

A STUDY ON INTERNS AND PRE-INTERNSHIP STUDENTS' LEVEL OF AWARENESS ABOUT THE PATIENT'S RIGHT CHARTER

 Hossein Dorafshan¹,  Farkhondeh Jamshidi²,  Mahdi Bijanzadeh³

¹Ahvaz Jundishapur University of Medical Sciences, Student Research Committee, Ahvaz, Iran

²Ahvaz Jundishapur University of Medical Sciences, School of medicine, Department of medical ethics, Ahvaz, Iran

³Ahvaz Jundishapur University of Medical Sciences, School of medicine, Department of medical genetics, Ahvaz, Iran

ABSTRACT






Objective: Observing patients' rights requires the physicians' awareness of the patient's right charter contents. Current study was designed in order to determine the Ahvaz Jundishapur University of Medical Sciences internship and pre-internship students' awareness of the Patient's Right Charter at 2019-2020.

Material and Method: In this descriptive-analytic study, 180 internship and pre-internship medical students were included. Data collection tool consists a questionnaire including 36 questions. The questionnaire included 7 questions about demographic information (age, gender, educational grade, and the total awareness of the Patient's Right Charter and medical morals), 29 four-choice questions about the Patient's Right Charter and 6 survey questions as Yes or No.

Results: Students' mean score of awareness was around 17 (maximum score: 29). The level of awareness of the internship students was significantly higher than that of pre-internship students. The awareness of the participants had a significant difference according to the educational grades and the interns were more aware than pre-interns. Although the awareness of female students was higher than that of male students, this difference was not statistically significant.

Conclusion: Most of the students were moderately aware of the Patient's Right Charter, so strategies such as improving the quality of medical ethics courses and workshops or training seminars are suggested for enhancing the awareness.

Keywords: Internship, pre-internship, patient's rights charter.

	CORRESPONDING AUTHOR: Mahdi Bijanzadeh Department of Medical Genetics, School of Medicine, Ahvaz Jundishapur University of Medical Sciences, Golestan Boulevard, Ahvaz, Khuzestan, Iran mbijanz@yahoo.com
	HD https://orcid.org/0000-0002-5972-0702
	FJ https://orcid.org/0000-0003-2439-617X
	MB https://orcid.org/0000-0002-5650-9450
	DELIVERING DATE: 10 / 06 / 2021 • ACCEPTED DATE: 16 / 08 / 2021

İNTÖRN VE İNTÖRNLÜK ÖNCESİ DÖNEMDEKİ ÖĞRENCİLERİN HASTA HAKLARI BİLDİRGESİ İLE İLGİLİ FARKINDALIK DÜZEYLERİ ÜZERİNE BİR ARAŞTIRMA

ÖZET

Amaç: Hasta haklarının gözetilmesi, hekimlerin hasta hakları tüzüğüne içerisinden haberdar olmasını gerektirir. Mevcut çalışma, Ahvaz Jundishapur Tıp Bilimleri Üniversitesi intörn ve intörn öncesi öğrencilerinin 2019-2020 Hasta Hakları Bildirgesi konusundaki farkındalıklarını belirlemek amacıyla tasarlanmıştır.

Materyal ve Metot: Bu tanımlayıcı-analitik çalışmaya intörn ve intörnlük öncesi 180 tıp öğrencisi dahil edilmiştir. Veri toplama aracı 36 sorudan oluşan bir anketten oluşmaktadır. Ankette demografik bilgilerle ilgili 7 soru (yaş, cinsiyet, eğitim durumu ve Hasta Hakları Bildirgesi ve tıbbi ahlak konusundaki toplam farkındalığı), Hasta Hakları Bildirgesi ile ilgili dört

seçenekli 29 soru ve 6 tane Evet-Hayır anket sorusu yer almaktadır.

Bulgular: Öğrencilerin farkındalık puan ortalaması 17 (maksimum puan: 29) civarındaydı. İntörnlük öncesi öğrencilere göre anlamlı düzeyde daha yüksekti; katılımcıların farkındalıkları eğitim düzeyine göre anlamlı farklılık göstermekteydi ve intörnlük öncesi öğrencilere göre farkındalıkları daha fazlaydı. Her ne kadar kadın öğrencilerin farkındalıkları erkek öğrencilere göre daha yüksek bulunsa da bu fark istatistiksel olarak anlamlı değildi.

