



Patient
Family &

**HAND-
BOOK**

ENGLEWOOD
HOSPITAL

We are here for you.

Patient and Family Engagement Department

We are committed to delivering the highest-quality care with the utmost degree of dignity and respect to our patients and their families. If you have any questions, compliments, or concerns, or have any special requests, please contact our Patient and Family Engagement Department at **201-894-3980**.

Estamos a su servicio

Nos comprometemos a entregarles atención de alta calidad con el máximo nivel de dignidad y respeto a nuestros pacientes y a sus familiares. Si usted tiene alguna pregunta, inquietud o un comentario positivo, o si tiene alguna solicitud en especial, comuníquese por favor con nuestro Departamento encargado del paciente y la familia (Patient and Family Engagement Department) llamando al **201-894-3980**.

항상 여러분 곁에 있습니다

저희 병원은 환자분들께 최상의 서비스를 제공할 것을 약속합니다.
입원 기간 중 궁금하신 점이나 요청사항, 개선사항 등이 있으시면
201-608-2341 한인건강센터로 문의하시기 바랍니다.

Directory: Important Phone Numbers

Main Phone Number	201-894-3000	Interpreters	201-894-3368
Billing.....	201-894-3031	Medical Records (Health Information Management).....	201-894-3169
Care Coordination / Social Work.....	201-894-3080	Patient and Family Engagement.....	201-894-3980
Chaplain.....	201-894-3228	Security.....	201-894-3225
Dietary / Food Services	201-894-3097		
Housekeeping	201-894-3035		

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SECTION 1**YOUR HOSPITAL STAY****Your Healthcare Team**

During your stay, you may meet a number of healthcare professionals who work together to coordinate your care. We encourage you to speak up, ask questions, and let your needs and concerns be known.

Here are some common healthcare professionals who will help care for you during your stay.

Title and Role**Physician**

The physician in charge of coordinating and delivering your care is called the attending physician. This may be your primary care physician, one of our hospitalists, or another doctor assigned to you. A hospitalist is a physician who specializes in the care of hospitalized patients. You may also be seen by other medical or surgical specialists, as well as by residents, physician assistants, and advanced practice nurses. Residents are physicians who are in training programs for a particular specialty.

Nursing Team

A registered nurse (RN) is designated as your primary nurse. He or she plans and coordinates your overall plan of care along with your physician and other members of the team. The RN also assigns tasks to the patient care associates and patient care technicians (PCAs/PCTs). In each patient care unit, the staff is led by a nurse manager (a registered nurse who is responsible for supervising patient care and coordinates other registered nurses and all nursing and support staff of the unit). Nursing staff functions on a 24/7 basis; nursing supervisors during the evenings, nights and weekends/holidays have managerial oversight for the entire hospital.

Allied Health Professionals

Physical therapists, occupational therapists, respiratory therapists, speech pathologists, audiologists, and other therapists may work with you, your family, and your medical team to help meet recovery goals.

Title and Role

Case Coordinator and Social Worker

Case coordinators and social workers will assist you and your family with planning for your needs when you leave the hospital. A case coordinator is a RN who will help arrange for visiting nurse services at home, going to inpatient rehabilitation, or any necessary medical equipment. The case coordinator also reviews your case with your physician to make sure you are receiving the appropriate level of care while in the hospital.

A social worker can address the emotional issues that come with being in a hospital, provide patient and family counseling, and connect you with services in the community.

Pharmacist

A pharmacist is responsible for reviewing each medication ordered in the hospital and making sure the dose, route, and schedule are the best possible for you. Our pharmacists work very closely with your other healthcare providers to make sure you are getting great care, and to reduce the chance of having side effects from your medication. If you would like to talk to a pharmacist about your medication, ask your nurse to contact the pharmacy. Pharmacists may also stop by to talk to you about new medications and changes in your home medications before your discharge.

Dietitian, Nutrition Assistant, and Dietary Worker

A registered dietitian will review your medical record and work with your healthcare team to develop a nutrition care plan for you. Registered dietitians provide nutrition education and diet instruction about any diet you may need to follow after you are discharged. A nutrition assistant will help you order meals and assist with tray delivery along with the dietary worker.

Housekeeper

A housekeeper specially trained in hospital sanitation cleans your room every day. If your room needs attention at any time in between normal cleanings, call the Environmental Services Department at 201-894-3035.

Identifying Your Care Team Members

To help you easily identify the role of people on your care team, our uniforms are color-coded. Here are some of the common uniforms and colors you will see.



RN
Royal Blue



Nursing Support Staff
Royal blue pants;
white top



Allied Health Licensed/Registered Staff
Maroon



Allied Health Support Staff
Maroon pants;
white top



Dietary Staff
Black

Other colors you may see



Navy
Surgical and procedural specialists



Dark gray
Doctors, but doctors may also wear business attire or navy blue uniforms.



Light blue jackets
Volunteers

Private Duty Aides

Families or patients may wish to hire the services of a private duty aide.

Private duty aides are permitted in every unit except the intensive care units. Payment is the responsibility of the patient or family. Please check with your insurance plan to see what expenses are covered.

Private duty aides may be beneficial to patients with high anxiety, who may need additional support to cope with their hospital stay.

For more information on private duty aides, including a list of agencies that offer such services, please contact our Care

Coordination Department, **201-894-3080**, or speak to a nursing supervisor outside of business hours.

Close Observation of Patients

In certain circumstances, our staff may identify that patients might need “close observation” during a hospital stay. Such reasons may include an increased potential to fall, wander, become disoriented/confused, or may disrupt their medical treatment. We are committed to providing the appropriate level of care for such patients through close observation by a specially trained patient care associate. A family member is not a substitute for trained personnel in order to ensure safety.

Medications

Bringing Your Own Medication from Home

Please inform us if you have brought any medications from home. For your safety and to reduce the possibility of overmedication and/or adverse drug interactions, your own pre-hospitalization medication must be sent home with a family member and must not be brought back to the hospital, unless there is a specific written order. If the medication cannot be sent home, then it will be sent to the pharmacy for safe keeping. In certain cases, it may be necessary to use your own medication during your stay. Your medication will be identified and labeled properly by a pharmacist and maintained by your nurse, who shall administer it at the appropriate times.

