

**Vasquez Abanto J.E.,**  
*Candidate of Medical Science,  
Physician in the Emergency Department Obolon district of Kyiv city  
Public non-profit enterprise № 3  
(Center of primary medical and sanitary help № 2)*

**Vasquez Abanto A.E.,**  
*student,  
National Medical University named after O.O. Bohomolets*

## BIOETHICS AND PHYSICIAN'S PRACTICES

Medicine does not belong to the category of the exact sciences and quite acceptable different ways to achieve the same goal. In medicine, the authority, the ability to mobilize the latent powers of the body, lift the spirit, inspire confidence in a favorable outcome of the disease state is extremely important.

In the health-care and diagnostic process recommended a wide variety of methods and tools, sometimes as it may seem paradoxical, directly opposite each other. In clinical practice, along with the latest tools can be used and old, at first glance seem inefficient, but in the individual practice of a professional productive. Each specialist has the right to prioritize

the resolution of questions about the health of his patient.

There is no doctor who wouldn't be mistaken, though this conclusion can be very relative, in strict dependence on the one who and as estimates action of the doctor. Ethics and collegiality in this context allow the medical community to unite and speak with one voice for the benefit of the patient, to the best solution, consider the situation from different perspectives. In other words is important in medicine «teamwork».

In recent years, unfortunately, the commercialization of medicine leads to the gradual disappearance of the notion of «collegiality». The struggle is not for the patient, for the client.

**Kachur O.Yu.,**  
*First deputy Minister of Health,  
Health Ministry of Ukraine*

## STRUCTURAL CHANGES IN HEALTH SERVICE SYSTEM OF UKRAINE

This article shows the strategy of reforms in Health Service system of Ukraine. It is demonstrated that the system is to be reformed as complex according to the levels of medical aid. Priority

is given to introduction of primary medical-and-sanitary aid on the background of family medicine. The second level of medical aid is also to be reformed that includes creation of hospital circuits with

hospitals of new type: intensive therapy hospitals, planned therapy hospitals, rehabilitation hospitals and hospices. The concentration of intensive care will improve the level of rational use of resources and improve its quality by increasing the skill level health workers through an increase in interventions. All types of health facilities need to be upgraded in accordance with predefined functions. Presented designed order of receipt of patients to secondary health care institutions. Also presented a strategy for reforming the system of emergency medical care.

Conditions for structural reform of the public health sector are: differentiation of primary and secondary levels of care, combining financial resources for

the provision of primary health care at district / city level, and secondary – at the regional level; freedom to choose GP practice, family doctor, who determines medical pathways, transfer of operational control of all the resources of health care at the primary level district / urban, secondary – at regional level. Specified that the implementation of planned reforms necessary to create a clear system of management changes and its functions are. An important task is to attract professional medical associations, coordinating councils in the health care management, supervisory boards at hospitals to make decisions about changes at the appropriate levels and training of managers and health care in the management in accordance with modern requirements.

**Slabkiy H.O.,**

*Professor, Department of high education organization,  
administration of health care and epidemiology  
Donetsk National Medical University named after M. Horvath*

**Shyshatska N.F.,**

*Obstetrician-gynecologist,  
Donetsk Regional Clinical Territorial Medical Association*

## MATRIX OF PATIENTS RIGHTS IN HEALTH SERVICE INSTITUTIONS

The issue of patients' rights are respected concerned about the world's international organizations such as the United Nations, the Council of Europe, the World Medical Association, World Psychiatric Association and others. European countries over the last few decades have made a number of important measures aimed at the development of patients' rights and developed European standards, which

became a reference point for the reform of health care systems in the European continent.

Shows the matrix of human patients, which was developed based on the norms of the «European Charter of Patients' Rights». The matrix consists of patients' rights 14 human, 175 indicators and 125 sub- indicators that reveal every detail right patient in a health facility. It is the following rights: getting preventive care,