

Your Rights As A Patient

Each patient shall be entitled to the following rights, none of which shall be abridged or violated by the Medical Centers of Hackensack Meridian Health or any of its staff:

Medical Care

- Receive an understandable explanation from your physician of your complete medical condition including recommended treatment, expected results, risks and reasonable alternatives. 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 or guardian.
- Give informed written consent prior to the start of specified, nonemergency medical procedures or treatments only after your physician has explained – in terms you can understand-specific details about the recommended procedure or treatment, the risks, time to recover and reasonable medical alternatives.
- Be informed about the hospital's written policies and procedures regarding life saving methods and the use or withdrawal of life support.
- To refuse medication and treatment to the extent permitted by law and to be informed of the medical consequences of refusal.
- Be included in experimental research only when you have given informed consent to participate.
- Choose your own private professional nurse and to contract directly for this care during hospitalization. You can request from the hospital a list of local non-profit professional nurses' association registries that refer nurses.
- Receive appropriate assessment and treatment for pain.

Transfers

- Be transferred to another facility only if the current hospital is unable to provide the level of appropriate medical care or if the transfer is requested by you or your next of kin or guardian.
- Receive from a physician in advance an explanation of the reasons for transfer including alternatives, verification of acceptance from the receiving facility, and assurance that the move will not worsen your medical condition.

Communication and Information

- Be treated with courtesy, consideration and respect for your dignity and individuality.
- Know the names and functions of all physicians and other health care professionals and educational institutions that participate in your treatment. You have the right to refuse to allow their participation.
- Expediently receive the services of a translator or interpreter, if needed, to communicate with the hospital staff.
- Be advised in writing of the hospital's rules regarding the conduct of patients and visitors.
- Receive a summary of your rights as a patient, including the name(s) and phone number(s) of the hospital staff to whom to direct questions or complaints about possible violations of your rights. At Hackensack Meridian Health, the Office of Patient Experience serves as the Ombudsman and will advocate for your rights as a patient. If at least 10% of the hospital's service area speaks your native language, you can receive a copy of the summary in your native language.

Medical Records

- Have prompt access to your medical records. If your physician feels that this access is detrimental to your health, your next of kin or guardian has a right to see your records.
- Obtain a copy of your medical records for a reasonable fee within 30 days after submitting a written request to the hospital.

Cost of Hospital Care

- Receive a copy of the hospital charges, an itemized bill, if requested, and an explanation.
- Appeal any charges and receive an explanation of the appeals process.
- Obtain the hospital's help in securing public assistance and private health care benefits to which you may be entitled.

Discharge Planning

- Be informed about any need for follow up care and receive assistance in obtaining this care required after your discharge from the hospital.
- Receive sufficient time before discharge to arrange for follow up care after hospitalization.
- Be informed by the hospital about the discharge appeals process.

Privacy and Confidentiality

- Be provided with physical privacy during medical treatment and personal hygiene functions, unless you need assistance.
- Be assured confidentiality about your stay. Your medical and financial records shall not be released to anyone outside the hospital without your approval, unless you are transferred to another facility that requires the information, or release of the information is required and permitted by law.
- Have access to individual storage space for your private use and to safeguard your property if unable to assume that responsibility.

Freedom from Abuse, Neglect, Humiliation, Retaliation, Restraints, or any form of financial or other exploitation.

- Be free from physical and mental abuse, neglect, humiliation, retaliation, or any form of financial or other exploitation.
- Be free from restraints unless authorized by a physician for a limited period of time to protect your safety or the safety of others.

Civil Rights

- Receive treatment and medical services without discrimination based on sex/gender, race, age, religion, ethnicity, disability, diagnosis, creed, color, national origin, nationality, marital status, domestic partnership status, affectional or sexual orientation, gender identity and expression, military service, ability to pay or source of payment, in sum or substance, any other category protected by state or federal law.
- Exercise your constitutional, civil and legal rights.

Questions, Complaints and Appeals

- Ask questions or file grievances about patient rights with a designated hospital staff member without fear of retaliation or barriers to services and receive a response within a reasonable period. At Hackensack Meridian Health, the Office of Patient Experience serves as the Ombudsman and will serve as the point of contact to address your questions, concerns and special needs.
- Be provided, by the hospital, with contact information for the New Jersey Department of Health and Senior Services unit that handles questions and complaints.

Contact Information:

Hospital

Office of Patient Experiences

Direction

Phone

Email

New Jersey Department of Health and Senior Services

24-hour Complaint Hotline: 1-800-792-9770

New Jersey State Department of Health

Division of Health Facilities Evaluation and Licensing

P.O. Box 367, Trenton, New Jersey 08625 Telephone: (800) 792-9770

Medicare patients may file a complaint or "grievance" through Medicare. Visit www.medicare.gov for additional information.

You may also file quality of care complaints with the Joint Commission by emailing the name and address of the hospital and concerns to complaint@jointcommission.org or by submitting a your concerns online via their website at: www.jointcommission.org. You may also call 1-800-994-6610 and speak with joint commission representative.



Hackensack
Meridian Health