

MINISTRY OF HEALTH
No. 4031/2001/QĐ-BYT

SOCIALIST REPUBLIC OF VIET NAM
Independence-Freedom-Happiness

HEALTH MINISTER'S DECISION
issuing the "Regulation on ways of communication at medical
examination and treatment facilities"

THE MINISTER OF HEALTH

- Pursuant to the Government's Decree No. 68/CP of 11 October, 1993 defining the functions, tasks, powers and organizational structure of the Ministry of Health.
- Pursuant to Health Minister's Decision No. 2088/BYT-QĐ of 6 November, 1996 on Medical Ethics (health workers' ethical principles).
- At the proposals of the Director of Treatment Department, Ministry of Health.

DECIDES:

Article 1. To issue together with this Decision the "Regulation on ways of communication at medical examination and treatment facilities."

Article 2. This Decision shall apply to the State-owned, semi-public, people-founded, private and foreign-invested medical examination and treatment facilities.

Article 3. The Director of Treatment Department in coordination with Chief-Inspector and other concerned Departments shall provide guidance and exercise examination, inspection and supervision for the implementation of this Decision at medical examination and treatment facilities nationwide.

Article 4. This Decision takes effect 15 days after its signing and issuing.

Article 5. The Head of Administrative Bureau, Chief-Inspector, Director of Treatment Department, Director of Department for Traditional Medicine, Director of Maternal Child Health and Family Planning Department, Director of Personnel Department (Ministry of Health), Directors of Health Services of provinces and centrally-run cities and, Directors of Hospitals and Institutes run by Ministry of Health, Heads of Health Service run by other agencies and Ministries shall have to implement this Decision.

To:

- *Government's Office (Dept. for Social and Administrative Affairs, Gazette)*
- *MoH's Administrative Bureau, Departments, Inspection Bureau.*
- *Health Services of provinces and centrally-run cities, and Health Services run by other agencies and Ministries.*
- *MoH-run Hospitals and Institutes.*
- *MoH-run Units.*
- *Administrative Management Section II (51 Pham Ngoc Thach, HCM City).*
- *MoH's Treatment Department (for record).*
- *Archives.*

FOR THE MINISTER OF HEALTH
VICE MINISTER

Le Ngoc Trong

(signed and sealed)

REGULATION ON WAYS OF COMMUNICATION AT MEDICAL EXAMINATION AND TREATMENT FACILITIES

(Issued together with the Decision No. 4031/2001/QĐ-BYT of 27 September, 2001 of the Minister of Health)

I. GENERAL PROVISIONS

1. Communication at medical examination and treatment facilities is indicated through words, attitude, behavior and relationship between doctors, health workers and patients, their relatives, guests and through colleague relationship.
2. The persons who go to health facilities for examination, treatment, visit or working visit are subject to health services at examination and treatment facilities and are treated equally and properly.
3. Doctors and health workers at examination and treatment facilities, patients and their relatives shall have to fully implement this Regulation.

II. DETAILED PROVISION:

1. **When patients and their relatives, and guests enter the hospital's gate, guard staff shall have to:**
 - a. Greet and ask patients, their relatives and guests for letter of introduction (except emergency cases).
 - b. Open gates and provide guidance to patients, their relatives and guests on bike-keeping lot and the place they want to go.
 - c. Provide guidance to patients' relatives on the time regulation to visit patients.
2. **When patients, their relatives and guests go to examination room, doctors and health workers shall have to:**
 - a. Warmly welcome and greet patients, their relatives and guests and be willing to help them.
 - b. Answer all questions raised by patients, their relatives and guests in a polite and friendly manner.
 - c. Classify and distribute patients' books in according to numeral order.
 - d. Ask patients, their relatives and guests to wait for their turns at the right place.
 - e. Doctors check and examine patients, listen to patients and explain clearly how to treat their diseases.

