

“Other people may be there to help us, teach us, guide us along our path, but the lesson to be learned is always ours.”

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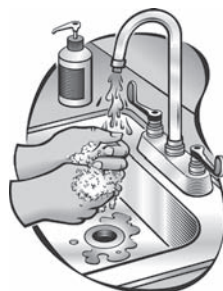
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### Speak Up

*Take charge of your care.*



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### Stay Safe

*You can contribute to health care safety.*



### OUR ADDRESS

One Robert Wood  
Johnson Place  
New Brunswick, NJ 08903



*U.S. News & World Report* has repeatedly **ranked RWJUH** as one of **“America’s Best Hospitals”**.



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# Welcome to Robert Wood Johnson University Hospital

## Dear Friend:

Welcome to Robert Wood Johnson University Hospital (RWJUH) in New Brunswick, New Jersey, where you will receive outstanding care provided by a group of top-ranked physicians and nurses. RWJUH is a 600-bed world-class, nationally distinguished academic medical center. We are the principal teaching hospital of UMDNJ-Robert Wood Johnson Medical School and a state-designated Level I Trauma Center. Our centers of excellence include heart, cancer, and women's and children's care. We are the flagship hospital of The Cancer Institute of New Jersey, and our children's health campus features the full spectrum of acute care, research and rehabilitation services. Our health system also includes affiliates Robert Wood Johnson University Hospital at Hamilton, Robert Wood Johnson University Hospital at Rahway and Children's Specialized Hospital.

Our culture of teamwork, inspiration and medical excellence is nationally recognized. In 2010, RWJUH was ranked among "America's Best Hospitals" for the fourth consecutive year by *U.S. News and World Report*. In addition, RWJUH is also a recipient of the prestigious Magnet Award for Nursing Excellence for more than 10 consecutive years.

We embrace our responsibility to lead our community, state and nation in providing excellent patient care and access to the most advanced medical research and technology. I invite you to further explore our services at [www.rwjuh.edu](http://www.rwjuh.edu).

Please know that your comfort and care is our top priority. We look forward to returning you to good health in the days ahead.

Sincerely,

Stephen K. Jones  
*President and Chief Executive Officer*



Stephen K. Jones  
*President and  
Chief Executive Officer*

## Mission Statement

To improve the health, well being, safety and security of the patients and communities we serve through the highest quality care, community outreach, scientific research and education of health care professionals.





# Patient Satisfaction

## Providing Feedback.

RWJUH uses Press Ganey to administer our integrated survey tool to measure our patients' satisfaction with their hospitalization. Patients are chosen randomly and it is our hope that you will provide us feedback on how we have met your expectations. The standard of care is to "always" provide "very good" care. A rating of 5 equals "very good" on our survey tool. Providing comments regarding all aspects of your stay will enable us to recognize outstanding care providers and help us to correct areas that may need our attention. All of our patients comments are read and shared with our hospital team.

## TO CONTACT

**Patient Satisfaction call:**  
M-F 9 a.m. to 5 p.m.:  
Pager 2000  
or you may always leave  
a message at x 8501

## Exceptional People Providing Exceptional Care

At Robert Wood Johnson University Hospital we understand that being hospitalized can be hard for both you and your family. It is our top priority to make sure that your time here is the best that it can be. Please let us know when our staff exceeds your expectations; we reward and recognize the great employees that we have at RWJUH who are making a difference in providing exceptional patient care. If, however, you encounter any concerns or problems during your stay, we have many services available to ensure they get the attention they deserve. Telling us about any issue, no matter how small, will enable us to correct it and improve your patient care experience. The Nursing Director or Head Nurse of the unit is the place to start for any issues that may arise; they often can find resolution quickly.

RWJUH has a patient satisfaction department that is focused on the improvement of the patient's and family's experience during hospitalization. If you wish to speak with a member of this team, they are available Monday through Friday from 9 a.m. to 5 p.m. via pager. Dial 2000 from your hospital room phone and someone will be available to assist you. Additionally, you may always leave a message during other hours at ext. 8501.





# Telephone Directory

Admitting	732-937-8602
Audiology & Speech Pathology	732-937-8655
Billing	732-937-8533
Community Education	732-418-8820
Diabetes Education	732-253-3100
Directions to Hospital	732-828-3000 ext. 5060
Discharge Planning	732-937-8702
Emergency Department	732-828-3000 ext. 8944
Gift Shop	732-828-3000 ext. 2016
Information Desk	732-937-8508
Local Calls	Dial 9 + the number
Medical Records	732-937-8717
NBAH Blood Donor Program	732-235-8100
Pastoral Care	732-937-8504
Patient Relations	732-937-8501
Patient Telephone and TV Services	732-828-3000 ext. 2390
Physician Referral	1-888-MD-RWJUH
Privacy Officer	732-828-3000 ext. 5463
Room Service Dining	732-828-3000 ext. 3463
Safety and Security	732-828-3000 ext. 8899
Social Services	732-937-8702
Volunteer Services	732-937-8507

## CLINICAL SERVICES

The Cancer Institute of New Jersey	732-235-2465
Clinical Academic Building	732-235-6200
Laboratory	732-937-8590
Radiation Oncology	732-828-3000 ext. 3940
Radiology	732-937-8617
Speech and Hearing	732-937-8655

*\*To find a physician, please call 1-888-MD-RWJUH*

Please visit us online at [www.rwjuh.edu](http://www.rwjuh.edu)

**Calling a Department WITHIN the Hospital?**

***Dial the last four digits of the number.***

## MAIN NUMBER

**732-828-3000**

**Patient Information/  
Lobby**

732-937-8508

**Discharge Planning**

732-937-8702

**Billing**

732-937-8533

**Gift Shop**

732-828-3000 ext. 2016

**Room Service Dining**

732-828-3000  
ext. 3463 (DINE)





# During Your Stay

## Valet Parking

Visitors are encouraged to use our valet parking service available Monday through Friday from 5 a.m. to 5 p.m.

## Hospital parking deck:

Monday through Friday up to 3 p.m. and anytime after 7 p.m. as well as holidays and weekends

## Mobile Web

RWJUH offers free internet access for patients and visitors who bring their personal laptops to the hospital. To access this service:

1. Connect to the "RWJUH" network
2. Open a web browser such as Internet Explorer or Mozilla
3. Follow on-screen instructions to create a user account. (Subsequent visits may require entry of login information.)

Please note that this service is not supported for all mobile devices at this time.

At Robert Wood Johnson University Hospital we understand that families are vital to ensuring the health and well being of our patients. We welcome open visitation to all of our families, knowing this is beneficial to our patients' healing process.

## Welcome Visitors!

We like to promote a healing environment and we recognize the need you have to be with your loved ones.

- Daily visiting hours are from 10 a.m. to 9 p.m.
- Visitors will be directed by staff to provide a form of government identification and indicate the name of the patient they are visiting.
- Visitors will receive a visitor pass that must be displayed at all times in the hospital.

## Primary Supports

Primary supports are the individuals designated by the patient, family and nurse who will have the most access to the patient.

In order to identify them, primary supports will be issued a wrist band, which allows them to visit after or before permitted visiting hours. In the adult hospital, only one visitor per family, per day will be issued a band.

## Parking

Parking is available for visitors in the hospital's parking garage. Valet parking is available in front of the main lobby on Somerset Street Monday through Friday from 5 a.m. to 5 p.m. at the same hourly rate designated for the hospital parking decks. Vehicles parked in unauthorized areas are subject to towing at the operator's expense. Discounted and courtesy parking services are provided at the Courtyard Information Desk.

## Interpreters

Robert Wood Johnson University Hospital is committed to providing the best communication process for all of our patients. Any patient who requires special



techniques or equipment in order to communicate more effectively will be provided these services at no charge and in a timely manner. RWJUH offers the following communication services:

**Foreign Language Interpretation:** An interpreter will be provided via certified staff or through the use of a telephone conferencing system.

**Sign Language Interpretation:** An interpreter will be provided through a video conferencing system.

**Assistive Listening Device for the Hard of Hearing:** A portable amplification system (Pocket Talker) is available for patients requiring amplification during their stay.

**TTY/TDD:** Telephone system for the deaf is available for bedside use. A TTY/TDD is also available 24/7 at the main information desk for the general public.

**Closed Captioning:** Closed captioning is available on all patient televisions and in public areas throughout the hospital. (Television rental fee applies for patient use.)

**Telephone Amplifier:** All patient and public telephones are equipped with volume controls. (Telephone rental fee applies for patients.)

**Manual Communication Boards:** Manual communication boards are available in English and Spanish for patients with voice problems.

**Electrolarynx:** An electrolarynx is available for patients with limited laryngeal function.

Upon your arrival to the hospital, it is recommended that you notify a staff member of your need for any special communication services.

## Telephone & Television Service

RWJUH offers TV service with enhanced channels, interactive capabilities and patient education programs available on demand through an easy third-party billing service. Television and telephone services can be obtained by calling extension 2390. To make a local telephone call, dial 9 for outside services. Both 732 and 908 area codes are considered local calls. For all other calls, dial 70, area code and phone number.

## Gift Shop

The Gift Shop is located off the main lobby of the hospital. The hours are Monday through Friday from 9 a.m. to 8 p.m. and 11 a.m. to 5:30 p.m. on Saturday and Sunday.

