

PATIENTS' RIGHTS

ESSENTIAL INFORMATION



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All references to persons, status or positions in this publication apply to all genders without distinction.

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FOREWORD

Informing you about your rights as a patient as the basis for a positive relationship with healthcare professionals

People living in Switzerland see their family doctor once to three times a year on average, and may benefit from dental care, hospital care or care at home. Others live in care homes for the elderly or establishments for disabled or dependent people.

This leaflet is intended to inform you of your rights. It will help you to understand your position, express your needs and your choices of treatment, maintain your autonomy in decisions concerning your health and take ownership of your own health. It will help you establish a relationship of trust with healthcare professionals and be a partner in your own care.

Patients' rights are far-reaching. They may be based in legislation, the contractual relationship between the healthcare professional or institution and the patient, rules on protection of the person, or even social insurance. Cantons may also have their own specific provisions, which are not covered in this leaflet. You should therefore refer to cantonal legislation for further information.

This leaflet, which is common to Bern, Fribourg, Geneva, Jura, Neuchâtel, Ticino, Valais and Vaud, consists of :

- > a list of contents on page 3 with the titles of the leaflet's 13 sections ;
- > useful addresses at the end of the leaflet ;
- > an index on the last page that will help you go directly to any subject that interests you.

Each section is in three parts :

- > a brief summary of patients' rights ;
- > an "In practice" part, with explanations to help you understand the law ;
- > a "Good to know" part, with answers to the most frequently asked questions.

At the end of the leaflet, each canton lists the addresses of bodies that can provide you with additional information, advice and the mediation / conciliation or appeal options available to you.

We hope you find the leaflet helpful !

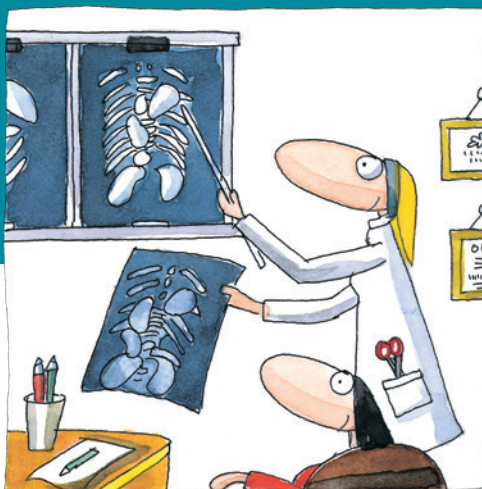
The public health services of the cantons of Bern, Fribourg, Geneva, Jura, Neuchâtel, Ticino, Valais and Vaud.



THE RIGHT TO INFORMATION

You have the right to be informed in a clear and appropriate manner of your state of health, the examinations and treatments that may be envisaged, the expected benefits and possible risks involved, the prognosis and the financial aspects of the treatment. The information is given to you, and no-one else. The healthcare professional is bound by the duty of confidentiality in respect of other people (see section 6).

At the time of your admission to a healthcare institution you will be given information, in paper or electronic form, on your rights and responsibilities and the conditions of your stay.



IN PRACTICE

A healthcare professional, specifically the doctor, should proactively provide you with clear and comprehensible information. The information should be provided objectively and fully, covering all the points necessary for you to follow the treatment in full possession of the facts. You have the right to pose questions, ask for explanations and, if applicable, to say that you have not understood the information. If you have a doubt, you have the right to ask for a second opinion and to consult another healthcare professional of your choice.

The right to information may, however, be limited in certain specific cases:

- > if you expressly refuse to receive information – for example, if you do not wish to know your diagnosis, this refusal will not be deemed to be a refusal of treatment;
- > in an emergency, if you are not able to receive the information, it may be provided later. Your designated healthcare representative and your family will be alerted and informed as soon as possible;
- > in the case of routine, non-invasive treatment presenting no risks to your health, such as taking blood or a blood pressure test. Your consent is implied in these cases.

If you do not have mental capacity, the information should be given to someone with power to represent you (see section 3). The duty of confidentiality is then lifted, to the extent necessary, in respect of your representative.

Everyone living in a care home has the right to a written accommodation contract (which may be supplemented by an assistance contract if the resident lacks mental capacity). The contract provides information on the services provided by the home, their costs, the resident's data protection rights, the duty of confidentiality, the resident's own responsibilities and the rules for living as part of a community. If the individual lacks mental capacity, the contract is signed by their representative.

GOOD TO KNOW

What questions can you ask your doctor?

- > What are the various possible treatments?
- > What are the advantages and risks of the different treatments?
- > What is the likelihood of these risks occurring?
- > What will happen if I do nothing?
- > What can I do on my own account?

Why ask for a second medical opinion?

A second opinion is not an act of defiance towards the healthcare professional. Its purpose is to improve the information available to you so that you can make a fully informed decision on whether or not you consent to the proposed treatment. It can be useful when a non-urgent surgical operation or intensive course of treatment is proposed. Don't forget to first ask your health insurance provider about the financial aspects of the second medical opinion.

Who should I ask for information about responsibility for costs?

The healthcare professional should give you general information about the costs of medical treatment and more specifically if a treatment, medical intervention or fees are not covered by social security or private insurance.

Your insurance policy specifies what you are required to contribute (excess and co-payment). If you have any doubts, your insurer can give you further information, including in the event of hospitalisation outside the canton (see section 4).

I have been invited to participate in a research project. Will there be any consequences if I refuse?

Participation in a research project or study is always on a voluntary basis. Non-participation should not lead to any problems for you. Your consent to participation in a research project or study should be in writing and will be valid only if you have first been adequately informed about the aims and objectives of the project and the data processing planned. As a general rule, information sheets will be provided, and information will also be given face to face. You may withdraw your consent at any time without having to give reasons for your decision. In this event, your data will either be erased or anonymised. For further assurance, you can ask for confirmation of what will happen to your data.

VOLUNTARY AND INFORMED CONSENT

No treatment may be given without your voluntary and informed consent, whether you are an adult or a minor, if you have mental capacity.

Consent is voluntary when you are not subject to any psychological or time pressure, coercion or threat.

Consent is informed when you take your decision in full possession of the facts after having been correctly informed (see section 1).



IN PRACTICE

To be able to express your wishes and give or withhold your voluntary and informed consent, you must have been properly informed by the healthcare professional, who is required to provide you with adequate and appropriate information. Provided that you have mental capacity, you retain the right, after further reflection, to change your mind and withdraw your consent. You have the right to refuse or interrupt treatment or leave a healthcare institution at any time. In this event, the healthcare professional will inform you of the risks to you of the decision and may ask you to confirm your decision in writing (signature of a discharge certificate). It is then up to you to accept the risks that may be caused by your refusal of treatment.

Coercive measures, such as restraint or treatment without your consent, are prohibited except as provided by the law (see section 5).

There are some legislative provisions that allow individual liberty to be restricted. An example is the law on epidemics, which allows the hospitalisation of people suffering from certain contagious diseases and ordering the isolation or quarantine of an individual against their will for public health purposes.

GOOD TO KNOW

What is mental capacity?

