PATIENT’S ADVISOR
Handbook for Patient Safety Improvement
Dear Fellow Citizens,

The Patient’s Advisor, which received such a favourable response on the part of the public, is now already being issued in a second edition. I am delighted that you are interested in better understanding the overall healthcare system and the essential role that you play in it. In this new edition we have made important updates to the information and advice provided and we have added a list of contacts for patient organisations that is located at the conclusion of the brochure. As in the first issue, you will find here information about what your entitlements are, as a patient, in relation to public health insurance, about how to protect your rights in your dealings with the health services and, on the other hand, what your obligations are and more. There are many important tips here that can significantly improve your safety in healthcare facilities, together with information concerning certain preventive programmes and about the long-term strategies of the Ministry of Health of the CR that may be of direct practical significance for you individually.

I strongly anticipate that this Advisor will meet its purposes and will be of assistance, not only for members of the public in their daily effort to maintain their health, but also for professional healthcare staff.

I wish good health to all its readers, towards achieving which, I believe, its simple perusal may also be of assistance.

Leoš Heger
Minister of Health of the CR
We feel safe when we are in a familiar environment where there is no threat of harm to us, where we understand our neighbourhood and it supports us.

Is this the feeling that you have when you are in a medical facility? If the answer is no, ask yourself another question immediately: "Is there some way in which I can influence how I feel there?" The correct answer to this is "Yes, I can influence it greatly!"

We generally do not arrive at a medical facility in such a great mood. We are not feeling well, we are having problems, in pain, worried. Frequently, however, by becoming better informed, being aware of what is happening to us, which decisions we have the freedom to make and by understanding what we are agreeing to, we ourselves will be able and know how to check, and to help to ensure, that the help that we receive from healthcare professionals is really effective and safe.

Studies from Other Countries indicate that:
Up to 10% of patients experience some level of damage to their health while they are hospitalised!
TEN KEY PRINCIPLES IN REGARD TO PATIENT SAFETY

1. IDENTIFICATION

Healthcare personnel always attempt to provide the best care that they can for each individual patient. It is still possible however that some confusion of identity could occur. Risks of this nature can be prevented by the use of identification bracelets, by marking the location on the patient's body where the operation is to take place prior to surgery and employing additional safety strategies. A conscious patient should be permitted to check that s/he is the intended target of the planned activity (e.g. examination, administration of medication).

Regularly confirm your identity on every occasion that you are certain that you are being correctly identified in the case of the administration of medication, the issuing of a prescription and when undergoing any examination or other procedure. In the case of general anaesthesia request assurance that the staff are certain of both your identity and what kind of operation you are scheduled to undergo. Ask about the specific methods employed in the hospital for preventing any such confusion. Be especially careful in situations in which temporary care is being provided for you by an individual with whom you are not familiar. If you have any allergies to medications or to foods communicate this information repeatedly to the healthcare staff and check whether they have made the appropriate notations in your medical records.
2. KNOW YOURSELF

The medical staff will ask you about your health, what kind of illnesses and/or surgery or testing you have undergone, which illnesses have occurred in your family, which of your closest family members (i.e., parents, siblings, grandparents) has had, for example, high blood pressure, a heart attack or a stroke, or is experiencing cancer.

Be prepared for these questions; you can also make notes on page 23 of this document.

3. PROVIDE INFORMATION WHENEVER IT IS NEEDED

Report any noticeable changes or discomfort; do not be afraid to ask for help. If you have any restrictions or problems that the healthcare staff should be aware of (e.g., allergies, pain, fainting, visual or hearing impairment, dietary requirements, a pacemaker, etc.) be sure to point out these factors yourself, proactively.

4. FOLLOW THE RULES OF THE GAME

The main objective of the healthcare staff is your recovery. All their activities and recommendations are directed towards ensuring that you should feel safe in the healthcare facility and that you should be spared from having unnecessary distractions around you. It is therefore desirable to follow the house rules that have been drawn up for this purpose. The rules are usually visibly posted in the wards or in the waiting rooms for ambulances.

If you are unable to find the operational rules or the house rules ask the staff for them. Usually they are made available on admission to the hospital, at which time the patient signs his/her agreement to be bound by them. They concern, for example, the schedule for visits, smoking, specific restrictions and recommendations. If you have any individual personal requirements, you should consult the staff concerning them. Certain requirements, such as punctuality when you have a specific appointment time or, conversely, patience while waiting in the medical office, cannot be enforced. Adherence to them is therefore left up to you.

5. DO NOT HESITATE TO ASK

Silence never pays! Do not be afraid to ask – especially if it is about your health! You have the right to obtain comprehensive information. Amongst other factors, you will also be helping the medical staff by reminding them, should someone have forgotten some detail. Ask questions whenever something is unclear to you, especially if you are having to make a decision concerning surgery or any other demanding procedure.
Hygiene plays an especially important role in healthcare facilities because hospital infections represent one of the most common complications occurring in the course of the delivery of healthcare. This involves not just perfect clean-hands hygiene but also the replacement of gloves, of the pads on examination chairs and linens and the utilisation of single-use medical supplies.

Be observant as to whether staff that are treating you respect their obligation to disinfect their hands on each occasion that they touch you and whether they change their gloves prior to embarking on any kind of care with the next patient. You should also be careful in the healthcare facility in regard to hygiene. Take frequent showers (provided that your health condition permits you to) and also wash your hands often.

See also the Section: Hygiene and dangers of infection in hospital
8. MAKE NOTES

It frequently occurs that during conversations with the doctor the patient does not remember every important detail. Especially when the patient has an extensive medical record, remembering the history of all the problems and the illnesses, the dates of the operations and the medications prescribed can be very taxing.

It is therefore helpful to prepare notes in advance, detailing all the information that you would like to provide for your doctor and then to also take notes during the conversation with the doctor, especially if s/he is providing you with information concerning things that you should do, where to go for testing, what to eat, what to not eat, etc. You will find the relevant form templates on pages 26 to 28.

9. BRING A SUPPORT PERSON WITH YOU

The patient often feels greater security, if s/he is accompanied by a person whom s/he trusts, whether it be a close relative or a loved-one.

You have the right for an accompanying person to be present during the carrying-out of all procedures, apart from those that might cause some threat to health or for which hygiene requirement do not permit it (e.g. X-rays, the operating theatre). Your support person may also accompany you to the medical office and also talk to your doctor, either on your behalf or accompanying you.

10. DO NOT WORRY

Sometimes it is difficult to ask for and sometimes it is difficult to convey certain specific kinds of information. By pro-actively approaching the healthcare services the patient can not only help himself/herself but will also assist the medical personnel. Nothing is of greater value than human health, it is therefore entirely appropriate to ask, to request, to check.

Do not be worried about asking the staff whenever you need something. Also any worsening of a health problem should be reported immediately. It is essential that the doctor should know about any medicines that you are taking, even about those that have been “self-prescribed”. You should also feel free to disclose any relevant information, even that which you may not feel so ready to confer willingly. Remember that the doctor is not your judge. If you conceal those of your indulgences that negatively affect your health, such as smoking, the over-consumption of alcohol, etc., the doctor will not be able to accurately focus on either your examination nor your treatment plan. The doctor works with the information that you provide him/her and then builds on that. And it is literally true that you cannot build a solid structure on weak foundations...
The doctor is obliged to inform you concerning every detail that relates to your health. S/he must provide you with clear information about the results of your examination, about optional treatments and the prognosis for your condition. You have the right, at the time of your registration for the provision of healthcare - or at any time subsequently - to also designate a person or persons to whom information concerning your medical condition may be transmitted. At your discretion, this designation of the person or persons may be altered at any time. The names of the persons that you designate will constitute an entry in your medical records.

WHAT RIGHTS DO YOU HAVE?

To choose your doctor or your healthcare facility; you also have the right to choose your medical transport service

The topic of rights is discussed in detail in the sections "The General Practitioner with whom you are registered," "Your Hospital" and "Discharge from the hospital." These rights belong to you based on the current laws, which can also be found at www.mzcr.cz.


To be informed about your health

The doctor is obliged to inform you concerning every detail that relates to your health. S/he must provide you with clear information about the results of your examination, about optional treatments and the prognosis for your condition.

You have the right, at the time of your registration for the provision of healthcare - or at any time subsequently - to also designate a person or persons to whom information concerning your medical condition may be transmitted. At your discretion, this designation of the person or persons may be altered at any time. The names of the persons that you designate will constitute an entry in your medical records.
To prohibit the provision of information about your medical condition to specified individuals

At the time of your registration for the provision of healthcare, or any time subsequently, you can also define an express prohibition against the provision of information concerning your state of health to any specific person or persons. This prohibition will constitute a part of your medical records and can be revoked, strictly in accordance with your specific instructions, at any time.

To the provision of healthcare on the basis of your consent

Apart from such exceptional situations as are provided for by law (e.g. protective treatment ordered by a court in a case in which a patient is a threat to him/herself or to others, or, in the case of an infectious disease, a treatment ordered for the protection of the general public) no medical intervention may be carried out on your person without your consent. Another potential situation highlighted in this scenario, is a patient’s unconsciousness, whereby it is impossible to obtain his/her consent, while medical inaction could endanger the health or even the life of the patient.

To refuse treatment

This fundamental right of the patient is logical, because who else should have the right of decision concerning their body other than its owner. Always remember this fact whenever you are expected to undertake any medical treatment and make sure that you have sufficient information in order to be able to make a decision calmly and freely. As in the previous clause, there is an exception in the case of a patient being incapable of making a decision: i.e. s/he is in a condition of severely impaired consciousness.

To view your medical records

In addition to the healthcare staff being required to permit your access to your medical records (in the presence of medical staff), you are also entitled to request an extract from or a copy of this documentation. Information concerning the cost of obtaining these should be made generally available and it should correspond to the customary cost. You should find out the price prior to making your written request for the production of the extract or the copy. The medical facility is required to reproduce and provide the documentation within 30 days of your request.

To choose your own health insurance

The health insurance company with which you are insured and through which you pay your monthly health insurance, purchases on your behalf healthcare in health facilities that

I DON'T WANT IT
are its contractual partners. These health facilities then charge your chosen insurance company for the healthcare that they provide for you the amount that they have contracted for with the insurance company. The insurance company also pays in excess of the contractually arranged amount to all healthcare facilities (including those that are non-contractual) for essential and urgent care that has been provided for a patient who is at a risk of life and health. If you are not satisfied with the services of your health insurance company, you can change companies once in a 12 month period, but only as of the 1st day of a calendar quarter. For additional information see the wording of Act No. 48/1997 Coll., On public health insurance, as amended.

