

**MINISTRY OF SCIENCE AND HIGHER EDUCATION
RUSSIAN FEDERATION**

**FEDERAL STATE AUTONOMOUS EDUCATIONAL INSTITUTION OF
HIGHER EDUCATION
NORTH-CAUCASUS FEDERAL UNIVERSITY**

Methodological Guidelines
for Students on arranging and performing independent work
in the Discipline of "MEDICAL ETHICS"
for Students majoring (Specialty) in 31.05.01 General Medicine

Introduction

For a specialist doctor-biochemist, the application of knowledge in the field of medical bioethics and deontology; compliance with ethical and moral norms, rules and principles, is necessary in practical activity.

The purpose of this manual is to form general professional competencies of the future specialist in the specialty 31.05.01. Medical Affairs.

The knowledge gained during the development of the discipline is applied when writing the final qualification work, during the passing of the pre-diploma practice, and also in further professional activity.

As a result of studying the discipline, the student should:

To know: the history of bioethics, the theoretical foundations of bioethics and medical bioethics, the basic rules of bioethics; the basic ethical documents of professional medical associations; the Convention on Human Rights and Biomedicine; The Oath of a doctor (Fundamentals of legislation of the Russian Federation on public health protection, art. 60); the rights and moral obligations of a doctor; the rights of patients; the basic relationship between doctors and patients; the moral norms of intraprofessional relationships; the essence of the moral problems of medical genetics; the essence of the moral problems of organ and tissue transplantation; the essence of moral problems, related to infectious diseases and AIDS; the moral foundations of entrepreneurship in medicine.

To be able to: resolve moral conflicts in the interests of patients; protect patients' rights to information, freedom of choice, and freedom of action; maintain confidentiality (medical secrecy); show humanity towards animals; show tact and delicacy when communicating with patients and their relatives; defend the moral dignity and integrity of a medical professional.

To possess: moral, ethical, and professional standards and rules, which will allow you to study specialized disciplines in a targeted manner and maintain the dignity of a professional whose knowledge and skills should ensure the use of modern achievements in biology, medicine, pharmacy, and healthcare for the benefit of individuals and society.

Methodological Recommendations for Studying Theoretical Material

When performing the independent study of theoretical material, the student must follow the rules as set below. The working curriculum of the respective academic discipline shall be recommended to be used as the basis for such activity. According to the schedule of classroom lessons and independent work, a different number of hours is to be allocated for studying individual topics. A significant portion of the student's independent work should be allocated to mastering the material on the covered topic, writing a summary (notes) on the specified theoretical blocks, and searching for additional literature based on the NCFU library and via the Internet system. The lecture material shall not cover all theoretical material; the greater part of it must be mastered through independent work. Given the above, working with the recommended literature is mandatory. Special attention must be paid to the content of the main provisions and conclusions, the explanation of phenomena and facts, and the understanding of the practical application of the theoretical issues under consideration. In the process of this work, the student should strive to understand and memorize the main provisions of the material being considered, the examples illustrating it, as well as to understand the illustrative material. Preparation should be completed by drawing up a plan (summary/notes) on the material (issue) being studied. This allows for the creation of a concentrated, concise representation of the issues being studied. First, studying the recommended literature is to be done. Special attention must be paid to the content of the main provisions and conclusions, the explanation of phenomena and facts, and the understanding of the practical application of the theoretical issues under consideration.

During this work, the student should strive to understand and memorize the main provisions of the material being considered, the examples illustrating it, as well as to understand the illustrative material. Preparation should be completed by drawing up a plan (summary/notes) on the material (issue) being studied. This allows for the creation of a concentrated, concise representation of the issues being studied. If necessary, one should seek (advice) consultation from the instructor. When going to a consultation, it is necessary to thoroughly think through the questions that require clarification. Keeping records contributes to turning reading into an active process, mobilizing motor memory along with visual memory. The following should be born in mind: a student who systematically keeps records creates their own individual stock of auxiliary materials for a quick review of what has been read and for the mobilization of accumulated knowledge. Records are especially important and useful when they reflect the thoughts that arose during independent work.

It is important to develop the students' capacity to compare sources and to think through the material being studied.

Improving note-taking skills among students is of great importance.

