

## STATE OF NEW JERSEY PATIENTS RIGHTS

**As a patient at Suburban Endoscopy Center you have the following rights under state law and regulations.  
The patient has the right:**

✚ 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.

✚ 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 payment, 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;

✚ To be informed if facility has authorized other health care and educational institutions to participate in the patient's treatment. The patient also shall have the right to know the identity and function of these institutions, and to refuse to allow their participation in the patient's treatment;

✚ To receive from the patient's physician(s) or clinical practitioner(s), in terms that the patient understands, 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 results(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;

✚ To receive as soon as possible the services of a translator or interpreter if you need one to communicate free of charge.

✚ 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;

✚ To change providers if other qualified providers are available.

✚ To make informed decisions about my treatment and receive care in a safe setting.

✚ 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 in accordance with law, rule and regulation. The patient may refuse to participate in experimental research, including the investigation of new drugs and medical devices;

✚ 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;

✚ To be free from mental and physical abuse, free from exploitation, all forms of harassment, 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;

✚ 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 be respected when facility personnel are discussing the patient;

✚ To have the right to confidential treatment of information about the patient. Information in the patient's medical record shall not be released to anyone outside the facility without the patient's approval, unless another healthcare facility to which the patient was transferred required the information, or unless the release of the information is required and permitted by law, a third-party payment contract, or a peer review, or unless the information is needed by the New Jersey State Department of Health for statutorily authorized purposes. The facility may release data about the patient for studies containing aggregated statistics when the patient's identity is masked;

✚ 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;

✚ To exercise civil and religious liberties, including the right to independent personnel decisions. No religious belief or practices; or any attendance at religious services, shall be imposed upon the patient;

✚ 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; To expect and receive assessment, management and treatment of pain as an integral component of that person's care in accordance with NJAC 8:43E-6. As a person with pain

- You have the right your report of pain taken seriously and to be treated with dignity and respect by doctors, nurses, and other healthcare professionals you have the right to have your pain thoroughly assessed and promptly treated. You have the right to be informed by your doctor about what might be causing your pain, possible treatment, risks, and cost of each.
- You have the right to participate actively in decisions about how to manage your pain
- You have the right to have your pain assessed regularly and your treatment adjusted if your pain persists.
- The right to get clear and prompt answers to your questions, to take time to make decisions, and to refuse a particular treatment if you choose
- If a patient is adjudged incompetent under applicable state health and safety 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 the state has not adjudged a patient incompetent, any legal representative designated by the patient in accordance with state laws may exercise the patient's rights on the extent allowed by the state law.

## PATIENT RESPONSIBILITIES

**As a patient at Suburban Endoscopy Center the patient has the following responsibilities:**

- ✚ Providing caregivers, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, hospitalization, medications, and other matters relating to their health. Patients and their families must report perceived risks in unexpected changes in their condition.
- ✚ Patients must ask questions when they do not understand their care, treatment, and service or what they are expected to do.
- ✚ Patients must follow the care, treatment, and service plan developed. They should express any concerns about their ability to follow the proposed care plan or course of care, treatment, and services.
- ✚ Be considerate of other patients and personnel and for assisting in the control of noise, eating, and other distractions.
- ✚ Patients and their families must follow the organization's rules and regulations during his or her stay and treatment.
- ✚ Patients and their families must be considerate of the organization's staff and property, as well as other patients and their property.
- ✚ Patients should promptly meet any financial obligations to the facility.
- ✚ Patients should identify any patient safety concerns.
- ✚ For after hour care for non emergencies the patients should contact their physician's office. For emergent after hour care the patient should call 911 and go to the nearest emergency room.
- ✚ Patients should provide a responsible adult to transport him/or home from the facility and remain with him/her.
- ✚ Patients should inform his/her provider about a living will, medical power of attorney, or other directive that could affect his/her provider.

### **Patient Complaint or Grievance**

To report a complaint or grievance you can contact the Administrator by phone at (973)571-1600 ext 108 or mail at:

Suburban Endoscopy Center  
799 Bloomfield Avenue  
Verona, NJ 07044

Complaints and grievances may also be filed through:

New Jersey Department of Health and Senior Services  
Division of Health Facilities Evaluation and Licensing  
PO Box 367  
Trenton, NJ 08625-0367  
Phone: 800-792-9770  
Or

State of New Jersey, CMS Regional Office  
DHHS/CMS/DMSO, CLIA Program  
26 Federal Plaza Room 37-130  
New York, NY 10278  
Phone: 212 616-2450  
Or

AAAH  
5250 Old Orchard Road  
Suite 200  
Skokie, Illinois 60077  
Phone: 847 853-6060

Medicare beneficiaries may receive information regarding their options under Medicare and their rights and protections by visiting the website for the Office of the Medicare Beneficiary Ombudsman

<http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html>

or by calling: 800 624-4262

### **ADVANCE DIRECTIVE NOTIFICATION**

In the State of New Jersey, all patient have the right to participate in their own health care decisions and to make Advance Directives or to execute Powers of Attorney that authorize others to make decisions on their behalf based on the patient's expressed wishes when the patient is unable to makes decisions or unable to communicate decisions. Suburban Endoscopy Center respects and upholds those rights.

However, unlike in an acute hospital setting, Suburban Endoscopy Center does not routinely perform "high risk" procedures. While no surgery is without risk, most procedures are performed in this facility are considered to be minimal risk. You will discuss the specifics of your procedure with your physician who can answer your questions as to its risks, your expected recovery, and care after your surgery.

Therefore, it is our policy, regardless of the contents of any Advance Directive or instructions from a health care surrogate or attorney-in-fact, that if an adverse event occurs during your treatment at this facility, we will initiate resuscitative or other stabilizing measures and transfer you to an acute care hospital for further evaluation. At the acute care hospital, further treatments or withdrawal of treatment measures already begun will be ordered in accordance with your wishes, Advance Directive, or health care Power of Attorney. Your agreement with this facility's policy will not revoke or invalidate and current health care directive or health care power of attorney.

If you wish to complete an Advance Directive, copies of the official State forms are available at our facility.

If you do not agree with this facility's policy, we will be pleased to assist you in rescheduling your procedure.

### **DISCLOSURE OF OWNERSHIP**

Suburban Endoscopy Center is proud to have a number of quality physicians invested in our facility. Their investment enables them to have a voice in the administration of the policies of our facility. This involvement helps ensure the highest quality of surgical care for our patients

Louis Celebre, MD

Fiore DeVito, MD

John Imbesi, MD

Raymond Kenny, MD

Yong Kwon, MD

R. Swami Nathan, MD

Mehul Shah, MD