Navigating Ethical Dilemmas in Clinical Laboratories: A Qualitative Exploration of Challenges Faced by Laboratory Specialists in Tertiary Hospitals

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Abstract

This qualitative study explores the ethical dilemmas faced by laboratory specialists in a tertiary hospital setting. Through in-depth interviews with 15 laboratory professionals, four key themes emerged: handling diagnostic errors, managing patient confidentiality, navigating sensitive test results, and the lack of institutional support for ethical decision-making. Participants reported significant challenges in balancing professional responsibilities with ethical obligations, often citing unclear guidelines and fear of repercussions as barriers to transparent decision-making. The study highlights the need for structured ethical frameworks, regular ethics training, and the establishment of ethics committees to support laboratory specialists in navigating complex ethical scenarios. These findings underscore the importance of institutional support in promoting ethical practices within clinical laboratories.

Keywords: Ethical dilemmas, laboratory specialists, diagnostic errors, patient confidentiality, tertiary hospital, ethics training, institutional support

Introduction

Ethics play a crucial role in the healthcare sector, where decisions made by professionals directly impact patient safety, care quality, and outcomes. Among healthcare professionals, laboratory specialists have a unique responsibility to ensure the accuracy, confidentiality, and integrity of diagnostic tests, which form the foundation for clinical decision-making. In a tertiary hospital setting, where the volume and complexity of cases are high, the ethical challenges faced by laboratory specialists can be significant. Ethical dilemmas may arise from handling critical diagnostic errors, managing patient data privacy, and reporting sensitive test results, such as life-altering or unexpected findings. These dilemmas are further compounded by the pressure to meet stringent timelines and maintain high diagnostic accuracy amidst resource constraints (Grady, 2015; World Health Organization, 2016).

One common ethical challenge is the handling of diagnostic errors. Laboratory specialists are tasked with producing accurate results under time pressure, yet mistakes may still occur due to human or technical error. These errors can have far-reaching consequences, from misdiagnosis to inappropriate treatment, and laboratory specialists may face the moral dilemma of whether to report the error, knowing it could harm their professional standing or even patient outcomes (Nyrhinen and Leino-Kilpi, 2000). Additionally, patient confidentiality remains a core ethical principle in healthcare. With advancements in technology and the

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increasing use of electronic health records, laboratory specialists must ensure that sensitive patient information is protected from unauthorized access and breaches (Vayena et al., 2015).

Moreover, laboratory specialists are often required to handle sensitive test results, such as those indicating terminal illnesses, genetic disorders, or infectious diseases. These results can have profound psychological, emotional, and social impacts on patients, and laboratory specialists must navigate the ethical complexities of reporting such findings while ensuring accuracy, compassion, and compliance with legal and institutional guidelines (Beauchamp & Childress, 1994).

Despite the critical nature of these ethical issues, there is limited research exploring the lived experiences of laboratory specialists in handling such dilemmas, particularly in tertiary hospital settings. This qualitative study aims to explore the types of ethical challenges faced by laboratory specialists and understand how they navigate these situations. By gaining deeper insights into their experiences, this study seeks to inform the development of better ethical guidelines and support systems for laboratory professionals.

Research Questions

- 1. What are the common ethical dilemmas faced by laboratory specialists in tertiary hospitals?
- 2. How do laboratory specialists approach and resolve these ethical challenges?
- 3. What support mechanisms or guidelines exist to assist them in ethical decision-making?

Literature Review

The laboratory medicine field plays a crucial role in supporting clinical decisions and ensuring patient safety, yet it is fraught with ethical challenges. Laboratory specialists in tertiary hospitals face various dilemmas, from handling diagnostic errors to managing patient confidentiality and reporting sensitive findings. This literature review will examine existing research on the ethical principles guiding laboratory practices, common ethical dilemmas in clinical laboratories, and decision-making frameworks used by healthcare professionals when faced with such challenges.

