

# Are healthcare professionals sufficiently aware of medical ethics? Fields research in southeast Turkey

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## Research article

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## **Abstract**

**Background:** The aim of this study was to evaluate the awareness of healthcare personnel in the Dentistry Faculty of Dicle University about “the legal responsibilities of dental practitioners” and “patient rights”.

**Methods:** The study included 150 volunteers who were healthcare workers in the Faculty of Dentistry , Dicle University between June and July 2019. The subjects were randomly selected from 5 different Professional groups and data were collecte dusing a single data collection form. All items on the form were grade dusing a 5-point Likert –type response. In the statistical analyses, Pearson’ s Chi-square, Yates Chi-square and the Fisher Exact tests were used.

**Results:** The questionnaire responses showed that 61.3% of the study participants had received training on patient rights and 56.7% had information about the legal responsibilities of dentists. The rate of dentists who had received training was below average and 38.9% of the dentists reported not having any information about their own legal responsibilities. A positive response was given to the items on the questionnaire by 58% and a negative responseby 33%. The responses to some items were seen to have been affected by variables such as age, gender and professional group.

**Conclusion:** Although some confusion was experienced by the healthcare personel about patient rights and the legal responsibilities of dentists, the levels of awareness were evaluated as satisfactory.

## **Background**

The concept of patient rights can be defined as fulfilling the basic needs and expectations of the patient. These rights are based on showing respect, receiving the best service, being informed correctly, consent for interventional procedures and patient confidentiality [1]. The first documentation related to patient rights was the Lisbon Declaration published by the World Medical Association in 1981. This declaration includes headings such as confidentiality of information, and the rights of the patient to select a physician, and accept or reject treatment. In Turkey, the“Patient Rights Guidelines” published by the Ministry of Health came into operation in 1998 [2, 3].

The basic rules related to patient rights -according to medical ethics- can be summarised as:

-Patients should benefit equally and in the best way from healthcare services. Patients should not be differentiated in respect of gender, race, language, beliefs and economic or social status.

- No individual or institution has the right to remove the patient’s right to life. With the exception of medical and legal necessities, the integrity of the body cannot be touched without the consent of the individual. Obtaining informed consent is a prerequisite.

- When it is necessary to explain the risks of diagnosis and there commended treatment services, the patient must be given an example of the medical records.

- The patient must be able to obtain information about the attending physician and other healthcare personnel. The patient has the right to select a physician, and accept or reject or halt treatment. When necessary, the patient must be transferred to another healthcare facility.
- Information related to the patient must be kept confidential. The patient must be able to access communication and religious services. When necessary, the patient must be able to submit a complaint [4].

An increased work load and some economic, social and technological problems can cause problems in healthcare personnel-patient communication. It is a primary duty and responsibility of healthcare personnel to pay attention to patient rights and to prevent neglect of these rights [5, 6]. Patients should have sufficient information and sensitivity about their own rights [7, 8].

The most important criteria of high-quality healthcare service is sensitivity shown to meeting the needs and expectations of patients and patient satisfaction [9, 10]. Patient satisfaction is the difference between the service imagined and perceived by the patient [11]. Factors affecting patient satisfaction include the age, gender, education level and income level of the patient, and the educational level of the health care personnel [12, 13].

In Turkey, a system protecting patient rights and preventing medical mistakes has still not been fully implemented. Especially during dental services, the predominant view is that patient rights are neglected. However, as a result of incorrect interventional procedures, there are criminal, compensation and administrative responsibilities. Criminal responsibility arises from carelessness and lack of precautions taken by the physician. Compensation responsibility corresponds to financial and emotional damage experienced by the patient and their family. Administrative responsibility is determined with a disciplinary investigation to be conducted by the dental association or institution where the dentist is employed [14].

For dentists to be able to be free of legal liability:

1. The diagnosis and treatment must be made only by the dentist,
2. Treatment applications must be based on medical, social or psychological indications,
3. Written informed consent must be obtained from the patient before interventional procedures,
4. Treatment procedures must be applied with care as required by the dental specialist area, [4, 14].

To improve the quality of the services provided, patient satisfaction should be periodically evaluated [15, 16]. Questionnaire studies applied will contribute to healthcare planning [17]. In recent years, there have been several scientific studies and activities on the subject of patient rights in Turkey. A significant proportion of these have measured the awareness of patients and physicians [3, 15, 18]. As patients have more communication with healthcare personnel other than physicians, and a significant amount of medical and administrative procedures are conducted by these personnel, it is necessary to evaluate their awareness [19].

In accordance with this understanding, the aim of this study was to evaluate the awareness of healthcare personnel working in the Dental Faculty of Dicle University about patient rights and the legal responsibilities of dental practitioners.

