

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

Medical ethics

Azra Naheed Medical College

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Objectives

- Learn to define ethics
- To differentiate between morals and ethics
- To practice ethics in different life events

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Relevance of ethics in life of a doctor

- Values and behaviors critique by community
- Individual difference always be there
- Ethics are ethical professional guidelines
- Ethical principles are required for good medical practices
 - Clear understanding of what medical ethics are
 - And their scope

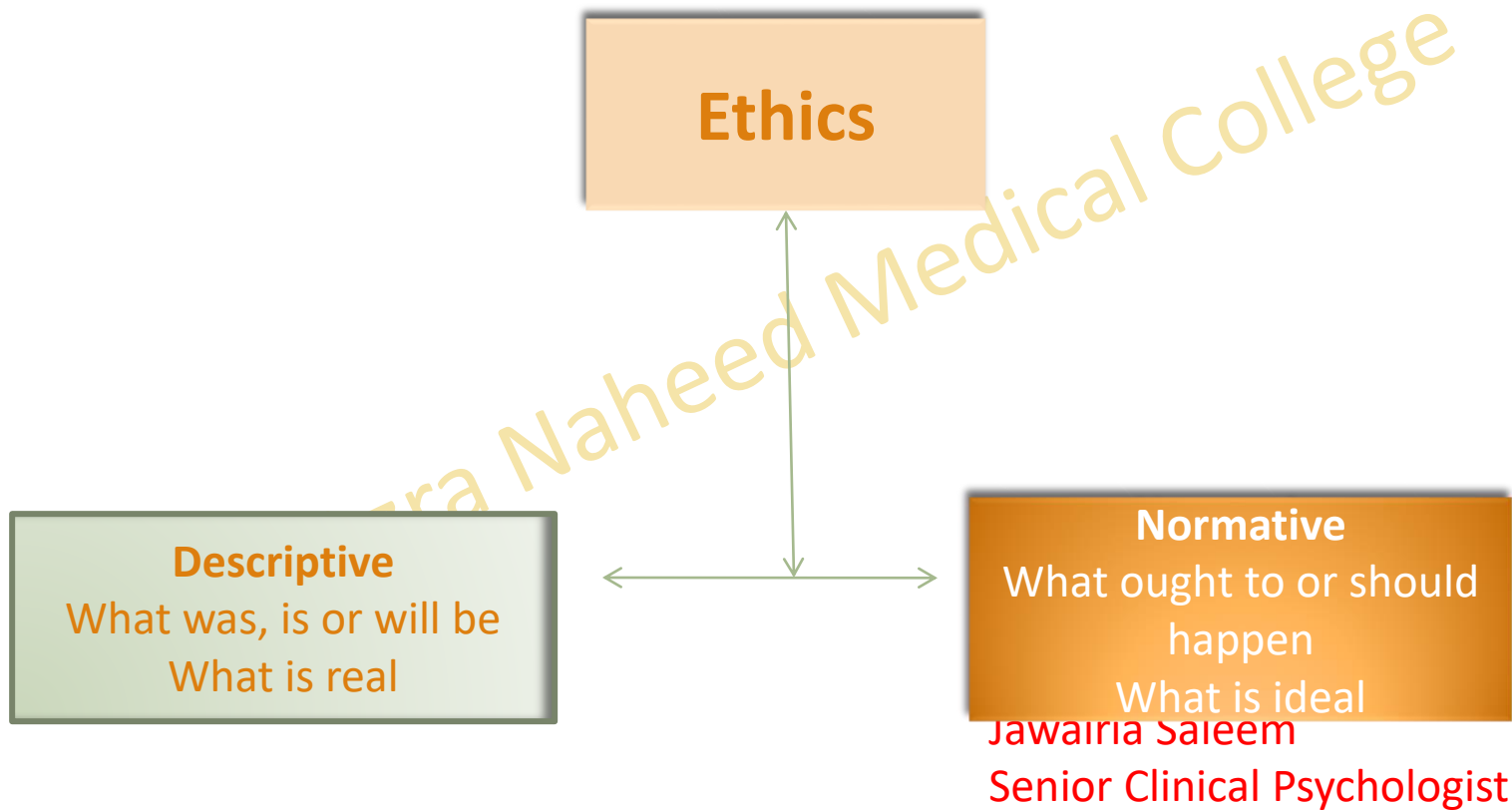
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Scope of medical Ethics

- It offers a common, basic moral analytical framework and a common, basic moral language. Although they do not provide ordered rules, these principles can help doctors and other health care workers to make decisions when reflecting on moral issues that arise at work

