

Case Study On Ethics Dilemma as A Learning Method in Achieving Competency of Ethicolegal Education Program Module for Obstetrics and Gynaecology Residency Programs Faculty of Medicine Hasanuddin University

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ABSTRACT

Background and Objectives: Ethical and medicolegal competence is an important aspect of professionalism that must be possessed by obstetricians and gynaecologists. To support the achievement of these competencies, several methods of continuous learning and training are required by referring to the modules that have been established by the Collegium of Obstetrics and Gynaecologists. In the Specialist Medical Education Program, the Department of Obstetrics and Gynaecology, Hasanuddin University Faculty of Medicine, apart from a theoretical approach, the achievement of competency in the ethics and a medicolegal module is carried out using a case-based learning approach, which is to assign tasks to students in the form of case studies of ethical and medicolegal dilemmas handled and analysed during the process education and services in hospitals. Method: Literature search and observation of learning activities for Obstetrics And Gynaecology Residency Programs, Hasanuddin University Faculty of Medicine in the ethics and law module using a case study approach of ethical and medicolegal dilemmas. Result: The standard Collegium ethics and law module were prepared as a learning reference for assessing the achievement of ethical and legal competencies. In this module learning activity, students of this programs conducted a case study with ethical and medicolegal dilemmas in medical service practice. Cases were analysed based on the basic principles of bioethics (Beneficence, non-maleficence, Autonomy, justice), clinical ethics "The Four Box Method" (medical indication, patient preference, quality of life, contextual features), and medicolegal aspects. Learning objectives to achieve competence: 1) Make ethical decisions in obstetric and gynaecological services, 2) Manage legal problems in obstetric and gynaecological practice, 3) Maintain patient privacy and confidentiality, and 4) Conduct Informed Consent. Conclusions and Recommendation: A case study in the ethics and law module for Obstetrics And Gynaecology Residency Programs improves the ability to make clinical decisions that are dilemma and medicolegal-related. Case studies become a learning model for the achievement of ethical and legal competencies.

Keywords: Case studies, Ethics and law modules, Resident Competence.

1. INTRODUCTION

Medical science is part of empirical science, outside of normative sciences. What is 'really' is the study of empirical sciences, while 'preferably' is the study of normative sciences. Because part of normative science, ethics is what 'preferably' is not what is 'real' [1].

Ethical Issues are a topic that is important enough to be discussed so that the majority of individuals will issue opinions on the issue following the principles or values related to the morality of false right values embraced by a group or society. An Ethical Dilemma is a situation that

exposes an individual to two choices, and none of those choices considered by the right way out [2].

The ethical problems that arise in medical ethics are mostly related to issues early in life. Every issue that appears has been the subject of extensive analysis of medical organizations, government advisory, and ethical institutions, and in many countries, there are laws, regulations, and policies concerning the issue [2].

People's views on various laws have led to multiple perceptions of the law. Law in the sense of legislation known by the public as the law is generally given the importance as a regulator.

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Therefore, the rule of law in health is known as the health law, although the health law may be more broadly covered [3].

In Indonesia, health law develops along with the dynamics of human life. The more regulates the legal relationship in health services, and more specifically, the health law regulates between doctors, hospitals, health centers, and other health workers with patients. Because it is a fundamental right that must be fulfilled, the regulation of health law, which in Indonesia is made a rule about the law, namely by enacting Law No. 23 of 1992 on Health Law as amended by Law No. 36 of 2009 on health. Health law in Indonesia is expected to be more flexible and able to follow the development of science and technology in medicine [3].

Privacy is the level of interaction or openness that a person wants in a particular condition or situation. the desired level of privacy is about transparency: the desire to interact with others or just want to avoid or try to be challenging to achieve by others. The secret of medicine is a norm that has traditionally been regarded as the basic norm that protects a doctor's relationship with a patient [4].

In providing health services, doctors must first offer informed consent to patients. Medical approval or informed consent is the patient's consent or his family based on an explanation of the medical action to be performed on the patient. Permission can be given in writing or verbally, but any medical action that carries a high risk must be with a written consent signed by the one who wants to provide support [5].

