

**How to Cite:**

Taghipour, N., Pirzadeh, F., Movasaghi, M., Abedi, A., & Taheriyani, Y. (2022). Evaluating the ethical reasoning and factors facilitating professional ethics of nursing. *International Journal of Health Sciences*, 6(S7), 6212–6227. <https://doi.org/10.53730/ijhs.v6nS7.13461>

## Evaluating the ethical reasoning and factors facilitating professional ethics of nursing

**Narges Taghipour \***

M.Sc. Nursing director of Kowsar Hospital of Alborz University of Medical Sciences, Karaj, Tehran

Email: [Taghipoornarges5799@gmail.com](mailto:Taghipoornarges5799@gmail.com)

**Fatemeh Pirzadeh**

Master of Internal Nursing – Surgery, Alborz University of Medical Sciences, Karaj, Tehran

Email: [pirzadeh\\_f@yahoo.com](mailto:pirzadeh_f@yahoo.com)

**Mahshad Movasaghi**

Nursing Expert, Alborz University of Medical Sciences, Karaj, Tehran.

Email: [rosmov831@gmail.com](mailto:rosmov831@gmail.com)

**Azam Abedi**

Nursing Expert, Education Supervision Kosal Hospital Alborz University of Medical Sciences, Karaj, Tehran.

Email: [azamabedi2000@gmail.com](mailto:azamabedi2000@gmail.com)

**Yasaman Taheriyani**

Nursing expert . Alborz University of Medical Sciences, Karaj. Tehran

Email: [yasamantaheriyani1@gmail.com](mailto:yasamantaheriyani1@gmail.com)

**Abstract**--Nursing is one of the most crucial foundations of any country's healthcare system. Nurses spend most of their time at the bedside of their patients, exposing them to a wide range of situations and, as a result, are constantly faced with ethical dilemmas. The present study aims to investigate the ability of ethical thinking and the characteristics that help nurses maintain their professional ethics. This is cross-sectional descriptive research in Alborz University of Medical Sciences (281) hospitals in 2018. The Christman ethical reasoning questionnaire and Kohlberg facilitators were used to collect data. SPSS software version 20 and descriptive and analytical tests were used to evaluate the data. The mean score for nurses' ethical reasoning was 49.17, Emphasizing the staff skills during the division of labor in the managerial dimension, positive attitude of nurses toward professional ethics standards in the individual dimension, positive attitude of nurses towards the standards of professional ethics in the individual

dimension, and patients' familiarity with time and the way to provide nursing services in the patient dimension have the highest score. The findings also revealed that the two variables of moral thinking and elements promoting professional ethics in nurses had no significant association. According to the study's findings, According to the study's findings it is suggested that specific training courses be held to improve nurses' capacity to in ethical situations.and Familiarity with the influential factors of the management dimension.

**Keywords**--*Facilitating factors, Ethical reasoning, Nursing staff, Alborz University of Medical Sciences.*

## **Introduction**

Nursing is a discipline of medicine and one of the most crucial foundations of any country's healthcare system (1). Individuals' health and disease can be directly affected by nursing services, making the nurse a professional in the health sector (2)The ethical dimensions of health concerns have also evolved as a result of advancements in health care. As a result, public awareness of ethical issues in this sector is growing(3, 4). Professional ethics is a collection of rules and norms of human behavior that govern the actions of individuals and groups, and it may even be described as a logical thinking process (5) Ethics is crucial in every employment, but in the nursing profession, it is more important, and because spiritual conduct may be useful in improving and restoring patients' health, the nursing profession can be considered to be built on ethics(6). According to earlier surveys, around 11% of nurses confront moral obstacles and dilemmas daily, and 36% face them every few days, indicating that this is a problem. Nurses, regardless of expertise, require advice in treating patients and making ethical judgments, which can help them perform better in their jobs (7, 8)Nurses spend the majority of their time on patients' beds and close to a variety of situations; thus, they are constantly confronted with ethical judgments. They also have greater talent and expertise in their work contexts to cope with ethical difficulties(9)Researchers have paid special attention to ethical decision-making in nursing around the world due to the increasing complexity of ethical issues and problems. Ethical decision-making ability is considered as one of the main competencies of nursing practice. It is also important to identify the key variables associated with ethical decision making and to understand their relationship, respectively(10).Respect for human rights, especially cultural rights, the right to life, and courteous behavior, is fundamental in nursing. In this sense, adhering to ethical norms in nursing work enhances nursing services and increases the quality of their job, which helps patients recover faster (11, 12)Nursing ethics, according to some academics, focuses on good functioning and risk minimization, making the nurse accountable for the patient's values (13, 14)Nursing care and practice have been characterized as a complicated phenomenon in which dedication and adherence to ethical standards in giving care to patients take precedence over caring, and adherence to these values is one of the nursing profession's key things(15) Different opinions have been attributed to the activities of nurses in various studies, particularly on the subject of ethics. Some have characterized moral performance as relationships with coworkers and patients, medicine, respect for patient rights and responsibility, and so on, whereas