Cash and credit cards (with a minimum \$10 purchase) are both accepted.

The Gift Shop can be reached by calling x2016. The Gift Shop is run by the Women's Auxiliary and all proceeds are donated to the hospital.

## Smoking

There is no smoking within the hospital. The only designated smoking area is located on level B3 of the parking garage.

## ATM

For your convenience, an automated teller machine (ATM) is located on the second floor of the hospital adjacent to the Courtyard. A second ATM is located adjacent to the Safari Café near the lobby of The Bristol-Myers Squibb Children's Hospital.



# During Your Stay

## Where's The Dining Room?

### LOCATION

Second floor above the main lobby

All guests are welcome to visit The Dining Room.

### HOURS

Monday - Friday  
6:30 a.m. to 8 p.m.

### WEEKENDS AND HOLIDAYS

6:30 a.m. to 6:30 p.m.

### ROOM SERVICE DINING

#### Call x3463 (DINE)

A registered dietitian will review your medical record and work with your health care team to develop a nutrition care plan for you.

- call for your meals when you are ready to eat
- delivered to you within 45 minutes
- available from 7 a.m. to 7 p.m.

Registered dietitians are also available to educate you about any diets you may need to follow after you are discharged.

## The Dining Room

The Dining Room is located on the second floor of the hospital, just above the main lobby. The hours of operation are Monday through Friday from 6:30 a.m. to 8 p.m. Weekend and holiday hours are Monday through Friday from 6:30 a.m. to 6:30 p.m. The dining room does not accept credit cards or checks, only cash.

The Safari Café is located on the first floor of The Bristol-Myers Squibb Children's Hospital and features bagels, fruit, coffee sandwiches and a variety of beverages. It is open Monday through Friday from 6:30 a.m. to 4 p.m.

Vending machines are located outside of the Dining Room entrance and are available 24 hours a day. A Kosher vending machine is available on the second floor of the hospital adjacent to the Courtyard.

## CaringBridge

RWJUH recently partnered with CaringBridge to offer friends and family of patients the opportunity to set up their own free, unique, personal Web sites to allow family members to share important information and update conditions for everyone who wants to know.

### How it works:

1. Visit [www.caringbridge.org](http://www.caringbridge.org)
2. Click on "Create a CaringBridge site" and follow the easy directions
3. Tell your friends and family about your CaringBridge site.

## Pastoral Care

Hospital Chaplains who are trained to work with people of all faiths can bring a spiritual dimension to your care. A Hospital Chaplain is available to you and your family 24 hours of every day. You can reach the Chaplain by asking your Nurse to make the contact, by calling the Pastoral Care Office at extension 8504, or by asking the Operator (dial 0) to page the Chaplain on call. Chaplaincy services are always free of charge. Chaplains can listen to you, pray with you and encourage you, and help you mobilize your



spiritual resources for healing. They are also available to educate you on the preparation of an Advance Directive. Clergy of all faiths are welcome to visit their congregants. If you wish assistance in contacting your clergy or spiritual advisor, please call the Pastoral Care Office.

## Valuables

RWJUH is not responsible for the replacement of any valuables that were not checked in with our security staff.

We recommend the following for keeping your valuables safe:

- Please have a relative or friend look after your valuables while you are in the Emergency Department or Same Day Surgery areas.
- If you do not have someone to look after your valuables, please ask your nurse to speak to a member of our security staff. They will check in all of your valuables for safe keeping.
- The following valuables should be stored when not in use:
  - Contact lenses
  - Eyeglasses
  - Hearing aids
  - Dentures (store them in a denture container, if you are in need of a denture container, a member of your health care team would be happy to provide you with one)
- DO NOT store valuables in your bed, stretcher, gown pockets or food tray. They may be damaged or lost.
- Durable medical equipment such as wheel chairs, braces, canes, and walkers will be labeled with your name and medical record number.
- If you are unable to secure durable medical equipment at your bedside, you may check the equipment in with our security department.

Our security staff is happy to check-in and return items to you 24/7.

If you have any questions, please speak with a member of your health care team or contact our Security Department at 732-937-8899.



## eCard Service

A new way for friends and family members to brighten a patient's day, RWJUH now offers a free online service to send patients a personalized get well message.

### How does it work?

1. Visit [www.rwjuh.edu/ecard](http://www.rwjuh.edu/ecard).
2. Complete the brief online form and select a card design.
3. Once submitted, a member of the RWJUH team will print and hand-deliver the card to the patient.

Please see eCards Web page for terms and conditions.

“Boldness be my friend.”

# Speak Up!

*Take charge of your care.*

**D**uring your stay, the doctors, nurses and staff at RWJUH will treat you and your family as partners in your own care. One important way that you can be involved is to speak up. Ask questions, voice your concerns, and don't be afraid to raise any issues relating not only to your care and treatment, but also to overall hospital services.



This patient guide will help you make the most of your hospital stay—how to stay safe, get the information you need, ask the right questions, and interact effectively with your doctors, nurses and hospital staff, but it is up to you to play an active role in your care.

## STAT NOTE

- Write down any questions you have
- Choose a family member to communicate with the doctors and staff
- Keep a list of doctors you see and the medications they prescribe

*RWJUH is certified by the Joint Commission.*

See *My Medications* to keep track of what you are given in the hospital.

## STEP UP & SPEAK UP SPEAK UP

Ask questions and voice concerns. It's your body and you have a right to know.

## PAY ATTENTION

Make sure you're getting the right treatments and medicines.

## EDUCATE YOURSELF

Learn about the medical tests you get and your treatment plan.

## FIND AN ADVOCATE

Pick a trusted family member or friend to be your advocate.

## WHAT MEDS & WHY

Know what medicines you take and why you take them.

## CHECK BEFORE YOU GO

Use a hospital, clinic, surgery center or other type of health care organization that meets the Joint Commission's quality standards.

## PARTICIPATE IN YOUR CARE

You are the center of the health care team.

*Courtesy of The Joint Commission.*

“It is impossible to travel faster than the speed of light, and certainly not desirable, as one’s hat keeps blowing off.”

# Sudoku

Fill in the blank squares so that each row, each column and each 3-by-3 block contain all of the digits 1 thru 9.

			5			4		3
			9	8	3			
		6		4		9	1	
9		3	2			7	6	8
4	5						9	2
6	7	2			9	1		4
	8	5		2		6		
			3	9	5			
7		9			8			

©2008 KrazyDad

**MIND TEASER**

**WINEEEEE**

ANSWER: WIN WITH EASE

ANSWER KEY

7	1	3	5	8	6	4	9	2
1	7	2	8	5	9	3	4	6
3	9	4	6	7	2	1	5	8
6	4	5	1	9	3	8	2	7
4	2	9	3	1	7	6	8	5
9	8	6	7	4	5	2	3	1
8	5	1	9	2	7	4	6	3
5	6	7	2	3	8	9	4	1
2	3	8	4	6	1	5	7	9

“Fear is the father of courage  
and the mother of safety.”



## YOU'RE IN CHARGE

While rare, errors can occur during your hospital stay. They can involve medications, procedures or paperwork.

You can help prevent errors by taking charge of your care. Be sure to:

- stay informed about your medical condition
- know the details of your treatment plan
- understand the tests and procedures you will undergo

Your doctor can answer these questions. Take notes when you speak with your doctor, or have a trusted friend or family member take notes for you, so you can refer to them later. Also ask for any written information your doctor may be able to provide about your condition and/or treatments. Remember—you're in charge.

# Stay Safe

*You can contribute to health care safety.*

While you are in the hospital, many people will enter your room, from doctors and nurses to aides and orderlies. The following information will help make your hospital stay safe and comfortable.

## Don't Be Afraid to Ask...

A number of people may enter your hospital room. Be sure to:

- Ask for the ID of everyone who comes into your room.
- Speak up if hospital staff don't ask to check your ID.
- Ask if the person has cleaned their hands, using either an alcohol-based hand rub or by use of soap and water before they touch you.
- If you are told you need certain tests or procedures, ask why you need them, when they will happen, and how long it will be before you get the results.

## Fighting Infections

RWJUH takes infection prevention very seriously. The single most important thing you can do to help prevent infections is to clean your hands and make sure that everyone who touches you—including your doctors and nurses—clean their hands, too.

*You, your family and friends should clean your hands:*

1. after touching objects or surfaces in the hospital room
2. before eating
3. after using the restroom

It is also important that your healthcare providers clean their hands with either soap and water or with an alcohol-based hand cleaner every time, both before and after they touch you. Healthcare providers know to practice hand hygiene (the phrase we use for cleaning hands). You and your family should not be afraid or embarrassed to speak up. It's OK to ask us if we've cleaned our hands.

## Preventing Medication Errors

Take part in your own care by following these suggestions:

Be sure that all of your doctors know what medications you have been taking, including prescription drugs, over-the-counter medications, herbal and vitamin supplements, natural remedies and recreational drugs.

Be sure that all of your doctors know of any allergies you may have—to medications, anesthesia, foods, latex products, etc.

When you are brought medications or IV fluids, ask the person to check to be sure you are the patient who is supposed to receive the medications. Show that person your ID bracelet to double-check. Remember, you play an important role in helping to reduce medication errors.



