

RECOGNIZING AND NAVIGATING ETHICAL ISSUES IN NURSING

Abstract

Nurses are essential to patients. Nurses have an impact on people's lives at some of life's highs and lows. As a result, it is critical that we consider nurses and nursing. What do our patients expect from nurses, and how do we, as a society, as nurses, and as health-care leaders, meet those expectations? The first step is to acknowledge that nursing, as a practise, is founded on moral values. The nursepatient relationship, which is central to the delivery of nursing care, is ethically significant. It is also critical to consider how the context in which nurses practise can shape and be shaped by nursing moral values. These moral values form what can be termed the ethical dimension of nursing. As a result, it is critical that we investigate and evaluate these moral values. Codes of conduct are a collective attempt by the nursing profession to express its underlying values. The institutions in which nurses work either facilitate or impede the actual expression of these values in nursing practise and patient care. We must recognise the interplay of these various factors to ensure that we, as nurses, potential patients, and members of society, understand what good nursing practise entails, how it manifests itself in practise, and how it can be supported. The purpose of this chapter is to identify the ethical domain of nursing practise and to emphasise its importance for good nursing care and a safe, supportive patient experience.

Keywords: Ethical domain , Nurse-patient relationship , Nursing ethics , Patient-centred care , Codes of conduct

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I. INTRODUCTION

Any person working in healthcare must adhere to ethical standards. Ethos, which in Greek means character, is where the word ethics first appeared. Ethics are universal rules of conduct that can be used to determine the actions, motivations, and intentions that are valued. 1 Ethics are moral precepts that direct someone's or a group's conduct and behaviour. It also includes the decision-making procedure for assessing the outcomes of those acts. The emphasis is on what is right and incorrect behaviour. 2 Each person has their own set of personal ethics and morals. Ethics within the sector are essential because healthcare workers must recognise ethical conundrums and make moral decisions while abiding by the regulations that oversee them. To perform their jobs properly and honourably, nurses, like all other healthcare workers, need control and direction from those in authority. 3The issue of ethics and economic efficiency in the supply and delivery of services in the Indian context gets complex when health indices are low. 4 Workers in the healthcare industry constantly encounter ethical and legal issues, which puts them at risk for burnout. As attempts are made to reduce health care costs, there is increasing pressure on employees to do more with less. Due to a shortage of resources, the standard of treatment must be compromised. Risks to patient safety could result in harm and legal action. According to bioethicists, using the ethical principles of autonomy, justice, doing good, and doing no harm can help medical staff deal with difficult situations. 5

A mind-boggling array of laws, rules, regulations, and ethical principles govern the twenty-first century. Even when medical staff members have the best of intentions, issues with patient relationships, informed consent, and confidentiality can appear out of nowhere. Being sued for negligence and malpractice is a perpetual possibility, and what is morally right in one day may not be in another. There are still outstanding difficulties around doctor aided death that need to be dealt out, even though medical procedures judged appropriate for adults might not be viewed as ethical for adolescents. 6

The branch of applied ethics that deals with ethical issues in the context of healthcare is concerned with the moral decisions that medical professionals must make. Depending on the country and culture, moral and ethical viewpoints in medicine commonly vary. The approach developed by Tom L. Beauchamp and James F. Childress for resolving ethical dilemmas in healthcare cuts across country boundaries and cultural variations. 7

This ethical framework adheres to four basic ethical principles for decision-making in the healthcare sector.

- 1. Autonomy:** To preserve the patient's autonomy, ascertain their wants.
- 2. Justice:** Follow the proper procedures to set healthcare spending caps and treat all patients fairly.
- 3. Beneficence:** Assess what is a good to be pursued and look out for the patient's best interests.
- 4. Non-maleficence:** Find out what constitutes harms to prevent.

These guidelines can assist healthcare providers in identifying moral conundrums and resolving them by speaking with patients about their wants and needs.

