

CHAPTER 43G

HOSPITAL LICENSING STANDARDS

Authority

N.J.S.A. 26:2H-1 et seq., specifically 26:2H-5.

Source and Effective Date

R.2000 d.71, effective January 27, 2000.
See: 31 N.J.R. 2732(a), 32 N.J.R. 707(a).

Executive Order No. 66(1978) Expiration Date

Chapter 43G, Hospital Licensing Standards, expires on January 27, 2005.

Chapter Historical Note

Chapter 43G, Certificate of Need: Capital Policy, was adopted as R.1986 d.375, effective September 8, 1986. See: 18 N.J.R. 1242(a), 18 N.J.R. 1817(a).

Chapter 43G, Certificate of Need: Capital Policy, was repealed by R.1988 d.114, effective March 21, 1988. See: 19 N.J.R. 2365(b), 20 N.J.R. 645(d).

Subchapter 1, General Provisions, Subchapter 2, Licensure Procedure, Subchapter 5, Administration and Hospital-Wide Services, Subchapter 19, Obstetrics, Subchapter 21, Oncology, Subchapter 22, Pediatrics, Subchapter 24, Plant Maintenance and Fire and Emergency Preparedness, Subchapter 26, Psychiatry, Subchapter 29, Physical and Occupational Therapy, Subchapter 30, Renal Dialysis, Subchapter 31, Respiratory Care, and Subchapter 35, Postanesthesia Care, were adopted as new rules by R.1990 d.95, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 2926(a), 22 N.J.R. 441(b).

Subchapter 4, Patient Rights, was adopted as new rules by R.1990 d.98, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 2160(b), 22 N.J.R. 484(a).

Subchapter 6, Anesthesia, was recodified from N.J.A.C. 8:43B-18 by R.1990, d.77, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 2925(a), 22 N.J.R. 488(a).

Subchapter 7, Cardiac, was adopted as new rules by R.1990 d.97, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 2162(a), 22 N.J.R. 488(b).

Subchapter 8, Central Supply, was adopted as new rules by R.1990 d.96, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1609, 22 N.J.R. 496(a).

Subchapter 9, Critical and Intermediate Care, was adopted as new rules by R.1990 d.94, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 2167(a), 22 N.J.R. 498(a).

Subchapter 10, Dietary, was adopted as new rules by R.1990 d.78, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1611(a), 22 N.J.R. 505(a).

Subchapter 11, Discharge Planning, was adopted as new rules by R.1990 d.93, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1612(a), 22 N.J.R. 507(a).

Subchapter 12, Emergency Department, was adopted as new rules by R.1990 d.92, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1613(a), 22 N.J.R. 510(a).

Subchapter 13, Housekeeping and Laundry, was adopted as new rules by R.1990 d.91, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1616(a), 22 N.J.R. 514(a).

Subchapter 14, Infection Control and Sanitation, was adopted as new rules by R.1990 d.90, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1618(a), 22 N.J.R. 517(a).

Subchapter 15, Medical Records, was adopted as new rules by R.1990 d.88, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 2171(a), 22 N.J.R. 520(a).

Subchapter 16, Medical Staff, was adopted as new rules by R.1990 d.89, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1621(a), 22 N.J.R. 524(a).

Subchapter 17, Nurse Staffing, was adopted as new rules by R.1990 d.87, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1623(a), 22 N.J.R. 530(a).

Subchapter 18, Nursing Care, was adopted as new rules by R.1990 d.86, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1624(a), 22 N.J.R. 531(a).

Subchapter 20, Employee Health, was adopted as new rules by R.1990 d.85, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 2173(a), 22 N.J.R. 535(a).

Subchapter 23, Pharmacy, was adopted as new rules by R.1990 d.84, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1626(a), 22 N.J.R. 537(a).

Subchapter 25, Post Mortem, was adopted as new rules by R.1990 d.83, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1628(a), 22 N.J.R. 541(a).

Subchapter 27, Quality Assurance, was adopted as new rules by R.1990 d.82, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1630(a), 22 N.J.R. 542(a).

Subchapter 28, Radiology, was adopted as new rules by R.1990 d.81, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 2174(a), 22 N.J.R. 544(a).

Subchapter 32, Same-Day Stay, and Subchapter 34, Surgery, were adopted as new rules by R.1990 d.80, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 2177(a), 22 N.J.R. 548(a).

Subchapter 33, Social Work, was adopted as new rules by R.1990 d.79, effective February 5, 1990, operative July 1, 1990. See: 21 N.J.R. 1631(a), 22 N.J.R. 555(a).

Pursuant to Executive Order No. 66(1978), Chapter 43G, Hospital Licensing Standards, was readopted as R.1995 d.124, effective February 3, 1995. See: 26 N.J.R. 4537(a), 27 N.J.R. 1290(a).

Pursuant to Executive Order No. 66(1978), Chapter 43G, Hospital Licensing Standards, was readopted as R.2000 d.71, effective January 27, 2000. See: Source and Effective Date. See, also, section annotations.

CHAPTER TABLE OF CONTENTS

SUBCHAPTER 1. GENERAL PROVISIONS

- 8:43G-1.1 Scope and purpose
- 8:43G-1.2 Definitions
- 8:43G-1.3 Classification of institutions
- 8:43G-1.4 Information and complaint procedure

SUBCHAPTER 2. LICENSURE PROCEDURE

- 8:43G-2.1 Certificate of Need
- 8:43G-2.2 Application for licensure
- 8:43G-2.3 Newly constructed or expanded facilities

- 8:43G-2.4 Surveys and temporary license
- 8:43G-2.5 Full license
- 8:43G-2.6 Revocation or suspension of license
- 8:43G-2.7 Surrender of license
- 8:43G-2.8 Waiver
- 8:43G-2.9 Action against licensee
- 8:43G-2.10 Information not to be disclosed
- 8:43G-2.11 Hospital satellite facilities and off-site ambulatory care service facilities
- 8:43G-2.12 Mandatory services in general and psychiatric hospitals
- 8:43G-2.13 Child abuse and neglect

SUBCHAPTER 3. (RESERVED)

