**The Croatian Association for Promotion of Patient's Rights**
**Work group for creation of The Law on rights, obligations and responsibilities of patients proposal including following members**
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# LAW ON PATIENTS' RIGHTS, OBLIGATIONS AND RESPONSIBILITIES

## *Part One*

## JOINT AND GENERAL PROVISIONS

### 1. Purpose and Aim of this Law

Article 1

The purpose of this Law is to create legal prerequisites that will ensure respect of human dignity, physical and psychological integrity, personality and the right to self-determination for all patients within the healthcare system of the Republic of Croatia. In that purpose this Law will:
(1) Determine basic rights of patients and ways of their protection, as well as their (patients') duties and obligations while using healthcare services and ensuring these rights;
(2) To create a basis for humane relations and partnership between patients and healthcare providers on all levels of realization. These relationships are based on mutual respect and autonomy, as well as rights and responsibilities of all partners. In that way, patients are, also, enabled to realize their right to an active participation in conceiving and creating healthcare policy.
(3) To promote the quality of healthcare increase through harmonizing rights, obligations and responsibilities both of its users, as of those who enable and provide it on all levels of realization.

Article 2

This Law applies to all individuals who, on the territory of Republic of Croatia, use healthcare services, and legally binds all legal subjects and healthcare workers that participate in its providing and ensuring.

**2. Definition of Terms**

Article 3

For the purposes of this Law:
a) **a patient** - any person, regardless of age, sex, racial, religious or other affiliation, economic status, kind and degree of healthcare needs, sick or healthy, that requires a certain service or strives to satisfy its healthcare need in any healthcare institution and/or private practice. In that sense, patients are, in the widest sense of the word, all citizens due to their obligation of subjecting to primary prevention measures, i.e. that part of healthcare which is of the widest national interest and which includes all citizens of Republic of Croatia by birth or citizenship.
By conditions determined by this Law, other laws and international contracts, foreign citizens that use any form of healthcare service in healthcare institutions and/or private practices on the territory of Republic of Croatia are also, considered patients.

b) **Healthcare institution** - a legally acknowledged and according to the law organized institution in State, mixed or private property which offers any kind of primary or specialized healthcare: consultancy, preventive care, diagnostic procedures, therapeutic care, rehabilitating or palliative care. Healthcare institutions in a wider sense consider all other institutions and private practice that, according to the regulations on healthcare make a constitutive part of the healthcare system.

**c) Medical documentation** - an assembly of all written or in other ways (digital media, etc.) created documents which contain relevant expert data on the patient's disease and on his/her health status, as well as instructions for treatment and instructions given for the purpose of realizing patient's rights to healthcare.

**d) Working diagnosis** - a temporary, assumed diagnosis used as a basis for direction and realization of measures in order to make the final diagnosis.

**e) Healthcare worker** - a doctor of medicine or dentistry and any other trained professional worker in the field of medicine; included in the system of providing healthcare and employed in a healthcare institution/private practice; who has appropriate rights, obligations and responsibilities according to special laws. When realization of certain patient's rights relates to non-medical services needed during receiving healthcare, then provisions of this Law, also, apply to the workers whose education is not from the field of medicine, but are employed in a healthcare institution.

f**) Scientific research** - a research conducted for the purpose of acquiring new conceptions that can be used for health improvement and treating the sick.

### 3. Basic provisions

Article 4

(1) Protection of each patient's rights must be ensured during his/her use of healthcare services. Patient's personal freedom and the right to self-determination can be limited as an exception only when it is justified by his/her health status and in cases and ways specifically determined by this Law.

(2) While providing and receiving healthcare services, without any exception, principles of equality, comprehensiveness, continuity and accessibility must be respected.

## *Part Two*

## Patients' rights, obligations and responsibilities

(1) Rights, obligations and responsibilities of users and providers of healthcare services are determined by the contract on the healthcare service based on principles of partnership. This Contract is made between the provider and user (patient) of the healthcare service. For minors and persons without legal capacity the contract is made by their legal representatives, parents or guardians. For providing healthcare services the principle of freedom of making contracts is valid, with some exceptions i.e. limitations on the part of healthcare services providers.

(2) Limitations from the previous subsection are related to cases when the provider is obligated to perform an urgent medical intervention without delay, and when healthcare providing is conditioned by the type of the patient's health insurance.

## 1. Patients' rights

### 1.1 Right to healthcare and appropriate continuous medical care

Article 5

(1) According to this Law, all patients have a universal and equal right to a quality and continuous healthcare and medical care fitting their health status, in coordination with generally accepted high professional standards and ethical principles, in patients' best interest and with respect to his/her personal attitudes. Similarly, all patients have equal obligations and responsibilities while using healthcare services.

