# Comparison Study of patient's rights Concept among health care providers (physicians and nurses) and patients in El-Minia, El-Menofya and Al-Zagazeeg University Hospitals,

### By

Fayrouz Ibrahem Nour el Din\*, Azza S., Mohammed\*\* , Ghada Mustafa Abd-Elazeem\*\*\* and Sahar A Abood\*\*\*\*

Forensic medicine and toxicology departments, Faculties of Medicine, AlMenofya University\*, Al-Zagazeg university\*\*, El-Fayoum University\*\*\*, and Faculty of Nursing\*\*\*\*, El-MiniaUniversity\*\*\*\*, Egypt.

# Abstract

This study tried to through the light on the knowledge and practices of some patient's rights among health care providers (HCP) (physicians and nurses) and patients in El-Minia, El-Menofya and Al-Zagazeg University Hospitals. .The study evaluated knowledge and practices related to patient's rights among three groups (physicians, nurses and patients) from each hospital, each group included 50 individuals. Each group was interviewed separately and data were collected by a structured well designed questionnaire. Three questionnaires were used one for each group. Each questionnaire included personal, social data and data related to knowledge and practices related to patient's rights. Comparison study among the three hospital universities regarding knowing and practicing the patient rights among physicians revealed that there is significance difference regarding choosing physician where p value = 0.01 and there is a difference but not significance regarding change treatment at any stage of the disease where p value = 0.5. Also the study revealed non significant difference between physicians of the three hospitals regarding nurse keep confidentially, knowing and calling patient by name, privacy and consent where p values were 0.6, 0.6, 0.6, and 0.4 respectively. Comparison study among the three hospital universities regarding knowing and practicing the patient rights between physicians revealed that there is non significant difference regarding these patient rights: 1-explain risks of the treatment or operation, 2- explaining the costs of the treatment, 3- offer the whole care, 4- dealing with the patient as a human 5- and knowing the name of health care provider where p values for those that said no for the first two rights and no for the last three rights were 0.2, 0.7,0.5, 0.7 and 0.3 respectively. Comparison study among the three hospital universities regarding knowing and practicing the patient rights between nurses revealed that there are no significant differences regarding patient right to choose physician or change treatment where most of them refused this right. On the other hand most of nurses in the three hospitals agree that the patient has the right to be called by his/her name and his right to give consent and keep confidentially and his privacy. Also most of nurses of the three hospitals agree these rights: 1-explain risks of the treatment or operation,2explaining the costs of the treatment, 3- offer the whole care, 4- dealing with the patient as a human 5- and knowing the name of health care provider. Comparison study among the three hospital universities regarding knowing and practicing the patient rights between patients revealed that most of them do not know the these rights.

The study concluded that El-Minia university hospital is in need for more and more information about patients rights specially among physicians. Also the hospitals of AlMenofya and Al-Zagazeek in need to learn more about patients rights and try to be involved in accreditation and dependence programs with El-Minia university hospital. The study recommend that health education cessions for health care providers are essential to increase their knowledge and application of this new concern (patients' rights). A hospital must inform each patient of his or her rights.

*Key words*: *Patient's rights, Physician, nurse, patient privacy, consent El-Minia, Al-Menofya, Al-Zagazeg* 

### **Introduction**

Patient rights encompass legal and ethical issues in the provider-patient relationship, including a person's right to privacy, the right to quality medical care without prejudice, the right to make informed decisions about care and treatment options, and the right to refuse treatment. Fallon. (2004) & http://www.healthline.com/galecontent/patient-rights-1 2010) wrote: The patient has the right to:

-- Participate in the development and implementation in the plan of care. -be treated with respect and dignity-- be informed about condition, treatment options, and the possible results and side effects of treatment-- refuse treatment in accordance with the law, and receive information about the consequences of refusal.-- quality health care without discrimination because of race, creed, gender, religion, national origin, or source of payment .-- privacy and confidentiality, which includes access to medical records upon request.--personal safety-- know the identity of the person treating the patient, as well as any relationship between professionals and agencies involved in the treatment-- informed consent for all procedures--Information, including the medical records by the patient or by the patient's legally authorized .-- Consultation and communication-- Complain or compliment without the fear of retaliation or compromise of access or quality of care. On the other hand the patient is further responsible for consequences of refusal of treatment, of not following the rules and regulations of a hospital, and of not being considerate of others' rights. The patient is also responsible for providing assurance that financial obligations of care are met (Fallon. 2004). Also the patient has the right to get medical treatment options communicated in a language he can understand and that allows him to give informed consent and participate in his medical care. Also the patient has the right to discuss appropriate medical treatment options with his physician(s) and other care givers prior to and during the course of treatment; to agree to recommended treatment or to refuse treatment, even life-sustaining treatment; to be informed of the consequences of decisions regarding treatment or refusal of treatment. Also the patient has the right to be treated in the least restrictive environment possible and in a way that his human dignity and safety are ensured. Also the patient has the right to respected regardless his beliefs, values, and cultural needs. To get personal clothing, possessions, religious and symbolic items in his room as space allows. Privacy/confidentiality: The patient also has the right to: Privacy when discussing personal medical information and during examinations. Get a person of his own sex present during physical examinations, and treatment procedures. Privacy during personal hygiene, except when assistance is needed for his personal safety and well-being. Remain clothed appropriately during a medical procedure. Expect confidential treatment of communication regarding his care and his medical records. Review medical records, to the extent permitted by law; to have information explained and interpreted as necessary, unless restricted by law (George, 1991,). Pain management: the patient has the right to prevent pain or adequately controlled. Know what alternative treatments may be available. Give expressions of pain believed and responded to as quickly as possible.

<u>Participation in research studies</u>: he has the right to have sufficient information so that he can make an informed choice about participation in a proposed research trial. Be fully informed about the risks and benefits of such participation. Refuse to participate without it negatively impacting the medical care to which he is entitled. *Billing information:* You have the right to know the cost of the medical services provided by Advantage Health Physicians. Know any financial limitations which may be placed upon provision of care. Receive assistance if there is difficulty in paying his bill. http://www.opm.gov/insure/health/billrights.asp#what on December 18, 2009). The patient has the right to take part in treatment decisions and knows his treatment options and takes part in decisions about his care. Parents, guardians, family members, or others that he choose can speak for him if he cannot make his own decisions .Also the patient has the right to choose the health care providers who can give him high-quality health **care** 

# Aim of the work:

This research aimed at evaluation and comparison study of knowledge and practices related to patient's rights among health care providers (HCP) (physicians and nurses) and patients in El-Minia, El-Menofya and Al-Zagazeg University Hospitals

# **SUBJECTS AND METHODS**

The study was performed in El-Minia, Al-Menofya, and Zagazeeg University Hospitals. One hindered fifty from each hospital (50 physicians, 50 nurses working in different departments (selected randomly) and 50 patients admitted in the same departments in the same hospital with age ranged from 25 to 50 years. The study was done during July and September where the maximum flow of patients occurs in summer time of 2009.

Data were collected by a designed well structured questionnaire designed by (Mosalem et al., 2006). Every individual was interviewed, the aim of the study was explained, a verbal consent was taken from each patient participated in the study and the questions were filled by the researcher. The questionnaire included:-Demographic data: name, age, sex, education level, residence and occupation.

-The questionnaire covered knowledge regarding patients' rights and questions about application of patients' rights practices.

## Statistical analysis:

Data entry and analysis were all done with IBM compatible computer using software called Statistical Package for Social Science (SPSS) for windows version 13 and microstate program. Data were presented by frequency distribution. Chi Square test, fisher exact and Z tests. The probability of less than 0.05 used as a cut off point for all significant tests.

### **Results:**

There were three groups from each hospital were taken in this study, physicians (N=50), nurses (N=50) and patients (N=50).

Regarding Minia hospital, thirty four percent of physicians and 66% of nurses said that they know the patients' rights. Fourteen percent only of patients said that they know these rights as shown in table (1a, b, and c). Regarding Elmenophya hospital, 56 % of physicians and 88 % of nurses said that they know the patients' rights. Forty two percent of patients said that they know these rights as shown in table (1a, b, and c)... Regarding Al-Zagazeeg hospital, 36 % percent of physicians and 84% of nurses said that they know the patients' rights. Twenty two percent of patients said that they know these rights as shown in table (1a, b, c)... So there is a significance difference between the frequency of those knows patient rights in Minia hospital from one hand and Zagazeeg and Menofya from the other hand regarding health care providers (physicians and nurses) and patients where p value was 0.04, 0.01 and 0.004 respectively.

Thirty two percent of physicians, 24% of nurses and 22% of the patients said that the patients have the right to choose the treating doctor in El-Minia hospital (table 2a). Thirty eight percent of physicians, 30% of nurses and 32% of the patients said that the patients have the right to choose the treating doctor in El-Menophya hospital (table 2b).