## Thoroughly clean

When cleaning your hands with soap and warm water, make sure to scrub the back of your hands.



## No Soap? No Problem

Alcohol-based hand cleaners are as effective as soap and water in killing germs.

To use, apply the cleaner to the palm of your hand and rub your hands together. Keep rubbing over all the surfaces of your fingers and hands until they are dry.



Patients of **all ages are at risk of falls** because of medications that may make them **dizzy, weak, or unsteady**.

### Know Your Meds

While you are hospitalized, your doctor may prescribe medications for you. Be sure that you understand exactly what they are and why they are being prescribed. Use this checklist to help you get the information you need from your doctor:

- What is the name of the medicine?
- What is its generic name?
- Why am I taking this medicine?
- What dose will I be taking? How often, and for how long?
- What are the possible side effects?
- Can I take this medicine while taking my other medications or dietary supplements?
- Are there any foods, drinks or activities that I should avoid while taking this medicine?

**USE THE MEDICATION TRACKER ON PAGE 44 TO HELP YOU MONITOR YOUR MEDICATIONS.**

### Preventing Falls

Patients often fall because they are on medications that make them dizzy, they are weak and unsteady due to illness or medical procedures, or because they've been sitting or lying down for too long. For your safety, please:

- Always call for assistance before getting out of bed.
- Keep the call button within easy reach.
- Have necessary items within reach, such as your glasses, tissues, the telephone, and anything else you need.
- When you get assistance, rise slowly from your bed or chair to prevent dizziness.
- Walk close to the wall and hold onto the handrail while in the bathroom.

### DVT: LOWER YOUR RISK

Deep-vein thrombosis (DVT) occurs when blood clots form in the legs and block circulation. The clots can lodge in the brain, heart or lungs, causing damage or even death. When you're hospitalized and in bed with limited physical activity, your risk of DVT increases.

Ask your doctor about using compression boots or stockings and/or blood thinners to prevent DVT during your stay.

Tell your doctor or nurse if you have any of the following warning signs:

-----  
A leg cramp or charley horse that gets worse

-----  
Swelling and discoloration in your leg, upper arm or neck

-----  
Unexplained shortness of breath

-----  
Chest discomfort that gets worse when you breathe deeply or cough

-----  
Light-headedness or blacking out



# Your Rights & Responsibilities

■ As a patient, you have the right to respectful and considerate care. In addition, there are specific rights and responsibilities you have during your hospital stay.

## Patient Rights

Upon your admission, you will receive a copy of the Patient Bill of Rights. A copy of these rights is posted in each patient room. These rights represent our commitment to your care, comfort and safety while in the hospital.

Safety and healthcare delivery is enhanced when the patient is a partner in the healthcare process. The hospital needs your participation regarding the following responsibilities:

- ✓ **Provide information.** Patients and families, as appropriate, must provide, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, medical history, hospitalizations, medications and other matters relating to the patient's health. Patients and families must report perceived risks to care and unexpected changes in the patient's medical condition.
- ✓ **Ask questions.** Ask questions when you do not understand care, treatment or what you are expected to do.
- ✓ **Follow instructions.** Follow the instructions and medical orders of doctors, nurses and other allied health professionals. Express any concerns about your ability to follow your healthcare plan. Hospital staff will make every effort to adapt the plan to your needs and limitations. If we disagree with adaptations to the care plan, we will inform you of the consequences of failing to follow the recommended plan.

While in the hospital, we ask that you:

- ✓ Cooperate with hospital personnel.
- ✓ Be considerate of other patients, hospital staff and property.

## Respiratory Hygiene/ Cough Etiquette

To help stop the spread of germs, please

- Cover your mouth and nose with a tissue when you cough or sneeze.
- Put your used tissue in the waste basket.
- If you don't have a tissue, cough or sneeze into your upper sleeve or elbow, not your hands.
- You may be asked to put on a facemask to protect others.
- Wash your hands often with soap and warm water or use an alcohol-based hand rub.

## Legal Rights

- To treatment and medical services without discrimination based on race, age, religion, national origin, sex, sexual preferences, handicap, diagnosis, ability to pay or source of payment.
- To retain and exercise to the fullest extent possible all the constitutional, civil and legal rights to which the patient is entitled by law.



# Your Rights & Responsibilities



Every hospital patient shall have the following rights, none of which shall be abridged by the hospital or any of its staff. The hospital shall be responsible for developing and implementing policies to protect patient rights and to respond to questions and grievances pertaining to patient rights.

- ✓ Help control noise and the number of visitors.
- ✓ Follow hospital rules and regulations.
- ✓ Comply with the hospital's "No Smoking" policy.
- ✓ Provide information necessary for processing your insurance coverage.
- ✓ Be responsible for any item of your bill not covered by your insurance.
- ✓ Provide an Advance Directive (i.e. Living Will, Durable Power of Attorney, etc.) or advise the hospital that there is no Advance Directive.

## Medical Care

### *Patients have the right:*

- To receive the care and health services that the hospital is required to provide under N.J.S.A. 26:1-1 et seq. and rules adopted by the Department of Health and Senior Services to implement this law.

- 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 condition, recommended treatment, risk(s) of the treatment, expected results and reasonable medical alternatives. 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 his or her next of kin or guardian and documented in the patient's medical record.

- To give informed, written consent prior to the start of specified non-emergency procedures or treatments only after a physician or clinical practitioner has explained – in terms that the patient understands – specific details about the recommended procedure or treatment, the risks involved, the possible duration of incapacitation, and any reasonable medical alternatives for care and treatment. The procedures requiring informed, written consent shall be specified in the hospital's policies and procedures. If the patient is incapable of giving informed, written consent, consent





shall be sought from the patient's next of kin or guardian or through an advance directive, to the extent authorized by law. If the patient does not give written consent, a physician or clinical practitioner shall enter an explanation in the patient's medical record.

- To refuse medication and treatment to the extent permitted by law and to be informed of the medical consequences of this act.
- To be included in experimental research only when he or she gives informed, written consent to such participation, or when a guardian provides such consent for an incompetent patient in accordance with law and regulation. The patient may refuse to participate in experimental research, including the investigations of new drugs and medical devices.
- To freedom from physical and mental abuse.
- To freedom from restraints, unless they are authorized by a physician for a limited period of time to protect the patient or others from injury.
- To expect and receive appropriate assessment, management and treatment of pain as an integral component of that person's care, in accordance with N.J.A.C. 8:43E-6.

### **Communication and Information**

- To be informed of the names and functions of all physicians and other health care professionals who are providing direct care to the patient. These people shall identify themselves by introduction or by wearing a name tag.
- To receive, as soon as possible, the services of a translator or interpreter to facilitate communication between the patient and the hospital's health care personnel.

### **Safe Patient Handling Program**

RWJUH wants our patients to be cared for safely. An important part of providing you with safe care is how we help you move or transfer from one place to another. "Safe Patient Handling" is a safer way to help you move and transfer. It is a new approach that puts safety first. The staff will be using special kinds of equipment that are made for moving and transferring patients safely and comfortably. Our staff will consider your special needs to decide which equipment will work best to keep you and the staff that provide your care as safe as possible. If you have any questions or concerns about our Safe Patient Handling Equipment, please speak with your nurse.



# Your Rights & Responsibilities

## PRIVACY OFFICER

Robert Wood Johnson  
University Hospital  
1 Robert Wood  
Johnson Place  
New Brunswick,  
New Jersey 08903

Telephone Number:  
(732) 828-3000  
extension 5463

## Bioethics Committee

Robert Wood Johnson University Hospital has a Bioethics Committee available to discuss ethical concerns regarding patient care. In the event that these issues arise, the committee, comprised of physicians, medical ethicists, clergy, care providers and members of the community, will review the issues and make recommendations to provide guidance and support. Anyone directly involved can request a consultation with the committee by contacting the committee chairperson through their physician, nurse, chaplain or social worker.

- To be informed of the hospital's policies and procedures regarding life-saving methods and the use or withdrawal of life-support mechanisms. Such policies and procedures shall be made available promptly in written format to the patient, his or her family or guardian, and to the public, upon request.

- To be advised in writing of the hospital rules and regulations that apply to the conduct of patients and visitors.

## Privacy and Confidentiality

- To be informed if the hospital 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 may refuse to allow their participation in the patient's treatment.

- To have physical privacy during medical treatment and personal hygiene functions, such as bathing and using the toilet, unless the patient needs assistance for his or her own safety. The patient's privacy shall also be respected during other health care procedures and when hospital personnel are discussing the patient.

- To confidential treatment of information about the patient. Information in the patient's records shall not be released to anyone outside the hospital 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, a medical peer review or the New Jersey Department of Health and Senior Services.. The hospital may release data about the patient for studies containing aggregated statistics when the patient's identity is masked.



## Discharge Planning

- To be informed by the attending physician and other providers of health care services about any continuing health care requirements after the patient's discharge from the hospital. The patient shall also have the right to receive assistance from the physician and appropriate hospital staff in arranging for required follow-up care after discharge.
- To receive sufficient time before discharge to have arrangements made for health care needs after hospitalization.
- To be informed by the hospital about any discharge appeal process to which the patient is entitled by law.

