

Patient's Rights and Notification of Physician Ownership

<p>Every patient has the right to be treated as an individual and to actively participate in his/her care. The facility and medical staff have adopted the following list of patient's rights and responsibilities, which are communicated to each patient, or patient's representative/surrogate in advance of the procedure.</p> <p><u>PATIENT'S BILL OF RIGHTS:</u></p> <p>Every patient has the right to be treated as an individual with his/her RIGHTS respected. The facility and medical staff have adopted the following list of patient's rights:</p> <p><u>PATIENT'S RIGHTS:</u></p> <p>A. To considerate and respectful care consistent with sound nursing and medical practices;</p> <p>B. To be informed of the name of the physician responsible for coordinating his care;</p> <p>C. To obtain from the physician complete, current information concerning his diagnosis, treatment, and prognosis in terms he can reasonably be expected to understand;</p> <p>D. To receive from the physician information necessary to give informed consent prior to the start of any procedure or treatment;</p> <p>E. To refuse treatment to the extent permitted by law and to be informed of the medical consequences of such action;</p> <p>F. To privacy to the extent consistent with providing adequate medical care to the patient;</p> <p>G. To privacy and confidentiality of all records pertaining to the patient's treatment, except as otherwise provided by law or third-party payment contract, and to access to those records;</p> <p>H. To expect that within its capacity, the hospital will make reasonable response to the patient's request for services, including the services of an interpreter in a language other than English if 10% or more of the population in the hospital's service area speaks that language;</p> <p>I. To be informed by the patient's physician of any continuing health care requirements which may follow discharge and to receive assistance from the physician and appropriate hospital staff in arranging for required follow-up care</p> <p>A patient who is eligible for Medicare has the right to know, upon request and in advance of</p>	<p>after discharge;</p> <p>J. To be informed by the hospital of the necessity of transfer to another facility prior to the transfer and of any alternatives to it which may exist;</p> <p>K. To be informed, upon request, of other health care and educational institutions that the hospital has authorized to participate in the patient's treatment;</p> <p>L. To be advised if the hospital proposes to engage in or perform human research or experimentation and to refuse to participate in these projects;</p> <p>M. To examine and receive an explanation of the patient's bill, regardless of the source of payment, and to receive information or be advised on the availability of sources of financial assistance to help pay for the patient's care, as necessary;</p> <p>N. To expect reasonable continuity of care;</p> <p>O. To be advised of the hospital rules and regulations that apply to his conduct as a patient; and,</p> <p>P. To treatment without discrimination as to race, age, religion, sex, national origin, or source of payment.</p> <p>Q. To be informed of their right to change providers if other qualified providers are available</p> <p><u>PATIENT RESPONSIBILITIES:</u></p> <p>A. Provide complete and accurate information to the best of his/her ability about his/her health, any medications, including over-the-counter products and dietary supplements, and any allergies or sensitivities.</p> <p>B. Follow the treatment plan prescribed by his/her provider and participate in his/her care.</p> <p>C. Provide a responsible adult to transport him/her home from the facility and remain with him/her for 24 hours, of required by his/her provider.</p> <p>D. Accept personal financial responsibility for any charges not covered by his/her insurance.</p> <p>E. Be respectful of all the health care professionals and staff, as well as other patients.</p> <p>Please note:</p> <ul style="list-style-type: none"> • If you believe the care provided to you in a hospital by a doctor was improper, you may file a complaint with the Board of Medical Examiners. However, • Because the regulation of hospitals is under the jurisdiction of the New Jersey Department of Health and Senior Services (DHSS), if you believe you received improper care at a hospital, you should contact the DHSS Complaint section at (800) 792-9770. <p>If you need an Interpreter:</p>	<p>Advance Directive continued</p> <p>Northfield Surgical Center respects the right of patients to make informed decisions regarding their care. The Center has adopted the position that an ambulatory surgery center setting is not the most appropriate setting for end of life decisions. Therefore, it is the policy of this surgery center that in the absence of an applicable properly executed Advance Directive, if there is deterioration in the patient's condition during treatment at the surgery center, the personnel at the center will initiate resuscitative or other stabilizing measures. The patient will be transferred to an acute care hospital, where further treatment decisions will be made.</p> <p>If the patient has Advance Directives which have been provided to the surgery center that impact resuscitative measures being taken, we will discuss the treatment plan with the patient and his/her physician to determine the appropriate course of action to be taken regarding the patient's care.</p> <p><u>Complaints/Grievances:</u> If you have a problem or complaint, please speak to one of our staff to address your concern. If necessary, your problem will be advanced to center management for resolution, You have the right to have your verbal or written grievances investigated and to receive written notification of actions taken.</p> <p>The following are the names and/or agencies you may contact:</p> <p>Center Director Northfield Surgical Center 741 Northfield Avenue, Suite 102 West Orange, NJ 07052 1-973-243-1062 ext. 103</p> <p>You may contact your state to report a complaint:</p> <p>New Jersey Department of Health and Senior Services Division of Health Facilities Evaluation and Licensing PO Box 367 Trenton, NJ 08625-0367 Hotline: 1-800-792-9770, Select #1 http://www.nj.gov/health/healthfacilities/hotline.shtm</p> <p>Medicare Ombudsman website: https://www.cms.gov/center/special-topic/ombudsman/medicare-beneficiary-ombudsman-home</p>
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PATIENT RIGHTS Brochure