Forty four percent of physicians, 36% of nurses and 26% of the patients said that the patients have the right to choose the treating doctor in El-Zagazeek hospital (table 2c). Regarding the right to change the doctor or the treatment, 36% of physicians, 14% of nurses and 14% of patients said that the patients have this right (table 2a). Regarding the right to change the doctor or the treatment, 40% of physicians, 22% of nurses and 24% of patients said that the patients have this right (table 2b) in El-Minophya hospital. Regarding the right to change the doctor or the treatment, 46% of physicians, 26% of nurses and 18% of patients said that the patients have this right (table 2c)

Among the three hospital universities regarding knowing and practicing the patient rights between physicians there was significance difference regarding choosing physician where p value = 0.01 and there is a difference but not significance regarding change treatment at any stage of the disease where p value = 0.5. Also the study revealed non significant difference between physicians of the three hospitals regarding nurse keep confidentially, knowing and calling patient by name, privacy and consent where p values were 0.6, 0.6, 0.6, and 0.4 respectively. Comparison study among the three hospital universities regarding knowing and practicing the patient rights between physicians revealed that there was non significant difference regarding these patient rights: 1-explain risks of the treatment or operation,2- explaining the costs of the treatment, 3- offer the whole care, 4- dealing with the patient as a human 5- and knowing the name of health care provider where p values for those that said no for the first two rights and no for the last three rights were 0.2, 0.7, 0.5, 0.7 and 0.3 respectively (table 2 a).

Comparison study among the three hospital universities regarding knowing and practicing the patient rights between nurses revealed that there are no significant differences regarding patient right to choose physician or change treatment where most of them refused this right. On the other hand most of nurses in the three hospitals agreed that the patient has the right to be called by his/her name and his right to give consent and keep confidentially and his privacy. Also most of nurses of the three hospitals agreed these rights: 1-explain risks of the treatment or operation,2- explaining the costs of the treatment, 3- offer the whole care, 4- dealing with the patient as a human 5- and knowing the name of health care provider (table 2b) Comparison study among the three hospital universities regarding knowing and practicing the patient rights between patients revealed that most of them did not know these rights1patient right to choose physician or change treatment 2- the patient has the right to be called by his/her name 3- his right to give consent and keep confidentially and his privacy 4--explain risks of the treatment or operation, c5- explaining the costs of the treatment, 6- offer the whole care, 7-- dealing with the patient as a human 8- privacy 9- knowing the name of health care provider (table 2 c).

Knowing and practicing the patient rights between physicians regarding acceptance of change of treatment and physician from one hand and acceptance of patient right to decide choosing of the physician and treatment from the other hand, most of physician of El-Minia Hospital refused that right but In Menophya the physicians agreed to change treatment and doctor but refused the patient decision. In Al-Zagazeek the results were like El-Minophya but number of physicians that agreed this right was less than Al-Menofya hospital (tables 3 a, b, c). Comparison study of the three hospitals for the previous rights (change doctor and treatment and acceptance of patient decision revealed no significant difference where p values were 0.2, 0.8) (table 4) Also the comparison study regarding knowing and practicing the patient rights between nurses of El-Minia Hospital regarding acceptance of change of treatment and physician from one hand and acceptance of patient right to decide choosing of the physician and treatment from the other hand, , most of nurses refused that right and the same In Al-Menofya and Al-Zagazeeg hospitals tables( 5a, 65, 5c).

The study of the previous rights among nurses (change doctor and treatment and acceptance of patient decision) revealed no significant difference where p values were 0.6, 0.3 respectively) (table 6). .Regarding the right of the patient to take part in scientific research and care plan, the study revealed that 64 % of physicians of El-Minia hospital do not know the right of the patient to take part in the scientific research while 94% of patients did not know that right p value was 0.005. Regarding the care plan there was non significant difference between physicians and patients of El-Minia hospital (p value = 0.5) (table 7a). Regarding the right of the patient to take part in scientific research and care plan, the study revealed high significant difference between physicians and patient: 46 % of physicians of El-Menofya hospital know the right of the patient to take part in the scientific research while 18% of patients know that right p value was 0.005. Regarding the care plan there was non significant difference between physicians and patients of El-Minofya hospital (p value = 0.8) (table 7b).

Regarding the right of the patient to take part in scientific research and care plan, the study revealed high significant difference between physicians and patient: 40 % of physicians of Al-Zagazeeg hospital know the right of the patient to take part in the scientific research while 12% of patients know that right p value was 0.003. Regarding the care plan there was non significant difference between physicians and patients of Al-Zagazeeg hospital (p value = 0.4) (table 7c). Comparison of the three hospitals for the previous rights among physicians and patients revealed no significant difference among physicians but great difference with significant p value (0.001,0.004) between patients regarding take part in scientific search and care plan (table 8a, 8b).