To have mental capacity means being able to understand a situation and make decisions accordingly. Everyone is presumed to have mental capacity, except for young children and those who are deprived of it because of a learning disability, mental illness, inebriation or similar causes. Suffering from mental illness or old age, having a legal guardian or being a minor are not always synonymous with lack of mental capacity. Mental capacity is assessed on a case-by-case basis, depending on your situation and the decision to be taken, particularly the type of treatment envisaged.

What happens with minors?

The views of a minor must always be heard and taken into consideration as far as possible. In practice, there is an initial assumption that there is mental capacity from around the age of 12 years. However, between 12 and 16 years, prudence calls for a more in-depth assessment of capacity on a case-by-case basis, depending on the intellectual maturity of the young patient and the type of medical intervention. From the age of 16, a stronger presumption of mental capacity may be considered reasonable. In principle, for children under 12, only the legal representative has the power to give voluntary and informed consent.

Must the healthcare professional ask for my consent for each intervention?

Yes, in principle but the form of consent may vary. In the case of a non-invasive procedure or routine care, such as taking a blood sample or blood pressure, your consent is implied. Otherwise, the healthcare professional must ask you clearly whether you consent to receiving the proposed treatment.

ADVANCE DIRECTIVES AND THE ROLE OF THE REPRESENTATIVE IN THE CASE OF LACK OF MENTAL CAPACITY

If you have mental capacity, you may draw up advance directives (a living will) enabling you to specify the medical treatments to which you intend to consent or not, and you may also appoint a designated healthcare representative in case you lose your mental capacity.

You may also draw up a power of attorney designating someone to be responsible for making decisions on the care to be provided for you in situations where you are no longer able to express your wishes (a healthcare representative). Provided you are in a position to exercise your civil rights (i.e. you are an adult with mental capacity), a power of attorney also allows you to make someone responsible for giving you personal assistance, managing your assets and representing you in legal relationships with third parties. This power of attorney must be written entirely in your own hand and signed and dated by you or drawn up by a notary.



IN PRACTICE

In the event that you no longer have mental capacity, the healthcare professional must seek to find out whether you have drawn up advance directives or designated a representative or you have a legal guardian appointed by the child and adult protection authority.

Healthcare professionals are obliged to respect the wishes expressed in your advance directives. However, that means they must be aware of them. So that your wishes are clearly understood, you are therefore advised to make arrangements to ensure that those concerned have access to your information when the time comes. In particular, you can give a copy of your advance directives to your representative, the healthcare professional treating you, the healthcare institution when you are admitted and your close relations, or you can register them in your electronic patient record (EPR) (see section 8).

In an emergency, if you do not have a representative, or the representative cannot be consulted immediately, the healthcare professional will act in your best interest, taking your presumed wishes into account. In the event of an involuntary commitment to an institution for purposes of assistance with mental health problems, special arrangements are applicable (see section 5).

GOOD TO KNOW

How should I draw up my advance directives?

Your advance directives should be in writing, dated and signed. You can choose the form of the document and the headings you wish to use. The document may be written by hand or on a computer or using a form. It is not necessary to have a witness, but you are strongly advised to discuss it with your doctor, who can help you draw it up and ensure that it is comprehensible. In addition, many organisations have published model forms that can provide a useful framework (including Pro Senectute, the Swiss Medical Association, Fondation Dialog Ethik, Caritas, the Swiss Red Cross, the Swiss Cancer League, etc.) You can cancel or change your advance directives at any time. You are advised to review, date and sign them whenever there is a significant change in your state of health and every three or four years, so that they always correspond to your wishes. Even if you have not drawn up advance directives, it is always possible to make your position known by saying what you want.

Who can represent me if I lack mental capacity?

If you have made arrangements (advance directives or power of attorney):

- > the healthcare representative named in your advance directives;
- > or the person with power of attorney, if the power includes provisions covering consent to or refusal of medical treatment.

If you have not made arrangements:

- > your guardian, if one has been appointed by a child and adult protection authority to help, assist or represent you, provided the guardian's mandate covers medical matters.
- > the person or people who provide you with regular personal assistance:
 - your spouse or registered civil partner;
 - the person you live with;
 - your descendants;
 - your father and mother;
 - your brothers and sisters.

What powers does the representative have?

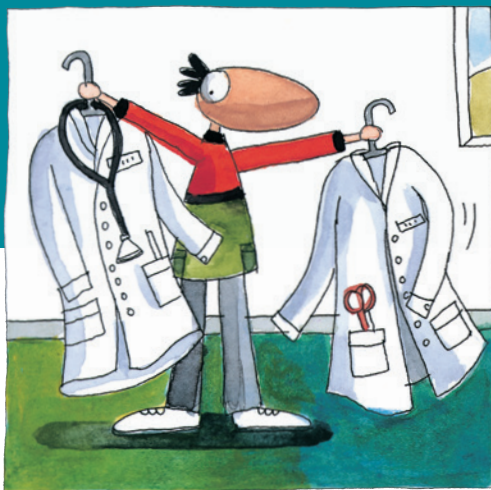
The representative's powers are exercised from the time when you no longer have mental capacity. The designated representative must make decisions in accordance with your presumed wishes and in your interest, consenting to or refusing proposed treatment. The healthcare professional is required to give the representative all the information necessary for a decision to be made (see section 1).

If the healthcare professional considers that a decision taken by the representative is not in the best interests of the patient or does not comply with the patient's presumed wishes, they may contact the child and adult protection authority.

THE RIGHT TO A FREE CHOICE OF HEALTHCARE PROFESSIONAL AND/OR INSTITUTION

Your freedom to choose a healthcare professional or institution depends above all on the type of health insurance you have opted for. It is therefore very important that you make yourself aware of the terms and conditions of your compulsory or complementary health insurance policy.

By opting for a particular type of health insurance, such as the GP or health network model, you are making a personal decision to restrict your freedom of choice in return for a reduction in your health insurance premium. The range and quality of benefits and services covered by basic compulsory health insurance are not affected.



IN PRACTICE

Your freedom of choice is also dependent on the availability and field of expertise of the healthcare professional (the doctor, for example), the services offered by the healthcare institution and availability of beds and equipment there.

You may need to pay, either partially or in full, for hospital treatments in a private clinic or outside the canton. Ask your family doctor, the healthcare institution or your health insurance provider about this.

In public hospitals and those officially recognised as in the public interest, you must accept treatment from professionals associated with the healthcare institution. Taking out a complementary insurance policy will give you access to a wider choice of healthcare professionals, hospitals and clinics.

If you are an outpatient, you have a free choice of healthcare professionals from whom to seek treatment, unless you opt for a type of insurance that restricts such choice (the GP model, for example).

GOOD TO KNOW

What happens if I have to go to a hospital outside the canton in an emergency?

In an emergency, you can go to any hospital in Switzerland. Your stay will be covered by your compulsory health insurance. There is an emergency when your state of health makes it impossible to take you to a hospital in the canton where you live.

What happens if I choose a hospital (or clinic) outside the canton where I live although it is not an emergency and I do not have specific medical reasons?

