order for full resuscitation of a terminally ill client is legal, but one could still question whether the act is moral. On the other hand, an action can be moral but illegal. For example, if a child at home stops breathing, it is moral but not legal to exceed the speed limit when driving to the hospital.

Nursing Ethics

Most health care institutions have ethics committees to review situations that arise in ethical areas. Ethics committees typically review cases, write guidelines and policies, and provide education and counseling. They ensure that relevant facts of a case are brought out, provide a forum in which diverse views can be expressed, provide support for caregivers, and can reduce legal risks. Ethical standards of the Joint Commission on Accreditation of Healthcare Organizations support nurses’ involvement on these committees.

A code of ethics is a formal statement of a group’s ideals and values. It is a set of ethical principles that (1) is shared by members of the group, (2) reflects their moral judgments over time, and (3) serves as a standard for their professional actions. Codes of ethics usually have higher requirements than legal standards, and they are never lower than the legal standards of the profession. Nurses are responsible for being familiar with the code that governs their practice. The National Association for Practical Nurse Education and Service (NAPNES) issued the Code of Ethics for Licensed Practical/Vocational Nurses (NAPNES, 1998) shown in Box 3-5. Statements from professional organizations are not state law; they merely serve as guidelines for practice.

ORIGINS OF ETHICAL PROBLEMS
IN NURSING

Nurses’ growing awareness of ethical problems has occurred largely because of (1) social and technologic changes and (2) nurses’ conflicting loyalties and obligations.

Social and Technologic Changes

Because we are in a time of social changes, such as the women’s movement and a growing consumerism, we are also experiencing ethical problems. Currently, the large number of people without health insurance, the high cost of health care, and workplace redesign under managed care are all raising issues of fairness in allocation of resources.

Technology creates new issues that did not exist in earlier, simpler times. Before monitors, respirators, and parenteral feedings, there was no question about whether to “allow” an 800-gram premature infant to die. Today, with treatments that can prolong biological life almost indefinitely, the questions are “Should we do what we know we can?” “Who should be treated—everyone, only those who can pay, only those who have a chance to improve?”

Conflicting Loyalties and Obligations

Because of their unique position in the health care system, nurses experience conflicts among their loyalties and obligations to clients, families, physicians, employing institutions, and licensing bodies. Client needs may conflict with institutional policies, physician preferences, needs of the client’s family, or even laws of the state. According to the nursing code of ethics, the nurse’s first loyalty is to the client. However, it is not always easy to determine which action best serves the client’s needs (Box 3-6). For instance, a nurse may think that a client needs to be told a truth that others have been withholding. But this might damage the client—physician relationship, in the long run causing harm to the client rather than the intended good.

MAKING ETHICAL DECISIONS

Responsible ethical reasoning is rational and systematic. It should be based on ethical principles and codes rather than on emotions, intuition, fixed policies, or what was done previously in a similar situation. A good decision is one that is in the client’s best interest and at the same time preserves the integrity of all involved. Nurses have ethical obligations to their clients, to the agency that employs them, and to physicians. Therefore, nurses must weigh competing factors when making ethical decisions (Box 3-7). See also Chapter 4, the section on critical thinking.

Although the nurse’s input is important, in reality several people are usually involved in making an ethical decision. Therefore, collaboration, communication, and compromise are important skills for health professionals. When nurses do not have the autonomy to act on their moral or ethical choices,