

HERI-NCLEX Review. Updated.2019

Essentials of Nursing Law and Ethics for the NCLEX





Definition of Law

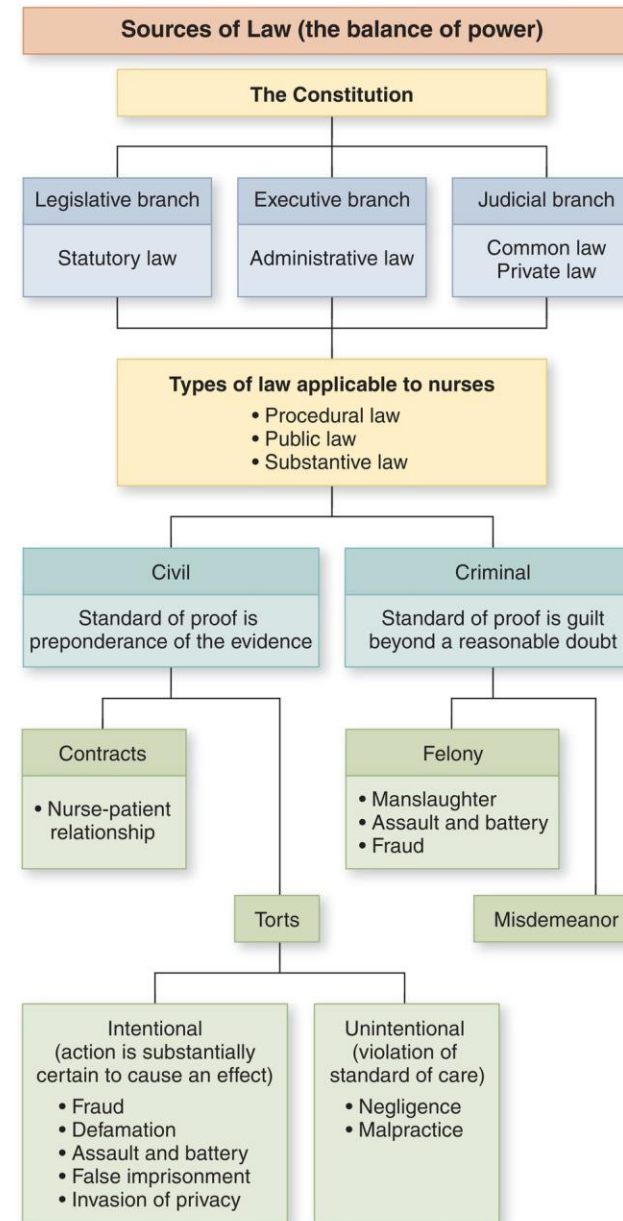
- Law has been defined as the formalization of a body of rules of action or conduct prescribed that is enforced by binding legal authority or as the sum of rules and regulations by which society is governed.
- Because law reflects society's values, it is an ever-changing concept subject to modification.
- The law reflects the will of the people as represented by legislative or judicial bodies (almost all of whom are elected) that enact the law or interpret the law.

Selected Types of Laws Affecting Nurses



Type of Law	Examples
Constitutional law	Due process, equal protection
Statutory laws (legislative)	Nurse Practice Acts, guardianship codes, informed consent, advance directives, abuse reporting, sexual harassment, Good Samaritan laws
Criminal law (public)	Homicide (murder or manslaughter), theft, assault, illegal possession of controlled substance, active euthanasia
Civil: Contract law (private or civil)	Contracts between nurse and client, nurse and employer, nurse and insurance, employer and union, and client and agency
Civil: Tort law (private or civil)	Negligence/malpractice, defamation (slander, libel), invasion of privacy, false imprisonment, assault and battery

Sources of Law



Types of Law

- **Criminal Law**

- Is concerned with violations against society based on the criminal statutes or code. The remedies in state or federal criminal cases are monetary fines, imprisonment, and death.
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- **Misdemeanors** are lesser crimes punishable by (usually modest) fines established by the state and/or imprisonment of less than 1 year.
- **Felonies**: Are more serious crimes punishable by much larger fines and/or imprisonment for more than 1 year or, in some states, death.
- In many states, a felony conviction may be the grounds for revoking a license to practice in a healthcare field.
- **Manslaughter**: killing of another person without premeditation
- **Larceny**: unlawful taking and carrying away of personal property with the intent to deprive the rightful owner of it permanently

Types of law

- **Civil Law**
- Two types of civil law that influence standards for nursing practice are **contract law and tort law.**
- Most cases against healthcare workers are for negligence or malpractice(unintentional torts).
- Lawsuits against healthcare providers often include allegations of failures to provide care that meets the standard of care and result in harm or injuries to the patient. The remedies in civil law are almost exclusively monetary.