The instructor may recommend the following main forms of recording to students: a plan (simple and detailed), excerpts, and theses (abstracts).

The results of note-taking can be presented in various forms.

- A plan is an outline of the read material, a brief (or detailed) list of questions reflecting the structure and sequence of the material.
- A detailed plan fully replaces a summary.
- A summary (notes) is a systematized, logical presentation of the source material. Four types of summaries are distinguished:
 - Outline-summary (Plan-notes) – this is an expanded, detailed plan in which sufficiently detailed records are provided for those points of the plan that need explanation.
 - Textual summary – this is the reproduction of the most important provisions and facts of the source.
 - Free summary – these are clearly and briefly formulated (stated) main provisions resulting from a deep understanding of the material. It may contain excerpts, quotations, and theses; part of the material may be represented by a plan.
 - Theme-based summary – this is compiled on the basis of studying a number of sources and gives a more or less exhaustive answer according to a certain scheme (issue).

Methodological Guidelines for the Preparation for Practical Activities

When preparing for practical activities, the recommendation implies studying the control questions for the given lesson and the theoretical material from one's own notes.

The main form of work during the lessons is an interview (discussion). Each student must be ready to speak on all issues raised in the plan and demonstrate maximum activity during their consideration.

The speech must be constructed freely, convincingly, and with arguments. The instructor ensures that the speech is not reduced to a reproductive level (simple reproduction of the text); simple reading of the summary is also not allowed.

It is necessary for the speaker to show their own attitude towards what they are talking about, express their personal opinion and understanding, substantiate it, and be able to draw the correct conclusions from what has been said. In doing so, the student may refer to the entries in the summary, directly to the primary sources, use knowledge of previously studied disciplines, etc. In addition, to obtain a grade at an advanced level, students solve situational tasks based on the results of the mastered topics.

During the execution of practical works, a defense of practical skills is provided, the full list of which is specified in the fund of assessment tools.

Methodological Recommendations for the Preparation of Presentations and Reports

The report must contain elements of novelty; along with the fundamental aspect, an analysis of the current state of the problem under study must be carried out, as well as inclusion in regional issues. The report must include an introduction, a theoretical part, a conclusion, a list of literature, and a presentation that reveals the essence of the topic in graphs, pictures, diagrams, and formulas.

The report is recommended to be submitted on 1 printed sheet. The text of the work must be printed with 1.5 line spacing on one side of a standard sheet (A4) of white paper.

The text and other printed elements of the work must be black, and the contours of letters and signs must be clear, without halos and shading. The font must be Times New Roman, size 14. The titles of chapters and paragraphs are highlighted in bold. The sheet with text must have margins: left – 30 mm, right – 10 mm, top – 20 mm, bottom – 20 mm.

Page numbering of the text is done in the lower right corner of the sheet. It is necessary to number pages starting from the page where the Introduction is printed, on which the number 3 is placed. After that, all pages, including appendices, are numbered.

A space equal to two intervals is placed between the title of the chapter and the title of the paragraph of this chapter, and the title of the paragraph must not be separated from the text of this paragraph by a space. The titles of paragraphs shall be separated from the text of the previous paragraph by a space equal to two intervals. Each chapter, as well as the introduction, conclusions, appendices, and the list of used literature, begin on a new page. The word Chapter is not to be written. Chapters have ordinal numbers within the entire work, designated by Arabic numerals (for example: 1, 2, 3), followed by a period.

The word **PARAGRAPH** or the paragraph symbol (§) is not placed in the title. Paragraphs have ordinal numbers within the chapters, designated by Arabic numerals (for example: 1.1. and 1.2.).

Headings of chapters and paragraphs in the text must be centered; a period shall not be placed at the end of the title of the chapter and paragraph. It is not allowed to hyphenate (transfer) a part of a word in a heading. 4.5. The numbering of tables and figures can be running (continuous) or relate to the number of the chapter and paragraph. For example, if a table or a figure is included in the text of the first paragraph of the second chapter, the numbering is as follows: Table 2.1.1., Fig. 2.1.1.

The last digit means the ordinal number of the table (or figure) in this paragraph.

The table is to be placed as the next page after the first mention of it in the text.

