

Original Article

Effect of Nursing Ethics Course on Ethical Decision Making Status of Students

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Abstract

Aim: This study is conducted to determine effect of nursing ethics course on ethical decision making status of students.

Method: This descriptive research is conducted with 88 students who studied in Adnan Menderes University Söke Health School. The data were collected using the Student Information Form and “Nursing Dilemma Test”.

Results: It is determined that 50% of the students who participated in the research took ethics course. The statistically significant difference ($p < 0.05$) is determined between the mean Principal Thinking (PT) scores of the students who took the ethics course (52.40 ± 2.17) and the students who did not take the ethics course (45.13 ± 11.33), and it is found that there is no statistically significant differences ($p > 0.05$) between the mean Practical Consideration (PC) scores of the students who took the ethics course (20.47 ± 5.77) and the students who did not take any ethics courses (17.67 ± 2.17). It was determined that the students who took the ethics course were more familiar with similar dilemmas, and significant difference is found between two groups' mean scores ($p < 0.05$).

Conclusions: It is thought that the nursing ethics course increases the ethical decision making status of nursing students.

Introduction

Ethics, a multidisciplinary concept, is an important part and field of study of philosophy and science as a subject related to moral behaviors, actions and judgments (Kirilmaz and Kirilmaz, 2014). Ethics, derived from the Greek word ‘ethos’ (morals, tradition, habit) (Senturk, 2013), is a philosophy discipline that investigates the values underlying the relations among people, the nature and basics of morally-good or bad, right or wrong (Karaoz, 2000; Shapira-Lishchinsky, 2009). The area of health is one of the areas in which the concept of ethics, finding an application area in a very wide area such as politics, law, economy, management and media, is widely applied (Kirilmaz and Kirilmaz, 2014). The fact that improvements in medicine, science and technology bring some ethical problems with them, increases the importance of ethics in the area of health (Karaoz, 2000). Health professionals are directly interested in lives and health of individuals, and therefore, are more likely to encounter ethical problems (Dinc and Gorgulu, 2002). Ethical problems are problems which require making a

moral judgment and making a choice, which do not have simple and precise solutions that can be defined as absolute right or wrong, which are complex and leaving individuals in a dilemma (Dinc, 2009). At the same time, this is the situation where there are doubts or objections about good behaviour (Yildirim and Kadioglu, 2007). Nurses, one of the most important members of the health team, are the health personnel who first define and deal with ethical issues mostly because they are mostly together with patients and families (Elcigil et al., 2011; Potter et al., 2012). When considered in this respect, nurses play a decisive role in many ethical issues and dilemmas (Shapira-Lishchinsky, 2009). Increasing complexity of the health system requires the responsibility for ethical decision making in nursing care (Dinc and Gorgulu, 2002). The ethical decision making is a logical process including deciding on morally the most correct action in a systematic way of thinking, in a situation where alternative choices take place. The ethical decision making is defined as a process that begins with identifying ethical issues (Berggren et al.,

2002; Ozsoy and Yildirim, 2010). The ethical decision making process allows clarification of complex aspects, as well as supports to take the most correct action for the patient/healthy individual, benefiting from past experiences of health care professionals (Tosun, 2013). In the studies conducted, it is stated that the level of ethical decision making of nursing student is insufficient (Berggren, 2002; Erdil and Kormaz, 2009; Kurt et al., 2013; Nolan and Markert, 2002). In professional nursing practices, it is thought that ethics education should be taken into account in nursing education in order to increase ethical sensitivity in patient care (Gul et al., 2013). Basic educations of nurses should be prepared in the direction of improving their ethical decision making skills (Dinc and Gorgulu, 2002; Numminen et al., 2007). Because, it is necessary for graduated nurses to understand the nursing philosophy, what it is doing and why it is doing and to acquire the knowledge, skills and attitudes appropriate to the professional nursing to provide the care in a best possible way (Orak and Alpar, 2012). Besides, they are expected to apply the ethical decision making process from the moment they meet the patient in the clinic (Ozsoy and Yildirim, 2010). It is stated that nurses who receive ethics education will behave more discreetly and responsibly towards their patients and feel happier themselves when they see positive results (Gul et al., 2013). For this reason, it is necessary to determine whether the ethics course in nursing education has an effect on future's nurse candidates. This descriptive study is carried out for the purpose of determining the effect of nursing ethics course on ethical decision making status of students.