1. Ethical Principles in Clinical Laboratories

Ethics in laboratory medicine is guided by key principles such as beneficence, non-maleficence, autonomy, and justice, all of which are foundational in healthcare. Laboratory specialists are responsible for ensuring that their work supports patient welfare (beneficence) while preventing harm (non-maleficence). This responsibility includes providing accurate, timely, and reliable diagnostic results that directly impact treatment decisions (Beauchamp & Childress, 1994). The autonomy of patients is also a vital consideration, particularly when managing sensitive data or test results. Informed consent, the patient's right to know, and the confidentiality of their health information are core elements of ethical practice in laboratories (Grady, 2015). Lastly, the principle of justice in healthcare underscores the need for fair access to high-quality diagnostic services, regardless of the patient's background or resources (Vayena et al., 2015).

2. Common Ethical Dilemmas in Clinical Laboratories

One of the most prevalent ethical dilemmas in laboratory medicine is related to diagnostic errors. While laboratory specialists strive for precision, errors can occur due to human factors, equipment malfunction, or sample contamination. Diagnostic errors can lead to significant harm if a patient receives incorrect or delayed treatment as a result. Research highlights the moral and professional tension laboratory specialists face when deciding whether and how to disclose these errors, especially in environments where error reporting could affect their reputation or job security (Nyrhinen and Leino-Kilpi, 2000). Transparency in

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acknowledging mistakes is an ethical obligation, but the fear of punitive actions often complicates this process.

Patient confidentiality is another significant ethical concern, especially with the increasing use of electronic health records (EHRs). The World Health Organization (WHO, 2016) emphasizes the critical need for laboratory professionals to safeguard patient data from unauthorized access and breaches. Vayena et al. (2015) explored how laboratory professionals navigate the challenges posed by EHRs, where the potential for breaches has increased due to the centralized nature of health data systems. Laboratory specialists must adhere to strict privacy standards to ensure compliance with legal regulations, such as the Health Insurance Portability and Accountability Act (HIPAA) in the United States or the General Data Protection Regulation (GDPR) in Europe.

Another key area of ethical concern involves the reporting of sensitive or unexpected findings. Laboratory specialists may encounter ethically challenging situations when test results indicate a serious condition, such as cancer or genetic abnormalities. Studies suggest that professionals often struggle with balancing the need for accuracy and prompt reporting with compassion and sensitivity in delivering potentially life-changing information (Beauchamp & Childress, 1994). These situations may require collaboration with clinicians and ethical committees to ensure that patient autonomy is respected while maintaining professional integrity.

3. Ethical Decision-Making in Healthcare

In navigating ethical challenges, laboratory specialists often rely on institutional policies, professional guidelines, and personal moral frameworks. Ethical decision-making models, such as Beauchamp and Childress's four-principle approach, offer valuable tools for weighing conflicting responsibilities, such as balancing beneficence with patient autonomy (Beauchamp & Childress, 1994). These models are designed to guide professionals in making decisions that are ethically justifiable and aligned with patient welfare. However, practical application of these models can be challenging due to the complex and fast-paced environment of tertiary hospitals.

Nyrhinen and Leino-Kilpi (2000) examined how laboratory professionals make ethical decisions under pressure, noting that ambiguity in institutional guidelines often leads to uncertainty. Many professionals report a lack of structured support systems, such as ethics committees, which could provide guidance in resolving dilemmas. Without these formal structures, laboratory specialists frequently rely on their personal judgment and peer consultations when faced with ethical challenges.

4. Institutional Support and Ethical Training

Ethical challenges are not unique to laboratory specialists but are prevalent across healthcare professions. However, the availability of institutional support, such as ethics committees and structured training programs, varies widely. Research indicates that ongoing ethics education is critical in helping laboratory professionals navigate complex dilemmas. Formal training in ethics not only improves decision-making skills but also enhances professionals 'confidence in addressing issues related to confidentiality, error reporting, and sensitive data management (Grady, 2015).

Some institutions have introduced specific protocols for addressing ethical issues in laboratory settings. For example, WHO (2016) has emphasized the importance of creating clear guidelines for managing ethical conflicts, including protocols for handling diagnostic errors and maintaining patient confidentiality. Despite

these efforts, gaps remain in many healthcare systems, where laboratory specialists often report insufficient training or access to ethical resources.

