



Shiraz University of Medical Sciences
Deputyship of Drug and Treatment
Final Report of Research Project

**Investigation of Patient's Knowledge Rate of
the Patient's Rights Charter in Namazi and
Faqihi Hospitals in the year 2004**

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Executive Manager:

Dr. Saeed Ghazipour

Assistants:

Dr. Sezaneh Haghpanah

Reza Sadeghi Mehr

Masoumeh Kherad

In the Name of God

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Abstract

In recent years, a great change has been made on the patient's rights among different nations and a vast number of policies have been made in this regard. Although, depending on the different social and cultural norms of the society, the nature of the raised rights among different nations differ, these rights must be taken into consideration as a fundamental and international agreement; rights such as respect for personal bounds, observing the confidentiality of medical information, the possibility of receiving or rejecting the treatment by the patient, and knowing the drug effects and treatment measures. Considering the importance of the matter and the attention paid to the client's reverence and observing the patient's rights in our country especially in recent years, it is essential that we are informed about the patient's level of knowledge of their own rights.

Methodology

The present research is a cross – sectional study that was performed in the spring of the year 2004 in Namazi and Faqihi hospitals as the two great and referential treatment and training centers.

The sample volume was estimated as 384 persons who were chosen and interviewed in the wards of the two hospitals by the patient's systematic casual sampling. As a whole, 332 questionnaires were returned and the information was analyzed using Excel and SPSS software.

Results

From the total of 332 questionnaires completed, half of them were related to Namazi hospital and the remaining half were related to Faqihi hospital , The average age of the patients was 43.42 ± 16.7 . 54.6% of the patients were men and the rest were women.

Educationally, 40.8% were illiterate or under high school diploma and the rest held high school diploma and higher degrees. Patient's knowledge of each sevenfold cases mentioned in the patient's rights charter were assessed individually and wholly; on the whole, 64% were knowledgeable and on the whole, 55% of the rights had been observed as far as the patient's rights observation rate from the view point of the staff in related cases were concerned. The patient's rate of knowledge showed no statistical meaningfulness with their level of education ($P > 0.5$), but their rate of knowledge was related to age variable, so the age group under 30, were more informed about more cases of the rights charter than the age group over 30 ($P > 0.2$).

Conclusion

Based on the results of the research, it would seem that patient's knowledge of their own rights is not at an appropriate level, so public information and instruction such as distributing pamphlets, posters and news from media must be performed in a vast dimension, so that everyone should know their own rights and begin their activities in the direction of assessing patient's rights observation and protecting systems regularly and periodically.

Introduction

Based on cultural and social norms, the patient's rights differ among different countries, but these rights and a fundamental and international agreement must be taken into consideration; rights such as respect for personal bounds, observing the confidentiality of medical information, receiving or rejecting the treatment by the patient, and knowing the drug effects and procedures (1).

Instructing and giving information to people about what they must expect the government and presenters of health and treatment services as the patient's rights are considered as being basic matters. Therefore, people play a key role in promoting treatment standards (2).

In our country, too, considering the attention paid to the client's reverence especially the patient's reverence in recent years, and also considering that the patient's rights charter has been set by the deputyship of health, it would seem that giving information and public instruction are necessary in this regard, so that people, as one of the main circles of presenting services, should be informed of their own definite rights and assist the quality promotion and presenting treatment services. Thus, as the first step, it seems necessary that we get knowledge of the present condition and with knowing the present level of knowledge, we take a measure in planning and promoting public knowledge about the patient's rights.

Methodology

The present research is a cross – sectional study that was performed in the spring of 2004 in Namazi and Faqihi hospitals. Considering $d=0.5$ and $p=0.5$, the certainty limit of 95%, the sample volume was estimated as being 384 persons. Considering the number of in – bed wards in the two mentioned hospitals, the patient’s rations from each hospital has been determined and then, using the systematic casual sampling, the patients were chosen. The means of gathering in- formation has been the designed questionnaire on the basis of the patient’s rights charter set by the deputyship of health. The structure of the questionnaire consisted of some pieces of demographic information and being informed of the patient’s rights charter’s paragraphs as well as the rate of observing the cases by treatment staff. The questionnaires were completed by the patients with the expert’s supervision, and finally, 332 questionnaires were returned. After gathering information, the data were analyzed by Excel and Spas software’s.