Method

Study Design and Sample: The target population of this research, planned as descriptive and cross-sectional is comprised of students of Adnan Menderes University Soke Health School, Faculty of Nursing. The research sample is composed of all 3rd grade students (n = 44) of the Health School who took the course of Nursing History and Ethics and 44 students selected from 1st grade students (a total of 4 branches) without clinical experience and who did not take the ethics course, with the simple randomization method (11 students from each branch) and a total of 88 students are included in the research.

Data Collection Instruments: Data of research are collected using the student information form developed by researchers by searching the literature and the "Nursing Dilemma Test".

The Student Information Form: The student information form was prepared by the researchers.

The questionnaire consisted of 3 questions about the students' socio-demographic features such as age, gender, class.

Nursing Dilemma Test: "Nursing Dilemma Test" was developed in 1981 by Dr. Patricia Crisham and was translated into Turkish as Nursing Ethical Dilemma Test (HEIT), and its validity and reliability is approved by Cerit (2010). Six dilemmas, specific to nursing practices, are developed in the test. These are (1) an attempt to newborn with anomalies considering the issue of defining and promoting the quality of life, (2) forced medication, (3) adults' requests to die, (4) orientation of new nurse, (5) reporting the medication errors, and (6) informing the adult person with terminally illness. Each dilemma is comprised of three parts. In the first section (A), the nurse is asked what s/he should do about the dilemma in the scenario described and is expected to mark one of the three options for each dilemma. In the second section (B), there is a six-point expression of the nurse about aspects s/he can take into consideration in his/her approach considering the scenario consisting the moral dilemma. It is expected from the nurse to select the most important of these expressions and number them in line with their importance to him/her. It is aimed to determine the nurses' "Principal Thinking" (PT) and "Practical consideration" (PC) status in line with answers given in this part of the test. Principal Thinking shows the importance given to considering ethical principles when making a moral decision in nursing. Practical consideration measures the importance given by nurses in deciding on ethical issues, to environmental factors such as the number of patients, the number of available resources, institutional policies, the extent of nurses' perception of the support given by the management and physician control. The PT and PC status are calculated from the answers given by the nurses by numbering these six expressions in order of importance. The ranking performed by nurses within the scope of sample, from the most important (6 points) to the least important (1 point) of the six points is evaluated in the part B of each dilemma. The ranking of the nurses is compared with the answer key of the test. In the answer key, the items corresponding to PT and PC are determined in the ranking that the nurses perform and the scoring is performed by comparing the order of the points. Thus, PT and PC scores are calculated taking into account the participant's answers to the thought/questions in the part B of each dilemma. The PT and PC scores obtained from each dilemma are collected separately and the total PT and PC scores of the participant are determined. The lowest PT score that can be obtained in the test

is 18 and the highest is 66. The minimum PC score is 6 and the maximum is 36. In the third section (C), nurses are asked to state whether they have had experiences of a similar dilemma in the past. Based on the answers given to the question in this part, the score of "Familiarity" is calculated by evaluating the nurses' previous experience with a similar dilemma using the likert type scale. The familiarity score between 6 -17 shows that the participants are familiar with a similar dilemma, but between 18-30 ranges shows no familiarity with a similar dilemma (Cerit, 2010).

Data Collection: Data of the research were collected by researchers conducting the study by applying the technique of face to face interviews with students who agreed to participate in the study from December 25, 2014 to March 6, 2015 (n = 88). Data collection lasted approximately 20 minutes.

Data Analysis: In the evaluation of the data, descriptive statistical methods (number, percentage, mean, standard deviation, median) are used by using SPSS 15.00 package program. The frequency, percentage and mean calculations are used in evaluating the data obtained from the Part A of Nursing Ethical Dilemma Test; and in the parts B and C, the mean, standard deviation and Independent samples T test are used in the evaluation of the data related to ethical decision making behaviors of the nurses.

Ethical Approval: Before starting the application of the study, a written approval was obtained from Adnan Menderes University, Söke Health School. Permission to use the Turkish version of the Nursing Dilemma Test was obtained from BirGul Cerit. Verbal permission was obtained from each student who agreed to participate after they were informed about the study content.

