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Healthcare, Safety and Bioethics

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ABSTRACT

Healthcare changes dramatically because of technological developments, from anesthetics and antibiotics to magnetic resonance imaging scan and radiotherapy. Future technological innovation is going to keep transforming Healthcare, yet while technologies new drugs treatments, new devices, new social media support for health care etc. Will drive Innovation, human factors will remain one of the stable limitations of breakthroughs. No predictions can satisfy everybody, instead this article explores fragments of future to see how to think more clearly about how to get where we want to go. Significance for public health technology drives Healthcare more than any other force and in the future it will continue to develop in dramatic ways. While we can glimpse and debate the details of future trends in Healthcare, we need to clear about the device so we can align with then and actively work to ensure the best outcomes for society as whole.

The principle of patients safety is fundamental to any modern health care system in the world today. It seeks to ensure that patients get adequate. India is in rank 42 in health care system also India is in 66.25 in Healthcare index.

Bioethics is the study of the typically controversial ethical issues emerging from New situations and possibilities brought about by advances in biology and medicine. Biosafety is the prevention of large scale loss of biological interigity, focusing both on ecology and human health. In the last century, there have been a number of developments in medicine that have revolutionized field of medical practice. This has made it possible to when a health care provider overseas a patient health disagreements about treatment decisions can pose ethical dilemmas for Healthcare professionals.

In health care system there are growing concerns about ethical issues lack of knowledge and practice of medical ethics has led to legal suits against Healthcare.

Keywords: Ethics, informed consent, confidentiality research, human subjects, Hippocrates oath.

I. EUROPEAN UNION: HEALTH STANDARDS IN REFUGEE CAMPS

The European Union is tasked with establishing a Common European Asylum System. To that end, several legislative instruments have been adopted, including a directive on standards

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regarding reception conditions of applicants for asylum or subsidiary and temporary protection. For vulnerable persons, such as minors, there are special protections in place. Applicants have a right to receive necessary health care, which must at least include emergency care and essential treatment of illnesses and of serious mental disorders. (Dec. 2019)[2]

II. REGULATING ELECTRONIC MEANS TO FIGHT THE SPREAD COVID-19

Countries have to find ways to control and mitigate the spread of COVID-19 in order to break the chain of human-to-human transmission, such as case identification, isolation, testing, contact tracing, quarantine, and location tracking. Many governments have turned to electronic measures to provide information to individuals about the COVID-19 pandemic, check symptoms, trace contacts and alert persons who have been in proximity to an infected person, identify "hot spots," and track compliance with confinement measures and stay-at-home orders. Most of the surveyed jurisdictions have developed one or several dedicated [3]coronavirus apps with different functionalities, such as general information and advice about COVID-19, symptom checkers, and contact tracing and warning. This report surveys the regulation of electronic means to fight the spread of this infectious disease in 23 selected jurisdictions around the globe. (June 2020)

III. REGULATION AND FUNDING OF ALTERNATIVE MATERNITY CARE PROVIDERS

This report includes surveys of the regulation and funding of two types of alternative maternity care providers, midwives and doulas, in 10 countries around the world. All researched jurisdictions regulate the work of midwives, which is not the case when it comes to doula activities. Health care, which includes midwife services, is funded either by the government at the federal, provincial, territorial, or local level or by a national health insurance scheme. Doula services are not funded in the vast majority of the researched jurisdictions. (May 2019)[4]

IV. REGULATION OF WILD ANIMALS WET MARKETS

This report examines the regulation of "wet markets," where wild animals or the meat of such animals can be purchased for human consumption. It covers 28 jurisdictions around the world, with a particular focus on sanitary requirements for such markets and the legality of trading in wild animals or wild meat. Wet markets and other types of local or traditional food markets exist in countries around the world and are an important source of food and livelihood for many people. However, they have also been identified as potential or likely sources of outbreaks of

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[2] Finologylegal
[3] The hindu legal issue
[4] Ipleaders

diseases or infections that are transmissible from animals to humans, including most recently COVID-19. (August 2020)[5]

V. SUPPLY CHAIN REGULATIONS OF PHARMACEUTICAL SAMPLES

This research surveys several countries' regulations regarding "serialization" of pharmaceutical products and whether these regulations apply to free medicinal product samples. The attached reports explore the specific "track and trace" or "serialization" laws and regulations in the European Union, Japan, and Turkey. While technical aspects of serialization differ across jurisdictions, one widely used benchmark for legislation is the voluntary GS1 standards, and specifically the Global Trade Item Number (GTIN). Globally,it is estimated that 70 countries have based their regulatory requirements for traceability of pharmaceuticals on these standards. (Sept. 2019)[6]

VI. ELECTRONIC AND ETHICAL HEALTHCARE

Digital Healthcare, as the name suggests, involves the distant treatment of patients using digital platforms for communication. This type of delivery of healthcare services is also known as telemedicine. It helps in direct interaction with the patient and ensures that the patient has access to healthcare even from remote areas. In recent times, Electronic Health Records have been used in order to retain and store the data collected from these communications.

