

# Ethics for Healthcare Professionals







































































































































quality of life, they can give patients a new lease on life. Simply put, organs for transplant can help save patients' lives. However, organs for transplant are in very limited supply and there are not enough available to meet the patient demand. With that said, what is the best and fair way to allocate such a valuable health care resource? That question plagued health care professionals for years until the answer came in the form of the National Organ Transplant Act of 1984 .

The National Organ Transplant Act of 1984 outlawed the sale of human organs (10). Before the National Organ Transplant Act of 1984, there was no clear national system to govern the availability and distribution of human organs. Human organs were essentially available for purchase and often went to the highest bidder. As the demand for organs increased, the United States government stepped in to prevent the private trafficking of human organs. The National Organ Transplant Act of 1984 was born and the Organ Procurement and Transplant Network (OPTN) was established. The OPTN, for the first time, provided a fair allocation of organs for transplant. No longer were organs available for purchase and no longer did socioeconomic status dominate the distribution of organs for transplant. After the National Organ Transplant Act of 1984 and the OPTN were established, organs were allocated fairly among all patients in need. After 1984 transplantable organs were allocated based on need. The new system, after 1984, was fair and in line with justice, as it relates to health care. To help manage this new, fair method of allocating organs for transplant, the UNOS was established.

The UNOS maintains a national list of patients who require organs for transplant (10). The UNOS ensures the fair allocation of organs for transplant. The individuals behind the UNOS match patients with organs for transplant based on medical urgency, blood type, proximity to the donor and tissue and size match with the donor (10). Essentially, the UNOS triages patients and allocates organs for transplant based on prioritization. Patients in need of an organ for transplant are placed on a list. The patient order on the organ for transplant list is based on the

aforementioned criteria. When an organ becomes available for transplant the organ is best matched with the best possible prioritized patient. When a match has been established, the patient will receive an opportunity to obtain an organ for transplant. If for some reason the patient cannot receive the organ, the organ will be allocated to the next prioritized patient on the list. With over 100,000 patients across the country in need of an organ for transplant, a prioritized patient list may be the fairest way to allocate such a valuable health care resource.

Organs for transplant, like all health care resources, are extremely valuable to patients who require them. A patient's health, overall well-being and very life itself may depend on the availability of health care resources. Similar patients in similar situations have the same right to available health care resources. When health care resources are limited, prioritizing patients in a manner such as the UNOS may provide a fair method to allocating health care resources. Justice, as it relates to health care, must be maintained at all times and national laws and organizations may be the best way to ensure justice is upheld.

## **Justice Considerations For The Elderly**

There is a debate among health care professionals regarding the allocation of health care resources among the elderly. Due to the rising cost of health care, along with the dwindling supply of health care resources, some health care professionals are calling for an age-based allocation of health care resources. An age-based allocation of health care resources would include a patient's age as a determining factor for the distribution of health care (11). Health care professionals who support an age-based allocation of health care resources argue that valuable health care resources are being expended on patients with a very limited quality of life. Instead of allowing health care resources to be evenly dispersed among all patients, independent of age, health care professionals who support an age-based allocation system prefer a prioritization of patients, with younger patients receiving a higher priority over elderly patients (11). An age-base health

care system would allocate health care resources first to younger patients and then to the elderly. Health care professionals who do not support an age-based allocation system cite justice, as it relates to health care, as their supporting argument (11). Currently, health care resources are allocated intergenerational among all patients, placing need and clinical urgency as the top determining factors of health care resource allocation. The health care professionals who do not support an age-based allocation system claim that an adoption of such a system would oppose justice, as it relates to health care, and therefore be unethical (11). Whatever personal beliefs health care professionals may have in regards to the allocation of health care resources, the following concept remains intact: an intergenerational system of allocating health care resources based on clinical need and urgency is currently in place. Thus, health care professionals must achieve and maintain justice, as it relates to health care, under the current system.

## **The Bottom Line**

Similar patients in similar situations have the same right to health care. Justice, as it relates to health care, dictates the fair and legal allocation of health care resources to all patients. In times when health care demand exceeds health care supply, triaging patients may prove to be a fair method of allocating resources. Health care resources are limited. However, health care professionals must achieve and maintain justice, as it relates to health care, under the current system, while administering health care to all patients.

### ***Section 5 Key Concepts***

- *Justice, as it relates to health care, ensures that health care resources are fairly allocated to patients.*
- *Similar patients in similar situations have the same right to available health care resources.*

- *In times where health care demand exceeds health care supply, triaging patients may prove to be a fair method of allocating available health care resources.*
- *Health care professionals must achieve and maintain justice, as it relates to health care, while administering health care to all patients.*

## **Section 5 Key Terms**

**Justice** - *refers to just behavior; fairness; objectivity; equality.*

**Justice, as it relates to health care** - *refers to the fair and legal allocation of health care resources to patients (1).*

**Triage, as it relates to health care** - *refers to the prioritization of patient treatment in terms of clinical urgency (9).*

**The National Organ Transplant Act of 1984** - *refers to the act which places restrictions on human organs for transplant (10).*

**Organ Procurement and Transplant Network (OPTN)** - *refers to the system, which provides a fair allocation of human organs for transplant (10).*

**United Network for Organ Sharing (UNOS)** - *refers to the organization, which manages the fair allocation of human organs for transplant (10).*

## **Section 5 Personal Reflection Question**

*How do you personally achieve and maintain justice, as it relates to health care?*

## **Conclusion**

Personal ethical principles are forged over time and can help individuals distinguish right from wrong. Each individual may have his or her own personal set of ethical principles. However, health care professionals take oaths to abide by a specific set of health care professional ethical principles. The four cornerstones of health care professional ethical principles include: respect for patient autonomy, beneficence, nonmaleficence and justice. Respect for patient autonomy ensures patients' right to formulate informed decisions regarding their health care

(1). Beneficence establishes that health care professionals must do what is best for the patient (1). Nonmaleficence dictates that a health care professional must not inflict harm on a patient or limit the amount of harm inflicted on a patient to achieve a beneficial outcome (1). Finally, justice secures the fair and legal allocation of health care resources to all patients (1). Health care professionals must achieve and maintain the aforementioned ethical principles when administering health care to patients.

The continued existence of the health care system depends on the relationship between patients and health care professionals. A trust must exist between the patient and the health care professional. Patients must be able to fully trust health care professionals. Patients must also believe that health care professionals have their best interests at hand. In order for health care to work as a system this trust and belief must be secure and stable. The stability of the health care system rests on the shoulders of the individual health care professional. He or she must chose to administer health care in an ethical manner to all patients including the elderly. Health care professionals continued dedication to the ethical administration of health care can ensure the health care system endures to provide help to those in need.



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