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Types



- Moral aspects of doctor's professional life
 - Normative
 - Principles that can guide a doctor
 - Descriptive
 - Concerned with behavior of doctors
- Four main pillars of medical ethics
 - Autonomy
 - Beneficence
 - Non- maleficence
 - justice

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Common issues in medical ethics

- A. Informed consent
- B. Decision making capacity
- C. Euthanasia
- D. Malpractices
- E. Inclusion of Patients in Clinical trails

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A. Informed consent

- One of the paramount norms(second is confidentiality)
- Getting permission
- Consent is omitted
- Confidentiality
- When confidentiality can be breach

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Questions for Informed Consent

- Use your B.R.A.I.N.S
- **B** Benefits
- **R** Risks
- **A** Alternatives
- **I** Intuition
- **N** Nothing
- **S** scuse Me

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Confidentiality

- During
- After even after patient's death
- **When it can be breached?**
- With health care team
- For patient's security
- Disclosure in public interest (society, licensed authorities)
- Legislative requirement
- For research purpose (but anonymous data)

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B. Decision making capacity

- Ability of individual to understand
 - Illness
 - Treatment
 - Psychiatry patients
 - Dementia

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C. Euthanasia

- End of life with the consent of patient
- Physician dispenses but not administered
- both are illegal

D. Malpractices

- Malpractices are different
 - By less or more information delivered
 - Negligence
 - failure to take informed consent

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Inclusion of Patients in Clinical trails

- Clinical trails may only be started after approval of institutional ethical committee
- Written informed consent
- Explanation of risk and side effects

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Common ethical dilemmas in doctor's life

- Accepting gift from the patient
- boundaries violation
- Charges and fee
- E- consultation and telemedicine
- Media and medicine
- Euthanasia
- Relationship with pharmaceutical industries

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Doctor patient relationship

- Doctor patient relationship in 3 forms
 - Vertical model
 - Teacher student model
 - Mutual participation model

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Right and Responsibility of Patient

A. Rights of patient

- Informed consent
- Withdraw consent
- Refuse experiment / research treatment
- Obtain a second opinion
- Have detail of condition and treatment
- Kept confidentiality
- Leave hospital at any time (except infections)
- Treated with care
- Request to get medical file from doctor
- Contact friends, family etc

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B. Responsibilities of patient

- Patient should know his own medical history
- Comply with the treatment advice
- Keep appointment regularly
- Inform the doctor if you get any other treatment

C. Rights of doctor

- Refuse to take any action (against his ethics)
- Can refer to other health professional

D. Responsibilities of doctors

- Provide scientific information on disease
- Respect the patient decision
- Uphold patient's interest
- Taking informed consent

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Psychological reactions in doctor patient relationship