(2) This universal right, determined in subsection (1) of this Article, can be temporarily regarded more favorable for another patient, if in the moment of need for healthcare, his/her health status is in such a condition that it requires urgent medical measures. In that case, such a patient can exercise his/her rights previous to, or differently than other patients, whose health status does neither requires the same level of intervention urgency, nor are their life or health seriously impaired.

(3) Patient has a right to ask any health care institution, in a wider sense, to inform him of the general and specific conditions for realizing healthcare within it, its internal organization and work principles, its rights, obligations and responsibilities towards patients, and about the procedure for protection of patient's rights established in that healthcare institution. If a patient does not ask for this information, a responsible person within the healthcare institution is obligated to inform the patient on these matters on first contact, usually in a written form, or by giving clear, verbal instructions on ways, conditions and timelines of realizing healthcare.

(4) Rights, conditions and ways of realizing healthcare are regulated by a specific legal act, during its creation the partnership between patients and healthcare providers is ensured by this Law.

### 1.2 Right to the respect of human dignity and personality

Article 6
(1) In all circumstances of providing and using healthcare, each patient has a right to the protection of their human dignity, as well as physical and psychological integrity, with respect of his/her personality, intimacy, views, moral and religious beliefs.

(2) Each patient has a right to the highest level of their suffering alleviation, according to the present level of medical knowledge, to a humane palliative care in the final state of their disease and to dignifying dying and death.

(3) In lack of provisions of this Law, only those procedures that are necessary for his/her healthcare may be performed on the patient.

(4) During providing services of healthcare, patient's rights may be limited only temporarily, to the extent and in ways determined by the Law and influenced by his/her state of health.

(5) During providing healthcare, patient's personal freedom and rights may be limited (by physical, chemical, biological or psychological methods or procedures) only in case of emergency or in the interest of life protection, physical safety and health of the patient and other individuals. This limitation must not have a strenuous character and may last only until the reason why it was established still exists. Patients' Rights Representative, wherever he/she is accessible, must be informed about taking such measures as soon as possible (no longer than 16 hours after taking measures).

(6) Limitation of personal freedom and rights may be ordered by the patient's authorized doctor of medicine (unless stated differently by this Law), and accompanied by an accurate explanation of the reasons for such measures and of their duration. In lack of permanent medical supervision in specially justified cases limitation can temporarily be ordered by a qualified nurse. Authorized doctor of medicine must be informed of such a measure immediately and must accept such measures in a written form within 16 hours.

(7) Patient can be ordered to wait only for a sensible reason and reasonable time. Patient has a right to examine the waiting list.

### 1.3. Right to maintaining personal contacts

Article 7

During his/her stay in a stationary healthcare institution a patient has a right to maintain written or verbal contact with other persons and receive visitors according to regulations on patient behavior in the specific healthcare institution.
The patient, also, has a right to prohibit visits to a certain person or persons.

### 1.4. Right to a self-willed departure from a healthcare institution

Article 8

(1) Patient has a right to leave a healthcare institution self-willingly, except in circumstances stated in this Law, or when and if it would damage his/her physical safety and/or health or safety of others.

(2) Patient must inform an authorized doctor of medicine about his/her intention to leave the institution, and this must be recorded in the patient medical documentation.

(3) If a patient leaves the healthcare institution self-willingly and without previous notice, an authorized doctor of medicine must record such an event in the patient's medical documentation. If the patient's health status requires, the doctor of medicine must inform other authorities, secondary the family, a person appointed by the patient, as well as the patients' rights representative if available. In case of patient's limited legal capacity or lack of it, the patient's legal representative must be informed.

(4) Patient and his/her closest relative named on admittance, or at least one member of his/her household who is of age, must be informed about the patient's discharge form the healthcare institution 24 hours in advance.

(5) In case of patient's lack of legal capacity, the right defined by subsection (1) of this Article may be realized with the approval of his/her legal representative.

### 1.5. Right to being informed

Article 9

(1) Patient has a right to be completely personally informed about:
(a) his/her health status, including the medical assessment of results and outcomes of medical care already taken,

(b) recommended examinations and procedures and planned dates of their performance
(c) possible benefits and risks of performing or not performing recommended examinations or procedures,
(d) his right to decide on recommended examinations or procedures,
(e) possible alternative procedures and methods,
(f) course of action during healthcare providing,
(g) further procedures,
(h) recommended way of life,
(i) realization of the right to a second opinion.
(j) conditions for discharge from the healthcare institution in which he is hospitalized.

(2) Patient has a right to receive information in a way that he/she understands, considering his/her age, education, knowledge, mental state and wishes. When needed, and if possible, a translator or a sign language interpreter should be assigned to provide information.

(3) During providing such information and afterwards, the patient has a right to pose secondary questions and further questions.

(4) During receiving healthcare, after each examination and procedure, the patient has a right to be informed on success or lack of it, and of results of the examination or procedure, as well as of the reasons for their possible discrepancy from expected.