To change your doctor

You have the right to change the General Practitioner with whom you are registered after 3 months. You may then do so at any time (see the Section "General Practitioner with whom you are registered" on page 25).

To the provision of healthcare without making direct payment

Act No. 48/1997 Coll. provides for situations in which the patient has the right to healthcare without making direct payment.

To file a complaint

If you are not satisfied with the healthcare that you have received, you can make a complaint to the director of the medical facility. If you are not satisfied with the response to this complaint, you may contact the appropriate regional office and, in the case of faculty hospitals, psychiatric hospitals and some specialist medical institutions, the Ministry of Health of the CR, which established them. If you are not satisfied with the settlement of a complaint by the regional office, you can also contact the Ministry of Health of the CR (Inspection Department of the Ministry of Health of the CR - see also "Important Contacts"). You can also lodge a complaint against a specific doctor, dentist or pharmacist to the Czech Medical Chamber, the Czech Dental Chamber or the Czech Chamber of Pharmacists respectively, or you can contact your health insurer. If you believe that all the previous steps undertaken were not sufficient, you have the right to proceed through Civil Law. Most health facilities have their complaints procedure described on their website. In the case of the patient’s death, the right to pursue the complaint passes on to his/her next-of-kin.
COMPULSORY CONFIDENTIALITY OF HEALTHCARE STAFF

Every medical employee is required to maintain confidentiality concerning all information that s/he has learnt in relation to his/her care for you, concerning your medical condition, your hospitalisation, your diagnosis, your prognosis (the prediction of the outcome of the illness). The very fact that the patient is treated by a certain doctor or in a certain medical facility is subject to confidentiality. The law permits the doctor to provide information concerning the nature of the illness and also the requisite procedures only to the patient and additionally to such other individuals as have been designated by the patient.

Do not try to force medical employees to breach their duty of confidentiality. Also bear in mind that details such as information about a specific patient cannot be provided over the phone because the medical employee is unable to verify the caller's identity.

If you wish someone else to be informed concerning your medical condition you must provide a written consent form.
Everyone is free to choose the General Practitioner with whom they wish to register (General Practitioner for adults, General Practitioner for children and adolescents, dentist, gynaecologist), i.e. a doctor who takes cares of you in the case of health problems, by providing preventive examinations and monitors you regularly if you have a chronic disease. A General Practitioner for adults and a practitioner for children and adolescents in addition to working in his/her office also provides a home-visit service for his/her registered patients when they are unable to attend his/her surgery.

If you are not satisfied with the care that you are receiving from your doctor, you may change to a different doctor after three months. Frequent changing of doctors is not to be recommended. It may create a risk to the continuity of your care.
PERSONAL DATA

First Name: .................................................................

Last name: .................................................................

Address: .................................................................

telephone no: ..........................................................

e-mail: .................................................................

Age: .................................................................

Blood group: ..........................................................

I am:  □ diabetic   □ epileptic

   □ allergic   □ smoker

I have:  □ high blood pressure   □ a Pacemaker

   □ a metallic implant

I suffer from: ..........................................................

WHAT SHOULD THE GP WITH WHOM YOU ARE REGISTERED KNOW ABOUT YOU?

Date of Birth: .............................................................

Weight: ................................ Height: ...................................

Blood Group: .............................................................

Vaccinated against: ..................................................

History of infectious diseases:
   in childhood: ..........................................................

   other: ..................................................................

Known allergies:  drugs, iodine, pollen, asthma, bee stings, food,

   other ..................................................................

Number of children: ..........................................................

Number of births / abortions (women): .......................................

Date of first menstruation if applicable: .....................................

Menopause if applicable: ..........................................................

The illnesses that I have suffered from / I am suffering from:

1. ........................................................................

2. ........................................................................

3. ........................................................................

4. ........................................................................

The surgeries that I have undergone:

........................................................................

........................................................................
Date of and reason for my most recent hospitalisation (if any):
1. ..............................................................................
2. ..............................................................................
3. ..............................................................................
4. ..............................................................................
5. ..............................................................................
The medications that I am currently taking:
1. ..............................................................................
2. ..............................................................................
3. ..............................................................................
4. ..............................................................................
5. ..............................................................................
6. ..............................................................................
7. ..............................................................................
8. ..............................................................................
Parents, if they are alive: age, chronic illnesses; if deceased: at what age and due to what causes.
Conditions from which they suffered: ..............................................................
Father: ..............................................................................
Mother: ..............................................................................

HOW CAN YOU TELL THAT THE GENERAL PRACTITIONER WITH WHOM YOU ARE REGISTERED IS RELIABLE?

Your General Practitioner can be evaluated initially on the basis of his/her behaviour. Does s/he care about you, explain things, talk with you, listen to you patiently? Do you spend a long time in the waiting room, or do you receive an appointment for a specific time? Does s/he actively offer you the preventive examinations for which you qualify? Is s/he aware of where and when you have been hospitalised, the findings that you have received from other doctors and does s/he remember what problems you have had? If the answers to most of these questions are positive s/he is most probably the right one for you.

PLEASE REMEMBER:

Your doctor should have a contract with the health insurance company that you are insured with. However in the case of the provision of essential and urgent medical care (e.g. life-saving care), any doctor is obliged to treat you, including one that does not have a contract with your insurance company. If you are not satisfied with the care provided by the doctor with whom you are registered, you may change to a different doctor after three months. Frequent changing of General Practitioners is not to be recommended; the continuity of your care might be affected. If you change doctors, you should inform the doctor that you are leaving concerning this change. Your newly chosen General Practitioner will request the information from your medical records, which is important for ensuring the continuity of your healthcare, and the former doctor is obliged to provide him/her with that information.

Your General Practitioner should be accessible, based on your place of residence and his/her surgery hours should be convenient for you.
WHAT IS YOUR REASON FOR VISITING THE DOCTOR?

Usually you go to the doctor when you have a health problem. The doctor will ask you during the interview when this problem started, how often it troubles you, whether it remains the same or whether the condition is changeable.

PAIN

Pain is the most common reason for visiting the doctor. Describe its location, character and intensity accurately to the doctor. Try to determine for yourself how intense your pain is. Try assessing the intensity on a scale of: 0 = none, 10 = unbearable. This pain scale is a useful tool that assists the doctor in assessing the relative intensity of the pain over time for an individual patient.

If pain is your primary problem it will be advantageous to learn about this method in greater detail. Your doctor will assist you. Pain, in its nature, can be stabbing, biting, stinging, throbbing, pressure-based, diffuse, intermittent, permanent and so on.

INCREASED TEMPERATURE OR FEVER

It is important to record the progress of the temperature according to the time of day and its level. Don’t forget that if your temperature exceeds 38°C and this continues for longer than two days you should always call or visit your doctor.

THE REASONS FOR VISITING A DOCTOR

What is the reason for your visit? Do you have an acute problem or are you coming for a check-up, a preventive examination, for a prescription or a certificate? Clarify for yourself in advance why you are going to the doctor and report the reason for your visit to the nurse. This can be of great importance, especially when you suspect that you may have an infectious disease.

DO YOU HAVE TO REGISTER WITH A GP?

Registration is not required, but omitting to do so is not recommended. The law on public health insurance defines the fees for a number of medical procedures as applicable only to a patient’s registered doctor - e.g. regular preventive examinations, comprehensive initial examinations, home visits to seriously ill patients or patients who have mobility problems, etc. Without being registered none of these services can be provided for you without payment.

The information provided above is also applicable to dentists and gynaecologists with whom you are registered (with the exception of that relating to home visits).
Your health insurance card

An identity document (identity card, passport or driving licence)

Previous findings, medical reports from specialists, or your hospital discharge report

It is very important that your registered General Practitioner should always receive all the reports that any other doctors have issued for you. Without them the information about your medical status will never be complete.

Did you know that adults are required to attend their GP’s office and children the office of a General Practitioner for children and adolescents by the third day following their release from hospital?

UNABLE TO FIND A GENERAL PRACTITIONER WITH WHOM TO REGISTER?

If you cannot find a doctor who is willing to accept you as a patient you should contact your health insurance company which, in accordance with Paragraph 1, § 46 of the Act on Public Health Insurance, is obliged to ensure appropriate care for you through the health facilities with which it has entered into a contractual relationship. You can also inquire about the possibility of registration through the website of the Association of General Practitioners and the Czech Dental Chamber, which publish lists of doctors with capacity currently available for accepting new patients (see also the Section “Important Contacts”).

Remember that you are subscribing money for your healthcare through your payments to your health insurance company.

YOUR SPECIALIST DOCTOR

The General Practitioner is not able to solve every problem. If a specialised examination is required, cardiological or orthopaedic for example, the General Practitioner will recommend the patient to visit a specialist as an outpatient. Together with the letter of recommendation for acceptance by a specialist doctor, the General Practitioner also includes a written justification and the relevant medical data, including the results of the pre-examination carried out and information concerning the treatment that has already been provided. In this situation the patient still retains the right to his/her own free choice of a medical facility and/or a specialist.

Copy the information that the specialist has provided for you onto the next page.

We recommend that you do not circumvent your General Practitioner and that you always consult him/her first. Of course a situation may arise whereby, in the case of the occurrence of a specific or a sudden problem you will locate a specialist directly - e.g., a surgeon, neurologist, cardiologist, etc.

Remember to provide information to the General Practitioner who has sent you to a specialist for a professional examination concerning the outcome of this appointment, including forwarding any written medical report that you receive to him/her.
NOTES

Appointment on: .........................................................

With Doctor (name and specialisation):

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Reason for the visit:

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.............................................................................................................................

Medication prescribed:

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Response to the medication and its effect:

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YOUR DOCTORS

The General Practitioner for adults with whom I am registered
First Name, Last Name: .........................................................
Telephone No.: ...............................................................
Surgery Hours: ..............................................................

My Specialist, his/her area of expertise
Name: ...........................................................................
Telephone No.: ............................................................

The General Practitioner for children and adolescents
with whom I am registered
First Name, Last Name: .........................................................
Telephone No.: ...............................................................
Surgery Hours: ..............................................................

My Specialist, his/her area of expertise
Name: ...........................................................................
Telephone No.: ............................................................

The Dentist with whom I am registered
First Name, Last Name: .........................................................
Telephone No.: ...............................................................
Surgery Hours: ..............................................................

My Hospital
Telephone No.: ...............................................................
Address: ........................................................................

