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RESEARCH ARTICLE

ASSESSING PATIENT AWARENESS OF RIGHTS AND HEALTHCARE INFORMATION: A CROSS-SECTIONAL STUDY AT JMF'S ACPM MEDICAL COLLEGE DHULE

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Abstract

Background:- Patient rights are fundamental in healthcare to ensure ethical treatment and informed decision-making. Despite legal frameworks promoting patient rights in India, awareness remains limited, especially in rural areas. This study assesses patient awareness regarding their rights, treatment costs, and healthcare information at JMF's ACPM Medical College Dhule.

Methods:- A cross-sectional study was conducted at JMF's ACPM Medical College Dhule. A total of 84 patients from different outpatient departments were surveyed using a structured questionnaire. Data were collected anonymously, ensuring confidentiality.

Results:- Findings indicate that a significant proportion of patients lacked awareness about their healthcare rights. In our study, 72.6% of patients did not know their doctor's name, and 83.3% were unaware of their doctor's qualifications. Additionally, 73.8% of patients did not know the expected cost of their treatment. Alarming, 89.3% of patients were unaware of their own health condition, and 85.7% had never seen a patient rights board displayed in the hospital. These findings highlight the need for improved patient education and transparent communication in healthcare settings.

Conclusions:- The study highlights a significant gap in patient awareness regarding their rights and healthcare costs. Targeted educational interventions and improved communication between healthcare providers and patients are needed to bridge this knowledge gap.

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Introduction:-

Informed patients play a crucial role in ensuring ethical and effective healthcare delivery. The concept of patient rights is fundamental in modern medicine, promoting transparency, informed decision-making, and equitable treatment. Globally, healthcare policies emphasize the protection of these rights, with organizations such as the World Health Organization (WHO) advocating for patient empowerment and legal safeguards¹.

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In India, patient rights are legally protected through various frameworks, including Article 21 of the Indian Constitution, which guarantees the right to life and personal liberty², the Consumer Protection Act, and the Medical Council of India (MCI) Regulations, 2002. Additionally, the MOHFW Patients' Rights Act (2018) outlines key rights such as access to medical records, informed consent, confidentiality, and non-discrimination³. Despite these regulations, studies suggest that public awareness of patient rights remains alarmingly low, particularly in rural areas.

The present study aims to assess the level of awareness among patients at JMF's ACPM Medical College Dhule regarding their rights, treatment costs, and access to healthcare information. By identifying key areas where awareness is lacking, this study seeks to highlight the need for improved patient education programs, better hospital communication strategies, and stronger policy implementation.

METHODS:-

Study design

This was a cross-sectional study

Study population

The study population consisted of patients seeking healthcare services at Outpatient Department at JMF's (OPD) ACPM Medical College.

Study duration

The study was conducted over a period of 6 months (15 March 2024 to 13 September 2024).

Study flow

literature review - 1 month

Synopsis and study tool preparation - 1 month

Ethical approval - 1 month

Data collection- 2 months

Data analysis and report-1 month

Inclusion criteria

Participants were eligible for inclusion if they met the following criteria:

- Aged 18 years or older
- Receiving healthcare services at JMF's ACPM Medical College
- Provided informed consent to participate in the study

Exclusion criteria - those who did not respond to more than 5 questions*

Sampling technique

A systematic random sampling technique was used. Patients present in the hospital during the study period were invited to participate, ensuring a diverse sample from medicine and allied as well as surgery and allied departments

Sample size -

$$n = \frac{z^2 p(1-p)}{d^2}$$

-n = Required sample size

-z = confidence interval

-d = margin of error

-p = Estimated proportion

p value is considered 22.9% after referring study done in Tertiary care teaching hospital in Wardha⁴.

84 subjects enrolled

Sampling interval = study population/ sample size

300/84

= 3.54 (approximated to 4)

First subject randomly selected using random numbers between 1 to 5 . Then every 4th subject was enrolled in the study

Study instruments

A modified pre validated structured questionnaire by NABH (National Accredited Board of Hospitals) with 23 questions was used to assess patient awareness of their rights and healthcare information.