nursing ethics encompasses all nursing responsibilities (2). Nurses face ethical dilemmas daily as a result of their role in caring for patients, which can lead to misunderstandings between the personal perspectives and professions of the physician and the client. Nurses are accountable for balancing their principles with the needs of their patients; however, despite having more knowledge about their patients, they frequently struggle to make judgments, indicating a lack of moral reasoning skills. Moral reasoning is enhanced as a capacity to cope with ethical difficulties, according to studies on nurses' ethical reasoning. Both education and job experience are useful in enhancing moral reasoning ability (16). Nurses react differently to ethical problems, according to the findings of research on how they cope with ethical concerns and make ethical decisions. These decisions can result in appropriate and positive emotions such as feelings of pleasure, improved motivation, and a sense of competence, or negative reactions such as dissatisfaction, decreased motivation, and low morale in the absence of facilities, nurses, and a high workload. As a result, it is critical to be aware of our country's nurses' moral reasoning ability (17). Simulations are one of the most effective educational approaches in building self-confidence in moral reasoning and promoting moral readiness in nursing students. As a professional nurse, act in a realistic scenario with minimal risk of harm to yourself or others, and be prepared to face the workplace (18). Adherence to the standards of professional ethics in nursing patient care is a very important and necessary thing that according to the evidence, our nurses for various reasons, ideally, do not follow them as appropriate to patients and our culture (19). The results of studies conducted in the field of professional ethics in Iran indicate poor performance or ethical performance of nurses in the middle (20-22). Jafari's study also showed that the performance of Shiraz nurses in professional ethics was poor and nurses were not able to apply moral knowledge in the clinical environment (21). Investigating the factors that facilitate the observance of ethics Professional care by nurses can provide useful information in order to better comply with the ethical standards of nurses (23).

Some factors that facilitate the observance of professional, ethical standards have been identified in studies, including the availability of experienced instructors to teach professional ethics, an increase in the scientific level of nurses' knowledge, the existence of nursing ethics committees, and ethics in the curriculum (17, 24). Nurses are the largest group of service providers in the healthcare system, and they have a considerable effect on healthcare quality. The necessity of watching the issue of ethics in the actions of health professionals, particularly nurses, as well as the capacity to spot difficulties, must be emphasized. In addition, adhering to ethical values improves nursing services and facilitates care recipients' contentment. Thus, the current study was undertaken to analyze the competence of ethical reasoning and the elements that enable the professional ethics of nursing staff to analyze the aforementioned examples.

## **Method**

This is cross-sectional descriptive research. The goal of this study was to look at the ability of moral thinking and the elements that help nursing personnel adhere to professional ethics in Alborz University of Medical Sciences (281) hospitals in 2018. The pleasures to engage in the research, discontent, cooperation to

participate, and completion of the questionnaire were the inclusion and exclusion criteria, respectively.

