



# Pediatrics Without Border, Race, and Ethnicity: With Best Patient Interest

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## 1. Medical Ethics and Morals

There should be a firm belief that access to essential healthcare should be guided by levels of need and vulnerability, rather than factors such as nationality, legal status, or circumstances of displacement. From an ethical standpoint, reallocating resources toward vulnerable and ill children is justified, even when it requires deviations from standardized, population-level treatment protocols. Consequently, health planning and decision-making authorities must be explicitly equitable, transparent, and evidence-based, with child health outcomes integrated as a primary parameter of programmatic effectiveness. As an ethical standard, the Hippocratic Oath is a cornerstone of medical ethics, guiding physicians' professional conduct. It emphasizes confidentiality, respect for patient autonomy, beneficence (doing good for patients), and non-maleficence (avoiding harm). Another critical aspect of a physician's profession is empathy with patients. Patients often consider doctors to be their confidants, sharing secrets they might not disclose to their closest relatives. This trust should be highly valued. In ancient Persia, medical doctors were referred to as "HAKIM", meaning Wise Man or Sage. All of these factors add to our responsibility to provide better care for our patients, especially vulnerable ones such as immigrants and refugees.

Regarding the care of immigrants and refugees, physicians should remain independent of political influences, respect national regulations, and avoid engaging in social trends and tensions related to their relocation. International rules generally prohibit the

use or disclosure of personal health information without a patient's consent, except when required by law, and this should be emphasized. If there are acute or chronic diseases that cannot be adequately managed in the main refugee areas, a written notification to law enforcement officials is necessary, especially in life-threatening situations. Physicians may hesitate to provide patient information to law enforcement officials unless there is a court order, or the request for information is pursuant to a warrant issued by a judge or magistrate for a specifically identified individual (5).

## 2. Conclusions

Physicians have a dual responsibility: Upholding patient confidentiality and cooperating with law enforcement when legally required. They must navigate a complex landscape, ensuring patient privacy while also complying with legal obligations and addressing potential threats to public safety. This includes verifying the legitimacy of law enforcement requests, consulting with legal counsel when necessary, and protecting patient information.

## Footnotes

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