

PATIENT RIGHTS

Essex Surgical, LLC does not discriminate with regard to race, color, religion, gender, National origin, citizenship status, age, disability or any other legally publicized status.

1. To be informed of these rights, as evidenced by the patient's written acknowledgement, or by documentation by staff in the medical record, that the patient was offered a written copy of these rights and given a written or verbal explanation of these rights, in terms the patient could understand. The facility shall have a means to notify patients of any rules and regulations it has adopted governing patient conduct in the facility.
2. To be informed of services available in the facility, of the names and professional status of the personnel providing and/or responsible for the patient's care, and of fees and related charges, including the payments, fee, deposit, and refund policy of the facility and any charges for services not covered by sources of third-party payment or not covered by the facility's basic rate;
3. To be informed if the facility has authorized other health care educational institutions to participate in the patient's treatment. The patient also shall have a right to know the identity and function of these institution, and to refuse to allow their participation in the patient's treatment;
4. To receive from the patient's physician(s) or clinical practitioner(s), in term, that the patient understand, an explanation of his or her complete medical/health condition or diagnosis, recommended treatment, treatment options, including the option of no treatment, risk(s) of treatment, and expected result(s). If this information would be detrimental to the patient's health, or if the patient is not capable of understanding the information, the explanation shall be provided to the patient's next of kin or guardian. This release of information to the next of kin or guardian, along with the reason for not informing the patient directly, shall be documented in the patient's medical record.
5. To participate in the planning of the patient's care and treatment, and to refuse medication and treatment. Such refusal shall be documented in the patient's medical record;
6. To be included in experimental research only when the patient gives informed, written consent to such participation, or when a guardian gives such consent for an incompetent patient accordance with law, rule and regulation. The patient may refuse to participate in experimental research, including the investigation of new drugs and medical devices;
7. To voice grievances or 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 free from restraint, interference, coercion, discrimination, or reprisal;
8. 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 other from injury. Drugs and other medications shall not be used for discipline of patients or for convenience of facility personnel;
9. To confidential treatment of information about the patient.
 - (i) 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 needed by the Department for statutorily authorized purposes.
 - (ii) The facility may release data about the patient for studies containing aggregated statistics when the patient's identity is masked;
 - (iii) The right to be notified in the event of a breach of the patient's PHI

- (iv) The right to request that a health plan not be informed of treatment which is paid for in full by the individual, and the covered entity's obligation to comply with such a request;
 - (v) That consent is required prior to the use or disclose of an the individual's psychotherapy notes, or the use the individual's PHI for marketing purposes;
 - (vi) The right to opt out of communications for fundraising purposes;
10. 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;
 11. To not be required to perform work for the 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;
 12. To exercise civil and religious liberties, including the right to independent personnel decision. No religious beliefs or practices, or any attendance at religious services, shall be imposed upon any patient;
 13. To not be discriminated against because of age, race, religion, sex nationality, or ability to pay, or deprived of any constitutional, civil, and/or legal rights solely because of receiving services from the facility; and
 14. To expect and receive appropriate assessment, management and treatment of pain as an integral component of the person's care in accordance with N.J.A.C. 8:43 E-6
 15. The facility must comply with the following requirement:
 - (i) Provide the patient or, as appropriate, the patient's representative in advance of the date of the procedure, with information concerning its policies on advance directives, including a description of applicable State health and safety laws and, if requested, official State advance directive forms.
 - (ii) Inform the patient or, as appropriate, the patient's representatives or power of attorney
 16. The facility must also disclose, where applicable, physician financial interests or ownership in the facility in accordance with the intent of Part 420 of this subchapter. Disclosure of information must be in writing and furnished to the patient in advance of the date of the procedure.
 17. The facility must provide the patient or the patient's representative with verbal and written notice of the patient's right in advance of the date of the procedure, in a language and manner that the patient or the patient's representative understands.
 18. Complaints may be reported to Trudy Holt (973) 324-2300; the NJ Department of Health and Senior Services at their complaint hotline (800) 792-9770 and on line at www.doh.state.nj.us/fc; or with the Office OF THE Medicare Beneficiary Ombudsman at www.medicare.gov/ombudsman.

PATIENT'S RESPONSIBILITIES

In order to provide you, the patient, with the optimal quality of care, we ask that you comply with the following responsibilities:

1. You, or your family, will provide information about past illnesses, hospitalization, medication and other matters relating to your health history.
2. You will cooperate and follow the care to prescribed or recommended for you by your physician nurses, or allied health personnel.
3. You will notify your physician or nurse if you do not understand your diagnosis, treatment or prognosis.
4. You will advise your nurse, physician, or nurse manager of any dissatisfaction you may have regarding your care at the facility
5. You will assume financial responsibility for services rendered, either through third party payers (your insurance company) or through self-payment for services not covered by your insurance company.
6. You will not take drugs which have not been prescribed by your attending physician and administered by the staff; and you will not complicate or endanger the healing process by consuming alcoholic beverages or toxic substances during your stay.
7. You will abide by the facility rules and regulations and be considerate of the rights of other patients and facility personnel

You will be courteous to the treating staff.