Laws Governing Nursing

- Nurse Practice Acts provide the laws that control and regulate the nursing practice in each state to protect the public from harm.
- Mandatory Nurse Practice Acts authorize that, under the law, only licensed professionals can practice nursing.
- All states now have mandatory Nurse Practice Acts. Laws affecting nursing practice vary from state to state.
- Nurse Practice Acts govern the nurse's responsibility in making assignments.
- Each state sets its own educational and examination requirements.
- **1. Assignments should be commensurate with the nursing personnel's educational preparation, skills, experience, and knowledge.**
- **2. The nurse should supervise the care provided by nursing personnel for which he or she is administratively responsible.**
- **3. Sterile or invasive procedures should be assigned to or supervised by a registered nurse (RN).**
- **4. Documentation is a legal and professional requirement that includes electronic medical records and other notations placed in a client's medical record.**



Torts((Violation of Client's Private Right)

- The term tort comes from Latin, meaning to twist, be twisted, or to wrest aside.
- Tort is a private, civil, or constitutional wrong or injury, and not a breach of contract, for which the court provides a remedy for damages.
- There must always be a violation of some duty owed to the plaintiff, and generally such duty must arise by operation of law and not by mere agreement of the parties.
- **Negligence is a type of tort. It is the cornerstone of a malpractice case.**
- Negligence does not require a specific plan to harm someone.

Unintentional Torts

- **Negligence and malpractice**
- 1. **Negligence**: Performing an act that a reasonable and prudent person would not perform. The measure of negligence is “reasonableness” (i.e., would a reasonable and prudent nurse act in the same manner under the same circumstances?). That is, did the nurse provide care that did not meet the standard?
- 2. **Malpractice**: Negligence by professional personnel (e.g., professional misconduct or unreasonable lack of skill in carrying out professional duties).
- Malpractice is a negligent act performed by an individual in a professional role that results in an INJURY.

Elements of Negligence/ Malpractice

Check for the 4 D's

Duty (professional relationship)

Deviation (Breach of Standard of care)

Damage

Direct cause (Causal connection)

Just remember

- **Malpractice**: The failure of a professional to meet the standard of conduct that a reasonable and prudent member of the profession would exercise in similar circumstances; it results in harm. (A type of negligence)
- **Negligence**: The failure to use such care as a reasonably prudent and careful person would use under similar circumstances; an act of omission or failure to do what a person of ordinary prudence would have done under similar circumstances.
- **Examples of negligence or malpractice:**
 - 1. Burning a client with a heating pad
 - 2. Leaving sponges or instruments in a client's body after surgery
 - 3. Performing incompetent assessments
 - 4. Failing to heed warning signs of shock or impending myocardial infarction
 - 5. Ignoring signs and symptoms of bleeding
 - 6. Forgetting to give a medication or giving the wrong medication



Quasi-intentional tort

- Making false statements, verbally (**slander**) or in writing (**libel**), about another person that harms the person's reputation, holds the person up to ridicule or contempt, or causes the person to be avoided.
- **Defamation (action):** Takes place when a falsehood is **said (slander)** or **written (libel)** about a person that results in injury to that person's good name and reputation



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Intentional Torts

- **Assault and battery**
- 1. **Assault:** Mental or physical threat (e.g., forcing [without touching] a client to take a medication or treatment)
- 2. **Battery:** Actual and intentional touching of one another, with or without the intent to do harm (e.g., hitting or striking a client). If a mentally competent adult is forced to have a treatment he or she has refused, battery occurs.
- **Invasion of privacy: Encroachment or trespassing on another's body or personality**
- 1. **False imprisonment:** Confinement without authorization
- 2. **Exposure of a person:** Exposure or discussion of a client's case. After death, a client has the right to be unobserved, excluded from unwarranted operations, and protected from unauthorized touching of the body.
- 3. **Defamation:** Divulgence of privileged information or communication (e.g., through charts, conversations, or observations)
- **Fraud: Illegal activity and willful and purposeful misrepresentation that could cause, or has caused, loss or harm to a person or property. Examples of fraud include:**
- 1. Presenting false credentials for the purpose of entering nursing school, obtaining a license, or obtaining employment (e.g., falsification of records)
- 2. Describing a myth regarding a treatment (e.g., telling a client that a placebo has no side effects and will cure the disease, or telling a client that a treatment or diagnostic test will not hurt, when indeed pain is involved in the procedure)

