

Final-Year Medical Students' Knowledge About The Rights And Duties Of Medical Practitioners And Patients At A Vietnamese University

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Abstract

Purpose: We have conducted this cross-sectional study to describe the knowledge of authority and obligations of medical practitioners and patients in the group of 6th-year students of Hanoi Medical University, Vietnam in 2018. This study has been provided to understand if final-year students are willing to work after graduation in providing healthcare or related services to patients. Well-aware of the rights and duties of practitioners and patients was mentioned in the Law on Medical Examination and Treatment will have a good impact on the relationship between future medicals and patients. And will help to protect both ones legally.

Methods: This study was conducted at Hanoi Medical University (HMU) on the final year students who have 6-year training period. In the 3rd year of the training program, they started involved in patient care, observing health or social care processes. Data was collected among 396 students using a self-administered questionnaire. The results were analyzed descriptively.

Results: Study results showed 11.62% of students know the Law on Examination and Treatment No. 40/2009/QH12. Percentage of students who know 100% of the general rights and obligations of practitioners (5.81%; 4.29%) and patients (5.56%; 8.08%) is low. The rate of students gaining knowledge about the rights and obligations of practitioners and patients is 37.12%.

Conclusion: The results showed a low proportion of students who knew about medical examination and treatment. And the percentage of students who had known enough about the rights and obligations of practitioners and patients was also low.

Keywords: patients, medicals, rights, duties, medical student, knowledge

Introduction

Background

Medical practice throughout the world has become increasingly commercialized, and the relationship of physicians - patients has been gradually affected by the service provider - customer relationship [1]. Relationships about medicals and patients are regimented by the Vietnam's Law on Medical

Examination and Treatment which was passed on November 23, 2009, and took effect from January 1, 2011, by the parliament of the Socialist Republic of Vietnam. Each rule on rights is closely tied to the duty that the medical practitioner and patient must perform, help to orient the physician - the patient relationship has an understanding in contact and conduct so that all problems arising from this relationship can be solved as well as possible [2]. The authority and obligations of medical practitioners and patients are introduced in medical ethics subject in the second year, in clinical skills subject in the third year, and in the medical organizational - management subject in the fourth year [3].

But the knowledge of medical examination and treatment law of medical students is still limited and needs more study in Vietnam. In 2017, Nguyen Trong Duc published a study on criteria for practitioners in the medical examination and treatment law [4]. However, there are no studies on the rights and obligations of practitioners and patients.

Objectives

In the training program of the Hanoi Medical University, students receive training for 6 years. From the third year, they become in an environment that provides healthcare or related services: can be involved in patient care or observing health or social care processes [5]. In order to know if medical students are available for future careers, we conducted research to describe the knowledge of authority and obligations of medical practitioners, patients in the group of sixth-year students at Hanoi Medical University, Vietnam in 2018. Students and interns must in educational time be already aware of their self rights and the rights of the patients. Thirst of all, future doctors have to respect their patients and maintain patients' information confidential [6].

Methods

Ethics statement

All the studies stages were conducted according to the ethical norms in the research studies and were approved by the Ethic Commity of the Hanoi Medical University. Allstudy were conducted after obtaining permission from the Department of Health Organization and Management of the Institute for Preventive Medicine and Public Health at Hanoi Medical University, the purpose of the study and the nature of the information that has to be furnished from the students was explained to them. Willingness to participate in the study was obtained from participants using a written consent form. Those who are on leave who refused to participate were excluded from the study.

Study design and Participants

This cross-sectional study was carried among final-year medical students at Hanoi Medical University from October 2017 to May 2018. Data was collected among 396 students using a self-administered questionnaire. We designed a composite, three-step questionnaire (demographic details, knowledge questions of rights and duties of medical practitioners, knowledge questions of rights and duties of patients). Knowledge questions about the rights and duties of medical practitioners include the following: rights to practice, refuse medical examination, improve professional competence, protection when a medical accident occurs, to safety when practicing; duties to patients, the profession, colleagues, social obligations, implement professional ethics. Knowledge questions of rights and duties of patients include the following: rights to have medical examination and treatment

with appropriate quality, privacy and confidentiality, respect for honor and health protection in medical examination and treatment, choose in medical examination and treatment, provide medical record information and medical care fee, refuse medical examination, people whose is lost, limited, and has no civil act capacity. The initial version of the questionnaire was piloted amongst a sample of 50 medical student to ensure that the questions were clear and unambiguous, with minor changes being made to the questionnaire based on the responses then we had used Cronbach's Alpha method for good reliability coefficient over 0.8.