SUBCHAPTER 4. PATIENT RIGHTS

- 8:43G-4.1 Patient rights
- 8:43G-4.2 (Reserved)

SUBCHAPTER 5. ADMINISTRATIVE AND HOSPITAL-WIDE SERVICES

- 8:43G-5.1 Administrative and hospital-wide structural organization
- 8:43G-5.2 Administrative and hospital-wide policies and procedures
- 8:43G-5.3 Administrative and hospital-wide staff qualifications
- 8:43G-5.4 Organ and tissue donation
- 8:43G-5.5 Administrative and hospital-wide patient services
- 8:43G-5.6 Reportable events
- 8:43G-5.7 Administrative and hospital-wide staff education
- 8:43G-5.8 (Reserved)
- 8:43G-5.9 Department education programs
- 8:43G-5.10 Funding for regionalized services
- 8:43G-5.11 Occupational health structural organization
- 8:43G-5.12 Occupational health policies and procedures
- 8:43G-5.13 Occupational health staff qualifications
- 8:43G-5.14 Occupational health education
- 8:43G-5.15 Occupational health continuous quality improvement methods
- 8:43G-5.16 Disaster planning
- 8:43G-5.17 (Reserved)
- 8:43G-5.18 Blood bank
- 8:43G-5.19 Clinical and pathological laboratories
- 8:43G-5.20 Electrocardiogram laboratory
- 8:43G-5.21 Out-patient and prevention services

SUBCHAPTER 6. ANESTHESIA

- 8:43G-6.1 Definitions
- 8:43G-6.2 Anesthesia services policies and procedures
- 8:43G-6.3 Anesthesia staff; qualifications for administering anesthesia
- 8:43G-6.4 Anesthesiologist availability
- 8:43G-6.5 Anesthesia patient services
- 8:43G-6.6 Anesthesia supplies and equipment; safety systems
- 8:43G-6.7 Anesthesia supplies and equipment; maintenance and inspections
- 8:43G-6.8 Anesthesia supplies and equipment; patient monitoring
- 8:43G-6.9 Anesthesia staff education and training
- 8:43G-6.10 Anesthesia continuous quality improvement methods

SUBCHAPTER 7. CARDIAC

- 8:43G-7.1 Scope and definitions
- 8:43G-7.2 Cardiac surgery policies and procedures
- 8:43G-7.3 Cardiac surgery staff qualifications
- 8:43G-7.4 (Reserved)
- 8:43G-7.5 Cardiac surgery staff time and availability
- 8:43G-7.6 (Reserved)
- 8:43G-7.7 Cardiac surgery patient services
- 8:43G-7.8 Cardiac surgery space and environment
- 8:43G-7.9 Cardiac surgery supplies and equipment
- 8:43G-7.10 Staff education
- 8:43G-7.11 (Reserved)
- 8:43G-7.12 Cardiac surgery continuous quality improvement methods
- 8:43G-7.13 (Reserved)
- 8:43G-7.14 Cardiac catheterization policies and procedures

- 8:43G-7.15 Cardiac catheterization staff qualifications
- 8:43G-7.16 Cardiac catheterization staff time and availability
- 8:43G-7.17 Cardiac catheterization patient services
- 8:43G-7.18 Cardiac catheterization space and environment
- 8:43G-7.19 Cardiac catheterization supplies and equipment
- 8:43G-7.20 Cardiac catheterization staff education and training
- 8:43G-7.21 Cardiac catheterization quality assurance methods
- 8:43G-7.22 Scope of pilot catheterization program
- 8:43G-7.23 Requirements for licensure
- 8:43G-7.24 Pilot catheterization program policies and procedures
- 8:43G-7.25 Pilot catheterization program staff qualifications
- 8:43G-7.26 Pilot catheterization program staff time and availability
- 8:43G-7.27 Pilot catheterization program quality improvement
- 8:43G-7.28 Percutaneous transluminal coronary angioplasty policies and procedures
- 8:43G-7.29 PTCA staff qualifications
- 8:43G-7.30 PTCA staff time and availability
- 8:43G-7.31 PTCA space and environment
- 8:43G-7.32 Electrophysiology studies staff qualifications
- 8:43G-7.33 EPS staff time and availability
- 8:43G-7.34 Board eligibility status
- 8:43G-7.35 Pediatric cardiac services standards; scope
- 8:43G-7.36 Pediatric cardiac surgery policies and procedures
- 8:43G-7.37 Pediatric cardiac surgery staff qualifications
- 8:43G-7.38 Pediatric cardiac surgery staff time and availability
- 8:43G-7.39 Pediatric cardiac surgery space and environment
- 8:43G-7.40 Pediatric cardiac surgery supplies and equipment
- 8:43G-7.41 Pediatric cardiac surgery continuous quality improvement methods
- 8:43G-7.42 (Reserved)
- 8:43G-7.43 Pediatric cardiac catheterization policies and procedures
- 8:43G-7.44 Pediatric cardiac catheterization staff qualifications
- 8:43G-7.45 Pediatric catheterization continuous quality improvement methods
- 8:43G-7.46 Staff qualifications waivers

SUBCHAPTER 8. CENTRAL SUPPLY

- 8:43G-8.1 Central supply policies and procedures
- 8:43G-8.2 Central supply staff qualifications
- 8:43G-8.3 (Reserved)
- 8:43G-8.4 Central supply patient services
- 8:43G-8.5 (Reserved)
- 8:43G-8.6 Central supply space and environment
- 8:43G-8.7 Central supply supplies and equipment
- 8:43G-8.8 (Reserved)
- 8:43G-8.9 Central supply staff education and training
- 8:43G-8.10 Central supply quality improvement methods
- 8:43G-8.11 Sterilizer patient services
- 8:43G-8.12 Sterilizer space and environment
- 8:43G-8.13 Sterilizer supplies and environment