Diagram No.1:

The distribution of the Condition of the Patient's knowledge of the Patient's Rights Charter as a Whole in Namazi and Faqihi Hospitals in the year 2004

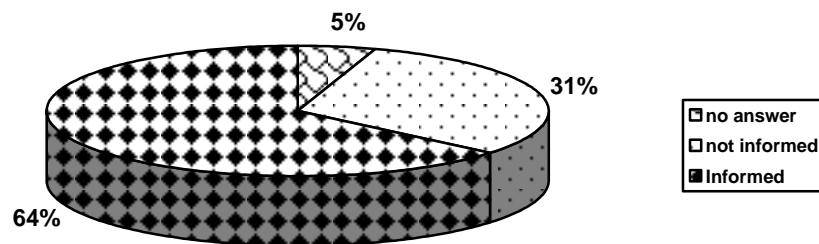


Diagram No.2

The Distribution of the Condition of Observing the Patient's rights as a Whole By the Staff, from the Viewpoint of the patients in Namazi and Faqihi Hospitals in the year 2004

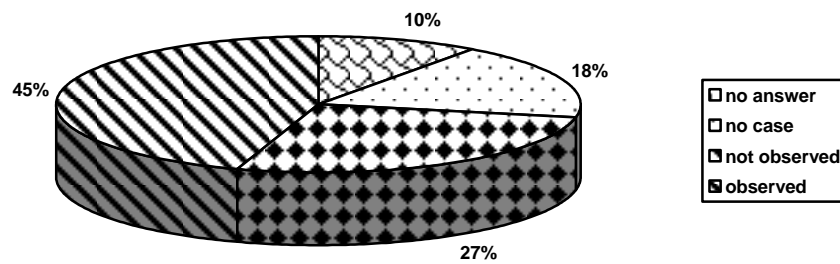


Diagram No.3

The Distribution of the Condition of the Patient's knowledge of Case one of the Patient's Rights Charter in Namazi and Faqihi Hospitals in the year 2004

THE PATIENT HAS THE RIGHT TO EXPECT AN APPROPRIATE CARE AND TREATMENT WITH COMPLETE RESPECT FROM THE TREATMENT GROUP REGARDLESS OF RACIAL AND CULTURAL AND RELIGIOUS FACTORS

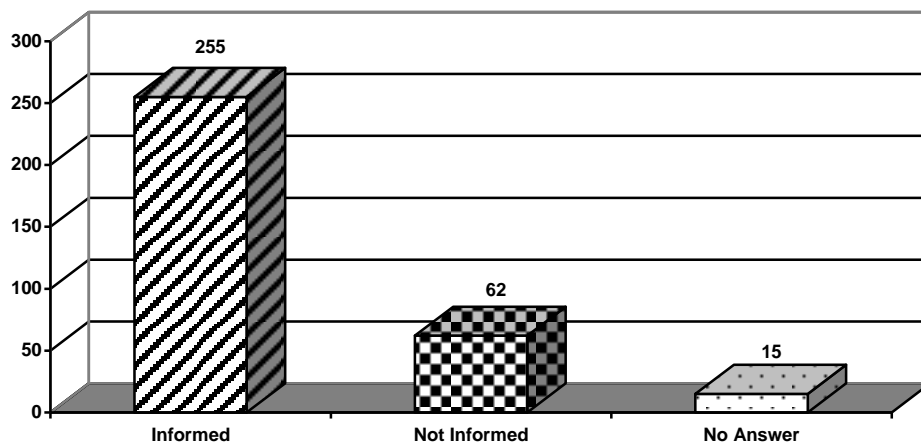


Diagram No.4

The Distribution of the Condition of the Patient's knowledge of case Two of the Patient's Rights charter in Namazi and Faqihi Hospital in the year 2004.