Your healthcare team will be checking your ID bracelet before you are given medication.

If at any time during your stay you would like to speak to a pharmacist about medicine you are being given, ask your nurse to contact the pharmacy.

Medication Counseling

Before giving you any new medication, your nurse, physician, or pharmacist will explain what the medication is for and describe possible side effects. You or a family member will also be given a printout with information about your medication.

Before leaving the hospital, it is important to understand your discharge medication list. Your healthcare provider will tell you the brand name, generic name, dose, what the medication is for, when you should take

it, and what to do if you notice any of the possible side effects. Ask any questions you have about your medications or if you would like to speak to a pharmacist before discharge.

Let your doctors know if you feel like you are experiencing any side effects.

Fill your new prescriptions on your way home so that you will have it available for your next dose.

Knowing Your Medications

While you are in the hospital, make sure you know what medications you are taking and why you are taking them. Here are some questions to ask:

- What is the brand or generic name of the medicine?
- Why am I taking this medicine?
- What dose am I taking? How often, and for how long?
- What are the possible side effects?
- Are there any foods, drinks, or activities that I should avoid while taking this medication?
- Will this medication interact with other medications I am taking? Should I avoid any over-the-counter medicines or herbal supplements when taking this medication?

Managing Pain During Your Hospital Stay

Pain is an individual experience. Managing the pain that you experience takes communication and teamwork between you and your healthcare providers. We are committed to always providing our patients with optimal pain management at all stages of their care.

What is pain?

Pain is a physical discomfort or suffering caused by illness or injury. Each person's pain is unique. It is affected by your physical condition, past experiences, and your attitudes and emotions. You may not describe or experience pain in the same way as another person with the same condition. Our team recognizes that your pain is what you feel it is.

Why is it important to control pain?

Our goal is to help return you to your activities of daily living. Pain can affect your activity, mood, sleep, energy and relationships. It is important to control pain to prevent suffering and allow for faster recovery. The goal is to help control the pain, but not have it completely go away. This is because pain can help guide you in the recovery process to allow you not to overwork yourself.

How can you inform your care team of your pain?

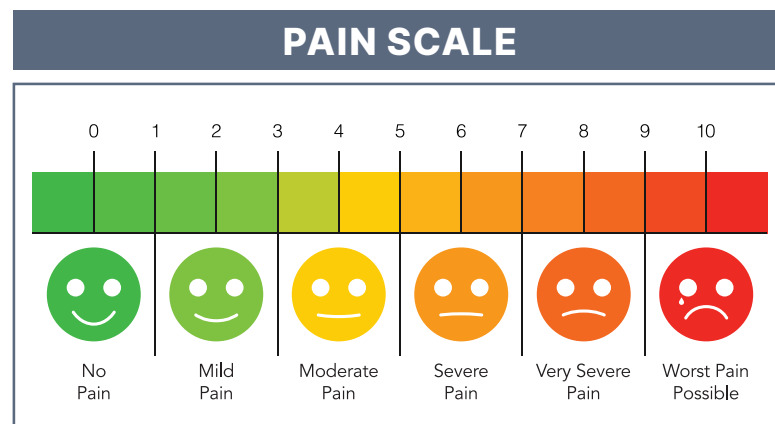
If you are experiencing pain, inform your care team at the onset of your pain. Use these questions to help describe your pain:

- How does your pain feel?
- Is it constant or does it come and go (intermittent)?
- When did it start?
- How long does it last?
- Are you experiencing it in one particular area? Is it radiating to other areas?
- Is it deep or on the surface?
- Is it throbbing, burning, stabbing, cramping, aching, dull, or sharp?
- What makes the pain worse?
- What makes the pain better?

How much does your pain hurt?

Our team will routinely ask your pain level to help us evaluate if your pain is adequately managed and how best to control it. You will be asked throughout your hospital stay to rate your pain on a scale of 0 to 10.*

0 = No Pain and 10 = the worst pain you can imagine or have ever experienced



Pain Management That Is Centered Around the Patient

Our multidisciplinary pain management team is trained in the most current techniques for managing pain. The team's board-certified pain management physicians and nurse practitioners work closely with your medical and surgical, anesthesiology, nursing, and rehabilitation teams to ensure that any pain you may experience is appropriately controlled during your recovery. The focus of our care is centered around you the patient.

Treating Your Pain

Englewood Health's team will create an individualized plan to treat your pain, based on your needs and preferences, aligned with specific goals for your recovery.

- **If you are having surgery, ask your surgeon about his or her plans to control pain** after your procedure. This may include medications that you will receive before the operation to minimize pain later and what medications or other techniques will be available for pain relief after your surgery, which may include nerve blocks, epidurals or patient controlled analgesia.
- **For both medical and surgical patients, non-medical techniques** such as deep breathing, relaxation techniques, guided imagery, heat or ice, medically supervised acupuncture, and massage therapy can be effective methods of managing pain.
- **Mild to moderate pain is generally treated with non-opioid pain relievers** such as acetaminophen, NSAIDs (non-steroidal anti-inflammatory drugs), ibuprofen, muscle relaxants, and/or nerve-related pain medications, which may be added as appropriate. Please let your care team

know if you wish to avoid these kind of medications.

- **Severe pain may be treated with various approaches and sometimes this may include opioids.** Please let your healthcare provider know if you have any concerns regarding opioids or have had any type of addiction, including alcohol. Opioids can cause side effects including constipation. If taking an opioid prescription, you will be started on stool softeners and a bowel regimen. If you experience any side effects while on these medications, let your nurse know. Opioids are not intended for long-term use. Prescription opioids carry serious risks of addiction, overdose and death, especially with prolonged use. As you heal your pain will decrease and you will not need opioids.