Northfield Surgical Center

treatment; whether the health care provider or healthcare facility accepts the Medicare assignment rate.

A patient has the right to receive, upon request, prior to treatment, a reasonable estimate of charges for medical care.

A patient has the right to receive a copy of a reasonably clear and understandable, itemized bill and, upon request, to have the charges explained.

A patient has the right to impartial access to medical treatment or accommodations, regardless of race, national origin, religion, handicap, or source of payment.

A patient has the right to treatment for any emergency medical condition that will deteriorate from failure to provide treatment.

A patient has the right to know if medical treatment is for purposes of experimental research and to give his or her consent or refusal to participate in such experimental research.

A patient has the right to express grievances regarding any violation of his or her rights, as stated in New Jersey law, through the grievance procedure of the health care provider or health care facility which served him or her and to the appropriate state licensing agency.

Rights and Respect for Property and Person

The patient has the right to:

- Exercise his or her rights without being subjected to discrimination or reprisal
- Voice grievance regarding treatment or care that is or fails to be furnished
- Be fully informed about a treatment or procedure and the expected outcome before it is performed
- Confidentiality of personal medical information

Privacy and Safety

The patient has the right to:

- Personal privacy
- Receive care in a safe setting
- Be free from all forms of abuse or harassment

If you will need an interpreter, please let us know and one will be provided for you. If you have someone who can translate confidential, medical and financial information for you please make arrangements to have them accompany you on the day of your procedure.

Statement of Nondiscrimination:

Northfield Surgical Center complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Northfield Surgical Center cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

Northfield Surgical Center respecte les lois fédérales en vigueur relatives aux droits civiques et ne pratique aucune discrimination basée sur la race, la couleur de peau, l'origine nationale, l'âge, le sexe ou un handicap.

Northfield Surgical Center 遵守適用的聯邦民權法律規定，不因種族、膚色、民族血統、年齡、殘障或性別而歧視任何人。

Advance Directives

An "Advance Directive" is a general term that refers to your instructions about your medical care in the event you become unable to voice these instructions yourself. Each state regulates advance directives differently. STATE laws regarding Advanced Directives are found in New Jersey Statutes § 26:2H-53 through 78. In the state of New Jersey, all patients have the right to decide what medical treatment they want or do not want to receive. They can decide in advance what treatment they would want, and put that decision in writing, or they may name someone else who understands and shares their values, to exercise that right for them. Under New Jersey Law, there are three kinds of Advance Directives: Proxy, Instruction Directive ("Living Will") or Combined Directive.

http://www.state.nj.us/health/advancedirective/documents/njsa_26.2h.53.pdf

You have the right to informed decision making regarding your care, including information regarding Advance Directives and this facility's policy on Advance Directives. Applicable state forms will also be provided upon request. A member of our staff will be discussing Advance Directives with the patient (and/or patient's representative) prior to the procedure being performed. Patients are asked to bring copies of their Advance Directives with them to the surgery center.

Medicare: www.medicare.gov or call 1-800-MEDICARE (1-800-633-4227)

Office of the Inspector General: <http://oig.hhs.gov>

Accreditation Association for Ambulatory Health Care (AAAHC)

**3 Parkway North Blvd, Ste 201
Deerfield, IL 60015**

(847)853-6060 or email: info@aaahc.org

Physician Financial Interest and Ownership:

The Center is owned, in part, by the physicians. The physician(s) who referred you to this Center and who will be performing your procedure(s) may have a financial and ownership interest. Patients have the right to be treated at another health care facility of their choice. We are making this disclosure in accordance with Federal regulations.

Dr. Yatinder Bains

Dr. Robert Ruffini

Dr. Warren Bleiweiss

Dr. Amol Shah

Dr. Joseph DePasquale

Dr. Shail Sheth

Dr. Robert Eagle

Dr. Etan Spira

Dr. Vitaly Fishbein

Dr. Robert Spira

Dr. Mark Gilder

Dr. Andrew Stefaniwsky

Dr. Jon Green

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