II. ETHICAL ISSUES IN HEALTH CARE

Every day, moral and legal judgments must be made by patients, families, and healthcare professionals. These difficult problems could have to do with techniques used in medicine, hospital management, or other problems that crop up in the healthcare industry. An immediate ethical conundrum in healthcare is making decisions for patients while they are unable of doing so. Other ethical issues, such as the argument over the right to an abortion or assisted suicide, may require a more complete, thoughtful approach. It is clear what is right and wrong when decisions are made regarding moral quandaries in healthcare, and frequently, many of the choices made today may have a long-term effect on healthcare in the future. 8

Healthcare professionals, clinical leaders, and patients all face a variety of ethical difficulties. Common medical ethical dilemmas include, for instance:

- 1. Privacy and confidentiality for patients:** The protection of patient privacy is one of the biggest moral and legal issues facing the healthcare sector. Conversations between a doctor and a patient are completely confidential, as is information regarding the patient's health. The Health Insurance Portability and Accountability Act, or HIPAA, establishes who may receive and under what conditions that information may be disclosed.
- 2. The spread of illness:** The right of healthcare professionals to safeguard themselves from infectious diseases, whether through direct or indirect contact with an infected patient, has received increasing attention in light of the recent global Ebola virus outbreak. When a patient's medical history is not disclosed to the personnel, ethical and legal issues arise.
- 3. Relationships:** A healthcare centre has a stringent policy against any sexual interactions between medical staff members or patients. Because sexual harassment can be detrimental to all parties involved, including the facility, the code of ethics needs to make this clear.
- 4. Death and dying issues:** Patients who are close to passing away often have specific requests regarding how they want to die. Families may find it challenging to decide whether to stop providing life support for a loved one. Both end-of-life challenges and problems that arise when caring for older patients who may not be able to make their own rational decisions require healthcare workers and clinical leaders to be prepared.
- 5. Efficiency and care quality in balance:** It might be difficult to evaluate how well health systems function. Two different sorts of risk result from this. On the one hand, decision-makers could come to the wrong conclusion about how to identify and deal with inefficiency, allowing bad performance to continue. Even worse, if spending cutbacks are necessary, decision-makers who adopt this pessimistic outlook might make indiscriminate, across-the-board cuts, running the risk of eliminating both inefficient and highly cost-effective activities. The second kind of risk is the use of insufficient analysis or interpretation of efficiency indicators by decision-makers to carry out reforms that go

after practises that appear to be wasteful.⁹ Quality care can be defined as meeting the patient's requirements and goals, both actual and perceived, with the least amount of resources possible. According to this definition, high-quality assistance would be that which includes appropriate individual care together with professional activities and ongoing care that are developed in accordance with the most current, accurate, and correctly implemented scientific information.¹⁰

- 6. Aggressive advertising techniques:** A hospital's services must adhere to a set of regulations, ethics, and standards when they are advertised and marketed. It is completely inappropriate for hospitals to advise patients to purchase unnecessary treatments in order to increase revenue. The hospital's main goal should be patient care, not marketing plans. The facility's marketing practises should always include some level of ethical committee participation to guarantee that any marketing campaign is tasteful and genuine.¹¹
- 7. Provided facts:** This is the one ethical matter in healthcare that can never receive enough consideration. A hospital must supply completely accurate and truthful information to advertising companies. It is crucial that the hospital's and its services' ads are truthful and accurate. Again, the welfare of the patients comes first.
- 8. Patient safety:** A doctor, nurse, or other healthcare worker caring for a patient needs to keep in mind that their first goal is to ensure their welfare. All confidential information must be kept that way. It's crucial for doctors to be truthful with their patients. No patient should ever be subjected to discrimination on the basis of colour, income, or sex, regardless of the personal opinions of the healthcare provider. Such discriminatory reports ought to be treated very seriously.
- 9. Geriatric patients:** Considering that elderly individuals are unable to make ethical decisions on their own, dealing with them might occasionally present challenges. The burden of making challenging decisions falls on their families as a result. When a person has a fatal illness and wishes to end their life to spare themselves needless pain, this process can be exceedingly challenging. Even if there are disagreements among the members of the ethical committee on these issues, proper ethical protocol must always be followed. To minimise unneeded uncertainty, it is vital to confirm whether the patient has a living will.
- 10. Therapies:** In order to reduce any trauma or stress resulting from an offending act, a patient or victim can be treated using a variety of approaches and therapies. There may also be hearings and inquiries regarding the incident.

