

Based on the situation above, what are the ethical and legal implications for the practice at the micro-, meso-, and macro-level of the system?

There are many questions to ask to have a clear understanding of what occurred. At the microsystem level, the focus should be on which of the medical assistants interacted with the patient over the phone and entered the prescribed medication in the electronic health record (EHR) system. Why is the current EHR system allowing a non-licensed medical professional to enter medication information in the patient's chart? Is this a normal procedure in the organization? At the mesosystem level, it is necessary to determine if the medical assistant was ordered by a non-licensed superior to enter the prescription into the system. Why was the medical assistant assuring the patient that the medication was going to be available? When was the last time this patient was seen at the clinic? How much medication was prescribed for one week? Is the cough related to a bacterial or viral infection? The patient needs to be made aware of the mistake made by the staff?

Complete a physical assessment and verification that the patient does not have a medical history of heart, lung, circulation, or kidney conditions that could induce cough. Have a complete blood work panel and have an EKG 12 with leads done to prevent injury to the patient. Guarantee that the patient will receive the appropriate medical care for the current medical condition before leaving the clinic. At the macrosystem level, it would focus on whether the patient was harmed by receiving inappropriate prescription medication and whether the patient is stable and out of danger. How can we prevent the event from happening again? If the information entered was not approved by a licensed medical care professional, the non-licensed medical staff should be dismissed immediately, and all their medical entries in the EHR should be audited to prevent any harm to other patients.

What changes do you recommend to prevent further episodes of the problem behavior?

The EHR system should be modified, and restrictions to the patient's chart should be implemented right away so that non-licensed personnel do not have access certain areas. The staff should be trained in the new changes. New guidelines and policies should be instituted to prevent future events. If the medical assistant is not at fault because they are authorized by the organization to enter refill medication in the EHR, they should be educated. They should be educated on the risks of prescribing medication without the consent of licensed medical staff and the legal consequences they would face if this happens again.