# A Study to Assess the Effectiveness of Self-Instructional Module on Knowledge Regarding Medico Legal Aspect in Care of Cancer Patient Among Nurses Working in Selected Hospitals of The City: A Quasi Experimental Study.

Ms. Aparna Patne[1], Ms. Madhavi Bhure[2], Mrs.Bhagyashree G. Salwe[3]
[1]*Msc nursing 2nd year, Maharshi Karve Stree shikshan Sanstha, Sitabai Nargundkar college of Nursing, Hingna, Nagpur. (MKSSS SNCON, Nagpur)*
[2]*Assistant Professor, Maharshi Karve Stree shikshan Sanstha, Sitabai Nargundkar college of Nursing, Hingna, Nagpur. (MKSSS SNCON, Nagpur)*
[3]*Mrs.Bhagyashree G. Salwe Maharshi Karve Stree shikshan Sanstha, Sitabai Nargundkar college of Nursing, Hingna, Nagpur. (MKSSS SNCON, Nagpur)*

***Abstract*—Over the past two to three decades, the intersection of law, medicine, and ethics has emerged as a significant area of study within healthcare, reflecting the growing complexity of medical decision-making. This development has led to the establishment of academic and professional initiatives that integrate legal and ethical perspectives into medical practice. Scholarly work in this field emphasizes the practical application of legal principles to healthcare, particularly in relation to the rights and responsibilities of healthcare professionals and patients. The medico-legal principles that govern healthcare management, highlighting the relationship between legal responsibilities and ethical considerations. Essential principles such as autonomy, beneficence, non-maleficence, and justice serve as the foundation for ethical decision-making in medical practice. The concept of informed consent is emphasized as a crucial factor in upholding patient autonomy, while the duty of care ensures that healthcare providers prioritize patient well-being and fair treatment. Furthermore, adherence to clinical guidelines helps mitigate the risk of legal disputes related to negligence. A clear understanding of these medico-legal principles is essential for healthcare professionals to manage legal challenges effectively and promote patient safety. This study assessed the knowledge and attitude of 150 nurses regarding the handling of medico-legal records. Using structured questionnaires and a Likert scale, data were analysed with Statistical Package for Social Science, revealing that 64% of nurses had average knowledge while 36% had poor knowledge, with none demonstrating a good level. In terms of attitude, 68% showed a moderate outlook, 26% a low, and only 6% a high attitude toward medico-legal record handling. These findings indicate significant gaps in both knowledge and attitude, highlighting the need for targeted educational interventions and training programs. Strengthening nurses' understanding of medico-legal protocols and fostering a proactive attitude toward accurate, timely, and legally compliant documentation can improve patient care,enhance professional confidence, and reduce legal vulnerability within healthcare settings. OBJECTIVES OF STUDY To assess the effectiveness of self-instructional module on knowledge regarding medicolegal aspect in care of cancer patient among nurses working in selected hospitals of the city. Secondary objective to assess the pretest knowledge regarding medicolegal aspect in care of cancer patient among nurses working in selected hospitals of the city.To assess the post-test knowledge regarding medicolegal aspect in care of cancer patient among nurses working in selected hospitals of the city. To associate the post-test knowledge score with selected demographic variable. METHODOGY In this study Quantitative Research Approach is used. In the present Quasi-Experimental Study design used is (Pre-Test and Post-Test Design) – This study will assess the effectiveness of a Self-Instructional Module by comparing pre-test and post-test knowledge scores of nurses regarding medico-legal aspects in cancer patient care. A pretest was administered by means of structured**

**questionnaire depicted as "O1" and the self-instructional module depicted as 'X' post test was conducted using the same structured questionnaire depicted as "O2. The present study was conducted in selected hospitals of the city, specifically in oncology ward. In this study sample consist of 80 nurses in selected hospitals and available during the data collection. RESULT The overall mean pre-test and post-test knowledge scores of subjects which reveals that post-test mean knowledge score was higher 24.59 with SD of ±1.805 when compared with mean pre-test knowledge score which was 13.20 with SD of ±3. 309.The statistical Student's paired 't' test was applied at 5% level of significance. The tabulated value for n = 80-1 i.e. 79 Degree of freedom was 79 is that 1.990. The calculated value i.e. 32.561 was much higher than the tabulated value at 5% level of significance. For overall knowledge score of subjects which was statically acceptable level of significance.**

## I. INTRODUCTION

"Medicine, ethics, and law are three pillars of patient care—without one, the system collapses."