The Gynaecologist with whom I am registered
First Name, Last Name: .........................................................
Telephone No.: ...............................................................
Surgery Hours: ..............................................................

Ambulance Service
Telephone No.: ...............................................................
Address: ........................................................................
Every patient has the right to choose the medical facility where he or she will be hospitalised (see Section “What rights do you have?”) though s/he does not have any right to choose the hospital to which s/he will be brought by the Ambulance. It is of course necessary to find out whether the medical facility chosen does carry out the examinations or procedures that the patient needs to undergo. Make enquiries about the quality of the healthcare, the range of medical procedures undertaken, the opinions of previous patients. The distance from your home should usually not be a decisive factor.
Just as in the case of purchasing consumer goods or making a decision about making a major financial investment, you should not just settle for whichever is the simplest option but give adequate attention to the selection of the medical facility. After all, our health is the most valuable attribute that we possess. Your GP will naturally recommend a hospital for you with which s/he has had good experience. However, you should never rely blindly on the advice of others, and you should try yourself to find out as much information as you possibly can, concerning the medical facilities that are available for choice. The Internet offers a good source of information. Check whether the facility in which you are interested has a website and what is presented on it, or browse those pages on which you can compare various healthcare facilities in accordance with specific objective criteria.

If the hospital is a high-standard establishment it will have national and/or international accreditation, or will at least be seeking it. You can discover how the hospital deals in terms of communicating with patients - whether it keeps them informed and involves them in decisions concerning their treatment, as well as in accordance with whether, for example, it publishes on its website the results of its research into patient satisfaction, or even has a "SATISFIED PATIENT" Certificate awarded by the Ministry of Health. Hospitals that are accredited and that are concerned with patient research have usually met very demanding requirements in regard to the quality and safety of their patient-care and follow-up rapidly on any identified areas of risk and are thereby able to swiftly remedy any shortcomings. Accredited hospitals are listed on the website www.sakcr.cz and a list of the hospitals that have, or are at least seeking the "Satisfied Patient" certification can be found on the website www.hodnoceni-nemocnic.cz or on the portal of the Ministry of Health: http://portalkvality.mzcr.cz

Helpful information can be obtained from the people in your neighbourhood who have been patients in the hospital. Visit the chosen hospital personally, check whether it is clean and how the staff respond when you ask them for information. Also ask the patients what their experience of this facility has been like.
This is the information obtained from a statistically significant number of patients that has been collated as part of the project QUALITY PERCEIVED THROUGH THE EYES OF PATIENTS. This research measures the quality of healthcare on the basis of patient satisfaction. For potential patients it provides objective and also easily comparable information concerning the quality assessment of individual medical facilities. From the results of the project it is possible to compare not only the quality of the entire healthcare facility but also that of its individual departments, even when they are in various facilities scattered across the country. If you are planning on a specific procedure, on the website of the www.hodnoceni-nemocnic.cz project you can compare the results of evaluations of all the locations at which it is possible to undergo this procedure and that are also involved in the QUALITY PERCEIVED THROUGH THE EYES OF PATIENTS project (www.kvalitaocimapacientu.cz).

Patients in each hospital ward evaluate a total of 50 quality indicators that cover eight aspects of the quality of inpatient care:

1. The patient’s admission to the facility
2. Respect for the patient
3. Coordination and integration of patient care
4. Information provided and communication with the patient
5. The physical comfort of the patient
6. Emotional support for the patient
7. The involvement of family and relatives in regard to the patient’s treatment
8. The discharge of the patient from the facility

More detailed information about this research is available on the portal of the Ministry of Health www.mzcr.cz in the Quality section or on the project website www.hodnoceni-nemocnic.cz.

WHAT TO BRING WITH YOU

- Identity card and Health Insurance Card
- Older records concerning your medical condition (copies of medical reports); from these the doctor is able to obtain specific medical information about your condition more easily and quickly.
- A list of the medications currently being taken (you can make notes on page 28).

WHAT IT IS BETTER NOT TO BRING...

- Substantial sums of money or valuables, jewellery, credit cards, valuable electronic equipment. The hospital is responsible for your belongings, but only for such items as are customarily brought to the hospital. Do not count on the fact that the medical facility will assume responsibility for larger sums of money or for valuables should you fail to store them in the safe provided for their protection.
In most instances, a patient is accepted on the basis of a recommendation from a General Practitioner or an Out-patient Specialist. There may of course be situations in which you are urgently obliged to go to the hospital without a doctor's recommendation. The Admissions Doctor will give you information concerning the reason for your admission and the programme for your healthcare during your hospitalisation. He will examine you and will ask about every detail that may be related to your current health condition, what has specifically brought you to the hospital and which illnesses you have had previously. Then comes the time for your questions.

You may ask about anything in which you are interested.

The Admissions Nurse will escort you to your room, and will provide you with information concerning the functioning of the ward. If you follow a special diet, you can request an appointment with a nutritional therapist (dietician).

If the hospital provides you with an identification bracelet do not remove it during the entire period of your hospitalisation. Patients' outdoor clothing is stored either in a locker room or in a cupboard in the patients’ rooms, according to the customary procedure of the specific hospital.

In the case of the locker room variant you should request a receipt, including a description of the items of clothing, that you will check carefully before surrendering them. No claim concerning any loss or damage can be accepted if these data are missing. The nurse may also offer to store your valuables in the hospital safe against the issuance of a receipt.

**WHAT INFORMATION SHOULD YOU PROVIDE TO THE HEALTHCARE STAFF?**

Inform the staff concerning any allergy that you suffer to any food or drug, or of any other nature. Particularly if there is a change of staff, it is better to report it again. Also inform the healthcare staff concerning any medications that you are taking. Do not take any medication without the knowledge of the staff.

It is important that the personnel should be informed concerning what you can manage in terms of your own self-care (mobility, personal hygiene, eating, getting up, using the toilet, dressing yourself, etc.). Provide notification concerning any other limitations and about your habits and needs so that the nursing staff will be prepared to provide assistance, should you need it.
Fail to observe the rule that forbids smoking in the hospital building except in designated locations. Alcoholic beverages should not be consumed during hospitalisation and for this reason the law banning the sale of alcoholic beverages in a medical facility is also enforced.

If you bring a mobile phone to the hospital fail to respect the prohibition against using mobile phones in the vicinity of certain equipment or facilities. When using the telephone you should be considerate of the other patients.

**WHAT SHOULD YOU NOT DO?**

**ACCOMMODATION IN THE HOSPITAL**

If you wish to take advantage of high-standard accommodation, ask immediately upon admission whether such an option is available. A high-standard room usually has one single-bed and is equipped with a TV, a refrigerator and an Internet connection. The staff should be able to show you an official price-list. If you did not order a high-standard room but there is no other free room available, no payment should be required from you for accommodation in a high-standard room.

**ADMISSION OF A CHILD TO THE HOSPITAL**

**WHAT TO BRING WITH YOU**

Prior to a planned hospitalisation, check with your General Practitioner for children and adolescents regarding the documentation required and the necessary personal items that the child will need to bring with him/her to the hospital. For the acceptance of the child it is obligatory to present the identity card of his/her parent or guardian and the registration card for the health insurance company with which the child is insured.

Prior to a planned hospitalisation, check with your General Practitioner for children and adolescents regarding the documentation required and the necessary personal items that the child will need to bring with him/her to the hospital. For the acceptance of the child it is obligatory to present the identity card of his/her parent or guardian and the registration card for the health insurance company with which the child is insured.
RIGHTS OF THE CHILD

➡️ A child has the right to be hospitalised together with an accompanying adult. The medical facility, however, has the right to decide concerning the admission and the disposition of the accompanying person. When the accompanied child is insured the stay of the person accompanying a child under the age of 6 is paid for by health insurance. The stay of a person accompanying a child of above the age of 6 is covered by health insurance only on the basis of the agreement of a review physician. It cannot however be guaranteed that the accompanying person will be assigned a bed in the same ward. The doctor's decision about whether or not the accompanying person will have a bed assigned to him/her does not restrict the child's right to the presence of an accompanying person and the right of the accompanying person to be present with the child. Also an accompanying person to whom a bed is not assigned in the hospital is entitled to stay in hospital with a child under eighteen years old, in accordance with the rules of operation of the hospital.

➡️ The child has the right to be hospitalised with other children and should not be placed in an adult ward.

➡️ The child has the right to be informed about the healthcare being provided in a comprehensible manner with respect to his/her age and level of intellectual understanding.

RIGHTS OF THE PARENTS OR THE GUARDIANS OF THE CHILD

➡️ Legal guardians have the right to be fully informed concerning what is happening to their child, including the complete instructions that have been issued, the opportunity for checking medical records and for the purchase of extracts, transcripts or copies of this documentation.

➡️ The medical examination and treatment of children are carried out based on the consent of the legal guardian. The only exception is the immediate carrying out of an action necessary to save the life or to protect the health of the child, in which case this action is carried out even if the legal guardians of the child have not agreed to it.

➡️ On discharge from the hospital ask for a record of the discharge, including any proposals for additional medical treatment for your General Practitioner and require about the need for a check-up in the case of good health or in the case of any deterioration. On discharge the child has the right to receive medication for three days, in the same way as an adult.
THE COURSE OF HOSPITALISATION

INFORMED CONSENT EXISTS IN THE MANNER OF:

➤ assumed (the patient does not express his/her disapproval)

➤ oral (this entry is made in the medical records)

➤ written (the patient, having been informed by the healthcare staff concerning the proposed medical procedure and its potential risks and all her questions having been answered, signs the informed consent). The signing of the informed consent cannot absolve the healthcare staff themselves of their responsibility for any errors of theirs in the healthcare.

The medical facility shall always make the decision concerning whether oral or written informed consent will be required.

The patient always signs a written informed consent prior to any surgical or medical procedure or examination that could result in serious complications. This is a fairly comprehensive text but in all cases it must be comprehensible to a layperson.

Healthcare staff must provide information concerning the purpose and the nature of the healthcare and of each medical procedure. They must also provide information concerning its consequences, alternatives and risks.

Healthcare professionals should always take into account the current health condition of the patient, his/her age and intellectual maturity and the manner of the provision of information should be adapted to encompass these factors.

Take your time and read it carefully. In some hospitals medical students are being taught and you will be given the opportunity to express or deny your consent to medical students being permitted to look at your medical records in the course of their practical education (for them the obligation to maintain confidentiality in regard to all matters relating to the provision of health services is also applicable). If this is something that you do not wish, inform the staff that care for you, even though, on the other hand, it is definitely useful and desirable that students should familiarise themselves with the widest spectrum of diseases and patients.

