Current Ethical Issues In Nursing

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Patient Privacy And Confidentiality

The privacy and confidentiality in the healthcare practice is a need to ensure a better connection between the doctor and the patient. Moreover, maintaining confidentiality can be problematic if the doctors and the patient do not take the necessary steps towards privacy. The claims of autonomy, privacy, and confidentiality must be balanced against the needs of the public, and the other people at risk. The constitution usually sets the basic premise of our community, though safeguarding the patient's right is the physician's responsibility. (American Medical Association, 2016; Beauchamp & Childress, 2019)

The case involves a 16-year-old pregnant girl who attended the clinic with her mother. She had a history of epilepsy and was taking phenytoin. During the consultation, she disclosed that she had stopped taking the medication because she feared it would harm her baby. She asked the physician not to tell her mother about the pregnancy or about stopping the medication. The physician was faced with the challenge of respecting confidentiality while also protecting the health of the patient and her unborn child.

Professional Responsibilities and Patient Rights

Healthcare professionals have a duty to maintain the privacy of information shared by patients. Confidentiality encourages patients to provide complete and accurate information, which is necessary for diagnosis and treatment. If patients believe that private information will be disclosed without permission, they may avoid care or hide important details. (Ford, English, & Sigman, 2004; American Medical Association, 2016)

Adolescents have privacy rights, but these rights may be limited by age, capacity, law, and the seriousness of the situation. A physician should assess whether the young person understands the information, risks, alternatives, and consequences of the decision. If the adolescent has sufficient maturity and decision-making capacity, their wishes should be given considerable weight. (Ford, English, & Sigman, 2004)

However, confidentiality is not absolute. Information may need to be disclosed when there is a serious risk of harm to the patient or another person, when abuse or neglect is suspected, or when reporting is required by law. The physician should disclose only the minimum information necessary and, when possible, explain the need for disclosure to the patient before taking action. (American Medical Association, 2016)

Ethical Principles of Privacy and Confidentiality

The ethical principle of respect for persons supports privacy and confidentiality. Patients should be treated as individuals with dignity and control over personal information. Maintaining confidentiality also supports trust, which is a central part of the therapeutic relationship. (Beauchamp & Childress, 2019)

The physician should create an opportunity to speak privately with the adolescent. This is common practice in adolescent healthcare because young people may be reluctant to discuss sexual health, substance use, mental health, or family problems in front of parents. A private discussion does not mean that parents are excluded from care. Rather, it allows the healthcare provider to understand the patient's concerns and encourage appropriate family involvement. (Ford, English, & Sigman, 2004)

In this case, the physician should explain why taking epilepsy medication and receiving prenatal care are important. Stopping medication suddenly can increase the risk of seizures, which may harm both the patient and the fetus. At the same time, some medications may create fetal risks, so the treatment should be reviewed rather than simply continued or discontinued without medical supervision.

Autonomy and Informed Consent

Autonomy refers to the right of individuals to make decisions about their bodies and healthcare. For a decision to be autonomous, the patient must have relevant information, understand it, act voluntarily, and possess decision-making capacity. Informed consent is the practical process through which autonomy is respected. (Beauchamp & Childress, 2019)

The physician should provide clear information about pregnancy, epilepsy, medication risks, seizure risks, and available alternatives. The adolescent should be asked to explain the information in her own words to confirm understanding. The physician should also explore why she fears telling her mother. There may be concerns about punishment, rejection, violence, or loss of support.

Although the patient is sixteen, she may be capable of participating meaningfully in decisions. Laws concerning minor consent vary by jurisdiction, particularly for pregnancy-related and reproductive healthcare. The physician must follow applicable legal requirements while treating the adolescent respectfully. (World Health Organization, 2018; Ford, English, & Sigman, 2004)

The best approach would be to encourage the patient to involve her mother or another trusted adult. Family support could help her attend appointments, manage medication, and receive prenatal care. The physician can offer to help the patient plan the conversation or be present when the information is shared. Voluntary disclosure is preferable to disclosure without consent whenever it can be achieved safely. (American Medical Association, 2016)

Beneficence

Beneficence requires healthcare professionals to act for the patient's benefit. The physician should protect the adolescent from preventable harm by arranging urgent review of the epilepsy treatment and appropriate prenatal care. The potential consequences of untreated epilepsy, including seizures, injury, and fetal harm, must be addressed. (Beauchamp & Childress, 2019)

Beneficence also involves considering the patient's psychological and social welfare. Forcing disclosure without understanding her family situation could expose her to emotional or physical harm. Therefore, the physician should assess safety before deciding whether and how to involve the parent.

Nonmaleficence, the duty to avoid harm, is closely related. Both continuing a potentially risky medication without review and stopping treatment without supervision may cause harm. The physician should consult relevant specialists, such as a neurologist and obstetrician, to develop the safest treatment plan. (Beauchamp & Childress, 2019)

Justice requires fair access to care and respectful treatment regardless of age, pregnancy, or social circumstances. The patient should receive the same quality of medical information and support as an adult patient while also receiving protections appropriate for a minor. (Beauchamp & Childress, 2019)

Recommended Ethical Response

The physician should first meet privately with the adolescent and assess her understanding, decision-making capacity, immediate medical risk, and safety at home. The physician should explain the limits of confidentiality and make clear that the goal is to protect her health rather than punish her. (American Medical Association, 2016; Ford, English, & Sigman, 2004)

Next, the physician should provide counseling about epilepsy and pregnancy and arrange prompt specialist care. The patient should be encouraged to include her mother or another trusted adult. If she agrees, the physician can support a planned disclosure.

If the adolescent refuses disclosure, the physician must determine whether the risk is serious enough to justify breaching confidentiality. The decision should be based on clinical risk, legal obligations, and the patient's capacity. Consultation with senior colleagues, an ethics committee, safeguarding professionals, or legal counsel may be appropriate. Any disclosure should be limited to information required for safety. (American Medical Association, 2016)

The physician should document the assessment, information provided, the patient's wishes, consultations, and reasons for the final decision. Good documentation protects the patient and demonstrates that the decision was carefully considered.

Conclusion

Privacy and confidentiality are essential to trust in healthcare, including adolescent healthcare. However, these duties must be balanced with autonomy, beneficence, nonmaleficence, justice, safeguarding, and legal requirements. In this case, the physician should respect the adolescent's privacy as far as possible while addressing the serious risks associated with pregnancy and untreated epilepsy. Encouraging supported disclosure, arranging urgent medical care, assessing capacity and safety, and seeking ethical or legal consultation provide the most responsible approach. (American Medical Association, 2016; Beauchamp & Childress, 2019; World Health Organization, 2018)

References

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