INFORMATION ABOUT PATIENT'S RIGHTS

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Pursuant to Article 11 of the Act on Patient's Rights and Patient's Ombudsman, we inform you below about the patient's rights under the aforementioned Act and separate regulations.

I. Patient's right to health care services

1. The patient **has the right to health services** corresponding to the requirements of current medical knowledge.

2. The patient **has the right to use a reliable waiting list based on medical criteria,** i.e. in a situation of limited availability of appropriate health services, the patient has the right to a transparent, objective procedure based on medical criteria to determine the order of access to these services.

3. The patient has the right to demand **a second opinion**, i.e. the patient has the right to demand that the doctor providing the health services consult another doctor or convene a medical consultation, and the nurse consult another nurse. The request and any refusal shall be recorded in the medical record. A physician may refuse to convene a medical consultation or consult another physician if he/she considers the request referred to above to be unreasonable.

4. A patient has the right to **immediate health services due to a threat to health or life**.

5. The patient has the right to health care services provided with due diligence by health care providers in conditions that meet the professional and sanitary requirements specified in separate regulations. When providing health services, medical professionals shall be guided by the principles of professional ethics as defined by the relevant self-governing bodies of the medical profession.

6. In particularly justified cases, a doctor may not undertake or refrain from treating a patient. However, the delay in providing assistance must not cause a danger of loss of life, serious bodily injury or serious disorder of the patient's health. However, if the doctor makes such a decision, he is obliged to:
   - warn the patient (his legal representative or actual guardian) well in advance;
   - indicate to the patient the doctor or health care facility where the patient has a realistic possibility of receiving the service;
   - justify and record this fact in the medical record.

II. Right to information

1. The patient **has the right to information about his or her rights**.

2. The patient **has the right to information about the type and scope of services provided at a given provider** and about the persons providing these services.

3. The patient **has the right to information** that is understandable and accessible to him. He has the right to ask for clarification until the information provided is fully understood by him.

4. The patient **has the right to information about his health condition**, diagnosis, proposed and possible diagnostic and therapeutic methods, foreseeable consequences of their application or abandonment, results of treatment and prognosis. He also has the right to decide to whom and what information may be provided.

5. The patient has the right to be informed sufficiently in advance of the doctor's intention to abandon the patient's treatment and the doctor's indication of the possibility of obtaining health services from another doctor or health care provider.

6. The patient **has the right to opt out of receiving information**. However, he or she should indicate exactly which information he or she is opting out of, such as his or her health situation.

III. Patient's right to confidentiality of information related to him

The patient has the right to confidentiality - to keep confidential all information related to him, especially about his health condition, diagnosis and prognosis, tests and their results. Without the consent of the patient (or the consent of the person who has legal custody of the patient), no one may be informed about the patient's condition. The patient has the right to indicate to whom information covered by confidentiality will be shared. This right also applies after the patient's death.

IV. Right to consent

1. A patient, including a minor who is 16 years of age or older, **has the right to give informed consent for health care services.** The right to consent is vested in the legal representative, or in the absence of a legal representative, the actual guardian, if the patient:
   - is under 18 years of age,
   - is completely incapacitated,
   - incapable of giving informed consent.

2. The patient **has the right to refuse or request the discontinuation of the service**. The patient has the right to object to the provision of health care, despite the consent of the legal representative or actual guardian:
   - who is at least 16 years old,
   - incapacitated,
   - mentally ill or mentally retarded,

   but having sufficient discernment. In this case, the permission of the guardianship court is necessary.

3. In the case of a surgical procedure or the use of a method of treatment or diagnosis that poses an increased risk to the patient, consent shall be given in writing.

4. Consent or refusal should be preceded by the presentation to the patient of comprehensive information on the planned or already provided service.

V. The right to respect for the patient's intimacy and dignity

1. The patient **has the right to respect for intimacy and dignity.** The person providing health care services is obliged to act in a manner that ensures respect for this right.

2. The patient **has the right to die peacefully and with dignity**.

3. The patient **has the right to pain treatment**. The health care provider is obliged to take measures to determine the severity of pain, treat pain and monitor the effectiveness of this treatment

4. The patient **has the right to have a loved one present when health services are provided.** For the sake of the patient's health safety or in the case of the likelihood of an epidemic threat, the person providing health services may refuse the presence of a person close to the patient. The refusal must be recorded in the medical record.

5. Medical professionals other than those providing health services shall participate in the provision of such services only if it is necessary due to the nature of the service or the performance of control activities under the regulations on medical activity.