SUBCHAPTER 9. CRITICAL AND INTERMEDIATE CARE

- 8:43G-9.1 Scope
- 8:43G-9.2 Critical care structural organization
- 8:43G-9.3 (Reserved)
- 8:43G-9.4 Critical care policies and procedures
- 8:43G-9.5 Critical care staff qualifications
- 8:43G-9.6 (Reserved)
- 8:43G-9.7 Critical care staff time and availability
- 8:43G-9.8 (Reserved)
- 8:43G-9.9 Critical care patient service
- 8:43G-9.10 (Reserved)
- 8:43G-9.11 Critical care space and environment
- 8:43G-9.12 (Reserved)
- 8:43G-9.13 Critical care supplies and equipment
- 8:43G-9.14 Critical care staff education
- 8:43G-9.15 (Reserved)
- 8:43G-9.16 Critical care continuous quality improvement methods
- 8:43G-9.17 (Reserved)
- 8:43G-9.18 Intermediate care standards; scope
- 8:43G-9.19 Intermediate care structural organization
- 8:43G-9.20 Intermediate care policies and procedures

HOSPITAL LICENSING STANDARDS

- 8:43G-9.21 Intermediate care staff qualifications
- 8:43G-9.22 (Reserved)
- 8:43G-9.23 Intermediate care staff education and training
- 8:43G-9.24 Intermediate care continuous quality improvement methods

SUBCHAPTER 10. DIETARY

- 8:43G-10.1 Dietary policies and procedures
- 8:43G-10.2 (Reserved)
- 8:43G-10.3 Dietary staff qualifications
- 8:43G-10.4 Dietary staff time and availability
- 8:43G-10.5 (Reserved)
- 8:43G-10.6 Dietary patient services
- 8:43G-10.7 (Reserved)
- 8:43G-10.8 Dietary staff education and training
- 8:43G-10.9 (Reserved)
- 8:43G-10.10 Dietary continuous quality improvement methods

SUBCHAPTER 11. DISCHARGE PLANNING

- 8:43G-11.1 Discharge planning structural organization
- 8:43G-11.2 (Reserved)
- 8:43G-11.3 Discharge planning policies and procedures
- 8:43G-11.4 Discharge planning staff qualifications
- 8:43G-11.5 Discharge planning patient services
- 8:43G-11.6 Discharge planning continuous quality improvement methods

SUBCHAPTER 12. EMERGENCY DEPARTMENT AND TRAUMA SERVICES

- 8:43G-12.1 Emergency department structural organization
- 8:43G-12.2 Emergency department policies and procedures
- 8:43G-12.3 Emergency department staff qualifications
- 8:43G-12.4 (Reserved)
- 8:43G-12.5 Emergency department staff time and availability
- 8:43G-12.6 Definitions
- 8:43G-12.7 Emergency department patient services
- 8:43G-12.8 (Reserved)
- 8:43G-12.9 Emergency department space and environment
- 8:43G-12.10 Emergency department staff education and training
- 8:43G-12.11 Emergency department continuous quality improvement methods
- 8:43G-12.12 Trauma services; scope and purpose
- 8:43G-12.13 Trauma services; definitions
- 8:43G-12.14 Trauma services structural organization
- 8:43G-12.15 Trauma services policies and procedures
- 8:43G-12.16 Trauma services staff qualifications
- 8:43G-12.17 Trauma services staff time and availability
- 8:43G-12.18 Trauma services patient services
- 8:43G-12.19 Trauma services environment
- 8:43G-12.20 Trauma services quality improvement
- 8:43G-12.21 Trauma services trauma registry
- 8:43G-12.22 Trauma services compliance
- 8:43G-12.23 Pediatric trauma services

SUBCHAPTER 13. HOUSEKEEPING AND LAUNDRY

- 8:43G-13.1 Housekeeping policies and procedures
- 8:43G-13.2 Housekeeping staff qualifications
- 8:43G-13.3 (Reserved)
- 8:43G-13.4 Housekeeping patient services
- 8:43G-13.5 Housekeeping supplies and equipment
- 8:43G-13.6 (Reserved)
- 8:43G-13.7 Housekeeping staff education and training
- 8:43G-13.8 Housekeeping quality assurance methods
- 8:43G-13.9 Laundry policies and procedures
- 8:43G-13.10 Laundry staff qualifications
- 8:43G-13.11 Laundry patient services
- 8:43G-13.12 Laundry space and environment
- 8:43G-13.13 Laundry supplies and equipment
- 8:43G-13.14 Laundry staff education and training
- 8:43G-13.15 Laundry continuous quality improvement methods

SUBCHAPTER 14. INFECTION CONTROL AND SANITATION

- 8:43G-14.1 Infection control structural organization
- 8:43G-14.2 (Reserved)
- 8:43G-14.3 Infection control staff qualifications
- 8:43G-14.4 (Reserved)
- 8:43G-14.5 Infection control staff time and availability
- 8:43G-14.6 Infection control patient services
- 8:43G-14.7 Infection control staff education and training
- 8:43G-14.8 Infection control continuous quality improvement methods
- 8:43G-14.9 Sanitation patient services
- 8:43G-14.10 Sanitation space and environment
- 8:43G-14.11 Sanitation quality assurance methods
- 8:43G-14.12 Regulated medical waste policies and procedures
- 8:43G-14.13 Solid waste policies and procedures
- 8:43G-14.14 Solid waste patient services
- 8:43G-14.15 Solid waste space and environment
- 8:43G-14.16 Solid waste supplies and equipment

SUBCHAPTER 15. MEDICAL RECORDS

- 8:43G-15.1 Medical records structural organization
- 8:43G-15.2 Medical records policies and procedures
- 8:43G-15.3 Medical record patient services
- 8:43G-15.4 Medical records staff qualifications
- 8:43G-15.5 Staff education
- 8:43G-15.6 (Reserved)
- 8:43G-15.7 Medical record continuous quality improvement methods

SUBCHAPTER 16. MEDICAL STAFF

- 8:43G-16.1 Medical staff structural organization
- 8:43G-16.2 Medical staff policies and procedures
- 8:43G-16.3 Medical staff qualifications
- 8:43G-16.4 (Reserved)
- 8:43G-16.5 Medical staff time and availability
- 8:43G-16.6 Medical staff patient services
- 8:43G-16.7 Medical staff education
- 8:43G-16.8 Medical staff continuous quality improvement methods

SUBCHAPTER 17. NURSE STAFFING

- 8:43G-17.1 Nurse staffing
- 8:43G-17.2 (Reserved)

