Act on the status and rights of patients (785/1992, 10 §)

DEAR PATIENT/FAMILY MEMBER/OTHER CLOSE PERSON

If you are dissatisfied with the given treatment, care or service, you may submit an objection. The objection can be submitted using this objection form or as a freeform letter, in which it is stated that the letter is an objection. Under special circumstances, the objection can be submitted orally. If submitted orally, the objection is documented in this form by the person receiving the feedback.

Deliver the filled-in form to the patient ombudsman of the unit in question. The contact information of the ombudsmen are listed under "people in charge" in each unit, https://www.mehilainen.fi/haku?k=toimipisteet&q=

The reply to the objection is sent to the submitter of the objection in written form. A decision on an objection may not be appealed (Act on the status and rights of patients 15§). The objection and documents associated with the objection (replies requested from personnel and the reply to the submitter of the objection) are not attached to the patient records.

If needed, the patient ombudsman can provide information and assistance concerning the objection.

Person whose care or treatment this objection concerns	Name	Personal identity code
	Address	
		Telephone number
Subject of objection (if necessary, submit as separate attachment) ☐ attachment	☐ Malpractice, service or procedural error	
	☐ Patient record entries	
	☐ Certificates and statements	
	☐ Access to information	
	☐ Prescription of medicines	
	☐ Inappropriate conduct or treatment	
	☐ Compliance with secrecy provisions	
	☐ Access to treatment	
	☐ Other:	
Object of objection	Unit (e.g. ward, outpatient clinic)	
	Time of the event	
	Who (e.g. name and position) or what does the objection concern?	
Description of the event (if necessary, submit as separate attachment) ☐ attachment		
What measures does the submitter of the objection want Mehiläinen to take		

<table>
<tr><td rowspan="4">Date and contact information and signature of the submitter of the objection</td><td colspan="2">Name</td><td>Date</td></tr>
<tr><td colspan="3">Address</td></tr>
<tr><td colspan="2"></td><td>Telephone number</td></tr>
<tr><td colspan="3">Signature</td></tr>
<tr><td rowspan="2">Date and consent of the person the objection concerns</td><td colspan="3">I consent that a healthcare authority or other provider of healthcare services may provide information concerning my customership, that is necessary to the processing of the objection without the inhibition of what is stated about document secrecy and duty of confidentiality. I also consent that documents concerning the objection and the reply to the objection may be provided to the patient ombudsman.</td></tr>
<tr><td>Date</td><td colspan="2">Customer's signature</td></tr>
</table>

The objection does not limit your right to file a complaint to supervisory authorities. After receiving the reply to the objection, your right to file a complaint to supervisory authorities remains. Supervisory authorities are: Regional State Administrative Agencies, Valvira (the National Supervisory Authority for Welfare and Health), the Parliamentary Ombudsman, and the Chancellor of Justice of the Government. Filing a complaint is, however, not a means to appeal the decision on the objection.