Sonuç: Öğrencilerin çoğu Hasta Hakları Bildirgesi'nden orta düzeyde haberdardı, bu nedenle farkındalığı artırmak için tıp etiği derslerinin kalitesinin artırılması ve çalıştayların veya eğitim seminerlerinin yapılması gibi stratejiler önerilmektedir.

Anahtar kelimeler: İntörn, intörnlük öncesi, hasta hakları sözleşmesi.

INTRODUCTION

Patient's rights are the duties of the medical team to him/her, and are referred to as the total scores and liabilities or the special permissions granted by law to the patient.^{1,2} In order to make sure of observing the patients' rights, the health and treatment systems of the countries compile a charter known as the patient's right charter and impart it to the executive sections for implementing it.³ The hospitals and other health service providers must provide the chart or its contents to the patients in order to know their rights and take action to invoke them when needed.^{3,4}

Compilation of the patients' rights charter is a starting point in the way of the full-scale attention to meet the patients' rights as well as to provide a correct definition of service providers and service receivers.⁵ At 2002, the patients' rights charter was compiled for the first time in Iran and was imparted by the health assistance of the Health Ministry.^{6,7} The developed charter was adopted by the Ministry of Health and Medical Education in 2009, after that, the Ministry issued an administrative order, regarding that, medical universities have to work on the application of the charter and hospital accreditation standards have been revised in order to inspect the charter.⁸

It seems that the act of Health Ministry in preparation and notification of the Patient's Right Charter to medical centers was an effective step in putting forward the subject of patient's rights and observing it, but there is considerable distance between its compilation and realization, so it is necessary to take complimentary measures for realizing it.⁹ The implementation of this charter requires that the students of professional health fields have enough information about the existence and contents of the charter as well as a positive consideration of the importance of it.¹⁰ Thus, the goal of the current study is to evaluate the awareness of Ahvaz Jundishapur University of Medical Sciences of the Patient's Right Charter.

It is obvious that reporting this rate can help the authorities promote it, increase the quality and quantity of the arranged services to the patients and increase patients' satisfaction.

MATERIAL AND METHOD

In the descriptive-analytic and cross-sectional research, the statistical population comprised of 180 intern and pre-intern medical students of Ahvaz Jundishapur University of Medical Sciences at 2019-

2020. Inclusion criteria were pre-internship and internship medical students and willing to participate in the study, exclusion criteria were students of other fields and medical students in lower periods of study and who were not consent to participate in the study. To collect the required data, a 3 part questionnaire including 36 question was used. The questionnaire included 7 questions about demographic information (age, gender, educational grade, and the total awareness of the patient's right charter and medical morals), 29 four-choice questions about the patient's right charter and 6 survey questions as Yes or No and one open question. For rating the questionnaire, 1 score was given to each correct answer, and no score was given to the incorrect answer (minimum score: 0, maximum score: 29). The students got a score between 0 to 9, 10 to 19, and 20 to 29 were considered to have weak, moderate, and good awareness of the patient's right charter, respectively.

The validity and stability of questionnaire of the patient's right charter have been approved already by Zarei and Arab, and Ranjbar *et al.* ($r=0.83$).^{11,12} Statistically: in order to perform the statistical analyses SPSS software version 22 was used. Independent samples t-test, Mann Whitney U non- parametric test and ANOVA (or Kruskal-Wallis non- parametric test) were used to correlate the quantitative variables and K-score test (or Fisher's exact test) to compare the qualitative variables. The significance of tests was considered at 0.05 or less.

The project was approved by the Ethics Committee of Ahvaz Jundishapur University of Medical Sciences by No. IR.AJUMS.REC.1397.402.

RESULTS

In the current cross-sectional study, 180 intern and pre-intern medical students with a mean age of 25.52 ± 0.14 were included in the study. 58 (32.2%) were male and 122 (67.8%) were female. 116 (65.2%) were interns and 62 (34.8%) were pre-intern students. The students mean awareness score was 17.16 ± 0.23 with minimum of 9 and maximum of 23. 2 students (1.1%) had weak awareness, 140 students (77.8%) had moderate awareness, and 38 students (21.1%) had good awareness of the patients' rights charter.

