Letter to Editor

Value-Based Education and Critical Clinical Settings

Dear Editor-in-Chief,

Value-based education is known as one of the affecting factors of professional dignity of medical practitioners, as well as their informed decision-making in critical clinical settings. Critical situations are the best opportunities to convey professional and moral practice and also the most difficult.[1] The resuscitation or blue code involves calling in a special team to take immediate actions for a patient who has developed cardiopulmonary arrest to bring the patient back to a stable state. The important point is the speed of action that is often life-saving in the cooperative effort of the resuscitation team with the stake of nurses. In contrast, "slow code" that is mainly enacted in end-of-life patients, is limited in terms of number, duration, intensity, or all three. Lantos et al.[2] have defined the slow code as a short-term intervention that is practically symbolic and apparently effective. In this manner, it seems that we are trying to save the patient life, but we are in fact deceiving the family.

Doing cardiopulmonary resuscitation to address the interests and grief of "other important people" is morally unfounded and deceptive. The team knows that doing everything for an end-of-life patient is futile, and interventions are not only ineffective but actually harmful. All the challenges in slow code arise due to low awareness of the patient's family, whereas we can prevent the futile actions by establishing a clear relationship and empathy with them.

"Tailored code" is a valuable alternative, especially in end-of-life situations, where high-quality resuscitation is performed within defined specific limits. In this manner, family members are clearly informed about what will and will not be done, and sound communication can make hope and patience, and prevent futile care, whereas performing essential and personalized actions without family deception. [4]

The review of medical sciences students' curriculum, especially nursing ones, indicates that mentioned issues are not specifically addressed and most of the learning occurs through a hidden curriculum. Thus, the development of a value-based curriculum is needed to transfer both ethical values and professional teachings in critical settings, with an integrated approach of theoretical and practical education. [5] Furthermore, given the more exposure of nurses to stressful situations, ethical analysis of clinical cases, which enables nursing students to develop moral sensitivity and reasoning as essential skills to face and solve moral dilemmas, is recommended.

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