

# Ethical dilemma research paper examples

[Health & Medicine](#), [Hospital](#)



1. Scenario One: A medical assistant is working at a Catholic hospital but does not practice this religion. The Catholic hospital does not believe in the practice of performing tubal ligation procedures as birth control. The medical assistant has a patient who is 23 years old and currently has 5 children. She is requesting assistance in having this procedure done. The policy of this hospital is not to discuss any forms of birth control with patients. What should the medical assistant do since she does not believe in this policy?

### **Scenario One Commentary**

Catholic hospitals are governed by Ethical and Religious Directives for Catholic Health (ERD aka the Directives) penned by the United States Conference of Catholic Bishops (USCCB). It has 72 directives of which few abolish use of contraception in all forms. Directive 52 states that a Catholic affiliated hospital will not promote or provide any form of contraception as it against their religious belief of unitive and procreative purpose of intercourse. Directive 53 states that such an institution will not offer procedures that may require permanent or temporary sterilization. Hence, no catholic healthcare institution will offer tubal ligation, vasectomy, hysterectomy or other forms of direct or indirect sterilization. Directive 45 clearly states the pro-life stance of the Catholic hospitals by ruling against abortion. Going against the Directives could lead to revoking of the Catholic status of an institution (Ethical and Religious Directives for Catholic Health, 2009).

In this case study, the patient is 23 years old woman with 5 children.

Assuming she has been bearing children from 18 years of age, she has had consecutive pregnancies with approximately 6 months gap between each.

The medical assistant's personal reaction to this scenario as a non-catholic medical professional could be sense of dismay looking at the limited options the patient has when it comes to contraception. Having so many children close together naturally means the mother has a demanding job at hand. Not having access to sterilization procedure means she has no control over her sexual life and the resultant pregnancy.

Ethically, being an employee of a Catholic institution, the medical assistant should abide by the policies of the institution directly and indirectly, the Directives. Since the hospital does not discuss contraception options with the patients, the medical assistant might refer the patient to another hospital that offers the tubal ligation method of sterilization that the patient seeks. However, if the medical assistant is a catholic, they might not at all refer the patient to another such hospital as they might feel guilty by association (Bowes, Adams & Donohoe, 2004). In such a case, the patient must seek another healthcare facility on her own without any referral from the Catholic institution.

Looking at the problem from different sides gives us more dimensions to attack the problem. The hospital's strong-rooted religion-based healthcare service is a hindrance to the patient as she cannot avail the medical procedure there. Knowing for fact that the medical assistant does not believe in this particular hospital-policy he/she could have gone against the rule and prescribed a temporary contraception until the patient underwent tubal ligation. However, personal integrity as a professional goes hand-in-hand with the good-thought of helping a patient.

In a real world scenario, medical assistants must try to uphold their greater

duty towards the well-being of a patient along with maintaining workplace ethics. The medical assistant might help the patient by directing her elsewhere and not violate any ethical restraint upheld by the institution for which they work. It is important to find a balance between personal ethics and opinions and bearing caution while implementing them in a real-life scenario.

2. Scenario Two: A medical assistant was raised with the beliefs that vaccination can be harmful to children. She begins working for a general practice clinic. After working for three weeks, she is asked to help the RN give vaccinations to the kindergarten patients coming in for their physicians. The state law says these patients cannot be admitted to school without these vaccinations. What should the medical assistant do since she does not believe in this policy?

### **Scenario Two Commentary**

During 1970s, vaccination laws emerged that enforced immunization in children by providing free vaccines and further nudged the reluctant parents by threatening to expel the child from school without proof of such an immunization (Flanagan-Klygis, 2003). Children and adults can, however, get exempted from immunizations on medical grounds (in 50 states); on religious grounds (in 48 states, except West Virginia and Mississippi) and on philosophical beliefs (in 15 states). Such an exempt is valid to employees at workplace, students in schools, recruits in military services and even medical professionals working in all kinds of health care institutions (Malone & Hinman, 2003).

A medical assistant as a believer in vaccines and, by extension, in

immunization, will find it hard to understand the rationale behind the above mentioned medical assistant's hesitance in vaccinating the children. There are cases where medical assistants refused to be vaccinated as they felt the process devalued their morals and abused their rights to privacy and won such an exemption (VA Mason Hosp. v. WA Nurses Assn., 2007). However, when the same professional proposes to refuse to work for the community's betterment by not vaccinating, he/she is violating the code of ethics proposed by the American association of Medical Assistants (AAMA).

According to the Code of ethics of the AAMA, a medical assistant should uphold the honor and the principles of the medical profession and accept its discipline. Also, it is only ethical to participate in the activities that improve the well-being and health of the community by rendering service with full respect towards humanity (AAMA, 2012). By intending to act unethically, she is also putting her patients in an undesirable position brought on by no fault of the patients themselves.

Nevertheless, as a non-believer in vaccination, the medical assistant might feel pained by the entire process and not come to terms with the design mentally. A viable option could be to discuss the idea with the registered nurse (RN), whereby reconciliation could be arrived upon. The medical assistant could just help with the preparation and not perform the actual vaccination, if possible. If this does not work and the medical assistant still finds it difficult to accept the immunization procedure, she can always hand in her resignation and find a suitable workplace that does not interfere with her religious beliefs and personal ethics.

3. Make a plan to reconcile personal ethics with your obligation to act as a

medical professional

When a medical assistant faces any situation that goes against his/her personal beliefs, he/she should analyze the situation and ask few questions that will help them come to a decision.

- Is acting in accordance to personal ethics a non-compliant behavior?
- Will acting according to personal ethics harm or benefit the patient and vice-versa?
- Will acting as per one's personal ethics violate patient's rights?
- Will acting on basis of personal ethics be beneficial to the clinic and the employer in building name and trust?

Following this plan can help a medical assistant in decision making process for future scenarios.

## References

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VA Mason Hosp. v. WA Nurses Assn., 511 F. 3d 908 (2007)