Crime

- An act contrary to a criminal statute. Crimes are wrongs punishable by the state and committed against the state, with intent usually present. The nurse remains bound by all criminal laws.
- Commission of a crime involves the following behaviors:
 - 1. A person commits a deed contrary to criminal law.
 - 2. A person omits an act when there is a legal obligation to perform such an act (e.g., refusing to assist with the birth of a child if such a refusal results in injury to the child).
 - 3. Criminal conspiracy occurs when two or more persons agree to commit a crime.
 - 4. Assisting or giving aid to a person in the commission of a crime makes that person equally guilty of the offense (awareness must be present that the crime is being committed).
 - 5. Ignoring a law is not usually an adequate defense against the commission of a crime (e.g., a nurse who sees another nurse taking narcotics from the unit supply and ignores this observation is not adequately defended against committing a crime).
 - 6. Assault is justified for self-defense. However, to be justified, only enough force can be used to maintain self-protection.
 - 7. Search warrants are required before searching a person's property.
 - 8. It is a crime not to report suspected child abuse (i.e., the nurse's legal responsibility is to report suspected child abuse).

Nursing Practice and the Law. Psychiatric Nursing

- Civil procedures: Methods used to protect the rights of psychiatric clients.
- **Voluntary admission**: Client admits himself or herself to an institution for treatment and retains civil rights.
- **Involuntary admission**: Someone other than the client applies for the client's admission to an institution.
 - 1. This requires certification by a health care provider that the person is a danger to self or others or no support. (Depending on the state, one or two health care provider certifications are required.)
 - 2. Individuals have the right to a legal hearing within a certain number of hours or days. (**Habeus corpus**)
 - 3. Most states limit commitment to 90 days.
 - 4. Extended commitment is usually no longer than 1 year.

Psychiatric Nursing. Emergency admission

- Any adult may apply for emergency detention of another. (Baker's act)
- However, medical or judicial approval is required to detain anyone for observation, diagnosis and treatment for those clients whose behavior is indicative of mental illness manifested in behavior that poses a danger to themselves or others. Length of admission time is based on state laws.
- 1. A person held against his or her will can file a writ of **habeas corpus** to try to get the court to hear the case and release the person.
- 2. The court determines the sanity and alleged unlawful restraint of a person. **(False imprisonment)**

Legal and civil rights of hospitalized clients

- 1. The right to wear their own clothes and to keep personal items and a reasonable amount of cash for small purchases
- 2. The right to have individual storage space for one's own use
- 3. The right to see visitors daily
- 4. The right to have reasonable access to a telephone and the opportunity to have private conversations by telephone
- 5. The right to receive and send mail (unopened)
- 6. The right to refuse shock treatments and lobotomy

What Are Ethics?

- **Encompasses several different facets.**
- First, as a branch of philosophy, ethics studies the values that influence human behavior, **tying our actions to a sense of right and wrong.**
- A second aspect is an individual's ethics; this refers to one person's **moral** principles—the values that govern a single person's decisions with a goal of maintaining one's integrity or conscience. **These may include, but certainly are not limited to, honesty, fidelity, gentleness, fairness, compassion, responsibility, humility, and respect for life.**
- Finally, group ethics is a system of principles and rules of conduct **accepted by a group or culture.**



Ethical dilemma? How you know?

- First, your conscience will usually be affected. If you have a quandary that makes you lose sleep or feel uncomfortable, it is more than likely an ethical dilemma.
- Second, your next question in such a situation is to ask yourself whether the issue is one of **ethics** or **personal values**. There may be circumstances where a proposed action is not necessarily against a code of ethics, but it may be an integrity issue for you personally.
- Our personal beliefs and values may have higher or different standards than those outlined in a particular code of ethics. For instance, one person may be strongly opposed to abortion, but the facility where the person is employed may legally perform abortions. This would then become a personal dilemma for that individual and not a dilemma for the facility.