6. The presence of other persons at the provision of the service, such as medical students, requires the patient's consent. If the patient is a minor, completely incapacitated or incapable of giving informed consent, the consent of the patient's guardian and the physician providing the health care service is required.

VI. Patient's right to medical records

1. The patient **has the right to access medical records** relating to his/her health condition and health services provided to him/her.

2. The data contained in medical records are subject to legal protection.

3. The healthcare provider is obliged to keep, store and make available medical records in the manner prescribed by the provisions of the applicable law, as well as to ensure the protection of the data contained in these records.

4. The healthcare entity shall make medical records available to the patient or the patient's legal representative, or a person authorized by the patient

5. After the death of the patient, the medical records shall be made available to the person authorized by the patient during his/her lifetime or to the person who was the patient's legal representative at the time of the patient's death. Medical records shall also be made available to a relative, unless the release is opposed by another relative or opposed by the patient during his or her lifetime, subject to the provisions below.

6. In the event of a dispute between relatives over the release of medical records, the release shall be authorized by the court, in a non-trial proceeding at the request of the relative or medical professional. The medical professional may also apply to the court if there is reasonable doubt as to whether the person requesting or objecting to the release of the records is a relative.

7. Where a patient has objected to the release of medical records during his or her lifetime, as referred to in paragraph 2, the court, o in non-trial proceedings at the request of the relative, may consent to the release of medical records and determine the extent of their release if it is necessary: to seek compensation or reparation, for the death of the patient, or to protect the life or health of the relative.

8. The health care provider shall also make the medical records available to other entities, in accordance with applicable regulations, in particular: entities providing health care services, if the records are necessary to ensure the continuity of health care services; public authorities, including the Patient Ombudsman, the National Health Fund, bodies of the self-government of medical professions and consultants in health care, to the extent necessary for these entities to perform their tasks, in particular supervision and control, etc.

9. Medical records are made available:
- for inspection, including to health care databases, at the place of providing health care services, except for emergency medical operations, or at the premises of the entity providing health care services, with provision for the patient or other authorized bodies or entities to take notes or photographs;
- By making an extract, copy, copy or printout thereof;
- by issuing the original against acknowledgment of receipt and subject to return after use, at the request of public authorities or common courts, and when delay in issuing the documentation could cause a danger to the patient's life or health;
- by means of electronic communication;
- on a computer data carrier.

10. X-rays taken on film, kept by the health care provider, shall be made available against acknowledgment of receipt and subject to return after use.

11. Medical records kept in paper form may be made available by making a copy in the form of a digital reproduction (scan) and transmitting it electronically or on a carrier, at the request of the patient or other authorized bodies or entities, if the organizational regulations of the health care provider so provide.

12. A fee may be charged by the health care provider for providing access to medical records, either by making copies or by releasing them on a carrier.

13. The fee referred to in paragraph 12 shall not be charged if the medical records are made available to the patient or the patient's legal representative for the first time in the requested scope.

VII. The right to object to a doctor's opinion or ruling

1. A patient or his/her legal representative may object to a doctor's opinion or ruling if it affects the patient's rights or obligations.

2. The objection shall be filed with the Medical Committee acting under the Ombudsman for Patients' Rights, through the Ombudsman for Patients' Rights, within 30 days from the date of issuance of the opinion or ruling by the physician adjudicating the patient's condition.

3. The objection shall require justification, including indication of the legal provision from which the rights or obligations referred to in paragraph 1 above arise.

VIII. Right to report adverse reactions to a medicinal product

1. The patient or the patient's statutory representative or actual guardian has the right to report adverse reactions of a medicinal product to medical professionals, the President of the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products or the entity responsible for marketing the medicinal product in accordance with the Law of September 6, 2001. - Pharmaceutical Law.

IX. Patient complaints

1. If a patient or a person representing him or her considers that the patient's rights have been violated, he or she may:
   - turn to the immediate supervisor of the person providing the service and then to the management of the facility with an intervention;
   - file a complaint with the Patient Ombudsman;
   - turn to the Ombudsman for Professional Liability, which operates at the Regional and Supreme Chamber of Physicians, as well as at the Regional and Supreme Chambers of Nurses and Midwives - if the violation of the law concerned a medical act;
   - take the case to court - if the patient's personal welfare or material damage was violated as a result of the health care provider's action or omission;
   - file a complaint with the healthcare provider;
   - file a complaint with the National Health Fund. A written complaint that does not contain the name and address of the person who filed it will not be considered.

2. Complaints may be made orally or in writing. The patient has the right to request written acknowledgment of the complaint. Letters relating to matters that have been resolved by a final court judgment or a final administrative decision shall not be considered as complaints.