Nurses of both sexes were chosen using a census approach and were invited to participate in the study after being told about the procedure and giving their agreement. Ethical reasoning surveys and professional ethics facilitators are examples of data gathering tools. The Ethical Reasoning Questionnaire was created by Chrisam, and the questionnaire's validity and reliability were validated by the author. It has since been utilized by several studies. In the realm of nursing ethics, this questionnaire is well-known. The validity of the questionnaire's content has been validated by a group of ten faculty members. Cronbach's alpha value of 0.82 was used to determine its reliability. This survey is based on the Kohlberg hypothesis. It has six moral dilemma situations, each of which provides a difficult decision for the nurse. The following are the titles of these scenarios: 1- disabled infant 2- mandatory prescription of drugs 3- patient desires to terminate his life 4- A new nurse is hired. 5- A medication error occurs. 6- Assistance in the latter phases of life. After each scenario, there are three questions. The first question concerns the sort of nurse response in a hypothetical circumstance in which the answer may be construed in three ways: correct, incorrect, or the nurse cannot determine. The nurse's ability to make decisions in a moral dilemma is assessed in this area. The second question gives six different perspectives on the issue based on Kohlberg's stages two through six. Two possibilities, six and five, illustrate the nurse's sound moral reasoning in each of these instances. As a result, the highest moral reasoning score in each scenario is 11 and 66 for the entire scenario. The lesser the moral reasoning capacity, the lower the score on this questionnaire. The respondent's exposure to comparable events is investigated in the third segment, which includes a Likert-type question regarding the heart experience. If the nurse receives a score of 6 to 17, it suggests that he is familiar with the problem, while a score of 18 to 30 shows that he is not (25).

Dehghani et al. created a questionnaire to assess elements that aid professional ethics. It has 36 questions that assess the contribution of each of the components that aid professional ethics observance in the management aspects (22 questions), as well as the individual dimensions of nurses (9 questions), and from the perspective of nurses, dimensions connected to patients (5 questions) are rated on a three-point scale of high, medium, and low. The questionnaire's content validity was verified by faculty members, and its reliability was determined by Cronbach's alpha coefficient of 0.88. Based on the percentage of nurses who responded on a wide scale, that component was identified as the most essential and effective factor in promoting professional ethics when evaluating the questionnaire (17). The researcher distributed the surveys with numerous visits to hospitals and nurses at the right time after getting authorization from the Alborz University of Science Ethics Committee and giving a letter of introduction to hospital administrators. In addition, completed surveys were gathered on time. Finally, the data from the surveys were analyzed using SPSS inferential software and version 20 using descriptive statistical tests.

### **Findings:**

The average moral reasoning score for nurses was  $49.17 \pm 10.10$ , according to the findings. The perspectives of employed nurses on the six test situations are shown

in Table 2. In most cases, nurses behaved ethically in the face of recognized problems, as shown in Table 1; however, around 15% of nurses were unable to make judgments in these situations.

**Table 1.** Opinions of working nurses about ethical reasoning test scenarios (number = 281 people)

Scenarios	Answers in each scenario	Responses	
		Number	Percentage
<b>The infant with severe anomalies</b>	It is not possible to decide in this situation	44	15.7
	The baby must be resuscitated	145	51.6
	The baby should not be resuscitated	92	32.7
<b>Medication compulsion</b>	It is not possible to decide in this situation	40	14.2
	The drug should not be injected by force	113	40.2
	The drug should be injected by force	128	45.6
<b>Adults demand to die</b>	It is not possible to decide in this situation	23	8.2
	The patient should be helped to breathe	220	78.3
	The patient should not be helped to breathe	38	13.5
<b>Introducing the new nurse</b>	It is not possible to decide in this situation	37	13.2
	Time should be given to introduce the new nurse	103	36.7
	You should not take the time to introduce a new nurse	141	50.2
<b>Medication mistake</b>	It is not possible to decide in this situation	42	14.9
	Medication errors should be reported	180	64.1
	Medication errors should not be reported	59	21.0
<b>Adults with severe disease</b>	It is not possible to decide in this situation	43	15.3
	Patient questions about health should be answered	135	48.0
	Patient questions about health should not be answered	103	36.7