Ethical dilemma? Remember

- An ethical dilemma occurs when there is a conflict between 2 or more ethical principles.
- No correct decision exists, and the nurse must make a choice between 2 alternatives that are equally unsatisfactory.
- Such dilemmas may occur as a result of differences in cultural or religious beliefs.
- Ethical reasoning is the process of thinking through what one should do in an orderly and systematic manner to provide justification for actions based on principles; the nurse should gather all information to determine whether an ethical dilemma exists, examine his or her own values, verbalize the problem, consider possible courses of action, negotiate the outcome, and evaluate the action taken.

Discussion. Ethical overlaps or categories

- Of the following qualities, which do you think is the most important virtue in the medical field?

Honesty	Responsibility
Fidelity	Hard work
Integrity	Fairness
Justice	Sanctity of life
Respect	Gentleness
Empathy	Compassion
Sympathy	Humility

Remember

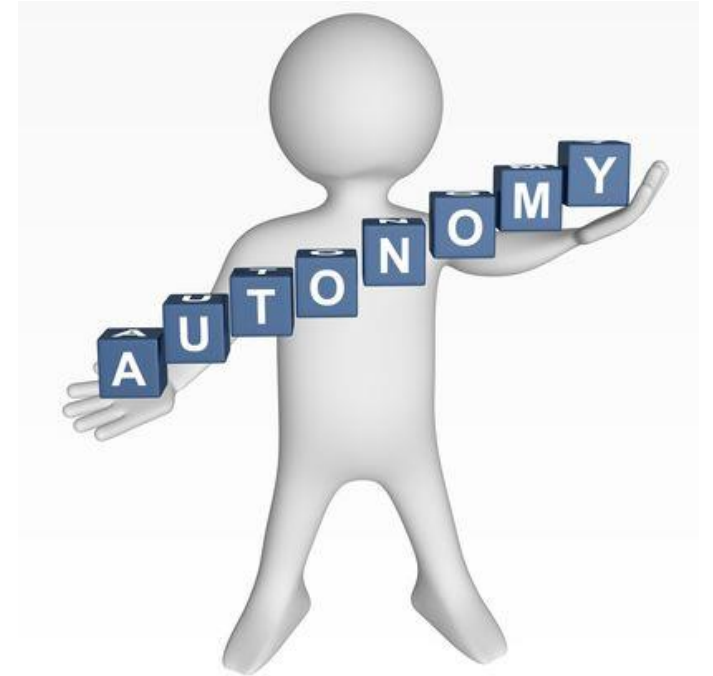
- All interactions, even ordinary ones, between client and nurse utilize principles of ethical behavior.
- Learn these principles to be able to engage in effective decision making as a nursing professional.
- Differences in clients' values, culture, and lifestyles may present healthcare providers with ethical dilemmas (situations in which ethical principles conflict) and a choice must be made between unsatisfactory alternatives
- Ethics committees in healthcare agencies assist healthcare professionals to engage in group dialogue about specific client situations and develop policies and procedures aimed at preventing and resolving dilemmas as they arise

Principles of Healthcare Ethics

Autonomy	To respect a client's right to self-determination (making free and informed choices about own life)
Beneficence	<p>To do good to others; involves weighing risks and benefits of actions; includes client advocacy; a threat to beneficence is paternalism, in which healthcare providers make choices for clients without their input</p> <p>Fidelity: Remaining faithful to ethical principles and professional Code of Ethics for Nurses; keeping commitments and promises</p> <p>Veracity: To tell the truth, which has an added benefit of promoting trust between client and nurse</p> <p>Accountability: Being answerable to self and others for own actions; includes responsibility, a specific type of accountability for duties performed in a specific role</p>
Nonmaleficence	To do no harm, either intentional or unintentional
Justice	Fair, equitable, and appropriate treatment; resources are distributed equally to all