Topics of individual projects

1. Ethical committee, its functions, composition, rights.
2. Geneva Declaration.
3. Code of Medical Ethics of the Russian Federation (1997).
4. Collegiality of doctors.
5. Legal aspects of medical activity related to transplantation of organs and tissues
6. Legal issues of ascertaining death. Medical error.
7. Euthanasia, its types, legal aspects in the Russian Federation and abroad.
8. Artificial insemination and embryo implantation, regulatory acts of the Ministry of Health of the Russian Federation.
9. Indications for termination of pregnancy depending on the gestational age. Social indications.
10. The concept of "iatrogenic" pathology from a legal perspective.
11. The difference between medical error and medical misconduct.
12. Confidentiality in medical practice.
13. The Constitution of the Russian Federation on healthcare.
14. The legal status of citizens in the field of health care.
15. Types of crimes related to the professional activities of medical workers.
16. Moral damage. "Law on Consumer Rights Protection."

17. Disciplinary and administrative liability of medical workers.
18. Principles of protection of mental patients.
19. Patient's informed consent to treatment.
20. Rights and conditions of detention in psychiatric institutions.

Recommended literature and Internet resources.

Main literature

1. Altsina A. Medicine for the Body and Soul [Electronic resource] / A. Altsina. — Electron. text data. — M. : New Acropolis, 2017. — 246 c. — 978-5-91896-090-5. — Access mode: <http://www.iprbookshop.ru/71250.html>
2. Denisov, A. A. Professional Ethics and Etiquette [Electronic resource] : textbook / A. A. Denisov. — Electronic. Text data. — Omsk : Omsk State Institute of Service, Omsk State Technical University, 2014. — 210 p. — 978-5-93252-337-7. — Access mode: <http://www.iprbookshop.ru/32795.html>

Additional literature

1. Bazhdanova, Yu. V. Ethics and Psychology of Business Relations [Electronic resource] : anthology / Yu. V. Bazhdanova. — Electronic. text data. — M. : Eurasian Open Institute, 2011. — 464 c. — 978-5-374-00416-8. — Access mode: <http://www.iprbookshop.ru/11138.html>
2. Gurevich, P. S. Ethics [Electronic resource] : textbook for university students / P. S. Gurevich. — Electronic text data. — M. : UNITI-DANA, 2012. — 416 p. — 978-5-238-01023-6. — Access mode: <http://www.iprbookshop.ru/8542.html>
3. Doroshenko, V. Yu. Psychology and Ethics of Business Communication [Electronic resource] : textbook / V. Yu. Doroshenko, L. I. Zotova, V. N. Lavrinenko ; edited by V. N. Lavrinenko. — Electronic. text data. — Moscow: UNITY-DANA, 2012. — 415 c. — 978-5-238-01050-2. — Access mode: <http://www.iprbookshop.ru/15477.html>
4. Kartushina, I. G. Professional Ethics and Etiquette [Electronic resource] : educational and methodological guide / I. G. Kartushina. — Electronic. text data. — Kaliningrad : Immanuel Kant Baltic Federal University, 2010. — 178 p. — 978-5-9971-0078-0. — Access mode: <http://www.iprbookshop.ru/23874.html>
5. Kikot, V. Ya. Professional Ethics and Service Etiquette [Electronic resource] : textbook / V. Ya. Kikot, I. I. Aminov, A. A. Grishin ; edited by V. Ya. Kikot. — Electronic. text data. — Moscow : UNITI-DANA, 2012. — 559 p. — 978-5-238-01984-0. — Access mode: <http://www.iprbookshop.ru/15449.html>

Internet resources:

1. www.elibrary.ru – electronic scientific library.
2. www.biomed.net – club of biological and medical community.
3. www.healthgate.net – search for information in MEDLINE and other bibliographic databases of data.
4. <http://www.consultant.ru/> - regulatory and legal documentation

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Practical work No. 1.

Topic: Ethics as a science of morality and ethics. Ethics and medicine.

1. General characteristics of ethics.
2. Basic concepts.
3. Sections of medical ethics.

Before addressing the first question, it is necessary to establish the practical importance of studying morality and ethics for medical professionals. Only after explaining this necessity can we move on to discussing the specific features of ethics as a science. The world of ethics is a world of existence, not of oughtness. While other sciences study the world and its objects objectively, without considering whether they are good or bad, ethics focuses on whether something is right or wrong.