SUBCHAPTER 18. NURSING CARE

- 8:43G-18.1 Nursing care structural organization
- 8:43G-18.2 Nursing care policies and procedures
- 8:43G-18.3 Nursing care staff qualifications
- 8:43G-18.4 Nursing care; use of restraints
- 8:43G-18.5 Nursing care patient services
- 8:43G-18.6 Nursing care services related to pharmaceutical services
- 8:43G-18.7 Nursing care staff education and training
- 8:43G-18.8 (Reserved)
- 8:43G-18.9 Nursing care continuous quality improvement methods

SUBCHAPTER 19. OBSTETRICS

- 8:43G-19.1 Scope of obstetrical standards—definitions; structural organization
- 8:43G-19.2 Obstetrics policies and procedures
- 8:43G-19.3 Obstetrics staff qualifications
- 8:43G-19.4 Obstetrics staff time and availability
- 8:43G-19.5 Obstetrics patient services
- 8:43G-19.6 Maternal-fetal transport and neonatal transport
- 8:43G-19.7 Obstetric space and environment
- 8:43G-19.8 Obstetric staff education and training
- 8:43G-19.9 (Reserved)
- 8:43G-19.10 Obstetric continuous quality improvement
- 8:43G-19.11 Labor and delivery staff time and availability
- 8:43G-19.12 Labor, delivery, anesthesia and recovery patient services
- 8:43G-19.13 Postpartum policies and procedures and staff time and availability

- 8:43G-19.14 Postpartum patient services
- 8:43G-19.15 Newborn care policies and procedures
- 8:43G-19.16 Normal newborn nurse staff qualifications, staff time and availability
- 8:43G-19.17 Intermediate nursery staff qualifications, staff time and availability
- 8:43G-19.18 Neonatal intensive care nursery staff qualification, staff time and availability
- 8:43G-19.19 Newborn care patient services
- 8:43G-19.20 Newborn care supplies and equipment
- 8:43G-19.21 Scope of nurse-midwifery standards
- 8:43G-19.22 Nurse-midwifery structural organization
- 8:43G-19.23 Nurse-midwifery policies and procedures
- 8:43G-19.24 Nurse-midwifery staff qualifications
- 8:43G-19.25 Nurse-midwifery staff education
- 8:43G-19.26 Nurse-midwifery quality assurance methods
- 8:43G-19.27 Obstetric/non-obstetric mix program
- 8:43G-19.28 Obstetric/non-obstetric mix patient services
- 8:43G-19.29 Physical plant general compliance for new construction, alteration or renovation for newborn care
- 8:43G-19.30 Functional areas for newborn care
- 8:43G-19.31 General newborn care functional area requirements
- 8:43G-19.32 Neonatal unit resuscitation area
- 8:43G-19.33 Neonatal admission/observation/continuing care nursery or area
- 8:43G-19.34 Normal newborn nursery or holding nursery
- 8:43G-19.35 Infectious nursery
- 8:43E-19.36 Intermediate care nursery
- 8:43G-19.37 Neonatal intensive care nursery
- 8:43G-19.38 Shared services
- 8:43G-19.39 (Reserved)
- 8:43G-19.53 through

SUBCHAPTER 20. EMPLOYEE HEALTH

- 8:43G-20.1 Employee health policies and procedures
- 8:43G-20.2 Employee health services
- 8:43G-20.3 (Reserved)
- 8:43G-20.4 Employee health education
- 8:43G-20.5 (Reserved)
- 8:43G-20.6 Employee health continuous quality improvement methods

SUBCHAPTER 21. ONCOLOGY

- 8:43G-21.1 Scope of oncology standards
- 8:43G-21.2 Oncology structural organization
- 8:43G-21.3 (Reserved)
- 8:43G-21.4 Oncology policies and procedures
- 8:43G-21.5 Oncology staff qualifications
- 8:43G-21.6 (Reserved)
- 8:43G-21.7 Oncology staff time and availability
- 8:43G-21.8 (Reserved)
- 8:43G-21.9 Oncology patient services
- 8:43G-21.10 (Reserved)
- 8:43G-21.11 Oncology space and environment
- 8:43G-21.12 (Reserved)
- 8:43G-21.13 Oncology supplies and equipment
- 8:43G-21.14 (Reserved)
- 8:43G-21.15 Oncology staff education
- 8:43G-21.16 (Reserved)
- 8:43G-21.17 Oncology continuous quality improvement methods

SUBCHAPTER 22. PEDIATRICS

- 8:43G-22.1 Scope of pediatrics and pediatric intensive care standards
- 8:43G-22.2 Pediatrics and pediatric intensive care policies and procedures
- 8:43G-22.3 Pediatrics and pediatric intensive care patient services
- 8:43G-22.4 (Reserved)
- 8:43G-22.5 Pediatrics and pediatric intensive care supplies and equipment
- 8:43G-22.6 Pediatrics and pediatric intensive care staff education
- 8:43G-22.7 (Reserved)

- 8:43G-22.8 Pediatric and pediatric intensive care continuous quality improvement methods
- 8:43G-22.9 Scope of pediatrics standards
- 8:43G-22.10 Pediatrics staff qualifications
- 8:43G-22.11 (Reserved)
- 8:43G-22.12 Pediatrics space and environment
- 8:43G-22.13 Scope of pediatric intensive care standards
- 8:43G-22.14 Pediatric intensive care structural organization
- 8:43G-22.15 Pediatric intensive care staff qualifications
- 8:43G-22.16 Pediatric intensive care staff time and availability
- 8:43G-22.17 Pediatric intensive care patient services
- 8:43G-22.18 (Reserved)
- 8:43G-22.19 Pediatric intensive care space and environment
- 8:43G-22.20 Pediatric intensive care supplies and equipment
- 8:43G-22.21 (Reserved)
- 8:43G-22.22 Pediatric intensive care continuous quality improvement methods