(5) Patient with a lessened mental ability has a right to be informed in co ordinance with his/her age, physical, mental and psychological status.

(6) Patient has a right to be informed about names, specific qualifications and positions of persons that are directly involved in providing his/her healthcare.

(7) General conditions necessary for realization of rights related to getting information is regulated by the Minister of Healthcare.

(8) Patient has a right to, by a specific request, refuse to be informed of the details about the nature of his/her state and expected outcome of recommended and/or performed medical procedures and measures. Rejection of the right to be informed must be produced in a written form and the patient's rights representative, where available, must be informed of it.

(9) Patient has a right to know if he/she, and under which circumstances, is included in any kind of clinical research, biomedical experiments and/or other studies.

(10) Patient has a right to know if he/she, and under which circumstances, is included in programs of medical training.

(11) Patient has a right to know under which circumstances are his/her medical documentation, test results, samples of bodily fluids, excretes, tissues and/or other biological material and archived samples guarded and/or used in clinical, biomedical and/or other studies.

(12) Patient has a right to know the results of subsequent non-therapeutic research in which his/her previous test results; medical documentation and/or archived samples and biological materials were used.

Article 10

(1) Patient with full legal capacity cannot reject his/her right to be informed in cases when he must be aware of the nature of his/her disease, in order for him not to impair health of others. If a medical procedure that has no therapeutic purpose is performed on request of the patient, rejecting statement on the right to be informed must be given in a written form.

(2) Patient with full legal capacity has a right to, in a written form or any other legitimate way; assign a person that will be informed instead of him/her.

(3) Patient has a right to be informed even in cases when his/her approval is not a condition for starting therapy, as it is the case in emergencies.

Article 11

(1) Patient has a right to receive full information on time before the beginning of a medical procedure and/or treatment, in order for him to be able to make a decision on them.

(2) Information from subsection (1) of this Article must be coordinated with provisions from Article 9, subsection (2) of this Law in order for his/her approval or denial to be valid and legitimate.

(3) Information must include explanations of diagnostic procedures, its results (nature and kind of disease), of the urgency level of the procedure or treatment and benefits and/or disadvantages or risks in case of their refusal, on the course of treatment with possible complications, side effects or even failures.

### 1.6 Right to patient's own decision, consent and co-deciding

Article 12

(1) Patient has a right to make his/her own decision on any medical procedure or treatment that is to be performed on him/her. This right may be limited only in cases and ways defined by the Law.

(2) Within the right from subsection (1) of this Article the patient can freely decide on the right to use healthcare services, what procedures will he/she agree to and on those that he/she refuses, taking into consideration the limitations stated in Article 18 of this Law.

(3) Patient has a right to participate in the decision-making process related to his/her examinations and treatment. Apart from exceptions defined by this Law, the prerequisite for performing any medical procedure is the consent of the patient that was based on appropriate information which contains no errors, details that can lead to misunderstanding, threats and pressure (further mentioned as: consent).

(4) Consent defined in subsection (3) of this Article may be given verbally or in a written form or by non-verbal communication from which such consent is clearly noticeable, unless the Law proscribes differently.

(5) In case of invasive procedures that are not urgent a written consent is needed whether from the patient or his/her legal representative.

(6) Patient can, in any time, and by his/her own responsibility, withdraw his/her consent to a procedure, any form of healthcare use and participation in therapeutic and/or non-therapeutic research.

Article 13

If this Law does not state differently, a person with full legal capacity can; by a statement in a form of a public notary document, or a valid private document, or in case when the patient is not able to write - by a verbal statement in front of two witnesses present at the same time; assign a person with full legal capacity with a right to use the right to consent or refuse procedures instead of the patient.

Article 14

(1) Consent is assumed if the patient, due to his/her health state, is not capable to give a statement on consent, and the negative statement of the person defined in Article 13 would result with postponing of treatment measures, which would lead to serous or permanent damage of patient's health condition.

(2) Consent of the patient is not required if non-performing a certain procedure or treatment would result with:

a) a serious impairment of health or physical safety of others, including the fetus after the 24th week of pregnancy, and

b) a direct danger for the life of the patient, having in mind Articles 17-20 of this Law.

Article 15

(1) If, during an invasive procedure a need occurs for a wider scope of action that could have not been perceived, in lack of a consent for this wider procedure, except in case defined in subsection (2) of this Article, the procedure can be performed:

a) if it is a case of emergency, or

b) if non-performing of the procedure would place a disproportional heavy load on the patient.

(2) If the widening of the procedure defined in subsection (1) of this article leads to the loss of an organ, bodily part or complete loss of its function, the procedure without a consent may be widened only if the life of the patient is directly endangered or in the case defined in subsection (1) , item b) of this article.