Ethical and medical competence is one of the essential aspects of professionalism that need to be possessed by obstetricians and gynecologists. To support the achievement of competence is required several methods of learning and continuous training by referring to the module that has been determined by the Collegium of Obstetrics and Gynaecologists, namely in Module 4: Ethics And Law In Obstetrics and Gynecology. In the education program of obstetrics and gynecology specialists of the Faculty of Medicine, Hasanuddin University, in addition to the theoretical approach, the achievement of competency of ethical and legal modules is also carried out with a case-based learning approach that provides tasks to students in the form of case studies of moral and medical dilemmas that are handled and analyzed during the implementation of educational processes and services in hospitals.

2. METHOD

This study was conducted a literature search and observation of student learning activities obstetrician and gynecology specialist education program in module 4: ethics and law with a case

study approach of ethical and medical dilemmas.

In the Specialist Medical Education Program, the Department of Obstetrics and gynecology, Hasanuddin University Faculty of Medicine refers to the module guide of the Indonesian Obstetrics and Gynecology Collegial College consisting of three namely Obstetric Module, main modules, gynecology module, and support module. Module 4: Ethics and Law in Obstetrics and Gynecology are modules of supporting modules presented starting in the first semester (briefing) to the final semester (eighth semester). In supporting the achievement of competence in this module, after the next briefing session, participants of obstetrics and gynecology specialist education programs are given the task to take one case during educational activities in the hospital and conduct analysis related to medical problems and ethical dilemmas and aspects of medicine.

3. RESULTS AND DISCUSSION

The standard collegial ethics and law module is prepared as a learning reference for assessing the achievement of ethical and legal competencies. Ethics, humanities, and medical law are essential parts of professionalism that must be mastered by obstetrics and gynecology specialists. Referring to the vision of the Faculty of Medicine Hasanuddin University is to realize humanist graduates of the education system (digital) reputable with the slogan "From Digital to Humanism", the vision of Education Specialist Obstetrics And Gynecology Hasanuddin University that produces humanist graduates with scientific literacy, and to realize one of its missions is to carry out education and training continuously with the application of innovative technology and internalize values, norms, and academic ethics that are humanistic, it is necessary to a strategy and innovation of the curriculum of obstetrics and gynecology specialist education by implementing Ethics, Humanities and Medical Law in the student module of obstetrics and gynecology specialist education programs, so that strengthening of ethics, humanities and law is expected to answer the challenges to improve the professionalism of graduates of obstetrics and gynecology specialist education in Indonesia [1].

The lack of adequate medical ethics education in the past does not mean that Indonesian doctors are unethical. Although there is no prosecution against a doctor ensures that he is an ethical doctor.

Learning about ethics, humanities, law, and medical professionalism for specialist doctor education participants in pluralistic issues such as Indonesia is an urgent task. Learning about the ethics of medicine, humanities, law, and professionalism can help participants of obstetrics and gynecology specialist education programs reach



maturity individually, increase ethical vigilance, and behave in moral areas, which will later produce specialists who are humanists and professionals in the health service.

In this module, participants of obstetrics and gynecology specialist education programs are focused on cases that contain ethical and moral dilemmas in the practice of daily obstetrics and gynecology services. During the educational process, students are expected to take several issues and then analyzed based on the basic rules of bioethics (Beneficence, non-maleficence, Autonomy, justice), clinical ethics "Four Box" (medical indication, Patient preference, quality of life, contextual feature) and humanities principles, especially in establishing trust, communication, and good relationships between patients and doctors. The students conduct a discussion of the case following the module. In addition to the debate, the students also hone skills following the purpose of practicing medical skills and as an introduction to various problems that will be found by the students later, especially in establishing communication, and good relationships between patients and doctors and skilled in performing and applying the Principles / Basic Rules of Bioethics to problems and decisions of clinical ethics and health humanities issues, in preparation for entering the community and responsible as a professional specialist doctor.

This ethics module is presented to obstetrics and gynecology specialist education programs starting from the first semester until the final semester. Purpose of Module 4 Ethics and law in the field of obstetrics and gynecology: This module is prepared for the learning process for the introduction and achievement of competencies in the ethical and legal issues of obstetrics and gynecology through learning sessions in the classroom and clinical practice and after completion of studying these module students are expected to be able to analyze various cases of ethical dilemmas in situations that are "conflicting", following the demands of society in developing countries and responsible as a professional doctor [1].