Taking an Active Role in Your Pain Management

Patients play an important role in effective pain management. You can help improve your pain by:

- **Working closely with your doctors and nurses** (your care team) to develop goals for pain alleviation and to design the best pain management plan for you. Be sure to discuss any concerns you may have with your team. Inform your care team of techniques and medicines that have helped or not helped you in the past.
- **Telling your care team about all allergies** and any adverse effects to pain medications that you have experienced.
- **Reporting all medications, dosages and how often you take them.** Discuss your medical history including stomach ulcers, kidney, and liver or bleeding problems.

- **Discussing any anxieties with your doctor.** Anxiety can increase your perception of pain and make it feel worse. Treating anxiety is as often as important as treating the pain itself.
- **Using relaxation techniques.** The relaxation/guided imagery channel on your TV (channel 70) may help to decrease your perception of pain and stress related to your hospitalization.
- **Communicating with your nurse if you feel your pain is not controlled.** In some cases, pain cannot be relieved completely. However, our goal is to decrease your perception of pain, allowing you to rest, heal and participate in rehabilitation from your surgery or illness, so that you may return to your daily life.

Meals and Nutrition Services

Our dining team, led by a chef trained at the Culinary Institute of America, strives to provide you with healthy and appetizing meals throughout your stay. Registered dietitians will work with your physician to tailor your meals and provide nutrition counseling. Please advise us of any cultural or religious needs you may have requiring our attention. For food-related requests, call **201-894-3097**. During off hours, the nursing team can assist you with these requests.

Dining Options for Visitors

Visitors can enjoy the Drapkin Family Café on the main floor, which offers a wide selection of food and snacks. Vending machines are located conveniently throughout the hospital in the lounges on each patient care unit as well as a larger bank of vending machines on the first floor.

Rapid Response

Patients and families may call for immediate help in cases of emergency or if they have serious concerns about a patient's condition. This is called a "Condition H." A patient or family member can call a Condition H if, after speaking with a nurse, physician, or other member of the healthcare team, you continue to have serious concerns, such as a noticeable medical change, uncontrolled bleeding, unresponsiveness, or severe difficulty breathing.

To Activate a Rapid Response (Condition H)

- Dial ext. 7828 from any hospital phone
- Identify the call as a "Condition H"
- Provide the patient's name and room number
- Press the nurse call bell
- The operator will activate the Condition H Rapid Response Team

Your Room

Rooms are assigned based on medical need and available space. Two types of rooms are available: private (single accommodation) and semiprivate (double). To request a private room, please speak with your nurse or call Patient Access Services at **201-894-3015**. Private rooms are billed at a higher cost and the difference is usually not covered by insurance.

Your room number is posted in your room so that you can provide this information to your family and friends. For your privacy, your room number will not be given out to anyone calling the medical center.

Housekeeping

We are committed to keeping your room clean at all times. A member of our Environmental Services team cleans your room every day. If your room needs attention at any time in between normal cleanings, call **201-894-3035**.

TV, Telephone, and Internet

Television and local telephone service is provided at no cost to inpatients, and free public Wi-Fi is available. Cell phones may be used unless clearly noted.

Valuables and Personal Belongings

Valuables and money should be sent home with a family member or placed in the valuables safe located in the medical center's security office. Contact lenses, eyeglasses, hearing aids, and dentures should be stored in your bedside stand when not in use. Please don't put them on your bed or food tray—they may be damaged or lost. Englewood Health cannot be responsible for replacement of personal belongings.

Interpreter Services

You have the right to receive, as soon as possible, the services of an interpreter, if you need one, to help you communicate with your medical team. If you are in need of interpreter services, including sign-language interpretation for the deaf and hard of hearing, please let a member of

your healthcare team know or contact Patient Relations at 201-894-3368 or by emailing patrel@ehmchealth.org.

Telecommunication devices for the deaf and telephone amplifiers can be placed in patient rooms upon request. Closed-caption television is also available.

AR للاستفادة من خدمات المساعدة اللغوية، اتصل على الرقم 201-894-3368.

ES Para asistencia lingüística gratuita, llamar al 201-894-3368.

FR Pour bénéficier d'un service d'aide linguistique gratuit, appelez le 201-894-3368.

GU मद्दत भाषा सहायता सेवाओं माटे 201-894-3368 पर कॉल करो.

HI निशुल्क भाषा सहायता सेवाओं के लिए 201-894-3368 पर कॉल करें।

HT Pou sèvis asistans ak lang gratis, rele 201-894-3368.

IT Per avere servizi gratuiti di assistenza linguistica, chiamare il numero 201-894-3368.

KO 무료 통역 서비스를 원하시면 201-894-3368로 문의바랍니다.

PL Usługi bezpłatnej pomocy językowej zadzwoń 201-894-3368.

PT Para serviços de assistência de idioma grátis, chame 201-894-3368.

RU Для получения бесплатных языковых услуг обращайтесь по телефону 201-894-3368.

TL Para sa mga libreng serbisyo ng tulong sa wika, tumawag sa 201-894-3368.

UR مفت لسانی معاونت کی خدمات کے لیے 201-894-3368 پر کال کریں۔

VI Đối với các dịch vụ hỗ trợ ngôn ngữ miễn phí, vui lòng gọi đến số 201-894-3368.

ZH 如需免费语言协助服务, 请致电 201-894-3368。

+ HEALTHCARE - ASSOCIATED INFECTIONS

WHAT PATIENTS CAN DO

BE INFORMED. BE EMPOWERED. BE PREPARED.

6 WAYS TO BE A SAFE PATIENT

1

SPEAK UP.

Talk to your doctor about all questions or worries you have. Ask them what they are doing to protect you.

- ▶ If you have a catheter, ask each day if it is necessary.
- ▶ Ask your doctor how he/she prevents surgical site infections. Also ask how you can prepare for surgery to reduce your infection risk.



2

KEEP HANDS CLEAN.

Be sure everyone cleans their hands before touching you.



3

GET SMART ABOUT ANTIBIOTICS.