YOU CAN ALWAYS REVOKE THE AUTHORIZAION GIVEN IN ADVANCE
You are entitled to refuse the carrying-out of a medical procedure, concerning which fact you will consequently sign a waiver that includes a warning concerning the potential consequences of non-performance of the procedure.

It is impossible to accept that a protocol describing the course of forthcoming surgery and also the individual medical procedures should be handed for written informed consent to a patient in the hallway by a nurse who demands him/her to sign it on the spot. For example, the patient must always be informed by the doctor concerning the proposed surgery and the patient cannot be forced to sign the informed consent. If you refuse to sign it, though you do in fact require the medical procedure or the surgery, a record is made concerning this in the medical documentation.

See also the Section: "What rights do you have"

INTERVIEW WITH THE SURGEON

Your surgeon will explain the reasons for the procedures, outlining their potential benefits and risks. At the same time s/he should also inform you concerning the anticipated duration of hospitalisation following the surgery, the postoperative programme and the prognosis for returning to work and also any potential restrictions to everyday life. If your operation will create some restrictions or should it cause you, for example, the necessity of additional treatment or medication, you should become aware of all such details prior to the surgery. Ask whether there exist any non-surgical alternatives and what advantages does the solution that you have been offered in the hospital have. The duties of the doctor include explaining to you all the potential risks of the treatment that you are receiving.

In the case of a procedure being undertaken this applies two-fold: Continue affirming your identity, stating your full first name, last name and year of birth.

INFORMED CONSENT TO SURGERY

And, as noted above, give yourself plenty of time to think. Consult with your loved ones, and if you do not understand something request an explanation. If you disagree with the surgery you are entitled to refuse it. If your survival is threatened and if you are unconscious or otherwise unable to provide your consent to the provision of healthcare life-saving procedures can be undertaken without your consent.

AUTOTRANSFUSION

This is the pre-surgery collecting of blood from the patient, prior to the planned procedure. Provided that the patient's health permits it, several units of blood are taken (1 unit = 500 ml of blood), which are then transfused back during the surgery. The blood must, of cour-
se, be collected within an appropriate time-frame prior to the surgery in order to ensure that it does not exceed its shelf-life. Its collection is usually initiated 2-3 weeks prior to the surgery. The latest point in time for the collection of blood for autotransfusion is 4 days prior to the surgery.

INTERVIEW WITH THE ANAESTHESIOLOGIST

Prior to surgery an interview must always take place between the patient and the anaesthesiologist. The latter will be asking you about any previous or current diseases, medications, allergies, alcohol, addictive substances, prior or experience with anaesthesia (any complications, difficult intubation, allergic reactions to anaesthetics, nausea following anaesthesia, etc.), the previous administering of blood derivatives and any related complications. Informed consent to the administration of anaesthesia is also a requisite item of the medical documentation.

Again, ask about anything, for example what options exist for anaesthesia and which method would be the best for you. You can also discuss with the anaesthesiologists how you can treat any pain following the procedure.

WAITING TIME FOR THE OPERATION

By law you are entitled to the same quality and availability of healthcare as any other insured person who is a participant in the public health insurance system in the Czech Republic. Emergency care must be provided immediately. For some types of planned procedures, however, there may be a waiting list, meaning that the procedure cannot be carried out immediately.

The main reasons for these waiting times for procedures: responsible first and foremost are the capacity constraints of the facility, secondly the restrictions on the reimbursement of the medical facility for the performance by the health insurance companies. If the waiting time is disproportionately long ask for an explanation from your health insurance company. In no case should it happen that while you are waiting for the performance anyone else should jump ahead you. The exception to this would be a deterioration in the health condition of another patient who thereby requires to undergo a medical procedure as a priority. The Ministry of Health has prepared a methodology for this purpose that is available at www.mzcr.cz and medical facilities that wish to have satisfied patients should follow it.

You will be able to find out easily whether or not your hospital proceeds fairly and openly in this regard. Check out its website. Some hospitals have an electronic calendar posted there by which you can check your position (usually
through the assigned code or number) and monitor the potential date of your operation. In some hospitals a method of written planning calendars is used. Once assigned the surgery term should not be changed however, unless the reason comes from your side. The period of waiting time may vary in accordance with the type of procedure or the healthcare facility where the procedure is to be carried out.

**MEDICATION IN HOSPITAL**

- Be sure to take note of the list and the schedule for regularly used medications on page 28. During the period of hospitalisation, the hospital is responsible for the administration of all medication - including those medicines that you have been taking on a long term basis and that have no connection with the reasons for your current stay.

- Do not take any medication independently, without the knowledge of the medical professionals. Keep in mind that the medications that are prescribed to you may be negatively affected by any drugs that you "self-prescribe"!

- Medications may be independently administered by a qualified medical professional – a doctor or a nurse.

- The nurse must administer medications after removing them from their original packaging directly in the room.

- Ask which medications the nurse is providing.

- Ask why you are receiving these specific drugs.

- You have the right for information concerning the medications that have been prescribed for you, including about their possible side effects. Ask for this information from the attending physician.
MEALS IN HOSPITAL

Quality nutrition is very important for a sound physical condition and for the resistance of the organism. A patient with a healthy nutritional status is able to recover more quickly; his/her wounds heal more easily and s/he is more resistant to complications (e.g. infections, bedsores). A special diet may be prescribed for you in the hospital. This will be based on the doctor's response to the information discovered during physical examinations.

For information relating to your diet during your hospitalisation and subsequently you may consult the hospital's nutritional therapist. Request a consultation with him/her through your attending physician. If you have problems with feeding (difficulty of chewing, lack of appetite, problems with self-care) immediately inform the nurse of this. It is very important that you should not underestimate this important aspect of your therapy.

KDO SE O VÁS STARÁ?

➢ Every healthcare employee who takes cares of you, should be clearly identified with his/her first name, last name, function and the workplace to which s/he is attached. On first contact with you s/he should introduce himself/herself. If s/he fails to do so, ask her to.

➢ In the ward your attending physician takes care of you. S/he should visit you every day, talk with you, examine you, explain the next steps, schedule tests or treatment.

➢ The ward head physician is his/her senior. You can meet with him/her during the main rounds that take place once or twice a week. In addition to the attending physician, during the afternoon and night hours, and also at weekends, the physician on duty will take care of you. Your attending physician may also request a consultation for you with a specialist in another field.

➢ The nurses cooperate closely with the doctor. You should be assigned "your" nurse for each shift. At the beginning of the shift s/he should introduce himself/herself. His/her superior is the head nurse whom you can contact in regard to any comments concerning the work of the nursing staff.

ADDITIONAL MEMBERS OF THE HEALTHCARE TEAM

➢ Physical therapists generally attend the ward and also help patients during aftercare. They can advise you concerning suitable exercise prior to and following surgery, help to alleviate your problems with the locomotive system, etc.

➢ The social worker provides professional advice concerning social security when you are discharged to home care, information about different types of home care and the institutions that provide this care, cooperates with the family and home care agencies to seek assistance for the patient at home,
solves individual problems for patients in the social arena such as those concerning housing, childcare, finding a job.

Psychiatrist, psychologist, spiritual counsellor - your psychic well-being is an important part of your treatment, not to be underestimated. Many illnesses appear as a result of long-term psychological distress and, in the case of certain medical conditions an interview with an expert or a spiritual counsellor can be helpful.

Your attending nurse or physician will arrange for your individual contact to these services.

In some healthcare facilities volunteers offer a valuable addition to the range of resources available. Most of them help to occupy patients in their free time, take care of their psychological wellbeing and can provide assistance that does not require specialised education. In no instance, however, can they replace the work of the nurses and of the auxiliary personnel. You can encounter them in both large and small hospitals, in various types of wards for both children and adults. You will recognise the volunteers by their identification tag with a photograph, by their often colourful clothing with a "Volunteer" sticker (on a waistcoat or T-shirt). You can learn about the possibility for the utilisation of the services of volunteer programmes in the ward from the information booklet, from the nursing staff and also at www.mzcr.cz - Volunteers in healthcare.

PATIENT MOBILITY

Reduced physical activity during hospitalisation (e.g. following surgery, after prolonged bed rest) can rapidly induce the loss of muscle mass with a consequent reduction in mobility. Physical inactivity also increases the risk of unforeseen falls.

Patients with impaired mobility require special care. The distance between beds in the room should be at least 70 cm; if the patient is using a wheelchair or moves with the help of crutches, walkers, etc., s/he should be placed in a room, where the distances between the beds are greater.

Request a specially equipped bed; its sides are a great asset for your safety – and you will then feel more at ease in bed. Hospital beds come already equipped with a horizontal bar, an ancillary dining table, a signalling device for alerting a staff person. It is also possible to adjust the bed-height.

Ask for assistance whenever you are not certain that you can manage a movement by yourself.
FALLS

Unfortunately patients’ falls are a frequent cause of complications during hospitalisation. What are the most common reasons for falling in hospital?

- Patients often do not wish to bother staff by asking them for help with getting out of bed (falls frequently occur on the way to the toilet).

- The bed is too high; patients are not able to reach the ground easily.

- Slippery and/or wet floors.

- Poorly lit corridors.

- Lack of space between the beds.

- Obstacles in the way – e.g. bedside tables, chairs, walkers, etc.

- Weakness due to loss of muscle tone, dizziness, pain, a post-anaesthetic condition, medications that affect balance.

In the hospital wear shoes with slip-resistant soles; do not wear just socks and do not walk around in darkness. Notice whether the corridors are equipped with warning cones during cleaning and if not request this feature. Do not be afraid of asking the staff for assistance.
HYGIENE AND DANGERS OF INFECTION IN HOSPITAL

A manual dispenser for a disinfectant containing alcohol should be located in each hospital room, where it can be used in place of hand-washing. It is very effective.

If you are bedridden, ask the staff to allow you to wash your hands in accordance with your needs and/or request disinfectant wet wipes. Your bed should be kept clean. Ask the staff for immediate replacement of your bedding whenever there is any staining from a biological substance (blood, urine, mucus, etc.). Notify your visitors of the necessity of washing their hands before and after they are in contact with you, and to observe hygiene rules – e.g. using shoe covers or, on some wards, putting on a protective garment.

According to international statistics, each day, world-wide, an estimated 1.4 million people receive healthcare based on what are technically defined as nosocomial infections, i.e. infections that they acquired during their hospital stay. Washing and disinfecting the hands are prime strategies for reducing this risk.