According to the findings of this study, the management component (38.50±9.06) received the highest score among the variables promoting the observance of professional ethics from the nurses' perspective. Following that, the individual dimension (15.90±3.95) and the patient dimension (15.90±3.95) received the highest marks (9.46±2.46). According to Table 3, the most important managerial factors facilitating the observance of professional ethics in nursing practice are attention to employees' ability and skill during the division of labor (52.7 percent), effective monitoring of nurses' performance (53 percent), and appropriate interpersonal communication between nurses and nursing staff (45 percent).

**Table 2.** Distribution of absolute and relative frequency of factors facilitating the observance of professional ethics standards in the managerial dimension (number = 281 people)

Factors	High		Average		Low	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Considering the ability and skill of employees during the division of labor	148	52.7	106	37.7	27	9.6
Effective monitoring of nurses' performance	149	53.0	114	40.6	18	6.4
Existence of standard ethical codes (such as responsibility, etc.) in nursing	124	44.0	121	43.1	36	12.8
Developing appropriate shifts for nursing staff by observing optimal working conditions	114	40.6	116	41.3	51	18.1
Providing sufficient personnel in proportion to the number of patients and the conditions of each ward	113	40.2	102	36.3	66	23.5
Appropriate interpersonal relationship of nurses with nursing staff	127	45.0	130	46.1	24	8.5
Holding retraining courses based on the needs of nursing staff	120	42.6	127	45.0	32	11.7
Holding retraining courses on professional ethics standards and their facilitating factors	107	37.9	135	47.9	39	13.8
Existence of written duties in the field of nursing care in internal medicine, surgery, and...	119	42.2	132	46.8	30	10.6
Using experienced professors as	115	40.8	124	44.0	42	14.9

Factors	High		Average		Low	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
educators of ethical and legal issues during nursing education and continuing education programs						
Installation of posters and educational pamphlets on nursing ethics on bulletin boards and visible points in the wards	114	40.4	112	39.7	88	19.5
Holding joint meetings of managers of different clinical categories with nursing staff and exchange of views with a focus on ethics in health care systems	105	37.2	110	39.0	66	23.4
Adequate ethical and legal support for senior managers of nursing staff	114	40.5	103	36.5	64	22.7
Existence of evaluation and objective tools for frequent evaluation of nurses' capabilities in the field of nursing care	110	29.0	132	46.8	39	13.8
Providing appropriate welfare facilities for the patient's carers in the hospital	106	37.6	112	39.7	63	22.3
In case of immoral cases, timely warning and support of managers to comply with the standards of professional ethics	108	38.2	142	50.4	31	11.0
Existence of specialized nursing	88	31.2	152	53.9	41	14.5

Factors	High		Average		Low	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
ethics committees in the hospital						
Existence of appropriate facilities and equipment in the department to provide quality and sufficient care	125	44.3	117	41.5	39	13.8
The method of dividing work among nursing staff into an active method (the work of the ward is separated, and each task is left to a nurse, such as giving medicine)	87	30.9	128	45.4	66	23.4
Method of the division of labor among nursing staff on a case-by-case basis (all care of one patient or more than one patient is done by one nurse)	119	42.2	123	43.6	39	13.8
The method of division of labor among nursing staff by team method (care of several patients) 10-20 patients (performed by a care team with a leader)	96	34.0	131	46.5	54	19.1
Method of the division of labor among nursing staff in the basic or primary method (transfer of an average of 2-4 patients to one nurse from admission to discharge)	108	38.3	119	42.2	54	19.1

As shown in Table 4, the positive attitude of nurses toward professional ethics in nursing (43.3 percent), the existence of appropriate interpersonal relationships between colleagues and another treatment team (39 percent), and the adequacy of



technical skills and practical abilities of the nurse (38.7%) were ranked first to third, respectively, among the individual factors.

