

Means of extrajudicial intervention in the doctor-patient relationship

Abstract

The topic of the rigorous thesis is the introduction and evaluation of individual mechanisms that can be used by the doctor in the event that a problem arises within the therapeutic relationship between him and the patient during the provision of health care. Although the therapeutic relationship is usually a bilateral relationship based on mutual trust, the legal regulations offer a system of intervention measures that can be initiated in cases where a consensus cannot be reached between the doctor and the patient on the next course of action in the provision of health care to the patient.

In the introductory part of the rigorous thesis, the therapeutic relationship between doctor and patient is presented closely. Attention is paid to the legislation of that relationship, especially with regard to Act No. 372/2011 Coll., on health services, as amended, and the Convention on Human Rights and Biomedicine. In this context, the development of the therapeutic relationship in the Czech Republic is mapped, including the introduction of individual models of the doctor-patient relationship that have been discovered throughout history. Furthermore, the basic rights and obligations of both the doctor and the patient are outlined, which represent the essential basis of the therapeutic relationship. a special place is occupied by the definition of trust between the doctor and the patient, because if it is not mutually applied problems arise between the parties, which must be solved further through the interventionist.

The rigorous thesis in its practical part is oriented towards the presentation of individual methods of intervention in the therapeutic relationship, which the doctor can use. In this context, intervention is seen as the intervention of a third party in the therapeutic relationship in order to straighten the relationship between the doctor and the patient in order to restore mutual trust between the parties and ensure the continuation of the provision of adequate health care. The decisive criterion for building a system of suitable mechanisms for solving problems between the doctor and the patient in this rigorous thesis is their activation by the doctor. Although the patient himself may be the initiator of some of these mechanisms, this rigorous thesis focuses on the doctor's, not the patient's, ability to actively seek to straighten the therapeutic balance and, for this purpose, seek professional help according to the type of problem encountered. These mechanisms are divided into two groups according to whether the relevant intervention is at the

disposal of the health service provider, where the doctor works, or whether it is a mechanism located outside the influence of this health service provider.

The core of the thesis is the description of the individual ways of mediating the therapeutic relationship through the relevant intervention. These mechanisms are always presented with a focus on the same characteristics, namely on who the interventionist is (what are the prerequisites for fulfilling this function, what role does he have in intervention, etc.), what is the essence of the given method of intervention (how is it legally regulated, what type of problem between doctor and patient is it suitable for solving, etc.), what is the course of the intervention session (whether the course is formally determined, what are the rights and obligations of the individual parties, etc.) and what is the result of the intervention session (whether this result is binding and immutable or not). Based on the comparison of these same properties of the individual mechanisms, a hierarchy of means of intervention is drawn up as a conclusion of the rigorous thesis and their evaluation is made.

The last part of the rigorous thesis presents an insight into the current practice of selected health service providers regarding the means of intervention in the therapeutic relationship.