Comparison between physicians and nurses in El-Minia hospital regarding the right of the patient to know hospital facilities the study revealed that 64% of physicians refused that right and 50 % of nurses refused also (table 9a). Comparison between physicians and nurses in El-Menofya hospital regarding the right of the patient to know hospital facilities the study revealed that 58% of physicians refused that right and 38 % of nurses refused also (table 9b). Comparison between physicians and nurses in Al-Zagazeeg hospital regarding the right of the patient to know hospital facilities the study revealed that 62% of physicians refused that right and 48 % of nurses refused also (table 9c). The present study revealed no significant difference among physicians and nurses in the three hospitals regarding the right of the patient to know hospital facilities. Physicians and nurses of El-Minia hospital recorded high percent of refusal (table 10).

Table (1): Frequency of those knows patients' rights among the three groups (physicians, nurses and patients) in El-Minia, El-Menofya, and Al-Zagazeeg University Hospitals.

• No. =50, \*\* No. =50, \*\*\* No. =50

Table (1a)

University	Know p	Know patients' rights among p <u>hysicians</u>									
	Yes	No	P value								
El-Minia	17(34%)	33(66%)	0.04*								
El-Menofya	28(56%)	22(44%)									
Al-Zagazeeg	18(36%)	32(64%)									

#### Table (1b)

University	Know p	Know patients' rights among n <u>urses</u>									
	Yes	No	P value								
El-Minia	33(66%)	17(34%)	0.01*								
El-Menofya	44(88%)	6(12%)									
Al-Zagazeeg	42(84%)	8(16%)									

## Table (1c)

University	Know p	Know patients' rights among patients								
	Yes	Yes No P value								
El-Minia	7(14%)	43(86%)	0.004*							
El-Menofya	21(42%)	29(58%)								
Al-Zagazeeg	11(22%)	39(78%)								

Table (2a): Frequency of knowledge and practices among <u>Physicians</u> in different Universities

The right													
		El-Mi	inia			El-M	enofya	a		Al-Z	Lagazee	g	P value
		Yes	No		Y	les	Ĩ	No		Yes	Ĭ	No	1
	No	%	No	%	No	%	No	%	No	%	No	%	
Choose doctor*	16	32	34	68	19	38	31	62	22	44	28	56	0.01*
Change d / ttt*	18	36	32	64	20	40	30	60	23	46	27	54	0.5
Calling by name**	15	25	35	75	16	32	34	68	19	38	31	62	0.6
Nurses keep conf. **	12	24	38	76	15	30	35	70	13	26	27	54	0.6
sign consent*	17	34	33	66	18	36	32	64	21	42	29	58	0.6
Privacy**	15	30	35	70	18	36	32	64	21	42	29	58	0.4
Explain risks*	9	18	41	82	13	26	37	74	16	32	34	68	0.2
Explain costs*	15	30	35	70	15	30	35	70	18	36	32	64	0.7
Keeping secrets**	11	22	39	78	13	26	37	74	11	22	39	78	0.8
Offer whole care**	31	62	19	38	33	66	17	34	36	72	14	28	0.5
ttt as human **	31	62	19	38	33	66	17	34	35	70	15	30	0.7
Know HCP name*	25	50	25	50	29	58	21	42	32	64	18	36	0.3

Table (2b): Frequency of knowledge and practices among <u>Nurses</u> in different Universities

The right					Nurse	s amo	ng diffe	erent U	nivers	ities			
		El-I	Minia			El-M	enofya		Al-Zagazeeg				P
		Yes	]	No	Ŋ	es	1	No		Yes	Ĭ	No	value
	No	%	No	%	No	%	No	%	No	%	No	%	
Choose doctor*	12	24	38	76	15	30	35	70	18	36	32	64	0.4
Change d / ttt*	7	14	43	86	11	22	39	78	13	26	37	74	0.3
Calling by name**	42	84	8	16	45	90	5	10	48	96	2	4	0.1
Nurses keep conf .**	34	68	16	32	38	76	12	24	40	80	10	20	0.3
sign consent*	41	82	9	18	44	88	6	12	47	94	3	6	0.1
Privacy**	35	70	15	30	39	78	11	22	41	82	9	18	0.3
Explain risks*	33	66	17	34	36	72	14	28	39	78	11	22	0.4
Explain costs*	35	70	15	30	39	78	11	22	41	82	9	18	0.3
Keeping secrets**	35	70	15	30	37	74	13	26	40	80	10	20	0.8

Offer	whole	32	64	18	36	35	70	15	30	37	74	13	26	0.5
care**														
ttt as hu	nan **	26	52	24	48	28	56	22	44	31	62	19	38	0.5
Know	HCP	21	42	29	58	24	48	26	52	26	52	24	48	0.6
name*														