Autonomy

- The right of **patients** to make decisions about their medical care without their health care provider trying to influence the decision. **Patient autonomy** does allow for health care providers to educate the **patient** but does not allow the health care provider to make the decision for the **patient**.
- Autonomy requires both “liberty (independence from controlling influences) and agency (capacity for intentional action)” and that liberty is undermined by coercion, persuasion, and manipulation.
- The ideal of “informed consent” is a hallmark of Western medical ethics that came about following the horrors recounted in the Nuremberg trials and was codified in American law.
- A patient’s independence is traditionally the highest priority in American bioethics (Competence and confidentiality are cornerstone of the autonomy)



Competency

- A legal determination that a client can make reasonable judgments and decisions about treatment and other significant areas of personal life
- An adult is considered competent unless a court rules client incompetent; in such cases, a guardian is appointed to make decisions on client's behalf
- Clients who are committed are still capable of participating in healthcare decisions

NCLEX® Informed consent

A legal protection of client's right to choose type of care desired and make own decisions about healthcare (expression of autonomy)

Is required if the proposed treatment or procedure involves a material risk to the patient.; a client can withdraw consent at any time (expression of autonomy)

Three elements are to be met: Information, voluntary consent and competence

Means: Client is of legal age (18 years or older) and has mental capacity to consent; Consent is voluntarily given and the information regarding care or procedures was given

The logo features the word "NCLEX" in a dark purple, serif font, centered within a large, light blue circular graphic that has a textured, watercolor-like border.

NCLEX

NCLEX® Informed consent . Nurse role

- **Obtaining informed consent is responsibility of healthcare provider performing treatment, procedure, or surgery**
- Nurses **may witness “signature” (advocacy)** of client on appropriate consent form validating that client is signing the form and has no further questions; **does not indicate provision of information by nurse or understanding by client**
- Occasionally clients do not want to hear details of planned procedures but do wish to consent to them; clients may waive right to informed consent, but waiver must be documented in medical record
- Special considerations in informed consent If client is declared incompetent to make informed decisions about healthcare, client’s next of kin, durable power of attorney, or a court-appointed guardian has legal authority to make these decisions

NCLEX® Informed consent



- **Validity Requirements**
- 1. Purposes and Benefits
- 2. Risks (Do and don't do)
- 3. Alternatives to procedure or care
- 4. Language
- 5. Specificity
- 6. Name of provider performing surgery or procedure; client has opportunity to ask questions and hear answers.

Written Informed consent

- **Does consent have to be written?**
- The law does not require written consent to perform medical treatment.
- When verbal consent is obtained, a notation should be made.
- It describes in detail how and why verbal consent was obtained.
- It is placed in the client's record or chart.
- **It is witnessed and signed by two persons.**
- The nurse should answer questions regarding the **nursing care** involved in the procedure. Questions regarding **medical care** should be referred to the physician.

Who may give informed consent for a patient?

- **The patient only unless:**
- It is an **emergency**, delay puts the patient's life at risk, and there is no one available to give consent on the patient's behalf.
- The patient is **legally incompetent** (depending upon state law, the legally appointed guardian, or the agent named in a durable power of attorney for health care gives consent).
- The patient **lacks the capacity** to make, understand, or communicate his or her health-care decisions (a surrogate decision-maker gives consent as provided by state law, usually in the following order of priority: health-care agent, spouse, an adult child, parent, an adult sibling, or a grandparent).
- The patient is a **no emancipated minor** (parent or legal guardian gives consent, and in some states, someone standing in the place of a parent may also give consent).

Minors

- A minor is a client under legal age as defined by state statute (usually younger than 18 years).
- A minor may not give legal consent, and consent must be obtained from a parent or the legal guardian; assent by the minor is important because it allows for communication of the minor's thoughts and feelings.
- Parental or guardian consent should be obtained before treatment is initiated for a minor except in the following cases:
- In an emergency; in situations in which the consent of the minor is enough, including treatment related to substance abuse, treatment of a sexually transmitted infection, human immunodeficiency virus (HIV) testing and birth control services, pregnancy care, or psychiatric services; the minor is an emancipated minor; or a court order or other legal authorization has been obtained.

Minors vs Emancipated minors

- A minor who is "emancipated" assumes most adult responsibilities before reaching the age of majority (usually 18).
- Emancipated minors are no longer considered to be under the care and control of parents -- instead, they take responsibility for their own care.
- An emancipated minor has established :
- Independence from his or her parents through marriage, have one or more dependents, or service in the armed forces, or by a court order.
- An emancipated minor is considered legally capable of signing an informed consent.

