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## **Worksheet – case studies - key**

### ✓ TOPIC : AVAILABILITY OF HEALTH CARE

A woman, a widow without a child, 45 years old, living with her partner in a family house in a village in Southern Bohemia, 20km from the regional town. At 22.00, the woman suddenly became nauseous, and the violent colic pain in her loins on her right, accompanied by nausea, began. After 30 minutes, the pain doesn't stop and becomes unbearable. Blood appears in her urine. A woman and her partner do not have a car and both are non-drivers. The closest relatives are 50km away.

### ✓ QUESTIONS AND ANSWERS

1. What health service can they use?

*The sick woman is a resident of the Czech Republic and therefore obliged by law to be insured. Due to the distance from the regional city and the inability to transport, the patient should call Quick emergency assistance. This service is contacted by telephone and is done by a doctor and rescuer, or by a rescue worker only, taking into account the severity of the case.*

2. On what phone number can this service be called in the Czech Republic?

*In the Czech Republic there is a national number of Quick emergency assistance 155. It is possible to call the international line 112 as well. The dispatching then contacts the closest service.*

3. What is the time availability of this service in the Czech Republic?

*Time of rescue service should be within 20 minutes from notifying.*



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#### 4. How much does the patient pay for this service?

*If the patient is a citizen of the Czech Republic and a compulsory insurance is properly paid (the card of the health insurance company and the identification card of the Czech citizen is required), the service is fully covered by the health insurance company.*

#### ✓ TOPIC : HOME CARE

84-year-old patient, a diabetic, living alone in a district town in a family house. He has been cured in hospital for pneumonia and decompensated diabetes mellitus. The patient has a chronic leg ulcer in the left lower extremity requiring daily care-wound dressing and healing. The patient has been transferred from oral antidiabetic to insulin in hospital. The effort of self-service training in the application has not yet been successful for the patient's poor vision. Total self-care is reduced, otherwise the patient is compensated. The physician is considering taking home treatment, but additional follow-up support services are needed to help the patient with self-help, especially with insulin training and chronic wound care on his leg.

#### ✓ QUESTIONS AND ANSWERS

##### 1. What kind of service can a doctor prescribe to a patient?

*The doctor can indicate home care as a follow-up health service.*

##### 2. Who provides this health care? What qualification does he/she need?

*Medicated home care is provided by Home care agencies. It is provided by registered nurses able to work without professional supervision.*



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### 3. How is this care paid?

*Home care indicated by a doctor is provided free of charge for Czech citizens.*

### 4. How often and to what extent can this care be provided?

*The scope of this care can be up to 3 visits a day for 24 hours.*

#### ✓ TOPIC : THE DAILY SCHEME IN INSTITUTIONAL CARE, PATIENT'S RIGHTS AND OBLIGATIONS

A 28-year-old man, hospitalized at the neurological department for his back pain. The patient is at the standard ward and has a quiet rest on the bed. But the patient is a strong smoker, so he goes several times a day to smoke out in front of the building or to the bathroom in the ward. He is not often in the room to receive infusion therapy, which he refuses, because he cannot go to smoke. Repeatedly, the patient gets his friends. They listen to loud music in the room and drink alcoholic beverages. He goes to sleep often long after midnight. He does not cooperate in the morning and refuses care.

#### ✓ QUESTIONS AND ANSWERS

1. Write down what rights and responsibilities the hospitalized patient has in hospital.



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## Patients' rights

- *The right to freely accept or refuse health services provided*
- *The right to professional health services*
- *The right to respect, dignity, and privacy*
- *The right to freely choose a provider*
- *The right to consult other services*
- *The right to information about the internal order of healthcare facilities*
- *The right of minors to the continuous presence of a legal guardian or persons appointed by the legal representative*
- *The right of a person with a limited right to a guardian's presence*
- *The right to the presence of a close person in accordance with the internal rules of the medical facility*
- *The right to advance information about the price for the provided health services*
- *The right to know the names and surnames of healthcare workers who are involved in healthcare*
- *The right to refuse the presence of persons not directly involved in attending care*
- *The right to protection of personal data and health information*
- *The right to receive visits to the healthcare facility with regard to their state of health, and in accordance with the internal rules of the facility*
- *The right to spiritual care and support*
- *The right of patients with sensory and heavy communication problems to services in a clear and appropriate way*
- *The right to information about your health*



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- *The right of legal representative to information about a minor patient*
- *The right to identify close persons who may be informed about a patient's state of health and who may look into his / her health documentation*
- *The right to make statements and copies of medical records*
- *Right to deny an operation or health care*

### *Obligations of patients*

- *The patient is required to follow the proposed treatment if he agrees*
- *The patient is required to adhere to the internal regulations of the particular medical facility*
- *The patient is obliged to reimburse the provider for the cost of the provided services not paid or partially covered by public insurance*
- *The patient is required to inform the health practitioner of his / her state of health, including infectious diseases*
- *The patient must not use alcohol or other addictive substances in a healthcare facility*

## 2. How the patient did not adapt to the daily mode?

*The patient did not follow the treatment regime indicated by a doctor – bed rest. He did not cooperate with the infusion (see the patient's obligations). He used alcohol and smoked in the hospital area. He violated the internal order of the hospital with his ruthless behavior.*



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3. Can the patient refuse hospital treatment, how does that work?