Variety of social and psychological reactions

1. Social bonding

2. Dependence

3. Transference

4. Counter transference

5. Resistance

6. Physician burnout

Origin in Psycho analysis

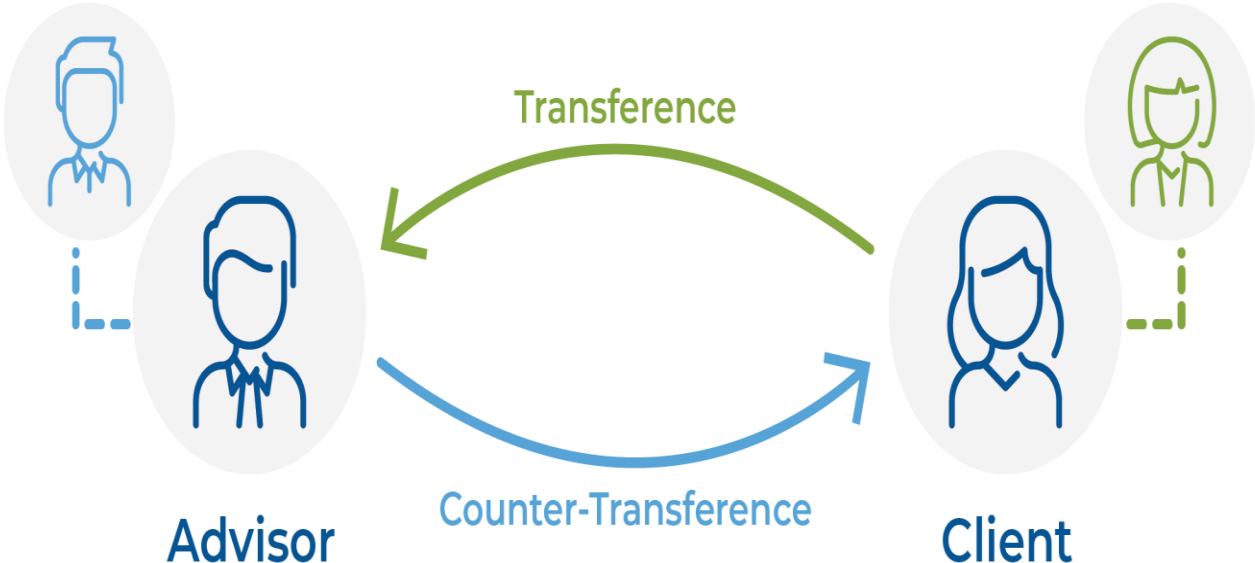
Unconscious attribution

DM
included

Early signs of burnout

- Long working hours
- Loss of temper and anger
- Impaired clinical decision making
- Un prescribed use of drugs or painkiller

Transference and Counter-Transference in the Advisor-Client Relationship



Advisor's
Friends, Family
& Colleagues

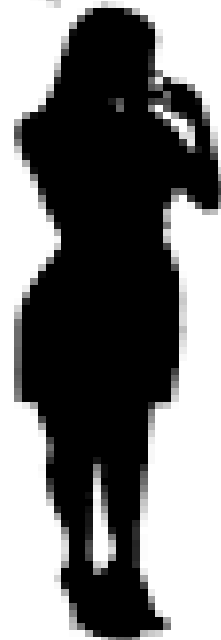
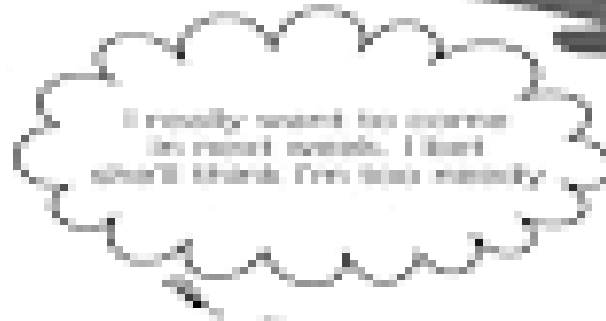


Client's
Friends, Family
& Colleagues

Transference



MOTHER FIGURE



ME



THERAPIST

Professionalism in Health Care

- Doctor patient relationship dependent on professional excellence
- Professional excellence
 - a. Knowledge
 - b. Skills
 - c. Attitude of physician
- Physician
 - Psyche
 - Soma

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Professional Excellence

Rich Information regarding
disease, assessment and
intervention

A. Knowledge

- Distinguish normality /abnormality (medical, psycho-social)
- Relate Bio-psycho-social factors (assessment)
- Learn usage of principles in clinical assessment
- Justify reading of laboratory with different inquiries
- Use pharmacology along with non-pharmacological interventions
- Apply evidence based research findings

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B. Skills

- **Written communication skills**
 - Can write a comprehensive history
 - Update medical records
 - Management plans
- **Verbal Communication skills**
 - Professional relationship
 - Usage of appropriate language
 - Provide information care and counsel patients

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Continue...

- Patient management skills
 - Interpret history and examination findings
 - Arrive appropriate findings
 - Competence in clinical problem
 - Identification
 - Analysis and
 - Management
- Skills in research
 - Undertake relevant literature
 - Interpret and use of result by standard articles to improve clinical practices
 - Organize and participate in educational trainings

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C. Attitude

- Towards Patient
 - Healthy therapeutic relationship
 - Committed to Bio-psycho-social
 - Demonstrate sensitivity ,empathy and understanding while performing MSE
 - Place them above personal interest(don't argue)
 - Stick to medical ethics

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Continue...

- Towards Self development
 - Respect for every human being (culture ,race religion)
 - Deal patients with honesty and equity
 - Bring up-to-date knowledge
 - recognize stress in self and others
 - Deal with stress and support colleagues
 - handle criticism
 - Obtain and value second opinion

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- Towards society

- Exhibit sensitivity towards social and legal aspects of health care
- Offer cost effective professional services

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Professional character development

- Professional Attire (serious, non-provoking Attire)
- Respect for time and punctuality (reflect commitment)
- Grasp and knowledge about patient
- Conscientiousness
- Integrity in reporting patients' findings
- Availability to the patient
- Relationship

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Assessment of Attitudes (Professionalism) in Doctors

Score

Professional attire/ demeanour

1

Respect for time and punctuality

2

Grasp and knowledge of own patients

3

Conscientiousness

4

Integrity in reporting patient findings

5

Availability to the patients

6

Relationships with colleagues, hospital staff and patients

7

Score 1-10

1

=

Poor

2-4

=

Not desirable

5-6

=

Average: Needs Improvement

7-8

=

Good

9-10

=

Exemplary: Can serve as a role model

Thank

you



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