

Pandemic versus Healthcare

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DESCRIPTION

The current situation of the pandemic has imparted various challenges affecting the healthcare system drastically. The steady escalation in positive cases among population and Health Care Providers (HCPs), mainly nurses, have created a disproportionate nurse to patient ratio affecting the quality of care. Hence, the delivery of care is challenged with emerging various ethical issues and considerations.

A 78-year-old male patient came to the Emergency Department (ED) with shortness of breath and mild chest pain. He was a known case of diabetes and chronic kidney disease. At that time, the ED was loaded with a massive influx of COVID-19 patients, and HCPs were busy managing them. The nurse performed his initial assessment, documented, and simultaneously received another patient. The patient was a 30-years-old female who presented with severe hypoxia and no co-morbidities. The nurse left the patient to respond to her and got so busy in her management that she did not realize that patient condition is deteriorating. Unfortunately, the patient went into cardiac arrest and expired.

This scenario raises various questions associated with medical ethics. Was the death of person justifiable? Was it the nurse's fault or a system error? Should priority be based on societal benefits versus individual benefits? Is it justifiable to not intervene in patients on time due to scarce resources? We believe that access to healthcare is a fundamental right of every individual without any discrimination. Every individual should be provided with the highest level of healthcare, and the priorities should be ethically dignified, maintain individuals' respect, and ensure justice in any situation.

Though the nurse's decision to manage the female was justified for her acute hypoxia, her act to ignore patient was immoral. It is essential to understand that only the nurse should not be made accountable for the incidence; rather, the system error should be acknowledged. The nurse was expected to manage two critical cases simultaneously without any backup support. Although the nurse could not accomplish the expected outcome, she ensured to save at least one patient, who could benefit society in the long

run. Moreover, doctors should also have timely assessed the patient since both nurses and doctors must provide patient care.

Furthermore, resource limitation justifies the prioritization of the young patients with more minor co-morbidities during this pandemic since they can benefit society. The WHO protocol of prioritizing the resources is based on the maximum benefit to most patients and the most significant number of people who will benefit most from it. The utilitarian theory supports the concept of maximal good even if it dissatisfies some individuals. Hence, the nurse's attempt to save the female patient was centered on existing protocol and ethically justified. However, Liberalism opposes this idea and combats for individual rights. The patient had the right to treatment, and the safeguard of some other patient's right should not have violated his right. Nevertheless, saving similar patients with more ailments and less life expectancy may contribute to the deprivation of the country's resources. What benefit would the patient have given to the country after treatment? [1-3].

Likewise, Deontology validates that actions, not their consequences determine morality, and ethical rules are absolute in every situation. Hence, the nurse's decision to save the 30 years old patient while ignoring the patient cannot be declared wrong ultimately. However, Kant also affirms justice as the ultimate and generalized ethical obligation to ensure all situations. If the nurse today prioritized the young girl's safety over an older man, she should do the same if the older man gets replaced by her father. Therefore, both patients should have been given equal consideration regardless of their status-quo and history. Our role as a caregiver is to minimize sufferings. The utmost concern of every HCP should be to ensure primary healthcare needs to every patient. The priorities may be considered while triaging patients but once triaged, every possible intervention should be ensured. We believe that adherence to the principles ensures the trust of people in the healthcare system [4,5].

Emergencies and pandemics bring several challenges to the healthcare system and professionals. The choices and decisions can vary with situations, but the choice should be made to ensure maximum benefit while avoiding individual harm. If the

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principle of equality was applied in the existing pandemic condition, there were more problems than solutions. This pandemic has taught us various lessons to mitigate the future crisis. Utilize scarce resources wisely and distribute equally to avoid potential deprivation. The hospital administrations should increase the healthcare workforce to prepare for future risks and minimize casualties. Also, training of the workforce should be ensured to uphold competency and expertise in emergency management.

CONCLUSION

As a final caveat, the role of ethics though important becomes questionable in pandemics. Several ethical concerns edge any conclusions during the management of emergencies. To our mind, a better approach to the problems is to prepare oneself for the future crisis so that the decision opted mirrors righteousness

from every angle while standing in the shoe of the sufferer, HCP, family or administration.

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