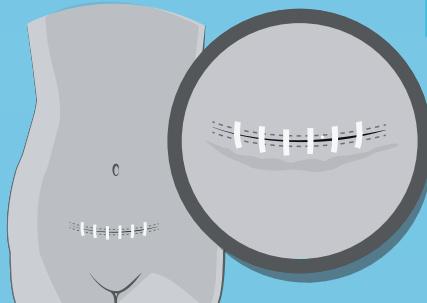
Ask if tests will be done to make sure the right antibiotic is prescribed.



4

KNOW THE SIGNS AND SYMPTOMS OF INFECTION.

Some skin infections, such as MRSA, appear as redness, pain, or drainage at an IV catheter site or surgery site. Often these symptoms come with a fever. Tell your doctor if you have these symptoms.



5

WATCH OUT FOR DEADLY DIARRHEA. (AKA *C. difficile*)

Tell your doctor if you have 3 or more diarrhea episodes in 24 hours, especially if you have been taking an antibiotic.



6

PROTECT YOURSELF.

Get vaccinated against flu and other infections to avoid complications.



KNOW THE SIGNS OF STROKE

B E F A S T

BALANCE



EYES



FACE



ARMS



SPEECH



TIME



Call 911 immediately if you or someone else is having a suspected stroke.

Religious Services

We offer services and amenities to accommodate the religious needs of patients and families. Some of these amenities include access to Jewish chaplaincy, Sabbath elevators, Kosher meals, and a Sabbath hospitality room. Religious holidays are also observed through appropriate ceremony, and services are televised onto the patient televisions. A chapel is located on the main floor of the medical center.

For more information about religious services and amenities, call our Pastoral Care Department at **201-894-3228**. On weekends and evenings/nights, please speak with a nurse.

Goal Setting and Care Planning - Conflicts and Ethics Disputes

Family members, patients, and the care team may have a difference of opinion regarding the goals of care. We encourage patients and families to have an open dialogue with the care team members by requesting a patient and family conference

to attempt to reach agreement on the goals of care.

For circumstances in which a patient/family care conference fails to resolve a complex ethical issue, the hospital provides the services of an ethics committee, which can create a mechanism for conflict resolution through communication and shared decision making. A family member or patient representative can speak to the nurse manager/supervisor for further assistance.

Patient Education Library

An important mission of our Walter Phillips Health Sciences Library is to provide patients and their families with information about their health condition. Material can be delivered to your hospital room. To request information from the medical library, call **201-894-3069** during normal business hours. In addition, in some patient care units a computer is available for research.

Issues and Concerns

We are committed to providing the best care in a compassionate and humanistic

environment. If you as a patient or visitor have concerns related to care, safety, or customer service, we want to know about them. We encourage you to share any issues or concerns with our Patient Relations Department by calling **201-894-3368** or emailing **patrel@ehmchealth.org**.

If a matter remains unresolved after contacting Patient Relations, you may contact The Joint Commission at **800-994-6610** or the New Jersey Department of Health and Senior Services at **800-792-9770** for further assistance.

Discharge Instructions

When it's time to leave the hospital, your nurse will provide you with a discharge summary and instructions. This will include information about your after-hospital plan of care, medications, and follow-up appointments. Please be sure to ask any questions you have.

If you need a visiting nurse, home health care, or special equipment to help you recover, your care coordinator or social worker will help you.

Thank a Team Member

If an employee, physician, or volunteer made a difference for you during your hospital stay or visit, and you want to send your appreciation, we'd love to hear about it! Please send us more details at **englewoodhealth.org/thanks**. Your submission will be shared with the team member and his or her manager and may be used in internal recognition activities. Thank you for wanting to recognize your care team.

Medical Records

You can access your health information through MyChart or by requesting copies electronically or in person.

MyChart Patient Portal MyChart gives you access to your discharge instructions and results from lab, pathology, and imaging tests. Visit **mychart.englewoodhealth.org**.

Electronic Request Form Requests for medical records from Englewood Hospital and the Englewood Health Physician Network can be submitted online. Visit **englewoodhealth.org/medicalrecords**.

In Person Fill out an authorization form, available in the hospital's main lobby or by downloading it from **englewoodhealth.org/medicalrecords**. For assistance with medical records, call **201-894-3169**.

Post-discharge Phone Calls

After you leave the hospital, you may receive a phone call from a nurse to clarify discharge instructions and ensure that you know who to follow up with. We also want to be sure that you have the opportunity to express your perception of your hospital stay.

Patient Experience Survey

Upon discharge, you may receive either an electronic survey or a paper survey in the mail asking about your experience while in the hospital. It is your opportunity to let us know how you feel about the care that we provided. We encourage you to participate.

SECTION 2

INFORMATION FOR VISITORS

Visiting Hours and Policy

Our general visiting hours are 8 am – 8 pm. Two visitors are permitted at one time. Some units have exceptions and additional restrictions. Visitation is also subject to change during periods of high incidence of respiratory viruses (such as flu and COVID) in the areas.

For the most current visiting hours and policy, please

- Visit englewoodhealth.org/visitors
- Call the Patient and Family Engagement Department, **201-894-3980** during business hours
- Call the information desk, **x4006**
- Ask your nurse or the nurse manager or supervisor

Safety, Security, and Patient Privacy

- Patients have the right to limit their visiting hours and to choose their guests.
- At all times, the needs of a patient's roommate will be taken into consideration.
- All guests must obtain a pass at the Information Desk, wear it visibly at all times, and return it upon departure.
- Guests who are sick or who have been exposed to a contagious illness will be asked not to visit.
- Patient care is our first priority. At times, guests may be asked to step out of the room to ensure patient care, privacy, and comfort.
- All persons entering and exiting patient rooms must sanitize their hands thoroughly with an alcohol-based rub or soap and water.
- Guests may not bring in or use tobacco products, alcohol, or illicit drugs, and may not provide patients with any prescription or over-the-counter medication.
- Guests may not use patient bathrooms, beds, supplies, or equipment.
- For the safety of patients and staff, Englewood Hospital reserves the right to inspect all bags and packages.

