

26:2H-12.8

LEGISLATIVE HISTORY CHECKLIST  
Compiled by the NJ State Law Library

(Bill of Rights--hospitals patients)

NJSA: 26:2H-12.8

LAWS OF: 1997 CHAPTER: 76

BILL NO: S1531

SPONSOR(S): Lipman

DATE INTRODUCED: October 3, 1996

COMMITTEE: ASSEMBLY: Health  
SENATE: Health

AMENDED DURING PASSAGE: No

DATE OF PASSAGE: ASSEMBLY: March 13, 1997  
SENATE: November 25, 1997

DATE OF APPROVAL: April 24, 1997

FOLLOWING STATEMENTS ARE ATTACHED IF AVAILABLE:

SPONSOR STATEMENT: Yes

COMMITTEE STATEMENT: ASSEMBLY: Yes  
SENATE: Yes

FISCAL NOTE: No

VETO MESSAGE: No

MESSAGE ON SIGNING: No

FOLLOWING WERE PRINTED:  
REPORTS: No

HEARINGS:

REPOSITORY COPY  
Do Not Remove From Library

KBP:pp

P.L. 1997, CHAPTER 76, *approved April 24, 1997*  
Senate, No. 1531

1 AN ACT concerning hospital patients, amending P.L.1989, c.170 and  
2 supplementing Title 26 of the Revised Statutes.

3  
4 **BE IT ENACTED** by the Senate and General Assembly of the State  
5 of New Jersey:

6  
7 1. Section 2 of P.L.1989, c.170 (C.26:2H-12.8) is amended to read  
8 as follows:

9 2. Every person admitted to a general hospital as licensed by the  
10 State Department of Health and Senior Services pursuant to P.L.1971,  
11 c.136 (C.26:2H-1 et al.) shall have the right:

12 a. To considerate and respectful care consistent with sound nursing  
13 and medical practices, which shall include being informed of the name  
14 and licensure status of a student nurse or facility staff member who  
15 examines, observes or treats the patient;

16 b. To be informed of the name of the physician responsible for  
17 coordinating his care;

18 c. To obtain from the physician complete, current information  
19 concerning his diagnosis, treatment, and prognosis in terms he can  
20 reasonably be expected to understand. When it is not medically  
21 advisable to give this information to the patient, it shall be made  
22 available to another person designated by the patient on his behalf;

23 d. To receive from the physician information necessary to give  
24 informed consent prior to the start of any procedure or treatment and  
25 which, except for those emergency situations not requiring an  
26 informed consent, shall include as a minimum the specific procedure  
27 or treatment, the medically significant risks involved, and the possible  
28 duration of incapacitation, if any, as well as an explanation of the  
29 significance of the patient's informed consent. The patient shall be  
30 advised of any medically significant alternatives for care or treatment,  
31 however, this does not include experimental treatments that are not yet  
32 accepted by the medical establishment;

33 e. To refuse treatment to the extent permitted by law and to be  
34 informed of the medical consequences of this act;

**EXPLANATION** - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and intended to be omitted in the law.

Matter underlined thus is new matter.

- 1 f. To privacy to the extent consistent with providing adequate  
2 medical care to the patient. This shall not preclude discussion of a  
3 patient's case or examination of a patient by appropriate health care  
4 personnel;
- 5 g. To privacy and confidentiality of all records pertaining to his  
6 treatment, except as otherwise provided by law or third party payment  
7 contract, and to access to those records, including receipt of a copy  
8 thereof at reasonable cost, upon request, unless his physician states in  
9 writing that access by the patient is not medically advisable;
- 10 h. To expect that within its capacity, the hospital will make  
11 reasonable response to his request for services, including the services  
12 of an interpreter in a language other than English if 10% or more of  
13 the population in the hospital's service area speaks that language;
- 14 i. To be informed by his physician of any continuing health care  
15 requirements which may follow discharge and to receive assistance  
16 from the physician and appropriate hospital staff in arranging for  
17 required follow-up care after discharge;
- 18 j. To be informed by the hospital of the necessity of transfer to  
19 another facility prior to the transfer and of any alternatives to it which  
20 may exist, which transfer shall not be effected unless it is determined  
21 by the physician to be medically necessary;
- 22 k. To be informed, upon request, of other health care and  
23 educational institutions that the hospital has authorized to participate  
24 in his treatment;
- 25 l. To be advised if the hospital proposes to engage in or perform  
26 human research or experimentation and to refuse to participate in these  
27 projects. For the purposes of this subsection "human research" does  
28 not include the mere collecting of statistical data;
- 29 m. To examine and receive an explanation of his bill, regardless of  
30 source of payment, and to receive information or be advised on the  
31 availability of sources of financial assistance to help pay for the  
32 patient's care, as necessary;
- 33 n. To expect reasonable continuity of care;
- 34 o. To be advised of the hospital rules and regulations that apply to  
35 his conduct as a patient;
- 36 p. To treatment without discrimination as to race, age, religion,  
37 sex, national origin, or source of payment; and
- 38 q. To contract directly with a New Jersey licensed registered  
39 professional nurse of the patient's choosing for private professional  
40 nursing care during his hospitalization. A registered professional nurse  
41 so contracted shall adhere to hospital policies and procedures in regard  
42 to treatment protocols and policies and procedures so long as those  
43 policies and procedures are the same for private duty and regularly  
44 employed nurses. The registered professional nurse shall not be  
45 considered an agent or employee of the hospital for purposes of any  
46 financial liabilities, including, but not limited to, State or federal