THE PATIENT HAS THE RIGHT, TO KNOW THE PHYSICIAN, THE NURSE, THE PLACE OF HOSPITALIZATION, AND THE MEDICINAL GROUP, IN CASE OF INCLINATION

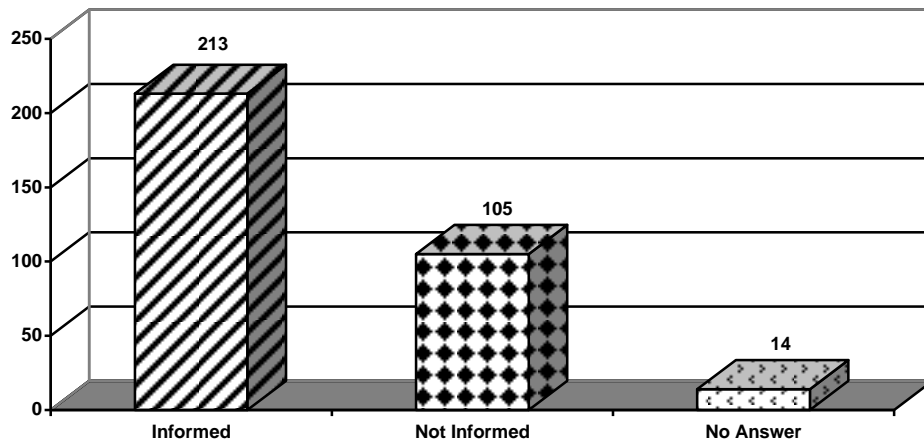


Diagram No.5

The Distribution of the Condition of the Patient's knowledge of Case Three of the Patient's Rights Charter in Namazi and Faqihi Hospitals in the year 2004

THE PATIENT HAS THE RIGHT TO PERSONALLY OR VIA ONE OF HIS OR HER RELATIVES ASK THE MEDICINAL PHYSICIAN ABOUT THE DIAGNOSIS, TREATMENT, AND PROGRESS PHASES OF HIS OR HER DISEASE AND GET THE REQUIRED INFORMATION, SO THAT THIS MUST NOT END IN ANY DELAY IN THE CONTINUATION OF TREATMENT OR PERIPHERAL THREAT OF THE PATIENT IN AN EMERGENCY CASE.

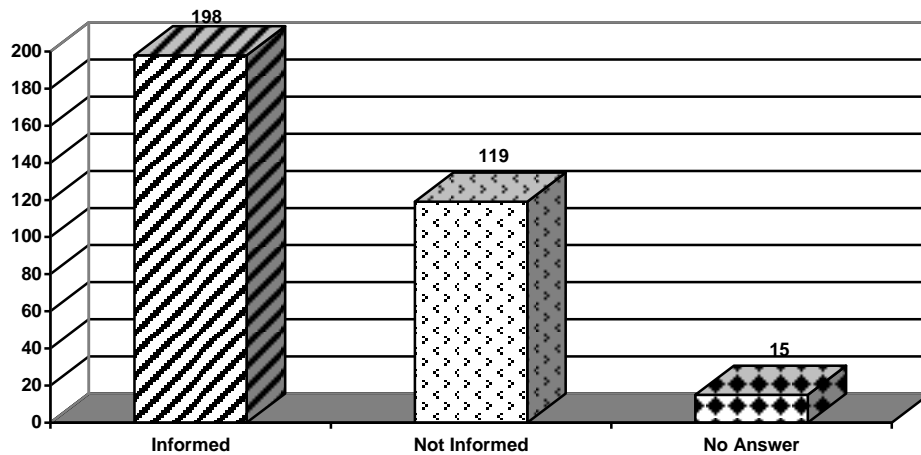


Diagram No.6

The Distribution of the condition of the Patient's knowledge of case Four of the patient's Rights charter in Namazi and Faqihi Hospitals in the year 2004

THE PATIENT HAS THE RIGHT TO RECEIVE THE REQUIRED INFORMATION – WITHIN THE LIMIT OF HIS OR HER UNDERSTANDING – ABOUT THE PROBABLE COMPLICATIONS OR THE USAGE OF OTHER METHODS FROM THE MEDICINAL PHYSICIAN AND CO – OPERATE IN CHOOSING THE FINAL METHOD OF TREATMENT.