Advance Directives

- Client (Patient) Self-Determination Act
- The Client (Patient) Self-Determination Act is a law that indicates clients must be provided with information about their rights to identify written directions about the care that they wish to receive in the event that they become incapacitated and are unable to make health care decisions.
- On admission to a health care facility, the client is asked about the existence of an advance directive, and if one exists, it must be documented and included as part of the medical record; if the client signs an advance directive at the time of admission, it must be documented in the client's medical record.

Types of advanced directives

- The 2 basic types of advance directives include instructional directives and durable power of attorney for health care.
- Instructional directives(Living will): Lists the medical treatment that a client chooses to omit or refuse if the client becomes unable to make decisions and is terminally ill.
- Durable power of attorney for health care: Appoints a person (health care proxy) chosen by the client to make health care decisions on the client's behalf when the client can no longer make decisions.
- Some forms combine living will and durable healthcare power of attorney into one document, which is witnessed by two people or notarized

Do not resuscitate (DNR) orders

- A DNR order should be written if the client and health care provider have made the decision that the client's health is deteriorating, and the client chooses not to undergo cardiopulmonary resuscitation if needed.
- The client or his or her legal representative must provide informed consent for the DNR status.
- The DNR order must be defined clearly so that other treatment, not refused by the client, will be continued.
- Some states offer DNR Comfort Care and DNR Comfort Care Arrest protocols; these protocols list specific actions that HCPs will take when providing cardiopulmonary resuscitation (CPR).
- All health care personnel must know whether a client has a DNR order; if a client does not have a DNR order, HCPs need to make every effort to revive the client.
- A DNR order needs to be reviewed regularly according to agency policy and may need to be changed if the client's status changes.
- DNR protocols may vary from state to state, and it is important for the nurse to know his or her state's protocols.

Advanced directives and DNR. The nurse's role

- Discussing advance directives with the client opens the communication channel to establish what is important to the client and what the client may view as promoting life versus prolonging dying.
- The nurse needs to ensure that the client has been provided with information about the right to identify written directions about the care that the client wishes to receive.
- On admission to a health care facility, the nurse determines whether an advance directive exists and ensures that it is part of the medical record; the nurse also offers information about advance directives if the client indicates he or she wants more information.
- The nurse ensures that the HCP is aware of the presence of an advance directive.
- All health care workers need to follow the directions of an advance directive to be safe from liability.
- Some agencies have specific policies that prohibit the nurse from signing as a witness to a legal document, such as an instructional directive.
- If allowed by the agency, when the nurse acts as a witness to a legal document, the nurse must document the event and the factual circumstances surrounding the signing in the medical record; documentation as a witness should include who was present, any significant comments by the client, and the nurse's observations of the client's conduct during this process.

Statutory Report Duties

- Refer mainly to the responsibility of healthcare providers to report areas of vital information to the necessary agencies as deemed necessary for the welfare of the general public.
- Some of the events requiring accurate documentation and (in some cases) prompt reporting include the following:
 - Births
 - Deaths
 - Communicable diseases
 - Assaults or criminal acts
 - Abuse—child, elder, or spousal
 - Substance abuse

You are ready for NCLEX on this content if you can:

- Articulate ethical and legal issues in nursing practice that affect clients or families.
- Identify appropriate actions to promote ethical and legal nursing care.
- Evaluate the outcomes of interventions used to promote ethical and legal nursing care.
- Apply principles of confidentiality to client care situations.
- Identify actions to uphold client rights.
- Provide information to clients and families about advance directives.

Question # 1

- A client is referred to a surgeon by the healthcare provider. After meeting the surgeon, the client decides to consult with a different surgeon about treatment options. The nurse supports the client's action, utilizing which ethical principle?
- 1. Beneficence
- 2. Veracity
- 3. Autonomy
- 4. Privacy

Question # 2

- A nurse forgets to administer a dose of a client's diuretic drug and the client experiences an episode of pulmonary edema. The nurse should consider that this error constitutes negligence because the situation contains which element?
- 1. Purposeful failure to perform a healthcare procedure
- 2. Unintentional failure to perform a healthcare procedure
- 3. Act of substituting a different medication for the one prescribed
- 4. Failure to follow a healthcare provider's prescription