SUBCHAPTER 23. PHARMACY

- 8:43G-23.1 Pharmacy structural organization
- 8:43G-23.2 Pharmacy policies and procedures
- 8:43G-23.3 Pharmacy staff qualifications
- 8:43G-23.4 Pharmacy staff time and availability
- 8:43G-23.5 (Reserved)
- 8:43G-23.6 Pharmacy patient services
- 8:43G-23.7 (Reserved)
- 8:43G-23.8 Pharmacy space and environment
- 8:43G-23.9 Pharmacy staff education and training
- 8:43G-23.10 Pharmacy continuous quality improvement methods
- 8:43G-23.11 (Reserved)

SUBCHAPTER 24. PLANT MAINTENANCE AND FIRE AND EMERGENCY PREPAREDNESS

- 8:43G-24.1 Plant maintenance structural organization
- 8:43G-24.2 Plant maintenance policies and procedures
- 8:43G-24.3 Plant maintenance staff qualifications
- 8:43G-24.4 Plant maintenance services
- 8:43G-24.5 (Reserved)
- 8:43G-24.6 Plant maintenance staff education
- 8:43G-24.7 (Reserved)
- 8:43G-24.8 Physical plant general compliance for new construction, alteration or renovation
- 8:43G-24.9 through 8:43G-24.12 (Reserved)
- 8:43G-24.13 Fire and emergency preparedness
- 8:43G-24.14 (Reserved)

SUBCHAPTER 25. POST MORTEM

- 8:43G-25.1 Policies and procedures
- 8:43G-25.2 Post mortem staff qualifications
- 8:43G-25.3 Post mortem patient services
- 8:43G-25.4 Post mortem space and environment
- 8:43G-25.5 Post mortem supplies and equipment

SUBCHAPTER 26. PSYCHIATRY

- 8:43G-26.1 Scope of psychiatry standards
- 8:43G-26.2 Psychiatry policies and procedures
- 8:43G-26.3 Psychiatry staff qualifications
- 8:43G-26.4 (Reserved)
- 8:43G-26.5 Psychiatry staff time and availability
- 8:43G-26.6 (Reserved)
- 8:43G-26.7 Psychiatry patient services
- 8:43G-26.8 (Reserved)
- 8:43G-26.9 Psychiatry space and environment
- 8:43G-26.10 (Reserved)
- 8:43G-26.11 Psychiatry supplies and equipment
- 8:43G-26.12 Psychiatry staff education
- 8:43G-26.13 (Reserved)
- 8:43G-26.14 Psychiatry quality assurance methods

HOSPITAL LICENSING STANDARDS

SUBCHAPTER 27. CONTINUOUS QUALITY IMPROVEMENT

- 8:43G-27.1 Continuous quality improvement structural organization
- 8:43G-27.2 Continuous quality improvement policies and procedures
- 8:43G-27.3 Continuous quality improvement staff qualifications
- 8:43G-27.4 (Reserved)
- 8:43G-27.5 Continuous quality improvement patient services
- 8:43G-27.6 Performance measurement and assessment system

SUBCHAPTER 28. RADIOLOGY AND RADIATION ONCOLOGY

- 8:43G-28.1 Radiology structural organization
- 8:43G-28.2 Radiology policies and procedures
- 8:43G-28.3 through 8:43G-28.4 (Reserved)
- 8:43G-28.5 Radiology continuous quality improvement methods
- 8:43G-28.6 (Reserved)
- 8:43G-28.7 Diagnostic services staff qualifications; mandatory
- 8:43G-28.8 Diagnostic services staff time and availability
- 8:43G-28.9 (Reserved)
- 8:43G-28.10 Diagnostic services patient services
- 8:43G-28.11 (Reserved)
- 8:43G-28.12 Diagnostic services supplies and equipment
- 8:43G-28.13 Radiation oncology services staff qualifications
- 8:43G-28.14 Radiation oncology services staff time and availability
- 8:43G-28.15 (Reserved)
- 8:43G-28.16 Radiation oncology patient services
- 8:43G-28.17 (Reserved)
- 8:43G-28.18 Radiation oncology services supplies and equipment
- 8:43G-28.19 Radiation therapy continuous quality improvement methods
- 8:43G-28.20 Staff education
- 8:43G-28.21 (Reserved)
- 8:43G-28.22 Megavoltage radiation oncology program utilization
- 8:43G-28.23 Independent verification of MRO equipment calibration
- 8:43G-28.24 Data to be maintained and reported

SUBCHAPTER 29. PHYSICAL AND OCCUPATIONAL THERAPY

- 8:43G-29.1 Physical therapy policies and procedures
- 8:43G-29.2 (Reserved)
- 8:43G-29.3 Physical therapy staff qualifications
- 8:43G-29.4 (Reserved)
- 8:43G-29.5 Physical therapy staff time and availability
- 8:43G-29.6 Physical therapy patient services
- 8:43G-29.7 (Reserved)
- 8:43G-29.8 Physical therapy space and environment
- 8:43G-29.9 Physical therapy supplies and equipment
- 8:43G-29.10 Physical therapy staff education
- 8:43G-29.11 (Reserved)
- 8:43G-29.12 Physical therapy quality improvement methods
- 8:43G-29.13 Occupational therapy policies and procedures
- 8:43G-29.14 (Reserved)
- 8:43G-29.15 Occupational therapy staff qualifications
- 8:43G-29.16 (Reserved)
- 8:43G-29.17 Occupational therapy patient services
- 8:43G-29.18 (Reserved)
- 8:43G-29.19 Occupational therapy space and environment
- 8:43G-29.20 Occupational therapy supplies and equipment
- 8:43G-29.21 Occupational therapy staff education
- 8:43G-29.22 (Reserved)
- 8:43G-29.23 Occupational therapy continuous quality improvement methods

SUBCHAPTER 30. RENAL DIALYSIS

- 8:43G-30.1 Scope of renal dialysis standards
- 8:43G-30.2 Renal dialysis policies and procedures
- 8:43G-30.3 Renal dialysis staff qualifications
- 8:43G-30.4 (Reserved)
- 8:43G-30.5 Renal dialysis staff time and availability
- 8:43G-30.6 Renal dialysis patient services
- 8:43G-30.7 (Reserved)