Always wash your hands each time:
- that you come into contact with other people
- before eating
- after using the toilet

DISCHARGE FROM THE HOSPITAL

On discharge from the hospital the patient receives a discharge report that includes information about the course of treatment undertaken, any surgery that was performed, a follow-up programme, scheduled check-ups etc. This report is intended for the General Practitioner or other physician who sent the patient to the hospital.

You are entitled to ask the doctor for a copy of this discharge report that you can take home with you.

MEDICATIONS "TO GO"

At discharge, based on the doctor's prescription, the nurse will prepare medications for the patient that will be sufficient until his/her visit to a General Practitioner, i.e. for 3 days. Each medication should be packed individually and the packaging should be labelled with its name and information concerning its usage. The patient may also, as necessary, receive medical devices paid for by health insurance.

Make sure that you know how you should use the medicines at home, and that they are correctly labelled. As soon as possible, but not later than the third day after being discharged from the hospital, visit your GP or the relevant specialist physician so that s/he can prescribe suitable medication for you and suggest additional therapy. Also be sure to show him/her your discharge report.
PRESCRIPTIONS

When different doctors prescribe medications for you, be aware that drugs that have different names may contain the same active ingredient. If you are visiting more than one physician, they might each prescribe similar drugs for you and their interaction and/or accumulation could be damaging to your health. To prevent this danger carry with you a list of the medications that you are taking. If you are not certain check with your pharmacist.

Before you leave the surgery check that your name and the identification number provided by the insurer (usually a personal ID) are included on the prescription.

Check the name(s) of the drug(s) and make sure that you understand the dosage(s) correctly.

Also check the quantity of the packages prescribed that you have agreed with the doctor to ensure that the medication will last until your next check-up.

You can obtain a prescription for medication for a period of up to three months, i.e. an iterative prescription, based on which you can obtain your medication at the pharmacy on a repeating basis in accordance the conditions specified.

Check with your pharmacist into the possibility of him/her providing you with fully paid medication (with no surcharge) or alternatively a cheaper drug that has the same effectiveness. The pharmacist is authorised to provide you with medicines in this manner.

INTERVIEW WITH THE DOCTOR AT THE TIME OF DISCHARGE FROM THE HOSPITAL

It is very important at the time of your discharge from the hospital to pay due attention to your interview with the doctor.

Ask him/her about everything that you need to know concerning your forthcoming regime:

- the new medications that you will be taking, how they are to be used and whether they can be prescribed by General Practitioner
- what to do and whom to contact in the case of future health problems
- what kind of follow-up care there will be and when you should return for a check-up.
- whether you should follow any special diet or take any special precautions concerning your mobility or your daily routine
MEDICAL TRANSPORT SERVICE

Health insurance pays for the transport of the patient to the medical facility, from the medical facility to the location of his/her permanent or temporary residence or to a social services facility of in such cases in which the patient’s health condition does not allow his/her transportation in any other conventional manner. This is based on the decision of the attending physician, as also is the possibility for the patient to be accompanied.

At the time of your discharge discuss with your doctor about how your transport should be arranged, whether are able to go home alone or whether s/he will recommend transport by a vehicle belonging to the medical transport service.

Take notice! If you choose to be transported to a distant hospital, public health insurance will only pay for the cost of transport to the equivalent medical facility that is closest to your home, with the difference in cost to be paid by you as the patient.

HOME CARE

After hospitalisation the situation may arise whereby the patient still requires regular medical attention but does not necessarily need to be hospitalised. For this purpose, home care services are provided for clients of all ages. Home care is generally more comfortable for the patient than staying in the hospital and this method for the utilisation of health services has become very popular worldwide.

Ask your GP if you think that you might benefit from this type of care. Full payment of these services from public health insurance is contingent on the recommendation of a GP. The service is available in most regions and should be utilised in those cases in which a patient is unable to attend a medical facility regularly and needs, specifically:

- a health-check - measuring of blood pressure, blood sugar, etc.
- injected or non-injected drugs (insulin, pain medications, blood thinners, etc.)
- treatment for skin problems (venous ulcers, bedsores, post-operative wounds)
- to prevent bedsores
- take care of his/her hydration, monitoring the intake and elimination of liquids
- administration of infusion therapy - drip infusion (treatment of pain, provision of hydration)
- activation, both physical and mental
- conducting of blood collection and/or of other biological material
- rehabilitation
- monitoring of permanent catheters (i.e. a long-term urinary catheter in situ), catheterisation, care of the stoma (outlet), carrying out an enema
IMPORTANT INFORMATION

PREVENTION AND PREVENTIVE PROGRAMMES

Prevention means preventing diseases and their consequences. With regular checks you can spare yourself a great many health problems. It is necessary, however, that preventive examinations should be carried out really thoroughly and with all due care. The procedure and scheduling for preventive examinations are defined by Decree No. 3/2010 Coll. A preventive examination should not occur only in the manner of a patient-physician interview.

Request from your doctor all the medical examinations to which you are entitled. Help your doctor by giving him/her accurate information.

Health insurance covers preventive examinations carried out by the General Practitioner with whom you are registered.
**GENERAL PRACTITIONER FOR CHILDREN AND ADOLESCENTS**

Carries out preventive examinations nine times during the first year of life; for a newborn during the first two days following discharge from the hospital, then after 14 days, after 6 weeks, after 3 months, between 4 and 5 months, after 6 months, after 8 months, between 10 to 11 months, after 12 months, after 18 months of age, after three years and subsequently always once every two years. The last of these preventive checks should be carried out before the patient reaches 19 years of age, i.e. at the latest before the date of his/her 19th birthday.

**GENERAL PRACTITIONER FOR ADULTS**

Carries out preventive checks once every two years (the first of these examinations is carried out within 2 years following the last preventive examination by the General Practitioner for children and adolescents).

**DENTIST**

Carries out preventive examinations twice a year for children and adolescents under the age of 18 years; in the case of pregnant women twice during the pregnancy, for other adults once a year.

**GYNAECOLOGIST**

Carries out a preventive examination at the end of the time of compulsory schooling at 15 years and afterwards annually.

**SCREENING PROGRAMMES**

Screening or searching for risks of diseases in the population is a very useful activity. This programme, organised by the Ministry of Health of the CR and other professionals, detects thousands of cases of cancer each year in the Czech Republic that the affected individuals would otherwise have had no idea that they had. Thanks to this programme tumours can be revealed while they are still in their initial stages, when they can still be treated very effectively. And the patients do not have to die...

In advanced Europe, the citizens participate in these programmes in a much disciplined manner; 80% of the population take part in them. Here the situation is much less favourable. We are unwilling to take responsibility for our own health – to take care of ourselves. If we work on remedying this, our reward will be a longer life.

Currently, you can attend three of these programmes that are covered by public health insurance, while others are already in preparation:

1. **SCREENING FOR BREAST CANCER**

In the Czech Republic more than five thousand women each year are afflicted by breast cancer. With a functioning screening programme, however, most of these cases are discovered at an early stage, with the strong hope for a cure. Every woman should undertake a screening examination on reaching the age of 45. If, at this point in time you visit the General Practiti-
Another screening programme specifically for women is checking for one of the most common, and also most dangerous, gynaecological cancers. You probably know about this test. During the examinations your gynaecologist takes a sample from the cervix, applies it to a slide and it is inspected at the screening laboratory through a microscope. The results are then sent back to your gynaecologist who will take care of everything that is necessary. You should undertake this examination once a year. It is very important to come regularly, as this can help to successfully prevent this insidious disease, from which, every year more than 400 women die needlessly in the Czech Republic. For more information visit the website www.cervix.cz.

3. SCREENING FOR COLON CANCER (COLORECTAL CARCINOMA)

This programme demonstrates very clearly how many lives could be saved if it were attended by all those at risk. In the Czech Republic over eight thousand men and women die every year from colorectal cancer, while an early screening examination and a simple procedure could prevent this deadly disease. The system for this examination is set up in the following manner. From the time of your fiftieth birthday you should request your GP or your gynaecologist for an annual examination for occult (hidden) bleeding in the digestive tract. This testing consists of collecting a sample of the stool in a special envelope or vial. Blood in the stool can be the first indication of the presence of a tumour. When you reach the age of 55 you will have the option to choose a primary screening colonoscopy in the place of repeated stool examinations. During this procedure a gastroenterologist will introduce a thin flexible tube to your rectum (an endoscope) and will examine the lining of the colon in detail. Although the examination will require your patience, it is really worthwhile for the reassurance it can bring.
Subsequently this examination is repeated at 10 year intervals. A request form will be issued to you by your General Practitioner or gynaecologist, or you can make an appointment yourself with an expert gastroenterologist at the Centre for Screening Colonoscopy. A list of these specialised outpatient centres and other information about screening programmes can be found at: www.kolorektum.cz.

**IN HOSPITALS NEONATAL SCREENING IS ALREADY BEING IMPLEMENTED FOR ALL NEWBORNS**

Every newborn baby, immediately after birth, undergoes a spectrum of examinations, during which checked is undertaken to discover whether the baby suffers from any serious congenital or hereditary disease. Through the collecting of a few drops of blood from the heel on a special sheet of paper, between 48-72 hours after birth, currently 13 rare diseases being checked-for, which include, for example, congenital malfunction of the thyroid gland (congenital hypothyroidism), congenital adrenal failure (congenital adrenal hyperplasia), metabolic illnesses (phenylketonuria and nine other disorders) and a congenital disorder of viscosity of mucus in airways (cystic fibrosis). Neonatal screening enables discovering whether a newborn has an increased risk of a certain disease, to enable the early diagnosis of this disease at a point in time when no clinical symptoms are yet evident, and to implement early treatment before the disease can cause irreparable damage.

In the case of children who test positive for congenital thyroid failure (congenital hypothyroidism) screening of their hearing is also carried out (using transient otoacoustic emission or the BERA examination).

The children also undergo neonatal screening for congenital cataracts. Screening for congenital cataracts is a simple examination that is performed on neonates on the 3rd or 4th day after their birth, prior to their discharge from the neonatal ward.

During their stay in the hospital all children undergo screening examination of their hip joints, which is followed by other specific examinations of the hip joints by an orthopaedic surgeon between their 6th and 9th week and their 12th and 16th week of age.

