



Suggested answers to “spot the ethical issue” situations (*PJ*, 10 Nov, pp533–536)

All of the scenarios require the pharmacist to give attention to respecting the patient’s right to confidentiality and privacy, and the proper management of patient information and records. In particular, principle 3 (statements 3.5–3.9) and principle 4 (statements 4.3 and 4.4) in the code of ethics supplemented by the standards and guidance on patient confidentiality.

Situation	Possible issues	Relevant parts of the 2007 code/standards
1	<ul style="list-style-type: none">There seems to be inadequate privacy over prescription information. This could be visible on actual prescriptions, dockets or on computerscreens.	The preamble to standards on confidentiality and statement 2.1
2	<ul style="list-style-type: none">Provided the patient has the capacity to consent, it is not ethical to disclose information to relatives without consent.	Paragraph 3.1 of the standards on confidentiality
3	<ul style="list-style-type: none">Always release the minimum amount of information and check what will be done with it.Require assurances of confidentiality from the recipient.	Paragraphs 3.2 and 3.3 of the standards on confidentiality
4	<ul style="list-style-type: none">Prisoners have the same rights as other patients to confidentiality of their information wherever possible.Confidential queuing booths for consultation, locked storage of medicines or secure storage elsewhere may be possible.	The preamble to standards on confidentiality and paragraphs 2.1 and 3.1
5	<ul style="list-style-type: none">The safe disposal of patient identifiable information should be assured. (eg, have confidential waste disposal procedures)	Paragraph 2.2 of the standards on confidentiality
6	<ul style="list-style-type: none">Provide a short briefing and written notes on all relevant points in the standards on confidentiality	The standards on confidentiality.
7	<ul style="list-style-type: none">There can be no presumption that “grandma” consents to disclosure to her grandson. Politely refuse until you can check with the patient	Paragraph 3 and 3.1 of the standards on confidentiality
8	<ul style="list-style-type: none">This topic is currently under debate — this may be an issue at registration. There is a conflict between the public interest in ensuring fitness to practise and the confidentiality and trust anticipated by the preregistration trainee.	The code and standards do not explicitly cover this.