

PATIENTS' RIGHTS

The Patient has the right:

- To be informed of these rights as evidenced by the patient's written acknowledgement,
- To be informed of services available in the facility, of the names and professional status of the personnel providing the patient's care, & of fees & related charges
- To be informed if the facility has authorized other health care & educational institutions to participate in the patient's treatment.
- To receive from your physician(s) in terms that the patient understands, an explanation of his or her complete medical health condition or diagnosis, and recommended treatment
- To participate in the planning of the patient's care & treatment, & to refuse medication & treatment.
- To be included in experimental research only when the patient gives informed, written consent
- To voice grievances or recommend changes in policies & services to facility personnel
- To be free from mental & physical abuse, free from exploitation, & free from use of restraints
- To confidential treatment of information
- To be treated with courtesy, consideration, respect, & recognition of the patient's dignity, individuality, & right to privacy
- To not be required to perform work for the facility unless the work is part of the patient's treatment & is performed voluntarily by the patient
- To exercise civil & religious liberties
- To not be discriminated because of age, race, religious, sex nationality, or ability to pay, or deprived of any constitutional, civil, and/or legal rights
- To expect & receive appropriate assessment, management & treatment of pain

Patient Responsibilities:

The patient has the responsible:

- To provide accurate and complete information concerning his/her present complaints, past illnesses and hospitalizations.
- To report perceived risks in their care and unexpected changes in their condition.
- For asking questions when they do not understand what they have been told.
- For following the treatment plan established by his/her physician, including the instructions of nurses and other health professionals as they carry out the physician's orders.
- For keeping appointments and for notifying the facility or physician when he/she is unable to do so.
- For his/her actions should he/she refuse treatment or not follow his/her physician's orders.
- For assuring that the financial are met.
- For following facility policies and procedures.
- For being considerate of the rights of other patients and facility personnel.
- For being respectful of his/her personal property and that of other persons in the facility.
- For providing a responsible adult to transport you from the facility and remain with you for 24 hours in required by the provider.

The following are offices where complaints may be submitted:

<p><i>Central Jersey Surgery Center: Administrator Barbara Ciaramella Clinical Director Lynda Heffernan 732-460-2777</i></p>	<p><i>New Jersey State Department of Health Acute Care Assessment and Survey Office P.O. Box 367 Trenton, NJ 800-792-9770</i></p>
<p><i>Accreditation Association for Ambulatory Health Care 5250 Old Orchard Road, Suite 200 Skokie, IL 60077 Tel: 847.853.6060 Fax: 847.853.9028 Email: info@aaahc.org</i></p>	<p><i>State of New Jersey Office of Ombudsman for the Institutionalized Elderly PO Box 808 Trenton, NJ 08625 877-582-6995</i></p>