- 8:43G-30.8 Renal dialysis supplies and equipment
- 8:43G-30.9 Renal dialysis staff education and training
- 8:43G-30.10 (Reserved)
- 8:43G-30.11 Renal dialysis continuous quality improvement methods
- 8:43G-30.12 (Reserved)
- 8:43G-30.13 Physical plant general compliance for new construction, alteration, or renovation
- 8:43G-30.14 Treatment area requirements for acute renal dialysis services
- 8:43G-30.15 Service areas requirements for acute renal dialysis service
- 8:43G-30.16 Emergency generator and water supply
- 8:43G-30.17 Functional requirements for pediatric dialysis services

SUBCHAPTER 31. RESPIRATORY CARE

- 8:43G-31.1 Respiratory care structural organization; definitions
- 8:43G-31.2 Respiratory care policies and procedures
- 8:43G-31.3 Respiratory care staff qualifications
- 8:43G-31.4 (Reserved)
- 8:43G-31.5 Respiratory care staff time and availability
- 8:43G-31.6 (Reserved)
- 8:43G-31.7 Respiratory care patient services
- 8:43G-31.8 (Reserved)
- 8:43G-31.9 Respiratory care space and environment
- 8:43G-31.10 (Reserved)
- 8:43G-31.11 Respiratory care supplies and equipment
- 8:43G-31.12 Respiratory care staff education
- 8:43G-31.13 (Reserved)
- 8:43G-31.14 Respiratory care continuous quality improvement methods

SUBCHAPTER 32. SAME-DAY STAY

- 8:43G-32.1 Scope
- 8:43G-32.2 Same-day surgery services structural organization
- 8:43G-32.3 Same-day surgery services policies and procedures
- 8:43G-32.4 Same-day surgery services staff qualifications
- 8:43G-32.5 Same-day surgery services patient services
- 8:43G-32.6 (Reserved)
- 8:43G-32.7 Same-day surgery services space and environment
- 8:43G-32.8 (Reserved)
- 8:43G-32.9 Same-day surgery services continuous quality improvement methods
- 8:43G-32.10 Same-day medical services standards; scope
- 8:43G-32.11 Same-day medical services structural organizations
- 8:43G-32.12 Same-day medical services policies and procedures
- 8:43G-32.13 Same-day medical services staff time and availability
- 8:43G-32.14 Same-day medical services patient services
- 8:43G-32.15 (Reserved)
- 8:43G-32.16 Same-day medical services space and environment
- 8:43G-32.17 (Reserved)
- 8:43G-32.18 Same-day medical services education
- 8:43G-32.19 (Reserved)
- 8:43G-32.20 Same-day medical services continuous quality improvement methods
- 8:43G-32.21 Observation services; scope
- 8:43G-32.22 Observation service policies and procedures
- 8:43G-32.23 Observation service space and environment

SUBCHAPTER 33. SOCIAL WORK

- 8:43G-33.1 Social work structural organization
- 8:43G-33.2 Social work policies and procedures
- 8:43G-33.3 Social work staff qualifications
- 8:43G-33.4 through 8:43G-33.5 (Reserved)
- 8:43G-33.6 Social work patient services
- 8:43G-33.7 (Reserved)
- 8:43G-33.8 Social work space and environment
- 8:43G-33.9 Social work staff education and training
- 8:43G-33.10 Social work continuous quality improvement methods

SUBCHAPTER 34. SURGERY

- 8:43G-34.1 Surgery structural organization
- 8:43G-34.2 (Reserved)

- 8:43G-34.3 Surgery policies and procedures
- 8:43G-34.4 Surgery staff qualifications
- 8:43G-34.5 Surgery staff time and availability
- 8:43G-34.6 Surgery patient services
- 8:43G-34.7 Surgery space and environment
- 8:43G-34.8 Surgery supplies and equipment
- 8:43G-34.9 Surgery staff education
- 8:43G-34.10 (Reserved)
- 8:43G-34.11 Surgery continuous quality improvement methods
- 8:43G-34.12 (Reserved)

SUBCHAPTER 35. POSTANESTHESIA CARE

- 8:43G-35.1 Postanesthesia care policies and procedures
- 8:43G-35.2 Postanesthesia care staff qualifications
- 8:43G-35.3 Postanesthesia care staff time and availability
- 8:43G-35.4 Postanesthesia care patient services
- 8:43G-35.5 (Reserved)
- 8:43G-35.6 Postanesthesia care supplies and equipment
- 8:43G-35.7 Postanesthesia care staff education and training
- 8:43G-35.8 (Reserved)
- 8:43G-35.9 Postanesthesia care continuous quality improvement methods

SUBCHAPTER 1. GENERAL PROVISIONS

8:43G-1.1 Scope and purpose

(a) These rules and standards apply to each licensed general or special hospital facility. They are intended for use in State surveys of the hospitals and any ensuing enforcement actions. They are also designed to be useful to consumers and providers as a mechanism for privately assessing the quality of care provided in any acute care hospital.

(b) This chapter contains rules intended to assure the high quality of care delivered in hospital facilities throughout New Jersey. Components of quality care addressed by these rules and standards include access to care, continuity of care, comprehensiveness of care, coordination of services, humaneness of treatment, conservatism in intervention, safety of environment, professionalism of caregivers, and participation in useful studies.

8:43G-1.2 Definitions

The following words and terms, when used in this chapter, shall have the following meanings, unless the content clearly indicates otherwise.

“Hospital” means an institution, whether operated for profit or not, whether maintained, supervised or controlled by an agency of the government of the State or any county or municipality or not, which maintains and operates facilities for the diagnosis, treatment or care of two or more non-related individuals suffering from illness, injury or deformity and where emergency, out-patient, surgical, obstetrical, convalescent or other medical and nursing care is rendered for periods exceeding 24 hours.

“Hospital-based off-site ambulatory care service facility” means an ambulatory care service facility which has met the criteria as set forth in N.J.A.C. 8:43G-2.11(c) to be classified as same and which has applied for and received a license authorizing the facility to operate as a hospital-based off-site ambulatory care service facility.

“Hospitalization” means the admission and care of any person for a continuous period, longer than 24 hours, for the purpose of diagnosis and/or treatment bearing on the physical or mental health of such persons.

“Licensee” means the corporation, association, partnership or person authorized by the Department of Health to operate an institution and on whom rests the responsibility for maintaining acceptable standards in all areas of operation.