Whether something is good, reprehensible, or worthy is of paramount importance. In other words, ethics does not study the phenomena themselves, but rather the way people perceive and evaluate them. It is important to note that ethics is a specific branch of philosophy that does not focus on studying phenomena, but rather on teaching people how to behave appropriately. The practical, value-based, and imperative functions of ethics should be explored.

Next, students should learn the relationship between the concepts of "ethics", "morality", and "moral character". If morality is a holistic system of norms and rules of behavior and interaction of people, accepted in a given society, then moral character is the actual behavior of people in terms of its compliance with the norms of morality accepted in a given society. In other words, morality acts as an ideal of human behavior, and moral character as actual behavior, which inevitably deviates from the ideal in some way. Accordingly, ethics is a philosophical discipline that studies the phenomena of morality and ethics in their relationship.

Now we should focus on the problem of the foundations of ethics and briefly describe such options for the foundations of ethics as

1. "divine revelation" and other types of sacred foundations;
2. "moral intuition" or instincts;
3. moral authority;
4. everyday common sense;
5. natural law and social contract (ethical rationalism);
6. utilitarianism;
7. deontology.

Students should be well aware of the differences and purposes of normative and descriptive ethics. While the former is based on absolute ideal principles and values, the latter essentially formalizes and consolidates the existing system of moral norms and rules of human behavior. Therefore, descriptive ethics is more conservative, constantly reproducing the existing type of relationship, while normative ethics is more focused on moral education, aiming at an almost unattainable ideal. Therefore, such an ethic implies the development of people's moral qualities and their constant improvement.

In conclusion, the first question should be compared with two main systems of regulating people's relations in society: morality and law. This will help students to identify the specifics of morality in a more vivid and illustrative way:

1. Law is based on interests, while morality is based on people's social values;
2. orientation: law is directed outwardly to the personality, and morality is directed inwardly to the personality -legal norms are expedient, and morality evaluates primarily not the result, but the act itself and, in particular, its motives;
3. the nature of norms and requirements: most norms and requirements and morality are of the nature of ideals, and legal norms are much more specific and situational;

4. moral norms are accepted by people voluntarily, and legal norms are supported and actually imposed by the state power;
5. Law relies on the coercive sanctions of the state, while morality relies mainly on conscience and the power of moral condemnation.

The second question reveals the essence of morality as a regulator of human relations and a criterion for the development of personality and society. They are isolated and analyzed functions and main components of the structure of morality: norms, rules, principles, theories.

The general purpose of morality is to distinguish what is permitted from what is not permitted, what is due from what is reprehensible. In this regard, there is a problem of the normative nature of moral provisions. At the same time, most moral norms are in the nature of prohibitions. Students should clearly understand the reasons for this form of norms. The rest of the moral norms are of the nature of prescriptions. In turn, the norms-prohibitions are divided into two types according to the degree of their obligatory nature: norms-requirements and norms-recommendations.

The situation of moral choice is considered in particular. Its conditions include:

1. the presence of alternatives, each of which has its own moral meaning;
2. each of the available alternatives is within the competence of the subject itself;
3. the absence of external influence that forces the subject to choose one of the alternatives;
4. the availability of sufficient information on the available alternatives.

Only under these conditions does a person's choice become free and conscious. At the same time, it is necessary to link a person with his responsibility for the act he is committing, for his choice. In this regard, the concept of an autonomous person is introduced - a person who is capable of independently, freely, and responsibly choosing his actions. It is such a person who is the main object of ethical analysis. In this regard, it is advisable to consider the nature and main types of ethical conflicts in modern medicine (conflicts at the level of values and priorities, moral principles and rules, etc.). The paradox of moral assessment also deserves special attention.

The best way to approach the third question is to start with a typology of ethical theories. I typology can be based on the origin of morality. In this case, we can distinguish between:

1. Religious theories, which hold that moral norms are given in divine revelation (the Bible, the Quran);
2. Naturalistic theories, which see the origins of morality in natural law (right): anything that is in accordance with nature is morally acceptable;
3. anthropological theories, according to which the source of morality is in human nature. In turn, these theories are divided into several subspecies:
 1. innate or natural moral intuition (Socrates, J.J. Rousseau);
 2. everyday common sense;
 3. authoritative personality;
 4. the theory of the social contract.