All guidelines are subject to change if/when an actual or suspected outbreak of an infectious disease threatens the health and safety of our patients, staff, and/or the community.

Visitor Amenities

Cafeteria and Vending Machines

Our Drapkin Family Cafe is located on the main level of the hospital and is open for guests between 6:30 a.m. and 8 p.m. to dine in or take food to go. Coffee and light treats are available until 11 p.m. Monday – Friday. We offer a wide selection of hot and cold food and beverages, including a breakfast bar, salad bar, a grill station, panini and sandwiches made to order, soups, Korean specialties, Kosher items, desserts, coffee and tea, and more.

Vending machines are available near the cafe as well as in the Emergency Department and in patient care units.

Coffee Time Lobby Cafe

Located in our main lobby, the Coffee Time cafe serves Starbucks coffee and products to go. Hours are Monday – Friday, 6 a.m. – 8 p.m. and Saturday and Sunday, 8:00 a.m. – 3:00 p.m. The cafe is closed on holidays and for short breaks throughout the day. We accept cash, credit cards, and Drapkin Family Café gift cards. Sorry, we do not accept Starbucks® gift cards, mobile app, or coupons.

Gift Shop

Located on the main level near the cafeteria, the Edith and Walter Kleineke Hospitality Shop offers a wide variety of merchandise. A flower delivery service is also available. The gift shop's hours of operation are Monday – Friday, 11 a.m. – 6 p.m. For more information, call **201-894-3000 ext. 4118**.

You can also place orders online and have them delivered to patients.

Overnight Stays

If a patient's visitor cannot travel to and from the hospital due to religious restrictions, a limited number of rooms are available in the medical center. To reserve a room, please call the Pastoral Care Department at 201-894-3228, Monday through Friday, 8 a.m. – 4 p.m. After hours, please call 201-894-3000 or (0 from within the medical center) and ask for the nursing supervisor on duty.

Local Hotel Accommodations

The following hotels are located near the medical center. Please contact the hotel directly to inquire about special rates for patients' families.

- **Best Western, Fort Lee:**
201-461-7000
- **Clinton Inn, Tenafly:**
201-871-3200
- **Crowne Plaza, Englewood:**
201-871-2020
- **Holiday Inn, Fort Lee:**
201-944-5000
- **DoubleTree by Hilton, Fort Lee:**
201-461-9000

Inclusion in this list does not imply endorsement of any hotel.

SECTION 3

BILLING AND INSURANCE INFORMATION

Understanding Your Bill

We will bill your insurance company directly for the services you receive. This bill will include the charges for the hospital only, not for the physicians' services. Once your insurance company has processed the claim, we will send you a bill for the balance deemed your responsibility by your insurance company. You will receive separate bills from any physicians who were involved in your care.

Hospital bills can be complex. Please call us at 201-894-3031 if you have questions about your hospital bill. If you have questions about bills received from physicians, please contact the customer service number on the bill.

In Network vs. Out of Network

Although Englewood Hospital participates in most insurance plans, there may be some plans with whom we do not have a contract. Receiving care from an out-of-network hospital could increase your out-of-pocket costs. To verify your cost for out-of-network services, contact your insurance company directly.

IN ADDITION, THE PHYSICIANS WHO PROVIDE CARE WITHIN OUR HOSPITAL MIGHT NOT PARTICIPATE IN THE SAME INSURANCE PLANS AS THE HOSPITAL. You should directly contact your insurance company or the physician who is arranging your healthcare services to see which insurance plans the physician participates in. You should also know that these healthcare professional(s)' costs are not included in the facility's charges. They will bill separately.

On the next page is a list of the physicians or physician groups that have a contract with the hospital to provide certain healthcare services that prevents us from using any other physicians for these services. Regardless of the physician's relationship with Englewood Hospital, these healthcare professionals' costs are never included in the facility's charges and you will still receive a separate bill for these services. Please note that this list DOES NOT represent an exclusive list of physicians who may provide professional services to you while at Englewood Hospital.

- **Teamhealth Anesthesia:**
350 Engle Street, Englewood, NJ 07631;
888-983-4885
- **Englewood Pathologists, PA:**
350 Engle Street, Englewood, NJ 07631,
201-894-3420
- **Englewood Radiologic Group:**
350 Engle Street, Englewood, NJ 07631;
800-889-4447

Financial Assistance and Billing Policies

In accordance with our Financial Assistance Policy, all uninsured patients who have not been approved for Medicaid or Charity Care receive financial assistance at Englewood Health. These patients are billed a percentage of their actual charges at a "discounted rate" that greatly reduces the amount of the bill that the patient will have to pay. An uninsured patient will not be charged more than the discounted rate for emergency or other medically necessary care.

An uninsured patient does not need to apply for assistance because all uninsured patients automatically qualify and are billed at the discounted rate described above. There is no qualifying criteria other than the patient having no insurance and the service provided being emergent or medically necessary.

The following policies are available on our website and upon request.

- Financial Assistance Policy
- New Jersey Hospital Care Payment Assistance Program (Charity Care)
- Billing and Collections Policy

Customer Service

Patient Billing and Financial Counseling Department
Englewood Health
350 Engle Street
Englewood, NJ 07631
201-894-3031

Hours: Monday – Friday,
9 a.m. – 5 p.m.

To visit in person, please ask for directions at the Information Desk.