**Table 3.** Distribution of absolute and relative frequency of factors facilitating the observance of professional ethics standards in the individual dimension (number = 281 people)

Factors	High		Average		Low	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
The positive attitude of nurses towards the standards of professional ethics in nursing	122	43.3	127	45.0	32	11.3
Adequate motivation and interest of nursing staff in their profession	107	37.9	123	43.6	51	18.1
Satisfaction of basic staff needs such as adequate income or rest	91	32.3	116	41.1	74	26.2
Satisfaction from the service department	106	37.6	127	45.0	48	17.0
Existence of appropriate interpersonal communication between colleagues and other treatment team	110	39.0	143	50.7	28	9.9
Ability to think critically or to make the	86	30.5	161	56.1	34	12.1

Factors	High		Average		Low	
	Frequen cy	Percent age	Frequen cy	Percent age	Frequen cy	Percent age
right decisions and judgments in challenging moral situations						
Adequate scientific knowledge and awareness about nursing care	103	36.6	157	55.7	21	7.4
Adequacy of technical skills and practical abilities of the nurse	109	38.7	150	53.2	22	7.8
Strong religious and belief bases of nurses to perform professional and human duties	98	34.8	150	53.2	33	11.7

As shown, patients' familiarity with the time and manner of providing nursing services such as dressing, medication, and other (30.5%), appropriate behavior of patients with nursing staff (29.4%), and reasonable expectations of patients and their carers of nursing staff (29.4%) were ranked first to third, respectively, in terms of patients.

**Table 4.** Distribution of absolute and relative frequency of factors facilitating the observance of professional ethics criteria in patients (number = 281 people)

Factors	High		Average		Low	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Awareness of patients and their carers about the duties of nurses	74	26.2	151	53.5	56	19.9
Patients' knowledge of their diagnosis, treatment and prognosis	76	27.0	165	85.5	40	14.2
Familiarity with patients with the time and manner of providing nursing services such as dressing, medication, etc.	86	30.5	1450	53.2	45	16.0
Appropriate treatment of patients with nursing staff	83	29.4	145	51.4	53	18.8
Reasonable expectations of the patients and their carers from nursing staff	83	29.4	139	49.3	59	20.9

It is worth noting that based on the results of the present study, there was no significant relationship between the total score of ethical reasoning and the total score of the factors facilitating the observance of professional ethics in nurses ( $P = 0.127$ ) and managerial ( $P = 0.093$ ), individual ( $P = 0.104$ ) and patients dimensions ( $P = 0.679$ ).

### Discussion:

The study's findings revealed that there is no substantial association between moral reasoning capacity and elements that make professional ethics standards easier to follow. Both in the past and present, ethical thinking has gotten little attention. In other words, no amount of training or work experience has been able to increase the moral reasoning power of nurses; however, proper training and practice of nurses to become acquainted with ethical principles and the use of facilitating factors can provide better decision-making conditions for nurses. The study's findings demonstrate that more than half of nurses are capable of moral thinking in the face of specific events, with the majority of them providing an ethical response. However, almost half of the nurses did not make a final judgment in these instances.

The findings of the previous research (2011) at the level of nurses matched those of the current investigation (26). Furthermore, the results of Ham's (2002) and Kim's (2004) research on nursing students were comparable to those of this study (27, 28). The ethical reasoning stated in Zirak's (2012), and Ham's (2003) research at the level of nursing students, however, did not concur with this study (29, 30) urging their training and autonomous clinical work, nurses are confronted with a variety of ethical dilemmas. Ethical decision-making is a sort of choice in which ethical considerations are identified. One of the most important aspects of the nursing profession is ethical decision-making. Nurses should be aware of the ethical decision-making process and respect the rights of their patients as professionals. As a result, it can be claimed that nurses, as a result of their role in caring for patients, are confronted with circumstances requiring moral judgments daily, and as a result, nurses are sometimes perplexed while making moral decisions. Considering the significance of moral thinking in making informed ethical judgments, further research is required. Because a nurse is expected to have both technical and compassionate abilities, she must make ethical judgments to provide holistic care. As a result, one of the duties of relevant organizations is to improve the ethical reasoning of nurses.