II typology – by the motive of moral action:

1. utilitarianism: the moral assessment of any action is based on its results and consequences (I. Bentham, D. Mill, D. Hume). Here, the criterion of moral assessment is actually the practical benefit (usefulness). Within this type, one should distinguish the maximum variant – hedonistic: the highest good is pleasure (Epicurus, lokayata);
2. deontological approach: the moral assessment of people's actions is based on their motives and intentions, as well as their choice of means to achieve their goals (I. Kant).

III typology: in relation to the norms and foundations of classical ethics, there are two approaches:

1. The liberal approach is based on the idea of human rights and freedoms.
2. The conservative approach seeks to preserve the existing ethical principles, emphasizing traditionalism and gradual development.

Through the prism of these three typologies, we should consider the main ethical schools in the history of human thought. We should start with the philosophy and religious ethics of the Ancient East: Buddhism, Taoism, Hinduism, Confucianism, and Judaism. Here, ethics was at the center of social life and played a fundamental role. The ethics of antiquity was particularly important, as it laid the foundation for all ethical schools and approaches in world ethics. Students should understand the unique approaches of Socrates, Aristotle, Epicurus, the Stoics. It is worth remembering Epicurus' psychotherapeutic formula for overcoming a person's fear of death: "While we exist, death is still absent; when it comes, we no longer exist." Christian ethics deserves a thorough analysis. It is even possible to invite students to prepare a separate report on this topic (based on the book: Wyatt J. On the verge of life and death. Problems of modern healthcare in the light of Christian ethics. – St. Petersburg, 2003.). It would be interesting to compare general Christian ethics and the ethics of Protestantism. We can also recall the uniqueness of the ethics of Renaissance humanism. In modern times, the ethics of pragmatism and utilitarianism (I. Bentham, D. Mill, and C. Pierce) have been established. Medical professionals of all specialties need to be familiar with the deontological ethics of I. Kant and the humanistic ethics of A. Schweitzer.

Control questions:

1. How did the terms "ethics" and "morality" come about?
2. What is the content and purpose of the "golden rule" of morality?
3. What is a general definition of morality?
4. What is the paradox of moral evaluation?
5. How do knowledge and behavior relate to morality?
6. Why did Socrates believe that deliberately committed evil is better than unintentional evil? Is the phenomenon of intentional evil possible, according to him?
7. What is the main idea of Epicurus' ethics? What is meant by happiness here?
8. According to I. Kant, what is the cardinal feature of the moral law?
9. What did J. Mill see as the universal basis of human commandment?
10. Name the main conditions for free moral choice.

Topics for reports and essays:

1. Levels and features of ethical consciousness.
2. The problem of the foundations of morality.
3. The ethics of Buddha.
4. The ethics of love by Jesus Christ.
5. Ancient Ethics: From Socrates to Epicurus.
6. Kant's Ethics.
7. Bentham and Mill's Utilitarianism.
8. Schweitzer's Ethics of "Reverence for Life."
9. Lorenz's Ethology.
10. The Ethics of the Roerichs.

Practical work No. 2

Topic: General characteristics of ethics. History of the development of ethics.

1. Origins of medical ethics as a scientific discipline.
2. Causes and conditions of the emergence of medical ethics.
3. Universal moral values in healthcare.
4. Subject and structure of medical ethics.

The best way to approach the first question is to identify the specific nature of medical ethics. Medical ethics is a system of obligations that a doctor voluntarily accepts and fulfills in order to provide care to a patient. It is characterized by its one-sided nature. It is simply a subset of professional ethics. However, medical ethics is a different matter. Medical ethics is a comprehensive system of moral norms that govern the relationship between medical professionals and patients. It is distinguished by:

- universal and reciprocal nature – it is based on universal moral values: mercy, care, empathy, saving lives;
- interaction between a doctor and a patient is based on the fundamental and most significant values: human life and health, basic rights and freedoms;
- focus on protecting the life and health of others, as well as humanism and philanthropy as general professional qualities of medical professionals;
- the deontological nature of a doctor's ethics. It is the principle of fulfilling one's duty that is the core of medical ethics. This means fulfilling certain requirements and taking responsibility before one's own conscience, colleagues, and society.