If, for your personal convenience, you choose a hospital (or clinic) outside the canton, please be aware that you, or your complementary insurance provider, may have to pay some or all of the costs of treatment. You are strongly recommended to obtain information in advance from the healthcare institution in question and from your insurer, together with a written guarantee from the insurer that the costs will be covered.

When the medical treatment you require is not available in a hospital in the canton where you live, you may be treated in another institution in another canton. Your family doctor will advise you on what to do (in this case you will need to apply to the canton where you live for a guarantee of payment).

Can I choose my care home?

In principle, you are free to choose the care home in which you want to live, and you can change home if you wish. However, in choosing a care home, you must follow the procedure applicable in your canton, and the services provided by the home (geriatrics or psychogeriatrics) must correspond to your state of health. In addition, you need to be aware that the care home of your choice will only be able to accept you if it has a room/bed available to offer you. You are therefore advised to register early enough to avoid over-long waiting times and to give yourself enough time to assemble all the documents relevant to your move.

If you wish to live in a private care home or one outside the canton, there may be additional charges for you to pay. It is therefore sensible for you to obtain information in writing about this from the care home in question.

Can I choose my doctor if I am in a care home?

Yes. You have the right to consult a doctor not associated with the home if you wish.

Can I receive care at home?

Yes, every canton has home care and home help services, whether public or private. Treatment and care at home vary in intensity and depend on the availability of healthcare and social services professionals, the architecture of your home and its fixtures and fittings, and the state of your physical and mental health.

What is a sheltered apartment with adaptations and medico-social support? Would I be able to benefit?

This type of sheltered apartment, adapted to standards for disabled people, is intended for people who have autonomy while being vulnerable, disabled, or beyond AVS/AHV retirement age. Sheltered accommodation with adaptations and medico-social support enables you to stay longer in your own home with a good quality of life. It provides you with an environment in which you can feel safe and social interaction is encouraged. To benefit from such accommodation, you must meet certain criteria and pay rent. For any further information, please refer to your canton's useful addresses at the end of the leaflet.

Can I bring my pet with me to a care home or a sheltered apartment with adaptations?

Each home has its own rules on whether or not it will accept pets. It will also depend on your ability to continue looking after the animal concerned.

COERCIVE MEASURES

Any therapeutic measure applied against your will or despite your objections is deemed to be coercion, whether it is a matter of restraint or treatment without your consent.

Your consent to medical treatment proposed to you should be autonomous – that is, based on reliable information, after a detailed assessment and in accordance with your personal values.

While the use of coercion is prohibited, situations nevertheless arise in medicine in which recourse to coercive measures is inevitable.



IN PRACTICE

A restraint, i.e. a measure restricting freedom of movement (for example, electronic surveillance, tying of wrists, a lap belt, placing in a seclusion room, closing doors, fixing bed rails, or isolation), may be imposed by a doctor in a hospital or care home after consultation with the healthcare team.

For such a measure to be imposed, your behaviour must be causing a serious risk to your health and safety or that of others or seriously disrupting life in the community. The measure must be proportionate and other less restrictive measures must have failed. Except in an emergency, the measure restricting your freedom of movement must have been discussed with you in advance. Such a measure cannot be justified by reasons of cost, simplification of routines, or reduction of workload for care staff. It must be recorded and may only be imposed for a limited period. It must be regularly reviewed to decide whether it needs to be retained or can be removed or replaced by a more suitable and less restrictive measure. You or your close relations may appeal against the measure at any time to the child and adult protection authority.

Treatment without consent is a medical intervention applied for the purpose of preserving or restoring your health (for example in the case of mental illness, learning disability or severe mental health crisis) without your having agreed to it. Such treatment is subject to a number of very restrictive conditions, particularly in the case of involuntary commitment.

Treatment without consent may be envisaged only if a failure to provide treatment will cause serious risks to your health or the physical safety of another person and if no other less stringent measures are available. Except under these conditions it is, in principle, never possible to impose treatment on you if you have mental capacity.

If you have lost mental capacity (even temporarily) the treatment imposed must be prescribed by a doctor. Your wishes will be taken into account as far as possible and the treatment plan must be drawn up with the person who has power to represent you in medical matters or your trusted person in the case of involuntary commitment (see section 3).

The rules on coercive measures, namely treatment without consent and restraint, may vary from one canton to another. You are therefore recommended to consult the legislation of the different cantons.

GOOD TO KNOW

How are restraints and treatments without consent documented?

Any measure restricting freedom of movement (restraint) must be recorded in a log and any treatment without consent must be recorded in a treatment plan. The person with power to represent you should be advised of the measure and may look at the log and/or treatment plan at any time. This is an effective protection against abuse. The log must specifically include the name of the person who took the decision, the type of measure taken, its duration and its purpose.

In the case of treatment without consent, the doctor must confirm the decision in writing to you and your legal representative or trusted person. They must also tell you how you can appeal.

How can I object to a restraint or treatment without consent?

You, your legal representative, the person with power to represent you in medical matters or your close relations may apply to the competent authorities in your canton to ask for such measures to be prohibited or withdrawn.

THE DUTY OF CONFIDENTIALITY IN HEALTHCARE

You have the right to respect for the confidentiality of your data. Healthcare professionals have a duty of confidentiality. This is also known as professional or medical secrecy. They must not disclose information obtained in the practice of their profession.

Unless otherwise provided by law, they must not pass on this information without your consent. The duty of confidentiality also applies between healthcare professionals.



IN PRACTICE

The purpose of the duty of confidentiality is to protect both your privacy and the professionals who have the duty to remain silent about information entrusted to them. It is the basis for the relationship of trust that should be established between you and the professionals. Nevertheless, the healthcare professional may even pass on the information in the following cases :

- > you have authorised the healthcare professional to pass on the information to third parties.
- > a federal or cantonal law obliges or allows the professional to inform the relevant authority (for example, a declaration of transmissible diseases or suspicious death, or a report in the case of unsuitability to drive).
- > if not authorised by you or the law, a healthcare professional may, for serious reasons, ask to be relieved of the duty of confidentiality by the competent authority in the canton. The authority will weigh the interests of protection of confidentiality against the interests of third parties in having access to the information. This may, for example, be the case if a doctor considers they have a duty to inform your descendants if you are suffering from a hereditary illness.

GOOD TO KNOW

Can my doctor pass my information on to another healthcare professional?

Your doctor will need to pass information on to other healthcare professionals involved in your treatment, particularly in hospital. Doctors remain subject to the duty of confidentiality in respect of other healthcare professionals. Your electronic patient record (EPR) enables you to share your medical data with your chosen healthcare professionals (see section 8). It is for you to give them rights of access.

How does the duty of confidentiality apply if my close relations want to obtain information about my state of health?

The healthcare professional does not have the right to pass on your information about your state of health to your close relations unless you have authorised it. However, if you lack mental capacity, and do not have a representative, the doctor may provide your close relations with relevant information about your treatment (see section 3).

What information can my doctor give to my employer?

