

Journal of Patient Care

ISSN: 2573-4598

Right to Information and its Impact on Health

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DESCRIPTION

Patient care entails the preventive, diagnosis, and administration of disease as well as the maintenance of cognitive and psychosocial well-being through the use of health-care professionals' services. Patient care is described as activities provided by health practitioners to patients or non-professionals under their supervision. Whether healthy or sick, a patient is a user of health-care services. A patient has access to all of their human rights. Patients' dignity and autonomy, as well as their right to participate in health-care decisions, their right to informed consent, their ability to refuse medical treatment, and their right to confidentiality and privacy, must all be respected by health-care providers. Every medical insurance company's attention, treatment, and care for a patient must respect the human rights of each of his or her patient. As an example, As medicine advances, clinicians and patients must collaborate to make diagnostic and treatment decisions, for example. Inequality and prejudice can arise as a result of financial and quality difficulties in health care delivery. The social determinants of health, which blur the borders between traditional medicine and a broader idea of health, as well as the interdependence of the right to health and the fulfillment of all human rights, need to be better understood. A human rights-based approach examines these aspects of patient care, among others, using the human rights framework.

The Right to Information Act of 2005 (RTI Act) is intended to provide for the establishment of a practical regime of right to information for citizens to secure access to information under the control of public authorities in order to promote transparency and accountability in the workings of all public authorities, the establishment of a central information commission and state information commission, and other matters connected with or incidental to the RTI Act. Patients are frequently uninformed of their rights, which include the right to information about their illness and access to their medical data. Patients' rights regulations had been heard of or read about by 85 percent of the staff and 56 percent of the patients surveyed in a research done in four Lithuanian hospitals. Furthermore, only 50% of exports and 69 percent of patients agreed that patients need to know about their prognosis, treatment outcomes, and additional therapeutic options. Another survey in Macedonia indicated that while 82 percent of respondents agreed that patients have rights, 56 percent were unaware of those rights. Patients have a right to know about their health, treatment options, and consistently established, as well as the anticipated benefits and hazards of recommended therapy and nontreatment. Patients are also entitled to see their health records and health information.

Patients who are ruled legally incapable to decide on their own behalf, including granting educated written consent, may be considered legally incompetent. Patients who are declared legally incompetent include those who are unconscious, minors, those who are experiencing confusion or other altered mental states (including the elderly), those who are under the influence of sleeping pills or other drugs that affect alertness and cognition, and, on rare occasions, people with disabilities, depending on their perceived impairment. The right to health information confidentiality should not conflict with the right to access private health information.

While a holder of private health information should not share such information with anybody who is not necessary to provide health care to the individual, the holder must give the individual access to that information. Whilst the bearer of patient records should be prevented from sharing such information with anybody who is not necessary to provide the individual with health care, the bearer needs to provide the individual with access to their personal health information upon request. Patients have had the right to access their own health information, to choose how that information is shared with them (for example, by specifying who should receive letters or telephone conversations), and to authorize the dissemination of that information when desired. In order to protect the rights of patients, the right to secrecy of private health information, as well as the right to access private health information, should be upheld and not jeopardized.

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Received: 26-Apr-2022, Manuscript No. JPC-22-17072; **Editor assigned:** 29-Apr-2022, Pre QC No. JPC-22-17072(PQ); **Reviewed:** 16-May-2022, QC No. JPC-22-17072; **Revised:** 23-May-2022, Manuscript No. JPC-22-17072(R); **Published:** 31-May-2022, DOI: 10.35248/2573-4598.22.8.189.

Citation: Tandon R (2022) Right to Information and its Impact on Health. J Pat Care.8:189.

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