Related Phone Numbers

- **Charity Care:** 201-894-3918 or 3087
- **Pricing Inquiries/CPT Coding:**
201-894-3956
- **Medicaid Caseworker:** 201-894-3513
- **Assistance with Medicaid Applications:**
201-894-3643/3060
- **Managed Care:** 201-894-3029

SECTION 4

PATIENT RIGHTS AND RESPONSIBILITIES

Englewood Hospital, part of Englewood Health, is committed to educating patients and their families on their rights under Federal and NJ State Laws. As a patient at Englewood Hospital, you have the following rights and responsibilities:

Patient Rights

Medical Care

To receive the care and health services that Englewood 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. This release of information and the reason for not informing you directly shall be documented in the medical record;

To be informed if Englewood Hospital has authorized other health care and educational institutions to participate in your treatment. You also shall have a right to know the identity and function of these institutions, and to refuse to allow their participation in your treatment;

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 that you understand, specific details about the recommended procedure, treatment, any risks involved, time required

for recovery and any reasonable medical alternatives;

To refuse medication and treatment to the extent permitted by law after possible consequences of this decision have been explained. Such refusal shall be documented in your medical record. You also have the right to request treatment;

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

To complete an Advance Directive outlining your wishes related to health care should you become incapacitated and to have your medical team comply with your wishes;

To participate in the planning of your care and treatment, and to refuse medication and treatment. Such refusal shall be documented in your medical record;

Communication and Information

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

To receive, free of charge, aids and services for people with disabilities, to communicate effectively, such as written information in other formats including large print and electronic;

To receive, as soon as possible, the services of a qualified interpreter, free of charge, if you need one, to help you communicate with your medical team. Please request these services from any member of your healthcare team. Written information in other languages is also provided upon request;

To receive, upon request, Englewood Hospital's written policies and procedures regarding life-saving methods and the use or withdrawal of life support;

To receive, upon request, information about how to gain access to and participate in the ethical resolution process surrounding your care;

To be advised in writing of Englewood Hospital's rules regarding the conduct of patients and visitors;

To receive a summary of your patient rights that includes the name and telephone number of the staff member to whom you can direct questions or complaints about possible violations of your rights. If at least 10% of Englewood Hospital's service area speaks your native language, you can receive a copy of your rights in your native language if requested;

Cost of Hospital Care

To receive a copy of Englewood Hospital's payment rates, an itemized bill, if requested, and an explanation of the charges. To appeal any charges, and receive an explanation of the appeals process;

To be informed by Englewood Hospital if part or your entire bill will not be covered by insurance. Englewood Hospital is required to help you obtain public assistance and private health care benefits to which you may be entitled;

Medical Records

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

To obtain a copy of your medical record, at a reasonable fee, within 30 days after a written request to Englewood Hospital;

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 Englewood Hospital;

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

To be informed by Englewood Hospital about any appeal process to which you are entitled by law if you disagree with your discharge;

Pain Management

To receive information about pain and pain relief measures from concerned staff who are committed to pain prevention;

To health professionals who respond quickly to reports of pain and practice state-of-the-art pain management;

Transfers

If you are an inpatient, to be transferred to another facility only when you or your family has made the request, if you are mentally incapacitated; or in instances where Englewood Hospital is unable to provide you with the care you need;

To receive, in advance, an explanation from a physician of the reasons for your transfer and possible alternatives;

Personal Needs

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

To have access to storage space for private use. Englewood Hospital must also have a system to safeguard your personal property;

If you are an inpatient, to contract directly with a NJ licensed registered professional nurse of your choosing for private professional nursing care during your hospitalization;

Freedom from Abuse and Restraints

To freedom from physical and mental abuse and harassment;

To freedom from restraints, unless they are authorized by a physician for a limited period of time to protect the safety of you and others, and other less restrictive measures have been taken. Seclusion and restraints may only be used in combination in an emergency situation to ensure your physical safety and must be monitored continually. Drugs and other medications shall not be used for discipline of patients or for convenience of facility personnel;

To access protective services in cases of abuse or neglect;

To not be required to perform work for the facility unless the work is part of your treatment and is performed voluntarily by you. Such work shall be in accordance with local, State and Federal laws and rules;

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;

To be treated with courtesy, consideration, respect and recognition of your dignity, individuality and right to privacy, including, but not limited to, auditory and visual privacy. Privacy shall also be respected during staff discussions;

Legal Rights

To treatment and medical services without discrimination based on age, race, color, religion, national origin, sex, or sex stereotyping, sexual orientation, domestic partnership or civil union, gender identity or expression, disability, diagnosis, including pregnancy, false pregnancy, termination of pregnancy or recovery from childbirth or related medical condition, ability to pay, or source of payment;

To exercise all of your constitutional, civil and legal rights; To exercise spiritual beliefs and cultural practices, including the right to independent personal decisions, as long as these do not interfere with treatments or harm others. No religious beliefs or practices, or any attendance at religious services shall be imposed upon any patient;

To not be discriminated against because of age, race, religion, sex, nationality, or ability to pay, or deprived of any constitutional, civil and/or legal rights solely because of receiving services from the facility;

Visitation Rights

To receive the visitors designated by the patient, including but not limited to, a spouse, a domestic partner, another family member, or a friend. Also included is the right to withdraw or deny such visitation at any time;

To have a family member, friend, or other individual to be present with the patient for emotional support during the course of the stay, unless the individual's presence infringes on other's rights, safety, or is medically or therapeutically contraindicated.

Patient Responsibilities

To provide accurate and complete information about your present complaints, past illnesses, treatments, medications, hospitalizations and other matters relating to your health;

To report any changes in your condition to your healthcare provider;

To make it known whether you understand a course of action and what is expected of you;

To accept responsibility for refusing to accept a treatment or failing to follow the physician's advice;

To ask your doctor or nurse what to expect regarding pain and pain management;

To discuss pain relief options with your doctor or nurse;

To work with your doctor and nurse to develop a pain management plan;

To ask for pain relief when pain first begins;

To help the doctor and nurse measure your pain;

To tell the doctor or nurse if your pain is not relieved;

To arrive on time and to keep appointments or to notify Englewood Hospital in advance if you are unable to keep appointments;

To assure that your financial obligations to Englewood Hospital are met in a timely manner;

To follow all Englewood Hospital rules and regulations relating to patient care and conduct;

To be considerate of the rights of other patients;

To be courteous and respectful to all Englewood Hospital staff members.

Questions and Complaints/Grievances

You have the right to present questions or grievances to a designated Englewood Hospital staff member and to receive a response in a reasonable period of time.