Table (2c): Frequency of knowledge and practices among <u>Patients</u> in different Universities

The right				p	oatients	s amon	ng diffe	rent U	niversi	ties			
		El-M	linia			El-M	enofya		Al-Zagazeeg				Р
		Yes		No	Ŋ	les		No	]	les	Ĭ	No	value
	No	%	No	%	No	%	No	%	No	%	No	%	
Choose doctor*	13	26	37	74	16	32	34	68	13	26	37	74	0.7
Change d / ttt*	9	18	41	82	12	24	38	76	9	18	41	82	0.6
Calling by name**	17	34	33	66	20	40	30	60	17	34	33	66	0.7
Nurses keep conf .**	16	32	34	68	19	38	31	62	16	32	34	68	0.7
sign consent*	8	16	42	84	11	22	39	78	8	16	42	84	0.6
Privacy**	18	36	32	64	21	42	29	58	18	36	32	64	0.7
Explain risks*	8	16	42	84	11	22	39	78	8	16	42	84	0.6
Explain costs*	9	18	41	82	12	24	38	76	9	18	41	82	0.6
Keeping secrets**	9	18	41	82	12	24	38	76	9	18	41	82	0.6
Offer whole care**	10	20	40	80	13	26	37	74	10	20	40	80	0.7
ttt as human **	7	14	43	86	10	20	40	80	7	14	43	86	0.6
Know HCP name*	43	86	7	14	46	92	4	8	43	86	7	14	0.5

Table (3a): The relation between acceptance that the patients have the right to change the doctor or treatment and acceptance of this decision among physicians in El-Minia University.

	Have the right to change doctor or			
	treatment	decision		Total
	No	No	No	
Yes	5	10	15	100
No	8	27	35	100
Total	13	37	50	100
$Chi^2 = 0.1$	7 df=1		<b>P</b> = (	).6

Table (3b): The relation between acceptance that the patients have the right to change the doctor or treatment and acceptance of this decision among physicians in El-Menofya University.

	Have the right to change doctor or treatment No	Accept patient decision No	No.	Total
Yes	12	9	21	100
No	6	23	29	100
Total	18	32	50	100
$Chi^2 = 5.5$	5 df= 1		<b>P</b> = 0.	01*

Table (3c): The relation between acceptance that the patients have the right to change the doctor or treatment and acceptance of this decision among physicians in Al-Zagazeeg University.

	Have the right to change doctor or treatment	Accept patient decision	Total No
	No	No	INU
Yes	10	7	17 100
No	8	25	33 100
Total	18	32	50 100
$Chi^2 = 4.4$	df= 1		P = 0.03*

Table (4): Comparison of acceptance that the patients have the right to change the doctor or treatment and acceptance of this decision among <u>Physicians</u> in different Universities

	El-N	Iinia	El-Me	enofya	Al-Za	gazeeg	P value
	Yes No	No No	Yes No	No No	Yes No	No No	
Have the right to change doctor or treatment	5	8	12	6	10	8	0.2
Accept patient decision	10	27	9	23	7	25	0.8

Table (5a): The relation between acceptance that the patients have the right to change the doctor or treatment and acceptance of this decision among nurses in El-Minia University.

	Have the right to change doctor o	r Accept	patient		
	treatment	decision	_		Total
	No	No		No	
Yes	6	1		7	100
No	25	18		43	100
Total	31	19		50	100
$Chi^2 = 0.9$	df= 1	-		$\mathbf{P} = 0$	.3

Table (5b): The relation between acceptance that the patients have the right to change the doctor or treatment and acceptance of this decision among nurses in El-Menofya
University.

	Have the right to change doctor or	Accept patient		
	treatment	decision		Total
	No	No	No	
Yes	11	3	14	100
No	26	10	36	100
Total	37	13	50	100
$Chi^2 = 0.9$	df= 1		$\mathbf{P} = 0$	.3

Table (5c): The relation between acceptance that the patients have the right to change the doctor or treatment and acceptance of this decision among nurses in Al-Zagazeeg University.

	Have the right to change doctor or	Accept patient		
	treatment	decision		Total
	No	No	No	
Yes	9	2	11	100
No	26	13	39	100
Total	35	15	50	100
$Chi^2 = 0.3$	df= 1		P = 0.5	5

Table (6): Comparison of acceptance that the patients have the right to change the doctor or treatment and acceptance of this decision among <u>Nurses</u> in different Universities

	El-M	linia	El-Me	nofya	Al-2	Lagazeeg	P value	
	Yes No	No No	Yes No	No No	Yes No	No No		
Have the right to change doctor or treatment	6	25	11	26	9	26	0.6	
Accept patient decision	1	18	3	10	2	13	0.3	

Table (7a): Frequency of those that agree that patients have the right to get acceptance to participate the scientific research and care plan among physicians and patients in El-Minia University Hospital.