Question # 3

- A client asks why a diagnostic test has been prescribed and the nurse replies, “I’m unsure but will find out for you.” When the nurse later returns and provides an explanation, the nurse is acting under which principle?
- 1.Nonmaleficence
- 2.Veracity
- 3.Beneficence
- 4.Fidelity

Question # 4

- An individual falls and fractures a hip while walking down the street. A companion notices a nurse drive past without stopping to assist. The individual sues the nurse for negligence but fails to win a judgment for which reason?
- 1.The nurse had no duty to the individual.
- 2.The nurse did what most nurses would do in the same circumstance.
- 3.The nurse did not cause the client's injuries.
- 4.The nurse was off-duty at that time.

Question # 5

- A client who takes warfarin is given aspirin for a headache while visiting a neighbor, who is a nurse. The client subsequently has a bleeding episode caused by interaction of these drugs. The legal nurse consultant interprets which necessary elements of malpractice are missing from this case? Select all that apply.
- 1. Breach of duty
- 2. Duty owed
- 3. Injury experienced
- 4. Causation between nurse's action and injury
- 5. Intent to cause harm or injury

Question # 6

- A client with cancer has decided to discontinue further treatment. Although the nurse would like the client to continue treatment, the nurse recognizes the client is competent and supports the client's decision using which ethical principle?
- 1. Justice
- 2. Fidelity
- 3. Autonomy
- 4. Confidentiality

Question # 7

- The healthcare provider prescribes a medication in a dose that is considered toxic. The nurse administers the medication to the client, who later suffers a cardiac arrest and dies. What consequence can the nurse expect from this situation? **Select all that apply.**
- 1.The healthcare provider who prescribed the drug can be charged with negligence.
- 2.As the employing agency, only the hospital can be charged with negligence.
- 3.The nurse and prescriber may be terminated from employment to prevent a charge of negligence to the hospital.
- 4.Negligence will not be charged, as this event could happen to any reasonable person.
- 5.The nurse can be charged with negligence for administering the toxic dose.

New
question
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Generate solutions

Identifying expected outcomes and using hypotheses to define a set of interventions for the expected outcomes.

- What are the desirable outcomes?
- What interventions can achieve those outcomes?
- What should be avoided?

Focus on goals and multiple potential interventions—not just the best one—that connect to those goals. Potential solutions could include collecting additional information.



Question # 8. Case study

Case Study : Informed Consent Does a student or preceptor have a duty to obtain informed consent?

Nurses' note: A few weeks before the plaintiff was to have a vaginal hysterectomy, she told her gynecologist that she preferred privacy during her surgery.

To this end, she crossed out two portions of the physician's consent form before she signed it:

She crossed out "I consent to the presence of healthcare learners" and "I consent to the photography o[r] videotaping of the surgical, diagnostic, and/or medical procedure to be performed providing my name and identity is not revealed."

On the morning that her surgery was to be performed, the plaintiff received assurance from the attending anesthesiologist that she would personally be handling her anesthesia.

The anesthesiologist's consent form, which the plaintiff signed, read in part: "I understand that my anesthesia care will be given to me by the undersigned or a physician privileged to practice anesthesia."

After the plaintiff was anesthetized, a hospital employee, acting as a preceptor, entered the operating room with a student in an emergency medical technician (EMT) certification program.

The anesthesiologist granted permission for the EMT student to intubate the plaintiff.

During the unsuccessful intubation, the plaintiff's esophagus was torn.

Case Study Questions

- Who had the duty to obtain and conform to the informed consent given by the plaintiff?
- 1. Hospital employee
- 2. Gynecologist
- 3. Anesthesiologist
- 4. Emergency medical technician

Case Study 2 Questions

- Did the student have a duty to review the patient consent form before the attempted intubation?
- Did the preceptor have a duty to review the signed consent form?
- Was the attempted intubation considered battery?
- **Answers as a homework and post in the HERI-NCLEX Facebook forum**

Question # 9

- A staff nurse concerned about maintaining client confidentiality would take which action while carrying out assigned duties?
- 1. Read no assigned client records to become more familiar with disease processes.
- 2. Share client information with nurses from the unit to which the client may eventually be transferred.
- 3. Allow the family to review the client's health record to obtain answers to their questions.
- 4. Share information about the client with those directly involved in that client's care.