We would appreciate an opportunity to answer any questions or resolve any concerns directly. You may contact a Patient Representative by dialing **X 3368** or from outside the Medical Center at **201-894-3368**.

Englewood Hospital must provide you with an address and telephone number of the NJ Department of Health agency that handles questions and complaints for this facility. You may contact the NJ State Department of Health Complaint Hotline at **800-792-9770** or:

U. S. Department of Health and Human Services Office of Civil Rights:
Telephone: 800-368-1019
Centralized Case Management Operations
US Department of Health and Human Services
200 Independence Ave, S.W.
Room 509F HHH Bldg.
Washington D.C. 20201
Website: www.hhs.gov/ocr
Email: ocrcomplaints@hhs.gov

Division of Health Facilities Evaluation and Licensing NJ State Department of Health:
Telephone: 800-367-6543
Fax: 609-943-3013
New Jersey Department of Health Division of Health Facility Survey and Field Operations PO Box 367 Trenton, NJ 08625-0367
Website: <https://nj.gov/health>

State of NJ Office of the Ombudsman for the Institutionalized Elderly:
Telephone: 877-582-6995
Fax: 609-943-3479
PO Box 852
Trenton, NJ 08625-0852
Website: <http://www.nj.gov/ooie>
Email: ombudsman@ltco.nj.gov

For information concerning Medicare coverage, call 800-MEDICARE or contact:
Centers for Medicare and Medicaid Services:
Telephone: 877-267-2323
Centers for Medicare and Medicaid Services
7500 Security Blvd
Baltimore, MD 21244

For information concerning Medicaid coverage, contact the Bergen County Board of Social Services Representative located in the hospital or call 201-894-3513.

You have the right to report any safety concerns to The Joint Commission at:
Telephone: 800-994-6610, 8:30 a.m. – 5:30 p.m., Central Time, weekdays
Fax: 630-792-5636
Office of Quality and Patient Safety (OQPS)
The Joint Commission
One Renaissance Boulevard
Oakbrook Terrace
Illinois 60181
Email: patientsafetyreport@jointcommission.org
Website: www.jointcommission.org. Use the “Report a Patient Safety Event” Link in the “Action Center” on the homepage. Reports of patient safety events to The Joint Commission must include the health care organization’s name, street address, city and state.

Your Hospital Stay

Visitor Info

Billing and Insurance

Patient Rights and Responsibilities

Advance Directives

Notice of Nondiscrimination

Englewood Health complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Englewood Health does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. Englewood Health provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and/or written information in other formats (large print, audio, accessible electronic formats, other formats). Englewood Health provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, contact our Patient Relations Department. If you believe that Englewood Health has failed to

provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Patient Relations Department, 350 Engle Street, Englewood, NJ 07631; telephone: **201-894-3368**; email: patrel@ehmchealth.org. You can file a grievance in person or by mail, fax, or email. If you need help, our Patient Relations Department is available. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201, **800-368-1019**, **800-537-7697** (TDD). Complaint forms are available at hhs.gov/ocr.

AR للاستفادة من خدمات المساعدة اللغوية، اتصل على الرقم 201-894-3368.

ES Para asistencia lingüística gratuita, llamar al 201-894-3368.

FR Pour bénéficier d'un service d'aide linguistique gratuit, appelez le 201-894-3368.

GU मद्दत भाषा सहायता सेवाओं माटे 201-894-3368 पर कॉल करो.

HI निशुल्क भाषा सहायता सेवाओं के लिए 201-894-3368 पर कॉल करें।

HT Pou sèvis asistans ak lang gratis, rele 201-894-3368.

IT Per avere servizi gratuiti di assistenza linguistica, chiamare il numero 201-894-3368.

KO 무료 통역 서비스를 원하시면 201-894-3368로 문의바랍니다.

PL Usługi bezpłatnej pomocy językowej zadzwoń 201-894-3368.

PT Para serviços de assistência de idioma grátis, chame 201-894-3368.

RU Для получения бесплатных языковых услуг обращайтесь по телефону 201-894-3368.

TL Para sa mga libreng serbisyo ng tulong sa wika, tumawag sa 201-894-3368.

UR مفت لسانی معاونت کی خدمات کے لیے 201-894-3368 پر کال کریں۔

VI Đối với các dịch vụ hỗ trợ ngôn ngữ miễn phí, vui lòng gọi đến số 201-894-3368.

ZH 如需免费语言协助服务, 请致电 201-894-3368。

SECTION 5

ADVANCE DIRECTIVES

Understanding Advance Directives

What kind of medical care would you want if you were too ill or hurt to express your wishes? Advance directives are legal documents that allow you to spell out your decisions about end-of-life care ahead of time. They give you a way to tell your wishes to family, friends, and health care professionals and to avoid confusion later on.

Englewood Health encourages all patients to complete both types of advance directives, regardless of your health. There are two types of advance directives:

- **Power of Attorney (Proxy Directive):** A durable power of attorney for healthcare is a document that names your healthcare proxy. Your proxy is someone you trust to make health decisions for you if you are unable to do so. This is usually a family member, friend, or other person who understands your feelings and is willing to make decisions for you about accepting, refusing, or withdrawing treatment if you become unable to do so for yourself. This document also allows the healthcare proxy to speak with your medical team and have access to your medical records as needed to make any decisions. This directive can go into effect at any time you may be unable to make decisions, even for a short time, for example, if you are unconscious, heavily medicated, or your decision-making capabilities are compromised.

- **Living Will (Instruction Directive):** A living will tells which treatments you want if you are dying or permanently unconscious. You can accept or refuse medical care. You might want to include instructions on the use of dialysis and breathing machines, if you want to be resuscitated if your breathing or heartbeat stops, tube feeding, and organ or tissue donation. This document will only go into effect if your situation is considered terminal with no hope of recovery, as determined by two doctors. You do not need to have a living will, but having one will avoid many problems. It will let your physician, family, and friends know ahead of time what kind of decisions should be made for you if you become physically or mentally disabled and are unable to decide for yourself. You will receive appropriate medical care whether or not you have an advance directive.