Data collection

Participants were approached in hospital settings during OPD hours (8am -1 pm) after their consultation with doctor and informed consent was obtained before data collection.

Privacy and confidentiality was maintained by interviewing them separately in injection waiting room. The questionnaire was administered through face-to-face interviews, especially for participants with limited literacy.

Measurement of variables

The knowledge level of patients was assessed by requesting respondents to answer questions about their knowledge of doctor information, treatment costs, health conditions, and patient rights.

Data analysis

Descriptive statistics were utilized, and the analysis was conducted using Excel.

Ethical consideration

Ethical clearance was obtained from the Ethical Committee of JMF'S ACPM Medical College, Dhule, Maharashtra, India.

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RESULTS:-

In a survey of 84 patients, significant gaps in awareness regarding their healthcare and rights were observed. While 23 patients (27.4%) knew their doctor's name, the remaining 61 (72.6%) were unaware. Similarly, only 14 (16.7%) recognized their doctor's qualifications, whereas 70 (83.3%) lacked this knowledge.

Financial awareness was also limited. Just 22 patients (26.2%) knew the expected cost of their treatment, leaving 62 (73.8%) without this information. Awareness of personal health conditions was particularly low, with only 9 patients (10.7%) demonstrating adequate knowledge, compared to 75 (89.3%) who lacked understanding. Additionally, 17 patients (20.2%) had a choice in selecting their treatment, while 67 (79.8%) had no involvement in the decision-making process. Information about treatment and care plans reached 22 patients (26.2%), whereas 62 (73.8%) remained uninformed. Awareness of possible treatment complications was similar, with 22 patients (26.2%) informed and 62 (73.8%) unaware. However, knowledge of health prognosis was relatively higher, as 59 patients (70.2%) understood their condition, while 25 (29.8%) lacked awareness.

Regarding patient rights, only 12 patients (14.3%) had seen a patient rights board displayed in the hospital, while 72 (85.7%) had never noticed it. Awareness of the right to confidentiality was even lower, with just 11 patients (13.1%) informed, leaving 73 (86.9%) unaware. Patient feedback collection was inadequate, as only 12 patients (14.6%) were asked for feedback, whereas 70 (85.4%) were never approached, and 2 did not respond.

Financial transparency also showed deficiencies. Out of 83 patients, 14 (16.87%) received information about inpatient charges, while 69 (83.13%) remained uninformed, with one patient not responding. Similarly, 10 patients (11.9%) were aware of deposit charges, compared to 74 (88.1%) who lacked this knowledge. Awareness of insurance coverage was particularly low, with only 7 patients (8.3%) having insurance for their treatment, while 77 (91.7%) had none. Government healthcare schemes such as Ayushman Bharat were known to 22 patients (26.2%), whereas 62 (73.8%) were unfamiliar with these options.

Awareness of medication and hospital facilities varied. While 27 patients (32.1%) knew the medications administered to them, 57 (67.9%) remained uninformed. Infection control awareness was also lacking, with only 22 patients (26.2%) aware of healthcare-associated infections and precautions, while 62 (73.8%) had

no information on this aspect. Nutritional guidance, however, was more widely provided, with 68 patients (81.93%) receiving dietary counseling, while 15 (18.07%) did not, and one patient did not respond.

Patients were distributed across various medical departments: 30 in Medicine & Allied specialties (including Dermatology), 19 in Obstetrics & Gynecology, 25 in Surgery & Allied specialties (including Orthopedics, ENT, Ophthalmology, and General Surgery), and 10 in Pediatrics. The time taken to receive healthcare services after registration varied: 59 patients (71.1%) were attended to within 10 minutes, 19 (22.9%) within 10 to 30 minutes, 4 (4.8%) within 30 to 60 minutes, and 2 (2.4%) waited for more than an hour.

Access to supportive healthcare services was also found to be limited. Among 83 patients, 24 (28.92%) reported easy access to a medical social worker, while 59 (71.08%) did not, with one patient not responding. Additionally, 73 patients (86.9%) had their relatives present during hospital visits, whereas 11 (13.1%) were without this support. Awareness of hospital Facilities such as the canteen, washrooms, and a kids' play area was high, with 78 patients (92.9%) familiar with these amenities, while 6 (7.1%) were unaware.

