

# Good example of research paper on conflicts between ethics and the law

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Ethics deals with requirements of performance and ethical verdict. The major concepts of nursing good care ethics are in consideration in all circumstances including beneficence, non-maleficence, rights, and freedom. Beneficence indicates positive relations or doing well. Nursing staff at work promote their patients' best interests and endeavor to achieve maximum outcomes. Nonmaleficence involves preventing harm. Nursing staff must maintain a qualified exercise level to prevent causing injury or suffering to patients. The most crucial of nonmaleficence covers confirming alleged misuse to prevent victimization and defending patients with chemical handling nurses and other medical care experts. Autonomy stands for freedom and the ability to be self-directed (Mantzoukas, 2007). Patients have the right of self-determination and are eligible to decide what happens to them; therefore, qualified adults have the capacity to approval to or reject treatment. Nursing staff must regard the patients' desires, even if they do not agree with them. Finally, rights require that all patients subject to equal and fair treatment. Nursing staff face problems of rights daily when planning proper take good care of their patients' and deciding how much time they will spend with each depending on patients' needs and a reasonable submission of resources.

Nurses need to differentiate between their individual values and the profession's laws. Personal values are what nurses hold significant and true for themselves, while expert ethics include concepts that have worldwide applications and requirements of perform upheld in all circumstances.

Nursing staff thus prevent allowing individual decision to prejudice patients' good care. They are honest and reasonable with patients, and they act in the

best interest of and show regard for them (Edwards, 2011). Nursing staff attribute this to adherence to the factors of ethical practice to ensure that other nurses also conform. The code gradually improves to include problems of improving nursing science in accordance with the experience and views of various nurses. Nursing agencies approve conditions that address ethical exercise problems such as sympathy and regard, the nurse's primary dedication to the individual, individual loyalty, responsibilities, liability, and liability, progression of the career, contribution in the good care environment, and cooperation (Kohlen, 2011).

A number of legal aspects relate to medical exercise, including licensing, health professional exercise acts, and requirements of proper care. However, in these litigious times, the issue that most concerns those considering a career in nursing include carelessness. Negligence is either an act of omission (not doing something a reasonably sensible individual would do) or commission (doing something a reasonably sensible individual would not do). Malpractice is carelessness by a professional. Responsibility stands for a lawful obligation owed by one individual to another individual. When medical staffs properly take proper patients, they assume the work to focus on them in a qualified and diligent manner is within the provisions of the law (Killcullen, 2007). Nurses are required to offer the degree of proper care ordinarily exercised by other medical staff practicing in the same medical specialized. Therefore, nursing staff are required to adhere to requirements of care—those imposed by the nurse's condition board of medical health professional exercise act, the national nursing specialized requirements of proper care and scope of exercise, and the nurse's hospital, or other agency,

protocols.

A violation of duty takes place when there is failing to fulfill the duties established as being the responsibility of the health professional. In other words, nursing staff violation their duty when they do not fulfill the appropriate conventional of proper care. Causation is the most difficult element to prove because it is the factual connection between the health professional's actions and the damage to the patient. Causation means that the nurse's violation of duty, or failing to fulfill the appropriate conventional of proper care, triggered the patient's damage or negative result (Mantzoukas, 2007). Loss are financial expenses designed to compensate the consumer for the damage or negative result, and are intended to restore the plaintiff to the condition he or she was in prior to the damage. To recover damages, the consumer must establish that he or she suffered physical, financial, or emotional damage due to the nurse's violation of the conventional of proper care.

Nurses are liable for their actions, and thus hence sued. However, the majority of medical staff is qualified professionals who offer a satisfactory level of proper care. Reasons for carelessness consideration reports varied depending on the type of health professional, but involved monitoring, treatment, and medication problems. High-level-need patients and short staffing can increase the chances for error, but medical staff can minimize their liability by focusing on threat control. Healthcare facilities offer various stages of in-service knowledge on threat control, and medical staff can take training programs on this important topic (Kohlen, 2011). Some states require threat control programs for license initiation and renewal. States

need a course on reducing medical errors, while others need medical staff to take a course to become familiar with their condition health professional exercise act. Taking a chance control course can also have some financial advantage—some carelessness insurance providers give discounts on premiums to those who complete a threat control course. Sometimes, however, evaluations of nursing practice will be incorrect -- as seen, the physicians and nursing staff are who have used their capabilities to create possible fatalities by deadly procedures thus far. The patients resign their fate to agree to the repercussions (Killcullen, 2007). Compared with various nursing values, however, nearly all these physicians and medical staff have desired to keep their activities invisible to avoid dealing with the repercussions. In the bottom line, this is what creates their activities and seems particularly unpleasant.

It is far from obvious that a community that punishes its worst killers with life jail time is more intense off than one that punishes them with loss of life. However, a community in which the government definitely subverts primary values of healthcare exercise is patently more intense off for it. Governments have proven their desire to use healthcare capabilities against people for their own reasons -- having healthcare employees support in the interrogation of criminals. As healthcare capabilities enhance, governments' attention in nursing capabilities continues to improve (Edwards, 2011). Protecting the reliability of their values could not be more important. The easy thing for any physician or health expert is simply to adhere to the published guidelines. However, all professionals have a responsibility not to adhere to guidelines, laws, and regulations thoughtlessly. In nursing,

patients experience disputes about what the right and best activities are in all types of areas: comfort of struggling for the cortically ill, supply of drugs for patients with serious discomfort, drawback of care for the seriously ill, abortion, and accomplishments, to name just a few. All have been the topic of expert guidelines and government control, and at times, those guidelines will be incorrect.

## References

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