Module Complement that is expected after completing this module is capable learners [1]:

- 1. Analyzing cases of ethical dilemmas based on the principles of Basic Rules of Bioethics, principles of Clinical Ethics according to Jonsen AR, Siegler "The Four Box Method", and humanities in medical ethics decisions.
- 2. Making ethical decisions in obstetrics and gynecology services:
 - 1) Identifying ethical problems in obstetrics and gynecology services
 - 2) Discuss clinical risks and alternative measures of obstetrics and gynecology issues

- 3) Know when consultation with other parties is needed in solving obstetrics and gynecology ethical issues
- **3.** Managing legal issues in obstetrics and gynecology practice:
 - 1) Identifying legal issues in obstetrics and gynecology services
 - Complete the certificate/documents / medical certificate related to pregnancy, childbirth, birth, sick certificate, abortion information, death
 - 3) Carrying out examinations and providing explanations related to postmortem autopsy and cases of maternal or neonatal death, sexual violence
 - 4) Cooperating with other parties related to the legal aspects of obstetrics and gynecology practice
- 4. Maintaining privacy and Confidentiality:
- Ensure patient privacy and Confidentiality are well maintained
- 2) Using and sharing medical information appropriately
- 3) Manage and be aware of patient confidentiality
- 5. Informed Consent:
 - 1) Able to do and get adequate informed consent by using a variety of supporting materials appropriately
 - 2) Able to provide information, discuss various clinical risks in different obstetrics and gynecology measures
 - Able to assess and conduct ethical or legal consultations to other parties to obtain second opinions, including with social services or police

As with many terms related to scientific context, the name "ethics" is derived from ancient Greek. The Greek word ethos in its singular form has many meanings: ordinary dwellings, meadows, stables; customs, customs; morals, characters; feelings, attitudes, ways of thinking. In the plural form, "ta etha" means traditional businesses. And this last meaning became the backdrop for establishing the term ethics that the great Greek philosopher Aristotle had used to denote moral philosophy. And thus, "ethics" means the science of what is commonly done or the science of customs [6].

Ethics is a branch of axiology that talks about good value predicates (right) and wrong (wrong) in morals and immoral. As a particular subject of ethics, speak about the qualities that cause people to be moral or wise [7]. According to Dagobert D. Runes in his Dictionary of Philosophy, Ethics, also called moral philosophy, is a study or discipline that takes into account considerations of justification and reproach, reflections of truth or error, good or bad, virtue or evil, worthiness or wisdom of actions, rules, purposes, objects, or circumstances.



Ethical principles are axioms that facilitate moral reasoning. These principles must be specific. In practice, one direction can be considered with another. In some cases, one focus can be more important than another.

In conducting case analysis and medical approaches, participants of obstetrics and gynecology specialist education programs are also expected to be able to understand a step in ethical decision making, i.e., an assessment where facts can contribute. Still, the final decision must be taken by weighing various values, which is content regarding ethical decision making. All general doctor decisions can be included in two main groups, namely:

- 1. Every doctor's decision concerns a human being, both as a decision-maker and a consequence of that decision.
- 2. Each medical decision concerns a choice between different things, as a result, based on the facts. Decision-making is done by considering the various values that are related to the consequences of varying decision-making.

Individual physicians need to develop decisionmaking measures that can be used consistently when ethical problems are encountered. Several useful steps have been proposed, of which the elements consist of:1

- Identify decision-makers. The first step is to answer, 'Whose decision is that?' Generally, patients are considered to have the authority to accept or refuse treatment.
 - a. At some point, the patient's ability to make decisions is unclear. The capacity to make decisions depends on the patient's ability to understand the information and its implications. An assessment must be made.
 - b. If the patient is not expected to decide, the patient's guardian or family member must play a role. In some circumstances, the court must determine whether the patient is competent or not.
 - c. In the case of obstetrics, pregnant women are usually considered competent.
- 2. Collect data, establish facts and problems.
 - a. Data collection should be done as objectively as possible
 - b. Use consultation, if necessary, to ensure that all information about the diagnosis, therapy, and prognosis has been obtained.
 - 3. Identify all matching action options
 - a. Use consultation if necessary
 - b. Identify other options.
 - 4. Evaluation of action choices following the values and principles involved
 - a. The values of decision-makers will be most important

- b. Decide if there is a choice that violates ethical principles
- c. Elimination of such options
- Double-check the remaining options according to interests and values.
- 5. Identify ethical conflicts and try to implement priorities
 - a. Try applying the problem with visible ethical principles (e.g., beneficence-non maleficence vs. autonomy)
 - b. Consider the principles underlying each argument made whether one of the regulations seems more critical. Does one way the proposed action look better than the other?
 - c. Consider the choice of action in a similar case beforehand and decide if it can be used for this issue? Typically, a similar workaround earlier can help.
- 6. Selection of the best action options. Try to solve the problem rationally.
- 7. Re-evaluate the decision after it is implemented. Has the best decision been made? What lessons can be learned from the discussion and resolution of the issue?

