

GNS 106 (VALUES IN HEALTH AND SICKNESS)
ABORTION

GNS 106

1. The two major views that dominate abortion debate are those formed by _____ and _____
2. One of the following are the reason why pregnancy is terminated except (a) economic inability to care for a child (b) having a previous child who is still too young or being a student (c) rape (d) sexual desire
3. Abortion is usually legalized in 80% of the world population on the following factors except? (a) for saving lives (b) for some specific health abnormalities (c) a mistake when apply any form of family planning procedure
4. The acronym HLPL means (a) Human Life Protection League (b) Health Life People's Like (c) Human Life Proposition League (d) Human Laboratory People's Life
5. The acronym UNESCO means (a) United Nations Economics Social and Cultural Organization (b) Unity National Economics, Sociopolitical and Cultural Ordinance (c) United Nigerian Economical, Social and Cultural Organization (d) United Nite Economics, Social and Cultivating Organ gram
6. The strong seat of Catholicism is usually from United State to _____ (a) Spain (b) Ghana (c) England (d) Ouagadugu
7. Illiat abortion are performed under a wide range of unsafe condition except (a) unqualified person (b) untrained health workers (c) physician who perform abortion outside the regular practice or field (d) qualified physician
8. The arrangement whereby there is an agreement on which the pregnancy is carried for and intended parent is called (a) surrogacy (b) divorce (c) merogacy (d) derogacy
9. Surrogacy can be in two forms which are _____ and _____
10. A type of surrogacy which result from transfer of an embryo created by invitro fertilization in a manner so that the resulting child is genetically unrelated to the surrogate (a) gestational surrogacy (b) traditional surrogacy (c) religious surrogacy (d) humonical surrogacy
11. Is a mother allowed to abort the foetus, if she does not want it while life has not yet entered in and there is no serious danger to the mother's life?
12. Sometimes the doctor reach the following conclusion: This foetus is afflicted with a serious disease, it is therefore preferable that it should be aborted because if that child is born, it will be deformed or will die soon after birth, is it therefore permissible for the doctor to abort the foetus? Is it permissible for the mother to agree to the abortion? And who of the two will become liable for indemnity?
13. What is the ruling on aborting an unwanted pregnancy before 4months into pregnancy?
14. A case whereby a wife seems to be one or two weeks pregnant and we already have four children. We don't want any more children; under what circumstance is an abortion allowed?
15. What is the ruling of abortion for a pregnant woman who is infected with AIDS?

GENETIC ENGINEERING AND CLONING

1. What is genetic engineering?
2. What animals a being genetically engineered?
3. Is a genetic engineering animal on animal clone?
4. Why regulate genetic engineering animal and their products?
5. Are genetic engineering animals in the food supply?
6. Will industry propose a supply chain management program for genetic engineering animals similar to that developed to track animal clones?
7. Are there long term health effects of foods from genetically engineered plants?

8. Why aren't foods from genetically engineered plants labeled?
9. Are foods from genetically engineered plants more likely to (i) cause an allergic reaction (ii) be toxic
10. Are foods from genetically engineered plants less nutritious than comparable foods?
11. WHO means _____
12. FDA means _____ (a) Food and Drug Administration (b) Fever and Diuretic Administration (c) Fine and Dancing Angel (d) none of the above
13. _____ is a process used in ancient times to multiply trees and plants (a) multiplication table (b) cloning (c) addition table (d) racism
14. _____ is a system of experimental methods for creating artificial gene structures described as recombinant DNA molecules (a) genetic engineering (b) mechanical engineering (c) biomedical engineering (d) food science engineering
15. _____ observed that the emergence of genetic engineering has not brought about a new vision of biological phenomenon, now cognitive ideas or a need to radically revise existing conceptions (a) Alexander Bayer (b) Robert Hooke (c) Edward Jenner (d) Alexander Fleming

PUNISHMENT AND SUICIDE

1. The two broad justification given for the practice of punishment are _____ and _____
2. A situation whereby guilt is the necessary condition for punishment is called _____ (a) retribution (b) utilitarian (c) distributional (d) commercial
3. The following reasons are reasons why retributionist should be punished are, except (a) it annuls the evil which the offender has created (b) the offender has had some sort of illicit pleasure and that the infliction of pain will redress the moral balance (c) that the offender has a right to punishment (d) none of the above
4. _____ theory of punishment is consequentiality in nature (a) utilitarian theory of punishment (b) retributivist (c) deterrent theory of punishment (d) capital theory of punishment
5. _____ recognize that punishment has consequence for both the offender and society and holds that the total good produced by the punishment should exceed the total evil (a) capital theory of punishment (b) retributionist theory of punishment (c) emphasizing theory of punishment (d) lateral theory of punishment
6. _____ is one of the utilitarian rational for punishment (a) rehabilitation (b) rusistication (c) Maloney (d) surrogacy
7. _____ means that the punishment should prevent the same person from committing crimes (a) specific deterrence (b) rehabilitation (c) melandony (d) capital
8. _____ is a major rational for punishment which express society condemnation (a) rehabilitation (b) denunciation (c) defendant (d) justification
9. _____ is an act of doing something which results in one's death either from the intention of ending one's life or the intention to bring about some other state of affairs (a) suicide (b) battery (c) assault (d) punishment
10. "Suicide" is blameworthy because it is _____ (a) cowardly (b) timidly (c) monkeyly (d) relatedly
11. A frequent cause of suicide is _____ and _____
12. _____ is referred to as mercy killing (a) euthanasia (b) rehabilitation (c) offence (d) criminology