In the modern healthcare industry, a wide variety of ethical problems could come up. The duty of an ethics committee of a hospital is to guarantee that all of its practitioners are familiar with the basic ethical principles.

III. PROFESSIONAL ETHICS

There are numerous approaches to introducing practical/professional ethics with various focuses.¹²

The pragmatic
The embedded
Theoretical
Emerging Problems

- 1. The pragmatic:** By taking into account how they might affect real-world situations, ethical considerations are introduced. The definition of consequences is in connection to:
 - The foundation for policies and practises established by regulatory organisations tasked in raising or upholding standards of professionalism.
 - The components of research ethics committees and affect how they decide.
- 2. The embedded:** Ethical issues are presented holistically as a component of a larger area of concern, such as professionalism or fitness for practise. The notion of professional identity is emphasised by the embedded approach.
- 3. Theoretical:** This strategy focuses on comprehending ethical theory. The application of various ethical theories to real-world circumstances is how the ethics of those situations are portrayed.
- 4. Emerging problems:** Professional ethics seeks to direct and mould graduate behaviour in order to fulfil public expectations with regard to professional conduct and accountability, which raises new questions and problems.

IV. ETHICAL ISSUES IN NURSING

Ethical issues arise when choices must be made but there are limited options and ambiguous solutions. The results could include subpar patient care, strained clinical relationships, and moral discomfort, which is described as knowing the correct thing to do but being unable to carry it through. Nurse managers in particular are prone to moral distress and nursing ethical issues because of their leadership and mentoring obligations. Nurses and other medical professionals have faith that nurse supervisors will make ethically upright decisions.

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V. CLINICAL RELEVANCE

High ethical standards must be upheld by all healthcare practitioners. Ethics in practise gives nurses, who face moral choices every day, a solid foundation. Ethical issues occur as nurses are providing care for patients. These ethical dilemmas could occasionally conflict with the nurse's ethical standards or the code of ethics. Nurses must maintain a balance while providing patient care because they also act as the patients' advocates. The four main concepts of ethics are autonomy, beneficence, justice, and non-maleficence.

Every patient is free to make their own decisions based on their own values and opinions. ¹⁴We refer to this as autonomy. The demand for autonomy of a patient may conflict with the best care recommendations or guidelines maintained by nurses or other healthcare professionals. A person is free to refuse any medications, treatments, surgeries, or

other medical procedures, regardless of any prospective advantages. When a patient decides against receiving a treatment that would be helpful, the nurse must respect that decision.

Healthcare providers have an obligation to show patients compassion, minimise harm, and advance good. This requirement for particular treatment defines goodness. Healthcare providers illustrate this by weighing the patient's benefits and risks. Assisting patients with tasks they are unable to accomplish on their own, maintaining side rails for fall prevention, and immediately releasing medicines are all examples of beneficence.

Everyone has the right to demand that others treat them fairly and equally. When one person's interests conflict with those of another, justice refers to how that person is treated. 15 The subject of some people not having health insurance is a hot topic right now. Another example concerns patients living in rural locations who might not have access to the same medical services as those offered in urban areas.

Patients shouldn't suffer any harm. Nurses must refrain from harming patients in order to practise non-maleficence. 16 This is most likely the most difficult guideline to follow. When a patient refuses to take life-saving medication or when life support is switched off, the nurse is put in an ethically challenging situation.

They should be aware of their own moral character and integrity, as well as the Code of Ethics for Nurses. Nurses should have a fundamental and explicit understanding of the most important ethical principles. The nursing profession must continue to be dedicated to its objective of providing patient care while defending patients' rights to speak up for their own needs and cultural norms. Despite being challenging, nursing's ethical dilemmas fully incorporate the craft of patient care.