At the same time, it should be emphasized that the principle of duty does not recognize any excuses for evading its fulfillment. The idea of duty is the defining and sufficient basis for the actions of a doctor or a medical professional of any specialty. Therefore, the idea of duty holds a special place in medical ethics, serving as its foundation.

In fact, medical ethics has two foundations: duty and obligation. In terms of content, these two principles are almost identical. However, there are two significant differences between them:

1. the duty is accepted by the physician voluntarily, and the duty is imposed by society and therefore acts as an external principle;
2. the violation of duty implies exclusively internal moral sanctions (self-condemnation), and the violation of duty implies social sanctions (legal, economic, administrative, etc.)

In addition to its foundations, medical ethics also has its origins, which are religious, philosophical, and social. Students should learn to identify and analyze these origins, as well as trace the emergence and development of the principle of humanism in medical science and practice.

Professional medical ethics, which is an integral part of medical practice, is designed to prevent harm that could be caused to individuals, society, and the credibility of the medical profession as a result of the incompetent, careless, or reprehensible actions of any member of the medical profession.

Since the entire second question is devoted to the historical development of medical ethics, it is advisable to start with the position and features of the training of a doctor in the ancient society on the example of the ancient polis. And although in Ancient India doctors took an oath as early as in 1500 BC, the oldest example of medical ethics is considered to be the "Oath" of Hippocrates (460 – 370). Hippocratic ethics is the first holistic system of moral and ethical precepts, requirements and prohibitions governing the practice of healing, determining the doctor's attitude to the patient, the doctor's attitude to other doctors, as well as to his profession as a whole and the doctor's attitude towards society. Students should carefully discuss the basic principles of Hippocratic ethics: non-harm, medical secrecy, social trust in the profession, and the moral virtues of a doctor., prohibitions, as well as the basic values of his ethics: humanity, philanthropy, mercy. It is necessary to explain especially that one of the main goals of Hippocrates is to ensure the authority of the medical profession in society. This explains, for example, the refusal of the doctor according to Hippocrates from fixing the fact of the patient's death, from the free distribution of medical knowledge in society, etc. On the other hand, the student must understand why the ethics of Hippocrates is characterized today as paternalistic. All of this will help students to learn the Hippocratic Oath more deeply and with understanding.

When considering the medical ethics of the Ancient East, it is necessary to pay attention to both the aspects that are common to the ethics of Hippocrates and the specific aspects. In particular, it is worth highlighting such aspects as the doctor's refusal to treat the enemies of their ruler, the refusal to examine and treat women who are not accompanied, and so on. Here, it is necessary to pay attention to the significant role of the ancient heritage in Islamic medicine, as well as to the ethical principles of Ibn Sina and Maimonides.

When describing the ethics of the Renaissance, it is necessary to consider not only the ideas of humanism in general, but also the reformist ideas of Paracelsus, the corporate-estate ethics of

T. Percival, and the influence of F. Bacon on the medical ethics of the New Age. At that time, the focus was on the moral qualities that a doctor should possess.

The development of medical ethics in pre-revolutionary Russia deserves special attention. It is necessary to identify the differences between the ethical views of Russian authors, starting with M.Ya. Mudrov, and the ethics of Hippocrates. In particular, the element of selflessness in the doctor's work is being strengthened, palliative care is being introduced even for terminally ill people, diagnosis of an incurable disease as a professional duty of a doctor, etc.

Many Russian doctors have worked on the problems of professional medical ethics, including F. Gaaze, S.P. Botkin, N.I. Pirogov, G.N. Zakharyin, and V.V. Veresaev. V.A. Manassein, who published the newspaper "Vrach" for over 20 years, played a significant role in addressing and analyzing complex ethical issues in medical practice. He advocated against any experiments on dying individuals or prisoners, emphasizing the importance of considering the level of risk in medical research. people, and most importantly, the requirement of voluntary consent to an experiment with a full and clear understanding of its nature and possible risks. Manassein was a staunch opponent of the death penalty and an equally zealous advocate of absolute medical secrecy.