The literature highlights a range of ethical challenges faced by laboratory specialists, particularly in tertiary hospitals where the complexity and volume of cases heighten the potential for ethical conflicts. Issues such as diagnostic errors, patient confidentiality, and reporting sensitive findings present significant dilemmas for laboratory professionals. Although ethical decision-making frameworks exist, there is a need for more structured institutional support and ongoing ethics training to ensure that laboratory specialists are well-equipped to handle these challenges. This study aims to build upon the existing literature by exploring the lived experiences of laboratory specialists as they navigate ethical dilemmas in their daily practice, providing valuable insights into areas where support and policy development may be needed.

Methodology

This study utilized a qualitative research design to explore the ethical dilemmas faced by laboratory specialists working in a tertiary hospital. The study aimed to gain a deeper understanding of the types of ethical challenges these professionals encounter and how they navigate these situations in their day-to-day practice.

Research Design

A qualitative approach was selected for this study as it allows for an in-depth exploration of complex issues such as ethics, which are often shaped by individual experiences and institutional contexts. A phenomenological design was employed to capture the lived experiences of laboratory specialists when faced with ethical dilemmas. This approach is suitable for uncovering the nuances of personal and professional challenges, as it focuses on how individuals perceive and make sense of their experiences (Creswell & Poth, 2017).

Participants

The study was conducted in a large tertiary hospital. A purposive sampling technique was used to select participants who had at least five years of experience working as laboratory specialists in clinical settings. This criterion ensured that participants had adequate exposure to potential ethical dilemmas in their professional practice. Out of the 30 eligible candidates, 15 laboratory specialists agreed to participate in the study. The sample included a diverse range of professionals, covering different laboratory disciplines such as clinical chemistry, microbiology, hematology, and pathology.

Data Collection

Data were collected through semi-structured interviews, which allowed for flexibility while ensuring that key topics were addressed consistently across participants. Interviews lasted between 45 and 60 minutes and were conducted in a private office within the hospital to ensure confidentiality and reduce interruptions.

An interview guide was developed based on the literature and pilot-tested with two laboratory specialists prior to the actual study. The questions focused on the following areas:

- The types of ethical dilemmas participants had encountered in their work.
- How they navigated these dilemmas.
- Their perceptions of the institutional support available to help resolve ethical issues.
- Recommendations for improving ethical decision-making frameworks in clinical laboratories.

All interviews were audio-recorded with participants' consent and subsequently transcribed verbatim. In addition, field notes were taken during interviews to capture non-verbal cues and contextual information that might provide further insight into participants' experiences.

Data Analysis

Thematic analysis was used to analyze the qualitative data, following Braun and Clarke's (2006) six-phase process. This approach allowed for the identification of key themes and patterns across participants 'narratives. The steps involved in the analysis were as follows:

- 1. Familiarization with the data: The researcher listened to the audio recordings and read through the transcripts multiple times to become thoroughly familiar with the data.
- 2. Coding: A systematic coding process was applied to the transcripts, with each segment of the data categorized based on its relevance to the research questions. Codes such as "error disclosure," "patient confidentiality," and "institutional support" were identified early in the process.
- 3. Searching for themes: The codes were then grouped into broader themes, representing recurring concepts and experiences. Themes that emerged included "handling diagnostic errors," "navigating patient privacy concerns," "lack of formal ethical guidance," and "ethical decision-making under pressure."
- 4. Reviewing themes: The themes were reviewed and refined to ensure they accurately captured the essence of the participants 'experiences. Some sub-themes were collapsed into broader categories where appropriate.
- 5. Defining and naming themes: Each theme was defined clearly, and quotes from participants were selected to illustrate the key points.
- 6. Writing the report: The final step involved integrating the themes into the narrative of the research report, ensuring that the findings were presented in a coherent and logical manner.