Measurement and Statistical methods

Anonyme data were cleaned and entered into Epidata 3.1, Stata 14.0 for the statistical analysis. The knowledge of the research object is determined to be correct and enough when selecting all correct selections of all knowledge questions. The knowledge of the research object is determined to be correct and not enough when they didn't have any wrong selections but not selecting all correct selections of all knowledge questions. There are 20 authority and obligations, we used statistical method of logistic regression analysis to cross points from each answer 20, 19, 18, ... authority and obligations. The study found that students who answered correctly more than 50% questions, the relevant variables in the general information to the knowledge of the Law on medical examination and treatment. Student who correctly and enough knowledge above 11/20 authority and obligations, determined as the knowledge gained.

Due to limited resources, the study only surveyed the final year students of the medical system of Hanoi Medical University. The research topic provides necessary information for final year students to prepare for graduation, so they were interested in completing the study. However, the questionnaire has a content of 13 pages of Health Care law, so students did not read it all. Because of that situation, we control the errors by designed the questionnaire in the form of self-fill with the guidance of investigators. During the investigation, investigators were carefully trained to ensure that the field, research objectives, and contents of the investigation were clearly understood.

Results

Participants

The 396 participants have an average age of 24.2 years old (SD=0.6), of whom 45.4% were female. The majority of students were studying at the General practitioner department (71.7%); the second place was by the Dentist department students (14.7%); the percentage of the Preventive medicine and Traditional medicine departments student were 6.3% và 7.3%. More than two-thirds of students had a wish to be a resident physician (68.9%).

Main results

Regarding the students' knowledge about medical examination and treatment law, the percentage of students who had heard the Law on Health Care (11.6%) was lower than the rate of students who had never heard of the Law on Health Care (88.4%). Among students who know about medical treatment have 58.7% learned it via internet, 23.9% knew it through friends and teachers, there were a small proportion of students knew the law through books, newspaper (13.0%) and relatives (3.4%). The percentage of students with proper knowledge about general rights of practitioners and proportion of students with correct knowledge but inadequate (5.8%; 5.1% respectively) was much lower than the rate of students with wrong knowledge (89.1%). The highest percentage was about

students' knowledge about the right to improve professional competence (80.6%). The proportion of students' knowledge of protection when a medical accident occurs was 40.9%. 30.3% was the percentage of students' knowledge about the right to safety when practicing. The lowest was knowledge of the right to refuse medical examination and practice with 28.8% and 18.9% (Table 1).

Table 1. Demographic students' knowledge about the rights of practitioners

Students' knowledge	Assessment	Number n=396	Percent, %
Students' knowledge of general rights of practitioners	Correct	23	5.8
	Correct, inadequate	20	5.1
	Wrong	353	89.1
Students' knowledge about the right to practice	Achieved	75	18.9
	Not achieved	321	81.1
Students' knowledge about the right to refuse medical examination	Achieved	114	28.8
	Not achieved	282	71.2
Students' knowledge about the right to improve professional competence	Achieved	319	80.6
	Not achieved	77	19.4
Students' knowledge of protection when a medical accident occurs	Achieved	162	40.9
	Not achieved	234	59.1
Students' knowledge about the right to safety when practicing	Achieved	120	30.3
	Not achieved	276	69.7

Table 2 presents the proportion of right and adequate knowledge of the general obligations of the practitioner and the right and insufficient knowledge rate were 4.3% and 11.9% which was much lower than the wrong knowledge rate of 83.8%.

Table 2. Students' knowledge about the obligations of practitioners

Students' knowledge	Assessment	Number n=396	Percent, %
Students' knowledge of general obligations of practitioners	Correct, adequate	17	4.3
	Correct, inadequate	47	11.9
	Wrong	332	83.8
Students' knowledge of obligations to patients	Achieved	164	41.4
	Not achieved	232	58.6
Student's knowledge of obligations to the profession	Achieved	208	52.5
	Not achieved	188	47.5
Students' knowledge about obligations to colleagues	Achieved	319	80.6
	Not achieved	77	19.4
Student's knowledge of social obligations	Achieved	110	27.8
	Not achieved	286	72.2
Student's knowledge of obligations to implement	Achieved	75	18.9

professional ethics	Not achieved	321	81.1
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The highest knowledge percentage was in the obligation to colleagues (80.6%). On the other hand, the proportion of students had knowledge of obligations to patients, social obligations and implement professional ethics were below 50% (41.4%, 27.8%, and 18.9% respectively).