Results

The average age of students participating in the study is 20.06 ± 1.37 , the age range is 18-23, and the majority (69.3%) is female students. The proportions of students in the ethic course (3st class) and non-taking students (1rd class) are equal to each other (Table 1). The data obtained from section A of each scenario of Nursing Dilemma Test, 72.7% of the students who took the ethics course and 65.9% of the students who did not take the ethics course stated that it should be attempted to resuscitation of a newborn with abnormalities. While 36.4% of the students who took the ethics course indicated that the forced medication is necessary, this rate is higher (59.1%) in the students who did not take the ethics course. Most of the students who took the ethics course (93.2%) and who did not (79.2%) stated that they would provide respiratory support although a competent adult

patient requested to die. 36.4% of the students, who took the ethics course, state that time should be allocated for the orientation of a beginner nurse to the clinic while 61.4% of the students who did not take the ethics course state the same. Students who took the ethics course and who did not are in equal ratio (88.6%) for reporting the medication errors. The last scenario presented a dilemma about a terminally ill adult who wanted his diagnosis despite his doctors' and family members' wishes. 38.6% of the students who took the ethics course are indecisive in informing an adult of his/her terminally illness, and half of the students who did not take the ethics course state that the adult should be informed of his/her terminally illness (Table 2). The data obtained from the section B of the Nursing Dilemma Test were evaluated and mean scores of PT and PC that student nurses could get over this test were calculated. It is determined that the mean PT scores of students who took the ethics course is 52.40 ± 2.17 , the mean PT scores of students who did not take the ethics course is 45.13 ± 11.33 . A statistically significant difference is found between the mean PT scores of both groups ($p < 0.05$). The average PC score of the students who took the ethics course was 20.47 ± 5.77 and the students who did not take the ethics course were 18.38 ± 4.97 . The difference between the PC scores of the two groups was not statistically significant ($p > 0.05$) (Table 3). When the students' answers to Part C of the Nursing Dilemma Test are evaluated; it is determined that 65.9% of the students who took the ethics course are familiar with similar dilemmas and get 16.54 ± 2.15 scores from this part and only 2.3% of the students who did not take the ethics course are familiar with similar dilemmas and get 20.43 ± 2.42 scores. The difference between the familiarity scores of the two groups was statistically significant ($p < 0.05$) (Table 4).

Discussion

Ethical dilemmas arise from the confusion between two values during an action or in a situation that must be decided (Elcigil et al., 2011; Shapira-Lishchinsky, 2009). When the students' answers to the question "What should the nurse do?" in the 6 different ethical dilemmas in the part A of the test related to ethical dilemmas in our study are examined, in a dilemma in which the problem of defining and raising the life quality in the maternal-new-born nursing is taken into account, it is found that 72.7% of the students who took the ethics course and 65.9% of the students who did not take the ethics course give the answer "a new-born baby with anomaly should be attempted to revive". The similar result (76%) is obtained in the study conducted by Cerit on nurses (Cerit, 2010).

Table 1. Distribution of the introductory characteristics of students

Sample characteristics	n	%
Age		
18-20	55	62.5
21-23	33	37.5
Gender		
Female	61	69.3
Male	27	30.7
Taking ethics course		
Yes (3 rd class)	44	50.0
No (1 st class)	44	50.0
Total	88	100.0

Table 2. Nursing student’s responses to section a of the nursing dilemma test (n=88)

Dilemmas	“What should nurse do?”	Groups			
		Took the ethics course		Did not take the ethics course	
		n	%	n	%
Newborn with anomalies	Should resuscitate the newborn	32	72.7	29	65.9
	Cannot decide	10	22.7	8	18.2
	Should not resuscitate the newborn	2	4.5	7	15.9
Forcing medication	Should forcefully give the medication	10	34.1	15	22.7
	Cannot decide	8	29.5	13	18.2
	Should not forcefully give the medication	26	36.4	16	59.1
Adult’s request to die	Should provide assistance for artificial respiration	41	93.2	35	79.5
	Cannot decide				
	Should not provide assistance for artificial respiration	1	2.3	8	18.3
New nurse orientation	Should allocate time for orientation of the nurse	16	36.4	27	61.4
	Cannot decide				
	Should not allocate time for orientation of the nurse	15	34.1	9	20.5
Medication error	Should report the medication error now	39	88.6	39	88.6
	Cannot decide	4	9.1	3	6.8
	Should not report the medication error now	1	2.3	2	4.5
Terminally ill adults	Should answer the patient’s questions	12	27.3	22	50.0
	Cannot decide	17	38.6	10	22.7
	Should not answer the patient’s questions	15	34.1	12	27.3

