



Every member of the society is committed to preserve and respect the dignity of human beings. This is especially important in the case of illness. According to the constitution, paying attention to the supreme human dignity is one of the basic principles of the Islamic Republic. The government is obliged to provide health care services to every person.

Therefore, the provision of health services should be fair and based on respect for the rights and human dignity of patients. This charter has been prepared according to the high human values and based on Islamic and Iranian culture and on the basis of the equality of inherent dignity of all recipients of health services and with the aim of maintaining, promoting and strengthening the human relationship between of health services.

## It is the patient's right to receive optimal health services.

## - The provision of health services must:

- 1-1) It should be worthy of human dignity and with respect to values, cultural and religious beliefs.
- 1-2) Be based on honesty, fairness, politeness and kindness.
- 1-3) Be free from any discrimination, including ethnic, cultural, religious, type of disease and gender.
- 1-4) based on current knowledge.
- 1-5) be based on the superiority of the patient's interests.
- 1-6) about the distribution of health resources based on justice and treatment priorities of patients.
- 7-1) It should be based on the coordination of the elements of care including prevention, diagnosis, treatment and rehabilitation.
- 1-8) along with the provision of all basic and necessary amenities and away from imposing pain and suffering and unnecessary restrictions.
- 1-9) Pay special attention to the rights of vulnerable groups in society, including children, pregnant women, the elderly, mental patients, prisoners, mentally and physically disabled people, and people without guardians.

- 1-10) as soon as possible and with respect to the patient's time.
- 1-11) considering variables such as language, age and gender of service recipients.
- 1-12) in urgent care (emergency), regardless of its cost. In non-urgent (elective) cases, it should be based on defined criteria.
- 1-13) In urgent and urgent care (emergency), if it is not possible to provide appropriate services, it is necessary to provide the basis for transferring the patient to an equipped unit after providing the necessary services and the necessary explanations.
- 1-14) in the final stages of life, when the condition of the disease is irreversible and the death of the patient is imminent, with the aim of maintaining his comfort. Comfort means reducing the pain and suffering of the patient, paying attention to the psychological, social, spiritual and emotional needs of him and his family at the time of death. The dying patient has the right to be with the person he wants in the last moments of his life.
  - The information should be provided to the patient in a suitable and sufficient manner.
- 2-1) The content of the information should include the following:
- 2-1-1) Provisions of the patient's bill of rights at the time of admission
- 2-1-2) Predictable criteria and costs of the hospital, including medical and non-medical services, insurance regulations and the introduction of support systems at the time of admission.
- 2-1-3) The name, responsibility, and professional rank of the members of the medical group responsible for providing care, including doctors, nurses, and students, and their professional relationship with each

other.

- 2-1-4) Diagnostic and therapeutic methods and the strengths and weaknesses of each method and its possible complications, disease diagnosis, prognosis and complications, as well as all the information that affects the patient's decision-making process.
- 2-1-5) How to access the attending physician and the main members of the medical team during the treatment.
- 2-1-6) All actions that are research in nature.
- 2-1-7) Providing necessary training for the continuation of treatment.
- 2-2) The way of providing information should be as follows:

- 2-2-1) The information should be provided at the appropriate time and according to the patient's condition, including anxiety and pain, and his/her individual characteristics, including language, education, and understanding, unless:
- -The delay in starting the treatment due to the provision of the above information may cause harm to the patient.
- -The patient, despite being informed of the right to receive information, refuses to do so, in which case the patient's request must be respected, unless the patient's lack of information puts him or others at serious risk.
- 2-2-2) The patient can have access to all the information recorded in his clinical file and receive its image and request the correction of the errors contained in it.
  - The patient's right to freely choose and make decisions in receiving health services should be respected.
- 3-1) The scope of selection and decision is about the following:
- 1-3-1-1) Selection of medical doctor and health service provider center within the criteria.
- 3-1-2) Selection and opinion of the second doctor as a consultant
- 3-1-3) Participation or non-participation in any research, with the assurance that his decision will not affect the continuity and way of receiving health services.
- 3-1-4) Accepting or rejecting the proposed treatment after being aware of the possible complications caused by accepting or rejecting it, except in cases of suicide or cases where refusal Treatment puts another person at serious risk.
- 3-1-5) Announcing the patient's previous opinion about the future treatment measures when the patient has decision-making capacity and is recorded as a medical guide when he lacks decision-making capacity in compliance with the legal standards considered by health service providers and decision-making The recipient should replace the patient.
- 3-2) Selection and decision-making conditions include the following:
- 3-2-1) The patient's choice and decision should be free and informed, based on receiving sufficient and comprehensive information (mentioned in the second paragraph).
- 3-2-2) After providing the information, the patient should be given enough time to make a decision and make a choice.
- 4- The provision of health services should be based on respecting the patient's privacy (right to privacy) and respecting the principle of confidentiality.
- 4-1) Compliance with the principle of confidentiality regarding all information related to the patient is mandatory, except in cases where the law has made an exception.

- 2-4) Patient's privacy should be respected in all stages of care including diagnostic and treatment. For this purpose, it is necessary to provide all the necessary facilities to guarantee the patient's privacy.
- 4-3) Only the patient and the treatment group and authorized persons on behalf of the patient and persons deemed authorized by law can access the information.
- 4-4) The patient has the right to have a trusted person with him during the diagnostic process, including examinations. Accompanying one of the child's parents during all stages of treatment is the child's right, unless this is against medical necessity.

## 5-Access to an efficient complaint handling system is a patient's right.

- 5-1) Every patient has the right to complain to the competent authorities in case of violation of his rights, which is the subject of this charter, without disturbing the quality of receiving health services.
- 5-2) Patients have the right to be informed of the procedure and results of their complaints.
- 5-3) The damage caused by the error of the health service providers must be compensated in the shortest possible time after investigation and proof according to the regulations.

In the implementation of the provisions of this charter, if the patient lacks decision-making capacity for any reason, the exercise of all the patient's rights – mentioned in this charter – will be the responsibility of the alternative legal decision-maker. Of course, if the alternative decision-maker prevents the patient's treatment against the doctor's opinion, the doctor can appeal the decision through the relevant authorities.

If a patient who lacks sufficient capacity to make a decision, but can make a reasonable decision in a part of the treatment process, his decision should be respected.

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