For the benefit of their patients, their profession, and themselves, nurses must keep the highest ethical standards. Many organisations have established ethics boards to evaluate ethical issues. It is advised that nurses participate in the targeted specialty area's ethics review at all practise levels. It is imperative to advocate for patient care, patient rights, and ethical practise. Ethics should be incorporated from the beginning of nursing school and throughout a nurse's employment.

VI. NURSING ETHICAL DILEMMAS

ANA Code of Ethics standards can be used by nurse managers to assess ethical issues in nursing. However, depending on the situation, it may alter how it addresses moral quandaries. Healthcare institutions may have an ethical dilemma when nurses lack the equipment they need to carry out their duties. When a nurse notices another's ignorance, they must decide whether to bring it up with their nurse manager or not. To assist in resolving this ethical quandary, nurse managers can make a deliberate effort to inform their nurses on the Code of Ethics as well as the Code of Ethics for their specific medical facility. Additionally, nurse managers can frequently instruct their staff nurses on recurring issues.

One typical ethical difficulty nurses encounter is setting limits with patients. Because nurses and nurse managers spend their whole lives helping patients get the care they need, it can be difficult to draw the boundary between personal and professional connections. Patients

shouldn't date nurses or offer them presents, and they shouldn't depend on nurses more than is essential for their duties. Nurse supervisors can intervene when patients or nurses cross ethical and professional boundaries.

In nursing, there is still another ethical conundrum with patient privacy. Despite having access to a patient's medical history and data, nurses and nurse managers are not allowed by law or ethical standards to share this information with anybody but the patient. Nurses must constantly keep their patients' best interests in mind while also keeping in mind the need to protect patients' privacy and medical information.

VII. EXAMPLES OF ETHICAL DILEMMAS THAT FREQUENTLY FACED BY NURSE MANAGERS

Despite the fast-paced nature of nursing and the continuously shifting challenges it faces, many nurse managers report running into similar moral impasses. The most frequent and difficult ethical situations, according to a recent study, include decision-making, staffing, advanced care planning, and defending patients' rights. The problem is made worse by the fact that there are so many new nurses entering the workforce, many of whom have never encountered ethical difficulties in nursing. Because of these challenges, qualified nurse managers are even more crucial to meeting the country's ongoing healthcare needs. 17

Additional instances of typical ethical dilemmas that nurse managers encounter include the following:

- 1. Honesty versus information withholding:** Family members may want to withhold medical facts from sick persons in order to protect their feelings. However, patients do have a right to know about their health problems. Making a decision about how to share this information can be challenging, particularly if it goes against the family's religious convictions. The ANA advocates honesty as a fundamental factor in nurse-patient interactions.
- 2. Science vs. spirituality:** The science-based and results-driven nature of healthcare may run counter to one's moral or religious beliefs. Some religions ban the use of treatments that could save lives. In order to alleviate suffering and free patients to concentrate on self-care, nurses concentrate on providing medical care. For patients or their families who hold firm religious or spiritual convictions, the focus may be on adhering to a rigid set of rules. The ANA Code of Ethics states that nurses must respect the "unique distinctions of the patient," including "lifestyle, value system, and religious convictions." The nurse "does not mean that the nurse personally endorses their thoughts or conduct," notwithstanding respect for a position.
- 3. Resources allocated versus healthcare requirements:** As healthcare expenses climb, nurse supervisors are increasingly at odds with patient needs and financial constraints. Due to the abundance of medical institutions with inadequate resources, patients run the risk of not obtaining the care they need. These resources range from medical equipment to healthcare workers. Research suggests that nurse managers should involve staff in budgeting so they can better understand needs and preferences.