Over the past two to three decades, the intersection of law, medicine, and ethics has emerged as a significant area of study within healthcare, reflecting the growing complexity of medical decision-making. This development has led to the establishment of academic and professional initiatives that integrate legal and ethical perspectives into medical practice. Scholarly work in this field emphasizes the practical application of legal principles to healthcare, particularly in relation to the rights and responsibilities of healthcare professionals and patients. Key issues commonly addressed include consent to treatment, disclosure of information, confidentiality, withdrawal of medical care, and reproductive health, highlighting the need for clear legal guidance in contemporary healthcare settings. The medico-legal principles that govern healthcare management, highlighting the relationship between legal responsibilities and ethical considerations. Essential principles such as autonomy, beneficence, non-maleficence, and justice serve as the foundation for ethical decision-making in medical practice. The concept of informed consent is emphasized as a crucial factor in upholding patient autonomy, while the duty of care ensures that healthcare providers prioritize patient well-being and fair treatment. Furthermore, adherence to clinical guidelines helps mitigate the risk of legal disputes related to negligence. A clear understanding of these medico-legal principles is essential for healthcare professionals to manage legal challenges effectively and promote patient safety. In medico-legal cases, nurses play a vital role by linking clinical care with legal responsibilities. They ensure appropriate treatment of patients involved in legal matters while accurately recording observations and preserving information of legal relevance. By adhering to ethical principles, maintaining confidentiality, following legal reporting requirements, and, when required, providing factual testimony, nurses contribute significantly to the establishment of facts and the effective functioning of legal processes. Their careful documentation and professional conduct are essential in supporting both patient rights and judicial outcomes. Nursing is a fundamental component of healthcare, combining science and compassion to ensure quality patient care. Over time, the profession has developed its own ethical standards and legal frameworks to guide practice. Nursing has evolved from traditional caregiving to a regulated profession governed by the Nursing and Midwifery Act, which outlines professional responsibilities and ethical obligations. However, challenges such as negligence, malpractice, and ethical violations remain prevalent, often going unreported due to lack of awareness and reluctance to pursue legal action. The absence of significant jurisprudence on nursing malpractice highlights the need for greater public sensitization on patient rights and legal accountability. This study provides an overview of medicolegal and ethical issues in nursing practice, emphasizing the importance of educating both nurses and the public. about legal standards, professional ethics, and patient care expectations. By promoting compliance with established guidelines, the study aims to enhance healthcare delivery, patient safety, and legal accountability in nursing practice. Medical malpractice is a persistent concern across healthcare settings in country, with evidence indicating a 110% increase in reported malpractice incidents over time and an approximately 400% rise in medical litigation, reflecting growing awareness of patient rights and legal recourse. Despite this escalation, adherence to ethical standards remains limited, as studies show that only about 46% of healthcare providers comply with established ethical guidelines, highlighting the urgent need for stronger ethical practices, improved risk

management, and greater professional accountability in the healthcare system. Medical graduates are expected to possess adequate knowledge of medico-legal responsibilities in addition to clinical skills, yet gaps in this area can affect safe practice. This study assessed awareness of medico-legal aspects of clinical practice and common medico-legal issues among medical graduates using a 17-item structured questionnaire administered after informed consent. A total of 120 participants responded using agree/disagree options and short answers. Data were analysed using Microsoft Excel and Statistical Package for Social Science and presented as frequencies and percentages. The findings revealed a clear gap between theoretical learning and practical understanding of medico-legal issues, highlighting the need for regular and structured training to strengthen medico-legal competence, enhance healthcare quality, and support effective legal accountability.

## II. OBJECTIVES OF STUDY:

Primary Objective:

To assess the effectiveness of self-instructional module on knowledge regarding medicolegal aspect in care of cancer patient among nurses working in selected hospitals of the city.

Secondary Objective:

1. To assess the pretest knowledge regarding medicolegal aspect in care of cancer patient among nurses working in selected hospitals of the city.
2. To assess the post-test knowledge regarding medicolegal aspect in care of cancer patient among nurses working in selected hospitals of the city.
3. To associate the post-test knowledge score with selected demographic variable.