Healthcare professionals must fulfil their duty of confidentiality. They must treat all information received as confidential and must not pass it to third parties without your consent. Therefore, a medical certificate must contain information only about your fitness for work and not about the illness from which you are suffering.

What information can my doctor give my health insurer?

The healthcare institution or professional responsible for your treatment must draw up a detailed and comprehensible invoice for your insurer and is required to give you a copy. Your insurer can ask you for information relevant to the checking of the invoice for services. Any exchange of medical information between the doctor treating you and your insurer will go through the insurer's consultant physician, who is also bound by the duty of confidentiality. The administrative staff of health insurers, doctors' surgeries and healthcare institutions are bound by the duty of confidentiality.

Are healthcare professionals bound by the duty of confidentiality after my death?

The duty of confidentiality continues after death. Your close relations and your representative will not be able to obtain information after your death unless you have explicitly provided for them to do so (in an advance directive or power of attorney). Failing this, the healthcare professional would have to be relieved of the duty of confidentiality by the competent authority. The power of attorney expires on the death of the person concerned.

What happens if I am a minor?

Like everyone else, minors have a right to protection of their medical data. In principle, the duty of confidentiality is not applicable in respect of parents or representatives (with parental authority) until the child acquires presumed mental capacity, at around 12 years of age. When it appears preferable to include the parents in the taking of a decision or to keep them informed, the healthcare professional must take time with a minor patient to explain the importance of sharing the information with their parents and give them more advice. The patient will then be able to decide, in full possession of the facts, what information they wish or do not wish to give to their parents or, if appropriate, to another legal representative. If the healthcare professional considers that the situation presents risks to the minor's physical safety or development, they can alert the child and adult protection authority to the case or ask for advice from the cantonal medical officer, presenting the minor's situation while preserving anonymity.

ACCESS TO MEDICAL RECORDS

You have the right to consult your medical record and have its meaning explained to you. Depending on the canton, you may have a copy, or the original made available to you, which you can pass to your chosen healthcare professional.



IN PRACTICE

You can access your complete medical record, in paper or electronic form. Its contents will include factual observations by the healthcare professional (your medical history, diagnosis, development of the illness etc.) and details of your treatment (medication administered, results of tests and X-rays, records of operations and hospital stays, certificates etc.)

The right of access does not extend to information concerning or coming from other people bound by the duty of confidentiality or to personal notes written by the healthcare professional.

In addition, a healthcare professional who considers that sight of the record could have serious consequences for you can ask you to consult it in their presence or that of another healthcare professional chosen by you.

Minor children with mental capacity (see section 2) may ask to see their own medical record.

GOOD TO KNOW

What happens to my record if I decide to consult another healthcare professional?

You can ask for your record to be given to you or sent to the new healthcare professional you have chosen. If there is reluctance or a refusal, you can appeal to the competent bodies in your canton: you will find their details at the end of this leaflet.

What is meant by a professional's "personal notes"?

Whether handwritten or digital, only notes that are irrelevant to the patient's treatment may be deemed to be personal notes. Other documents and notes form part of your record and you should be able to access them.

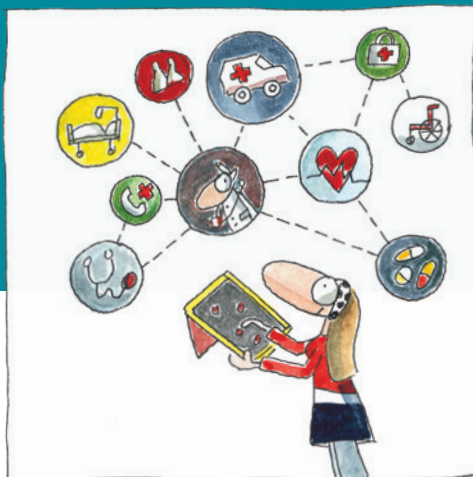
For how long will I be able to consult my record?

The healthcare professional is required to keep your record for between 10 and 20 years, depending on the canton, after the last consultation or treatment. If a healthcare professional ceases to practice, you can retrieve your record or leave it with their successor. If necessary, you should obtain information from your canton's health authority.

What happens to my record after my death?

Your record continues to be protected by the duty of confidentiality even after your death. However, your close relations and third parties may have access to certain relevant information if the healthcare professional is relieved of the duty of confidentiality by the competent authority (for example, for genetic counselling or in connection with legal proceedings).

You have the right to an electronic patient record (EPR) and therefore to participate in the management of your health data by accessing your medical information in an electronic form. The electronic patient record (EPR) is part of a wider digital environment, known as digital health, which includes all information and communication technologies used for health. This includes computerised medical records, telemedicine, mobile apps, smart devices etc.



IN PRACTICE

The EPR

Your medical data are kept in the first place by the healthcare providers responsible for you, such as the doctor treating you, your therapist, your pharmacist, healthcare institutions and hospitals. The aim of the EPR is to provide a digital copy of the most important data kept by your different providers in order to facilitate exchange of information between them. The EPR enables an overview of all your health data and facilitates shared decision-taking. It is available on the internet. It belongs to you and access to it is protected and secure. You can consult it freely.

Telemedicine

This enables you to connect remotely to a healthcare professional. However, it does not avoid the need for you to go to a hospital or your doctor's surgery for additional examinations that cannot be carried out remotely. This type of interaction corresponds to a classic appointment at your doctor's surgery and allows prescriptions to be issued. Your doctor is allowed to issue an invoice for these services, so it may be helpful to contact your insurer to check that your policy covers this type of service.

MOBILE APPS AND SMART DEVICES

These can be divided into two groups: the first includes apps and mobile devices prescribed or installed by a healthcare professional; the second includes apps and smart devices freely available on the market, such as smartwatches. Smartwatches enable you to monitor your health data, such as weight, blood oxygen levels, blood pressure, physical activity etc. You should note that apps and smart devices do not always benefit from high standards of security in the protection and storage of your personal data, unlike the EPR, which is completely secured at national level.

GOOD TO KNOW

What information is contained in the EPR?

The EPR contains health documents relating to you that are essential to your continuing care. These are uploaded either by care providers (prescriptions, hospital discharge reports, test results, records of X-rays and much more) or by you (for example, your allergies, vaccinations, advance directives and contact details for those who should be alerted in an emergency).

How do I create my EPR?

Arrangements for creating an EPR will change over time. We therefore encourage you to refer to the information provided by the canton where you live, using the address given at the end of the leaflet.

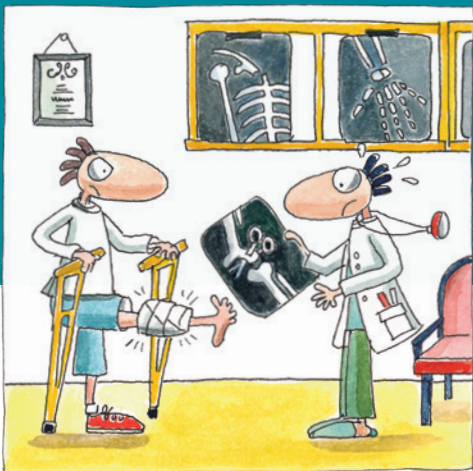
Who has access to my EPR and therefore my data?

