

OUR CONCERN FOR YOUR SAFETY

The Surgical Center at Millburn continues to strive to make health care safety a priority. You, as the patient, can also play a role in making our care safe by becoming an active, involved and informed member of your health care team.

While you are a patient at our facility, we want you to feel comfortable to do the following:

- Expect our nursing staff to introduce themselves when you enter your room, and look for their nametags.
- Ask about the purpose of medications you are given, including possible side effects. Make sure you can read the handwriting on any prescriptions written by your doctor. Do not be afraid to tell the nurse or doctor if you think you are about to receive the wrong medication.
- Do not hesitate to tell a member of our staff if you think he or she has confused you with another patient.
- Expect our clinical staff to have washed their hands.
- Make sure your nurse or doctor confirms your identity, that is, checks your wristband and asks your name and birth date, before he or she administers any medication or treatment.
- Educate yourself about your diagnosis and planned surgical procedure.
- Thoroughly read all forms and the consent for surgery and make sure you understand them before signing. If you do not understand, ask our staff or your doctor to explain them.
- Expect your doctor, with your participation, to mark the area that is to be operated upon.
- Prior to leaving our facility, be sure that you understand all of the post-operative instructions.
- Consider asking your companion to ask questions that you may not think of to help remember answers to questions you have asked and to speak up for you if you cannot.
- Make sure your companion understands the type of care you will need when you get home. Your companion should know what to look for if your condition gets worse and whom to call if help is needed.
- Please speak up if you have questions or concerns and if it is still unclear, ask again. Do not hesitate to ask about your safety. Tell your nurse or doctor if something does not seem quite right.
- Participate in all decisions about your treatment.

PLEASE ASK TO SPEAK TO A MANAGER IF YOU HAVE ANY CONCERNS ABOUT YOUR SAFETY

Patient Signature: _____ **Date:** _____