*The patient has the right to refuse the therapy or hospitalization. In this case the patient will sign so called negative reversal. The patient is advised of the risks and possible consequences of such a decision.*

### ✓ TOPIC : BIRTH AND CHILD CARE IN THE CZECH REPUBLIC

A young 32-year-old woman, in the 38th week of pregnancy. She is expecting her first child and is a supporter of an alternative way of life. She is a vegetarian. She would want a natural birth at home, in private with her dude and a friend, with relaxing music. She wants quiet and undisturbed environment during childbirth and in the first days after delivery. She plans to give birth to the baby in the bath. She would like to keep umbilical cord blood for the baby.

1. Is it possible to give birth in the Czech Republic in a domestic environment?

*Home births in the Czech Republic are not legal.*

2. What are the possibilities of alternative ways of giving birth in Czech health system?

*Women have the option of choosing a healthcare facility for childbirth with regard to the services they offer. These include alternative births such as births to water, various birth positions, the presence of a close relative, etc. Women also have the possibility to develop their birth plans before birth. The effort of the facility is to observe the requirements with*



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*regard to the course of childbirth, the condition of the mother and the baby as well.*

3. Which rooms are available to women - mothers in maternity hospitals in the Czech Republic? How are they paid?

*In Czech maternity hospitals, the so-called rooming-in system is common. After the birth, a baby is in the room with a mother. Most Czech maternity hospitals also offer above-standard accommodation. These are usually individual rooms for a mother with a baby and for close persons as well. Such an extra standard is usually provided with regard to availability at an additional cost.*

4. How is it with an accompanying person (boyfriend, husband etc.) during childbirth?

*A woman can take a close person to the birth, usually a husband, a sister, a friend, but also a “dula” (a non-professional who helps the mother meet the needs during childbirth).*

5. What about the collection of umbilical cord blood in the Czech Republic?

*A woman can decide whether she will donate umbilical cord blood or store umbilical cord blood for her own needs. This should be reported to the facility personnel before birth (not all facilities are capable of taking it). Storage is possible for 20 years and it can be extended. The cost of collecting and depositing umbilical cord blood is around CZK 40 000 (1 600 E).*



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A 30-year-old young woman, in the 40th week of pregnancy, arrives at hospital at the maternity ward for prenatal examination. She requires a doctor to induce childbirth and to perform a caesarean section in epidural anaesthesia. The reason is that she cannot tolerate pain. She is willing to pay any amount.

### ✓ QUESTIONS AND ANSWERS

1. Are induced births on demand possible in the Czech Republic?

*In the Czech Republic, for induction of birth must be a medical indication. Legally, such a birth cannot be indicated solely at the request of the mother. Induction is always judged and indicated by the doctor.*

2. Can a caesarean delivery be performed without a health indication in the Czech Republic?

*It is not legally possible in the Czech Republic to perform a caesarean section on the wishes of a mother, so it is not a matter of choice. Caesarean section can only be indicated for health reasons.*

3. If a medical caesarean section is indicated, how is it covered?

*The indicated caesarean section is fully covered by the insurance company.*

4. Can epidural anaesthesia be given in the Czech Republic for birth without health indication?

*Yes, you can apply for an epidural anaesthesia. If it is not made out of the health reasons, it is charged to the healthcare facility. If epidural anaesthesia is indicated, it is covered by health insurance.*





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## ✓ TOPIC : DEATH, EUTHANASIA

A 54-year-old patient with pancreatic tumors with infarcted prognosis, resistant to chemotherapy. Hospitalized to the Department of Oncology. Only treated symptomatically - pain, nutrition. The family is interested in being close to a patient and in the last few moments to say goodbye to her. The woman is exhausted, asks the doctor for the end of her life.

## ✓ QUESTIONS AND ANSWERS

1. Is assisted suicide or euthanasia possible in the Czech Republic?

*No, assisted suicide or euthanasia is not legal in the Czech Republic.*

2. What care is available and where can a patient live with dignity in a family surrounding?

*There are hospice services in the Czech Republic for infaust prognostic patients.*

*Hospices are facilities providing palliative care with the possibility of accommodating the client and the family or close persons. There is also so-called mobile hospice service, which provides a visiting service in case the patient is living in home environment. In both cases, it is palliative care, maintaining the client's quality of life, meeting his needs and enabling a dignified and peaceful life. Hospice care is indicated by a doctor and paid in the Czech Republic by health insurance company.*