## Transfers

- To be transferred to another facility only for one of the following reasons, with the reason recorded in the patient's medical record:
  - i. The transferring hospital is unable to provide the type or level of medical care appropriate for the patient's needs. The hospital shall make an immediate effort to notify the patient's primary care physician and the next of kin, and document that the notifications were received.
  - ii. The transfer is requested by the patient, or by the patient's next of kin or guardian when the patient is mentally incapacitated or incompetent.
- To receive from a physician an explanation of the reasons for transferring the patient to another facility, information about alternatives to the transfer, verification of acceptance from the receiving facility, and assurance that the movement associated with the transfer will not subject the patient to substantial, unnecessary risk of deterioration of his or her medical condition. This explanation of the transfer shall be

## Discharge Planning? 732-937-8702

### RWJUH Medical Services

Level I Trauma Center  
Adult and Pediatric  
Emergency  
Departments  
Comprehensive  
Stroke Center  
Heart Transplantation  
Kidney and Pancreas  
Transplantation  
Radiation Oncology  
Radiology  
Women's Imaging  
(including  
Mammograms)  
Sleep Center  
Neurosciences  
Interventional Radiology  
Bloodless Surgery  
Cardiovascular Surgery  
Orthopedic Surgery  
Prostate Cancer Surgery  
Thoracic Surgery  
Vascular Surgery  
Digestive Disease  
Respiratory Care  
Speech and Hearing  
Physical Therapy  
Occupational Therapy  
Cardiac Rehabilitation  
Diabetes Services



# Your Rights & Responsibilities

## How do I get copies of my medical records?

Requests for record copies may be submitted in person to the Health Information Management Department between the hours of 8 a.m. and 4:30 p.m., Monday through Friday. All requests for copies must be made in writing and the request must be signed by the patient or their legal representative.

The Health Information Management Department will process the request and records will be sent within 30 days of receipt of the request.

If the records are not for continued medical care, there is a charge of \$1.00 per page for record copies. In addition, there is a charge of \$10.00 for record processing plus postage. These fees will be pre-billed.

**Contact number**  
732-828-3000  
ext. 5805

given in advance to the patient, and/or to the patient's next of kin or guardian except in a life-threatening situation where immediate transfer is necessary.

### Personal Needs

- To be treated with courtesy, consideration and respect for the patient's dignity and individuality.
- To have access to individual storage space in the patient's room for the patient's private use. If the patient is unable to assume responsibility for his or her personal items, there shall be a system in place to safeguard the patient's personal property until the patient or next of kin is able to assume responsibility for these items.

### Cost of Hospital Care

- To receive a copy of the hospital payment rates, regardless of source of payment. Upon request, the patient or responsible party shall be provided with an itemized bill and an explanation of the charges if there are further questions. The patient or responsible party has a right to appeal the charges. The hospital shall provide the patient or responsible party with an explanation of procedures to follow in making such an appeal.
- To be assisted in obtaining public assistance and the private health care benefits to which the patient may be entitled. This includes being advised that they are indigent or lack the ability to pay and that they may be eligible for coverage, and receiving the information and other assistance needed to qualify and file for benefits or reimbursement.

### Medical Records

*(Health Information Management)*

- To have prompt access to the information contained in the patient's medical record, unless a physician prohibits such access as detrimental to the patient's health, and explains the reason in the medical record.



## QUESTIONS AND COMPLAINTS

■ To present his or her grievances to the hospital staff member designated by the hospital (Patient Representatives, extension 8501) to respond to questions or grievances about patient rights and to receive an answer to those grievances within a reasonable period of time.

■ The hospital provides below, for each patient or guardian, the name, addresses and telephone numbers of the government agencies to which the patient can complain and ask questions. This information shall also be posted conspicuously in public places throughout the hospital.

New Jersey Department of Health and Senior Services  
P.O. Box 360  
Trenton, NJ 08625-03606  
Complaint Hotline:  
800-792-9770

The Joint Commission  
One Renaissance Blvd.  
Oakbrook Terrace, IL  
60181  
Complaint Hotline:  
800-994-6610

In that instance, the patient's next of kin or guardian shall have a right to see the record. This right continues after the patient is discharged from the hospital for as long as the hospital has a copy of the record.

■ To obtain a copy of the patient's medical record, at a reasonable fee, within 30 days of a written request to the hospital. If access by the patient is medically contraindicated (as documented by a physician in the patient's medical record), the medical record shall be made available to a legally authorized representative of the patient or the patient's physician.

## Private Duty Nursing

■ To contract directly with a New Jersey licensed registered professional nurse of the patient's choosing for private professional nursing care during his or her hospitalization. A registered professional nurse so contracted shall adhere to hospital policies and procedures in regard to treatment protocols, and policies and procedures so long as these requirements are the same for private duty and regularly employed nurses. The hospital, upon request, shall provide the patient or designee with a list of local non-profit professional nurse association registries that refer nurses for private professional nursing care.



# What are Your Advance Directives?

## Advanced Directives—

a living will, health care proxy and durable power of attorney—are the legal documents that allow you to give direction to medical personnel, family and friends concerning your future care when you cannot speak for yourself. You do not need a lawyer in order to complete advance directives.

## Patient Services Advance Directives

■ You have the right to make decisions about your own medical treatment. These decisions become more difficult if, due to illness or a change in mental condition, you are unable to tell your doctor and loved ones what kind of health care treatments you want. That is why it is important for you to make your wishes known in advance. Here is a brief description of each kind of directive:

**Proxy Directive (or Durable Power of Attorney for Healthcare):** In this document you name a person as your healthcare representative to make healthcare decisions on your behalf when you are unable to make these decisions. Your proxy can interpret your wishes to your physicians when you are unable.

**Instruction Directive (or Living Will):** In this document you provide written instructions about the type of healthcare you would want or not want performed for you under various circumstances.

**Combined Directive:** In this document, you name both a healthcare representative and provide written instruction.

All patients entering Robert Wood Johnson University Hospital will be asked upon admission whether they have an Advance Directive, and if so, they will be asked to provide it to the Admissions Coordinator. A copy of the Advance Directive will be made part of your medical record. For additional information you may contact Pastoral Care at extension 8504 or Case Management at extension 8702.

## Your Rights as a Medicare Patient

Hospitals are required by law to give every Medicare patient upon admission and again prior to discharge a notice entitled “An Important Message from Medicare.” This message is stated below:





## Your Rights as a Hospital Patient

- ✓ You have the right to receive necessary hospital services covered by Medicare or covered by your Medicare Health Plan if applicable.
- ✓ You have the right to be involved in any decisions that the hospital, your doctor, your Plan or anyone else makes about your hospital stay.
- ✓ You have the right to receive services you need after you are discharged. The hospital staff will be working with you and your doctor to plan for your discharge and arrange for services you may need after you leave the hospital. Medicare or your Plan may cover some of these services if ordered by your doctor or your Plan. You have a right to know about these services, who will pay for them, and where you can get them.
- ✓ When your doctor or Plan decides you no longer need hospital care or can safely receive care in another setting, you will be informed of your discharge date.
- ✓ If you think you are being discharged too soon, talk to the hospital staff and your doctor about your concerns.
- ✓ If you want to request an appeal about your discharge, you should contact the Quality Improvement Organization (QIO) which is Healthcare Quality Strategies, Inc. at (800) 633-4227. If you request an appeal you and the QIO will receive a notice that explains the reasons that your doctor and the hospital (and your Plan, if applicable) think you are ready to be discharged.
- ✓ The QIO will notify you of its decision within one day after it receives all necessary information. If the QIO finds you are ready to be discharged, you will be responsible for payment of your hospital services beginning noon of the day after the QIO notifies you of its decision.

## Peer Review Organization

Healthcare Quality Strategies, Inc. (HQS) is contracted by the federal government to ensure Medicare patients receive quality medical care. If you think you are being discharged from the hospital too soon, talk to your doctor. If, after discussing the situation with your doctor, you still feel that you are being discharged too soon, you may refer to the Important Message from Medicare Notice provided to you from the hospital for instructions on appealing your discharge.

For additional information you may contact your case manager at extension 8702.





# Your Privacy

## Notice of Privacy Practices

*This notice describes how medical information about you may be used and disclosed and how you can get access to this information.*

*Please review it carefully.*

### I. Who We Are:

This Notice describes the privacy practices of Robert Wood Johnson University Hospital, and the physicians, nurses, technologists and other individuals that work at Robert Wood Johnson University Hospital (“RWJUH,” “we” or “us”).

### II. Our Privacy Obligations:

We are required by law to maintain the privacy of medical and health information about you and to provide you with this Notice of our legal duties and privacy practices with respect to “Protected Health Information.” “Protected Health Information” generally includes individually identifiable information about your past, present or future physical or mental health, the healthcare you have received or payment for your healthcare. We are required to abide by the terms of this Notice (or other notice in effect at the time of the use or disclosure).

