

病人約章

PATIENTS' CHARTER



寶血醫院 (明愛)

Precious Blood Hospital (Caritas)

病人約章的目的是向病人解釋使用寶血醫院 (明愛) 服務時應有的權利及責任。了解自己的權利與責任，對於你和醫療護理人員的關係，相得益彰。
The purpose of the Patients' Charter is to explain both your Rights and Responsibilities when you are using the services of Precious Blood Hospital (Caritas). Knowing and understanding your rights and responsibilities will make your relationship with health care providers mutually beneficial.

病人的權利 PATIENTS' RIGHTS

決定權 Right to Choices

接受或拒絕任何藥物治療，檢驗或治療程序及知道接受或拒絕治療的後果。
To accept or refuse any medication, investigations or treatment, and to be informed of the likely consequences of doing so.

徵詢其他醫生的專業意見。
To ask for a second medical opinion.

選擇或拒絕參加臨床科研教學和示範項目。
To choose or refuse to take part in clinical research teaching and demonstration programmes.

私隱權 Right to Privacy Protection

就個人的私隱權、尊嚴、宗教信仰及文化信念等，在不損害其他病人或醫學人員之權利下獲得尊重。
To have your privacy, dignity, religious and cultural beliefs respected.

得到院方將您的個人及病情資料保密。
To have information relating to your person and medical condition kept confidential.

知悉權 Right to Information

知道本院提供的醫療護理服務資料及收費。
To receive information about what health care services are available, and what charges are involved.

知道及明瞭自己的病況、診斷結果，病情發展，常見的後遺症及治療方法。
To be given a clear description of your medical condition, with diagnosis, prognosis (i.e. an opinion as to the likely future course of any illness), and of the treatment proposed including common risks, and appropriate alternatives.

知道處方藥物的名稱，效用及可能產生的常見嚴重副作用。
To know the names of any medication to be used, and its normal actions and potential side-effects given your condition.

申訴權 Right to Complaint

提出申訴並得到於合理時間內作出公平的調查及回覆。
To make a complaint and to have any complaint dealt with promptly and fairly.

聯絡醫院行政部：
Contact Administration office:

地址 Address : 香港九龍深水埗青山道113號
113 Castle Peak Road, Sham Shui Po, Kowloon, Hong Kong

電話 Tel: (852) 3971 9914 / 3971 9915

傳真 Fax: (852) 2728 4290

電郵 Email: pbh@pbh.hk

病人的責任 PATIENTS' RESPONSIBILITIES

詳盡地提供你的健康狀況、過往曾患的病、敏感症及其他有關詳情。
To provide as much information as you can about your present health, past illnesses, any allergies and any other relevant details.

遵從醫生提供並經你同意的治療程序，及有關指示。
To follow the prescribed and agreed treatment plan, and conscientiously comply with the instructions given.

遵守醫院所訂定的規則。
To follow the hospital rules concerning patient conduct.

繳交醫生及醫院為您提供服務的所需費用。
To pay fully the required fees and charges for the medical services provided to you.

不應要求醫護人員提供不正確的資料、收據、文件或病假證明書；或將不正確資料載入您的病歷內。
Do not ask health care providers to provide incorrect information, receipts, documents or certificates or to make incorrect entry into the medical records.

小心看管及處理您在病房內的一切個人財物及用品。
To keep your personal belongings in the ward carefully.

準時應診，如不能依期赴診，應盡早通知本院。
To keep any appointments you are given, or notify the hospital as early as possible if you are unable to do so.