## Methods

The study was conducted with a total of 150 volunteers selected at random from 5 different groups [dental practitioner, nurse, healthcare clericalstaff, healthcare technician, and other auxiliary healthcare personnel) who were employed in the Faculty of Dentistry, Dicle University between June and July 2019.

A data collection form consistent with the Ministry of Health Patient Rights Guidelines was used in the study. Literature on this subject was scanned for benefit to be taken from several studies when preparing the questionnaire. Approval for the study was granted by the Ethics Committee of the Faculty of Dentistry, Dicle University (decision no: 2019/3). The questionnaire comprised a total of 25 items in 2 sections. The responses were in the form of positive and negative statements as a 5-point Likert-type response: 1= I definitely agree, 2= I agree, 3= I am undecided, 4= I do not agree, 5= I definitely do not agree [Table 1].

Data obtained in the study were analysed statistically using R version 3.2.3 (2015-12-10), Copyright (C) 2015 The R Foundation for Statistical Computing free software. In the statistical evaluation of categorical variables (number, percentage), the Pearson Chi-square, Yates Chi-square and Fisher Exact tests were used. A confidence interval of 95% was applied. A value of  $p<0.05$  was accepted as statistically significant. Table 1. The opinions of the healthcare personnel

## Results

At the end of the study, it was determined that the Professional distribution was not balanced, as dentists comprised 75% of the study sample [Table 2], males and females were represented equally [Table 3], and more than half the participants were in the 18-25 years age group [Table 4].

Patient right training had been received by 61.3% of the participants and not received by 38.7%. Of all the respondents, 56.7% had information about the legal responsibilities of dentists, and 43.3% did not. The general findings of the responses given by the participants are shown in Table 1, information about job title is given in Table 2, gender variables in Table 3, and educational level in Table 4.

The responses of "I definitely agree" and "I agree" were evaluated as positive and "I do not agree" and "I definitely do not agree" were evaluated as negative. The response of "I am undecided" was not taken into consideration.

Accordingly, to the question "have you received training about patient rights?", 57.8% of the respondents in the 18-25 years age group gave a negative response, and as age increased so the rate of having received training increased. Of the nurses and clerical staff, 100% had received training, and the rate was observed to fall to 54.9% for dentists.

To the question, "do you know about the legal responsibilities of dentists?", 56.6% of the respondents in the 18-25 years age group gave a negative response and as age increased, so the awareness also increased. Of the dentist group, 61.1% stated a level of knowledge and this rate fell to 40% for nurses.

To the statement, "The dentist should give information about complications to a patient who is receiving treatment for the first time", respondents supported the view at approximately 98% and the opposing rate was 1.5%.

The statement, "The dentist can refuse to see a patient for Professional or personal reasons" was supported by approximately 75% and opposed by 11%. A positive view was given by 87% of the dentists, 54% of the dental technicians and 50% of the nurses. Males responded positively at the rate of 80% and females at 71%.

The statement, "The dentist can leave a patient without finishing the treatment for Professional or personal reasons" was supported by approximately 31% and opposed by 55%.

The statement, "The dentist can prescribe drugs for patients with a general prescription" was supported by approximately 29% and opposed by 42%.

The statement, "The dentist can perform treatments such as botox and dermal fillers without a specialist certificate" was supported by 40% of the male respondents and 24 % of the female respondents.

The statement, "The dentist can write a sicknote for a patient without a specialist certificate" was supported by approximately 71% and opposed by 23%.

The statement, "The dentist can diagnose and prescribe drugs for a disease other than in his own field (diabetes, hypertension)" was supported by 9% and opposed by 81%.

The statement, "Patient consent must be obtained for every kind of medical intervention, and the patient must benefit from these" was supported by 93% and opposed by 4%. A positive response was given by 100% of the clerical staff, dental technicians and other personnel, by 92% of the dentists and 80% of the nurses.

The statement, "The patient has the right to know the identity, position and title of the dentist and other personnel who will provide the healthcare and has the right to select and change the personnel who will provide the healthcare" was supported by approximately 73% and opposed by 15%. A positive response was given by 80% of the auxiliary healthcare personnel, 75% of the dentists and 70% of the nurses.

The statement, "There is a responsibility to give full and complete information related to the patient's health" was supported almost equally by males (93%) and females (92%).

The statement, "Medical interventions can only be made without patient consent because of medical necessity and when precautions must be taken in respect of public health" was supported by

approximately 53% and opposed by 23%. A positive response was given by 67% of the health care clerical staff, by 58% of dentists and 50% of nurses.