Article 16

(1) Consent of the patient in a written form is compulsory for use of any cells, parts of cells, tissues, organs or parts of the body extracted during lifetime for the purposes of a procedure that is not connected to providing healthcare services to the patient.

Consent of the patient is not necessary for the usual procedure of destroying such samples.

(2) Within this Law, the patient has a right to prohibit in advance any kind of procedure or use of his/her dead body. This relates to extraction of any organ, tissue, cells or other biological material from his/her dead body for purposes of treating other patients, research or education.

### 1.7 Right to refuse healthcare or medical interventions

Article 17

(1) Patient with full legal capacity has a right to refuse healthcare, except if it's non-giving would impair lives and physical safety of other persons, or in the case defined in subsection (6) of this Article.

(2) Patient can; by a public notary statement or a valid private document, or in case he is not able to write by a verbal statement in presence of two witnesses at the same time; refuse any kind of healthcare, which includes cases when its non-giving would probably cause serious or permanent damage to his/her health. In case of his/her lack of ability to write, refusal must be recorded in the patient's medical documentation and confirmed by witnesses' signatures.

(3) Patient may, also, refuse procedures of life maintenance or saving, allowing the disease to take its natural course ‡ if suffering from a severe and non-curable disease that would, according to present medical findings, even with proper medical care lead to death in a short period of time. Refusing life saving and maintaining procedures must be done according to the formal requirements proscribed in subsection (2) of this Article and with fulfillment of conditions of subsection (4) of this Article.

(4) Refusal defined by the previous Article is valid only if a physicians' committee composed of three doctors of medicine examine the patient and reaches a unanimous written decision with an effect that the patient has made his/her decision completely aware of its consequences, and that conditions of subsection (2) of this Article have been met.

(5) Members of a physicians committee from the previous subsection are: patient's authorized doctor of medicine, one specialist for the field that covers the nature of the disease who does not participate in treating the patient, and a psychiatrist.

(6) Patient cannot refuse a life saving or maintenance procedure if she is pregnant and is able to bear a child according to the opinions of the physicians' committee defined by the previous subsection, and to which an opinion of a neonatologist must be added.

(7) In case of treatment refusal, as stated in subsections (2) and (3) of this Article, the authorized doctor of medicine must, based on personal conversations, try to discover the reasons for the patient's decision and try to change it. During such a procedure, along with information from Article 9 of this Law, patient must be informed, once again, on the consequences of non-performing a procedure.

(8) Patient can withdraw his/her statement on treatment refusal at any time, with no legal consequences.

Article 18

(1) Patient with no legal capacity or with a limited legal capacity cannot refuse treatment in sense of provisions from Article 17, subsection (2) of this Law.

(2) If in any case a patient with no legal capacity or with a limited legal capacity states a refusal in sense of Article 17, subsection (3) of this Law, the health care provider is obligated to initiate a procedure for gaining required consent from the authorized county district court in an exterior Court proceedings* prior to reaching a final and valid decision, the authorized doctor of medicine must deliver to the Court all justified reasons related to the patient's health. In case of a direct danger to the life of the patient, it is not necessary to acquire a Court decision for the procedure performance.

(3) In the sense of satisfying his/her duties described in subsection (2) of this Article, the authorized doctor of medicine may, if necessary, use police authorities, and in co-ordinance with this Law.

(4) While making steps to acquire the decision defined by subsection (2) of this Article, the Court must without delay proceed with the exterior Court proceedings. Objective release from all costs is applied to this procedure. If this Law or by nature of the exterior Court proceedings does not proscribe differently, provisions of the Civil Code are applied appropriately.

NOTE: * THIS LEGAL INSTITUTE IS NOT INCLUDED IN OUR LEGAL SYS TEM YET, THEREFORE, IT IS NECESSARY TO SUGGEST INCLUSION OF CHANGES AND ADDITIONS TO THE LAW ON LEGAL PROCEEDINGS.

Article 19

(1) Person with full legal capacity, perceiving a possibility of later loss of his/her legal capacity may, by a public notary statement prepared in advance refuse:

a) certain examinations and interventions defined in Article 18, subsection (1) of this Law,

b) interventions defined in Article 18, subsection (2) of this Law, and

c) certain life maintaining or saving interventions if he/she suffers from an incurable disease resulting with his/her lack of ability to physically take care of him/herself or if he/she suffers form pains that cannot be alleviated by appropriate therapy.

(2) Person defined by the previous subsection can by a public notary statement appoint a person with full legal capacity that is empowered to use the right defined in the previous subsection, in name of the patient.

(3) Statement defined by previous subsections is valid if a psychiatrist, a month earlier at most, determines that the person reached the decision fully aware of its consequences. The statement must be renewed every two years and may be withdrawn at any time, regardless of the patient's legal capacity and with no formal requests.