The EPR belongs to you and you are free to decide which healthcare professionals may have access to it. If you wish, you may designate a representative of your choice to manage your record on your behalf and give them access to it. The record cannot be accessed by private or public insurers, employers or the State.

In an emergency, if you are not in a position to give access rights to medical and care staff, they may still access your record, and obtain the information necessary to treat you, unless you have excluded this possibility in your EPR. You will then immediately receive an email and/or SMS informing you that your record has been accessed.

MEDICAL ERROR

In the event of a medical error with negative consequences for your health, you have the right to seek explanations from the professional who treated you, by asking all the questions you need to understand what happened. You also have the right to obtain a second medical opinion and to contact a patients' rights organisation for additional support. In this situation, you can try to engage in an amicable negotiation with the healthcare professional or institution concerned. If doubts or disagreements remain in spite of this, you can ask for an independent medical assessment; depending on the outcome, you may be entitled to compensation.



IN PRACTICE

Medical activities carry risks that may materialise and lead to undesirable consequences. These may be unexpected or foreseeable. It is possible to prevent some risks but not all (for example, the risks of known but unavoidable complications).

Zero risk does not exist in medicine, as any medical act carries risks, and this is why complications following treatment do not automatically mean that the healthcare professional is responsible. A healthcare professional's relationship with their patient does not involve an obligation to achieve a specific result.

We speak of medical malpractice when the healthcare professional can be held liable for negligence, for example by acting without first informing the patient or receiving voluntary and informed consent or by failing to fulfil the duty of diligence by not following normal procedures or professional good practice.

To be human is to make mistakes and no-one is infallible, not even healthcare professionals. In order to learn from mistakes and avoid repetitions, healthcare institutions have implemented arrangements for recording and analysing errors with a view to continuous improvement.

GOOD TO KNOW

What action can I take if I have doubts about my treatment?

If there is a dispute about an unexpected worsening of your condition, you can ask for a second opinion from another trusted healthcare professional, at your own expense (see section 7).

Some healthcare institutions also offer patients a mediation facility.

What should I do if I believe that I am the victim of a medical error?

You should first contact the healthcare professional in question or the management of the healthcare institution in which the professional practices, in order to obtain an explanation.

If the healthcare professional admits error, they or the employing healthcare institution can, if necessary, activate their professional indemnity insurance.

If you are unsure as to whether the adverse effect on your health is the consequence of a chance complication (therapeutic risk) with no fault involved or error by a doctor, you can ask the Swiss Medical Association (FMH) for an expert report after first consulting the healthcare institution concerned. The cost of the expert report will depend on the complexity of the case. Based on its conclusions, it is possible to claim compensation either directly from the doctor or by bringing legal proceedings.

You also have the option of applying to the health authority responsible for monitoring healthcare professionals and institution in your canton.

The authority may also be alerted if a criminal offence is suspected.

If appropriate, you can also contact a lawyer or a patient support group (see useful addresses) to ask for assistance with the proceedings.

THE RIGHT TO SUPPORT AND ADVICE

When staying in a healthcare institution, you have a right to help and advice throughout your stay, as well as support from your close relations. You can also call on an external supporter, who may or may not be a member of a patient support group.

When you receive home care, you can be assisted and supported by an informal carer, who regularly helps you to carry out some or all of the actions or activities in your daily life and so allows you to stay in your own home. The carer is usually a member of your family and has a close personal relationship with you.

Informal carers can provide basic care that they already know how to deliver or for which they have been given training. Personal care is generally provided by home care organisations or qualified carers: the forms of assistance given by informal carers and professionals are complementary. Informal carers may benefit from respite and support services, and support in acquiring skills from the canton in which they live or their employer (see useful addresses).



IN PRACTICE

A trusted person, a close relation, a representative or another supporter may assist you in action related to your health. They may be present, at your request, in meetings with healthcare professionals or other bodies.

They can :

- > give you advice and moral, spiritual and emotional support;
- > help to overcome a lack of social interaction, particularly if you are not receiving any visits from your family and friends;
- > help you make choices and assist you with the procedures related to your hospitalisation or admission to a care home;

- > help to reduce the stress of administrative restrictions, the organisation of your care, and your day-to-day activities.

Only designated representatives (see section 3) may substitute for the patient in the case of lack of mental capacity. A trusted person, on the other hand, can help and support the patient (but not represent them) whether or not the patient has mental capacity.

In the event of involuntary commitment, the patient has the right to call on a trusted person to provide assistance throughout their stay.

The trusted person must be consulted when coercive measures have to be put in place. The involvement of this third party in the process can sometimes help, to some extent, to reduce the psychological impact of a coercive measure and reassure the patient that the procedure is lawful.

In some cantons, independent not-for-profit organisations offer supporters (see useful addresses).

GOOD TO KNOW

Can I have visits from whomever I want when I am staying in a healthcare institution ?

Yes, throughout your stay in a healthcare institution, you can receive visits during visiting hours from anyone you wish (for example, parents, other close relations, acquaintances, guests and your family doctor), unless there are serious medical contraindications (such as in the case of a risk of contagion, a specific epidemic or intensive care). Your family and other visitors may be asked to leave your room temporarily if care needs to be provided to you. You also have the right to refuse visits if you wish to rest or not to be disturbed.

What are my main rights if I go into a care home ?

You will retain the same rights and the same civil liberties as any other citizen, and you can exercise them at any time, including :

- > respect for your private life, your dignity, your lifestyle choices and your beliefs ;
- > the right to express your choices and your wishes. The care home is required to give you all relevant information, consult you and allow you the power to make decisions on matters relevant to you ;
- > your freedom of movement (in particular, the right to go out of the healthcare institution, while taking account of the general organisation of the home) (see section 5) ;
- > the management of your personal affairs, the exercise of your civil rights, the ability to send and receive letters and telephone calls ;
- > maintenance of your social network ;
- > the right to assisted suicide in certain cantons.

In a place where you live with others, rights also involve duties towards other residents and members of staff, and respect for the rules of the home allowing harmonious and safe cohabitation.

ORGAN AND TISSUE DONATION

You have the right, while you are alive, to decide whether to donate your organs for transplantation. In principle, until the end of 2026 at the earliest, the principle of express consent is applicable. Organs or tissues may be taken from a body after death only if the deceased has given consent.

From 2026, Switzerland is likely to apply the principle of presumed consent in the broad sense. Everyone is deemed to be an organ and tissue donor unless they have declared before their death that they do not wish to donate their organs. If the wishes of the deceased are unknown, it is for close relations to take the decision, observing the deceased's presumed wishes. The taking of organs is prohibited in the absence of documentation or close relations.

Donation of organs, tissues and cells is free: trade in them is prohibited.



IN PRACTICE

If you have mental capacity, in principle you have the power to declare your wishes from the age of 16. Organs, tissues and cells can be donated until an advanced age.

