

Hospitalization without patient consent

Hospitalization without the patient's consent is only possible in a few serious cases, namely:

1. if his condition precludes giving consent (unconsciousness , intoxication ...);
2. ordered by the court;
3. if he threatens himself or his surroundings in an immediate and serious manner and shows signs of a mental disorder or suffers from this disorder or is under the influence of an addictive substance, if the threat to the patient or his surroundings cannot be averted otherwise;
4. diseases for which treatment is prescribed by special prescription.

Hospitalization without the consent of the patient or withdrawal of consent to it must be reported to the relevant court within 24 hours, which will initiate detention proceedings (*judicial review of the legality of hospitalization without consent*), in which it will appoint a guardian for the detainee, interview the patient and the doctor, and decide within 7 days whether to take over occurred for legal reasons. If the anticipated period of hospitalization is longer than 3 months, an expert opinion must be drawn up and based on it, the court will decide whether it is permissible to keep the patient in the institution. This decision is valid for one year.

Patient rights

A patient hospitalized without consent has the right^[1] :

- for a detailed explanation without delay,
- have a representative, confidant or supporter who will also be informed and with whom they can talk in private,
- have everything reviewed by an independent doctor.

Protective treatment (institutional or outpatient)

- psychiatric,
- anti-alcohol and anti-drug,
- sexological.

Protective treatment is imposed by the court on the basis of expert testimony in cases of criminal offenses committed by offenders of reduced sanity or insane persons whose stay at liberty is dangerous for society, as well as in the case of alcoholics and other drug addicts who commit crimes in connection with their susceptibility. In the case of a **juvenile** , punishment may be waived and replaced by **protective education** . The court decides on the dismissal on the proposal of the attending physician.

Restraints

The options for restraints are exhaustively defined - the Health Services Act provides a complete list of them, including the conditions of their use. ^[2] . They are used exclusively as indicated by a doctor and the patient must be constantly monitored during their use. When restraints are used (with the exception of grip), it is necessary to inform the court and initiate detention proceedings, if the patient does not give consent within 24 hours. ^[3].

List of restraints:

- handling of the patient by healthcare workers or other persons designated for this purpose by the provider,
- restricting the patient's movement with protective belts or courts,
- placing the patient in a mesh bed; this does not apply in the case of providing an interception service,
- placing the patient in a room intended for safe movement,
- a protective jacket or vest preventing the movement of the patient's upper limbs,
- psychopharmaceuticals, or other medicinal products administered parenterally,
- combination of means.

Usage:

- in a situation of immediate threat to the life, health or safety of the patient or other persons,
- we can only use them if the above reasons persist,
- we must always try a gentler approach the first time.

Notification matters

Notification is made when a patient is hospitalized without consent, when a patient is hospitalized after consent to hospitalization is withdrawn, and when restraints are used ^[3] . **This must be done within 24 hours and the so-called detention procedure** (*judicial review of the legality of hospitalization without consent*) will be initiated ^[4] .

Links

Related Articles

- Informed consent of the patient

References

1. Czech Republic. Civil Code. 2012. 89/2012 Coll., §§ 104–110. Also available from the URL < <https://www.zakonyprolidi.cz/cs/2012-89> >.
2. Czech Republic. Health Services Act. 2011. 372/2011 Coll., § 36. Also available from the URL < <https://www.zakonyprolidi.cz/cs/2011-372> >.
3. TĚŽKOVÁ, Jolana. *Basic principles and terminology in medical law* [lecture on the subject Public health and medical law, field of general medicine, 1st Faculty of Medicine, Charles University in Prague]. Prague. 3/3/2014.
4. Czech Republic. Law on Special Court Proceedings. 2013. 292/2013 Coll., § 66. Also available from the URL < <https://www.zakonyprolidi.cz/cs/2013-292> >.

References

- Langenbeck's medical web page

Recommended reading

- Zvolský P.: General psychiatry, 1997;
- Zvolský P.: Special psychiatry, 1994;
- Raboch J., Zvolský P. et al.: Psychiatry Galén 2001;
- Horáček J. et al.: Psychotic conditions in clinical practice, Acad.Med. Prague. 2003;
- Raboch J., Pavlovský P. et al. Clinical psychiatry in daily practice, Galén Prague, 2008.