(4) In case of a procedure refusal statement given by a person with full legal capacity in co-ordinance with subsection (2) of this article, a committee defined by Article 17, subsection (4) of this Law must issue a declaration on following:

a) are conditions stated in the previous subsection met, and

b) did the person from subsection (1) of this Article, reach the decision if full awareness of its consequences.

Article 20

(1) Ending or non-performance of the procedure defined in Article 17, subsection (3) of this Law may be executed only if the patient's will on that matter can be clearly and strongly determined. In case of a doubt, patient's later personal statement must be taken in account. If such a statement does not exist, one must assume that there is consent to a life maintaining or saving procedure.

(2) Patient or the person from Article 19, subsection (2) of this Law that refuses a procedure must not be forced to change his/her decision or extort such a change of decision by force. Even in case of procedure refusal from Article (17), subsection (3) of this Law, patient has a right to healthcare intended to alleviate suffering and pain.

### 1.8 Right to have access to medical documentation

Article 21

(1) Patient has a right to be informed about data in his/her medical documentation on time, to seek information about his/her medical care, to be informed about the meaning of the working diagnosis concept and to have information about individual and total treatment costs.

(2) Healthcare provider manages medical documentation, and the patient has a right to have access to the data that it contains. This documentation and data it contains may not be used for purposes unknown to the patient and/or without his/her consent.

(3) Patient has a right to:

a) get information on handling data, from medical documentation, related to his/her healthcare,

b) to be informed of the data on his/her healthcare,

c) to have access and insight in his/her medical documentation, and get copies of it on his/her own expense. Data related to third persons are excluded from access.

d) to receive a final report that he is able to understand upon release from an healthcare institution

e) to get a summary or and extract from the written opinion with data on his/her health status, on his/her own expense.

(4) Patient has a right to induce creation of additional documentation on his/her healthcare and/or its correction, if he/she finds the medical documentation inaccurate or incomplete. This data, as his/her expert opinion is included in the documentation by an authorized doctor of medicine or another authorized person, as well as a professional opinion of a medical doctor. Inaccurate data on healthcare must not be erased but corrected in a manner to make the reconstruction of original data possible at all times.

(5) If a part of medical documentation prepared for the patient contains details that relate to the rights of another person and guarding personal secrets, then the right to have access to data and other rights mentioned in subsection 3 of this Article can be realized only in the part that concerns the concerned patient.

(6) Person defined in Article 13 of this Law has a right to an access to medical documentation of a patient who has no legal capacity.

(7) Patient has a right to empower a person assigned in a written form to have access to his/her medical documentation and to make copies of it during patient's receiving of healthcare.

(8) After the patient's treatment ends, only a person authorized by the patient with a valid private document, has a right to have access to the patient's medical documentation and make copies of it.

(9) In case of patient's death, his/her legal representative, close relative and/or heir ‡ if it was not explicitly prohibited by the patient during life ‡ have a right to be informed about the data on healthcare which are/or could be related to the cause of death and medical procedures undertaken before occurrence of death. They, also, have a right to have access to medical documentation and make copies of it on their own expense.

(10) More detailed rules on management and protection of data about healthcare and personal data related to it, are determined by a separate legal Act.

### 1.9 Right to confidentiality and keeping a medical secret

Article 22

(1) Patient has a right to the respect, keeping and protection of confidentiality of all identification and identifying data on his/her health and medical status, diagnosis, prognosis and treatment and biological materials and substances from which one can get to identifying data, even after their death.

(2) Patient has a right to give a statement about persons that can receive notices on his/her disease and its expected outcome, and those that are included from the circle of persons that are partially or completely informed with patient's medical data.

(3) Data from patient's medical documentation can be revealed without his/her consent only if:

a) it is required by the law
b) life protection, physical security and health of others require it

(4) Person responsible for further care of the patient may without his/her consent be informed on data from his/her medical documentation if not-knowing them would lead to patient's health status worsening.

(5) Patient has a right to require that during his/her examination and medical treatment only those persons who are necessary to perform them may be present, as well as those on which presence the patient consented, unless the Law proscribes differently.

(6) Patient has a right to demand that his/her examination and treatment is performed in circumstances which make other persons impossible to see or hear it without his/her consent, unless it is impossible to avoid it, i.e. in emergency cases or state of life threat.

(7) Patient has a right to appoint a person that can be informed of his/her admission to a stationary institution and of the development of his/her health status, and at the same time has a right to exclude any person from that process. Healthcare institution informs the appointed person about the patient's admission and of any change related to that matter, as on any significant change of the patient's health status.

(8) For the purpose of protecting rights from this Article, any use and/or archiving medical documentation and/or biological material, should be recorded with a note who, when and in what purpose used and archived it.