In addition to the steps above, the analysis of clinical decision-making ethics on the study of cases of ethical dilemmas, participants of obstetrics and gynecology specialist education programs are also expected to be able to analyze issues with the approach of basic rules of bioethics and clinical ethics "The four-box method."

Beauchamp and Childress (1994) outline (Four principles of European ethics) that to reach decision ethics required Four Basic Moral Rules / Bioethics Basic Rules (Moral Principle) and some rules or criteria below. The four Basic Moral Rules are [8,9,10]:

- 1. The principle of "Autonomy" (self-determination) is a principle that respects the rights of patients, especially the right to autonomy of patients (the right to self-determination). It is the power that the patient has to decide on a medical procedure or the sharing of personal information and medical information of the patient. It was this moral principle that later gave birth to the doctrine of Informed consent.
- 2. The principle of non-harming "Non-maleficence" is the principle of avoiding the occurrence of damage or the principle of moral prohibiting actions that worsen the patient's condition. This principle is known as "primum non nocere" or "above all do no harm."
- 3. The generous principle of "Beneficence" is a moral principle that prioritizes actions aimed at the patient's right or the provision



of profit and balances those benefits with risk and cost. Beneficence is not only known for good deeds but also deeds whose right side (advantage) is greater than the bad

4. The principle of justice "Justice" is a moral principle that attaches importance to fairness and fairness in behaving and distributing resources (distributive justice) or distribution of profits, costs, and risks fairly.

Ethical decision-making, especially in clinical situations, can also be done with a different approach to the basic moral rule approach above. Jonsen, Siegler, and Winslade (2002) developed an ethical theory that uses four essential topics in clinical services known as "The Four Box Method", namely: 9.10,11

1. Medical Indication

On the topic of Medical Indication are included all appropriate diagnostic and therapeutic procedures to evaluate the patient's condition and treat it. Assessment of medical indications is reviewed from the ethical side and mainly uses the basic rules of Bioethics, Beneficence, and Nonmaleficence. The ethical questions on this topic are similar to all information presented to patients on the doctrine of Informed consent.

2. Patient Preferences

On the topic of Patient Preferences, we pay attention to the value (value) and the assessment of the benefits and burdens that will be received, which reflects the rules of autonomy. Ethical questions include questions about the patient's competence, the nature of volunteer attitudes and decisions, understanding of information, who is the decision-maker when the patient is incompetent, the values and beliefs embraced by the patient, and others.

3. Quality of Life

The topic of Quality of Life is the actualization of one of the objectives of medicine, namely improving, maintaining, or improving human life quality. What, who, and how to conduct quality of life assessment is an ethical question around prognosis, which relates to bioethics' basic rules, namely Beneficence, Nonmaleficence, and autonomy.

4. Contextual Features

The principle in Contextual Features is Loyalty and Fairness. Here are discussed ethical questions about non-medical aspects that influence decisions, such as family factors, economy, religion, culture, Confidentiality, allocation of resources, and legal factors.

Ethical knowledge and sensitivity to ethical issues vary widely among doctors. Doctors' general education is almost all directed to the mastery of techniques to make diagnoses, make clinical and scientific decisions, while formal education and exercises in conducting ethical assessments to lead to responsible decision-making are still few. Therefore, doctors must improve their knowledge and skills in deciding ethical issues through formal Education, Continuing Education, reading, and others' experiences.

Implementation and review of case studies in Module 4: Ethics and law in the field of obstetrics and gynecology in participants of obstetrics and gynecology specialist education programs can improve the ability in clinical decision-making dilemma with moral justification (logical deductive) that respects the values and interests of patients, this can be evaluated in the participant logbook from the first semester to the eighth semester.

4. CONCLUSION

Based on the results and discussions that have been submitted previously, it can be concluded that case studies in the ethics and legal modules of obstetrics and gynecology specialist education programs improve the ability in dilemma and medicolegal-related clinical decision making. Case studies become a learning model for the achievement of ethical and legal competencies.

AUTHORS' CONTRIBUTIONS

All authors contributed to study planning, and data collection and interpretation, and reviewed and approved the final version of this manuscript.

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