Table 1. The awareness score of the participants.

Variable		Maximum	Median	Minimum	Mean±SD
Gender	Male	23	16	9	16.65±0.51
	Female	23	17	11	17.40±0.24
	Total	23	16	9	17.16±0.23
p value			0.345		
Educational level	Internship	23	16.5	10	17.62±0.28
	Pre-internship	21	15	9	16.25±0.39
	p value			0.005*	

*: Significant value.

Table 2. The participants' mean awareness scores of the patients' rights charter fields according to gender and the educational grades

Variable	The right of information privacy (score 0-5)	The right of patients personal freedom (score 0-4)	The right of awareness of treatment process (score 0-5)	The right of conscious consent (score 0-11)	The right of access to treatment services (score 0-4)	
Total students (median)	2.93±0.07	2.30±0.06	2.6±0.07	6.7±0.12	2.51±0.05	
Gender	Male	2.75±0.13	2.17±0.13	2.48±0.13	6.72±0.23	2.51±0.11
	Female	3.03±0.09	2.36±0.07	2.76±0.09	6.71±0.15	2.50±0.06
P value		0.173	0.540	0.048*	0.906	0.620
Educational level	Internship	3.0±0.89	2.27±0.09	2.79±0.10	7.08±0.15	2.46±0.07
	Pre-internship	2.83±0.13	2.35±0.10	2.45±0.12	6.03±0.18	2.58±0.09
P value		0.721	0.979	0.029*	0.000*	0.221

*: Significant value.

As it is shown in the Table 1, the students mean awareness had no significant difference according to the age, but had a significant difference according to the educational grades and the awareness score of interns were higher than that of pre-interns ($p<0.05$).

According to the Table 2, the highest scores of the awareness were related to the patients' rights of the conscious consent.

Of the 5 fields of the questionnaire, only the right of conscious consent had a positive and significant relation to age ($p<0.001$, $r=0.290$). The mean score of questionnaires was not significantly different between two genders, but the field of the right of awareness of the treatment process which was significantly higher ($p<0.05$). The mean score of the right of conscious consent and awareness of the treatment process were also significantly higher in the interns ($p<0.05$) (Table 2).

Table 3. The frequencies of survey questions		
Question	Answer	Frequency (%)
Have you been informed of the patient's rights charter before internship course or in its beginning?	yes	58 (32.2)
	no	122 (67.8)
If your answer is yes, what have been your information sources?	professor	38 (21.1)
	books	8 (4.4)
	other	52 (28.9)
Was the medical ethics or forensic medicine course contents affective in enhancement of your awareness of the patients' rights?	Medical ethics	108 (60)
	Forensic medicine	38 (21.1)
	no	30 (16.7)
Do you think the students' awareness of the patients' rights is necessary in the medical internship course?	yes	166 (92.3)
	no	12 (6.7)
Do you think the medical internship students' information of the patients' rights are sufficient?	yes	30 (16.7)
	no	40 (22.3)
Are the patients' rights observed in the hospital you are passing your internship course?	yes	56 (31.1)
	no	122 (67.8)
Do you think the students' awareness of the patients' rights is necessary in the medical pre-internship course?	yes	166 (92.2)
	no	14 (7.8)
Do you think the medical pre-internship students' information of the patients' rights are sufficient?	yes	38 (21.1)
	no	138 (76.7)
Are the patients' rights observed in the hospital you are passing your pre-internship course?	yes	60 (33.3)
	no	114 (63.3)

The frequencies of survey questions are shown in Table 3.

The students suggestions for compensating the chart information voids were: instructing the patients' rights charter by holding training workshops, installing posters and brochures, training clips in classroom format (number: 17), starting to training the patients' rights charter from physiopathology or Grade 2 (number: 1), adherence of personnel and authorities to the Patients' Rights Charter (number: 2), improving medical ethics classes quality by providing cards and real examples (number: 1), and putting forward the questions related to the Patients' Rights Charter in pre-intern course tests (number: 1).