“Patient” means a person who receives a health care service from a provider.

Amended by R.2000 d.71, effective February 22, 2000.
See: 31 N.J.R. 2732(a), 32 N.J.R. 707(a).

Inserted “Hospital-based off-site ambulatory care service facility”.

Case Notes

Hospital exemption does not apply to health maintenance organization (HMO) facility property tax status; facility not a hospital as no continuous care provided and it does not exist to further the aims and goals of a functioning hospital. *New Brunswick v. Rutgers Community Health Plan, Inc.*, 7 N.J.Tax 491 (Tax Ct.1985).

8:43G-1.3 Classification of institutions

(a) Hospitals shall be classified generally as:

1. Private, non-profit, which shall include any hospital owned and operated by a corporation, association, religious or other organization, no part of the net earnings of which is applied, or may lawfully be applied, to the benefit of any private shareholder or person;

2. Private proprietary or profit, which shall include any hospital owned and operated by a person, partnership or corporation, the net proceeds of which are subject to distribution for the benefit of such person, corporation or shareholders; and

3. Public hospital, which shall include any institution maintained, supervised or controlled by an agency of the government of the State or any county or municipality that provides diagnostic and/or treatment services for the care of two or more non-related individuals suffering from illness, injury or deformity.

(b) Hospitals shall be further classified as:

1. General hospital, which shall include any hospital which maintains and operates organized facilities and services for the diagnosis, treatment or care of persons suffering from acute illness, injury or deformity and in which all diagnosis, treatment and care are administered by or performed under the direction of persons licensed to practice medicine or osteopathy in the State of New Jersey;

2. Special hospital, which shall include any hospital which assures provision of comprehensive specialized diagnosis, care, treatment and rehabilitation where applicable on an in-patient basis for one or more specific categories of patients; and

3. Psychiatric hospital, which shall include any hospital which assures provision of comprehensive specialized diagnosis, care, treatment and rehabilitation where applicable on an in-patient basis for patients with primary psychiatric diagnoses.

Amended by R.1995 d.124, effective March 20, 1995.
See: 26 N.J.R. 4537(a), 27 N.J.R. 1290(a).

Case Notes

Nursing home was not "hospital" which was exempt from local property tax. Intercare Health Systems, Inc. v. Cedar Grove Tp., 11 N.J.Tax 423 (1990), affirmed 12 N.J.Tax 273, certification denied 127 N.J. 558, 606 A.2d 369.

8:43G-1.4 Information and complaint procedure

(a) Questions regarding hospital licensure may be addressed to the Inspections Program or the Licensing and Certification Program at the following address:

New Jersey State Department of Health
Division of Health Facilities Evaluation and Licensing
PO Box 367
Trenton, NJ 08625-0367
(609) 588-7725

(b) To make a complaint about a New Jersey licensed hospital or nursing home, call:

1-800-792-9770 (toll-free hotline)

SUBCHAPTER 2. LICENSURE PROCEDURE

8:43G-2.1 Certificate of Need

(a) Where, in accordance with N.J.S.A. 26:2H-1 et seq., as amended, a Certificate of Need is required, a hospital shall not be instituted, constructed, expanded or licensed to operate except upon application for and receipt of a Certificate of Need issued by the Commissioner of the Department of Health.

(b) Application forms for a Certificate of Need and instructions for completion may be obtained from:

Certificate of Need Program
Division of Health Planning and Resources Development
New Jersey State Department of Health
PO Box 360
Trenton, New Jersey 08625-0360

(c) The hospital shall implement all conditions imposed by the Commissioner as specified in Certificate of Need approval letters. Failure to implement the conditions may result in the imposition of enforcement sanctions in accordance with N.J.S.A. 26:2H-13 and 14.

Amended by R.1995 d.124, effective March 20, 1995.
See: 26 N.J.R. 4537(a), 27 N.J.R. 1290(a).

Case Notes

Licensed beds not interchangeable between categories without hospital licensing board approval. Desai v. St. Barnabas Medical Center, 103 N.J. 79, 510 A.2d 662 (1986).

8:43G-2.2 Application for licensure

(a) Where applicable, following receipt of a Certificate of Need as a hospital, any person, organization, or corporation desiring to operate a hospital shall make application to the Commissioner for a license on forms prescribed by the Department. Such forms may be obtained from:

Director
Licensing, Certification and Standards
Division of Health Facilities Evaluation and Licensing
New Jersey State Department of Health
PO Box 367
Trenton, New Jersey 08625-0367

(b) The Department shall charge a nonrefundable fee of \$8,000 for the filing of an application for licensure and each annual renewal of a general acute care, special, or psychiatric hospital. These fees shall not exceed the maximum caps as set forth at N.J.S.A. 26:2H-12, as may be amended from time to time.

(c) The Department shall charge a nonrefundable fee of \$2,000 for the filing of an application to add services to an existing general acute care, special, or psychiatric hospital.

(d) The Department shall charge a nonrefundable fee of \$250.00 for the filing of an application to reduce services at an existing general acute care, special, or psychiatric hospital.

(e) The Department shall charge a nonrefundable fee of \$1,000 for the filing of an application for the relocation of a general acute care, special, or psychiatric hospital.

(d) All surgical suite equipment and supplies shall be maintained in a clean condition, without tears or tape.

(e) Staff who have been handling soiled linens or supplies shall wash their hands properly before handling clean linen and supplies.

(f) Clean linen shall be stored separately from soiled laundry in the surgical suite.

8:43G-34.9 Surgery staff education

Requirements for the surgery staff education program shall be as provided in N.J.A.C. 8:43G-5.9.

8:43G-34.10 (Reserved)

8:43G-34.11 Surgery continuous quality improvement methods

(a) There shall be a complete and current record of all surgical procedures.

(b) There shall be a program of continuous quality improvement for the surgical suite that is integrated into the hospital continuous quality improvement program and includes regularly collecting and analyzing data to help identify health-service problems and their extent, and recommending, implementing, and monitoring corrective actions on the basis of these data.

Amended by R.1999 d.436, effective December 20, 1999.
See: 31 N.J.R. 367(a), 31 N.J.R. 614(a), 31 N.J.R. 4293(c).