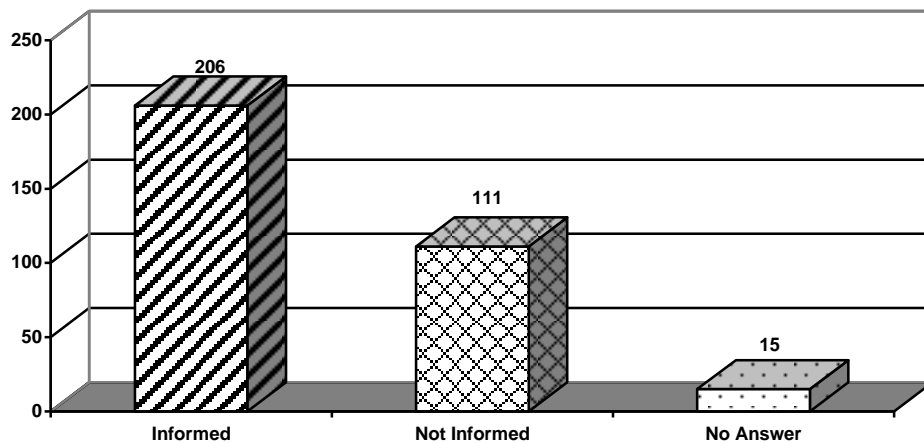


Diagram No.7

The Distribution of Condition of the Patient's knowledge of Case Five of the patient's Rights charter in Namazi and Faqihi Hospitals in the year 2004

THE PATIENT HAS THE RIGHT – IN CASE OF HIS OR HER PERSONAL INCLINATION AND IN ACCORDANCE WITH LEGAL STANDARDS – TO ANNOUNCE HIS OR HER CONSENT OF THE ENDING OF THE TREATMENT OR REFER TO OTHER TREATMENT CENTERS, SO THAT IT DOES NOT THREATEN THE HEALTH OF SOCIETY'S INDIVIDUAL PEOPLE.

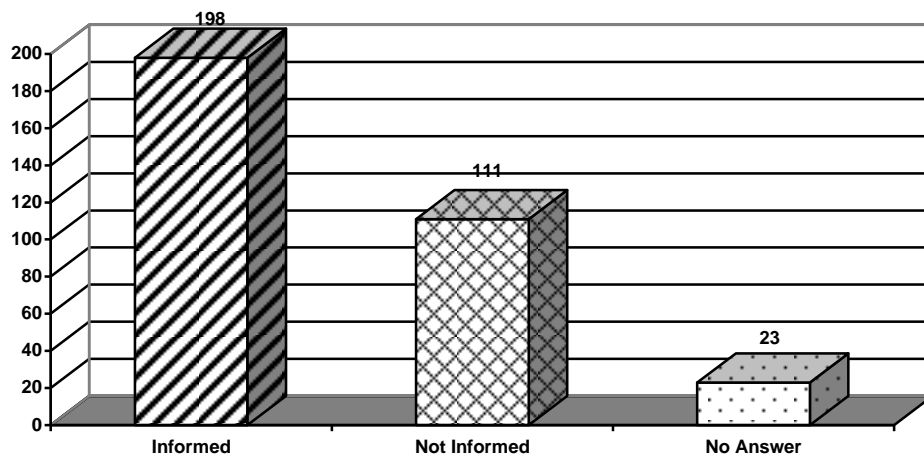


Diagram No.8

The Distribution of the Condition of the Patient's knowledge of Case Six of the Patient's Rights Charter in Namazi and Faqihi Hospitals in the year 2004

TO PRESERVE HIS OR HER PERSONAL BOUNDS, THE PATIENT HAS THE RIGHT TO MAKE SURE THAT HIS OR HER MEDICAL FILE'S CONTENTS, OBSERVATION'S RESULTS, AND CLINICAL CONSULTATIONS ARE CONFIDENTIAL, WITH THE EXCEPTION OF THE CASES IN WHICH THESE DOCUMENTS ARE INQUIRED ON THE MEDICINAL GROUP BY LEGAL AUTHORITIES.