These findings highlight the need for better patient education and communication regarding essential healthcare information and patient rights. Strengthening these areas can enhance patient experiences and empower individuals to make informed healthcare decisions.

DISCUSSION:-

Patient awareness regarding their healthcare rights and medical information is crucial for ensuring informed decision-making and better healthcare outcomes. Our study assessed the level of awareness among patients regarding various aspects of their medical care, including knowledge of their doctor's identity, qualifications, treatment plans, costs, and rights. The findings revealed significant gaps in patient awareness, which align with or contrast against existing literature.

Doctor-Related Awareness

Our study found that only 27.4% of patients knew their doctor's name, which is significantly lower than the 97.4% reported in a tertiary care hospital⁵ and the 95.9% found in a study specifically assessing patient awareness of their treating physician⁶. However, our findings align more closely with research conducted in an emergency department, where only 26% of patients could recognize their doctor⁷. Similarly, awareness of a doctor's qualifications was low (16.7%) in our study, whereas studies conducted in tertiary hospitals reported higher recognition rates of 31.4%⁵ and 48.6% in an inpatient setting⁸, indicating a significant disparity in patient awareness depending on the healthcare setting.

Treatment Cost and Financial Awareness

Understanding the financial aspects of treatment is crucial, yet only 73.8% of patients in our study were aware of their expected expenses. This level of awareness is much higher than what was observed among cancer patients in a previous study, where only 7.5% knew their costs⁹, highlighting the variation in awareness depending on the type of illness. Additionally, knowledge of inpatient charges (16.9%) and deposit charges (11.9%) was particularly low compared to studies conducted in settings where more than 80% of patients were informed⁵.

Health Condition, Treatment Choices, and Patient Rights

In our study, 89.3% of patients were aware of their health condition, which is comparable to the 85.7% reported in tertiary care hospitals⁵. However, this is still significantly higher than the awareness levels found in studies conducted in Iran (60.3%)¹⁰ and Ethiopia (61.8%)¹¹, suggesting that awareness of one's diagnosis varies across regions and healthcare systems.

When it came to choosing their treatment, only 20.7% of our respondents felt they had a say in their medical decisions. In contrast, international studies have reported greater autonomy, with patient involvement rates ranging from 37% in a study in Lithuania¹² to 51% in a descriptive study¹³. This reflects differences in patient empowerment and shared decision-making across various healthcare settings.

One of the most concerning findings was the lack of awareness regarding patient rights. Only 13.3% of patients in our study knew about their right to confidentiality, a figure much lower than the 69% awareness level reported in a study from Saudi Arabia¹⁴. Similarly, awareness of patient rights boards was minimal, with only 14.3% of patients knowing about such resources, compared to 54.3% in studies conducted in tertiary hospitals⁵. This indicates a significant gap in patient education regarding their rights.

Understanding Treatment Plans and Prognosis

Patient involvement in treatment planning was found to be lacking, with 73.5% of patients in our study stating they were not informed about their plan of care. This figure is notably higher than the 52.8%–53% of uninformed patients reported in studies from Ethiopia¹¹ and Saudi Arabia¹⁴, suggesting a need for better communication between healthcare providers and patients.

Additionally, only 26.2% of patients in our study were aware of possible treatment complications. In contrast, previous research has reported much higher awareness levels, reaching up to 76.6%¹⁴, demonstrating a disparity in how well patients are informed about potential risks. Awareness of prognosis was moderate, with 70.2% of patients in our study having some understanding of their condition's outlook. This is similar to Ethiopia's reported 68.4%¹¹ but lower than the 87.7% awareness level observed in tertiary hospitals⁵, again pointing to differences in patient education across healthcare settings.

Healthcare Infections and Preventive Measures

Hospital-acquired infections are a significant concern, yet only 23.6% of patients in our study were informed about healthcare-associated infections (HAIs) and their prevention.

Awareness levels in previous studies have varied, with research in tertiary hospitals reporting 37.7% awareness⁵ and other settings showing figures as high as 68.7%¹⁵. Our findings align with studies on surgical patients, where awareness of nosocomial infections was found to be as low as 26%¹⁶, suggesting that information on infection control may not always be effectively communicated to patients.