### 1.10 Right to a second medical opinion

Article 23

(1) Prior to consenting to further treatment patient has a right to ask for a second expert medical opinion on his/her health status from an expert of the same profession and sub specialist education degree for each insured service.

(2) When asking for realization of the right to a second medical opinion, patient has a right to a free choice between several suggested experts.

(3) Patient may not be denied the right to a second medical opinion if he/she was not informed of this right prior to his/her consent to an invasive procedure, except in emergency cases, and according to provisions of this Law.

### 1.11 Right to a complaint

Article 24

Each patient has a right to a complaint according to provisions of Article 44 of this Law

### 1.12 Right to compensation

Article 25

Each patient has a right to a financial compensation according to the Law on compulsory relations.

### 1.13 Right to participation and deciding on creation of healthcare policy

Article 26

(1) Patient has a right to active and equal participation in decision-making in the process of setting health care policies.

(2) Right from the previous subsection is ensured to the patient by the Republic of Croatia by this Law and other legal acts that determine ways of patients' rights protection, as well as ways of patients' rights representatives' activities.

## 2. Obligations and responsibilities of patients

Article 27

Duties and obligations of patients according to this Law are determined by their responsibility towards provisions of the Law on Compulsory Relations, and are related to: personal health, other users of healthcare services, healthcare workers and other persons providing and enabling healthcare services, and the wider community.

### 2.1 Responsibilities of the patient toward his/her personal health

Article 28

Patient is obligated to take care of his/her health responsibly and before reaching decisions on ways of treatment and/or diagnostic or other medical procedures ask for detailed information and explanation of suggested methods and procedures.

### 2.2 Responsibilities of the patient toward other users of healthcare services

Article 29

Each patient is obligated to respect all human rights and rights of patients determined by this Law, in a way that he/she does not intentionally obstructs usage of same rights by other patients.

Article 30

In case of obstructing healthcare workers to provide appropriate care to another person, with respect of rights guaranteed by this Law and other Laws related to healthcare, and after being warned by the healthcare institution personnel, the patient is responsible according to this and other positive legal regulations, depending on responsibility determined in a procedure initiated by the healthcare personnel.

Article 31

When there is no penal responsibility in sense of violation of Article 29 of this Law, healthcare personnel can initiate a procedure before the authorized Court in order to determine guilt for the act of obstructing providing of help to another patient.

Article 32

Violation of provisions from Article 29 and 30 of this Law does not give a right to the healthcare institution neither to deny further treatment of the same patient nor to prevent his/her self-willed departure if he/she requests one after the procedure of determining guilt and responsibility in front of a Court of Law is initiated, as it is

determined by provisions of this Law which guarantee the right to leave the healthcare institution.

Article 33

Patient cannot initiate a procedure against another patient in sense of provisions from Article 29 of this Law when he/she thinks that he has been personally damaged or that his/her rights were deteriorated according to the provisions of this Law. He can direct this procedure exclusively against healthcare workers or healthcare institution that did not ensure the realization of his/her rights according to this Law.

Article 34

Exterior Court proceedings initiated for the purpose of protection of rights from this Law, in front of the County District Court, must be resolved with high priority: the Court is obligated to set the date of summons the latest in 72 hours from the day of the suit delivery, and is obligated to deliver a court decision in 26 days.

2.3 Responsibilities of the patient toward healthcare workers and other persons that provide and enable healthcare services

Article 35

Patient is duty-bound to respect obligations of the healthcare personnel to other patients and according to Article 30 of this Law may not interfere with their work and put them in a situation to be damaged by a law suit of another patient.

Article 36

Patient is obligated to actively co-operate in realization of healthcare measures and not refuse the form of care that ensures protection of health of healthcare personnel that is providing him/her with this care.

Article 37

Patient and by him authorized person, legal guardian or legal representative have an obligation to truthfully give information required by the healthcare personnel related to the health status of the patient, and according to personal knowledge of these.

Article 38

Patient is obligated not to attain information that could, according to his/her knowledge, have an effect on protection of other people's health, even when a direct question regarding this matter has not been posed to him. In contrary, he/she will be regarded responsible for causing damage to others according to the Penal Law.

Article 39

Patient and by him authorized person, legal guardian or legal representative, relatives and friends are obligated not to disturb the privacy of healthcare personnel during their daily, weekly or yearly holidays if authorized emergency services are available, or if it is not explicitly arranged or determined by a contract with the doctor medicine or dentistry.

Article 40

Violation of provisions from the previous Article will be considered as disturbance and/or abuse outside the working place which is exposed to sanctions of the Penal Law.

## *Part Three*

## REALIZATION OF THE RIGHTS

Article 41

(1) Each patient must be informed about his duties and obligations from provisions of this Code during undersigning of the agreement with health insurance company regardless of obligatory or any other prescribed form of health insurance as well as during admission to stationary treatment in private health institution without agreement with patient's health insurance company.