The statement, "The patient can request all kinds of information verbally and in writing related to their health status" was supported by approximately 90% and opposed by 5%.

## Discussion

In Turkey, the awareness of patients about their own rights is not at the desired level, for reasons such as lack of information, hesitation by healthcare personnel, and the concern that nothing would change or the situation would become worse for them. In a 2007 study conducted in Denizli State Hospital, the results showed that 76.6% of patients had no information about patient rights, 70.3% would not complain if there were a problem, 81.6% did not know where they could make a complaint, and 29.4% thought that even if they made a complaint, nothing would change [20].

However, great progress has been made in recent years with mass communication and education. In a study by Zaybak et al, those living in the city centre were seen to use patient rights at a higher level than those in provincial centres or villages. Information about the subject for illiterate patients was determined to originate from the media [5].

Eksen et al emphasised that females were more sensitive to the subject of patient rights than males [21]. However, another study conducted in Kayseri reported that males had a higher level of knowledge about patient rights than females, and with a greater length of time as a physician, so the level of knowledge increased [22]. Topbaş et al determined that approximately 60% of physicians in a Medical Faculty knew about patient rights [3]. In a study by Eşiyok et al, it was stated that 43.1% of dentists had received training on the subject of patient rights [23]. In a similar study, Teke et al reported that 55% of nurses had received training about patient rights [9].

Previous studies have shown that information about patient rights is generally acquired in training after graduation. Ozturk et al concluded that although physicians and nurses working in state hospitals and university hospitals had a high level of knowledge, these rights were not sufficiently respected in university hospitals [24]. When evaluating the approach to patient rights of personnel in first-level healthcare institutions, Ocaktan et al reported that 30.9% of personnel had acquired knowledge related to patient rights with training before graduation, and 48.8% had received training after graduation [25].

In the results of the current study, it was seen that approximately 61% of healthcare personnel had received training on patient rights [100% of those aged 36 years and above, and 42% of those younger than 25 years. The rate of dentists who had received training was observed to be below average. It was noteworthy that 38.9% of the dentists did not have knowledge about their own legal responsibilities. When the responses of the healthcare personnel to the questionnaire items were examined according to age, there was determined to be a statistically significant difference in the responses to items 4, 5, 9, 11, 17 and 25 ( $p < 0.05$ ). When the responses were examined according to Professional group, there was

determined to be a statistically significant difference in the responses to items 4, 7, 8, 20, 23 and 24 ( $p < 0.05$ ). In the evaluation of the responses according to gender, the only item showing a statistically significant difference was item 20 ( $p < 0.05$ ).

The results obtained indicated a need for the subjects of patient rights and the legal responsibilities of physicians to be added to the curriculum in further education colleges and faculties training healthcare personnel. There is a significant requirement for in-service training after graduation to be repeated at certain intervals and for scientific activities to be organized. Increasing awareness on the subject of patient rights will contribute to increasing patient satisfaction and improving the quality of service. Patient satisfaction questionnaires applied at certain intervals will be of guidance in taking the necessary precautions.

In the current study, positive responses to the items in the questionnaire were at the rate of approximately 58% and negative responses were at the level of 33%. The items with a high rate of positive response were item 8 (97.9%), item 19 (92.7%) and item 25 (90%). These rates provide information that the interventional healthcare services applied in our hospital are patient-centred. The items with a high rate of negative responses were item 18 (81.4%), item 16 (65.3%), item 15 (55.4%) and item 10 (54.6%). These results demonstrate that the healthcare personnel participating in the study act in accordance with ethical rules and the dentists showed sensitivity to remaining within their legal responsibilities.

The responses to some of the items were extremely interesting:

The statement, "The dentist can refuse to see a patient for professional or personal reasons" was supported by 87% of the dentists, and 50% of the nurses. Males responded positively at the rate of 80% and females at 70.7%.

The statement, "Patient consent must be obtained for every kind of medical intervention, and the patient must benefit from these" was supported by 100% of the clerical staff and dental technicians and although supported by 92% of the dentists and 80% of the nurses, these latter two groups were relatively more undecided.

It was extremely interesting that the statement, "The patient has the right to know the identity, position and title of the dentist and other personnel who will provide the healthcare and has the right to select and change the personnel who will provide the healthcare" was supported by almost three-quarters (73.4%) of all the personnel.

When the results of this study were compared with previous findings in literature, they were found to be similar. Despite some confusion about the subjects of patient rights and the legal responsibilities of dentists, it was pleasing to see that the levels of awareness were satisfactory.