Table 3. The comparison of the mean scores of students to section b of the nursing dilemma test

Nursing Dilemma Test	Groups				t	p
	Took the ethics course		Did not take the ethics course			
	Min-Max	Mean±SD	Min-Max	Mean±SD		
Principle Thinking (PT)	36-63	52.40±2.17	18-61	45.13±11.33	-3.68	0.00
Practical Consideration (PC)	11-32	20.47±5.77	7-29	18.38±4.97	-1.81	0.07

*Independent samples T test

Table 4. Distribution of the students' to answers to section c of the nursing dilemma test

Familiarity with Ethical Dilemma Score	Groups								t	p
	Took the ethics course				Did not take the ethics course					
	n	%	Min-Max	Mean±SD	n	%	Min-Max	Mean±SD		
Familiarity	29	65.9	11-24	16.54±2.15	1	2.3	16-28	20.43±2.42	8.39	0.00
Are not familiar	15	34.1			43	97.7				
Total	44	100.0			44	100.0				

*Independent samples T test

However, these rates were found to be lower in two different studies conducted in student nurses (Kurt et al., 2013; Sari et al., 2018). Psychiatric clinics are one of the areas where ethical dilemmas are often experienced and problems are encountered during ethical decision making. There are some issues causing ethical dilemmas and conflicts such as the fact that team members have to take decisions about patients without sufficient information, what to do when the treatment is rejected, forced hospitalization, compulsory determination of the excited patient, and the treatment of a patient who attempted suicide without his/her will (Arslantas, 2015). In a dilemma about ignoring the patient's right to exercise his/her autonomy in the area of mental health, 36.4% of the students who took the ethics course and 59.1% of the students who did not take the ethics course answer the question of "Should the medication be applied to a psychiatric patient in the clinic forcibly?" as "no". Faculty losses of individuals with psychiatric illnesses due to the nature of their illness make these individuals, in some cases, be able to exercise their rights less than other patients and defend themselves more difficultly (Hicdurmaz and Oz, 2007). The results of our study show that students also take into account the principle of respect to human dignity and autonomy in psychiatric patients in vulnerable groups.

It is stated that free decisions of people should be respected when ethical decisions are made (Arslantas, 2015). In the dilemma for maintaining the respiration support despite the adult's desire to die, 93.2% of the students who took the ethics course and 79.5% of the students who did not take the ethics course state that the adult should be allowed to die. In Cerit's study, 98% of the nurses report that the adult should be allowed to die (Cerit, 2010). Considering the patient's right to die as much as to live, the euthanasia, which is being discussed ethically and legally in the framework of respect for autonomy, brings with it a number of problems in deciding among health professionals as well (Karaarslan et al., 2014). In our study, there is a dilemma about orientation of a nurse who has recently started to work in the clinic, by an experienced nurse working in a neonatal clinic without adequate number of nurses, on a busy schedule. When we look at the results we obtain from this dilemma, it is seen that lesser students who took the ethics course (36.4%) than the students who did not take the ethics course (64.4%) state that the time should be allocated for orientation of the beginning nurse. These results suggest that the first-grade students who are on the way to take a new step in the profession are more likely to need to get to know the profession and to get the support from professional members than the students in the upper grades.

Drug applications are one of the core tasks of nurses in their daily clinical practices (Grandell-Niemi et al., 2005). Nurses, who are the last ring of the drug application process, are held responsible for most of the drug application mistakes (Vural, 2013). In the study of Asti and Kivanc (2003), it is stated that only 20% of nurses make a drug mistake (Asti and Kivanc, 2003). In the study conducted by Cheragi et al. (2013), it is found that 64.55% of nurses make a drug mistake (Cheragi et al., 2013). In the study conducted by Ayik et al. (2010) on nursing students, it is determined that most of the students express the drug mistake they made (Ayik et al., 2010). In our study, in an ethical dilemma about whether a nurse working in a surgical clinic should report a mistaken drug application, the proportion of students who think that the drug mistake should be reported is equal in both groups (88.6%). The rate of nursing students who think that the drug error should be reported in different studies is high (Kurt et al., 2013; Sari et al., 2018).