4. **Beneficence versus autonomy:** Nurses are required to administer medications even when patients have the choice to refuse them. Patient autonomy can be at odds with medical advice even though their requirements are clearly articulated. Patients are free to reject any form of medical therapy. The ANA places a strong focus on the need for nurses and nurse managers to be knowledgeable about patient histories and specific situations in order to communicate the medical necessity to patients. A setting of kindness, respect, candour, and openness is required, according to ANA, when using ethical principles to discover a solution. This method should be based on an ethically sound decision-making model and utilise the greatest evidence-based practise standards currently available.
5. **Process for dealing with ethical dilemmas in nursing:** Nurses must finish years of formal education and clinical training before they can be certified, but dealing with moral difficulties in the clinical setting can be far more difficult. Nurses can acquire the skills necessary to deal with ethical problems on the job through experience and patient engagement. Despite their high level of empathy, nurses can benefit from setting boundaries with each patient early in their employment. When in doubt about something's morality, nurses can refer to the ANA Code of Ethics.

Additionally, nurses might gain from surrounding themselves with seasoned nurses and nurse managers. When faced with circumstances they may not be familiar with, they can rely on the advice of nurse supervisors. By constantly discussing ethical concerns with the nurses in their units, nurse managers may foster educational environments. Nurses can learn from others' errors and develop effective coping mechanisms by engaging in open discussions about ethical problems.¹⁸

6. **Recognize the particularity of the problem:** Consult with all parties concerned to gain insight into the particulars of a situation. Get as much information as you can about the problem. From this point, you can work with all sides to reach a point of agreement. This may finally result in a solution that benefits all parties.

Expecting a problem to go away on its own is unrealistic. Instead, a problem might continue, especially if the persons involved choose to disregard it. You can bring a problem to the attention of everyone involved by opening the lines of communication about it. This may result in cooperation and communication in relation to the problem. It might also lead to a swift and successful resolution.

7. **Express the ethics code:** The ANA Code of Ethics provides a framework for conduct. Turner asserts that nurses need to understand and frequently follow the code. Hospitals should specify ethical behaviour in job descriptions and take that into consideration when evaluating employees' performance annually.

It was necessary to address the value and moral dilemmas underlying many of the life-and-death choices nurses make on a daily basis via a point of reference.

The Code, sometimes known as "The Code," is a much-needed reference manual that nurses can use to support and guide their judgments.

- 8. Provide continual training:** All educational programmes, including orientation for new employees, should cover ethics and provide realistic examples of how to apply theoretical concepts to real-world problems.

The better off you will be, the more you will understand about ethics. As you develop an understanding of ethics, you may face moral quandaries head-on. This will enable you to play a significant role in finding solutions to problems as they arise. It might also present new nursing career options.

- 9. Offer a space where nurses can voice their opinions:** It is crucial to have a practice environment that encourages nurses to voice their ethical concerns and gives them the authority to do so.

Think about how you will approach an ethical challenge before you bring it up. Include the necessary parties and schedule time to communicate with them. You can then use these insights to fix the problem precisely and carefully.¹⁹

- 10. Look for perspective:** Ask for a family meeting if you can. The care team frequently develops a fresh viewpoint when moral conundrums are brought up in front of family members. The family members could help resolve the moral conundrum and exert some influence. You will at the very least understand your patient and the relativity involved much better.

Be understanding and patient with family members when you interact with them. Give a thorough explanation of the problem and provide some solutions. You ought to pay attention to what your relatives have to say and how they feel about the situation. You and your family members can look into potential answers together.

VIII. CONTACT PROFESSIONAL ASSOCIATIONS AND ORGANIZATIONS

The majority of professional nursing organisations have access to nurse ethicists who can assist with ethical problems. Any of these situations faces difficulty since multiple perspectives on what is "right" exist. A nurse ethicist or a seasoned member of your nursing association can offer further understanding based on The Code and everyone's duty.

- 1. Obtain counseling:** Sometimes it's impossible to reach a conclusion without causing you personally emotional distress. Whether the moral conundrum brings up unresolved emotions or stirs up memories of a previous incident, you may be forced to seriously consider your job. Step back and take a deep breath. Consult your manager and get counselling. Counselors are usually available in big medical centres. Don't brush aside any emotions that this moral quandary may have triggered in you personally.

