

PATIENT RIGHTS

As a patient of the Center, you have the following rights (under state law and regulations).

MEDICAL CARE

To receive the care and health services that the center is required by law to provide

To ensure patients and staff are informed of the Patients' Rights

To exercise your rights without being subject discrimination or reprisal

To have the right to personal privacy and to receive care in a safe setting

To change providers

To receive an understandable explanation from your physician of your complete medical condition, recommended treatment, expected results, risks involved and reasonable medical alternative. **If** your physician believes that some of this information would be detrimental to your health or beyond your ability to understand, the explanation must be given to your next of kin.

To give informed written consent prior to the start of specified, non-emergency medical procedures or treatments. Your physician should explain to you, in words you understand, specific details about the recommended procedure or treatment, any risks involved, time required for recovery, and any reasonable medical alternatives and you are to make the decision based on that information.

To refuse medication and treatment after possible consequences of this decision have been explained clearly to you, unless the situation is life threatening or the procedure is required by law.

To be included in experimental research only if you give informed, written consent. You have the right to refuse to participate.

To change providers

COMMUNICATION AND INFORMATION

To be informed of the names, credentials and functions of all health care professionals providing you with personal care

To receive, as soon as possible, the services of a translator or interpreter if you need one to help you communicate with the Center's health care personnel.

To be informed of the names and functions of any outside health care and educational institutions involved in your treatment. You may refuse to allow their participation.

To receive, upon request, the Center's written policies and procedures regarding life-saving methods and the use or withdrawal of life support mechanisms and the use of or information regarding an Advanced Directive.

To be advised in writing of the Center's rules regarding the conduct of patients and visitors.

To receive a summary of your patient rights that includes the name and phone number of the Center staff member to whom you can ask questions or complain about a possible violation of your rights

To be informed about advance directives.

MEDICAL RECORDS

To have prompt access to the information in your medical record. **If** your physician feels that this access is detrimental to your health, your next of kin or guardian has the right to see your record.

To obtain a copy of your medical record, at a reasonable fee, within 30 days after a written request to the Center. To expect that your medical record will be held in strict confidentiality and released only with your permission as per State and Federal laws.

COST OF AMBULATORY SURGICAL CENTER CARE **To**

To be notified if your physician has a financial interest in the Center

To receive a copy of the Center's payment rates. **If** you request an itemized bill, the Center must provide one, and explain any questions you may have. You have the right to appeal any charges.

To be informed by the Center if part or your entire bill will not be covered by insurance. The Center is required to help you obtain any public assistance and private health care benefits to which you may be entitled.

DISCHARGE PLANNING

To receive information and assistance from your attending physician and other health care providers if you need to arrange for continuing health care after your discharge from the Center.

TRANSFERS

To be transferred to another facility only when you or your family has made the request, or in instances where the Center is unable to provide you with the care you need.

To receive an advanced explanation from a physician of the reasons for your transfer and possible alternatives

PERSONAL NEEDS

To be treated with courtesy, consideration, and respect for your dignity and individuality.

To have access to storage space for private use. The Center must also have a system to safeguard your personal property.

PATIENT RIGHTS CONTINUED

FREEDOM FROM ABUSE AND RESTRAINTS

To be free from physical and mental abuse and pain.

To be free from restraints unless they are authorized by a physician for a limited period of time to protect the safety of you or others. Drugs shall not be used for discipline or for the convenience of personnel.

PRIVACY AND CONFIDENTIALITY

To have physical privacy during medical treatment and personal hygiene functions unless you need assistance.

To confidential treatment of information about you. Information in your records will not be released to anyone outside the Center without your approval unless it is required by law.

LEGAL RIGHTS

To treatment and medical services without discrimination based on age, religion, national origin, sex, sexual preference, handicap, or diagnosis.

To exercise all your constitutional, civil, and legal rights to voice grievances and or complaints.

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 the state law to act on the patient's behalf.

If a state court has not a judge to patient 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.

The patient or as appropriate, the patient's representative is provided written information concerning the ASC's policies on advanced directives, including a description of applicable state health and safety laws and if requested, official state advance directive forms.

The patient, or as appropriate, the patient's representative is informed of the patients right to make an informed decision regarding the patients care.

Documentation in a prominent part of the patient's current medical record will indicate whether the individual has executed an advanced directive

As a patient, you are responsible for:

1. Providing physicians and Center personnel with accurate information related to your condition and care.
2. Providing information on any current medication including over the counter, prescription, herbal, and dietary substances including dosages.
3. Following your treatment plans. Patients are responsible for medical consequences which result from refusing treatment or not following instructions of physicians and the Center's personnel.
3. Provide a responsible adult to transport him/her from the facility and remain with him/her for 24 hours.
4. Inform their provider about any living will or power of attorney.
5. Being considerate of the Center's staff who is committed to excellence in patient care.
6. Supplying accurate insurance information and pay bills promptly so that your Surgical Center can continue to serve you effectively.
7. Accept personal financial responsibility for any charges not covered by their insurance
8. Provide transportation by a responsible adult after the procedure

**N.J. Department of Health & Senior Services
Healthcare Systems Analysis Complaint
Program
PO Box 360
Trenton, NJ 08625
Complaints Hotline 800-792-9770**

**Administrator
Patient Care Associates, LLC
500 Grand Ave., Suite 200
Englewood, NJ 07631
201-567-8090**

**Medicare Ombudsman Center
800-633-4227**