- f. Provide guidance on hospital admission procedures. Take seriously-ill patients to testing and X-ray sections if they are not able to go by themselves.
 - g. Take patients to inpatient treatment blocks.
3. **When patients are admitted:**
- a. Chief-Nurse or Chief-Midwife or nurse welcome warmly patients, quickly deal with administrative procedures, introduce hospital's regulations and arrange bed for patients. In case of absence of separate beds, clear explanation should be made for patients or their relatives before patients are asked to share bed with others.
 - b. Doctors, Nurses and Midwives in-charge shall have to introduce themselves (i.e., name, title), greet and make acquaintance with patients right after they are admitted.
4. **When patients are being hospitalized:**
- a. Doctors and health workers shall have to call patients and their relatives in a polite manner and in accordance with their age or social relations. Patients should be called by combining personal pronoun with their full names (i.e., Mr. Nguyen Van A, etc.). Avoid calling patient with "that man", "that woman".
 - b. Doctors, Nurses and Midwives in-charge arrange time properly to contact, visit, examine and provide health education and guidance for patients to take treatment method and health care.
 - c. Nurses, Midwives and Auxiliary Nurses help patients with detailed jobs such as arranging beds, wearing clothes and giving water, etc...if necessary.
 - d. Doctors in-charge, Nurses, Midwives and Auxiliary Nurses who are in noon and night shifts have to go to see patients if requested by patients or their relatives. Handle timely specialty-related requests and explain patients' health status to make them and their relatives feel relieved.
 - e. Doctors and health workers should not show, through their gesture or words, any suggestion of receiving money and gift from patients and their relatives, especially in case of surgery or minor operation.
 - f. Doctors and medical workers must be calm in every situation of communication with patients and their relatives.
5. **When patients take medicine:**
- a. Doctors explain fully the reason of drug usage and its indications and write clearly drug's name in the prescription for patients or their relatives.
 - b. Nurses and Midwives provide instructions on drug's usage, precautions and warnings while undergoing treatment.
 - c. Nurses and Midwives should make public daily dosage and category of drug.

6. **In case of surgery or other operations, doctors and health workers should:**
 - a. Inform patients and their relatives in advance and provide them with guidance for necessary preparation.
 - b. Explain possible risks while undergoing surgery to patients and their relatives.
 - c. Ensure privacy and show respect to patients while undertaking operation.
 - d. Express sympathy and encouragement when patients are worried and painful.
 - e. In case of cancellation or postponement of operation, the reason must be clearly explained to patients or their relatives.

7. **When patients are discharged or transferred, doctors and health workers should:**
 - a. Inform patients of their discharge from hospital and prepare everything for them from the previous day. With regard to special cases, clear explanation should be made.
 - b. Fully explain to patients or their relatives every item of hospital bills that they have to pay.
 - c. Collect patients' comments or suggestions before they are discharged from hospital.
 - d. Advise patients what to do for their discharge.

8. **Ways of communication with patients' relatives and guests:**
 - a. Doctors in-charge inform patients' relatives of their for reference and coordination.
 - b. Doctors, Nurses and Midwives in-charge are responsible for explaining and encouraging patients' relatives if patients' status is going worse and share sadness with their relatives in case of death.
 - c. Every doctor and health worker when requested should stop to show the way to patients, their relatives or guests and are responsible for helping patients' relatives to find the place where patients are undergoing treatment (except emergency cases).
 - d. Every doctors and health workers must call and talk to patients' relatives and guest in a polite manner.

9. **For communication with colleagues, doctors and health workers should:**
 - a. Have responsibility in sharing information and offering fine coordination during the process of patients' treatment and care.
 - b. Respect and help without speaking ill of colleagues.
 - c. Call and talk to colleagues on the basis of office relationship such as title, occupations, age, etc...

10. Patients and their relatives should:

- a. Comply with regulations of medical examination and treatment facilities.
- b. Respect and communicate in a polite manner with doctors and health workers without reviling or insulting to their dignity and taking any armed action against them.
- c. Not make any suggestions or act as a go-between to offer doctors and health workers money for early service.

FOR THE MINISTER OF HEALTH

VICE MINISTER

Le Ngoc Trong

(signed and sealed)