## III. MATERIALS AND METHOD

Research methodology is a structured and scientific approach used to collect, analyze, and interpret quantitative or qualitative data to answer research questions or test hypotheses. In this study Quantitative Research Approach is used. In the present Quasi-Experimental Study design used is (Pre-Test and Post-Test Design) – This study will assess the effectiveness of a Self-Instructional Module by comparing pre-test and post-test knowledge scores of nurses regarding medico-legal aspects in cancer patient care. A pretest was administered by means of structured questionnaire depicted as "O1" and the self-instructional module depicted as 'X' post test was conducted using the same structured questionnaire depicted as "O2'. The independent variable in this study is Self-Instructional Module (SIM) Dependent variable in this study is Knowledge score regarding medicolegal aspect in cancer care among nurses. demographic variables are age, gender, religion, nursing qualification and years of experience. 80 nurses in selected hospitals and available during the data collection. Reliability of the tool was determined by administering tool to 10 samples. Kuder and Richardson Formula 20 was used for questionnaire. The tool was said to be reliable if the correlation coefficient was more than 0.8. The correlation coefficient 'r'of the tool was 0.8161 Which was more than 0.8 and hence the tool was found to be reliable.

## IV. RESULT

Section A

Distribution of subjects in relation to their demographic variables.

| Demographic Variables | Frequency (f) | Percentage (%) |
|---|---|---|
| Age in Years | | |
| Below 25 | 28 | 35 |
| 26 – 30 Years | 28 | 35 |
| 31 – 35 Years | 12 | 15 |
| 36 – 40 Years | 06 | 7.5 |
| Above 40 Years | 06 | 7.5 |
| Gender | | |
| Male | 10 | 12.5 |
| Female | 70 | 87.5 |
| Others | 00 | 00 |
| Religion | | |
| Hindu | 51 | 63.7 |
| Muslim | 01 | 1.3 |
| Christian | 00 | 00 |
| Buddhist | 28 | 35 |
| Others | 00 | 00 |
| Nursing Qualification | | |
| GNM | 64 | 80 |
| B. Sc. Nursing / PBBSc | 16 | 20 |
| M.Sc. Nursing | 00 | 00 |
| PhD | 00 | 00 |
| Years of Experience | | |

| | | |
|---|---|---|
| Less than 1 Year | 08 | 10 |
| 1 – 5 Years | 49 | 61.3 |
| 6 – 10 Years | 10 | 12.5 |
| More than 10 Years | 13 | 16.2 |

Section B

Assessment Of Pre-Test and Post-Test Knowledge Regarding Medicolegal Aspect in Care of Cancer Patient Among Nurses Working in Selected Hospitals of the City.

| Level of knowledge score | Score Range | Percentage score | Pre-test Knowledge Score | | Post-test KnowledgeScore | |
|---|---|---|---|---|---|---|
| | | | Frequency (f) | Percentage (%) | Frequency (f) | Percentage (%) |
| Poor | 0-6 | 0-20% | 00 | 00 | 00 | 00 |
| Average | 7-12 | 21-40% | 38 | 47.5 | 00 | 00 |
| Good | 13-18 | 41-60% | 39 | 48.7 | 00 | 00 |
| VeryGood | 19-24 | 61-80% | 03 | 3.8 | 38 | 47.5 |
| Excellent | 25-30 | 81-100% | 00 | 00 | 42 | 52.5 |
| Mean ±SD knowledge score | | | 13.20 ± 3.309 | | 24.59 ± 1.805 | |
| Mean % knowledge score | | | 44% | | 84.96% | |
| Minimum score | | | 07 | | 20 | |
| Maximum score | | | 19 | | 28 | |

Section C

Analysis Of Effectiveness of Self-Instructional Module on Knowledge Regarding Medicolegal Aspect in Care of Cancer Patient Among Nurses Working in Selected Hospitals of The City.

| Overall | Mean | SD | Mean Difference | t-value | p-value |
|---|---|---|---|---|---|
| Pre-Test | 13.20 | 3.309 | 11.39 ± 3.128 | 32.561 | 0.0001 S. P<0.05 |
| Post-Test | 24.59 | 1.805 | | | |
| P<0.05 level | | | | *significant | |

Section D

Association Of Post-Test Knowledge Score Regarding Medicolegal Aspect in Care of Cancer Patient Among Nurses Working in Selected Hospitals of the City with Selected Demographic Variables.