The wishes of the deceased override those of close relations and the trusted person, so it is important to make your wishes known in the following ways:

- > talking to your close relations;
- > carrying a donor card;
- > including your wishes in your advance directives or your EPR;
- > joining the national register for organ and tissue donations, from 2026.

In the absence of such a declaration, your close relations should give their consent while respecting your presumed wishes after your death. However, if you have delegated the power to make a decision concerning donation to a trusted person, that person will act instead of your close relations. If there are no close relations or trusted person, or it is not possible to contact them, the taking of organs will continue to be prohibited.

The taking of your organs while you are alive is permissible under the following conditions: to be a donor, you must be an adult with mental capacity and give voluntary informed consent in writing; the removal must not lead to serious risks to your life or health and it must not be possible for the recipient to be treated by another therapeutic method that is comparably effective. The donation and removal of organs are free.

Additional information may be obtained from the bodies listed at the end of the brochure (see useful addresses).

GOOD TO KNOW

Can I change my decision on organ donation?

Yes, you can alter your decision at any time. You should make your new wishes known by following the recommendations listed above.

Who are defined as close relations in the Swiss federal legislation on transplantation?

- > a partner, a registered civil partner, or a person who has lived as a couple with the deceased;
- > children, parents, brothers and sisters;
- > grandparents and grandchildren;
- > others who had a close relationship with the deceased, such as an informal carer.

What happens if I am travelling abroad?

The question may also arise during travel abroad, for example in the event of a fatal accident. As a general rule, the law applicable is always that of the country where the deceased is staying. It is therefore important to carry a document declaring your wishes.

END-OF-LIFE CARE

We all have the right to end our lives peacefully and with dignity. Framework conditions are in place to enable everyone nearing the end of their life to benefit from suitable medical treatment and support, responding to the individual wishes and needs of the person concerned, with the aim of maintaining the quality of life until the end.

Those at the end of life have the right to palliative care, including, in particular, pain relief, comfort and, if they wish, appropriate psychological, social and spiritual support. They also have the right to support and advice when they consult care service providers (see section 10).



IN PRACTICE

It is not easy to come to terms with the approaching end of life, for the person concerned or their family and friends. A number of questions can arise, such as: is it better for the person to be placed in a hospice or a care home, or to make all the necessary arrangements for them to continue to live at home?

While the overwhelming majority of the population wish to die at home, only 20% can do so today. In a patient's home, healthcare professionals do not have access to the same safety provisions or equipment as in a hospital. The choice of the place of death depends on your state of health, your environment, the availability of healthcare professionals and above all your close relations, who will need to make great efforts for you, while taking care not to become exhausted.

In end-of-life situations, healthcare institutions should allow the patient staying with them to be with their close relations, their representative, a trusted person or an external supporter (see section 10), at any time of day or night.

Healthcare professionals must not start or continue treatment or other medical measures against the expressed wish of the patient. If the patient has not declared their wishes and is not in a condition to do so, the doctor will take account of the wishes of the representative and close relations (see section 3). This is the case when the patient is in a deep and irreversible coma.

GOOD TO KNOW

Will I be able to benefit from palliative care?

Anyone who is ill can ask for palliative care, in an institution or at home, whatever their age or their diagnosis. The aim of palliative care is to improve the quality of life of those who receive it, until the end of life.

Can my close relations be supported at the end of my life?

When an illness develops slowly, close relations are usually present to give support, taking care of the person who is ill. They sometimes feel helpless in the face of the illness and suffer as a result. When death is imminent, close relations have to deal with their emotions and may feel a need for support. It is always possible for close relations to ask for help and support from healthcare professionals and relevant organisations dedicated to end-of-life care.

Will I be able to benefit from spiritual support?

Spiritual support can bring relief and restore confidence, serenity and hope. Whether it is religious or not, spiritual support is based primarily on active and open listening, to enable sufferers to express themselves freely. This service is available from the ecumenical chaplaincy of the healthcare institution in which you are staying or from your region.

Can I ask for assistance with suicide?

Assisting someone with suicide is not an offence if it is motivated purely by altruism. It allows someone to take their own life by taking a lethal substance given to them by another person.

Assisted suicide is regulated in some cantons. To be eligible, you must have mental capacity, be persistent in seeking suicide, be suffering from symptoms of an illness and/or severe functional limitations judged to be intolerable, and be capable of taking the lethal substance yourself.

In most hospitals and care homes, it is possible to obtain assistance within the establishment, particularly if there is cantonal regulation. Elsewhere, it depends on the goodwill of the institution.

Healthcare professionals have the right to refuse to participate in assisted suicide if it is contrary to their personal, ethical or religious convictions. However, the patient should have access to an alternative.

PATIENTS' RESPONSIBILITIES

While, as a patient, you have the rights that are highlighted in this leaflet, you also have responsibilities and duties that make a significant contribution to the quality of care given to you.

Your active participation, based on communication and mutual trust and respect, will enable the health and social care professionals looking after you to do so in a way that reflects your values and your wishes as closely as possible.



YOUR MAIN RESPONSIBILITIES

> Communication

By providing all healthcare professionals with all important information relevant to your health and necessary for your treatment, you will enable them to provide you with the best possible care. If you forget or hide important facts, such as an allergy, you cannot hold the healthcare professional responsible for the consequences. Of course, you will not be able to provide all the information spontaneously: it is for the healthcare professional to ask the necessary questions.

> Cooperation

It is in your own interest to cooperate with the treatment and follow the medical prescriptions that you have accepted. If you do not do so, you risk losing rights or benefits. For example, if you choose not to take the prescribed treatment, you reduce your chances of being cured and you cannot hold your doctor responsible for this.

> Declaration of interruption of treatment

You are free to interrupt a course of treatment. You have a duty to declare this to your doctor.

> Respect

While the healthcare professionals responsible for your care must respect your person and your dignity, you must similarly respect them and the other patients around you when you are staying in a healthcare institution. This means treating everyone with respect and consideration, whatever their age, gender, ethnic origin, sexual orientation, religion, state of physical or mental health or social background.

> Application of the healthcare institution's internal rules

The rules protect everyone's privacy and security. It is your duty and in your interest to respect them.

Finally, it cannot be stressed too strongly that transparency in the relationship enables the development of a relationship of trust and a positive therapeutic environment, which can help to make the illness and treatments easier to bear.

AUTRES DEVOIRS COMME PATIENTS

- > Attend appointments and give notice if you are prevented from attending or do not wish to attend.
- > Respect the hygiene and infection control rules in force.
- > Pay invoices when due.

GOOD TO KNOW

Must I have a health insurance policy (KVG / LAMal)?

Everyone resident in Switzerland and in possession of a residence permit lasting at least three months must take out health and accident insurance. This basic insurance gives everyone the right to the same benefits and the insurance funds should provide you with basic cover without any reservation.

Must I pay an invoice even if I am not cured?

Patients must pay fees due to health and care staff, whether or not they have been cured.

USEFUL ADDRESSES

DO YOU NEED ASSISTANCE, INFORMATION OR ADVICE ?

OSP/SPO | Swiss Patient Organization

“OSP” (OSP/SPO Advice) assists and defends patients who have encountered a problem with a therapist or insurer.