Electronic Health Records are used to keep a record of the medical details of a person in a digital format. These include the history, treatment, details of examinations and so on. It is essentially like a file of one's health record, recorded in a digital form. The reason why Electronic Health Records are becoming popular methods of storing data is that they have several advantages.

The questions relating to ethics arise in this situation when it comes to the storage and transmission of the patient's personal health records. Who can access this information, how does one ensure that this information is handled with care, what are the repercussions in case the data is leaked, are just some of the questions that may come to mind. Patient information confidentiality has always been given importance in the field of medicine and it is expected to remain so in the future.

Thus, finding solutions to the issues at hand becomes important in a world that has already begun adopting digital healthcare services as a new platform for providing services.

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[5] https://www.loc.gov/law/help/current-topics.php
[6] https://www.loc.gov/law/help/current-topics.php

VII. ONLINE REGISTRATION SYSTEM

This system uses a person's Aadhaar information in the registration process and links patients to hospitals online. After choosing the required hospital and the department, an SMS is sent to the registered mobile number with appointment details. This platform allows hospitals to provide online appointments and also store detailed reports of their patients.

VIII. CENTRAL GOVERNMENT HEALTH SCHEME

This scheme is specifically for employees and pensioners of the Central Government. It provides several healthcare facilities to the patients.

These are just some of the major schemes that have been implemented by the Ministry of Health and Family Welfare. National Health Portal, e-Hospital, National Identification Number among others are also provided by the Centre.

IX. INDIAN MEDICAL COUNCIL (PROFESSIONAL CONDUCT ETIQUETTE AND ETHICS) REGULATIONS, 2002 (AMENDED UPTO 8TH OCTOBER, 2016)

Indicates the duties and responsibilities of the registered medical practitioners.

These regulations enforce certain standards which medical practitioners are required to follow. If they fail to do so, legal action can be taken against them and they can be penalized as well. Some of the duties and responsibilities of the physician are as follows

1. Maintaining good medical practice

2. Maintenance of medical records

3. Highest quality assurance in patient care

4. Patience, delicacy and secrecy

5. Patient should not be neglected

6. Unnecessary consultations should be avoided

7. Punctuality in Consultation

8. Not to conduct sex determination test

9. Advertising is not allowed

10. Contravening cosmetics and drugs act are not allowed

11. Reporting to call for emergency, military situations

12. Reporting of suspected causes of death

13. There should be informed consent of the patient

14. Running an open medical shop is not allowed

15. Ban on practice of euthanasia

Medical Practitioners are required to follow the standards set in the Code. The Code also states acts of commission or omission on the part of a physician which shall constitute misconduct rendering him liable for disciplinary action.

Case- Dr. Kunal Saha V. Dr. Sukumar Mukherjee, AMRI (Advance Medicare and Research Institute LTD) and Ors.

Popularly known as Anuradha Saha Case, this case was filed in 1998 against AMRI Hospital, namely three doctors – Dr. Sukumar Mukherjee, Dr. Baidyanath Halder and Dr. Balram Prasad. The petitioner had alleged medical negligence on the part of the doctors resulting in the death of the patient.

Facts of the case in brief – Petitioner's wife was suffering from a drug allergy and the doctors were negligent in prescribing the medicines, which further aggravated the condition of the wife, resulting in her untimely death.

Supreme Court found the doctors guilty and awarded a compensation of around seven crores to the petitioner for the loss of his wife.[7]

X. CONCLUSION

This Review article on Healthcare, safety and Bioethics all about some rules regulations and in this digital world what are the issues rules regarding Healthcare, online Registration System also Indian Medical Council (Professional conduct Etiquette and Ethics) Regulation 2002, amended upto 8th October 2016. This Review article also deals with case law after going through this it will clear the concept of regarding Healthcare, ethics, bioethics and safety.

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[7] Indiankanoon.org