The first to third ranks have been proposed as the most important factors facilitating the observance of professional ethics standards in the managerial dimension of nursing performance, attention to the ability and skills of employees during the division of labor, effective monitoring of nurses' performance, and appropriate interpersonal communication between nurses and nursing staff in the study of factors facilitating the observance of professional ethics standards in the managerial dimension of nursing performance. One of the elements mentioned by Dehghan (2017) in his study is the suitable interpersonal contact between head nurses and nursing personnel (17). Other aspects were discovered as facilitators in the management dimension by Jafari (2020) and Rahmani (2016) in their study (19, 31). In other words, a variety of factors, including demographic ones, might influence the elements that make professional, ethical norms easier to follow.

Positive attitudes of nurses toward professional ethics in nursing, the existence of an appropriate interpersonal relationship between colleagues and other treatment teams, and the adequacy of technical skills and practical abilities of nurses ranked first to third, respectively, among the individual factors. In their study, Jafari (2016) and Dehghani (2016) identified adequate interpersonal contact between colleagues and other treatment teams as one of the most successful variables in adhering to professional, ethical norms (17, 19). Jalali also discusses the importance of the

organization's culture and how it affects all interactions and nursing staff's ethical practices: An ethical atmosphere reflects people's perceptions of their company, influences everyone's attitude and conduct, and is used as a performance framework. According to him, the moral climate reflects people's perceptions of their organization and influences everyone's attitude and conduct inside it (32). Considering this issue, it appears that, from the perspective of nurses, the interaction between nurses and their subordinates, i.e., nurses, as well as the quality of relationships within the treatment team, are all major determinants of the current ethical climate. It has a major influence on all professional practices as well. Professional ethics are practices followed by nurses. It may also be claimed that, despite the various work environment, facilities, and nurses with diverse opinions, all think that if the nursing staff works together with other hospital employees, they can provide the best quality of care to patients. However, the significance of teamwork in the sphere of health and well-being is such that many research on its advantages and effective variables for its management has been done in various regions of the world. Since we need to ensure proper patient care and security, teamwork in health care jobs is a dynamic process that includes two or more professional members with skills, sharing common health goals, and practicing coordinated physical activity to examine, plan, or evaluate, according to multiple analyses.

Individual, interpersonal interaction, open communication, and shared choices will enable this, which will eventually result in enhanced value for patients and organizations. Effective cooperation, on the other hand, may give patients with desirable treatment. It also provides greater adaptability, productivity, and innovation than individual employees, as well as increased job satisfaction and employee retention. Meanwhile, nurse-physician collaboration involves teamwork, cooperative decision-making on health concerns, and following patient care plans to solve difficulties, all of which have objective and beneficial outcomes in the recovery process and job satisfaction of nurses.

Patients' familiarity with the time and how to give nursing services such as clothing, medicine, and others are the study's outcomes in the patient dimension. Patients' treatment of nursing staff and nursing staff's expectations of patients and their companions were placed first through third. In his study, Dehghani (2016) also mentioned that patients' right conduct with nurses is the most important component in the field of patients (17) because patients spend the majority of their time with nurses, Dehghani (2018) said in earlier research that ethical standards in admission care are tied to the correct interaction between the patient and the nurse (33). The quality of nurses' services and ethical actions have a greater impact on patients and companions. Patients' satisfaction with nurses' care might be influenced by patient companions' satisfaction with medical services and accessible amenities. As a result, it may be stated that the ethical actions of nurses have an impact on the conduct of patients and their companions. Indeed, ethical norms in health care are predicated on a close bond between the patient and the provider (34). However, insufficient information regarding communication is accessible in numerous research, including systematic analysis of elements that support professional ethics in the performance of nurses, and they are unaware of the necessity of effective communication and treatment with patients. Din Mohammadi's research also revealed that more than half of the nurses had

inadequate communication skills with their patients. Therefore, if healthcare institutions can educate patients about the responsibilities of nursing staff and how to deliver services in the hospital setting, they will have a better understanding of what to expect from nurses and how to treat them.

