

Importance of Patient Health and Well-Being

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Description

Many studies have shown that health literacy affects almost every aspect of health, from medical knowledge to mortality. Low health literacy is a major cause of health inequality. Studies have shown that health literacy is, in most situations, a more important predictor of health than race, socioeconomic status, or education level. Today's medical models, including patient-centric care facilities, often require patients to actively participate in their care.

However, patients with low health literacy are not familiar with the medical situation, have less knowledge of their medical condition, have fewer questions to ask during a doctor's consultation, and have difficulty filling out forms and understanding health information. It may not be there. Therefore, patients with low health literacy are at risk of reduced commitment. This affects the quality of care services provided. Clear communication is paramount, especially in environments where patient involvement is expected to be high. Patient safety is a medical field that has emerged with the increasing complexity of medical systems and the consequent increased harm to patients in healthcare facilities. It is intended to prevent and mitigate the risks, errors, and harms that patients suffer during medical care.

The basis of discipline is continuous improvement based on learning from mistakes and adverse events. Patient safety is the basis for providing quality basic medical services. Indeed, there is a clear consensus that quality medical services are effective and safe and should be centered on people around the world. In addition, medical services must be timely, equitable, integrated and efficient in order to enjoy the benefits of quality medical

care. Well-developed healthcare systems are responding to the increasing complexity of healthcare systems, making people more vulnerable to failure. For example, a patient in a hospital may receive the wrong drug due to a mistake in a similar package.

Prescriptions go through a variety of care stages, from ward doctors to pharmacies, dispensing, and nurses giving the wrong medicine to patients. If there was a validation process at various levels, this error could have been quickly identified and fixed. In this situation, there is a lack of standard procedures for storing drugs that look similar, a lack of communication between different providers, a lack of validation before administering the drug, and a lack of involvement in the patient's own care. It may cause an error. Doctors showed signs of a negative reaction to sick or more emotionally challenged patients, both in their behavior and satisfaction with their visits. Sick patients also behaved more negatively than healthy patients.

However, doctors have also shown a variety of positive and professionally appropriate behaviors for sick and suffering patients. This mixed reaction of pattern is described in terms of an alternative framework like physician goals, emotional interrelationships and physician ambivalence. The patient's health seems to influence the communication between the doctor and the patient. In clinical practice, increasing attention to the doctor's own behavior and the patient's behavior can improve diagnosis and prevent misunderstandings. Mental aspects are important for achieving general health, well-being, and quality of life (called health potential), as illness and hospitalization can cause mental distress. Patients need to address their mental needs.