	Group									
Patients have the right to get acceptance to participate in	Physicians				Patients				Р	
	Yes No	%	No No	%	Yes No	%	No No	%		
Scientific research	18	36	32	64	3	6	47	94	0.005*	
Care plan	9	18	41	82	6	12	44	88	0.5	

Table (7b): Frequency of those that agree that patients have the right to get acceptance to participate the scientific research and care plan among <u>physicians and patients</u> in El-Menofya University Hospital.

Patients have the right to	Group									
get acceptance to participate in	Physicians				Patients				P value	
	J	Yes	No		Ŋ	les	I	No		
	No	%	No	%	No	%	No	%		
Scientific research	23	46	27	54	9	18	41	82	0.005*	
Care plan	12	24	38	76	10	20	40	80	0.8	

 Table (7c): Frequency of those that agree that patients have the right to get acceptance to participate the scientific research and care plan among <u>physicians and patients</u> in Al-Zagazeeg University Hospital.

Patients have the right to	Group									
get acceptance to participate in	Phy	Physicians				ents		P value		
	J	les	No		Y	es	Ι	No	]	
	No	%	No	%	No	%	No	%		
Scientific research	20	40	30	60	6	12	44	88	0.003*	
Care plan	11	22	39	78	8	16	42	84	0.4	

 Table (8a): Comparison of those that agree that patients have the right to get acceptance

 to participate the scientific research and care plan among <u>physicians</u> in <u>different</u>

 <u>Universities</u>

			1				
Patients have the	El-N	/Iinia	El-Me	nofya	Al-Za	agazeeg	P value
right to get acceptance to participate in	Yes	No No.	Yes No.	No No	Yes NO.	No No	
Scientific research	18 36	32 64	23 46	27 54	20 40	30 60	0.5
Care plan	9 18	41 82	12 24	38 78	11 22	39 78	0.7

Table (8b) Comparison of those that agree that patients have the right to get acceptance to participate the scientific research and care plan among <u>patients in different</u> <u>Universities</u>

Patients have the right		El-	Minia			El-M	enofy	a		Al-Za	igazee	g	P value
to get acceptance to participate in		Yes		No	Ŋ	les	I	No	]	Yes	I	No	
	No	%	No	%	No	%	No	%	No	%	No	%	
Scientific research	3	6	47	94	9	18	41	82	6	12	44	<b>88</b>	0.001*
Care plan	6	12	44	<b>88</b>	10	20	40	80	8	16	42	84	0.004*

Table (9a):	Frequen	cy of those	e that ag	ree that pat	ients	have the	e ri	ght to get e	explanation
about the	hospital	facilities	among	physicians	and	nurses	in	El-Minia	University
Hospital.			-						

		Have this	Tota	ıl		
Group	Y	Yes		No		%
	No	%	No	%		
Physicians	18	36	32	64	50	100
Nurses	25	50	25	50	50	100
Total	43		57		100	100
$Chi^2 = 1.4$		df=	: 1		Ι	<b>P</b> = 0.2

Table (9b): Frequency of those that agree that patients have the right to get explanation about the hospital facilities among physicians and nurses in El-Menofya University Hospital.

		Have this	right		Tota	1		
	Ye	es	Ν	0				
Group	No	%	No	%	No	%		
Physicians	21	42	29	58	50	100		
Nurses	31	62	19	38	50	100		
Total	52		48		100	100		
$Chi^2 = 3.2$		df=	1		$\mathbf{P} = 0.07$			

Table (9c): Frequency of those that agree that patients have the right to get explanation about the hospital facilities among physicians and nurses in Al-Zagazeeg University Hospital.