The American Association for Accreditation of Ambulatory Surgery Facilities, Inc.

PATIENT RIGHTS & RESPONSIBILITIES

This accredited facility presents these Patient Rights and Patient Responsibilities to reflect the commitment to providing quality patient care, facilitating dialogue between patients, their physicians, and the facility management, and promoting satisfaction among the patients and their designated support person(s), physicians, and health professionals who collaborate in the provision of care. This facility recognizes that a personal relationship between the physician and the patient is an essential component for the provision of proper medical care. When the medical care is rendered within an organizational structure, the facility itself has a responsibility to the patient to advocate for expanded personal relationships and open communications between patients and their designated support persons, physicians and the organization's staff members. This facility has many functions to perform, including but not limited to, preventing and treating medical conditions, providing education to health professionals and patients, and conducting clinical research. All these activities must be conducted with an overriding concern for the patient and above all the recognition of his or her dignity as a human being. Although no catalogue of rights can provide a guarantee that the patient will receive the kind of treatment he or she has a right to expect, these patient rights are affirmed and actively incorporated into the care provided in this facility.

1. The patient has the right to receive considerate and respectful care.
2. The patient has the right to know the name of the physician responsible for coordinating his/her care.
3. The patient has the right to obtain information from his or her physician in terms that can be reasonably understood. Information may include, but is not limited to his or her diagnosis, treatment, prognosis, and medically significant alternatives for care or treatment that may be available. When it is not medically advisable to share specific information with the patient, the information should be made available to an appropriate person in his or her behalf. When medical alternatives are to be incorporated into the plan of care, the patient has the right to know the name of the person(s) responsible for the procedures and/or treatments.
4. The patient has the right to obtain the necessary information from his or her physician to give informed consent before the start of any procedure and/or treatment. Necessary information includes, but is not limited to, the specific procedure and/or treatment, the probable duration of incapacitation, the medically significant risks involved, and provisions for emergency care.
5. The patient has the right to expect this accredited ambulatory surgery facility will provide evaluation, services and/or referrals as indicated for urgent situations. When medically permissible, the patient or designated support person(s) will receive complete information and explanation about the need for and alternatives to transferring to another facility. The facility to which the patient is to be transferred must first have accepted the patient for transfer.
6. The patient has the right to refuse treatment to the extent permitted by law, and to be informed of the medical consequences of his or her action.
7. The patient has the right to obtain information about any financial and/or professional relationship that exists between this facility and other health care and educational institutions insofar as his or her care is concerned. The patient has the right to obtain information about any professional relationships that exist among individuals who are involved in his or her procedure or treatment.

8. The patient has a right to be advised if this accredited ambulatory surgery facility proposes to engage in or perform human experimentation affecting his or her care or treatment. The patient has the right to refuse to participate in research projects.

9. The patient has the right to every consideration for privacy throughout his or her medical care experience, including but not limited to, the following. Confidentiality and discreet conduct during case discussions, consultations, examinations, and treatments. Those not directly involved in his or her care must have the permission of the patient to be present. All communications and records pertaining to the patient's care will be treated as confidential.

10. The patient has the right to expect reasonable continuity of care, including, but not limited to the following. The right to know in advance what appointment times and physicians are available and where. The right to have access to information from his or her physician regarding continuing health care requirements following discharge. The number to call for questions or emergency care

11. The patient has the right to access and examine an explanation of his or her bill regardless of the source of payment.

12. The patient and designated support person(s) have the right to know what facility rules and regulations apply to their conduct as a patient and guest during all phases of treatment.

Patient Responsibilities

It is the patient's responsibility to participate fully in decisions involving his or her own health care and to accept the consequences of these decisions if complications occur.

It is the patient's responsibility to follow up on his or her physician's instructions, take medications when prescribed, and ask questions that immerge concerning his or her own health care.

It is the patient's responsibility to provide name of support person in case of emergency, and have this support person available when advised to do so.

Direct any care concerns or complaints to:

The Facility Director: _____

Phone: _____

And the Executive Director of AAAASF
Theresa Griffin-Rossi, CAE Executive Director
Phone: (888) 545-5222 Ext. 103

And the Office of the Medicare Beneficiary Ombudsman
Phone: 1-800-MEDICARE (1-800-633-4227)
Website: <http://www.cms.hhs.gov/center/ombudsman.asp>