DISCUSSION

In the current cross sectional study, we evaluated the awareness of clinical medical students about the Patient's Rights Charter and we concluded that the awareness score of internship and pre-internship students of Ahvaz Jundishapur University of Medical Sciences was 17.16 ± 0.23 of maximum 29, which

shows that the students had moderate awareness. Generally 1.1% of the students had weak awareness, 77.8% had moderate awareness, and 21.1% had good awareness. Also, the highest awareness rate was for the conscious consent filed.

Ozdemir and colleagues analyzed the awareness level of patients' rights in nurses and midwives who working in the third and fourth largest cities in Turkey and reported that 51% of nurses and midwives have not read any legislation related to patients' rights and 75% of them were aware of the legal arrangements.¹³

Khaledi *et al.* analysed perspectives of patients about patients' rights in the educational hospitals of Kurdistan, Iran. They emphasis that patients believed that for observing their rights, they need to be appreciated and attempted standard healthcare services.¹⁴

In the study of Samadbeik *et al.* (2014) conducted in the Lorestsn University of Medical Sciences Paramedical School, 1.45% of the students had weak awareness, 81.16% had moderate awareness, and 17.39% had good awareness of the patient's rights charter. The highest awareness rate was for the health services field.¹⁵ In the study of Azimi and colleagues (2011) on the midwifery students, medical interns and professional assistances of obstetrics wards at Tehran, the awareness score was 8.53 of 15 which was moderate. 7.7% of the students had weak awareness, 79.5% of them had moderate awareness, and 12.8% of them had good awareness.⁹ In the study of Ranjbar *et al.* (2010) on medical interns of Yazd Hospitals, 35.6% of them had weak awareness, 27% had moderate awareness, and 36.7% of them had good awareness.

The highest rate of awareness was for the personal freedom and the lowest was for the access right to health services.¹² In the study of Bathaei *et al.* (2010) on Qom medical sciences students (medicine, nursery, operation room and anesthesia), 58/8% of the students had weak and moderate awareness of the patient's rights charter. The highest rate of awareness was for the patient's right to know the treatment methods and the lowest was for the patient's right to know the discharging time.¹⁰

In the study of Ghorbani and his colleagues (2010) on Ahvaz Jundishapur University of Medical Sciences interns and assistances, 14.45% of doctors had no information about the Patient's Rights Charter contents, but 61.7% of them were fully informed about it.¹⁶

The studies conducted by Dicinskiene *et al.* at Lithuania (2007) and by Woogara *et al.* at NHS hospitals of UK (2005) also showed that the physicians, nurses and patients had poor awareness of the Patient's Rights Charter.^{17,18}

Considering the current research results and the students' awareness of the medical ethical rules, the necessity of revising medical students' ethical curriculum and making it more and more applicable is felt, as the awareness is moderate and we should pay attention to enhancing and approaching to the desirable levels. In the current study, some of the students pointed out to the necessity of improving the quality and quantity of the education through holding training workshops, installing posters and brochures, training clips in classroom format.

In the current study, most of the students (166 students out of 180 interns and pre-interns: 92.2%) had a positive attitude towards the Patients' Rights Charter and considered the awareness of that in the internship and pre-internship courses necessary. Also, 95 interns out of 116 (82.2%) and 47 the pre-interns out of 62 (76.7%) stated that they did not have enough information about the patients' rights. 122 students out of 180 students (67.8%) noted that they have not been aware of the Patient's Rights Charter at the beginning or before their internship courses, indicating the deficit of education related to the patients' rights. So, it is suggested that the teaching of medical ethics is provided in physiopathology (grade 2) or maximum in the first semester of internship. In this research, 21.1% of the students have noted to professors as their information source, 4.4% of them have noted to books and 28.9% to the other sources.

It seems that the deficiency of books and journals as well as the leakage of study interest on the patients' rights could be effective factors in the students not knowing the patients' rights.

In the current study, the females had more awareness of the patient's rights charter than males, although a significant difference was not observed. The internship students had more awareness than the pre-internship students in average, which could be due to their higher experience. Besides, the participants' awareness had a non-significant positive relationship with age, which may be due to increasing the experience and knowledge about the patients' rights during their study period.