### III. Uses and Disclosures

#### Without Your Authorization:

#### A. Use and/or Disclosure for Treatment, Payment and Healthcare Operations.

Except with respect to uses or disclosures that generally require an authorization (e.g., certain types of marketing, certain psychotherapy notes, etc.), we may use and/or disclose Protected

Health Information without your authorization for certain treatment provided to you, for certain payment purposes, and for certain healthcare operations as detailed below:

1. For treatment purposes. We will use your Protected Health Information to provide you with healthcare, and we will disclose your Protected Health Information to personnel within our facility who provide you with healthcare services or who are involved in your care. For example, if you’re being treated for a knee injury, we may disclose your Protected Health Information to an x-ray technologist in order to coordinate your care. We may also disclose your Protected Health Information for laboratory and pharmacy-related services, and to personnel of another healthcare facility to which you may be transferred.
2. To obtain payments for treatment and services. We may use and disclose your Protected Health Information to personnel within our facility in order to bill and collect payment for the treatment and services we provide to you. For example, we may provide portions of your Protected Health Information to our billing department in order to get paid for the healthcare services we provide to you. If applicable, we may also disclose your Protected Health Information to a health insurance company if you have an agreement with the insurance company which



would authorize us to disclose it. Federal or state law may require us to obtain a written authorization from you prior to disclosing certain specially protected health information for payment purposes, and we will ask you to sign an authorization when necessary.

3. For healthcare operations. We may use and disclose your Protected Health Information within our facility in order to perform support functions necessary for the operation of RWJUH. This includes, but is not limited to, quality improvement, case management, receiving and responding to patient comments and complaints, physician reviews, compliance programs and audits. For example, we may use your Protected Health Information in order to evaluate the quality of healthcare services that you received or to evaluate the performance of the healthcare professionals who provided healthcare services to you.

4. Using your Protected Health Information to contact you. We may access your Protected Health Information in order to contact you to provide appointment reminders, or information about treatment alternatives or other health-related benefits and services that may be of interest to you. Information about you may also be accessed, in a limited manner, in order to contact you to help us raise funds (see section D below for further details).

#### **B. Use or Disclosure for Directory of Patients in RWJUH.**

Unless you disagree or object, we may include your name, location in RWJUH, and/or general health condition and religious affiliation in a patient directory. Information in the directory may be disclosed to anyone who asks for you by name or members of the clergy (provided, however, that religious affiliation will only be disclosed to members of the clergy).

#### **C. Disclosure to Family, Friends or Others.**

We may provide your Protected Health Information to a family member, friend or any other person you indicate that is either involved in your care or the payment for your healthcare, unless you object in whole or in part. If your opportunity to agree or object cannot practically be provided because of an emergency situation, we may disclose your Protected Health Information to such a person (but only to the extent that the Protected Health Information is directly relevant to that person's involvement with your healthcare) if we determine that the disclosure is in your best interest.

#### **D. Fundraising Communications.**

We may contact you to request a tax-deductible contribution to support important activities of RWJUH. In connection with any fundraising, we may disclose to our fundraising staff demographic information about you (e.g., your name, address and phone number) and/or dates of healthcare that we provided to you. If you wish to make a tax-deductible contribution now, or



# Your Privacy

do not want to receive any fundraising requests in the future, you may contact The RWJ University Hospital Foundation at 10 Plum Street, Suite 910, New Brunswick, NJ, 08901, (732) 937-8750, [www.rwjufdn.org](http://www.rwjufdn.org).

## **E. Public Health Activities.**

We may disclose Protected Health Information for the following public health activities and purposes: (1) to report health information to public health authorities for the purpose of preventing or controlling disease, injury or disability; (2) to report child abuse and neglect to public health authorities or other government authorities authorized by law to receive such reports; (3) to report information about products under the jurisdiction of the U.S. Food and Drug Administration; (4) to alert a person who may have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading a disease or condition; and (5) to report information to your employer as required under laws addressing work-related illnesses and injuries or workplace medical surveillance.

## **F. Health Oversight Activities.**

We may disclose Protected Health Information to a health oversight agency that oversees the healthcare system and ensures compliance with the rules of government health programs such as Medicare or Medicaid.

## **G. Judicial and Administrative Proceedings.**

We may disclose Protected Health Information in the course of a judicial or

administrative proceeding in response to a legal order or other lawful process.

## **H. Law Enforcement Officials.**

We may disclose Protected Health Information to the police or other law enforcement officials as required by law or in compliance with a court order.

## **I. Coroners, Medical Examiners and Funeral Directors.**

We may disclose Protected Health Information to a coroner or medical examiner as authorized by law. Such disclosures may be necessary to identify a deceased person or determine cause of death. We may also release Protected Health Information about patients to funeral directors as necessary for them to carry out their duties.

## **J. Organ and Tissue Procurement.**

We may disclose Protected Health Information to organizations that facilitate organ, eye or tissue procurement, banking or transplantation.

## **K. Research.**

We may use or disclose Protected Health Information without your consent or authorization if our Institutional Review Board approves a waiver of authorization for disclosure.

## **L. Health or Safety.**

We may use or disclose Protected Health Information to prevent or lessen a serious and imminent threat to a person's or the public's health or safety.

## **M. Specialized Government Functions.**

We may use and disclose Protected Health Information to units of the government with special functions, such as the U.S. military or the U.S. Department of State under certain circumstances.



#### **N. Workers' Compensation.**

We may disclose Protected Health Information as authorized by and to the extent necessary to comply with laws relating to workers' compensation or other similar programs.

#### **O. Inmates.**

If you are an inmate of a correctional institution or under custody of law enforcement, we may (under certain specific circumstances) release health information about you to the correctional facility or law enforcement official.

### **IV. Uses and Disclosures**

#### **With Your Authorization:**

##### **A. Use or Disclosure**

##### **With Your Authorization.**

Except as indicated in Section III above, we may use or disclose Protected Health Information only when: (1) you give us your authorization on our authorization form; or (2) such use or disclosure is consistent with the consent you signed upon admission. Further, you may revoke your authorization, except to the extent that we have taken action in reliance upon it, by delivering a written revocation statement to the Hospital's Privacy Officer, identified on page 29.

##### **B. Genetic Information.**

Except in certain cases (such as a paternity test for a court proceeding, anonymous research, newborn screening requirements or pursuant to a court order), we will obtain your authorization prior to obtaining or retaining your genetic information (for example, your DNA sample). We may use or disclose your genetic information for any reason

only when your authorization expressly refers to your genetic information or when disclosure is permitted under New Jersey law (including, for example, when disclosure is necessary for the purposes of a criminal investigation, to determine paternity, newborn screening, identifying your body or as otherwise authorized by a court order).

##### **C. AIDS or HIV-related Information.**

If Protected Health Information contains AIDS or HIV-related information, that information is confidential and shall not be disclosed without your authorization, except as follows. Such information may be released without your authorization to medical personnel directly involved in your medical treatment. If you are deemed to lack decision-making capacity, we may release such information (only if necessary and unless you request otherwise) to the person responsible for making healthcare decisions on your behalf (spouse, primary caretaking partner, an appropriate family member, etc.). Under certain circumstances, such information may also be released without your authorization for scientific research, certain audit and management functions, and as may otherwise be allowed or required by law or court order.

##### **D. Alcohol or Drug Abuse Programs.**

If Protected Health Information contains information related to treatment provided in one of our alcohol or drug abuse programs, that information is confidential and shall not be disclosed without your authorization, except as follows: (1) for internal communica-



# Your Privacy

tions; (2) if there is no patient-identifying information; (3) for medical emergencies; (4) in order to report and/or investigate crimes committed at the Program or against its personnel; and (5) as may otherwise be allowed or required by law or court order.

## E. Marketing Communications.

We will obtain your authorization for the use or disclosure of your Protected Health Information for marketing purposes. However, this does not apply to communications that are made:

- (1) face-to-face by our staff to you;
- (2) to describe a health-related product or service that is offered by us;
- (3) for your treatment; or
- (4) for your care management or to direct or recommend alternative treatments, healthcare providers, etc.

## V. Your Rights:

### A. For Further Information, Complaints.

If you desire further information about your privacy rights, are concerned that we have violated your privacy rights, or disagree with a decision that we made about access to Protected Health Information, you may contact our Privacy Officer. You may also file written complaints with the Director, Office of Civil Rights of the U.S. Department of Health and Human Services. Upon request, the Privacy Officer will provide you with the correct address for the Director. We will not retaliate against you if you file a complaint with the Director or us.

### B. Right to Request Additional Restrictions.

You may request restrictions on our use and disclosure of Protected Health Information: (1) for treatment, payment and healthcare operations; (2) to individuals (such as a family member, other relative, close personal friend or any other person identified by you) involved with your care or with payment related to your care; or (3) to notify or assist in the notification of such individuals regarding your location and general condition. While we will consider all requests for additional restrictions carefully, we are not required to agree to a requested restriction. If you wish to request additional restrictions, please obtain a request form from, and submit the completed form to, our Privacy Officer. We will send you a written response.

### C. Right to Receive Confidential Communications.

You may request, and we will accommodate, any reasonable written request for you to receive confidential communications of Protected Health Information by alternative means or at alternative locations.

### D. Right to Inspect and Copy Your Health Information.

You have a limited right to inspect and copy the protected health information contained in your medical and billing records and in any other hospital records used by us to make healthcare decisions about you. Under limited circumstances, we may deny your request to access (in whole or in part).



If we do deny your request, we will send you a response in writing, our reasons for the denial, and explain your right to have the denial reviewed.