The treatment and care of a cancer patient requires coping with various serious ethical dilemmas. It is difficult to tell the cancer diagnosis. For this reason, this leads to a dilemma about how and to which extent the facts should be explained to the patient (Ersoy, 2009a). For the dilemma consisting of informing an adult with lung cancer of his/her diagnosis and prognosis, upon request of his/her family, 93.2% of the students who took the ethics course and 79.5% of the students who did not take the ethics course think that an adult with fatal disease should not be informed of his/her disease. However, even if the disease has a fatal end, the concealment of the truth, which prevents patients from doing what they want to do in the rest of their life, is an ethically unacceptable condition (Ersoy 2009b). However, the principle of respect for the autonomy of the individual argues that the individual has a right and ability to decide according to his/her own beliefs, values and life plans (Ersoy 2009a). In the in studies conducted the percentage of those who think that the patient should not be informed of his /her disease is found at lower rates (Cerit, 2010; Kurt et al., 2013; Sari et al., 2018).

Nurses experience ethical issues and ethical dilemmas every day. They need to take the ethics education to be able to make right ethical decisions and to cope with this issue. However, some ethical issues may not be fully understood by nursing students due to the fact that the content of the course is conceptual (Ertug et al., 2014). Evaluating the data of students obtained from Part B of the Ethical Dilemma Test, their possible mean scores of Principal Thinking (PT) and Practical consideration

(PC) are calculated. The mean PT score of the students who took the ethics course is 52.4 ± 2.17 and the mean PT score of the students who did not take the ethics course is 45.13 ± 11.33 and a statistically significant difference is determined between the mean PT scores of these two groups ($p = 0.00$). In our study, the fact that the mean PT scores of students who took the ethics course is significantly higher than those who did not take the ethics course suggests that the ethics course affects the decision making status in encountered ethical principles, ethical issues and ethical dilemmas. In the study conducted by Gul et al. (2013), the mean PT score of students who took the ethics course (17.07) is found higher than those students who did not take ethics course (13.92) (Gul et al., 2013). On the other hand, in two different studies conducted with students, mean scores of PT and PC are lower than those obtained in our study (Kurt et al., 2013; Sari et al., 2018). In the study conducted by Tosun et al. (2002), where they evaluate the intern training program of students from faculty of nursing, it is found that the mean scores of nursing students for obeying ethical rules are 8.79 ± 1.46 at the beginning of internship and 9.52 ± 0.73 at the end of internship, and the difference between these scores is statistically significant ($t=-4.770$ $p<0.001$) (Tosun, 2008). In the study conducted by Ertug et al. (2014), it is determined that the education status affects the ethical sensitivity of nurses (Ertug et al., 2014). Clinical teaching is the integral and one of the most important parts of nursing education. The clinical experience provides students with the ability to use their knowledge in a real environment, develop their psychomotor skills, and get the professional socialization (Tosun, 2008). The other result obtained from part B of the ethical dilemma test is the mean score of PC. PC measures the importance given by nurses in deciding on ethical issues, to environmental factors such as the number of patients, resource utilization, institutional policies, the extent of nurses' perception of the support given by the management of institution and physician control (Cerit, 2010; Gul et al., 2013). In our study, it is found that mean PC scores of students who took the ethics course (20.47 ± 5.77) are close to mean scores of students who did not take the ethics course (18.38 ± 4.97) and are not statistically significant. This result shows the fact that the students do not have enough ethical dilemmas in the clinic. In the third part of the Nursing Ethical Dilemma Test, the familiarity of students dilemmas, i.e. their past experience with similar dilemmas, is evaluated. The range of 6-17 scores that can be obtained from this part expresses the familiarity with a similar dilemma, while a range of 18-30 scores expresses unfamiliarity. It is

found in our study that 65.9% of the students who took the ethics course are familiar with similar situations/dilemmas and get 16.54 ± 2.15 scores from this section and only 2.3% of the students who did not take the ethics course are familiar with similar dilemmas and get 20.43 ± 2.42 scores. The difference between the groups is statistically significant ($p = 0.00$). This result shows that students taking section in the research, who take the ethics course, are more familiar with similar dilemmas. Results obtained from this part of our study are similar to those of the other research (Gul et al., 2013; Sari et al., 2018).

Conclusion: In our study, it can be said that nursing students who took ethics course was thinking of principle at ethical dilemmas and practical consideration aspects should be supported by clinical teaching. Students who took ethics courses are more familiar with ethical dilemmas. According to the results of our study, it is thought that ethical courses in nursing education develop students' ethical decision making skills.

Limitations: The fact that the research is carried out in only one institution and that it is limited to a certain date constitutes the limitations of the research.

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