

22-18 Broadway Suite 103 • Fair Lawn, NJ 07410 • 201-773-8185 • Fax 201-773-8187 • comprehensivesleepcenter.com

Patient Bill of Rights

Every patient who enters Comprehensive Sleep Center has rights. A copy of these rights will be provided to each patient at the time of registration. If necessary, interpretation services will be provided to the patient to assist in communication of these rights.

While you are a patient at Comprehensive Sleep Center you have the right to:

- 1. Exercise these rights without regard to sex, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation or marital status, or the source of payment for care.
- 2. Be informed of your rights, in advance of providing or discontinuing care, whenever possible.
- 3. Know the name of the physician who has primary responsibility for coordinating the care and the names and professional relationships of other physicians and non-physicians who will see the patient.
- 4. Have a family member or representative and your own physician notified promptly of your care in the Comprehensive Sleep Center.
- 5. Considerate and respectful care that safeguards cultural, psychosocial and spiritual values.
- 6. Receive care in a safe setting.
- 7. Be free from all forms of abuse or harassment.
- 8. Receive information about your health status, course of treatment, prospects for recovery and outcomes of care (including unanticipated outcomes) in terms you can understand. Participate actively in decisions regarding medical care including development and implementation of your care plan and to the extent permitted by the law. This includes the right to refuse treatment.
- 9. Receive as much information about any proposed treatment or procedure as you may need in order to give informed consent or to refuse this course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved in this treatment, the likelihood of achieving the desired results, alternate courses of treatment or non-treatment and the risks involved in each and to know the name of the person who will carry out the procedure or treatment.
- 10. Personal privacy.
- 11. Full consideration of privacy concerning the medical care program. Case discussion, consultation, examination and treatment are confidential and should be conducted discreetly. You have the right to be advised as to the reason for the presence of any individual.
- 12. Confidential treatment of all communication, notes and records pertaining to the care and the stay in the Comprehensive Sleep Center.

 Written permission shall be obtained before the medical records can be made available to anyone not directly related with the care.
- 13. Access information contained in your medical record within a reasonable time frame.
- 14. Request an amendment to and receive an accounting of disclosures regarding your health information.
- 15. Be free from restraints of any form used as a means of coercion, discipline, convenience or retaliation by staff.
- 16. Reasonable responses to any reasonable requests made for service.
- 17. Leave the Comprehensive Sleep Center even against the advice of physicians.
- 18. Reasonable continuity of care and to know in advance the time and location of appointment as well as the identity of persons providing the care.
- 19. Be advised if Comprehensive Sleep Center physician proposes to engage in or perform human experimentation affecting care or treatment. You have the right to refuse to participate in such research projects without fear or compromise to your care.
- 20. Examine and receive an explanation of the Comprehensive Sleep Center charges regardless of source of payment.
- 21. Know which Comprehensive Sleep Center rules and policies apply to your conduct while a patient.
- 22. Request a list of and assistance with accessing protective or advocacy services in the community.
- 23. Appropriate assessment and management of pain.
- 24. Patient can take his/her own medication including the pain medication during the night of sleep study at the sleep lab.
- 25. Have complaints/concerns voiced by you or your representative addressed in a respectful manner, as soon as possible.
- 26. File a grievance. If you want to file a grievance with Comprehensive Sleep Center, you may do so by writing or by calling.

IF YOU HAVE A COMPLAINT OR GRIEVANCE, PLEASE CONTACT:

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