In the early years of the Soviet regime, doctors were perceived as bourgeois specialists who could only work under strict control. Consequently, discussions about ethical issues quickly ceased, as medical ethics were viewed as a corporate and class-based morality that was alien to the working classes. It is no coincidence that during the 1920s debate about medical secrecy, even the People's Commissar for Health, N.A. Semashko, advocated the abolition of medical secrecy as a remnant of bourgeois medicine. Moreover, the "Hippocratic Oath" was even abolished.

As a result, the USSR developed a paternalistic healthcare system that was rigidly tied to the existing political and economic structure. In this system, doctors became civil servants whose moral qualities were limited to their dedication to fulfilling the state's objectives.

The first steps towards the rehabilitation of medical ethics in Soviet society and the medical profession were taken with the publication of a small article by surgeon-oncologist N.N. Petrov in 1939 titled "Issues in Surgical Deontology." Petrov proposed the following rules of deontology:

1. Surgery is for the patient, not the patient is for surgery;
2. Do and advise the patient to do only such an operation as you would agree to yourself in the present circumstances for you or the person closest to you;
3. For the mental peace of patients, visits to the surgeon are necessary on the eve of the day of the operation and several times on the day of the operation, both before and after;
4. The ideal of surgery is to work with the really complete elimination of not only all physical pain, but also all mental agitation of the patient;
5. informing the patient, which should include a mention of the risk, the possibility of infection, side effects, and complications.

However, the information should have contained not so much adequate information as actual suggestion of insignificance of the risk in comparison with the probable benefit of the operation. Consequently, the ethics of N.N. Petrov is still paternalism. The paternalistic model of the doctor-patient relationship was established in Soviet medicine.

On the other hand, the revival of medical ethics began under the guise of deontology. In 1971, the "Oath of the Soviet Doctor" was introduced, however, it was assumed. The doctor's responsibility was not towards a specific patient, but towards the people and the Soviet state (state paternalism). Deontology was never included in the training programs for doctors.

Control questions:

1. What is the specificity of medical ethics?
2. What are the religious, philosophical, and social foundations of medical practice?
3. What is the difference between duty and obligation?
4. What are the main ideas, norms, and principles of Hippocrates' ethics?

5. How does the medical ethics of the Ancient East differ from the ethics of Hippocrates?
6. What are the main trends in the development of medical ethics in the 20th century?
Renaissance and Modern Times?
7. What is the fundamental difference between the ethics of a doctor in pre-revolutionary Russia and Western European and Soviet medical ethics?
8. What are the main lessons of N.I. Pirogov's life and work?
9. What is the difference between the ethics of a Soviet doctor?

Topics for reports and essays:

1. The foundations and specifics of medical ethics.
2. The main historical stages of the development of medical ethics.
3. The ethics of Hippocrates.
4. The corporate and class-based ethics of T. Percival.
5. Paracelsus's Medical Ethics.
6. The Development of Medical Ethics in Pre-Revolutionary Russia.
7. G.A. Zakharyin's Ethical Lessons.
8. V.A. Manassein's Ethical Approach.
9. Medical Ethics in Early 20th Century Russia.
10. Medical Ethics in the USSR.

Practical work No. 3

Topic: Historical models of medical ethics.

1. Historical models of moral medicine.
2. The Hippocratic model.
3. The Paracelsus model.
4. The deontological model.

Historical models of moral medicine include the following models: The Hippocratic model (the "do no harm" principle). Hippocrates outlined the moral principles of medicine in his "Oath," as well as in his books "On the Law," "On Physicians," "On Proper Conduct," "On Instruction," and others. The main feature of this model is the doctor's approach to both the sick and the healthy, which focuses on care, assistance, and support.

The Paracelsus model (the "do good" principle). This model was developed in the Middle Ages, and its principles were most clearly outlined by Paracelsus (1493-1541). Within this model, the moral relationship with the patient is understood as an integral part of the doctor's therapeutic approach. The focus is on considering the individual characteristics of the patient and establishing a trusting relationship between the doctor and the patient.