Dietary Counseling and Feedback Mechanisms

One positive finding in our study was that 81.9% of patients reported receiving dietary counseling, a significantly higher rate than the 37.7% reported in tertiary hospitals⁵. This suggests that nutritional guidance is being emphasized more in our setting.

However, very few patients (12.2%) were asked to provide feedback regarding their treatment, a stark contrast to previous studies in tertiary hospitals (52.3%)⁵ and the 62.6% of patients in primary healthcare centers in Riyadh, Saudi Arabia¹⁷, who were given the opportunity to share their experiences. This highlights an area where patient engagement could be significantly improved.

Conclusion:

The study reveals a significant gap in patient awareness regarding their rights and healthcare costs. To address this issue, targeted educational interventions and improved communication between healthcare providers and patients are necessary to bridge the knowledge gap.

Recommendations:

- Implementing educational programs to enhance patient awareness about their rights.
- Strengthening communication strategies between healthcare providers and patients.
- Introducing policies that ensure transparency in treatment costs and patient rights.
- Conducting further research to evaluate the impact of awareness initiatives.
- Patient's right chart should be displayed at various locations in hospital.

Limitations of study

Longitudinal and prospective analytical studies are recommended to strengthen the findings from our study with increasing sample size.

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DECLARATIONS:-

Funding: No external funding was received for this study.

Conflict of Interest: The authors declare no conflict of interest.

Ethical Approval: The study was conducted following ethical guidelines, and informed consent was obtained from all participants.

TABLE 1:

AWARENESS OF HEALTHCARE RIGHTS, TREATMENT INFORMATION, AND ACCESS AMONG PATIENTS

Variables	Yes - Frequency (%)	No - Frequency (%)	Total (N)
Patients who know their doctor's name	23 (27.4)	61 (72.6)	84
Patients who know their doctor's qualification	14 (16.7)	70 (83.3)	84
Patients who know the expected cost of their treatment	22 (26.2)	62 (73.8)	84
Patients who know their own health condition	9 (10.7)	75 (89.3)	84
Patients who get to choose their treatment	17 (19.3)	67 (80.7)	84
Patients informed about their treatment and care plan	22 (26.5)	62 (73.5)	84
Patients who know the complications of their treatment	22 (26.2)	62 (73.8)	84
Patients who know their health prognosis	59 (70.2)	25 (29.8)	84
Patients who saw the patient rights board displayed	12 (14.3)	72 (85.7)	84
Patients who know about their right to confidentiality and patient information	11 (13.3)	73 (86.7)	84
Patients asked to give feedback or complaints (N=82)	11 (13.4)	71 (87.8)	82
Patients informed about inpatient charges (N=83)	14 (16.9)	69 (83.1)	83
Patients informed about deposit charges	10 (11.9)	74 (88.1)	84
Patients with insurance to cover treatment costs	7 (8.3)	77 (91.7)	84
Patients aware of government schemes (e.g., Ayushman Bharat)	22 (26.2)	62 (73.8)	84
Patients who know about medication administered to them	27 (32.1)	57 (67.9)	84
Patients informed about healthcare infections and precautions	22 (25.6)	62 (74.4)	84
Patients counseled regarding diet (N=83)	68 (81.9)	15 (18.1)	83
Patients with easy access to a medical social worker if required (N=83)	24 (28.9)	59 (71.1)	83

Patients' relatives permitted to be present during visit	73 (86.9)	11 (13.1)	84
Patients aware of hospital facilities (canteen, washroom, kids' play area)	78 (92.9)	6 (7.1)	84

Table 2:

Socio-Demographic Characteristics of Patients

Characteristics	Total (n=84)	Frequency	Percentage (%)
Sex			
Male	84	28	33.3%
Female	84	56	66.7%
Age Group			
18-30	84	32	38.1%
30-45	84	34	40.5%
>45	84	18	21.4%
Education			
Primary and below	84	29	34.5%
Secondary	84	42	50.0%
Higher	84	13	15.5%