For more information visit: www.novorozenecyscreening.cz.
NATIONWIDE PREVENTIVE PROGRAMMES

In order to improve the health of the population each state organises activities aimed at combating certain diseases and risks, which, if not addressed, can cause significant economic losses and represent a considerable burden on the health of the population and thereby also for the State Budget. The Ministry of Health is involved in several aspects that are deserving of this attention. These are principally:

- The prevention of obesity
- The prevention of child injuries and violence against children
- An Action Plan on Drug Policy
- An Action Plan to combat malnutrition
- An Action Plan against rare diseases
- An Action Plan for the quality and safety of healthcare
- The prevention of tooth decay in children

The goal of these programmes is to sponsor activities to reduce the incidence of diseases, earlier diagnosis of diseases and, primarily, their prevention. Great attention is also paid to providing information to the general public in these areas. Information about all of these programmes and their specific activities can be found on the website of the Ministry of Health: www.mzcr.cz.

PREVENTION OF TOOTH DECAY

Currently, the child population in the Czech Republic has an average degree of decay of both first and permanent teeth. The condition of teeth is of great importance not only from a medical perspective but also from a social one. Therefore a high level of attention should be paid to oral health from an early age.

WHEN SHOULD YOU TAKE YOUR CHILD TO THE DENTIST FOR THE FIRST TIME?

There is nothing to prevent a mother from taking her child with her when she is going to visit the dentist 6 months after his/her birth, on the next occasion s/he will train both of them in the proper manner of cleaning teeth. Prior to that time, practical advice concerning necessary treatment is provided by the General Practitioner for children and adolescents in the course of the overall preventive examination of the child and, if necessary, s/he will recommend appropriate preventive measures. It is important from the early years of a child to begin to instil good hygiene habits and to adhere to the dietary recommendations that your doctor will offer you. The replenishment of fluorine is an important aspect of preventing tooth decay that is entirely in the hands of the doctor and you can discuss this issue with him/her.

Remember that taking care of the first teeth influences the healthy development of the permanent teeth.

DEPARTMENTAL SAFETY OBJECTIVES

As of 2010, the Ministry of Health of the CR announced measures that are designed to ensure patient safety and the quality of healthcare. One of these is the publication of the Departmental Safety Objectives (DSO), which are based on
The aim of this programme is to explain to citizens how frequent and inappropriate use of antibiotics causes the resistance of the microbial infectious agents and leads to the loss of effectiveness of these unique drugs. Resistance to antibiotics represents a global threat to public health. Because of this, some infectious diseases have regained their significance, even though most of us do not wish to admit that they could threaten us. The World Health Organisation (WHO) and the European Union (EU) have announced the prevention and control of antibiotic resistance as a health priority of the highest importance. They recommend the governments of the individual countries to organise programmes aimed at complex prevention and control of this resistance. The objective of the programme is primarily to ensure on a long-term basis affordable, effective and safe antibiotic treatment for patients with infectious diseases. This can be achieved specifically by promoting the proper use of antibiotics, including the prevention of their overuse and the prevention of the spread of resistant germs in healthcare facilities and in the general population. The prudent use of antibiotics is a shared responsibility for both the doctor and the patient. Antibiotics should not be used to treat infections of a viral origin (such as colds, coughs and flu) and the patient should not demand them for this purpose. If the disease is caused by bacteria antibiotics are often necessary for effecting a cure but the patient must use them responsibly, in accordance with the doctor’s recommendation. Each of us can thereby help to preserve the effectiveness of these antibiotics for future generations.

NATIONAL ANTIBIOTIC PROGRAMME

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BLOOD DONATION

Blood donation is a voluntary activity undertaken by individual citizens that has a widespread societal significance. In order that an individual should be able to donate blood and thereby help another person s/he must meet several conditions:

- age between 18 - 65 years
- min. weight 50 kg
- good health

For more information concerning another specific type of blood donation, i.e. autotransfusion, go to page 51.
WHO CAN NOT DONATE BLOOD?

If you wish to become a blood donor you are not allowed to be:

- a person at a higher risk of catching infectious diseases (AIDS, hepatitis)
- a person who is HIV-positive or a person who is in constant contact with a HIV-positive person
- a person who has been infected with hepatitis B or C, or a person who is in constant contact with such a person
- a person who has been infected with hepatitis A or mononucleosis – within a year from his/her recovery
- a person who has been infected with Lyme disease - within 6 months from his/her recovery
- a person with cancer
- a person who stayed in the UK and/or France for longer than six months during the years 1980-1996
- a diabetic who is using insulin
- a drug consumer
- an alcoholic
- a person with a heart disease
- a person who has received a transplant
- a person with a blood disease
- a person with a chronic kidney disease
- a person with a chronic disease of the digestive tract
- a person with bronchial asthma
- a hypertensive subject (an individual with high blood pressure); such a person may donate blood only if s/he is receiving monotherapy (a single medication) and has a maximum blood pressure of 180/100
- allergic – receiving permanent treatment (allergics who are not receiving treatment and who are not suffering from acute problems can donate blood)
- a person with an autoimmune disease
- an epileptic
- a person with multiple sclerosis
- a person with glaucoma or inflammation of the retina
- a person who has undergone an endoscopic examination within the last 6 months
- a person who has received a transfusion during the previous 6 months
- a person who has undergone tattooing or piercing during the previous 6 months
- a pregnant or breastfeeding woman (till nine months after childbirth or six months after ending breastfeeding)
- a person using medications on a permanent basis (with the exception of hormonal contraceptives and vitamins)

In addition, you may not donate blood:

- during a period of menstruation
- till 6 months following residence in a malarial environment
- till 6 months following residence in an endemic area without any symptom of disease
- till one month after a tick bite
- till 14 days after a diarrhoeal illness
till 14 days after the completion of antibiotics treatment
- till at least 14 days following recovery from a less serious viral infection (cold, cough...)
- till 14 days after recovery from an attack of herpes
Under the laws currently in force organs may only be donated, never sold. After death consent to the donation of organs and tissues is assumed; it is not necessary that consent should be expressed. Considered as a deceased person is a person who has been diagnosed as brain dead (in the majority of cases due to serious injury or bleeding) while for undertaking the donation of organs and tissues what is necessary is to maintain the heart function and blood circulation.

The organs and tissues of certain individuals are not suitable for transplantation, for example if the deceased person had cancer, AIDS, hepatitis or any other infectious disease. Organs are also not harvested in cases in which the physician is not certain of the cause of death, in situations in which the purposes of the dissection would be thwarted, or in the case of the deceased person being a prisoner.

During his/her lifetime, any citizen of the CR can apply to the National Register established by the Ministry of Health of the CR of persons disagreeing with the posthumous donation of tissues and organs. To do so it is necessary to fill in the appropriate form, available at www.nrod.cz. This permits the forbidding of the use of all or of only certain organs. The law also supports the pronouncement of dissent at a medical facility in the presence of an attending physician and one witness that must then be recorded in the patient’s medical records, with a copy to be delivered to the aforementioned register.

**PATIENT ASSOCIATIONS**

When a patient is suffering from some illness, s/he can make use of many information sources through which s/he can learn more about his/her disease. There are many internet portals, informational brochures and additional sources for information. Ask your doctor if you wish to access information of this nature.

There are already many patients associations and other organisations currently working for patients. A list of these resources can be found on the website of the Ministry of Health: www.mzcr.cz. It includes a list of the nongovernmental organisations that in the given year obtained state subsidies from the Ministry of Health and that are committed to providing health education for persons with disabilities or chronic diseases. These services may not be tied to membership of the subsidised organisation but must be made available to any patient who turns to the organisation. Because we provide information about the organisations and projects that were funded in a gi-
ven year, the list that contains the contact information is updated each year.

For the patient it is very convenient that s/he can with the similarly affected people exchange experience, attend residential events, courses, trainings and thereby obtain valuable advice for experiencing life with his/her disease in an easier manner. The list can be found in the Appendix “Important Contacts”, located at the end of this brochure.
**IMPORTANT CONTACTS**

**Ministry of Health of the CR**
www.mzcr.cz

**Control Department of the Ministry of Health of the CR**
kon@mzcr.cz

**Institute of Health Information and Statistics**
www.uzis.cz

**Entities providing information regarding quality**

**SAK CR**
www.sakcr.cz

**Kvalita očima pacientů**
(Quality as perceived through the eyes of patients)
www.hodnoceni-nemocnic.cz

**National Reference Centre**
www.jaksekdeleci.cz

**REGIONAL OFFICES**
www.statnisprava.cz/rstsp/ciselniky.nsf/i/d0045

**City of Prague**
www.praha-mesto.cz
posta@cityofprague.cz

**South Bohemian Region**
www.kraj-jihocesky.cz
podatelna@kraj-jihocesky.cz

**South Moravian Region**
www.kr-jihomoravsky.cz
www.jizni-morava.cz
podatelna@kr-jihomoravsky.cz

**Karlovy Vary Region**
www.kr-karlovarsky.cz
epodatelna@kr-karlovarsky.cz
knihaprania@zistnosti@kr-karlovarsky.cz
Centres for emergency medical services
Toll-free emergency number 155
Toll-free Integrated Rescue System number 112

Emergency Medical Services for the South Bohemia Region
www.zzsjck.cz
rrzzsjck@zzsjck.cz

Emergency Medical Services for the South Moravia Region
www.zzsjmk.cz
info@zzsjmk.cz

Regional Emergency Medical Services for the Karlovy Vary Region
www.zachrankakv.cz
dispecink@zachrankakv.cz
sekretariat@zachrankakv.cz

Emergency Medical Services for the Vysočina Region
www.zzsvysocina.cz
info@zzsvysocina.cz

Emergency Medical Services for the Hradec Králové Region, p.o.
www.zzskhk.cz
info@zzskhk.cz

Emergency Medical Services for the Liberec Region
www.zzslk.cz
marketing@zzslk.cz

Regional Centre for Emergency Services for the Moravian-Silesian Region
www.uszsmsk.cz
uszsmsk@uszsmsk.cz

Emergency Medical Services for the Olomouc Region
www.zzsol.cz
info@zzsol.cz

Emergency Medical Services for the Pardubice Region, p.o.
www.zzspak.cz
zzspak@zzspak.cz

Emergency Medical Services for the Pilsen Region
www.zzspk.cz
info@zzspk.cz
Regional Centre for Emergency Services for the Central Bohemia Region
www.uszssk.cz
info@uszssk.cz

Emergency Medical Services for the Ústí nad Labem Region, p.o.
www.zzsuk.cz

Emergency Medical Services for the Zlín Region
www.zzszlin.cz

Emergency Medical Services of the City of Prague
Korunní 98, 101 00, Prague 10
www.zzshmp.cz
reditel@zzshmp.cz