The percentage of students with correct and adequate knowledge about general rights of patients and the rate of Correct, and inadequate knowledge was lower compare the rate of students with wrong knowledge (5.6% and 6.8% compare to 87.6%) (Table 3).

Table 3. Describe students' knowledge about the rights of patients

Students' knowledge	Assessment	Number (n=396)	Percent (%)
Students' knowledge of the common rights of patients	Correct, adequate	22	5.6
	Correct, inadequate	27	6.8
	Wrong	347	87.6
Students' knowledge of the right to have medical examination and treatment with appropriate quality	Achieved	266	67.2
	Not achieved	130	32.8
Students' knowledge of the right to privacy and confidentiality	Achieved	166	41.9
	Not achieved	230	58.1
Students' knowledge about the right to respect for honor and health protection in medical examination and treatment	Achieved	281	71.0
	Not achieved	115	29.0
Students' knowledge about the right to choose in medical examination and treatment	Achieved	206	52.0
	Not achieved	190	48.0
Students' knowledge of the right to provide medical record information and medical care fee	Achieved	87	22.0
	Not achieved	309	78.0
Student knowledge about the right to refuse medical examination	Achieved	105	26.5
	Not achieved	291	73.5
Students' knowledge about the right of people whose is lost, limited, and has no civil act capacity	Achieved	99	25.0
	Not achieved	297	75.0

The high percentage was of students with had good knowledge about the right to respect for honor, health protection in health care with 71.0% and knowledge about getting medical care with appropriate quality was 67.2%. But the lowest was the knowledge about the people with lost or limited rights, and those who have no civil act capacity, and students' knowledge of the right to provide medical record information and medical care fee were 25.0% and 22.0%.

Table 4 provides the rate of students with correct and adequate general knowledge about patients' obligations and the rate of correct and inadequate knowledge (8.1% and 6.8%) . This range is much lower than the range of student with false knowledge (85.1%).

Table 4. Describe students' knowledge about the patient's obligations

Students' knowledge	Assessment	Number (n=396)	Percent (%)
Students' knowledge of the general obligations of the patient	Correct, adequate	32	8.1
	Correct, inadequate	27	6.8
	Wrong	337	85.1
Students' knowledge of obligations to respect practitioners	Achieved	63	15.9
	Not achieved	333	84.1
Students' knowledge of the obligation to accept regulations in medical examination and treatment	Achieved	210	53.0
	Not achieved	186	47.0
Student's knowledge of the obligation to pay for medical care costs	Achieved	345	87.1
	Not achieved	51	12.9

So, the highest ratio was observed by the knowledge of the medical incomes and treatment costs (87.1%). In the last position was the knowledge of obligations to respect practitioners (15.9%).

Discussion

We have understood final-year students have no sufficient knowledge of their rights and responsibilities. A big percentage of students confused laws and did not know how to prove them [7]. According to the research results, many future medicals in Vietnam are not ready for the real healthcare sphere's problems. The knowledge of the rights of the medical will help professionals to understand what is in their power, and that they are required [8].

The awareness and knowledge of their rights and patient rights is the basis of the proper performance of work, so it is impossible to realize it without having sufficient knowledge about it. The relationship with doctor and patient has a great importance in the provision of medical care. Such relations are considered in various disciplines and have many theories [9-10].

Key results

Only 46 out of 396 students had heard of Law No. 40/2009/ QH12, (11.6%). 27 out of 46 students (58.7%) read the law through the internet and 11 (23.9%) of 46 students approach laws through friends and teachers. Over 90% of students access internet information easily and frequently, explaining the most percentage of students who know the rules was via the internet.

The study was based on the number of students' answers on the knowledge of rights and obligations of practitioners and the patients to give a general knowledge rate. Students responding to more than 50% of the correct answers were equivalent to 147 students who had knowledge of medical examination and treatment (37.1%).

