

## Patient Rights

As a patient in Shore Medical Center, you have the following rights under state law and regulations:

### Medical Care

To receive the care and health services that the hospital is required by law to provide.

To receive an understandable explanation from your physician of your complete medical condition, recommended treatment, expected results, risks involved, and reasonable medical 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.

To give informed written consent prior to the start of specified, non-emergency medical procedures or treatments. Your physician should explain to you - in words you understand - specific details about the recommended procedure or treatment, any risks involved, time required for recovery, and any reasonable medical alternatives.

To refuse medication and treatment to the extent permitted by law and to be informed of the medical consequences of refusal.

To be included in experimental research only if you give informed, written consent. You have the right to refuse to participate.

To have your pain managed effectively through ongoing assessment and timely responsive interventions. You can expect to receive information about pain relief measures, as appropriate, and be involved in decisions related to the management of your pain.

To be informed of written policies and procedures regarding life-saving methods and the use or withdrawal of life support.

To choose your own private professional and to contract directly for this care during hospitalization. You can request a list of local non-profit professional nurse association registries that refer nurses.

### Communication and Information

To be informed of the names and functions of all health care professionals providing you with personal care.

To receive, as soon as possible, the services of a translator or interpreter if you need one to help you communicate with the hospital's health care personnel.

To be informed of the names, titles and duties of any outside health care and educational institutions involved in your treatment. You may refuse to allow their participation.

To receive, upon request, the hospital's written policies and procedures regarding life-saving methods and the use or withdrawal of life support mechanisms.

The right to formulate Advance Directives and to have hospital staff follow these directives.

To be advised in writing of the hospital's rules regarding the conduct of patients and visitors.

To receive a summary of your patient rights that includes the name and phone number of the hospital staff member to whom you can ask questions or complain about any possible violation of your rights. If at least 10% of the service area speaks your native language, you can receive a copy of the summary in your native language.

### Medical Records

To have prompt access to the information in your medical record. If your physician feels that this access is detrimental to your health, your next of kin or guardian has a right to see your record.

While an inpatient, you may ask your caregiver to review your medical record.

To obtain a copy of your medical record, at a reasonable fee, within 30 days after a written request to the hospital.

### Cost of Hospital Care

To receive a copy of the hospital payment rates. If you request an itemized bill, the hospital must provide one, and explain any questions you may have. You have a right to appeal any charges.

To be informed by the hospital if part or your entire bill will not be covered by insurance.

The hospital is required to help you obtain any public assistance and private health care benefits to which you may be entitled.

### Discharge Planning

To receive information and assistance from your attending physician and other health care providers if you need to arrange for continuing health care after your discharge from the hospital.

To receive sufficient time before discharge to arrange for continuing health care needs.

To be informed by the hospital about any appeal process to which you are entitled by law if you disagree with the hospital's discharge plans.

### Transfers

To be transferred to another facility only when you or your family has made the request, or in instances where the transferring hospital is unable to provide you with the care you need.

To receive an advance explanation from a physician 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.

### Personal Needs

To be treated with courtesy, consideration, and respect for your dignity and individuality.

Access to spiritual and social services support. Ask your caregiver for referral.

To have access to storage space in your room for private use.

The hospital must also have a system to safeguard your personal property.

### Freedom from Abuse and Restraints

To freedom from physical, sexual and mental abuse.

To freedom from restraints, unless a physician authorizes them for a limited period of time to protect the safety of you or others.

### Privacy and Confidentiality

To have physical privacy during medical treatment and personal hygiene functions, unless you need assistance.

To confidential treatment of information about you. Information in your records will not be released to anyone outside the hospital without your approval, unless law requires it.

### Civil Rights

To treatment and medical services without discrimination based on age, religion, national origin, sex, sexual orientation, gender identity or expression, handicap, diagnosis, ability to pay, or source of payment.

To exercise all your constitutional, civil, and legal rights.

**Questions and Complaints:** To present questions or grievances to a designated hospital staff member and to receive a response in a reasonable period. Ask for unit manager or supervisor,

**Shore Medical Center Patient Representative:** 653-3882; or dial "0" and ask to have the Patient Representative paged; or call

**Nursing Administration** at 653-3675. Also: N.J. Department of Health Agency that handles questions and complaints

You may directly contact the N.J. Department of Health Complaint Hotline at 1-800-792-9770.

Mail: : State Department of Health, Complaint Program, Division of Health Facilities Evaluation, P.O. Box 367, Trenton, New Jersey 08625-0367.

You may also contact **The Joint Commission** during normal business hours Monday-Friday (Central Time Zone) at 1-800-994-6610 or via email at [complaint@jointcommission.org](mailto:complaint@jointcommission.org).

This list of Patient Rights is an abbreviated summary of the current New Jersey law and regulations governing the rights of hospital patients. For more complete information, consult N.J. Department of Health regulations at N.J.A.C. 8:43G-4.1 (rev. 5/16/16) or Public Law 1989 Chapter 170, available from the Patient Representative's office.