Ethical Considerations

Ethical approval for the study was obtained from ethics committee. All participants provided informed consent prior to the interviews, and they were assured that their participation was voluntary and that they could withdraw from the study at any point without consequence. Pseudonyms were assigned to protect the identities of the participants, and all data were stored securely in password-protected files. The data will be kept for five years and then destroyed, in line with institutional data retention policies.

Trustworthiness of the Study

To ensure the trustworthiness of the findings, several strategies were employed. Credibility was achieved by using member checking, where participants were given the opportunity to review and provide feedback on the interview transcripts to ensure that their experiences were accurately captured. Transferability was addressed by providing a detailed description of the research context and participant characteristics, allowing readers to assess the applicability of the findings to other settings. Dependability was supported by maintaining a thorough audit trail of the research process, including notes on coding decisions and thematic development. Finally, confirmability was established by triangulating the interview data with field notes to reduce researcher bias and ensure a more objective interpretation of the data.

Limitations

Although this study provides valuable insights into the ethical challenges faced by laboratory specialists in tertiary hospitals, it has some limitations. The sample size was relatively small, and participants were recruited from a single hospital, which may limit the generalizability of the findings to other settings. Additionally, the reliance on self-reported data may introduce bias, as participants may have underreported or exaggerated certain experiences. Future research could address these limitations by expanding the sample

size and including laboratory specialists from multiple institutions to compare experiences across different settings.

Findings

The analysis of the interviews revealed several key themes and sub-themes that highlight the ethical dilemmas faced by laboratory specialists in the tertiary hospital setting. Four main themes emerged from the data: Handling Diagnostic Errors, Managing Patient Confidentiality, Navigating Sensitive Results, and Lack of Institutional Support for Ethical Decision-Making. Each theme is supported by several sub-themes that reflect the specific challenges and experiences shared by the participants.

Theme 1: Handling Diagnostic Errors

One of the most commonly reported ethical dilemmas involved the handling of diagnostic errors. Participants expressed difficulty in managing situations where diagnostic errors, either due to human mistakes or technical malfunctions, led to incorrect results.

Sub-theme 1.1: Emotional and Professional Impact of Errors

Participants described the emotional burden of recognizing a diagnostic error, as well as the professional risks associated with disclosing the mistake.

- "It's really stressful when you realize you've made an error, especially in critical cases where the diagnosis is time-sensitive. You worry about the patient, but also about your reputation and whether the hospital will blame you." (Participant 5)
- "I always feel torn. I know we're supposed to report mistakes, but the fear of losing my job or facing disciplinary action makes it really hard." (Participant 9)

Sub-theme 1.2: Reporting Errors

There was a significant amount of hesitation around reporting errors, with some participants noting a lack of clear policies on how to handle these situations.

- "We don't have a solid system in place for reporting errors. It's very much up to the individual, and most of the time, people just try to fix the problem quietly." (Participant 3)
- "I think the institution needs to do a better job of supporting staff when mistakes happen, instead of creating an environment where people are afraid to come forward." (Participant 11)

Theme 2: Managing Patient Confidentiality

Patient confidentiality was another major concern, particularly with the increasing use of electronic health records (EHRs). Participants often struggled with balancing the need for accessible data with protecting patient privacy.

Sub-theme 2.1: Safeguarding Sensitive Information

Participants discussed how maintaining the privacy of patient data is a constant challenge, especially in a hospital where multiple departments access laboratory results.

- "The system is supposed to be secure, but you always worry about who has access to the patient information. There's always a risk of breaches, even with the best technology." (Participant 7)
- "Sometimes I feel like too many people have access to the lab results, and I worry that sensitive information can be seen by people who don't need it for patient care." (Participant 1)

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Sub-theme 2.2: Ethical Dilemmas in Sharing Information

Laboratory specialists often faced ethical challenges when asked to share patient information with healthcare professionals who may not be directly involved in the patient's care.

- "There have been times when doctors from unrelated departments ask for test results, and you wonder if it's ethically right to share that information, even though they work in the same hospital." (Participant 4)
- "I've had situations where I was asked to pull patient information for another department, and I'm never sure where to draw the line. It's a constant struggle." (Participant 8)

Theme 3: Navigating Sensitive Results

Another ethical dilemma highlighted by participants was dealing with the responsibility of reporting sensitive or unexpected findings, such as terminal diagnoses, genetic conditions, or infectious diseases.