Avenue Pierre-Decker 5
1011 Lausanne
Tel. 021 314 73 88

FSP | Swiss patients' federation

Information, advice, conciliation and training.

Avenue Pierre-Decker 5
1005 Lausanne
Tel. 079 197 21 15
<https://federationsdespatients.ch/>

FRC | Consumer federation for French-speaking Switzerland

An association which provides consumer information and protection, including in relation to health insurance.

Fribourg, Geneva, Jura and Bernese Jura, Neuchâtel, Valais, Vaud.
Tel. 021 331 00 90.
www.frc.ch

Association droitsdupatient.ch

The association aims to promote patients' rights, in particular by supporting the development of a website, publishing relevant material, and other actions to facilitate information and reflection.

2400 Le Locle
<https://droitsdupatient.ch>

ASSUAS | Swiss association for the insured

An association whose purpose is to provide legal defence for anyone who needs advice or is in dispute with a social insurance body.

Avenue Vibert 23 | Case postale 1911
1227 Carouge (GE)
Tel. 022 301 00 31
www.assuas.ch

Social health insurance mediator

The Office de Médiation de l'Assurance-Maladie resolves misunderstandings between the insured and their health insurers and mediates in the event of disputes.

Case postale 519
6002 Lucerne
In French : 041 226 10 11
In German : 041 226 10 10
In Italian : 041 226 10 12
<https://om-kv.ch/fr/>

The ombudsman of private insurance and of SUVA

The Ombudsman provides a free mediation service for problems encountered with accident insurance and private insurance policies.

Case postale 2252
2001 Neuchâtel 1
Tel. 076 651 41 65
www.ombudsman-assurance.ch

FMH | Swiss Medical Association

Patients who believe that their health has been harmed by a medical error or a fault linked to a healthcare organisation can apply to the FMH Bureau d'Expertises Extrajudiciaires, which will coordinate an expert appraisal in accordance with its rules.

FMH | General Secretariat
Elfenstrasse 18 | Case postale
3000 Berne 16
Tel. 031 359 11 11
<https://www.fmh.ch/fr/a-propos-de-la-fmh/organisation/expertises-extrajudiciaires.cfm>

Pro Mente Sana Association Romande

Pro Mente Sana defends the rights and interests of people with a mental illness.

Rue des Vollandes 40
1207 Geneva
Tel. 0840 00 00 60 (local rate)
www.promentesana.org
Legal advice : 0840 00 00 61
Psychosocial advice : 0840 00 00 62

Swisstransplant

www.swisstransplant.org or via the Federal Office of Public Health

Effingerstrasse 1 | Case postale
CH-3011 Berne
Tel. 058 123 80 00
www.transplantinfo.ch
<https://www.vivre-partager.ch/>

ADDRESSES OF CANTONAL HEALTH AUTHORITIES

Canton of Bern

Department of Public health and social security
Rathausplatz 1
3011 Bern
Tel. 031 633 79 20
info.gsi@be.ch
www.gsi.be.ch

Canton of Fribourg

Public health service
Ch. des Mazots 2
1700 Fribourg
Tel. 026 305 29 13
www.fr.ch/ssp

Republic and Canton of Geneva

Department of Health and Mobility
Public Health Office
Rue Adrien-Lachenal 8
1207 Genève
Tel. 022 546 50 00
<https://www.ge.ch/organisation/ocs-office-cantonal-sante>

Republic and Canton of Jura

Public health service
Cantonal Medical Officer
Faubourg des Capucins 20
2800 Delémont
Tel. 032 420 51 33
medecin.cantonal@jura.ch

Republic and Canton of Neuchâtel

Public health service
Rue de Tivoli 28 | Case postale 1
2002 Neuchâtel 2
Tel. 032 889 62 00
service.santepublique@ne.ch
www.ne.ch/santepublique

Republic and canton of Ticino

Cantonal Medical Officer

Piazza Governo 7
6501 Bellinzona
Tel. 091 814 30 42
dss-dsp@ti.ch
www.ti.ch/dsp

Canton of Valais

Public health service
Cantonal Medical Officer

Avenue de la Gare 23
1950 Sion
Tel. 027 606 49 00
santepublique@admin.vs.ch
https://www.vs.ch/sante

Canton of Vaud

Directorate General for Health

Avenue des Casernes 2
1014 Lausanne
Tel. 021 316 42 00
info.santepublique@vd.ch

USEFUL ADDRESSES
IN THE CANTON OF VAUD

DGS | Directorate General for Health

The cantonal health authority responsible for covering the health needs of the population.

Avenue des Casernes 2
1014 Lausanne
Tel. 021 316 42 00
info.santepublique@vd.ch
www.vd.ch/dgs
www.vd.ch/droits-des-patients

Cantonal Medical Officer
(Directorate General for Health)

The cantonal medical authority responsible for reporting problems with a healthcare professional and/or healthcare institution and issues related to medical confidentiality.

Avenue des Casernes 2
1014 Lausanne
Tel. 021 316 42 26
signalements.OMC@hin.ch
www.vd.ch/omc

Directorate General for Social Cohesion

The cantonal authority responsible for social and medical-welfare policy. Support for informal carers.

Avenue des Casernes 2
1014 Lausanne
Tel. 021 316 52 21
procheaidant@vd.ch
www.vd.ch/dgcs
www.vd.ch/proches-aidants

Telephone helpline for guidance
to patients and residents in cases
of conflict or complaint

Helpline provided by the Canton offering listening and guidance services to patients, residents and close relations in the event of difficulties with a healthcare professional or health and social care institution.

Avenue des Casernes 2
1014 Lausanne
Tel. 021 316 09 87
orientation.doleances@vd.ch
www.vd.ch/plaintes-sante-social

BCMSS | Cantonal health and social care
mediation office

Impartial and independent listening service offering mediation for complaints relating to violation of patients' or residents' rights.

Rue Pré-du-Marché 23
1004 Lausanne
Tel. 021 316 09 86
mediation.sante@vd.ch
www.vd.ch/mediation-sante

COP | Commission for examination
of complaints from patients, residents
or users of healthcare establishments
and establishments for disabled people

Impartial and independent body, which aims to ensure respect for the rights of patients and residents and has power to order disciplinary measures.

Avenue de la Gare 41
1014 Lausanne
Tel. 021 316 09 85
info.santepublique@vd.ch
cop@vd.ch
www.vd.ch/cop

SVMD | Vaud dentists association

Offers patients high-quality care and a network of specialists.

Route du Lac 2
1094 Paudex
Tel. 021 351 54 04
secretariat@svmd.ch
www.svmd.ch

ASSUAS | Swiss association
for the insured

Provides information and protection for the insured, particularly through legal assistance and representation.

Avenue Mon Repos 24
1005 Lausanne
Tel. 021 617 20 33
assuas@assuas-vd.ch
www.assuas-vd.ch

FRC Vaud | Consumer federation for
French-speaking Switzerland

Provides consumer information and protection, including in relation to health insurance.