In the study of Samadbeik and colleagues (2014) on paramedical college students there was a significant relation between sex and the awareness of the patient's rights and the females were more aware than males, which in agreement with our study.¹⁵ In the study of Ranjbar *et al.* (2009) on the medical interns, a significant relationship was reported between the awareness and the gender and educational levels.¹²

CONCLUSION

Based on the results, the mean awareness of internship and pre-internship students of Ahvaz Jundishapur University of Medical Sciences of the Patient's Rights Charter was 17.16 ± 0.23 which is moderate.

Most of the students had moderate awareness of the patient's rights charter, so strategies such as workshops or training seminars, starting medical ethics course from physiopathology level (grade 2), conditioning the improvement of ethical questions in the pre-internship exams, improving the quality of medical ethics courses and continuous articulating the medical ethics messages in the hospitals and dormitories through public stands and brochures are suggested for enhancing the awareness.

Acknowledgment

This research is a part of thesis of Hossein Dorafshan, MD student, with General practitioner research project no. U-97113 and so the authors would like to sincerely thank the research affairs of Ahvaz Jundishapur University of medical sciences and all interns who took the time to do this research

*The authors declare that there are no conflicts of interest.



Dear student

This questionnaire designed for data collection to doing general physition thesis in medicine. Its aim is evaluation of interns and pre-internship students' awareness level of the patient's right charter.

Regarding that data collected from these questionnaire will be confidential and used for scientific porpuse, no need to insert your name. We respect your attention, accuracy and cooperation.

Best wishes

A) General information:

1. Age (years): ...
2. Gender: Male Female
3. The study level: pre-internship internship
4. Year of University entrance: ...
5. You have been informed of the patient's rights charter before internship course or in its beginning?
6. If your answer is yes, what have been your information sources? Professor Book Articles Others
7. Was the medical ethics or forensic medicine course contents affective in enhancement of your awareness of the patients' rights?
Medical ethics Forensic Both Nothing

B) Special questions in patients' rights (please select one):

1. Access to governmental hospital services:
 - Should be guaranteed for people who have insurance service.
 - Should be guaranteed for poor people.
 - Should be guaranteed for all, especially poor people.
 - Should be available, if private services not available.
2. The condition for admission of emergent patient in hospital is:
 - Availability of related specialty.
 - Availability of emergency ward.
 - Related to hospital dean's policy.
 - No condition is there.
3. If there are not emergent patient service in a hospital, ...
 - The patient's relatives have to get admission in another hospital.
 - The hospital have to try for getting admission in another hospital.
 - The first services have to be done, then getting admission in another hospital should be done.
 - No duty for the hospital to get admission in another hospital.
4. Getting consent from patient
 - Should be done for every medical service.
 - As a general consent letter is enough.
 - Can be mince or orally.
 - First and third selections.
5. Who is responsible for getting advised consent letter?
 - The reception man
 - A person who carried out treatment or surgery.
 - The nurses
 - The hospital manager
6. Before presenting advised consent for medical procedures, the patient have to ...
 - Be informed about medical procedures and their probable dangers.
 - Have an executor or protector.
 - Represent his/her ID card.
 - Detect his/her insurance type.
7. Which condition does not need for representing consent?
 - The patient has competence.
 - The patient has represented voluntarily.
 - The patient has represented advisedly.
 - Representing should be written.
8. Organ transplantation consent of a live person, ...
 - Orally is enough.
 - Should be written and approved by hospital.
 - Should be official and legal approved.
 - Is acceptable only after needful tests.
9. When using organs from died body for educational purposes, allowable?
 - Allowed by the parents or legal deputy of died person.
 - Allowed by himself or herself during life.
 - Allowed by judicial officer or forensic medicine.
 - Devised by died person and allowed by legal deputies.
10. Autopsy for research in cause of suspicious dead ...
 - Not allowed.
 - If had not prohibited by him/ her during life, is allowed.
 - Allowed by the legal parents' permission.
 - Allowed by forensic center, even without the legal parents' permission.
11. If the died person was non- adult, getting organ for transplantation, cannot be allowed, unless ...
 - All the legal corresponds represented written consent.
 - The hospital manager exported written order.
 - The therapeutic doctor was allowed.
 - The court was allowed.
12. When the patient is emergency and anesthetic, if participants do not consent, ...
 - The doctor cannot do any procedure.
 - The participants should be consented anyway.
 - In this condition, do not need to get consent.
 - The doctor can do medical procedure by written order of hospital directors.
13. Husband's consent for medical procedures of his wife ...
 - Should be get, everywhere.
 - Is necessary if affected their familial relationship.
 - Have to get, if he wants.
 - Not necessary.
14. The patient has the right that knew his/her doctor team and their specialty, if ...
 - The doctor willing.
 - Do not disturb to doctor.
 - Requested written.
 - There are no condition.