(2) Each health insurance company is obliged to issue all regulations regarding terms of insurance in the form of printed document and make them available to users of health insurance on all ocassions.

(3) Availability of issued regulations of health insurance is an obligation of anyone providing health care in accordance with these rules.

(4) Insurance company is obliged to send each change of the health insurance regulations to health care providers in adequate way within 24 hours from the day of its effectiveness.

(5) Changes of the regulations are submitted for reviewing to the Representatives of the Patient's Rights when these changes are not related to changing of the Code.

Article 42

(1) Patient in the health institution can demand to see the provisions in this Code in regard to his rights at any time.

(2) The right from the previous paragraph also belongs to authorized relatives or other persons in accordance with provisions of this Code.

(3) After establishment of the institution of the Representatives of the Patient's Rights they take liability for presentation and explanation of patient's rights to the patients who ask for their help.

Article 43

After admission or just before the start of patient's treatment health care provider must, in accordance with his health status, inform the patient about his rights, possiblities for realization of his rights and house rules in the institution. This

provision is obligatorily applied to tutors and legal representatives of the patient with partly or completely diminished business ability.

## 1. Investigation of patient's complaints

Article 44

(1) Patient has the right to complain to the provider or authorized person in regard to provided health care service.

(2) Health care provider or authorized person must investigate the patient's complain and inform the patient in written form about results of the investigation within 10 working days. Realization of the right to complain does not affect the patient's right to address other authorized bodies for investigation of his complain as it is defined in internal regulations of the health care provider which must warn patient about this fact.

(3) Detailed regulations of investigation of the patient's complaint are prescribed by internal regulations of health care provider.

(4) Patient's complaints are registered and documents in regard to complaints and investigations must be kept for five years in accordance with internal regulations of the health care provider and this Code.

## 2. Representatives of the Patient's Rights

Article 45

(1) System of the Representatives of Patient's Rights and their comissioners on the level of hospital health care institutuions, Counties and City of Zagreb is established.

(2) Representative of the Patient's Rights protects the rights and interests of the patient providing help in the form of consultations, enabling approach to medical documentation and obtaining all necessary information of patient's treatment as well as taking of other measures for protection of patient's rights and interests.

(3) As a bearer of general power of attorney Representative of Patient's Rights has the right to protect all the patient's rights except those explicitely excluded in written form by patient.

Article 46

Representative of Patient's Rights has the right to obtain all the information (except those explicitely forbidden by patient) about course of his treatment, treatment of the patient himself and his special demands from the bodies of health care provider. In this case health care personnel is freed from keeping of professional confidence.

Article 47.

Representative of Patient's Rights has the right to give special care (without special invitation) to minors and patients who, due to their mental illness, type of illness or level of their business ability, cannot make individual decisions.

Article 48

(1) Representative of Patient's Rights has the right to demand and health care provider is obliged to issue a written opinion about each of his demands.

(2) In the interest of the patient and for protection of his rights, the Representative of Patient's Rights has the right to address local health administration in the city, municipality, county and Ministry of Health of Republic of Croatia, if not satisfied with written information by health care provider. .

(3) In certain cases Representative of Patient's Rights has the right to initiate a court procedure, i. e. procedure for damages in accordance with general provisions of the law. In this case Representative of Patient's Rights acts as a bearer of general power of attorney.

Article 49

Representative of Patient's Rights cannot be an employee of any health care insitution or company in business relation to health system.

Article 50

(1) For the purpose of realization of rights, obligations and liabilities of the Representative of Patient's Rights, an Agency for Represenatation of Patient's Rights is founded.

(2) Agency for Represenation of Patient's Rights is founded on the level of Republic of Croatia with branch offices in counties and City of Zagreb.

(3) Representative of Patient's Rights over his empowered commissioners is presnt in any hospital institution with more than 100 beds. Comissioner of the Patient's Rights can be appointed for two or more hospital institutions in the area of the same County or City of Zagreb.

Article 51

(1) Agency for Representation of Patient's Rights is founded as independent organization.

(2) Head of the Agency for Represention of Patient's Rights as Representative of Patient's Rights is appointed by Parliament of Republic Of Croatia.

Article 52

(1) Representative of Patient's Rights (Head of the Agency) and his commissioners have an identity card of Representative of Patient's Rights which they must show during their entrance to any health care institution.

(2) The sign of the Representative of Patient's Rights with closest address and phone number of the commissioner for that health care institution who can be reached by patients, must be put on a visible place in the entrance to every health care institution.

(3) Detailed provisions of rights, obligations and liabilities of the Representative of Patient's Rights and his comissioners will be regulated by Rules of Acting of Representative of Patient's Rights which will be made by Parliament of Republic of Croatia upon proposal of appointed Head of Agency for Representation of Patient's Rights.