13. _____ is the thought of ending one's life but not taking any active effort to do so
(a) suicidal ideation (b) euthanasia (c) offensive (d) criminology
14. _____ is the act of taking one's life for the benefit of others (a) altruistic suicide
(b) rehabilitation (c) euthanasia (d) offence
15. _____ suicide are often performed under social pressure where members give up
autonomy to a leader (a) altruistic suicide (b) mass suicide (c) euthanasia (d) rehabilitation
16. _____ punishment is mistakenly a form of punishment which aimed at its final extinction
or the death of the person punished (a) capital (b) offensive (c) rehabilitation (d) rare
17. Any punishment or deprivation inflicted on an innocent person cannot be regarded as offence
but _____ (a) killing (b) criminology (c) sacrificial (d) brutality
18. Any person who imposed deprivation on another must be authorized to do so (True / False)
19. Any justification of punishment must have a _____ reward (a) retributive reward
(b) utilitarian reward (c) metamorphic reward (d) capital reward
20. Retributive reward is always backward looking (True / False)
21. Any defense of punishment should (a) state what has already occurred (b) state what is about
to occur (c) state what is to occur in the next two years (d) none of the above
22. Any adequate theory of punishment is expected to explain how or why it is right or just or
good that will produce this deprivation (True / False)
23. The surest way to ensure that the person found guilty will be unable to perform any wrongful
act in the future is by _____ (a) execution (b) bailing (c) warning (d) caring
24. _____ is an important factor because it is involved regularly as the primary justification
for punishment in general and for capital punishment in particular (a) deterrence
(b) deference (c) execution (d) brutality
25. _____ is a trump card in liberal theory with the power to convert and otherwise unfair
distribution of burden into a justified one (a) consent (b) rehabilitation (c) capital (d)
offence

RIGHT OF PATIENTS

1. The doctor should make all efforts to disclose the information regarding the state of patients
(True / False)
2. The doctor must endeavor not to disclose information regarding the state of patient's health to
an outsider (True / False)
3. Mrs Okanlawon was diagnosed of glomerular Hepatitis, but was brought to the clinic by
his/her relative, should the result be disclosed to her relative? Why?
4. "Just as with the case of suicide we then have to decide where public interest and individual
consideration collide and resolve which one is more important" (True / False)
5. Can my personal health information be used and disclosed without any notice to me or
without my informed consent at the time of treatment? Why?
6. You have the right to make decision about your care, treatment and service including refusing
treatment (True / False)
7. You don't have the right to receive written discharge instructions from your doctor about your
follow up care before leaving the hospital (True / False)
8. If the patient receives care from more than one attending health care practitioner and they
agree to assign to one of them the responsibility to offer information and counseling
concerning palliative care, end of life and other appropriate treatment options, should the
agreement be documented?
9. How does the attending health care practitioner determine whether a patient's condition is
reasonably expected to cause death within 6 months?

10. When the patient lacks capacity to make medical decisions, who should receive the offer of counseling concerning care, end of life and other appropriate treatment options?
11. Some attending health care practitioner may be concerned that discussing the end of life may be too distress for some patients and their care giver. Is there a therapeutic exemption for such patients?
12. In certain culture discussion about the end of life are considered taboo. Is there a cultural exemption from this requirement?
13. What are the patients legal rights to comprehensive pain and symptoms management at the end of life?
14. The statute requires that the offering of information must be appropriate to the patient, what does that mean?
15. What type of practitioners are subject to the law?
16. Is palliative care the same thing as hospice?

ANSWERS

ABORTION

1. Modern genetics and Christian ethics
2. Sexual Desire (D)
3. C 4. A 5. A 6. A 7. D 8. A
9. Gestational and Traditional surrogacy
10. A
11. she is not allowed to do that, except if the continuation of the pregnancy would harm her health or put in an unbearable difficulty
12. Just the fact that the child will be performed or that it will not live for a long time after birth does not ever justify the termination of the pregnancy. Therefore, it is not permissible for the mother to consent to the abortion just as it is not permissible for the doctor to go ahead with the procedure and whoever performs the abortion will become liable for the payment of indemnity.
13. It is not permissible
14. Abortion is not allowed after the implantation of the fertilized ovum in the lining of the womb, except if the mother's life is in danger or the continuation of pregnancy will cause difficulty for her that is not normally bearable and there is no other solution but abortion. In this case, it would be permissible to abort her fetus as long as life has not entered into it, after the entering of life, it is not permissible.
15. It is not permissible, more so after life has entered the fetus, of course, if continuation of the pregnancy poses a danger to the mother, it is permissible for her to abort it before the entering of life in the fetus, but not after it.

