

1.1.4 Patient Responsibilities

Successful medical care requires ongoing collaboration between patients and physicians. Their partnership requires both individuals to take an active role in the healing process.

Autonomous, competent patients control the decisions that direct their health care. With that exercise of self-governance and choice comes a number of responsibilities. Patients contribute to the collaborative effort when they:

- (a) Are truthful and forthcoming with their physicians and strive to express their concerns clearly. Physicians likewise should encourage patients to raise questions or concerns.
- (b) Provide as complete a medical history as they can, including providing information about past illnesses, medications, hospitalizations, family history of illness, and other matters relating to present health.
- (c) Cooperate with agreed-on treatment plans. Since adhering to treatment is often essential to public and individual safety, patients should disclose whether they have or have not followed the agreed-on plan and indicate when they would like to reconsider the plan.
- (d) Accept care from medical students, residents, and other trainees under appropriate supervision. Participation in medical education is to the mutual benefit of patients and the health care system; nonetheless, patients' (or surrogates') refusal of care by a trainee should be respected in keeping with ethics guidance.
- (e) Meet their financial responsibilities with regard to medical care or discuss financial hardships with their physicians. Patients should be aware of costs associated with using a limited resource like health care and try to use medical resources judiciously.
- (f) Recognize that a healthy lifestyle can often prevent or mitigate illness and take responsibility to follow preventive measures and adopt health-enhancing behaviors.
- (g) Be aware of and refrain from behavior that unreasonably places the health of others at risk. They should ask about what they can do to prevent transmission of infectious disease.
- (h) Refrain from being disruptive in the clinical setting.
- (i) Not knowingly initiate or participate in medical fraud.
- (j) Report illegal or unethical behavior by physicians or other health care professionals to the appropriate medical societies, licensing boards, or law enforcement authorities.

AMA Principles of Medical Ethics: I,IV,VI

Background report(s):

CEJA 3-A-16 Modernized *Code of Medical Ethics*

CEJA A-A-93 Patient Responsibilities

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- (h) *Refrain from being disruptive in the clinical setting. [New content consistent with Opinion 1.2.2.]*
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BACKGROUND

It has long been recognized that successful medical care requires an ongoing collaborative effort between patients and physicians.^{1,3} Physician and patient are bound in a partnership that requires both individuals to take an active role in the healing process. Such a partnership does not imply that both partners have identical responsibilities or equal power. Physicians are in a position to use their training and expertise to relieve pain and suffering. While physicians have the responsibility to provide health care services to patients to the best of their ability, patients have the responsibility to communicate openly, to participate in decisions about the diagnostic and treatment recommendations, and to comply with the agreed upon therapeutic program.

Like patients' rights, patients' responsibilities are derived from the principle of autonomy. The principle of patient autonomy holds that an individual's physical, emotional, and psychological integrity should be respected and upheld.⁴ This principle also recognizes the human capacity to self-govern and choose a course of action from among reasonable options. Autonomous, competent patients assert some control over the decisions which direct their health care. With that exercise of self-governance and free choice comes a number of responsibilities.

- 1) Good communication is essential to a successful physician-patient relationship. To the extent possible, patients have a responsibility to express their concerns clearly to their physicians and be honest.
- 2) Patients have a responsibility to provide a complete medical history, to the extent possible, including information about past illnesses, medications, hospitalizations, family history of illness and other matters relating to present health.
- 3) In addition to explaining known medical background to their physician, patients have a responsibility to request information or clarification about their health status or treatment when they do not fully understand what has been described.
- 4) Once patients and physicians agree upon the goals of therapy, patients have a responsibility to cooperate with the treatment plan. Compliance with physician instructions is often essential to public and individual safety. Patients also have a responsibility to disclose whether previously agreed upon treatments are being followed and to indicate when they would like to reconsider the treatment plan.
- 5) Patients generally have a responsibility to meet their financial obligations with regard to medical care or to discuss financial hardships with their physicians. Patients should be cognizant of the costs associated with using a limited resource like health care and try to use medical resources judiciously.
- 6) Patients should discuss end of life decisions with their physicians and make their wishes known. Such a discussion might also include writing an advanced directive.
- 7) Patients should be committed to health maintenance through health-enhancing behavior. Illness can often be prevented by a healthy lifestyle, and patients must take personal responsibility when they are able to avert the development of disease.

8) Patients should also have an active interest in the effects of their conduct on others and refrain from behavior that unreasonably places the health of others at risk. Patients should inquire as to the means and likelihood of infectious disease transmission and act upon that information which can best prevent further transmission.

9) Patients should discuss organ donation with their physicians and make applicable provisions. Patients who are part of an organ allocation system and await needed treatment or transplant should not try to go outside or manipulate the system. A fair system of allocation should be answered with public trust and an awareness of limited resources.

10) Patients should not initiate or participate in fraudulent health care, and should report illegal or unethical behavior to the appropriate law enforcement authorities, licensing boards, or medical societies.

REFERENCES

1. Fundamental elements of the patient-physician relationship. *Current Opinions of the Council on Ethical and Judicial Affairs of the American Medical Association*. Chicago, IL: AMA 1992.
2. Meyer MJ. Patients' duties. *The Journal of Medicine and Philosophy*. 1992;17:541-555.
3. A Patient's Bill of Rights, American Hospital Association.
4. Beauchamp TL., Childress JF. Chapter 3, The principle of respect for autonomy. *Principles of Biomedical Ethics*. New York, NY: Oxford University Press; 1989.