15. When the doctor can hide diagnosis and prognosis of disease, from patient?
 - If the patient parents or legal deputies were requested.
 - If the hospital not allowed
 - The doctor cannot hide the diagnosis of disease whenever.
 - If the doctor confidence that informing the diagnosis is harmful for patient.
16. Whom patient can be reserved in hospital perforce?
 - Non-adult patient, without inform and consent of parents.
 - The patient who admitted due to mental disorder and by his/her consent.
 - The patient who cannot pay hospital bill.
 - Non patient can be reserved in hospital perforce.
17. In which condition, epidemiologic evaluation of AIDS virus, without the patient consent, is not necessary?
 - Blood donation
 - Sexual diseases.
 - Organ transplantation
 - Milk donation.
18. If the patient willing to leave the hospital and abstain signing of discharge consent, ...
 - Cannot leave the hospital.
 - If pay the hospital bill, can leave.
 - Can leave the hospital.
 - Can leave, only by the hospital manager admission.
19. After inform of the medical procedure possible dangers, the patient ...
 - Have the right to refuse the medical procedure.
 - Have the right to request time for making decide.
 - Have the right to consult with other doctors.
 - Have all three above rights.
20. The patients have the right to inform from all decides were made by his/her medical team, if ...
 - Payed the hospital fee.
 - Selected his/her therapeutic doctor, directly.
 - Not been in coma.
 - Can distinguish his/her advices.
21. The hospital cannot unfold the data of patients' information sheet, unless ...
 - Allowed by therapeutic doctor.
 - Requested by legal centers and awareness of the patient.
 - Allowed by therapeutic doctor and the patient.
 - Requested by the patient's parents.
22. In which condition, in I.R.Iran, confidential data can be overtured, legally?
 - When the health and hygiene of people is at risk.
 - By consent and written comment of therapeutic doctor
 - After the patient death.
 - Confidential data overtured is guilt, everywhere.
23. The patient has the right to get comments of other doctor(s) about his/her disease and therapeutic plan, if ...
 - Allowed by therapeutic doctor.
 - Informed therapeutic doctor.
 - Informed and allowed by therapeutic doctor.
 - Consultant doctor(s) should be from same hospital.
24. Consultant doctor(s) can access the patient medical sheet, if ...
 - Allowed by the hospital manager.
 - Allowed by therapeutic doctor.
 - Informed and allowed by the patient.
 - Consultant doctor(s) can access the patient medical sheet.
25. Which part of the patient medical sheet can be unfold?
 - Financial and official data
 - ID card
 - Medical data
 - None
26. Tariff of hospital services should ...
 - Install at hospital entrance door or at reception.
 - Informed to patients, orally.
 - Informed to patients, if requested.
 - Informed to patients and signed, whenever he/she entrance to hospital.
27. The patient has the right to protest against his/her hospital bill, if ...
 - He/she will be pay the bill.
 - The insurance will be pay the bill.
 - The insurance will be pay, can protest against his/her share.
 - Whoever will be pay, the patient can protest.
28. Which one is wrong about access to the patient medical sheet?
 - Without the patient consent, can be accessed by family.
 - The patient can request for its reading during treatment period.
 - The patient has the right to request for its pages' copies.
 - When these data danger the patient health, it can be hidden.
29. If a foreigner patient refer to a hospital, ...
 - He/she should accepted, without any condition.
 - If he/she can pay the hospital bill, can be accepted.
 - After calling and requesting police I accept.
 - Not allowed to accept him/her.