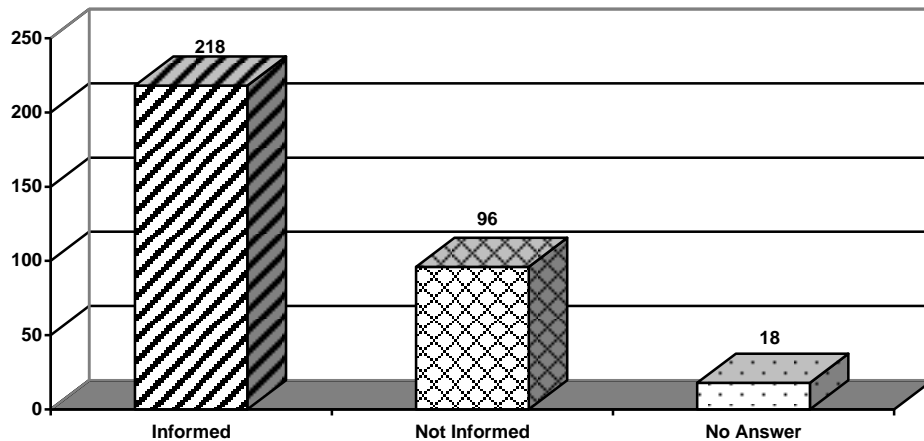


Diagram No.9

The Distribution of the Condition of the Patient's know ledge of case seven of the Patient's Rights charter in Namazi and Faqihi Hospitals in the year 2004

THE PATIENT HAS THE RIGHT TO ENJOY THE PHYSICIAN'S AND OTHER MEMBERS OF THE MEDICINAL TEAM'S TRUSTWORTHINESS, SO THE CLINICAL PRESENCE OF THE PERSONS WHO DO NOT DIRECTLY INVOLVE IN THE PROCESS OF TREATMENT IS SUBJECT TO THE PATIENT'S PERMISSION.

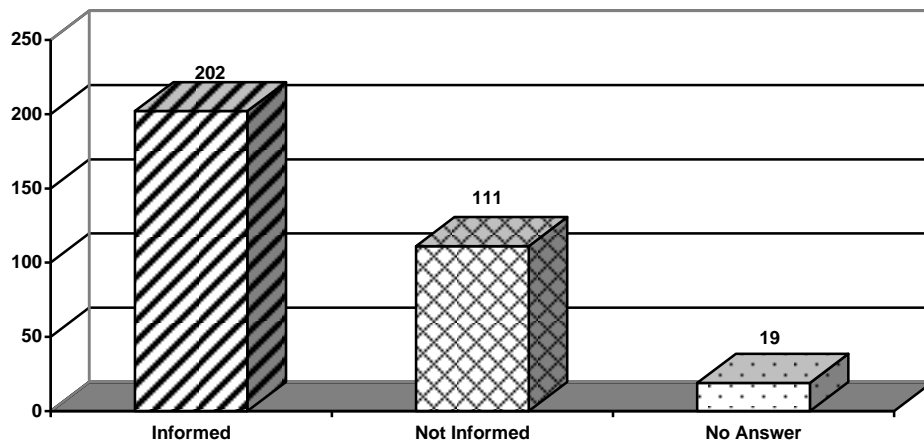


Diagram No.10

The Distribution of the Condition of the Patient's knowledge of Case Eight of the Patient's Rights Charter in Namazi and Faqihi Hospitals in the year 2004

THE PATIENT HAS THE RIGHT TO MAKE SURE THAT HE OR SHE HAS ACCESS TO THE MEDICINAL PHYSICIAN AND OTHER MAJOR MEMBERS OF THE MEDICINAL TEAM IN THE COURSE OF BEING BEDRIDDEN IN THE HOSPITAL, BEING TRANSFERRED, AND AFTER BEING RELEASED FROM THE HOSPITAL.