### **Conclusion**

According to the study's findings, it is suggested that specific training courses be held to improve nurses' capacity to detect and utilize facilitators in professional, ethical situations. The managerial dimension has the greatest impact on professional ethics, with the most important influential factors in this dimension being effective monitoring of staff performance, attention to staff ability and skills during the division of labor, and interpersonal interaction between head nurses and nursing staff worth considering.

### **Acknowledgments**

The present article is the result of a research project approved by the university Alborz Medical Sciences with Code of Ethics is IR.ABZUNS.REC.1398.148. The researchers hereby express their gratitude and appreciation From the Vice Chancellor for Research and Nurses working at the University of Medical Sciences Alborz express.

### **Conflict of interest**

No conflict of interest between the authors of this article There was not.

### **References**

1. Sanjari M, Zahedi F, Aalaa M, Peimani M, Parsapoor A, Aramesh k, et al. Code of ethics for Iranian nurses. *Iranian Journal of Medical Ethics and History of Medicine*. 2011;5(1):17-28.
2. Dehghani A. Kermanshahi SM Evaluating Of Compliance With Professional Ethical Standards In Nursing Practice From Nursing Staff's Viewpoints In Tehran University Of Medical Sciences *Moderan Care Journal*. 2012; 9 (3):208 To 16.
3. Hariharan S, jonnalagadda R, walrond E, . knowledge, attitudes and practice of healthcare ethics ana law among doctors and nurses in Barbados. *BMC Med Ethics*. 2006;7(7):22-5.
4. kozier.B. *Fundamentals of Nursinf : concepts process& practice*. Mosby. 2008;23(5):102-14.
5. Shojayifar.Z, Marziyeh A, Nastiezaie N. The Relationship between Professional Ethics with Knowledge Management and Job Involvement. *Iran Journal Bioethics*. 2017;7(23):17-28.
6. sanjari M, Zahedi F, Ethical codes of nursing and the practical necessity in iran. *Iranian J publ Health*. 2008;37(1):7-22.
7. Anonymous. Canadian nurses Assiciation public Health nursing practice and ethical chaenges accessedin 2011;23(2):210-20.
8. Butts JB R. *Nursing ethic. Across the curriculum and into practice*. 2005;2(17):20-42.