Question # 10

- The parents of a newborn tell the nurse that they do not want their infant's eyes treated with a prophylactic agent. How should the nurse respond?
- 1. "This is really for the baby's good."
- 2. "This is a legal requirement that must be done."
- 3. "It is best that you discuss this with your pediatrician."
- 4. "You'll have to sign an informed consent to refuse the treatment."

Answers

Are you ready? |

Answer to question # 1

- **Answer: 3**
- Rationale: Autonomy is the right of individuals to take action for themselves.
- Beneficence is an ethical principle to do good and applies when the nurse has a duty to help others by doing what is best for them.
- Veracity refers to truthfulness.
- Privacy is the nondisclosure of information by the healthcare team.

Answer to question # 2

- **Answer: 2**
- Rationale: Negligence is the unintentional failure of an individual to perform or not perform an act that a reasonable person would or would not do in the same or similar circumstances.
- A purposeful failure to perform a procedure would be the opposite of negligence, which is unintentional.
- Substituting a different medication does not fit the description of the situation in the question.
- Failure to follow a direct order does not fit the description in the situation in the question.

Answer to question # 3

- **Answer: 4**
- Rationale: Fidelity means being faithful to agreements and promises. This nurse is acting on the client's behalf to obtain needed information and report it back to the client.
- Nonmaleficence is the duty to do no harm.
- Veracity refers to telling the truth, for example, not lying to a client about a serious prognosis.
- Beneficence means doing good, such as by implementing actions (e.g., keeping a salt shaker out of sight) that benefit a client (heart condition requiring sodium-restricted diet).

Answer to question # 4

- **Answer: 1**
- Rationale: To be guilty of negligence, the nurse must have a relationship with the client that involves a duty to provide care.
- The relationship is usually a component of employment.
- The nurse did not necessarily do what others would do in this situation.
- Although the nurse did not cause the client's injuries, it does not prevent the nurse from assisting in this situation.
- Although the nurse was off-duty, the nurse could have assisted if motivated to do so.

Answer to question # 5

- Answer: 2 and 5
- Rationale: There was no nurse–client relationship because the nurse was acting as a neighbor and not in an employment capacity. Thus, there can be no duty owed.
- Intent is not a necessary element of malpractice because malpractice can occur because of unintended actions as well. There was no breach of duty because there was no official nurse–client relationship, which accompanies an employment situation.
- There was injury experienced because of this event.
- The bleeding was caused by the interaction of the aspirin with the anticoagulant.

Answer to question # 6

- **Answer: 3**
- Rationale: Autonomy refers to the right to make one's own decisions, which is the principle supported in this situation.
- Justice refers to fairness.
- Fidelity refers to trust and loyalty.
- Confidentiality refers to the right to privacy of personal health information.

Answer to question # 7

- Answer: 1 and 5
- Rationale: Healthcare providers who prescribe incorrect dosages of medications are liable for their errors.
- The nurse is open to a charge of negligence for failing to verify and question the incorrect dose.
- The hospital can be sued as the responsible employing agency, but the healthcare provider and the nurse can also be charged with negligence.
- Terminating the healthcare provider and nurse from employment would not stop a lawsuit charging negligence for employee actions that have already taken place.
- Prescribing and administering incorrect doses are not considered events that routinely happen to a “reasonable person.”

Answer to question # 8

- Answer is 2.
- **Obtaining informed consent is responsibility of healthcare provider performing treatment, procedure, or surgery .**
- **More information:**
- Mullins v. Parkview Hospital, Inc., 830 N.E.2d 45 (Ind. Ct. App. 2005).

Answer to question # 9

- Answer: 4
- Rationale: Client confidentiality is maintained when the nurse shares client information only with those currently involved in the plan of care.
- Staff should only access information about clients currently assigned to their care. They should not access information about other clients on the unit not assigned to them.
- Client information should not be shared with nurses who are not currently working with the client.
- Family members would need approval from the client and the healthcare provider prior to reviewing a medical record.

Answer to question # 10

- Answer is 4
- **This is the required intervention when legally mandated eye treatment is refused.**
- 1. This denies the parents' desires and implies wrongdoing on their part.
- 2. The parents have the right to refuse but must indicate their refusal on an informed consent form.
- 3. This is shifting the responsibility to the pediatrician.