Patient concerns may be communicated to the following agencies:

New Jersey Department of Health and Senior Services 1-800-792-9770, select #1

Office of the Ombudsman for the Institutionalized Elderly 1-877-582-6995

Medicare Beneficiary Ombudsman 1-800-633-4227

Accreditation Association for Ambulatory Health Care 847-853-6060

FOR MORE INFORMATION:

Please notify the Administrator at Burlington County Endoscopy Center at 609-267-1555 if you would like more information regarding offices where complaints may be lodged. The Administrator can also provide information regarding where information concerning Medicare and Medicaid coverage can be obtained.

Advance Directives:

Please be advised that Burlington County Endoscopy Center does not honor advance directives. If a patient has executed an advance directive and provides a copy of that document to the Center's staff at the time of registration, it will be placed in the medical record and a copy shall accompany the patient should transfer to an acute care facility be warranted for any reason.

If a patient (or his/her legal representative) requests more information regarding advance directive on the date of service at Burlington County Endoscopy Center, information shall be provided.

The following physicians have a financial interest in Burlington County Endoscopy Center:

Monica B. Awsare, MD Lee M. de Lacy, MD Jeffrey J. Kutscher, MD Hugh M. Lasch, MD Maurice D. Leonard, MD Nidhir R. Sheth, MD William H. Taub, MD



140 Mt. Holly Bypass Unit 5 Lumberton, NJ 08048 P- 609.267.1555 F- 609.267.1566



Each patient receiving services at Burlington County Endoscopy Center has certain rights and a requirement to provide this information to each patient (or his/her legal representative) both verbally and in writing prior to the start of the procedure exists.

Patient Rights, Advance Directive and other Disclosure Information



Recognized by the American Society for Gastrointestinal Endoscopy for promoting quality in endoscopy.

- 1. 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;
- 2. 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;
- 3. To be informed if the facility has authorized other health care and educational institutions to participate in the patient's treatment. The patient also shall have a right to know the identity and function of these institutions, and to refuse to allow their participation in the patient's treatment;
- 4. 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 result(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 guardian, along with the reason for not informing the patient directly, shall be documented in the patient's medical record;

- 5. 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:
- 6. 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;
- 7. 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.
- 8. To be free from mental and physical abuse, free from exploitation, and free from use of restraints unless they are authorized by a physician for 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;
- 9. To be confidential treatment of information about the patient.
- I. Information in the patient's medical record shall not be released to anyone outside the facility without the patient's approval, unless another health care facility to which the patient was transferred requires 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 NJ Department of Health and Senior Services for statutorily authorized purposes.
- II. The facility may release data about the patient for studies containing aggregated statistics when the patient's identity is masked:
- 10. To be treated with courtesy, consideration, respect, and recognition of the patient's dignity, individually, and right to privacy, including, but not limited to, auditory and visual privacy. The patient's privacy shall also be respected when facility personnel are discussing the patient;
- 11. 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;
- 12. To exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, or any attendance at religious services, shall be imposed upon any patient;
- 13. To not be discriminated against because of age, race, religion, sex, nationally, or ability to pay, or deprived of any constitutional, civil, and/or legal rights solely because of receiving services from the facility; and
- 14. To expect and receive appropriate assessment, management and treatment of pain as an integral component of that person's care in accordance with NJ Administrative Code 8:43E-6.