## Conclusion And Recommendations

The results of this study demonstrated that the healthcare personnel in the Dental Faculty of Dicle University were evaluated relatively positively in respect of their knowledge and attitudes towards patient rights. It was observed that as the level of training increased together with the time spent in the profession, there was a positive development in the behaviours related to patient rights. Healthcare personnel should not forget that the patients are the reason that they are there, and policies should be followed that prioritise patient rights and patient satisfaction.

This study was presented at the 26th International Scientific Congress and Exhibition of Izmir Chamber of Dentists (8–10 November 2019) in Izmir/Turkey.

## Declarations

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### Availability of data and materials

The datasets used and/or analysed during the current study are available from the corresponding author on reasonable request.

### Consent for publication

All participants in this study gave full written informed consent for participation and publication.

### Competing interests

The authors declare that they have no competing interests.

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## Tables

Table 1 The opinions of the healthcare personnel

Questionnaire

1.Gender      Female      Male

2.Age      18-25      26-35      36-45      46 and older

3.Profession      Dentist      Nurse      Healthcare clerical worker      Healthcare technician      Other

4.Have you received training about patient rights?      Yes No

5. Do you know about the legal responsibilities of dentists?

- Yes, I have some knowledge on this subject    No, I have no knowledge on this subject

Item No	ITEM	Responses									
		I definitely agree		I agree		I am undecided		I do not agree		I definitely do not agree	
		n	%	n	%	n	%	n	%	n	%
6	Every dentist has the authority to make age determinations	47	31.3	54	36	30	20	15	10	4	2.7
7	The dentist must not takeover a colleague's patients	93	62	36	24	6	4	9	6	6	4
8	The dentist should give information about complications to a patient who is receiving treatment for the first time	118	78.6	29	19.3	1	0.7	1	0.7	1	0.7
9	The dentist can refuse to see a patient for Professional or personal reasons	67	44.6	46	30.7	21	14	13	8.7	3	2
10	The dentist can leave a patient without finishing the treatment for Professional or personal reasons	22	14.7	24	16	22	14.7	57	38	25	16.6
11	The dentist has the authority to print a notice of thanks in the form of an advertisement in newspapers	8	5.3	22	14.7	67	44.7	28	18.7	25	16.6
12	The dentist can open a vascular route for intervention to the patient in emergency situations	39	26	50	33.3	30	20	18	12	13	8.7
13	The dentist can prescribe drugs for the patients with a green prescription	14	9.3	30	20	43	28.7	28	18.7	35	23.3
14	Every dentist can prepare an expert report in forensic cases.	35	23.3	42	28	28	18.7	31	20.7	14	9.3
15	The dentist can perform treatments such as botox and dermal fillers without a specialist certificate	25	16.6	23	15.3	19	12.7	37	24.7	46	30.7
16	The dentist can apply treatments under general anaesthesia without a specialist certificate	13	8.7	19	12.7	20	13.3	41	27.3	57	38
17	The dentist can write a sick note for a patient without a specialist certificate	58	38.6	49	32.7	9	6	18	12	16	10.7
18	The dentist can diagnose and prescribe drugs for a disease other than in his own field (diabetes, hypertension)	8	5.3	5	3.3	15	10	49	32.7	73	48.7
19	Patient consent must be obtained for every kind of medical intervention, and the patient must benefit from these	115	76.7	24	16	5	3.3	5	3.3	1	0.7
20	A diagnosis can be withheld from a patient if it is going to worsen a psychological state or exacerbate the disease.	24	16	35	23.3	32	21.4	29	19.3	30	20
21	The patient has the right to know the identity, position and title of the dentist and other personnel who will provide the healthcare and has the right to select and change the personnel who will provide the healthcare	64	42.7	46	30.7	18	12	17	11.3	5	3.3
22	There is a responsibility to give full and complete information related to the patient's health	101	67.3	38	25.3	3	2	4	2.7	4	2.7
23	The patient is liable for any damage to hospital materials	69	46	25	16.6	28	18.7	13	8.7	15	10
24	Medical interventions can only be made without patient consent because of medical necessity and when precautions must be taken in respect of public health	35	23.3	45	30	36	24	12	8	22	14.7
25	The patient can request all kinds of information verbally and in writing related to their health status	89	59.3	46	30.7	7	4.7	5	3.3	3	2