	H	lave this r	Total			
Group	Yes		No		No	%
	No	%	No	%		
Physicians	19	38	31	62	50	100
Nurses	26	52	24	48	50	100
Total	45		55		100	100
$Chi^2 = 1.4$		df= 1			<b>P</b> :	= 0.2

Table (10) Frequency of those that agree that patients have the right to get explanation about the hospital facilities among <u>physicians and nurses in different Hospitals</u>

Group	Frequency of those that agree that patients have the right to get explanation about the hospital facilities among physicians and nurses in different Hospitals									
-	El-Minia		El-Menofya		Al-Zagazeeg		P value			
	Yes	No	Yes	No	Yes	No				
	No	No	No	No	No	No				
Physicians	18	32	21	29	19	31	0.8			
Nurses	25	25	31	19	26	24	0.4			

## **Discussion**

The rights of patients developed outside the context of commercial markets, independently of health insurance, and without regard to the existence or source of payment for health care. One becomes a patient when one is ill, injured or in need of medical care. Ordinarily, a patient is in a relationship with a physician, nurse or other health care professional. The law governing patient rights developed hand-in-hand with the medical profession's increasing capacity to cure disease (Wendy, 1998). Patient human rights apply to every individual without regard to race, creed, color, age, sex, religion, economic status, national origin or physical handicap (Adam, 1995). The Patients' Rights is a new requirement for hospitals. The new Patients' Rights for hospitals sets six standards that ensure minimum protections of each patient's physical and emotional health and safety. These standards are (1) Notification of his or her rights; (2) the exercise of his or her rights in regard to his or her care; (3) privacy and safety; (4) confidentiality of his or her records; (5) freedom from restraints used in the provision of acute medical and surgical care unless clinically necessary; and (6) freedom from seclusion and restraints used in behavior management unless clinically necessary (Adam, 1995, Cataloger Of Federal Domestic Program., 1999, and Mosalem et al., 2006,). The quality of care is a uniquely patient-oriented concern, independent of payment. Quality includes the competence of providers in diagnosing, preventing, and treating illness and injury. Concerns about the quality of care arise primarily when one becomes a patient and seeks diagnosis, prevention, or treatment. The law of professional negligence, of course, imposes on physicians and other providers a duty of care to patients, without regard to payment (Robert & Harlod, 1997).

All these activities must be conducted with an overriding concern for the values and dignity of patients (.American Hospital Association, **1992**).

Alan & Francis (2003) wrote: Council of Europe: Recommendations – Health and Quality of Life agreed that the Patients have the right to know the identity of physicians, nurses, and others involved in their care. For many years, common medical practice meant that physicians made decisions for their patients. This paternalistic view has gradually been supplanted by one promoting patient autonomy, whereby patients and doctors share the decision-making responsibility.

Patients' rights vary in different countries and in different jurisdictions, often depending upon prevailing cultural and social norms. Different models of the patient-physician relationship—which can also represent the citizen-state relationship—have been developed, and these

have informed the particular rights to which patients are entitled. In North America and Europe, for instance, there are at least four models which depict this relationship: the paternalistic model, the informative model, the interpretive model, and the deliberative model. Each of these suggests different professional obligations of the physician toward the patient. For instance, in the paternalistic model, the best interests of the patient as judged by the clinical expert are valued above the provision of comprehensive medical information and decision-making power to the patient. The informative model, by contrast, sees the patient as a consumer who is in the best position to judge what is in her own interest, and thus views the doctor as chiefly a provider of information. There continues to be enormous debate about how best to conceive of this relationship, but there is also growing international consensus that all patients have a fundamental right to privacy, to the confidentiality of their medical information, to consent to or to refuse treatment, and to be informed about relevant risk to them of medical procedures (http://www.who.int/genomics/public/patientrights/en/.(http://www.who.i nt/genomics/public/patientrights/en, 2010) www.dent.unc.edu/patient/clinics/student/rights, 2010, Annas 2003)

A patient who is educated about his or her own medical condition can work together with health care providers regarding treatment decisions.

Patients have the right to examine their own medical records and to amend them if necessary. In practice, patients assume that medical records are private; the widespread use of computer transmissions opens the potential for seriously compromising patient confidentiality. The patient's right to decide what medical care to accept is somewhat analogous to a consumer's choice of what to buy. However, because medical care requires specialized knowledge that patients lack, courts have imposed on physicians the common law duty to provide patients with sufficient information to enable them to make decisions about what care to accept. Thus, patient rights to make medical decisions require the correlative duty of physicians to provide information (Drummond, 1980, Routh & Tom1986). If a patient, for whatever reason, is unable to understand the rights extended to him/her, health care providers shall provide whatever assistance is reasonably necessary to assist the patient in understanding the above-noted rights. This may include, but not be limited to, the use of assistive devices for the hearing and seeing impaired or the use of interpreters for patients by simple language

http://www.rush.edu/patients/general/patientrights.html, 2009)

Unfortunately there is a great shortage in this research in Egypt and so the references are few about that important subject.