C) Yes/No questions (The first 3 for internship and the last 3 questions for pre-internship students):

30. Do you think the students' awareness of the patients' rights is necessary in the medical internship course? Yes/No
31. Do you think the medical internship students' information of the patients' rights are sufficient? Yes/No
32. Are the patients' rights are observed in the hospital you are passing your internship course? Yes/No
33. Do you think the students' awareness of the patients' rights is necessary in the medical pre-internship course? Yes/No
34. Do you think the medical pre-internship students' information of the patients' rights are sufficient? Yes/No
35. Are the patients' rights are observed in the hospital you are passing your pre-internship course? Yes/No
36. Please insert your suggestions regarding to relief the lack of information in patient's rights among medical students? Please insert respectively.
 - a)
 - b)
 - c)

REFERENCES

1. Abedi G, Shojaee J, Moosazadeh M, et al. Awareness and observance of patient rights from the perspective of Iranian patients: a systematic review and meta-analysis. *Iranian J Med Sci* 2017; 42: 227-232.
2. Newham R, Hewison A, Graves J, Boyal A. Human rights education in patient care: A literature review and critical discussion. *Nursing Ethics* 2020; 28: 190-209.
3. Pelzang R, Hutchinson AM. How is patient safety understood by healthcare professionals? The case of Bhutan. *J Patient Saf.* 2020; 16: 106-109.
4. Kuzu N, Ergin A, Zencir M. Patients' awareness of their rights in a developing country. *Publ Health* 2006; 120: 290-296.
5. Parsapoor A, Bagheri A, Larijani B. Review of revolution of patient's right charter. *Iranian J Med Eth History Med* 2010; 3: 39-47.
6. Ranjbar Ezzatabadi M, Baghian N, Dehghani Tafti A. Patients' Awareness about the Patients's Rights Legislation: A Case Study in Educational Hospitals of Yazd city, 2011. *Commun Health J* 2017; 8: 10-19.
7. BostaniKhalesi Z, Masole S, Abedinzade M. Evaluation of the patients, doctors and nurses' viewpoints about patient bill of rights in Rasht public hospitals. *J Fasa Univ Med Sci* 2012; 2: 91-95.
8. Parsapoor A, Bagheri A, Larijani B. Patient's rights charter in Iran. *Acta Med Iran* 2014; 52: 24-28.
9. Azimi N, Kiani M, Amadi M, Majd HA. Awareness of midwifery students, medical interns women and gynecologist students about medical ethics standards in department of labor, chosen hospitals training of Tehran in 2011. *Med Eth J* 2015; 8: 51-69.
10. Bathaei SA, Asayesh H. Medical students' awareness of patients' rights in Qom university of medical sciences and health services (2010). *Iranian J Med Educ* 2012; 12: 347-355.
11. Zarei A, Arab M, Akbari F. Managers' knowledge on patient rights in Tehran hospitals]. *J Qazvin Univ Med Sci* 2007; 11: 65-71.
12. Ranjbar M, Dehghani A. Students' awareness of patients' right in teaching hospitals of Yazd. *Iranian J Med Eth History Med* 2010; 3: 51-60.
13. Ozdemir MH, Can O, Ergonen AT, et al. Midwives and nurses awareness of patients' rights. *Midwifery J* 2009; 25: 756-765.
14. Khaledi S, moridi G, Valiee S. Iranian patients' perspective of patients' rights: a qualitative study. *Indian J Med Ethics* 2016; 1: 16-22.
15. Samadbeik M, Baraei Z, Rahbar S. Awareness of patients' rights charter among paramedical intern students in Lorestan university of medical science. *J Health Biomed Inform* 2015; 2:106-112.
16. Ghorbani A, Saadati N, Ayar N. Evaluation of intern, resident and patient's knowledge of their right charter in Ahvaz Jundishapur University Educational Hospitals. *Jundishapur Sci Med J* 2013; 11: 645-655.
17. Ducinskiene D, Vladickiene J, Kalediene R, Haapala I. Awareness and practice of patient's rights law in Lithuania. *World Hosp Health Serv* 2007; 43: 22-26.
18. Woogara J. Patients' rights to privacy and dignity in the NHS. *Nurs Standard* 2005; 19: 33-37.