Professional medical and nursing organisations

Czech Medical Association of J.E. Purkyně
- where you will find contacts for the individual medical associations represented in this association.
www.cls.cz, czma@cls.cz
Tel.: +420 224 266 223, Sokolská 31, 120 26 Prague 2

Czech Association of Nurses
www.cnna.cz
kancelar@cnna.cz
Tel.: +420 222 523 827, Londýnská 15, 120 00 Prague 2

Health Insurance Companies

VZP ČR - 111
www.vzp.cz, info@vzp.cz, Tel.: +420 221 751 111
Client Centre Hotline 844 117 777, +420 221 752 175
Orlická 4/2020, 130 00 Prague 3

Vojenská zdravotní pojišťovna ČR
(Military Health Insurance Company) - 201
www.vozp.cz, info@vozp.cz, Tel.: +420 266 311 911
Drahobejlova 1404/4, 190 03 Prague 9

Česká průmyslová zdravotní pojišťovna
(Czech Industrial Health Insurance Company) - 205
www.czzp.cz, posta@czzp.cz, Tel.: +420 599 090 200
Jeremenkova 11, 703 00 Ostrava - Vítkovice

Oborová zdravotní pojišťovna zaměstnanců bank, pojišťoven a stavebnictví
(Departmental Health Insurance Company for employees of banks, insurance companies and those working in the construction industry) - 207
www.ozp.cz
e-mail: https://portal.ozp.cz/
Tel.: Hotline: +420 261 105 555, Roškotova 1225/1, 140 00 Prague 4

Zaměstnanec poopijistovna Škoda
(Škoda Health Insurance Company) - 209
www.zpskoda.cz, zpskoda@zpskoda.cz, Tel.: +420 326 579 111, +420 326 579 120
Hotline 800 209 000, Husova 302, 293 01 Mladá Boleslav

Zdravotní pojišťovna Ministerstva vnitra ČR
(Health Insurance Company of the Ministry of Interior) - 211
www.zpmvcr.cz, info@zpmvcr.cz, Tel.: +420 272 095 111
Hotline 844 121 121, Na Močinkách 2, 101 00 Prague 10

Revírní bratrská pokladna, zdravotní pojišťovna (Coalfield Brotherhood Cash Office, a health insurance company) - 213
www.rbp-zp.cz, e-mail: https://portal.rbp-zp.cz/cpod825ano.phtml
Tel.: +420 800 176 945, +420 596 256 111
Michálkovická 108, 710 15 Slezská Opava

METAL ALLIANCE Health Insurance Company - 217
www.zpma.cz, sekretariat@zpma.cz, Tel: +420 312 247 678, Hotline: 844 125 124
Čermákova 1951, 272 01 Kladno

MÉDIA Health Insurance Company - 228
www.mediazp.cz, info@media.cz, Toll free number 800 228 228
Karlovu náměstí 10, 120 00 Prague 2

Association of Health Insurance Companies of the CR
www.szpcr.cz, info@szpcr.cz, Tel.: +420 234 462 108, +420 234 462 103
W. Churchilla 2, 113 59 Prague 3
Professional Associations

Czech Medical Chamber
www.lkcr.cz; tel.: 257 211 329

Czech Dental Chamber
www.dent.cz; tel.: 234 709 611

Patient Organisations and Associations

Projekt Kvalita Očima Pacientů (Quality as perceived through the eyes of patients)
tomas.raiter@hodnoceni-nemocnic.cz, info@hodnoceni-nemocnic.cz,
www.hodnoceni-nemocnic.cz

Koalice pro zdraví (Coalition for Health)
www.koaliceprozdravi.cz, info@koaliceprozdravi.cz; Tel.: +420 261 174 079

Asociace poraden pro zdravotně postižené (Association for counseling individuals with disabilities)
www.apzp.cz; Tel: +420 266 753 426

Aphasia

Aphasia Club
www.klubafasie.com, info@klubafasie.com; Tel.: 420 776 754 080

Association for augmentative and alternative communication
www.alternativnikomunikace.cz/saak/, caak@brailnet.cz
Tel.: +420 222 518 280, +420 604 459 699

Alzheimer’s disease

Czech Alzheimer Society
www.alzheimer.cz, martina.rokosova@gerontocentrum.cz
Tel.: +420 286 883 676, +420 283 880 346

Prácheňské sanatorium o.p.s.
www.alzheimercentrum.cz, metodik@alzheimercentrum.cz
Tel: +420 608 555 549

Autism

www.autismus.cz

Association for the assistance of people with autism - APLA Prague, Central Bohemia, o.s.
www.praha.apla.cz

Apla South Moravia
www.brno.apla.cz, kancelar@apla-jm.cz
Tel.: +420 548 220 345, +420 775 199 800, +420 775 199 801

Apla South Bohemia
www.jc.apla.cz

Apla North Bohemia
www.apla-sc.info

Apla Hradec Králové Region
www.hk.apla.cz, apla.hk@seznam.cz
Tel.: +420 731 681 511

Apla Vysočina
vysocina.apla.cz

Autistik
www.volny.cz/autistik, autistik@volny.cz
Tel.: +420 605 400 865

Bechterew’s disease

Bechterew’s Club Prague
www.klub-bechtereviku.com, klub-bechtereviku@seznam.cz
Tel.: +420 321 722 158, +420 605 256 826

Coeliac disease

Coeliac Association of the CR
www.celiac.cz, info@celiac.cz, poradna@celiac.cz
Tel: +420 602 273 173

Cerebrovascular accident

Sdružení CMP - Association for people who have suffered a cerebrovascular accident
www.sdruzenicmp.cz, scmp@volny.cz
Tel.: +420 241 721 518, Mobile: +420 776 721 519, +420 777 610 827
Cystic fibrosis

Cystic Fibrosis Club, o.s.
www.cfklub.cz, info@cfklub.cz, Tel.: +420 257 211 929
www.cystickafibroza.cz - Information Portal

Diabetes

Association of Diabetics of the CR
www.diabetes.cz, info@diabetes.cz,
Tel.: +420 222 513 344, +420 222 513 333

Dialysis, Transplantation

Association of patients undergoing dialysis and transplants
www.znovu.cz/sdat/index.htm, prezidium@spoldat.cz, poradna@spoldat.cz
Tel.: +420 261 215 616

Down's syndrome

Club of parents and friends of children with Down's syndrome
www.downsyndrom.cz, downsyndrom@centrum.cz, Tel.: +420 284 684 968

Mandlové oči (Almond eyes)
www.mandloveoci.cz

Down's syndrome Section, SPMP ČR
www.icn.cz/dbnno

Mental illnesses, Mental health

Czech Association for Mental Health
www.capz.cz, info@capz.cz, Tel.: +420 224 212 656

Czech Association of Art Therapists
www.arteterapie.cz

Kolumbus, o.s. - The Association of Mental Health Care Users
www.os-kolumbus.org, balaban.michal@seznam.cz
Tel.: +420 475 207 775

VIDA, o.s. - a nationwide organisation for people with mental illnesses
www.vidacentrum.cz, styblikova@vidacentrum.cz, Tel.: +420 233 372 668

FOKUS
www.fokus-cr.cz, info@fokus-cr.cz, Tel.: +420 233 551 241

SYMPATHEA, o.p.s. - a nationwide organisation for relatives of the mentally ill
www.sympathea.cz, sympathea@sympathea.cz, Tel.: +420 776 061 541

Association for the assistance of the mentally handicapped
www.braillnet.cz/spmp, Tel.: +420 248 159 12

Czech association for the assistance of the mentally ill
www.spdn-cr.org

Muscular dystrophy

Muscular dystrophy association in the CR
www.md-cz.org, amd@md-cz.org, Tel.: +420 272 933 777

Civic association for parents of children with muscular dystrophy DMD/BMD
www.parentproject.cz, parentproject@parentproject.cz
Tel: +420 737 374 297

Epilepsy

Association of E - for patients with epilepsy
www.spolecnost-e.cz, info@spolecnost-e.cz, Tel.: +420 241 722136

Deaf and hearing impaired

Association of the Deaf and Hearing Impaired in the CR
www.snnr.cz, snnr@snnr.cz, Tel.: +420 221 890 417

ASNEP - an association of organisations for the Deaf and Hearing Impaired and their friends
www.asnep.cz, asnep@volny.cz, Tel.: +420 235 521 412

Czech Union of Persons with Impaired Hearing
www.cun.cz

Czech-Moravian Institution for the Deaf
www.cmjn.cz - association of Regional Institutions for the Deaf:
Deaf Union Brno
www.neslysici.net, unb@cmjn.cz, Tel.: +420 541 245 321, texting Tel.: +420 541 238 685

Pilsen Deaf Union
www.pun.cz, posta@pun.cz, Tel.: +420 377 421 124

Regional Deaf Union in Olomouc
www.ounol.cz, ounol@ounol.cz, Tel.: +420 585 225 597

Jihlava Deaf Union
www.jihlava-un.eu, jihlava.un@seznam.cz, Tel.: +420 773 586 003

Břeclav Deaf Association
www.snbreclav.cz, snbreclav@seznam.cz, Tel.: +420 519 332 251

HELP - Czech Hard-of-Hearing Club
www.home.tiscali.cz/ckn_help/, cknh.zdenek@tiscali.cz
Tel.: +420 377 420 934, +420 339 34 934

Association of users of cochlear implants (SUKI) Prague
www.suki.cz, info@suki.cz, Tel.: +420 606 823 706

Czech Club for the Deaf in Prague
http://ohluchli.sweb.cz, cko-praha@volny.cz, Tel.: +420 251 566 108

Pevnost - Czech Centre for Sign Language
www.pevnost.com, pevnost@pevnost.com, Tel.: +420 283 892 700, +420 728 586 857

Neurological disorders

Association of Young Sclerotics
www.klubsms.cz, rscentrum@vfn.cz, Tel.: +420 224 966 515

ROSKA UNION of the CR - Czech MS Association
www.roska.eu, roska@roska.eu, Tel.: +420 266 712 511

POLIO Association
www.polio.cz, lubra@volny.cz, Tel.: +420 222 962 074, +420 723 138 611

SAAK - Association for augmentative and alternative communication
www.alternativnikomunikace.cz/saak/, caak@braillnet.cz
Tel.: +420 222 518 280, +420 604 459 699

RETT-COMMUNITY Civic Association
www.rett-cz.com/cz, info@rett-cz.com, Tel.: +420 608 818 175

Společnost Parkinson, o.s.
www.parkinson-cz.net, kancelar@parkinson-cz.net, Tel.: +420 272 739 222