In order to inspect or copy your health information, you must submit your request in writing to the Medical Records Department. If you request a copy of your health information, we may charge you certain fees as allowed by New Jersey and federal regulations.

#### **E. Right to Amend Your Records.**

You have the right to request that we amend Protected Health Information maintained in your medical record file or billing records. If you desire to amend your records, please obtain an amendment request form from, and submit the completed form to, our Privacy Officer. We will comply with your request unless we believe that the information that would be amended is accurate and complete or other special circumstances apply.

#### **F. Right to Receive an Accounting of Disclosures.**

You have the right to receive an accounting of disclosures of Protected Health Information made by us to individuals or entities during the six years prior to the date on which the accounting is requested, except for disclosures:

- made for the purposes of treatment, payment and healthcare operations as provided above;
- made to you;
- which were incidental to a use or disclosure otherwise permitted or required by applicable law;

- made pursuant to a written authorization obtained from you;
- made for the RWJUH directory or to persons involved in your care or for certain other notification purposes;
- made for national security or intelligence purposes as provided by law;
- made to correctional institutions or law enforcement officials as provided by law; or
- that occurred prior to April 14, 2003.

To request an accounting of disclosures of your health information, you must submit your request in writing to the Hospital's Privacy Officer. Your request must state a specific time period for the accounting, which must be less than six (6) years from the date of your request. The first accounting requested in any twelve (12) month period is free. For each subsequent request for an accounting within the same twelve (12) month period, we may charge the cost of providing the list (in such event, however, we will notify you of the costs).

#### **VI. Privacy Officer:**

You may contact the Hospital's Privacy Officer:

Privacy Officer  
Robert Wood Johnson  
University Hospital  
1 Robert Wood Johnson Place  
New Brunswick, New Jersey 08903  
Telephone Number: (732) 828-3000  
extension 5463



# Do You Have Pain?

## Pain Rating Scale



**0** No Hurt



**2** Hurts Little Bit



**4** Hurts Little More



**6** Hurts Even More



**8** Hurts Whole Lot



**10** Hurts Worst

## Pain Management

You are the expert about how you are feeling. Be sure to tell your doctor or nurse when you have any kind of pain. To help describe your pain, be sure to report:

- When the pain began
- Where you feel pain
- How the pain feels—sharp, dull, throbbing, burning, tingling
- If the pain is constant, or if it comes and goes
- What, if anything, makes the pain feel better
- What, if anything, makes the pain feel worse
- How much, if any, pain your medicine is taking away
- If your medicine helps with the pain, how many hours of relief do you get?

Use the scale at left to tell your doctor or nurse how severe your pain is.

## Palliative Care Program

Palliative Care Services are available to all adult inpatients at Robert Wood Johnson University Hospital who are faced with a serious or life-threatening illness. The goal of the Palliative Care Team is to improve the quality of life for patients by preventing and relieving the pain, symptoms and distress caused by serious illness. It is appropriate for both patients receiving curative treatments and for those near the end of life. Patients who may benefit from palliative care include those with heart disease, chronic respiratory problems, renal disease, cancer, HIV/AIDS, Alzheimer's, or those with a life-threatening injury. The Palliative Care Team includes a board-certified palliative care physician, a board-certified palliative care nurse practitioner, a licensed clinical social worker and a clinical chaplain. Speak to your attending physician to ask for a referral. The Palliative Care Team is available for consults Monday through Friday from 8 a.m. to 5 p.m.

“In the field of observation,  
chance favors only the prepared mind.”

Also see *Preparing for Discharge*  
on page 34.

# Don't Leave Until...

## 6 things to know before you walk out that hospital door.

**W**hen it's time to be released from the hospital, your physician will authorize a hospital discharge. This doesn't necessarily mean that you are completely well—it only means that you no longer



### If You Disagree

You or a relative can appeal your doctor's discharge decision. If you are a Medicare patient, be sure you are given "An Important Message from Medicare" from the hospital's discharge planner or caseworker. This details your rights to remain in the hospital for care and provides information on who to contact to appeal a discharge decision.

need hospital services. If you disagree, you or your caregiver can appeal the decision (see *If You Disagree*, at left).

On the other hand, you may be pleased to learn that your doctor has approved your discharge. But before you can leave the hospital, there are several things that you or your caregiver must attend to.

The first step is to know who will be involved in your discharge process. This starts with the hospital's discharge planner, who may be a nurse, social worker or administrator, or may have some other title.

You and your caregiver should meet this person relatively early in your hospital stay; if not, find out who this person is and be sure to meet with them well before your expected discharge date.

## Don't Leave Until... *continued*

### **Make sure you have the following information before you leave the hospital:**

**1. Discharge summary.** This is an overview of why you were in the hospital, which health care professionals saw you, what procedures were done, and what medications were prescribed.

**2. Medications list.** This is a listing of what medications you are taking, why, in what dosage, and who prescribed them. (You'll already have this if you use the My Medications form on page 44 to keep track while you're in the hospital.) But also having a list prepared by the hospital is a good way to double-check the information.

**3. Rx.** A prescription for any medications you need, and a supply of medications for several days to give you time to get the prescription(s) filled.

### **4. Follow-up care instructions.**

Make sure you have paperwork that tells you:

- what, if any, dietary restrictions you need to follow and for how long
- what kinds of activities you can and can't do, and for how long
- how to properly care for any injury or incisions you may have
- what follow-up tests you may need and when you need to schedule them
- what medicines you must take, why, and for how long
- when you need to see your physician
- any other home-care instructions



**Be sure to meet** with the hospital's **discharge planner** early in your stay to ensure a smooth discharge process later on.

for your caregiver, such as how to get you in and out of bed, how to use and monitor any equipment, and what signs and symptoms to watch out for

- telephone numbers to call if you or your caregiver has any questions pertaining to your after-hospital care

**5. Other services.** When you leave the hospital, you may need to spend time in a rehabilitation facility, nursing home, or other institution. Or you may need to schedule tests at an imaging center, have treatments at a cancer center, or have in-home therapy. Be sure speak with your nurse or physician to get all the details you need before you leave.

**6. Community resources.** You and your caregiver may feel unprepared for what will happen after your discharge. Make sure your discharge planner provides you with information about local resources, such as agencies that can provide services like transportation, equipment, home care and respite care, and agencies that can help with patient care and respite care.

## Home Health Care

Part-time health care provided by medical professionals in a patient's home to maintain or restore health. It includes a wide range of skilled and non-skilled services, including part-time nursing care, therapy, and assistance with daily activities and homemaker services, such as cleaning and meal preparation. Medicare defines home health care as intermittent, physician-ordered medical services or treatment.

## Durable Medical Equipment (DME)

Medical equipment that is ordered by a doctor for use in a patient's home. Examples are walkers, crutches, wheelchairs and hospital beds. DME is paid for under both Medicare Part B and Part A for home health services.

## Independent Living

Communities for seniors who are very independent and have few medical problems. Residents live in private apartments. Meals, housekeeping, maintenance and social outings and events are provided.

## Assisted Living

An apartment in a long-term care facility for elderly or disabled people who can no longer live on their own but who don't need a high level of care. Assisted-living facilities provide assistance with medications, meals

in a cafeteria or restaurant-like setting, and housekeeping services. Nursing staff is on site. Most facilities have social activities and provide transportation to doctors' appointments, shopping, etc.

## Nursing Home

A residential facility for people with chronic illness or disability, particularly elderly people who need assistance for most or all of their daily living activities such as bathing, dressing and toileting. Nursing homes provide 24-hour skilled care, and are also called convalescent homes or long-term care facilities. Many nursing homes also provide short-term rehabilitative stays for patients recovering from an injury or illness. Some facilities also have a separate unit for residents with Alzheimer's disease or memory loss.

## Hospice

A licensed or certified program that provides care for people who are terminally ill and for their families. Hospice care can be provided at home, in a hospice or other freestanding facility or within a hospital. Also referred to as "palliative" care, hospice care emphasizes the management of pain and discomfort and addresses the physical, spiritual, emotional, psychological, financial, and legal needs of the patient and his or her family.

 **Respite Care provides a temporary break for caregivers. Patients spend time in programs such as adult daycare or in week-long or month-long stays in a care facility.**



# Preparing for Discharge

## When You Are Discharged

Your physician determines when you are ready to be discharged. Your physician and nurse will give you discharge instructions and answer any questions you have about managing your treatment and medications once you are home. If you are confused or unsure about what you need to do, what medications you must take, or if you have to restrict your diet or activities, don't be afraid to ask and take notes.

Be sure you understand any instructions you have been given before you leave the hospital.



## Going Home

When your doctor feels that you are ready to leave the hospital he or she will authorize a hospital discharge. Please speak with your nurse about our discharge procedures.

Here are few tips to make the discharge process run smoothly:

- Be sure you and/or your caregiver have spoken with a discharge planner and that you understand what services you may need after leaving the hospital. (See *Don't Leave Until...* for more discharge advice.)
- Verify your discharge date and time with your nurse or doctor.
- Have someone available to pick you up.
- Check your room, bathroom and bedside table carefully for any personal items.
- Make sure you or your caregiver has all necessary paperwork for billing, referrals, prescriptions, etc.