Do not delay to schedule a counselling appointment. Once you speak with this person, you can get assistance as you look into potential solutions to the problem. The counsellor can offer advice and direction for resolving disputes. As you look for the greatest answer possible, this expert can also help you become more confident.²⁰

2. **Nursing practice and ethics education:** Complex moral issues are integrally linked to nursing practise. A newly minted nurse must be prepared to provide great patient care while juggling complex relationships with patients, families, doctors, nurses, and other members of the healthcare team from the minute they enter the clinical setting. The negotiating of these connections frequently leads to ethical tension. Because clinical practise involves "dependent, independent, and interdependent" judgments, Mila Aroskar emphasised the significance of ethics education in nursing forty years ago. These decisions might lead to ethical problems (1977, p. 260). ²¹These confrontations, especially if they go unresolved, can result in an unsatisfied workforce and the departure of talented nurses who are exhausted both physically and emotionally.

Top-notch ethics pedagogy should be an essential component of nursing education since the nursing profession is accountable for preparing nurses for the moral minefield that is clinical practise. Didactic immersion exposes student nurses to the ideals of the profession (such as social justice, advocacy, and beneficent care) and compels them to critically evaluate their own assumptions, beliefs, and values. This is why didactic immersion is a first step in the development of professional identity. In order to engage in morally significant matters at both the micro and macro levels in 2016, the Presidential Commission for the Study of Bioethical Topics, which was established during the Obama administration, recommended bioethics education for all professional organisations.

3. **Benefits, drawbacks, and strengths of a utilitarian approach to nursing and healthcare practice:** In bioethics, utilitarian approaches are frequently utilised, and some of the most well-known bioethicists worldwide are utilitarians. Utilitarians have had a significant impact on how people think about the usage of current and emerging technologies since they frequently support more technology-friendly viewpoints and are more upbeat about how they may improve society. Deontological and virtue ethical systems, on the other hand, frequently adopt more circumspect approaches. In addressing issues of broader societal concern, such as issues of global justice or animal rights, utilitarianism has also had an impact. Utilitarian arguments have been particularly prevalent in some of the following areas with reference to issues of healthcare delivery:
4. **End of life decision making:** Utilitarians have opposed creating a distinction between murdering and letting die in the discussion of assisted suicide and euthanasia (Glover 1990). They asserted that it is critical to consider the suffering people experience at the end of their lives since decisions made by doctors to "let die" without really causing death may cause a lot more suffering than an active intervention would (Rachels 1975). ⁴ Utilitarian authors have also emphasised the importance of quality-of-life factors in treatment choices, making the case that it may be morally acceptable to end a foetus's or, in some situations, a newborn's life if their condition prevents them from having enough capacities and quality of life.²²
5. **Human improvement:** Enhancements, which refer to the use of medical techniques for self-improvement rather than the treatment of people whose diseases are within the normal range, have traditionally received approval from utilitarians (Harris 2010; Savulescu and Bostrom 2009). ²³ Examples of advancements that use current medical treatments include doping (Foddy and Savulescu 2007, for example) or cognitive augmentation, such as with Ritalin (Greely et al. 2008).

6. **Research involvement:** All patients should be required to engage in research, according to utilitarian theory, in order to increase the body of data supporting evidence-based medicine and advance our knowledge (Harris 2005).²⁴
7. **Resource distribution:** Utilitarian theory states that resources in the healthcare system should be allocated to deliver the most value for the least amount of money spent. A key tool in health economics is cost-benefit analysis, which is grounded in utilitarian ideas (Torrance 1987).²⁵ It applies to every step of allocating funds for healthcare. One area where the application of utilitarian principles for allocation decisions has been extensively researched is organ transplant decisions (Persad et al. 2009).²⁶ The notion held by certain utilitarians that those with cognitive impairments are less valuable than those with normal cognitive ability raises specific problems as well (Vehmas 1999).²⁷

IX. CONCLUSION

Beyond the obvious conclusion that nursing is work, viewing nursing as employment raises important ethical questions related to the rapidly evolving social realities. Work as a notion identifies societal divisions of labour, connects intellectual and manual labour, and conveys value by nature. An ethics of work is still just a concept, but we think that if it existed, nurses would begin to ask fresh questions and come up with new solutions to the moral problems we face today and in the near future.

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