Association of knowledge score in relation to their age in years. n=80

| Age in Years | No. of subjects | Poor | Average | Good | Very Good | Excellent | $\chi^2$-value p-value |
|---|---|---|---|---|---|---|---|
| Below 25 | 28 | 0 | 0 | 0 | 12 | 16 | 1.184 df=4 0.881 NS, P>0.05 |
| 26 – 30 Years | 28 | 0 | 0 | 0 | 13 | 15 | |
| 31 – 35 Years | 12 | 0 | 0 | 0 | 6 | 6 | |
| 36 – 40 Years | 06 | 0 | 0 | 0 | 4 | 2 | |
| Above 40 Years | 06 | 0 | 0 | 0 | 3 | 3 | |
| S- Significant | | | NS- Non-Significant | | | df-degree of freedom | |

Association of knowledge score in relation to their gender. N=80

| Gender | No. of subjects | Poor | Average | Good | Very Good | Excellent | $\chi^2$-value p-value |
|---|---|---|---|---|---|---|---|
| Male | 10 | 0 | 0 | 0 | 6 | 4 | 0.716 df=1 0.397 NS, P>0.05 |
| Female | 70 | 0 | 0 | 0 | 32 | 38 | |
| Others | 00 | 0 | 0 | 0 | 0 | 0 | |
| S- Significant | | | NS- Non-Significant | | | df-degree of freedom | |

Association of knowledge score in relation to their religion.
n=80

| Religion | No. of subjects | Poor | Average | Good | Very Good | Excellent | ℵ2-value p-value |
|---|---|---|---|---|---|---|---|
| Hindu | 51 | 0 | 0 | 0 | 26 | 25 | 2.111 df=2 0.348 NS, P>0.05 |
| Muslim | 01 | 0 | 0 | 0 | 1 | 0 | |
| Christian | 00 | 0 | 0 | 0 | 0 | 0 | |
| Buddhist | 28 | 0 | 0 | 0 | 11 | 17 | |
| Others | 00 | 0 | 0 | 0 | 0 | 0 | |
| S- Significant | | | NS- Non-Significant | | | df-degree of freedom | |

Association of knowledge score in relation to their nursing qualification

| Nursing Qualification | No. of subjects | Poor | Average | Good | Very Good | Excellent | ℵ2-value p-value |
|---|---|---|---|---|---|---|---|
| GNM | 64 | 0 | 0 | 0 | 29 | 35 | 0.614 df=1 0.433 NS, P>0.05 |
| B. Sc. Nursing / PBBSc | | | | | | | |
| | | 0 | 0 | 0 | 9 | 7 | |
| | 16 | | | | | | |
| M.Sc.Nursing | 00 | 0 | 0 | 0 | 0 | 0 | |
| PhD | 00 | 0 | 0 | 0 | 0 | 0 | |
| S- Significant | | | NS- non-significant | | | df-degree of freedom | |

Association of knowledge score in relation to their years of experience.

| Years of Experience | No. of subjects | Poor | Average | Good | Very Good | Excellent | ℵ2-value p- value |
|---|---|---|---|---|---|---|---|
| Less than 1 Year | 08 | 0 | 0 | 0 | 4 | 4 | 3.131 df=3 0.372 NS, P>0.05 |
| 1 – 5 Years | 49 | 0 | 0 | 0 | 21 | 28 | |
| 6 – 10 Years | 10 | 0 | 0 | 0 | 4 | 6 | |
| More than 10 Years | 13 | 0 | 0 | 0 | 9 | 4 | |
| S- Significant | | | NS- Non-Significant | | | df-degree of freedom | |

## V. CONCLUSION

In Pre-Test, Majority 48.7% of subjects had good level of knowledge score, 47.5% had average level of knowledge score, 3.8% had very good level of knowledge score and 0% had poor and excellent level of knowledge score. Mean knowledge score in pre-test of the subjects was 13.20 $\pm$ 3.309. Minimum knowledge score in pre-test was 07 and Maximum Knowledge score in pre-test was 19. While in Post-Test, Majority 52.5% had excellent level of knowledge score, 47.5% of subjects had very good level of knowledge score and 0% had poor, average and good level of knowledge score. Mean knowledge score in post-test of the subjects was 24.59 $\pm$ 1.805. Minimum knowledge score in post-test was 20 and Maximum Knowledge score in post-test was 28. The overall mean pre-test and post-test knowledge scores of subjects which reveals that post-test mean knowledge score was higher 24.59 with SD of ±1.805 when compared with mean pre-test knowledge score which was 13.20 with SD of ±3.309. The statistical Student's paired 't' test was applied at 5% level of significance. The tabulated value for n = 80-1 i.e. 79 Degree of freedom was 79 is that 1.990. The calculated value i.e. 32.561 was much higher than the tabulated value at 5% level of significance. For overall knowledge score of subjects which was statically acceptable level of significance. Hence, it was statistically interpreted that self-instructional module on knowledge regarding medicolegal aspect in care of cancer patient among nurses working in selected hospitals of the city was effective.