## Billing

### What a Hospital Bill Covers

The hospital bill covers the cost of your room, meals, 24-hour nursing care, laboratory work, tests, medication, therapy, and the services of hospital employees. You will receive a separate bill from your physicians for their professional services.

The hospital is responsible for submitting bills to your insurance company and will do everything possible to expedite your claim. You should remember that your policy is a contract between you and your insurance company and that you have the final responsibility for payment of your hospital bill.

### Coordination of Benefits (COB)

Coordination of Benefits, referred to as COB, is a term used by insurance companies when you are covered under two or more insurance policies. This usually happens when both husband and wife are listed on each other's insurance policies, or when both parents carry their children on their individual policies, or

*Ask for your discharge planner's contact information  
BEFORE you are scheduled to leave the hospital.*



when there is eligibility under two federal programs. This also can occur when you are involved in a motor vehicle accident and have medical insurance and automobile insurance.

Most insurance companies have COB provisions that determine who is the primary payer when medical expenses are incurred. This prevents duplicate payments. COB priority must be identified at admission in order to comply with insurance guidelines. Your insurance may request a completed COB form before paying a claim and every attempt will be made to notify you if this occurs. The hospital cannot provide this information to your insurance company. You must resolve this issue with your insurance carrier in order for the claim to be paid.

### **Medicare**

This hospital is an approved Medicare provider. All services billed to Medicare follow federal guidelines and procedures. Medicare has a COB clause. At the time of service you will be asked to answer questions to help determine the primary insurance carrier paying for your visit. This is referred to as an MSP Questionnaire and is required by federal law. Your assistance in providing accurate information will allow us to bill the correct insurance company.

Medicare deductibles and co-insurance are covered by your secondary insurance. If you do not have secondary insurance you will be asked to pay these amounts or establish a payment plan. If you are unable to pay these amounts, we will help you determine if you qualify for a state funded program.

### **Commercial Insurance**

As a service to our customers, we will forward a claim to your commercial insurance carrier based on the information you provide at the time of registration. It is very important for you to provide all related information such as policy number, group number and the correct mailing address for your insurance company.

### **For Self-Pay Patients**

Patient Financial Services Department will send statements for payment of self-pay accounts. You will receive two to three billing statements and two to three telephone calls over a 90-day period to obtain a payment or to make payment arrangements. If payment arrangements are not established and no payment is made during the 90-day period the account will be placed with a collection agency. If you need an itemized statement you can obtain one by calling the Patient Accounts Department at (732) 418-8450.

### **Uninsured?**

**If you are in need of assistance with your hospital billing you can contact the Patient Accounts Department at (732) 418-8450.**

“In compassion lies  
the world’s true strength.”

Caregiver, remember  
to care for yourself!

# For the Caregiver

*Your role as a patient advocate*



**W**hile your loved one is in the hospital, who will speak up for him or her? You can, by being the patient’s advocate—the person who will help the patient work with doctors, nurses and hospital staff. To help your loved one make the best decisions about their care and treatment, follow the advice in the Caregiver list at right.

While you are making sure that your loved one’s needs are being met, don’t neglect your own. Caregiving is a stressful and time-consuming job. You may neglect your diet, your normal exercise routine, and your sleep needs. You may find that you have little or no time to spend with friends, to relax, or to just be by yourself for a while. But down time is important. Don’t be reluctant to ask for help in caring for your loved one. Take advantage of friends’ offers to help and look into local adult daycare programs. Find out more about how you can ease the stress of caregiving at [www.caregiver.org](http://www.caregiver.org).

## CAREGIVER...

### know what condition

Know what condition your loved one is being treated for.

### patient’s rights

Know your patient’s rights and responsibilities (See page 15).

### advance directives?

Know whether or not your loved one has an advance directive and if so, what it specifies. (See page 22).

### ask questions

If your loved one is too ill or reluctant to ask questions, make note of their concerns and any you may have and don’t be afraid to speak up (see *Speak Up!* on page 10).

### help track medications

Your loved one may be prescribed medications while in the hospital and may be seen by several doctors. Keep track of it all with *My Medications* on page 44.

### what’s next

Will your loved one need home care or care at another facility? Ask to speak with a case manager to find out what your options are.

“The more you use your brain,  
the more brain you will have to use.”

**What famous  
North American  
landmark is constantly  
moving backward?**

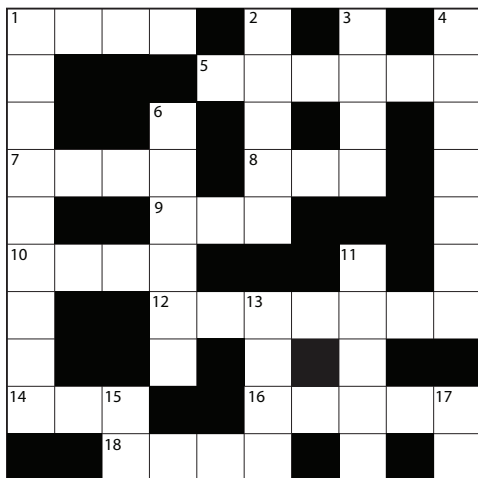
(Answer Below)

# Crossword

## Animal World

### ACROSS

- 1 Fish with pink or red flesh
- 5 The biggest lizard/dragon in the world
- 7 Asian birds that mimic speech
- 8 What dodo birds do with their eggs
- 9 Anaconda is a species of a \_\_\_\_\_
- 10 Famous Pixar clown fish
- 12 Largest and heaviest bird
- 14 Slang name for a horse
- 16 Spotted; giggling or laughing
- 18 One who apes



### DOWN

- 1 Devil that exists in more than cartoons
- 2 Has a pouch that opens towards hind legs
- 3 Baby kangaroo
- 4 Largest frog in the world, ask David
- 6 Largest Monkey
- 11 Offspring of male lion and female tiger
- 13 A wild goat
- 15 The brown thrasher is the state bird of \_\_\_\_\_ (abbr.)
- 17 Dog mushing is the state sport of \_\_\_\_\_ (abbr.)

### ANSWER KEY



**Niagara Falls:**  
The rim is worn down about 2 1/2 feet each year because of millions of gallons of water that rush over it every minute.

“Surgery is half the race, but you have to go for the follow-up or do yourself a major disservice.”

X marks the spot—be sure any mistaken markings on your body are completely cleaned off.

# Be Prepared

*How you can make your surgical procedure and follow-up care as safe as possible.*

**A**s an active member of your health care team, you can make your surgical procedure and follow-up care as safe as possible. Here's what you need to know.

## Before Your Surgery

- Bring a list of any questions you have about your surgery to your pre-surgical doctor's visit. Also bring a list of all the prescription, over-the-counter, and herbal medications that you are currently taking or that you took until very recently. Review the list with your surgeon and ask if there are any you should stop taking prior to your procedure.
- Be sure your surgeon knows about any allergies you have to medications and foods.
- Ask your surgeon whether you can eat or drink before your procedure, and if so, what kinds of food or drink, and within how many hours of your surgery.
- Ask your surgeon whether you should remove nail polish or



**It's hard to remember everything yourself.** When you meet with your doctor bring your questions and a friend. Your friend can help listen, take notes and help ask questions, too!

temporary dental appliances (such as a bridge), if you can wear deodorant or body lotion, and if there are other preparations you need to make prior to surgery.

- Find out if you will need therapy after your surgery, who will arrange for it, and whether you can have therapy at home.
- Arrange for transportation to and from the hospital or surgical center.
- Ask a relative or friend to go to the hospital or surgical center with you, to stay during your procedure, and accompany you home afterward.

## A Team Effort

Here's how to work with your surgical team to get the best outcome:

- Know the preparations you must make before your surgery.
- Get to the hospital or surgical center early on the day of your surgery.
- Review paperwork carefully before signing.
- Make sure the proper part of your body is marked for surgery.
- Get your post-surgical care instructions in writing before you leave.

### On the Day of Your Surgery

- Shower or bathe and wash your hair. Don't wear makeup or perfume. Be sure to follow any other pre-surgery instructions you were given.
- Leave your jewelry, money, credit cards, and other valuables at home.
- Allow yourself plenty of time for travel.
- Once you arrive at the hospital, you will be given an Informed Consent form to sign. Read it carefully. Make sure everything on the form is correct. If you don't understand something, ask questions before you sign the form.

### Before Your Procedure Begins

- Staff at the hospital should ask you the following questions more than once before your surgery:
  - Your name
  - What kind of surgery you're having
  - The part of your body that is being operated on
- At RWJUH, patients and/or their family members will use a check mark to designate the spot on the body where surgeons will perform the operation. RWJUH staff will assist the patient or family member if they are unable to mark the spot.
- If you won't be awake for the marking, be sure your relative or

friend watches the marking.

- Ask your surgeon if the team will take a "time out" just before your procedure. This is done to make sure they are doing the right surgery on the right body part of the right person.