Completing an Advance Directive

1. Before filling one out, you are encouraged to speak with your doctor, family, healthcare representative, or others who may become responsible for following your wishes.
2. Forms are available on the following page, as well as on our website (englewoodhealth.org). To be valid, the document must be signed and dated in the presence of two witnesses (not named as a healthcare proxy) or notarized.
3. After you fill out your advance directive, keep the original and give copies to your appointed healthcare representative (proxy), your physician, and any other family member, close friend, or advisor who is interested in your health and well-being. A copy of the valid document must also be made available to your hospital medical team.

Once you have a valid directive and you are not capable of making decisions for yourself, your requests must be followed by anyone involved in your care. To be valid, the document must be signed and dated in the presence of two witnesses (not named as a health care proxy) or notarized. A copy of the valid document must also be made available for your medical team.

After you fill out your advance directive, we recommend that you keep the original and give copies to your appointed health care representative (proxy), your physician, and any other family member, close friend, or advisor who is interested in your health and well-being.

COMBINED ADVANCE DIRECTIVE FOR HEALTHCARE

Part 1 - PROXY DIRECTIVE (Durable Power of Attorney)

If you wish, you may use this section to designate someone to make treatment decisions or communicate those decisions, if you are unable to do so. If executed below, your Instruction Directive will be in effect even if you have not designated a proxy. Reminder: Keep the original document in a safe place and give a copy to your primary doctor, health care representative(s) and other concerned individuals.

I, _____ designate the following person as my health care representative to make any and all health care decisions for me acting in my best interest, in the event that I become incapable of making or communicating health care decisions.

Name _____ Relationship _____
Street _____ Home Tel: _____
City _____ State _____ Zip _____
Cell # : _____ Work Tel: _____

If the person I have named above is unable or unwilling to act as my health care representative, I hereby designate the following person(s) to do so, in the order named:

1. Name _____ Relationship _____
Street _____ Home Tel: _____
City _____ State _____ Zip _____
Cell # : _____ Work Tel: _____

2. Name _____ Relationship _____
Street _____ Home Tel: _____
City _____ State _____ Zip _____
Cell # : _____ Work Tel: _____

SPECIFIC DIRECTIONS: Please initial the statement below that best expresses your wishes:
____ My health care representative is authorized to direct that artificially provided fluids and nutrition, such as by feeding tube or IV infusion, be withheld or withdrawn.
____ My health care representative does not have this authority, and I direct that artificially provided fluids and nutrition be provided to preserve my life, to the extent medically appropriate.



PART 2 - INSTRUCTION DIRECTIVE (Living Will)

To My Family, Doctors, and All Those Concerned with My Care:

Being of sound mind, I make this statement as a directive to be followed if for any reason I become unable to make or communicate decisions regarding my health care: (Initial any that apply.)

A. ____1. I direct that life-sustaining procedures be withheld or withdrawn a) if I become permanently unconscious, b) if I have a terminal illness, c) if I experience extreme mental deterioration, or d) if I have another type of irreversible illness. This directive shall only apply if I am determined to have no reasonable expectation of recovery or chance of regaining a meaningful quality of life. These medical conditions shall be determined by my attending physician and at least one additional physician. I understand that I will be kept comfortable.

OR

____2. I direct that all medically appropriate measures be provided to sustain my life, regardless of my physical or mental condition.

If you choose A. 1., above, the life-sustaining procedures that would be withheld or withdrawn include, but are not limited to: CPR, mechanical ventilation, surgery, chemotherapy, radiation, dialysis, transfusion, and antibiotics. Initial the following if it applies to you (see "Terms You Should Understand"):

____In the circumstances described in A. 1., above, I also direct that artificially provided nutrition and fluids be withheld and withdrawn and that I be allowed to die.

B. This section asks you to think about the values that are important to you regarding treatment in cases of severe mental or physical illness. Please initial either of the following if they apply to you:

____ 1. I do not wish my life to be prolonged by medical treatment(s) if my quality of life is unacceptable to me. The following are conditions that are unacceptable to me. (Initial only those that describe a way of living that you could not tolerate):

___ a) Permanently unconscious with a ventilator breathing for me.

___ b) Permanently unconscious with a feeding tube and/or intravenous (IV)

hydration.

___ c) On a ventilator when there is little or no chance of recovery.

___ d) Being conscious (awake), but permanently unable to communicate (for example, with a stroke), and being fed with a feeding tube and/or hydrated with IVs to keep me alive.

___ e) Living with a dementia like Alzheimer's Disease so severe that I am unable to recognize those who love me.

OR

____ 2. I want to live as long as possible, regardless of the quality of life that I experience.

C. ____ Upon my death, I am willing to donate any parts of my body that may be beneficial to others.

Continued on next page

Additional Instructions, Comments or Exceptions:

These directions express my legal right to request or refuse treatment. Therefore, I expect my family, doctor(s), and all those concerned with my care to regard themselves as legally and morally bound to act in accord with my wishes.

Signed _____ Date _____

Print Name _____

This document is not considered legal unless it is signed by the person expressing their wishes in the presence of either (a) two people not named in the document as a health care representative OR (b) by a New Jersey Notary Public.

Witnesses

I declare that the person who signed this document, or asked another to sign this document on his/her behalf, did so in my presence and that he/she appears to be of sound mind and free of duress or undue influence.

Witness _____ Date: _____ Witness _____

_____ Date: _____

STATE OF NEW JERSEY }
 } ss.:
COUNTY OF BERGEN }

Be it Remembered, that on _____, before me, the subscriber, a Notary Public of New Jersey, personally appeared _____ who, I am satisfied, is the person named in and who executed the within Instrument, and thereupon he/she acknowledged that he/she signed, sealed and delivered the same as his/her act and deed, for the uses and purposes therein expressed.

Notary Public



ENGLEWOOD HOSPITAL



This publication has been reviewed and endorsed
by our Patient & Family Advisory Council, 2024.

350 Engle Street, Englewood, NJ 07631

201-894-3000

englewoodhealth.org