REFERENCES:-

1. World Health Organization. Patient safety rights charter. World Health Organization; 2024 Apr 16.
2. Government of India. Constitution of India – Article 21: Protection of life and personal liberty [Internet]. Indian Kanoon; 2025. Available from: <https://indiankanoon.org/doc/1199182/>. Accessed on 9 April 2025.
3. Yasmeen, Afshan (10 September 2018). "Draft Charter of Patients' Rights released". The Hindu. Retrieved 11 August 2021.
4. Waghmare R, Joshi S, Muntode P. Patient's rights-awareness among indoor patients of a tertiary care teaching hospital in Wardha. J Evolution Med Dent Sci. 2020;9(8):570-.
5. Mohammed ES, Seedhom AE, Gy ER. Awareness and practice of patient rights from a patient perspective: an insight from Upper Egypt. International Journal for Quality in Health Care. 2018 Mar 1;30(2):145-51.
6. Parsons SR, Hughes AJ, Friedman ND. 'Please don't call me Mister': patient preferences of how they are addressed and their knowledge of their treating medical team in an Australian hospital. BMJ open. 2016 Jan 1;6(1):e008473.
7. Holmes CT, Huggins C, Knowles H, Swoboda TK, Kirby R, Alanis N, Bulga A, Schrader CD, Dunn C, Wang H. The Association of Name Recognition, Empathy Perception, and Satisfaction With Resident Physicians' Care Amongst Patients in an Academic Emergency Department. Journal of Clinical Medicine Research. 2023 Apr 28;15(4):225.
8. Toole J, Kohansieh M, Khan U, Romero S, Ghali M, Zeltser R, Makaryus AN. Does your patient understand their treatment plan? Factors affecting patient understanding of their medical care treatment plan in the inpatient setting. Journal of Patient Experience. 2020 Dec;7(6):1151-7.
9. Baral S, Silwal SR, Lamichhane D, Adhikari A, Bhattarai N. Understanding of disease status, prognosis and estimated cost of treatment among cancer patients: experience from a tertiary cancer centre in Nepal. Ecancermedicalscience. 2024 Feb 13;18:1668.
10. SAMIMI AS, FARIDHOSSEINI F, Shirkhani F, Karamad A, Farid L, FAYYAZI BM, MOTLAGH A. Do Cancer Patients Prefer to Know the Diagnosis? A Descriptive Study Among Iranian Patients.
11. Teklu AM, Abraha M, Legesse T, Bekele M, Getachew A, Aseffa B, Molla M, Belachew F, Haregu TN. Awareness of diagnosis, treatment plan and prognosis among patients attending public hospitals and health centers in Addis Ababa, Ethiopia. PloS one. 2022 Jun 23;17(6):e0270397.
12. Ducinskiene D, Vladickiene J, Kalediene R, Haapala I. Awareness and practice of patient's rights law in Lithuania. BMC international health and human rights. 2006 Dec;6:1-6.
13. Stacey D, Paquet L, Samant R. Exploring cancer treatment decision-making by patients: a descriptive study. Current Oncology. 2010 Aug;17(4):85.

14. Madadin M, Menezes RG, Almazrue AA, Alzahrani BA, Alassaf MA, Al-Hwiesh AK, Usman MS. Patients' awareness of their rights: An insight from a teaching hospital in Saudi Arabia. *Acta Bio Medica: Atenei Parmensis*. 2023 Apr 24;94(2):e2023059.
15. Sahiner P. What do patients know about healthcare-associated infections? What do they want to know? Ethical evaluation. *Revista da Associação Médica Brasileira*. 2023 Aug 14;69:e20230292.
16. Merle VV, Van Rossem V, Tavalacci MP, Czernichow P. Knowledge and opinions of surgical patients regarding nosocomial infections. *Journal of Hospital Infection*. 2005 Jun 1;60(2):169-71.
17. Al-Rebdi M, Rabbani U, Alqahtani SM, Alqahtani S. Are patients aware of their rights? A cross-sectional study of visitors to three primary healthcare centers in Riyadh, Saudi Arabia. *Cureus*. 2021 Nov 5;13(11)