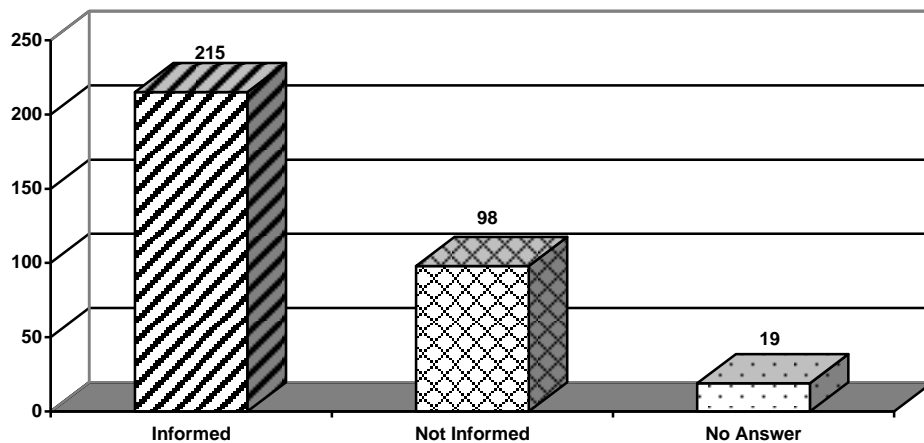


Diagram No.11

The Distribution of the Condition of the Patient's Knowledge of Case Nine of the Patient's Rights Charter in Namazi and Faqihi Hospitals in the year 2004

THE PATIENT HAS THE RIGHT TO GET KNOWLEDGE OF THE KINDS OF THE HOSPITAL'S INSTRUCTIONAL AND RESEARCH ACTIVITIES WHICH AFFECT HIS OR HER HEALTH AND TREATMENT AND THUS, ANNOUNCES HIS OR HER INCLINATION AND CONSENT WITH THE CURATIVE COOPERATION IN DIFFERENT STAGES OF THE RESEARCH.

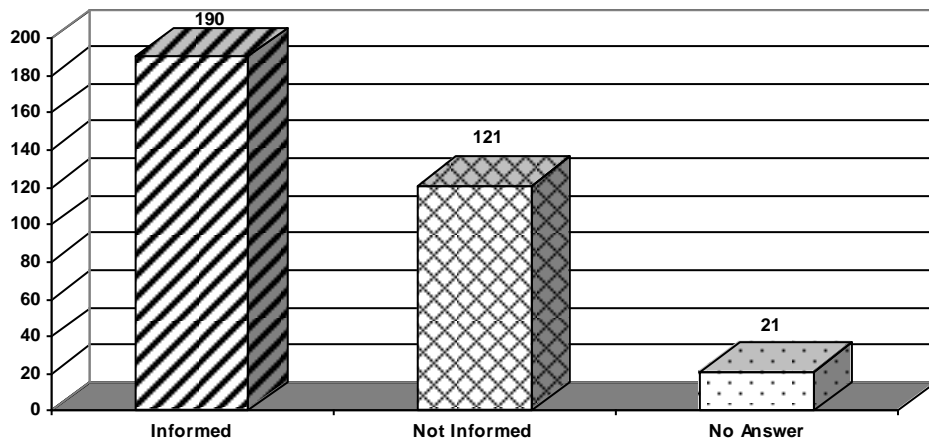


Diagram No.12

The Distribution of the Condition of the Patient's knowledge of Case Ten of the Patient's Rights Charter in Namazi and Faqihi Hospitals in the yea 2004

IN CASE OF NECESSITY, TO BE TRANSFERRED TO OTHER TREATMENT CENTERS FOR THE CONTINUATION OF TREATMENT, THE PATIENT HAS THE RIGHT TO PREVIOUSLY GET INFORMED OF THE MEDICINAL TEAM'S SKILLS, PRICE LISTS, AND MEDICAL INSURANCE COVERAGES IN THE TREATMENT CENTERS OF THE DESTINED HOSPITAL.