Blind, Visually Impaired

Czech Organisation of the Blind and Visually Impaired
www.sons.cz, sons@sons.cz, info@sons.cz, Tel.: +420 221 462 462

Tyflo centrum o.p.s.
www.tyflocentrum.cz, info@tyflocentrum.cz

Oncological patients

League against Cancer in Brno
www.onko.cz, liga@onko.cz, Tel.: +420 543 136 205, +420 543 134 300,
+420 543 134 301

League against Cancer in Prague
www.lpr.cz, lpr@lpr.cz, Tel.: +420 224 919 732
Cancer line: +420 224 920 935

ALEN – a non-profit association for women with cancer
www.alen.tym.cz, Tel: +420 224 916 216, +420 732 273 834

Aliance českých organizací žen s rakovinou prsu, o.p.s. (Alliance of
Czech organisations for women with breast cancer)
www.breastcancer.cz, aliance@breastcancer.cz, Tel.: +420 222 733 733

Lymfom HELP, o.s.
www.lymfomhelp.cz, info@lymfomhelp.cz, Tel.: +420 724 370 065

Mamma HELP Centre
www.mammahelp.cz, mammahelp@mammahelp.cz,
Tel.: +420 272 731 000, +420 272 732 691, +420 739 632 883
Mamma HELP, Přerovského povstání 1, www.mammahelp.cz
Mamma HELP, U Vinohradské nemocnice 2256/4, www.mammahelp.cz
Mamma HELP, Vonkova 432, www.mammahelp.cz

ARCUS – an oncological centre
http://arcus-oc.org/, info@arcus-oc.org
 DIAGNÓZA CML o.s. - chronic myeloid leukaemia
www.sdruzenidiagnozacml.cz, janapel@centrum.cz, Tel.: +420 728 308 360

Club for patients with multiple myeloma
www.mnohocetnymyelom.cz/mvc/, koordinatorka@mnohocetnymyelom.cz
Tel.: +420 603 310 523

ŽAP Club - Club for women with cancer
www.klubzap.cz, Tel.: +420 283 920 891

Pulmonary diseases
Association of COPD patients - Chronic Obstructive Pulmonary Disease
www.spchopn.cz, sduzenipacchopn@volny.cz, Tel.: +420 603 884 672

Association of patients with pulmonary hypertension
www.plicni-hypertenze.cz, info@plicni-hypertenze.cz, Tel.: +420 731 743 466

ČIPA, o.p.s. - Czech Initiative for Asthma
www.cipa.cz/infoline, cipa@volny.cz, Tel., Fax: +420 224 266 229

Brain Injuries
Cerebrum 2007, o.s.
- Association of people after brain injury and their families
www.cerebrum2007.cz, info@cerebrum2007.cz
Tel.: +420 773 540 589 (afternoon)

SAAK - Association for augmentative and alternative communication
www.alternativnikomunikace.cz/saak/, caak@brailnet.cz
Tel: +420 222 518 280, +420 604 459 699

Hematopoietic Disorders
Czech Association of haemophiliacs
www.hemofilici.cz, info@hemofilici.cz, Tel.: +420 777 078 509

HAIMA - Union for assisting children with hematopoietic disorders
www.haima.cz
- contains links to various locations in the CR where HAIMA is active:
  Prague - Vera.Reichlova@lfmotol.cuni.cz,
  Tel.: +420 224 436 575, +420 777 650 600
  Brno - msterba@muni.cz, Tel.: +420 541 525 267, +420 547 223 269

České Budějovice - KamilaZelinkova@seznam.cz, Tel.: +420 724 687 684
Olomouc - mihalv@fnol.cz, Tel.: +420 777 328 099, +420 585 412 736
Ostrava - Eva.Obdrzalkova@fpspo.cz, Tel.: +420 696 983 631
Pilsen - http://dante.lfp.cuni.cz/haimaplz, Grejcarova@atlas.cz
Tel.: +420 197 402 378, +420 604 777 419

Eating Disorders
Anabell Civic Association - for those suffering with anorexia and/or bulimia
www.anabell.cz, posta@anabell.cz, Tel.: +420 542 214 014

Growth Disorders
Paleček - civic association of people of short stature
www.palecek.nebesa.cz, palecek@nebesa.cz

Psoriasis
Association for psoriasis and atopic eczema patients of the CR
www.braillnet.cz/spae/

Rehabilitation
Czech hiporehabilitation association
www.chs.unas.cz, czhs@seznam.cz

Dr. Vojta's Czechoslovak Rehabilitation Society
www.vojtovaspolecnost.cz, info@vojtovaspolecnost.cz
Tel.: +420 386 352 003, +420 220 877 001

Rheumatic Diseases
REVMA-LIGA
www.revma.cz/liga, revmaligaspolecna.blog.cz, revmaliga@revma.cz

Seniors
Council of Seniors of the Czech Republic
www.rscr.cz, rscr@rscr.cz, Tel.: +420 234 462 073-7

Život 90 - humanitarian activities and resolving problems for seniors
www.zivot90.cz, poradna@zivot90.cz, Tel.: +420 222 333 500
Intestinal Diseases
Civic associations of patients with inflammatory bowel disease
www.crohn.cz

Czech ILCO - stoma association of the CR
www.ilco.cz, info@ILCO.cz, Tel.: +420 972 625 818, +420 606 952 818

Physically Disabled Athletes
Czech Wheelchair Tennis Association
www.cwta.cz, cwta@cwta.cz, Tel.: +420 541 219 897, +420 777 684 578

Kontakt bB Prague
www.kontaktbb.cz, kontakt@kontaktbb.cz, Tel.: +420 233 354 361, +420 724 551 241

Heart Transplant
Second Chance - an information portal for people after receiving a heart transplant
www.druha-sance.cz, mdruhasance@seznam.cz, Tel.: +420 777 778 482

Rare Diseases
DEBRA CR
www.debra-cz.org

Civic Associations for parents of children and adults affected by Gaucher disease
www.gaucherova-choroba.cz

C-M-T Association (Charcot-Marie-Tooth diagnosis)
www.c-m-t.cz, c-m-t@post.cz, Tel.: +420 495 851 145

Association META o.s. - patients with storage diseases
www.sdruzenimeta.cz, info@sdruzenimeta.cz, Tel.: +420 777 214 258

Society for MPS
www.mukopoly.cz, spmps@seznam.cz
Tel.: +420 585 315 787, +420 585 315 787, Tel./Fax: +420 585 315 787

Society for help with Huntington's disease
www.huntington.cz, info@huntington.cz, Tel.: +420 723 348 327

Prader-Willi syndrome
www.prader-willi.cz, ospws@email.cz, Tel.: +420 603 540 357

Children with Handicaps
Czech Association of Parents and Friends of Children with Handicaps
www.arpzpd.cz, asociace@arpzpd.cz, Tel.: +420 224 817 438, +420 224 817 393

Klíček Endowment Fund and Association
www.klicek.org, klicek@klicek.org, Tel.: +420 327 544 043, +420 775 204 109
www.detivnemocnici.cz
Tel.: +420 224 817 438, +420 224 817 393

Association Šance, o.s. - Association of Parents and Friends of hemato-logic and oncologic child patients
www.sancecz.org, sance@sancecz.org

Association of Parents and Friends of diabetic children in the CR
www.diadeti.cz, info@diadeti.cz, Tel.: +420 257 532 297

Association for allergic and asthmatic children
http://saad.davi.cz

BOLÍTO Prague – a civic association for children who are burn victims
www.bolito.cz, zajicek@bolito.cz, Tel.: +420 267 163 382

Motýlek - Association for helping children with disabilities
www.motylek.org, motylek@motylek.org, Tel.: +420 281 912 081, +420 775 964 765

Association for helping chronically ill children
www.chronici.cz, info@chronici.cz, Tel.: +420 233 334 213

Civic associations for parents of children with muscular dystrophy DMD/BMD
www.parentproject.cz, parentproject@parentproject.cz, Tel.: +420 737 374 297
Association for the comprehensive care of paediatric cerebral palsy
http://dmoinfo.cz, sdmo@dmoinfo.cz, Tel.: +420 222 310 803

Disablement

Czech National Disability Council
www.nrzp.cz, nrzp@nrzp.cz, Tel.: +420 266 753 421

Association of Persons with Disabilities in the CR
www.svaztp.cz, helena.klasnova@svazp.cz, Tel.: +420 224 819 083, +420 606 342 879

Centres for persons with disabilities by region:
Moravian-Silesian Region - www.czp-msk.cz
Jihočeská Region - www.czp-jrk.cz
Ústecký Region - www.czp-ukr.cz
Liberec Region - www.czp-az4u.info
Pilsen Region - www.czppk.cz
Pardubice Region - www.czp-pk.cz
Plzeň Region - www.czp-plz.cz
South Bohemia Region - www.czp-jbk.cz
Zlínský Region - www.czp-zk.cz
Centre for persons with disabilities in the Prague Region - www.czppraha.cz

Paraple Centre - Paraplegics Association
www.paraple.cz, paraple@paraple.cz, Tel.: +420 274 771 478,
+420 274 777 973

League for the rights of wheelchair users
www.ligavozic.cz, info@ligavozic.cz, Tel.: +420 537 021 493,
+420 777 010 331

Petýrková Wheelchair Club - assistance service
www.volny.cz/kvpet, info@kvp.cz, Tel.: +420 272 933 662 (dispatching centre),
+420 272 935 460 (office)

Prague Wheelchair Organisation
www.pov.cz, pov@pov.cz, Tel.: +420 224 827 210, +420 736 485 859

Association of the Friends of Konto Bariéry
www.muzes.cz, info@muzes.cz, Tel.: +420 224 174 843

Association of those affected by civilisation diseases in the CR
www.spcch.cz, centrum@spcch.cz, spcch@spcch.cz, Tel.: +420 224 812 225

Formika o.s. - agency for supported employment
www.formika.org, formika@formika.org, Tel.: +420 271 910 016,
+420 777 350 115

ParaCENTRUM Fenix
www.paracentrum-fenix.cz, info@paracentrum-fenix.cz, Tel: +420 547 210 382

PROSAZ - Association for the social rehabilitation of individuals with disabilities
www.prosaz.cz, Tel.: +420 251 614 469, +420 777 701 805

SAOP - an association for active recreation and for the integration of children with disabilities
www.dic-saop.cz

We would appreciate very much if you would write to us concerning the existence of any additional patients’ associations in order that we can include them in the next issue of the Patient’s Advisor.

Thank you.