In (b), substituted references to continuous quality improvement for references to quality assurance throughout.

8:43G-34.12 (Reserved)

SUBCHAPTER 35. POSTANESTHESIA CARE

8:43G-35.1 Postanesthesia care policies and procedures

(a) The postanesthesia care unit shall have written policies and procedures that are reviewed at least once every three years, revised more frequently as needed, and implemented. They shall include at least:

1. Criteria for admission to and discharge from the unit;
2. Delineation of the primary medical responsibility for postanesthesia and postsurgical care of the patient in the unit;
3. Monitoring of patients in the postanesthesia care unit, including availability of monitoring equipment;
4. Protocol of care for all patients;
5. Protocol for patient emergencies;

6. Orders for intravenous administration of medications; and

7. Requirements for documentation of patient status.

Amended by R.1999 d.436, effective December 20, 1999.
See: 31 N.J.R. 367(a), 31 N.J.R. 614(a), 31 N.J.R. 4293(c).

In (a), substituted "at least once every three years, revised more frequently" for "annually, revised" in the introductory paragraph.

8:43G-35.2 Postanesthesia care staff qualifications; mandatory

(a) There shall be a physician director with overall responsibility for postanesthesia care. The physician director may also be the director of anesthesia services.

(b) There shall be a registered professional nurse with administrative responsibility for nursing care in the postanesthesia care unit.

(c) All registered professional nurses assigned to the postanesthesia care unit shall be trained in postanesthesia care, including at least:

1. The management of airway and ventilatory functions;
2. Monitoring of cardiac function, arrhythmia recognition, and treatment of life-threatening emergencies;
3. Management of the patient during altered states of consciousness;
4. Management of monitoring and respiratory equipment;
5. Management of fluid lines, tubes, drains, and catheters;
6. Cardiopulmonary resuscitation;
7. Administration of drugs and identification of drug-related problems; and
8. Recognition of the actions and interactions of anesthetic techniques.

(d) All registered professional nurses in the postanesthesia care unit shall have training in basic cardiac life support.

(e) All registered professional nurses in the postanesthesia care unit shall have training in critical care.

Amended by R.1992 d.72, effective February 18, 1992.

See: 23 N.J.R. 2590(a), 24 N.J.R. 590(a).

Stylistic changes.

8:43G-35.3 Postanesthesia care staff time and availability

(a) There shall be at least two health care personnel, one of whom is a registered professional nurse and the other of whom is either a licensed practical nurse, a registered professional nurse, or a physician, present whenever a patient is in the postanesthesia care unit.

(b) There shall be a ratio of at least one registered professional nurse for every three patients in the postanesthesia care unit.

Administrative Correction to (a): Added text.
See: 22 N.J.R. 1265(b).

8:43G-35.4 Postanesthesia care patient services

(a) The patient shall be accompanied to the postanesthesia care unit by two individuals, one of whom, stationed at the patient's head, shall be a member of the anesthesia team.

(b) An oral report on the patient's condition shall be given to postanesthesia care unit nursing staff by a member of the anesthesia team when the patient is admitted to the postanesthesia care unit.

(c) A member of the anesthesia team shall stay with the patient in the postanesthesia care unit at least until the patient's vital signs, including blood pressure, pulse, and respiration, are recorded.

(d) The postanesthesia care unit shall continually evaluate the condition of each patient and maintain an accurate written report of his or her vital signs, with an objective scoring system used to track the patient's recovery from anesthesia from the time of admission to the unit until discharge.

(e) Electrocardiographic monitoring shall be conducted for each patient, unless such monitoring is not clinically feasible for the patient.

(f) Each patient shall be monitored by pulse oximetry, unless such monitoring is not clinically feasible for the patient.

(g) The postanesthesia care unit shall have immediate access to end-tidal carbon dioxide monitoring.

(h) The medical record maintained for each patient in the postanesthesia care unit shall include at least such preoperative data as: allergies, physical and mental impairments, prostheses, electrocardiogram, vital signs, radiologic findings, laboratory values, drug use, and mobility limitations.

(i) The medical record maintained for each patient in the postanesthesia care unit shall include at least such postoperative data as: the patient's general condition, respiration, consciousness, circulation, special problems or precautions, summary of fluids received during surgery, and oxygen saturation.

(j) Patients shall be discharged from the postanesthesia care unit using discharge criteria, including authority to discharge, which have been developed through the postanesthesia policies and procedures specified at N.J.A.C. 8:43G-35.1(a)1.

8:43G-35.5 (Reserved)

8:43G-35.6 Postanesthesia care supplies and equipment

(a) Postanesthesia care units shall be adjacent to or within the operating suite and the obstetrics suite.

(b) The postanesthesia care unit shall be maintained as a closed unit. Access to the restricted zone of the postanesthesia care unit shall be through or past a control center.

(c) All staff in the postanesthesia care unit shall be attired in scrub attire. Individuals who are permitted limited access may wear cover gowns or jumpsuits as substitutes.

(d) Equipment available in the postanesthesia care unit shall include at least: emergency equipment and drugs, pulse oximetry, equipment necessary for extubation, respirator, various means of oxygen delivery, constant and intermittent suction, blood pressure monitoring, adjustable lighting, immediate access to ventilator, and equipment which ensures protection of the patient's privacy.

8:43G-35.7 Postanesthesia care staff education and training

Requirements for the postanesthesia education program shall be as provided in N.J.A.C. 8:43G-5.9.

8:43G-35.8 (Reserved)

8:43G-35.9 Postanesthesia care continuous quality improvement methods

(a) There shall be a program of continuous quality improvement for the postanesthesia care unit that is integrated into the hospital continuous quality improvement program and includes regularly collecting and analyzing data to help identify health-service problems and their extent, and recommending, implementing, and monitoring corrective actions on the basis of these data.

(b) Continuous quality improvement activities shall include at least monitoring outcomes of patients receiving anesthetic agents.

Amended by R.1999 d.436, effective December 20, 1999.
See: 31 N.J.R. 367(a), 31 N.J.R. 614(a), 31 N.J.R. 4293(c).

Substituted references to continuous quality improvement for references to quality assurance throughout.