9. Afshar L, Joolae S, Vaskouei K, Bagheri A. Nursing ethics priorities from nurses aspects: a national study. *Journal of Medical Ethics and History of Medicine*. 2013;6(3):55-63.
10. Rogers S, Redley B, Rawson H. Developing work readiness in graduate nurses undertaking transition to practice programs: An integrative review. *Nurse Education Today*. 2021;105:105034.
11. jormsri p, kunavicticul w, ketefian sh, moral competence in nursing practice nursing ethics. 2005;12(6):582-93.
12. weaver k . ethical sensitivity: state of knowledge and needs foe further research. *nursing ethics* 2007;14(2):141-55.
13. Dehghani A, Radbeh F, Parviniannasab ,AM, Khaki S, Shamsizadeh M,Beyramijam,M.Enactment of professional ethics standards compliance in patients and nurses prospective. *Journal of Holistic Nursing And Midwifery*. 2015;25(4):64-72.
14. Hood L J LS. Leddy& peppers conceptual bases of professional nursing. *Wolters Kluwer health / Lippincott Williams & Wilkins*;. 2010;2(6):10-9.
15. Mc crink A . Nursing students attitude towards academic misconduct the code of ethic for nurses and their commitment to the ethic of caring. *New York Dowling college*. 2008.
16. Borhani F, Abbaszadeh A, Kohan M, MA. F. 2010. *Iranian Journal of Medical Ethics and History of Medicine*. Nurses and nursing students' ethical reasoning in facing with dilemmas: a comparative study;3(4):71-81.
17. Dehghani A, Eslamiakbar R, Rahimi E, Abbasi Jahromi A, Khaki S. Evaluation of the facilitating factors of professional ethics compliance in nursing practice. *Journal of Clinical Nursing and Midwifery*. 2017;6(1):19-29.
18. Greco S, Lewis E, Sanford J, Sawin EM, Ames A.Ethical Reasoning Debriefing in Disaster Simulations. *J Prof Nurs*. 2019;32(2):124-32.
- 19., Jafarinahlashkanani F.Eydivandi Z. Shafiei M.Maraghi EMoradi Kalboland M Evaluation of the Facilitating and Inhibitory Factors of Professional Ethics Standards' Obsrvance in Nursing Care from the Perspective of Nurses. *JOURNAL OF MEDICAL ETHICS AND HISTORY OF MEDICINE*. 2020;13(1 ):155-67.
20. Khalili A, pour Behzad H, Almasi S, Alimohammadi N, Nursing professional ethics education using a superior method: lecture or multimedia. *Journal of Research in Medical and Dental Sciences*. 2017;5(2):61-33.
21. Jafari H, Khatony A, Abdi A, Jafari F.Nursing and midwifery students' attitudes towards principles of medical ethics in Kermanshah, Iran. . *BMC Medical Ethics*. 2019;20(1):26.
22. Nouhi S, Ghana S, Jouybari L Kalantari S. Evaluating attitudes and performance of nursing students, teachers, managers towards ethics in nursing profession. *Education & Ethic in Nursing*. 2016;5(2):1-7.
23. Taheri L, Dehghani AEslami Akbar R . Factors related to facilitate complying nursing professional ethics: a descriptive study. *Journal of Education & Nursing*. 2015;4(1):51.
24. Borhani F, Alhani F, Mohammadi E, Development of nursing professional ethics competence , necessity and challenges in ethic education. *iran j Med ethics*. 2009;2(3):27-38.
25. Crisham.P. Measuring moral judgmentin nursing dilemmas-*Nursing Res*. 1981;30(2):104-10.

26. Borhani F, Fazljoo SE, Abbaszadeh A. Moral Reasoning Ability in Nursing Students of Shahid Sadoughi University of Medical Sciences. *Iran Journal of Nursing (IJN)*. 2014;27(90):102-9.
27. Ham KL. Comparison of Ethical Reasoning Abilities of Senior Baccalaureate Nursing Students and Experienced Nurses dissertation Tennessee. The University of Memphis. 2002.
28. Kim Y-S, Park J-W, Son Y. longitudinal study on the development of moral judgement in Korean nursing students. *Nursing Ethics*. 2004;11(3):254-65.
29. Zirak M, Hasankhani H, Parizad N.. The ethical reasoning ability of nurses and nursing students: a literature review. *Iranian Journal of Medical Ethics and History of Medicine*. 2015;7(6):15-28.
30. K. H. Principled thinking: a comparison of nursing students and experienced nurses. *J Contin Educ Nurs*. 2003;35(2):66-73.
31. Rahmani A, Gahramanian A, Mohajjel-, Agdam AR, A. A-B. Perception of patients regarding respecting to their autonomy during nursing care in hospitals affiliated to Tabriz University of Medical Sciences. *Iranian Journal of Nursing Research*. 2015;3(8):14-7.
32. Jalali T, Abbaszade A, Borhani F,. Nurses' views on ethical climate of Kerman University of Medical Sciences educational ospitals. *Journal of Medical Ethics and History of Medicine*. 2011;5(17):28-44.
33. Dehghani A, Parviniannasab A, Khaki S, Shamsizadeh M, Beyramijam M. Enactment of professional ethics standards compliance in patients and nurses prospective. *Journal of Holistic Nursing And Midwifery*. 2015;25(4):72-64.
34. Dehghani A., Mohammadkhan Kermanshahi S. Evaluating of compliance with professional ethical standards in nursing practice from Nursing Staff's Viewpoints in in Tehran University of Medical Sciences. *Mod Care J*. 2013;9(3):216-08.