This study is carried in Egypt due to its great importance where there is enormous lack of knowledge among the health care provider in Egypt. The study revealed shortage in information about the patient rights between physicians in the three selected hospitals because of lack of teaching of the medical ethics in most of faculties of medicine and so between nurses in their faculties. Also the shortage in information about the patient rights between patients is due to ignorance of most patients either due to lack of education or lack of information from the hospitals that treat them. Regarding explanation of the risk of the treatment there is a belief that if the physician explains the risk of the treatment especially surgical operation, the patient will refuse the treatment. The study also revealed that the patient has no the right to take part in scientific research because of the same previous belief. Regarding the professional secrecy the study revealed that most of nurses in the three hospitals keep secrets of patients this may be due to close contact of few number of nurses beside the patient and regular follow up for him while the physician is changed daily in the public hospitals informing his fellow about patient case even in front of his relatives without patient permission.

The study revealed also that the right of calling of the patient by his name is more practiced between nurses than physicians due to the same previous cause and also due to the great number of patients in public hospitals. The study revealed the most of physicians refused the right of the patient to change the physician or the treatment, this due to the nature of many of Egyptian physicians who refuse any one to criticize them. The study revealed that the right of the patient to select his physician is refused from all health care provider because of many reasons firstly the treatment in public hospitals as these three selected hospitals give their service for free and so no right for the patient to select as done in commercial hospitals, secondly there is shortage in some specialists in some diseases, thirdly absence of some physicians from hospitals lead the patient to agree on any physician.

### **Recommendations**

Special offices (Medical Center's Office of Patient Rights) must be held in Egypt for receiving complaints of patients and to make punishment of any person does not give the patient his right. Complaints concerning denial of patient's rights: If a patient feels that he/she has been denied any of the rights listed above the patient should contact the Health offices that concerned with solving the problems first then the courts if the problem not solved. The Office of Patient Rights shall promptly investigate the complaint. Depending upon the nature of the complaint and the need to further investigate the facts, a written response to the patient's complaint must be provided. Patient rights must be included in teaching curriculum for undergraduate and post graduate students.

Hospitals must be supplied by information about patient rights. This information must be written in clear easy language and held on walls of the hospital entrance. Many patients, nurses and physicians are not ware by most patients' rights. Nurses are more aware by the patient rights than physicians or patents themselves. Hospitals must be supplied by information about patient rights. This information must be written in clear easy language and held on walls of the hospital entrance.

### **Conclusions:**

Many patients, nurses and physicians are not ware by most patients' rights. Nurses are more aware by the patient rights than physicians or patents themselves. Effective health care requires collaboration between patients and physicians and other health care professionals. Open and honest communication, respect for personal and professional values, and sensitivity to differences are integral to optimal patient care. As the setting for the provision of health services, hospitals must provide a understanding respecting foundation for and the rights and responsibilities of patients, their families, and physicians... Hospitals must ensure a health care ethic that respects the role of patients in decision making about treatment choices and other aspects of their care. Hospitals must be sensitive to cultural, racial, linguistic, religious, age, gender, and other differences as well as the needs of persons with disabilities.

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استهدفت هذه الدراسة إلقاء الضوء على معرفة بعض حقوق المريض ومدى ممارسة تطبيقها من قبل الأطباء والعاملين بالتمريض وكذلك المريض نفسه **الهدف من الدراسة:** 

دراسة المعرفة والممارسة الفعلية لحقوق المرضى التي تؤدى من قبل الأطباء وهيئة التمريض في المستشفيات الجامعية بالمنوفية والزقازيق والمنيا وكذلك المرضى المترددين عليها.

تمت هذه الدراسة في شكل مقارنة بين الثلاثة مستشفيات الجامعية لمعرفة مدى تطبيق وممارسة هذه الحقوق بها ومن أمثلة حقوق المريض التي كفلتها له اللوائح والقوانين الأجنبية والعربية:

إعلام المريض بهذه الحقوق

2- ممارسة هذه الحقوق أثناء العناية به

لدراسة حقوق المريض وممارسة تطبيقها بالمستشفيات وتوصي الدراسة أيضا أن تكون المستشفيات بوضع بوسترات على الحوائط في مداخل المستشفى توضح بها حقوق المريض وطبع كتيبات صغيرة توزع على المرضى كذلك. وتحتاج مستشفى المنيا الجامعي بصورة خاصة إلى دورات تدريبية والعناية بتدريس حقوق المريض إلى طلبة كليات الطب والتمريض وكذلك باقي المستشفيات التابعة للحكومة والمستشفيات الجامعية لكي تدخل في نظام الاعتماد والجودة الذي اتجهت له معظم الدول في الوقت الحالي وكذلك بعض المستشفيات المستشفيات

الخاصة بمصر