The deontological model (the principle of "duty compliance") is a set of rules that must be followed in the medical profession. These rules govern the interactions between medical professionals, patients, their families, colleagues, and the healthcare administration. The basis of this model is the unquestioning fulfillment of moral precepts, the observance of the set of rules established by society and the medical community. For each medical specialty, there is its own "code of honor", non-compliance with which is fraught with disciplinary penalties or even exclusion from the medical profession.

1. What are the reasons for the emergence of bioethics?
2. What is the subject of bioethics as a branch of knowledge?
3. Why has the traditional medical ethics of Hippocrates become insufficient today?
4. How can the principle of "do no harm" be understood?
5. What should be understood by patient autonomy?
6. What action should be considered autonomous?
7. What types of justice do you know? What are the criteria of justice?
8. What is the main disadvantage of the engineering model of healing?

9. Why is the paternalistic model not acceptable to modern society?
10. What are the advantages of the contractual model, and what are its dangers? Can this model be considered the best and most exemplary? Why?

Topics for presentations and essays:

1. The concept of bioethics in V. Potter's theory and its evolution in modern bioethics.
2. The principle of "do no harm" and its implementation in modern conditions.
3. The relationship between the ethical principles of "do no harm" and "do good".
4. The rule of truthfulness in medicine: moral issues.
5. Different aspects of understanding justice in medicine.
6. The moral and legal aspects of the rule of confidentiality.
7. Models of doctor-patient relationships: a comparative analysis.
8. Paternalism and anti-paternalism in modern medicine.

Recommended literature and Internet resources.

Main literature.

1. Altsina A. Medicine for the Body and Soul [Electronic resource] / A. Altsina. — Electron. text data. — M. : New Acropolis, 2017. — 246 c. — 978-5-91896-090-5. — Access mode: <http://www.iprbookshop.ru/71250.html>
2. Denisov, A. A. Professional Ethics and Etiquette [Electronic resource] : textbook / A. A. Denisov. — Electronic. Text data. — Omsk : Omsk State Institute of Service, Omsk State Technical University, 2014. — 210 p. — 978-5-93252-337-7. — Access mode: <http://www.iprbookshop.ru/32795.html>

Additional literature

1. Bazhdanova, Yu. V. Ethics and Psychology of Business Relations [Electronic resource] : anthology / Yu. V. Bazhdanova. — Electronic. text data. — M. : Eurasian Open Institute, 2011. — 464 c. — 978-5-374-00416-8. — Access mode: <http://www.iprbookshop.ru/11138.html>
2. Gurevich, P. S. Ethics [Electronic resource] : textbook for university students / P. S. Gurevich. — Electronic text data. — M. : UNITI-DANA, 2012. — 416 p. — 978-5-238-01023-6. — Access mode: <http://www.iprbookshop.ru/8542.html>
3. Doroshenko, V. Yu. Psychology and Ethics of Business Communication [Electronic resource] : textbook / V. Yu. Doroshenko, L. I. Zotova, V. N. Lavrinenko ; edited by V. N. Lavrinenko. — Electronic. text data. — Moscow: UNITY-DANA, 2012. — 415 p. — 978-5-238-01050-2. — Access mode: <http://www.iprbookshop.ru/15477.html>
4. Kartushina, I. G. Professional Ethics and Etiquette [Electronic resource] : educational and methodological guide / I. G. Kartushina. — Electronic. text data. — Kaliningrad : Immanuel Kant Baltic Federal University, 2010. — 178 p. — 978-5-9971-0078-0. — Access mode: <http://www.iprbookshop.ru/23874.html>
5. Kikot, V. Ya. Professional Ethics and Service Etiquette [Electronic resource] : textbook / V. Ya. Kikot, I. I. Aminov, A. A. Grishin ; edited by V. Ya. Kikot. — Electronic. text data. — Moscow : UNITI-DANA, 2012. — 559 p. — 978-5-238-01984-0. — Access mode: <http://www.iprbookshop.ru/15449.html>

Internet resources:

1. www.elibrary.ru – electronic scientific library.
2. www.biomed.net – club of biological and medical community.
3. www.healthgate.net – search for information in MEDLINE and other bibliographic databases of data.
4. <http://www.consultant.ru/> - regulatory and legal documentation.