. The patient or the patient's representative or surrogate is entitled to be given an explanation of his or 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.
4. 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.
5. 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 regulatory authorities for lawfully authorized purposes. The Facility may release data for studies containing aggregated statistics when the patient's identity is masked.
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 applicable state regulations, including education for the patient and the patient’s significant others regarding pain and symptom management.
8. The patient has a right to participate in his or her own health care decisions and to make advance directives or to execute power of attorney. The Facility shall provide patients with a written copy of their policies on advance directives and shall document in a prominent part of the patient’s medical record whether or not the patient has executed an advance directive.
9. The patient or the patient's representative or surrogate has the right to full information in layman’s terms, concerning his or 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. These instances along with the reason for not informing the patient directly shall be documented in patient’s medical record.
10. 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 his or her treating physician 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 /she 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.

11. The Facility complies with Federal civil rights laws, and the patient has the right to medical 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. The Facility does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.
12. The patient has the right to be free from mental and physical abuse, free from exploitation, and free from use of restraints unless they are authorized by a physician for a limited period of time to protect the patient or others from injury. Drugs and other medications shall not be used for discipline of patients or for convenience of Facility personnel.
13. The patient has the right to not be required to perform work for Facility unless the work is part of the patient's treatment and is performed voluntarily by the patient. Such work shall be in accordance with local, State, and Federal laws and rules.
14. 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.
15. 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 a qualified medical interpreter. If a patient is in need of language assistance, services are available free of charge.
16. The Facility shall provide the patient, or the patient's representative or surrogate, upon request, access to the information contained in his or her medical records.
17. 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.
18. If an emergency occurs and the patient is transferred to another facility (such as a hospital), the responsible person shall be notified. The hospital to which the patient is to be transferred shall be notified of the patient's transfer.
19. 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.
20. 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 or 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.
21. The patient has the right to be informed if the facility has authorized other health care and educational institutions to participate in the patient's treatment. The patient also shall have a right to know the identity and function of these institutions, and to refuse to allow their participation in the patient's treatment.
22. The patient has the right to exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, or attendance at religious services, shall be imposed on any patient.

	New Jersey
Center Admin	Claudia Capalbo, RN, at (973) 325-6716
Medical Director	Douglas Grayson, MD at (973) 325-6716
State Department of Health	NJ Department of Health at their <u>Complaints Hotline</u> : (800) 792-9770, or online at www.doh.state.nj.us/fc
State Other	<u>Office of Acute Care Assessment and Survey</u> : P.O. Box 358, 25 S. Stockton Street, 2 nd Floor Trenton, NJ 08608-1832 (800) 792-9770, select option #2 _____ <u>Office of the Ombudsman for the Institutionalized Elderly</u> : NJ Long-Term Care Ombudsman P.O. Box 852 Trenton, NJ 08625-0852 (877) 582-6995 ombudsman@ltco.nj.gov
CMS	<u>Office of the Medicare Beneficiary Ombudsman</u> : www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html 800-MEDICARE or 800-633-4227
AAACH	<u>Accreditation Association for Ambulatory Health Care (AAAH)</u> : 5250 Old Orchard Road, Suite 200 Skokie, IL 60077 (847) 853-6060 info@aaahc.org

1. The patient is responsible for informing Facility staff of any changes in their health status that could affect his or her treatment.
2. The patient is responsible for adhering to the prescribed treatment plan and/or advising Facility 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; including over-the-counter products and dietary supplements
5. The patient is responsible for acting in a considerate and respectful manner with Facility 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 at least 24 hours after surgery if required by the patient's physician.
8. The patient is responsible for notifying the Facility, as well his or her physician, if he/she is unable to keep an appointment.
9. The patient is responsible for reading information provided by Facility 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 Facility services. Self-pay patients are responsible for payments as agreed upon before surgery.

DISCLOSURE OF PHYSICIAN FINANCIAL INTERESTS/OWNERSHIP IN THE FACILITY

Under Federal and state law, the patient has a right to be notified in writing prior to the surgical procedure of any physicians with a direct or indirect financial interest or ownership in the Facility. Please be advised that the following physicians may have an ownership interest in the Facility:

Douglas Grayson, M.D
Christopher Quinn, O.D.
Michael Veliky, O.D.
Burton Wisotsky, M.D.
Michael Aronsky, M.D.
George Pronesti, M.D.
Anthony Zacchei, M.D.
Carol Hoffman, M.D.
Jesse Richman, M.D.
James Lewis, M.D.
Aaron Cohn, M.D.
David Ludwick, MD
Shawn Weigel, DO
Theodore Perl, MD
Eli Moses, MD

ESSI Specific in addition to above:

Frank Arturi, MD
John Boozan, MD
Jonathan Ditkoff, MD
Vatsal Doshi, MD
Joshua Gould, MD

FTL 111779604v4

Patrick Higgins, MD
Richard Levine, MD
Charles Rassier, MD
Arthur Tutela, MD
Daniel Stegman, MD (NJ Sight, LLC)

Patient/ Patient's Representative

Date