Our research showed that 303 students (76.5%) answered that the medical examination and treatment law has regulations on practitioner protection in case of accidents including 162 students who responded correctly to technical regulations. Therefore, students who have knowledge of the right to protection in accident situations did not reach 50%. In case of life-threatening by others, less than half of the students agreed that staffs can temporarily evade the workplace and one-third did not consider that practitioners report to the nearest authorities.

Interpretation

The results indicated that students did not have enough knowledge of the right to safety. The knowledge of the students with the lowest practice rate is explained by 262 students misunderstanding when they disagreed that “practitioners are only responsible for a medical facility”. And 151 students disagreed that “practitioners can participate in social-professional organizations”. Must say, doctors and subjects who have worked at medical facilities have better results in law and morality knowledge, and the role of the ethics committee will evaluate more contents than our research. Knowledge of the rights on professional capacity enhancement is high at 80.6%. This was explained by the fact that practitioners enhance medical knowledge by being trained and exchanging information on medical knowledge. In the professional environment, respecting colleagues, protecting colleagues is a fundamental link to development. Student's knowledge of the obligations to colleagues of students was good. However, the study also pointed out that 36.9% of students did not know the Health Care law stipulating that health workers should notify competent people when their co-workers act to deceive patients, colleagues or violate the provisions of law, and 61,6% of health workers are obliged to supervise professional capacity and professional ethics of other banks. Therefore, students' knowledge of the professional obligations was at an average level (52.5%) and the students' knowledge about social obligations had not reached one-third (27.8%) [11].

Comparison with previous studies

The got by us results were similar to the Walrond study at Cave Hill in 2003: The vast majority of students (93%) said they had little or no knowledge of the law related to their job [12]. Most medical personnel had not received legal education before completed their studies (Poland, 2018) [13]. The students may not pay attention to the specific name of the law but the rights and obligations of doctors and patients they know because it was mentioned in the training process. But non-compliance or ignorance of the rights of patients in clinical practice greatly undermines the confidence of patients in medical professionals and can jeopardize the life and safety of the patient [14]. The World Health Organization argues that possession of the highest possible level of health is one of the fundamental rights of each person of any race, religion and political beliefs, economic or social conditions [15].

Our results were lower compared to the research by Nguyen Trong Duc at Hanoi University of Medicine, 2017 (57.5%), explained by the study of Nguyen Trong Duc that the knowledge of students is 50% or higher, lower than our research [5]. But our results are similar to the 2003 study at Queen Elizabeth Hospital in Barbados: 52% of senior medical staff and 20% of senior nurse staff know about the laws related to their work [11].

Limitations

We had work just with the final-year students of Hanoi Medical University, but the research needs an attention in bachelor's final year students; first, second, third, fourth and fifth year students of doctors' system to compare knowledge of disciplines and learning in general.

Generalizability

The research provided useful information for medical students, school and higher levels of management can provide guidance on law knowledge and teaching programs, particularly medical examination and treatment law.

Suggestions

Monitoring of the law aspect knowledge of medical students and practice doctors is important for making a law state model and to increase the law culture in medicine. So the future research in this area will become a marker of law culture in medicine.

Conclusion

The proportion of students with enough knowledge in medical and treatment law was low as the percentage of students who knew the right and enough about the rights and obligations of practitioners and patients. For each different authority and obligations, students had different knowledge. This was explained that in the process of learning, training subjects are exposed to the content of orthodox or unorthodox medical examination and treatment law. Therefore, students' knowledge about the contents of the Law on Medical Examination was uneven, unbalanced, students can learn the contents of the Law on Medical Examination but did not know in which section, part of the law. Each student interacts with patients during the learning time. It well affected their awareness of their rights and patient rights. The study of the separate doctors' and patients' rights should be given to more time during theoretical classes. This gives the future doctor confidence in his knowledge and could use them.

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Authors' contributions

Ngo Tri Tuan was a creator of the study design, was a chief in study conduction and data analyze, has got a main part in the manuscript text creation.

Nguyen Thi Mai, Bui Dieu Thuy Linh Anna, DinhThi Thanh Phuong, Dao Trung Nguyen are students of the Institute for preventive medicine and public health of the Hanoi medical university. They have got part in the data collection and statistic analyze; were a part in manuscript text creation.

Conflict of interest

The authors declare no potential conflict of interests to this article.

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Data availability

Not applicable

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Supplementary materials

Not applicable

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