### After Your Surgery

- Speak up about any pain you are having and ask for relief. Be specific about the intensity and location.
- If you are given medications right after surgery, ask what they are and what they are for. Ask about side effects. If you are given a prescription for medications you must take while recovering, be sure you understand the instructions for the dosage, how frequently you need to take the medications, and for how long.
- If you are given IV (intravenous) fluids right after surgery, ask what they are and what they are for. Be sure someone monitors the fluid level.
- Ask your surgeon if your activities need to be limited, and if so, for how long. Ask when you will be able to resume work, exercise, and travel.
- Be sure to get instructions for post-surgical care in writing before you leave.

“It is not the ship so much as the skillful sailing that assures the prosperous voyage.”

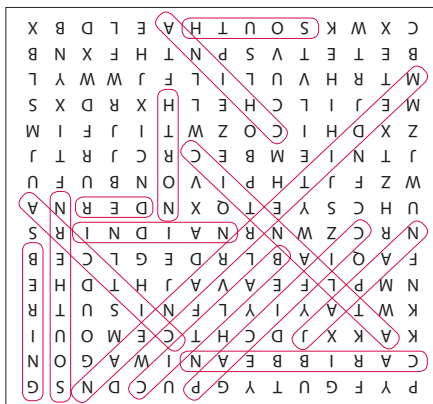
# Word Search

## Sail the Seven Seas

P Y F G U T Y G P U C D N S G  
 C A R I B B E A N I W A G O N  
 K A K X J D C H T C E M O U I  
 K W T A Y I Y L F N I S U T R  
 N M P L F E A V A J H T D H E  
 F A Q I A B L R D E G L C E B  
 N R C Z W N R N A I D N I R S  
 U H C S Y E T Q X N D E R N A  
 W Z F J T H P I V O N B U F U  
 J T N I E M B E C R C J R T J  
 Z X D H I C O Z W T I J F I M  
 M E J I L C H E L H X R D X S  
 M T R H V U L I L F J W W Y L  
 B E T E T V S P N T H F X N B  
 C X W K S O U T H A E L D B X

- ARCTIC
- ATLANTIC
- BALTIC
- BERING
- CARIBBEAN
- CHINA
- INDIAN
- JAPAN
- MEDITERRANEAN
- NORTH
- PACIFIC
- RED
- SOUTH
- SOUTHERN

### ANSWER KEY



## **The Grateful Patient Program from The Foundation at RWJUH**

■ It may have been a special doctor, a team of talented nurses, or a skilled dietician or physical therapist. If someone made a difference in the care that you or a loved one received at Robert Wood Johnson University Hospital, a gift to our Grateful Patient Program is a wonderful way to say “thank you.”

The Grateful Patient Program is a chance to honor the compassionate caregivers who touched your life... and help them bring healing and hope to even more patients and their families. You can make a gift to show your appreciation for a special staff member; in support of one of the hospital’s planned projects or general fund; or in honor of a loved one or important occasion. Staff members selected for recognition will receive a special “Care Champion” pin.

However you choose to give, you can be assured that your generosity is very much appreciated... and it will help to make a positive difference in the lives of patients at RWJUH and their families. Please consider making a gift today, or contact us at 732-937-8750 for more information about the Grateful Patient Program.

**For more information  
or to make a donation,  
please contact:**

The RWJ University  
Hospital Foundation,  
10 Plum Street,  
Suite 910  
New Brunswick, NJ  
08901

Or Call  
(732) 937-8750

Or E-mail  
[foundation@rwjuh.edu](mailto:foundation@rwjuh.edu).

Please visit our  
Web site at  
[www.rwjuhfdn.org](http://www.rwjuhfdn.org).





# Resources

## Staff Definitions



## Nurses

In each nursing unit, a registered nurse is responsible for supervising patient care and directing the nursing and support staff of the unit. Registered nurses are assisted by nursing assistants and nurse technicians. The nursing staff is available around the clock. RWJUH is designated a Magnet Hospital for its exceptional nursing care.

## Medical Staff

There are more than 1,500 physicians on staff at RWJUH who provide personalized, professional care for our patients. Your attending physician is primarily responsible for your care during your hospital stay. He or she will admit you and may issue orders for your care and treatment, consult with other physicians to assist in your care, determine which tests and examinations are necessary to diagnose your condition, prescribe treatments and medications you will receive here and at home, and will determine when you are ready to be discharged. If necessary, your physician may also issue dietary and visitation limitations.

It is important for you and your family to understand that you may be treated by physicians who are not employees of RWJUH.

All physicians practicing medicine at RWJUH are licensed by the State of New Jersey and must meet certain educational and experience requirements; however RWJUH is not responsible for specific care provided to you by your physician. If you wish to change any of your physicians, please ask to speak with a member of your healthcare team.

In addition, physicians who participate in your care, including, for example, emergency room physicians, surgeons, radiologists, anesthesiologists, pathologists, and consultants are private practitioners and not employees or agents of RWJUH, they are either self employed community physicians or employees of the University of Medicine and Dentistry of New Jersey.

If physician services are utilized, you will receive a separate bill from the independent contractor physician and physician groups in addition to the bill from Robert Wood Johnson University Hospital.

## Resident Physicians

Over 250 resident physicians, who have graduated from leading medical schools are here completing postgraduate education in specialized medical fields.



They provide round-the-clock care for patients and may also be involved in your care. Please speak to your physician if you have any questions about the involvement of residents in your care.

Fellows and Residents are employees of the University of Medicine and Dentistry of New Jersey and are not employees of RWJUH.

### **Technicians and Technologists**

Skilled health professionals perform and assist with laboratory and other procedures, including x-rays, mammograms, ultrasound, CT scans, MRIs, cardiac catheterization, radiation therapy and other procedures that help in diagnosing and treating your illness or injury.

### **Case Managers and Social Workers** **Ext. 8702**

Case managers will review your medical record and discuss your discharge planning. They are also available to assist you with arrangement for home care, admission to a long-term care facility or rehabilitation care.

Social workers offer emotional support, counseling and guidance to help patients and their families deal with financial, social and emotional problems related to illness or hospitalization.



### **Volunteers** **Ext. 8507**

The combination of world-class research and personalized care enhances our mission to provide the highest quality patient care, education, research and community outreach in a supportive environment.

Our volunteers' service furthers these mission initiatives by giving of their time and talent to make a difference in the lives of our patients.

Our volunteers provide support throughout the hospital, including staffing the information desk, delivering mail and flowers, operating the gift shop and escorting patients.

If you are interested in volunteer opportunities, please call ext. 8507.

We feel confident that your experience as a volunteer at Robert Wood Johnson University Hospital will be most rewarding.

“Science is organized knowledge.  
Wisdom is organized life.”



Bring your medication list  
to every doctor visit!

# My Medications

*Keep track of all medications you are prescribed while in the hospital.*

**W**hen you get home add all other medications—including over-the-counter, vitamins and herbs—to this list. Update your list as needed.

**Medication:** \_\_\_\_\_

*(include brand and generic names)*

Dose: Take \_\_\_\_\_ times per day at *(circle all that apply)*: 12–1 a.m. / 2–3 a.m. / 4–5 a.m. / 6–7 a.m.

8–9 a.m. / 10–11 a.m. / 12–1 p.m. / 2–3 p.m. / 4–5 p.m. / 6–7 p.m. / 8–9 p.m. / 10–11 p.m.

Reason for taking: \_\_\_\_\_

Prescribed by: \_\_\_\_\_ Date started: \_\_\_\_\_

Pharmacy name and number: \_\_\_\_\_ / \_\_\_\_\_

**Medication:** \_\_\_\_\_

*(include brand and generic names)*

Dose: Take \_\_\_\_\_ times per day at *(circle all that apply)*: 12–1 a.m. / 2–3 a.m. / 4–5 a.m. / 6–7 a.m.

8–9 a.m. / 10–11 a.m. / 12–1 p.m. / 2–3 p.m. / 4–5 p.m. / 6–7 p.m. / 8–9 p.m. / 10–11 p.m.

Reason for taking: \_\_\_\_\_

Prescribed by: \_\_\_\_\_ Date started: \_\_\_\_\_

Pharmacy name and number: \_\_\_\_\_ / \_\_\_\_\_

**Medication:** \_\_\_\_\_

*(include brand and generic names)*

Dose: Take \_\_\_\_\_ times per day at *(circle all that apply)*: 12–1 a.m. / 2–3 a.m. / 4–5 a.m. / 6–7 a.m.

8–9 a.m. / 10–11 a.m. / 12–1 p.m. / 2–3 p.m. / 4–5 p.m. / 6–7 p.m. / 8–9 p.m. / 10–11 p.m.

Reason for taking: \_\_\_\_\_

Prescribed by: \_\_\_\_\_ Date started: \_\_\_\_\_

Pharmacy name and number: \_\_\_\_\_ / \_\_\_\_\_

**Medication:** \_\_\_\_\_

*(include brand and generic names)*

Dose: Take \_\_\_\_\_ times per day at *(circle all that apply)*: 12–1 a.m. / 2–3 a.m. / 4–5 a.m. / 6–7 a.m.

8–9 a.m. / 10–11 a.m. / 12–1 p.m. / 2–3 p.m. / 4–5 p.m. / 6–7 p.m. / 8–9 p.m. / 10–11 p.m.

Reason for taking: \_\_\_\_\_

Prescribed by: \_\_\_\_\_ Date started: \_\_\_\_\_

Pharmacy name and number: \_\_\_\_\_ / \_\_\_\_\_