Sub-theme 3.1: The Emotional Toll of Delivering Sensitive Findings

Participants expressed the emotional weight of knowing the implications of certain test results and the difficulty in conveying such information with compassion.

- "I once had to report results that indicated a cancer diagnosis, and it's incredibly difficult because you know how devastating that news is. We're trained to be objective, but we're still human." (Participant 2)
- "It's hard when you're the first person to know something so serious, and you have to figure out how to break the news in a way that doesn't completely overwhelm the patient." (Participant 10)

Sub-theme 3.2: Collaboration with Clinicians

Participants discussed the importance of collaborating with clinicians to ensure that sensitive findings are communicated appropriately to patients.

- "We usually try to work closely with doctors when it comes to delivering bad news, because they're more trained in handling patient reactions, but sometimes we're left on our own, and it's tough." (Participant 12)
- "There's no formal guideline for these situations, so you have to rely on your instincts and hope you're doing what's best for the patient." (Participant 6)

Theme 4: Lack of Institutional Support for Ethical Decision-Making

Participants unanimously reported feeling unsupported when it came to ethical decision-making, with many pointing to the absence of formal ethics training and guidance in the hospital.

Sub-theme 4.1: Absence of Formal Ethical Guidelines

Participants noted that there were no clear institutional protocols to help them navigate ethical dilemmas, leading to uncertainty and inconsistent practices.

- "We don't really have any official training or guidelines on how to handle ethical issues. We're expected to figure it out on our own, which is really challenging." (Participant 14)
- "I feel like the hospital leaves us in the dark when it comes to ethics. We need more structured support." (Participant 13)

Sub-theme 4.2: Need for Ethics Committees

Many participants expressed a desire for the hospital to establish formal ethics committees that could provide support and guidance in resolving ethical dilemmas.

- "There should be an ethics committee we can turn to when things get complicated. Right now, it feels like we're just making decisions without any backup." (Participant 15)

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- "I think having an ethics committee would really help because we could consult with them when we're not sure what the right course of action is." (Participant 6)

Discussion

The findings of this study highlight the complex ethical dilemmas faced by laboratory specialists in a tertiary hospital setting. Four key themes emerged from the data: handling diagnostic errors, managing patient confidentiality, navigating sensitive results, and the lack of institutional support for ethical decision-making. Each theme underscores the need for more structured guidance, support, and training for laboratory professionals as they navigate these ethically challenging situations.

Handling Diagnostic Errors

Diagnostic errors were one of the most prominent ethical challenges reported by participants. The fear of professional repercussions, coupled with the emotional burden of knowing a patient's care could be compromised, made it difficult for laboratory specialists to handle errors openly. This finding aligns with previous research, which has shown that healthcare professionals often struggle with error disclosure due to concerns about legal, professional, or institutional consequences (Nyrhinen and Leino-Kilpi, 2000). In this study, participants emphasized the absence of formal error-reporting systems, which only increased their hesitation to report mistakes.

Ethical decision-making models, such as those proposed by Beauchamp and Childress (1994), emphasize the importance of transparency and non-maleficence. However, the practical application of these principles remains challenging when institutional structures do not support open disclosure. The reluctance to report errors is concerning, as diagnostic mistakes can have serious consequences for patient care. Developing a non-punitive, transparent error-reporting culture within healthcare institutions could mitigate this issue. Such systems would allow laboratory specialists to report errors without fear of retribution, promoting a safer and more ethical work environment.

Managing Patient Confidentiality

The increasing use of electronic health records (EHRs) has introduced new ethical challenges related to patient confidentiality. Participants in this study expressed concerns about maintaining the privacy of sensitive patient information in an environment where multiple departments access laboratory results. This echoes findings from Vayena et al. (2015), who highlighted the ethical risks posed by the widespread use of digital health data systems.