GENETIC ENGINEERING AND CLONING

1. Genetic engineering is the direct manipulation of an organism's gene
2. In research studies, animals that have been savely genetically engineered are cattle, pigs, chicken, goat, sheep, dogs, cats, fish, rats and mice's
3. No, a genetic engineering has a deliberate modification made to its genome. In genetic engineering, scientists can precisely transfer genes from one animal species to another. Cloning technology is a type of breeding technology to produce an exact genetic copy of an animal usually a high quality animal with desirable breeding traits

4. It is important that the technology is approved as safe for humans, animals and the environment. Industry recognize that any new technology can create doubt and to impact, ensure consumer acceptance, strong regulation based upon an internationally recognized approval process will lead to more efficient commercialization of genetic engineering animal, processes and products
5. No, to date FDA has not permitted genetic engineering animal to be placed in the human food supply
6. No, since approved GE animals will be as safe as any animal and no different, there will be no safety or health reason for supply chain management program
7. When evaluating the safety of food from GE plants, scientists with experience is assessing the long term safety of food from traditionally breed crops in combination with information on the food safety of the newly introduced trait.
8. Food manufacturer may indicate through voluntary labeling whether food have or not been developed through voluntary labeling whether food or have not been developed through genetic engineering.
9. Food evaluated through the consultation process have not been more likely to cause an allergic or toxic reaction than foods from traditionally breed plants.
10. Nutritional assessment for food from genetically engineered through the consultation process have shown that such foods are generally as nutritious as food from comparable traditionally bred plant.
11. WHO means World Health Organization
12. FDA means Food and Drug Administration (A)
13. B
14. A
15. A

PUNISHMENT AND SUICIDE

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|-----------------------------------|-------|----------|--------------------------------------|-------|-------|----------|
| 1. Retributionist and Utilitarian | 2. A | 3. D | 4. D | 5. B | 6. A | 7. A |
| 8. A | 9. A | 10. A | 11. Depression or emotional distress | | | |
| 12. A | 13. A | 14. A | 15. B | 16. A | 17. D | 18. True |
| 20. True | 21. A | 22. True | 23. A | 24. A | | 25. A |

RIGHTS OF PATIENTS

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|--|----------|------------------------------------|---------|
| 1. FALSE | 2. TRUE | 3. YES(explained in other answers) | 4. TRUE |
| 5. NO (reason has been explained in other answers) | | | |
| 6. TRUE | 7. FALSE | 8. YES(explained in other answers) | |

9. Clinical judgment is necessary at each stage of an illness to determine the patient's prognosis. In any event, it is often appropriate to discuss palliative care option with seriously ill patient earlier in the disease progression, when the patient is expected to live more than 6 months. In one recent study, early delivery of palliative care prolonged the lives of patient with metastatic, non-small cell lung cancer. However, more research is needed to provide a better understanding of the relationship between palliative care and life expectancy

10. → For adult patients, the medical decision maker is typically the health care agent designated in a health care proxy
 → For minor patient, the medical decision maker is typically the parent. It is usually best to get both with parent involved, if possible.

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EASY APPROACH(VOL. 2)

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- For patients with developmental disability there may be a guardian authorized to make medical decision.
11. No, it is normal for patients to express grief about a serious life-limiting illness. Nevertheless, research shows that the majority of patients in the advanced stage of life-limiting illness and their family members want a great deal of information about their prognosis and options.
 12. The law does not provide an exemption from its requirements based on cultural consideration. Information and counseling and end of life option must be offered, but if the patient declines the offer, the health care professional is not required to provide it.
The patient's decision to decline the information and counseling should be documented in the medical record.
 13. An adequate assessment of the patient and the pain should be performed and documented. Pain should be considered a fifth vital sign that is viewed as a fundamental assessment of well being which is regularly monitored. Health care should offer terminally ill patient's information about the array of options for controlling their pain and symptoms.
 14. Appropriate to the patient means the information and counseling must be consistent with applicable legal, health and professional standards, the patient's clinical and other circumstances and the patient reasonably known wishes and belief.
 15. Physician, nurses, scientist, who are serving as a terminally ill patient's attending health care practitioner.
 16. Hospital care is a type of palliative care for people who are terminally ill, if the disease runs its normal course, when medical treatments cannot offer a cure, hospice provides care e.t.c palliative care is appropriate for a much broader group of patient then hospice. However both hospice and palliative can offer a personalized plan of care, delivered by an interdisciplinary team.