Article 53

(1) Through direct acting of patients as well as health workers toward patients, Representative of Patient's Rights and other professional bodies, especially Croatian Medical Chamber, Croatian Dental Chamber, Croatian Chamber of Medical Biochemistry, Croatian Pharmacological Chamber, Croatian Medical Association and other bodies, the relationships of partnership, mutual interests and trust must be set in overall procedure of realization of patient's rights.

(2) Relationship of partnership supposes equality in protection of patient's rights in terms of efficiency of the whole health system of Republic of Croatia in providing health care to citizens in general as well as to patients with their special need for protection of their rights.

Article 54

Republic of Croatia is obliged to enable partnership realtionships of patients with persons and institutions that provide health care services by ensuring financial means from the Budget until the method of financing the work of Representative of Patient's Rights and his comissioners is regulated through additional fee for patient's rights from every form of health insurance in accordance with Article 27 of this Code and with percentage determined by Parliament of Republic of Croatia.

***Special features of the institution of the Representative of Patient's Rights functioning***

*During institutionalization of Representative of Patient's Rights special attention must be paid to their organization. In regard to new and important institution of the Representative of Patient's Rights on the level of Republic of Croatia with consent of European Union and World Associaton for Medical Law as well as International Center for Health, Law and Ethics, the education and training of representatives of patient's rights as well as their introduction to work will be organized.*

*In overall institutionalization of representatives of patient's rights it is important that they are independent from all bodies of state administration and that they are liable only to Parliament of Republic of Croatia through Agency of Patient's Rights (if this Agency is going to be founded what we as proposers deeply recommend.*

**Foundation of the Agency as independent legal body is done on the level of Republic of Croatia with organizational units and comissioners as it is described in Article 50 of this Code.**

## *Part Four*

## PENAL PROVISIONS

Article 55

The patient's authorized doctor of medicine/dentistry and a responsible person from the healthcare institution or private practice will be punished with a fine ranging from 10 000 to 100 000kn:

1. for not providing the patient with information determined by Article 5, subsection (3) of this Article,
2. for not providing the patients' rights representative with information within the timeline determined in Article 6, subsection (5) of this Law,
3. for preventing access to the waiting list according to Article 5, subsection (7) of this Law,
4. for disrespect of patients' rights determined in Article 7 of this Law,
5. for not acting according to the provision of Article 8, subsection (3), (4), (5) of this Law,
6. for not providing the patient with information according to Articles 9, 10 and 11 of this Law,
7. for disrespecting the right to a personal decision, consent and co-deciding of patients according to Articles 12, 13, 14, 15, 16 of this Law,
8. for acting against the provisions of Articles 17, 18, 19 and 20 of this Law,
9. for disrespecting the right to have access to medical documentation according to Article 21 of this Law,
10. for disrespecting the right to confidentiality and keeping a medical secret determined by Article 22 of this Law,
11. for refusing further treatment of the patient that acted against the provisions of Articles 29 and 30 of this Law,
12. for not fulfilling obligations determined by Article 41 of this Law
13. for not acting accordingly to provisions of Articles 42, 43 and 44 of this Law,

Article 56

For disrespecting obligations and responsibilities of patients proscribed by provisions of Article 29 of this Law, the patient will be fined with a fine that may not exceed the full cost of the medical treatment, or the cost of the complete healthcare service he/she received up to the moment when he/she acted against this Article.

Article 57

For violating provisions from Articles 35 ‡ 40 of this Law, a fine is due, which may not exceed the total cost of the healthcare service provided to the plaintiff (patient) from the defendant (service provider), from the starting point of the first medical procedure initiated by the plaintiff to the moment of the first violation from the part of the defendant of provisions stated at the beginning of this Article.

Article 58

Funds gained by collecting legal fines according to the provisions of this Law the Court will transfer, by legal duty, to the National fund for patients' rights representatives**.

Article 59

Application of penal provisions of this Law does not exclude penal responsibility determined by the Penal Code of Republic of Croatia.

** NATIONAL FUND FOR PATIENTS' RIGHTS REPRESENTATIVES is established by the Sabor of Republic of Croatia (Croatian parliament) under the Agency for representing patients' rights.

## *Part Five*

## TRANSITIVE AND FINAL PROVISIONS

Article 60

Healthcare institutions are obligated to modify their activities according to the provisions of this Law no later than 180 days from the date of its validity.

Article 61

Agency for representing patients' rights will be founded by appointing the Agency director, no later than 60 days from the date when this Law becomes valid, the Agency director will organize it in sense of Patients' rights representatives with commissioners on the whole territory of the Republic of Croatia within 360 days from the validity date of this Law.
Funds needed for institutionalizing patients' rights representatives will be ensured from the State budget according to the Article 54 of this Law.

Article 62

This Law will become valid and will be applied from the eight day after its publishing in Narodne Novine.