Table 2 Opinions of the healthcare personnel according to Professional group

Item9	The dentist can refuse to see a patient for Professional or personal reasons.					Total no of respondents
	I definitely agree	I agree	I am undecided	I do not agree	I definitely do not agree	
Dentist	54.9%	31.9%	8%	3.5%	1.7%	113
Nurse	10%	40%	30%	20%	0%	10
Healthcare clericalworker	11.1%	11.1%	55.6%	11.1%	11.1%	9
Healthcare technician	15.4%	38.5%	15.4%	30.7%	0%	13
Other	20%	0%	40%	40%	0%	5
Total	44.7%	30.7%	14%	8.7%	2%	150
Item 19	Patient consent must be obtained for every kind of medical intervention and the patient must benefit from these.					Total no of respondents
	I definitely agree	I agree	I am undecided	I do not agree	I definitely do not agree	
Dentist	73.5%	18.6%	3.5%	3.5%	0.9%	113
Nurse	80%	0%	10%	10%	0%	10
Healthcare clericalworker	77.8%	22.2%	0%	0%	0%	9
Healthcare technician	92.3%	7.7%	0%	0%	0%	13
Other	100%	0%	0%	0%	0%	5
Total	76.7%	16%	3.3%	3.3%	0.7%	150
Item 21	The patient has the right to know the identity position and title of the dentist and other personnel who will provide the healthcare and has the right to select and change the personnel who will provide the healthcare.					Total no of respondents
	I definitely agree	I agree	I am undecided	I do not agree	I definitely do not agree	
Dentist	39.8%	35.4%	10.6%	9.7%	4.5%	113
Nurse	60%	10%	10%	20%	0%	10
Healthcare clerical worker	44.5%	22.2%	0%	33.3%	0%	9
Healthcare technician	46.2%	15.4%	30.8%	7.6%	0%	13
Other	60%	20%	20%	0%	0%	5
Total	42.7%	30.7%	12%	11.3%	3.3%	150
Item 24	Medical interventions can only be made without patient consent because of medical necessity and when precautions must be taken in respect of public health					Total no of respondents
	I definitely agree	I agree	I am undecided	I do not agree	I definitely do not agree	
Dentist	23.9%	33.6%	23.9%	8.8%	9.8%	113
Nurse	20%	30%	20%	10%	20%	10
Healthcare clerical worker	33.3%	33.3%	33.3%	0%	0%	9
Healthcare technician	15.4%	7.7%	23.1%	7.8%	46.2%	13
Other	20%	0%	20%	0%	60%	5
Total	23.3%	30%	24%	8%	14.7%	150

Table 3 Opinions of the healthcare workers according to gender

Item 9	The dentist can refuse to see a patient for Professional or personal reasons					Total no of respondents
	I definitely agree	I agree	I am undecided	I do not agree	I definitely do not agree	
Female	44%	26.7%	18.7%	10.6%	0%	75
Male	45.3%	34.7%	9.3%	6.7%	4%	75
Total	44.7%	30.7%	14%	8.7%	2%	150
Item 15	The dentist can perform treatments such as botox and dermal fillers without a specialist certificate					Total no of respondents
	I definitely agree	I agree	I am undecided	I do not agree	I definitely do not agree	
Female	12%	12%	13.3%	28%	34.7%	75
Male	21.3%	18.7%	12%	21.3%	26.7%	75
Total	16.7%	15.3%	12.7%	24.7%	30.7%	150
Item 22	There is a responsibility to give full and complete information related to the patient's health.					Total no of respondents
	I definitely agree	I agree	I am undecided	I do not agree	I definitely do not agree	
Female	72%	20.5	1.3%	4%	2.7%	75
Male	62.7%	30.7%	2.7%	1.3%	2.7%	75
Total	67.3%	25.3%	2%	2.7%	2.7%	150

Table 4 Responses of the healthcare personnel according to the training received

Item4	Have you received training about patient rights?				
	18-25 years (%)	26-35 years (%)	36-45 years (%)	46 years< ... (%)	Total (%)
Yes	42.2	81.1	100	100	61.3
No	57.8	18.9	0	0	38.7
Total no of respondents	83	53	9	5	
Item 4	Have you received training about patient rights?				
	Dentist(%)	Nurse(%)	Healthcare clerical worker(%)	Healthcare technician(%)	Other(%)
Yes	54.9	100	100	53.8	80
No	45.1	0	0	46.2	20
Total no of respondents	113	10	9	13	5
Item 5	Do you know about the legal responsibilities of dentists?				
	18-25 years (%)	26-35 years (%)	36-45 years (%)	46 years< ... (%)	Total (%)
Yes	43.4	69.8	77.8	100	56.7
No	56.6	30.2	22.2	0	43.3
Total no of respondents	83	53	9	5	
Item 5	Do you know about the legal responsibilities of dentists?				
	Dentist(%)	Nurse(%)	Healthcare clerical worker(%)	Healthcare technician(%)	Other(%)
Yes	61.1	40	55.6	46.2	20
	38.9	60	44.4	53.8	80
Total no of respondents	113	10	9	13	5