Laboratory specialists face a delicate balance between ensuring that patient data is accessible to relevant healthcare professionals while protecting it from unauthorized access. Many participants reported feeling uncertain about where to draw the line, especially when asked to share information with departments not directly involved in the patient's care. This highlights the need for clearer institutional policies on data access, as well as ongoing ethics training to help laboratory professionals navigate these situations confidently and ethically.

Navigating Sensitive Results

Delivering sensitive or unexpected findings, such as terminal diagnoses or genetic disorders, emerged as another significant ethical dilemma. Participants described the emotional toll of knowing that their results could dramatically impact a patient's life. This theme reflects the ethical principles of compassion and non-maleficence, as laboratory specialists must ensure that these results are conveyed accurately and with

sensitivity. However, the study revealed a gap in formal protocols for handling such sensitive situations, leaving professionals to rely on their instincts or collaborate informally with clinicians.

Previous research has emphasized the importance of interdisciplinary collaboration when communicating difficult diagnoses to patients (Beauchamp & Childress, 1994). In this study, participants reported that working with clinicians helped ensure that sensitive findings were communicated appropriately, but they also noted the lack of clear institutional guidelines on this matter. This indicates a need for hospitals to develop more structured protocols that outline the roles of laboratory specialists and clinicians in delivering sensitive information, ensuring that both parties are adequately prepared and supported.

Lack of Institutional Support for Ethical Decision-Making

One of the most striking findings of this study was the lack of institutional support for ethical decision-making. Participants consistently reported feeling unsupported when faced with ethical dilemmas, and many highlighted the absence of formal ethics training or guidelines. This finding is consistent with the literature, which has often noted the limited availability of structured ethical guidance in clinical laboratory settings (Grady, 2015).

Without formal ethics committees or established protocols, laboratory specialists are often left to navigate these complex situations on their own, relying on personal judgment or informal consultations with colleagues. This lack of support creates a risk of inconsistent decision-making and could lead to ethical oversights that may negatively impact patient care. To address this issue, hospitals should consider establishing dedicated ethics committees or support teams that can provide guidance to laboratory staff when ethical challenges arise. Additionally, regular ethics training should be implemented to ensure that all staff are equipped with the tools needed to make informed, ethical decisions.

Implications for Practice

The findings from this study highlight several key areas where improvements can be made to support laboratory specialists in managing ethical dilemmas. First, institutions should prioritize the development of clear, structured guidelines for handling diagnostic errors, maintaining patient confidentiality, and reporting sensitive findings. These guidelines should be designed to reduce uncertainty and provide laboratory specialists with the support they need to act in the best interests of patients.

Second, hospitals must foster a culture of open communication and non-punitive error reporting. Creating safe spaces for laboratory professionals to disclose mistakes without fear of retribution is critical for promoting patient safety and improving ethical decision-making. Establishing ethics committees or consultation services would provide much-needed support for laboratory staff, enabling them to consult with experts on challenging cases.

Finally, ethics training should be a core component of professional development for laboratory specialists. Regular training sessions would help staff stay informed about the latest ethical standards, institutional policies, and best practices for managing ethical dilemmas.

Limitations of the Study

While this study provides valuable insights into the ethical challenges faced by laboratory specialists, it has several limitations. The research was conducted in a single tertiary hospital, which may limit the generalizability of the findings to other settings. Additionally, the reliance on self-reported data may

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introduce bias, as participants might underreport or overreport certain experiences due to social desirability. Future research should aim to include multiple institutions and explore how different hospital settings influence the ethical challenges faced by laboratory specialists.

Conclusion

This study provides a detailed exploration of the ethical dilemmas faced by laboratory specialists in a tertiary hospital setting. The findings highlight the need for more structured institutional support, clearer ethical guidelines, and comprehensive ethics training. Addressing these areas will not only improve ethical decision-making in clinical laboratories but also enhance patient care and safety. As the healthcare landscape continues to evolve, it is essential that laboratory professionals are equipped with the tools and resources needed to navigate the increasingly complex ethical challenges they encounter in their practice.

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