1 employee taxes, worker's compensation payments or coverage for  
2 professional liability.

3 The hospital, upon a patient's or his designee's request for private  
4 professional nursing care, shall provide the patient or his designee with  
5 a list of local nonprofit professional nurses association registries that  
6 refer nurses for private professional nursing care.

7 (cf: P.L.1994, c.22, s.1)

8

9 2. (New section) A general hospital shall revise the written  
10 summary and written notice required pursuant to section 3 of  
11 P.L.1989 (C.26:2H-12.9) within 180 days of the effective date of this  
12 act to reflect the amendments made to section 2 of P.L.1989, c.170  
13 (C.26:2H-12.8) pursuant to this act.

14

15 3. (New section) A general hospital, licensed pursuant to  
16 P.L.1971, c.136 (C.26:2H-1 et seq.), shall require a student nurse or  
17 facility staff member to wear an identifying badge that includes the  
18 person's name and licensure status, and, if appropriate, to verbally  
19 identify himself by name and licensure status to the patient and to any  
20 guardian or other responsible party when necessary, prior to  
21 examining, observing or treating the patient.

22

23 4. This act shall take effect immediately.

24

25

#### 26 STATEMENT

27

28 This bill amends P.L.1989, c.170 (C.26:2H-12.8 et seq.) by  
29 expanding the bill of rights for general hospital patients. A patient's  
30 right to considerate and respectful care consistent with sound nursing  
31 and medical practices is expanded to include being informed of the  
32 name and licensure status of a student nurse or facility staff member  
33 who examines, observes or treats the patient.

34 Under the provisions of the bill, a general hospital must require a  
35 student nurse or facility staff member to wear an identifying badge that  
36 includes the person's name and licensure status. If appropriate, the  
37 person must verbally identify himself or herself by name and licensure  
38 status to the patient and to a guardian or other responsible party,  
39 where necessary, prior to examining, observing or treating the patient.

40

41

42

43

44 Expands bill of rights for general hospital patients by requiring certain  
45 caregivers to wear identifying badges.

ASSEMBLY HEALTH COMMITTEE

STATEMENT TO

**SENATE, No. 1531**

**STATE OF NEW JERSEY**

DATED: FEBRUARY 10, 1997

The Assembly Health Committee reports favorably Senate Bill No. 1531.

This bill amends P.L.1989, c.170 (C.26:2H-12.8 et seq.) by expanding the bill of rights for general hospital patients. A patient's right to considerate and respectful care consistent with sound nursing and medical practices is expanded to include being informed of the name and licensure status of a student nurse or facility staff member who examines, observes or treats the patient.

Under the provisions of the bill, a general hospital must require a student nurse or facility staff member to wear an identifying badge that includes the person's name and licensure status. If appropriate, the person must verbally identify himself or herself by name and licensure status to the patient and to a guardian or other responsible party, where necessary, prior to examining, observing or treating the patient.

SENATE HEALTH COMMITTEE

STATEMENT TO

**SENATE, No. 1531**

**STATE OF NEW JERSEY**

DATED: NOVEMBER 8, 1996

The Senate Health Committee reports favorably Senate Bill No. 1531.

This bill amends P.L.1989, c.170 (C.26:2H-12.8 et seq.) by expanding the bill of rights for general hospital patients. A patient's right to considerate and respectful care consistent with sound nursing and medical practices is expanded to include being informed of the name and licensure status of a student nurse or facility staff member who examines, observes or treats the patient.

Under the provisions of the bill, a general hospital must require a student nurse or facility staff member to wear an identifying badge that includes the person's name and licensure status. If appropriate, the person must verbally identify himself or herself by name and licensure status to the patient and to a guardian or other responsible party, where necessary, prior to examining, observing or treating the patient.