Rue de Genève 17 | Case postale 585
1001 Lausanne 1 cases
Tel. 021 331 00 90
vaud@frc.ch
www.frc.ch

OSP | Swiss Patient Organisation

Association that advises patients and their close relations by telephone and at individual appointments.

Hôpital Nestlé du CHUV
Avenue Pierre-Decker 5
1011 Lausanne
Tel. 021 314 73 88
vd@spo.ch
www.chuv.ch

SVM | Vaud medical association

Professional association which represents Vaud doctors and defends their interests.

Chemin de Mornex 38
1002 Lausanne
Tel. 021 651 05 05
info@svmed.ch
www.svmed.ch

SVPh | Vaud Society of Pharmacy

Professional association which represents Vaud pharmacists and defends their interests

Route du Lac 2
1094 Paudex
Tel. 058 796 33 33
info@svph.ch
www.svph.ch

FEDEREMS | Federation of Vaud care home employers

Covers over 40 establishments, including care homes, nursing homes, a respite care centre and sheltered accommodation.

Route du Lac 2
1094 Paudex
Tel. 058 796 35 65
info@fedeps.ch
www.federems.ch

HéviVA | Vaud association of medical, psychiatric and social care institutions

Offers home care and accommodation services.

Rue du Caudray 6
1020 Renens
Tel. 021 721 01 60
info@heviva.ch
www.heviva.ch

AVASAD | Vaud home care and home help association

Offers support services for informal carers and advice and advice and social support.

Avenue de Rhodanie 60
1014 Lausanne
Tel. 021 623 36 36
info@avasad.ch
www.cms-vaud.ch

AOSAD | Vaud association of private home care providers

Covers over 20 private home care organisations.

Route du Lac 2
1094 Paudex
Tel. 058 796 35 65
info@fedeps.ch
www.aosad.ch

FEDEPS | Federation of home care providers

Covers both accommodation and health and social support (FEDEREMS) and private home care (AOSAD).

Route du Lac 2
1094 Paudex
Tel. 058 796 35 65
info@fedeps.ch
www.fedeps.ch

AVOP | Vaud association of private organisations for people in need

Represents and defends the interests of the canton's 65 social care institutions and special schools.

Chemin du Rionzi 63
1052 Le Mont-sur-Lausanne
Tel. 021 621 89 30
info@avop.ch
www.avop.ch

Facility for mediation between patients, their close relations and professional staff

CHUV | University Hospital of Vaud
Rue du Bugnon 46
1011 Lausanne
Tel. 021 314 08 08
mediation.hospitaliere@chuv.ch
http://www.chuv.ch/mediation-hospitaliere

FHV | Vaud Hospital Federation

Represents the interests of Vaud hospitals.

Route de Cery 4
1008 Prilly
Tel. 021 643 73 53
secretariat@fhv.ch
www.fhv.ch

Vaud Clinics | The Association

Represents private clinics in the canton of Vaud and defends user-focused care and a sense of service, together with free competition and the defence of freedom of choice.

Route du Lac 2
1094 Paudex
Tel. 058 796 38 88
vaud-cliniques@centrepatronal.ch
www.vaud-cliniques.ch

**Espaces Proches (Vaud)
Spaces for friends and family**

Informs, guides and supports close relations and informal carers.

Place Pépinet 1
1003 Lausanne
Hotline : 0800 660 660 (gratuit)
info@espaceproches.ch
www.espaceproches.ch

Informal carers' association

Supports informal carers with mutual collective action.

Tel. 0800 77 88 00
info@proches-aidants.ch
www.proches-aidants.ch

LADA | Sheltered accommodation with adaptations

Rent a LADA in Vaud canton or find out more.

More information :
www.vd.ch/lada

CER-VD | Cantonal committee on the ethics of research on human subjects

Monitors the protection of research subjects and assesses the compliance of research projects with ethical, legal and scientific requirements and good research practices.

Avenue de Chailly 23
1012 Lausanne
Tel. 021 316 18 36
scientifique.cer@vd.ch
www.cer-vd.ch

Pro Senectute Vaud

Cares for seniors and encourages their social inclusion and participation.

Rue du Maupas 51
1004 Lausanne
Tel. 021 646 17 21
info@vd.prosenectute.ch
www.vd.prosenectute.ch

AVIVO Vaud

Mutual support association which defends the interests and quality of life of retired people.

Place Chauderon 3
1003 Lausanne
Tel. 021 320 53 93
info@avivo-vaud.ch
www.avivo-vaud.ch

Alter ego

Association for the prevention of elder abuse.

Avenue du Simplon 23
1800 Vevey
Tel. 0848 00 13 13
coordination@alter-ego.ch
www.alter-ego.ch

Pro Infirmis

Advises, helps and supports people with a physical or learning disability or mental illness, and their friends and families.

Rue du Grand-Pont 2bis | Case postale 1189
1001 Lausanne
Tel. 058 775 34 34
vaud@proinfirmis.ch
www.proinfirmis.ch

Solidarité-Handicap mental

Defends the rights and autonomy of disabled people, particularly those with a learning disability, and provides continuing education and access to culture and leisure activities.

Rue du Maupas 49
1004 Lausanne
Tel. 021 648 25 82
shm@solidarite-handicap.ch
www.solidarite-handicap.ch

Insieme Vaud

Vaud association of parents and people with learning difficulties.

Chemin de Malley 26 | Case postale 190
1000 Lausanne 16
Tel. 021 341 04 20
www.insiemevaud.ch

Autisme Vaud

Works for the rights of autistic people and their families and improvements in their quality of life.

Rue du Petit-Chêne 20
1003 Lausanne
Tel. 079 891 92 36
vaud@autisme.ch
www.autismevaud.ch

Cap | Contact association

Defends the rights of disabled people in all aspects of daily life.

Rue de Sébeillon 9b
1004 Lausanne
Tel. 021 653 08 18
service.social@cap-contact.ch
www.cap-contact.ch

Forum Handicap Vaud

Promotes and coordinates action to defend the interests of disabled people in the canton of Vaud.

Rue de Sébeillon 9b
1004 Lausanne
Tel. 077 421 87 37
info@fhvd.ch
www.fhvd.ch

Procap Lausanne et environs

Mutual self-help for disabled people.

Allée du Bornan 8a
1007 Lausanne
Tel. 021 617 60 12
procap.lausanne@bluewin.ch
www.procap-lausanne.ch

Association CARA

Makes a platform available to the public in French-speaking Switzerland, enabling patients to access their medical records by means of the electronic patient record (EPR) and other resources facilitating collaboration between healthcare professionals.

Route de la Corniche 3a
1066 Epalinges
Tel. 021 566 84 51
info@cara.ch
www.cara.ch

Epi-Suisse | Swiss Epilepsy Association

Supports and advises members on medical issues.

Avenue de Beaulieu 9
1004 Lausanne
Tel. 021 729 16 85
info@epi-suisseromande.ch
www.epi-suisse.ch

ASPEDA

Swiss association of parents of children with hearing loss.

Belpstrasse 24
3007 Berne
Tel. 031 731 33 44
info@aspeda.ch
www.aspeda.ch

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