Example of critical thinking on confidentiality and truthfulness a healthcare and...

Business, Management



The case number one is a rather subjective case. The main problem is caused by the father's reluctance or fear of undergoing medical operations, which he actually has the right to. Critically, refusing to undergo a medical operation—one that would probably be the only way for Mary Stokes, Mr. Stokes' daughter, to be saved from the primary and secondary complications of a renal disorder, can well be considered one of the rights that can be given to any patient.

The first question is all about whether the father—the one who refuses to let

his daughter and the rest of the family know that it turned out that he is the only one allowed to be a kidney donor for Mary Stokes, apparently because of organ compatibility issues, can be considered a patient in a situation wherein Mary Stokes was the first one introduced as a patient. To answer the first question, yes, Mr. Stokes, can in this case, be considered a patient because a patient is generally defined as " someone who will or would be subject to or recipient of any healthcare or medical service, regardless of whether he is injured, or in dire need of medical treatment". Every patient is entitled to receive a certain set of rights, the right to confidentiality and privacy being one of them. According to the United States' patients' bill of rights, every individual who can be officially categorized as a patient is entitled to receive information guaranteed to patients, fairness when it comes to all forms of medical treatment, and autonomy in making all sorts of medical, and health-related decisions, which in this case, well includes Mr. Stokes' decision of not disclosing his passing the compatibility test to be a kidney donor for his daughter's condition. So even after recruiting support from medical and healthcare evidences, Mr.

Stokes, even when viewed from any angle, may well be considered a patient, even if the word patient came from the Latin word "patiens" or someone who suffers from any injury or in most cases, a medical condition, with known causes or idiopathic. In case cannot be considered a patient, which is somewhat impossible because from whichever angle one would look he would still be considered one, his explicit request, which was not refused by the doctors and the other parts of the medical team, cannot really serve as a protection of his confidentiality. The doctor and perhaps the rest of the members of the medical team just did what they thought was right and that is to respect the decision of their patients and not get into trouble by disclosing sensitive and private medical information to people who should not receive such. The only thing so far that complicates this case is the fact that the person who Mr. Stokes planned to hide the computability to donate his kidneys from was Mary Stokes, which coincidentally was his daughter who is in dire and urgent need of a kidney donor, or else something bad might happen to her. So no, Mr. Stokes decision not to disclose his computability to donate his kidneys to his own daughter does not protect his confidentiality. It is all a matter of discretion and the medical staff's respect of that discretion. The best thing that the physician or any part of the medical team who has access to the confidential information could do to protect the secret is to follow whatever the father wishes, even if that means looking for another compatible donor even though there is already one nearby, who in fact is inside the family circle.

This case resembles an uncommon case of bullying. A doctor is undeniably an important part of a medical team but nurses and other medical

professionals and staffs who work in the ward are too. Ideally, there should be fair treatment among these medical professionals but since doctors tend to be the ones who have the highest educational attainment, they usually turn out to be the ones who receive the largest salary, the greatest benefits, and even preferential treatment in the workplace. Evidently, this controversial truth is what is being showed in Dr. Curious and the rest of the nursing staff members' case. An issue of abuse was raised against Dr. Curious, which form an ethical and legal perspective, can win on court. But instead of apologizing and recognizing the fact that what he, the doctor is doing is illegal and outright unethical, he decided to retaliate to the nurses and make their lives miserable, which leads us to another case of unethicality. In this case, the nurses are the victims. Unfortunately, there is nothing that they can do but to seek help from the hospital's nursing administration and wait until investigations have been finished and conclusions have finally been drawn out. Most of the time, decisions and sentences are fairly judged but there can also be times when they are not. Should the internal nursing administration or the one affiliated with the hospital ignore their case or still favor the abusive Dr. Curious even after presenting strong cases and worse, hard evidences about his unethical conducts—which includes willfully reviewing of confidential patient records regardless whether these patients belong to his list of friend or not, and retaliating against the nurses who reported his curious conduct to the nursing administration, perhaps the victimized nurses can file for a case on court through the help of national or even international nursing organizations/associations. There is one disadvantage of doing this however.

Apart from the resources that brining a court even before the regional trial court could take, the demand in effort could be paramount. These are some of the reasons why most nurses resort to resigning even after seeing only the slightest signs of bullying. This can actually be beneficial to the nurses in this case because they do not really deserve to be treated the way how they were treated by Dr. Curious and the nursing administration who favored his stand even after perceiving at first glance how unethical or even illegal his actions were. The problem with this move however is that even though it does not violate any written and unwritten ethical and legal rules, it only predisposes the incoming nurses—the ones who would replace the ones who resigned, to the same kind of treatment in the future, with high levels of certainty that is. So even if such move appears to be ethical and legal, it is not the most ideal one. What the nurses should do is to exhaust all diplomatic, social, and legal efforts before deciding to finally leave the hospital. They can for example attempt to confront Dr. Curious in a nice way and try to settle the problems bilaterally. In case that does not work, they can try to talk with the nursing administration or even the human resource management to settle the dispute with Dr. Curious in front of an arbitrator. If worse comes to worst, they can just leave the institution and look for a new one that knows how to handle their employees well and protect them from workplace abuses usually done by senior members of the organization.

Bibliography

Henry, A. (2002). Managing Medical Workplace Issues. Journal of Medical Social Sciences, 54, 1-3.

Howard, J. (2011). Malpractice Lawsuits Shed Light on Ailing Outpatient

https://assignbuster.com/example-of-critical-thinking-on-confidentiality-and-truthfulness-a-healthcare-and-ethics-paper/

System. Journal of My Advocates, 12, 8-15.

Jens, A. (2009). Ethicality in Medical Practice. Journal of Medical Sciences, 21, 1-6.