## ACKNOWLEDGEMENT

At the very outset, I would like to express my heartfelt gratitude and sincere thanks to Dr. Rupa Verma, Principal of MKSSS, Nagpur, and constant encouragement throughout this research work. I would also like to extend my heartfelt gratitude to Ms. Smita Moon, Associate Professor and Head of the Department of Medical Surgical Nursing, for her unwavering support, insightful suggestions, and continuous motivation throughout this journey. I

would like to express my profound sense of gratitude and heartfelt thanks to my research guide Ms. Madhavi Bhure Assistant Professor (Medical Surgical Nursing) MKSSS, SNCON. I would like to take this opportunity to express my sincere gratitude to Ms. Bhagyashree Gaikwad, Assistant Professor (Medical Surgical Nursing). I would also like to express my appreciation to Mrs. Rama Danapure Associate Professor and Head of the Department of Community Health Nursing, Ms. Priyanka Kosare, Associate Professor and Head of the Department of OBGY. I express my sincere gratitude to Ms. Juhi Parate, from the Department of Biostatistics, I am deeply indebted to my beloved family, whose unwavering moral support and encouragement have been the cornerstone of my success. I would especially like to thank my husband, Mr. Mangesh Ghode, and my son, Anvesh Ghode, and my daughter Ms. Manasvi Ghode for their patience, love, and unwavering support throughout this demanding process. My heartfelt thanks also go to my parents, Mr. Ashok Patne and Mrs. Seema Patne, for their love, prayers, and steadfast belief in me. Last but not least, I am sincerely thankful for the companionship and encouragement of my dear friends—Mrs. Shalini Borekar, Mrs. Sonali Girhepunje, who stood by me during every phase of this academic journey. My warmest thanks also go to my groupmates, course mates, and all others who, directly or indirectly, supported me in the successful completion of this dissertation.

## REFERENCE

[1] L. Skene, *Law and Medical Practice: Rights, Duties, Claims and Defences*, 2nd ed. Sydney, Australia: Butterworths, 2004.

[2] T. Alam, "What does the term medicolegal mean?" *Neurophysiology*, Feb. 3, 2018, updated May 15, 2024. [Online]. Available: https://www.topdoctors.co.uk/medical-dictionary/medicolegal

[3] S. Che Shaari, *Medico-Legal Principles in Healthcare Management*, Dec. 20, 2024. [Online]. Available: http://oer.ums.edu.my/handle/oer_source_files/2987

[4] World Health Organization, "Human rights and health," Dec. 1, 2023. [Online]. Available: https://www.who.int/news-room/fact-sheets/detail/human-rights-and-health. [Accessed: Mar. 2, 2024].

[5] Baig and A. Hasan, "Understanding HIPAA and GDPR: Key differences and compliance requirements," *Securiti*. [Online]. Available: https://securiti.ai/gdpr-vs-hipaa/. [Accessed: Jan. 20, 2026].

[6] P. L. Karas, N. M. Rankin, and E. Stone, "Medicolegal considerations in multidisciplinary cancer care," *JTO Clinical and Research Reports*, vol. 1, no. 4, Art. no. 100073, Jul. 2020, doi: 10.1016/j.jtocrr.2020.100073. [Online]. Available: https://pmc.ncbi.nlm.nih.gov/articles/PMC7333617/

[7] Haliczer Pettis & Schwamm PA, "The 4 'Cs of medical malpractice—Compassion, communication, competence and charting," Jun. 14, 2024. [Online]. Available: https://www.hpslegal.com/news/the-4-cs-of-medical-malpractice-compassion-communication-competence-and-charting/. [Accessed: Jan. 20, 2026].

[8] "Describe the role of nurse in medico legal case," *AskFilo.com*, Feb. 22, 2025. [Online]. Available: https://askfilo.com/user-question-answers-smart-solutions/describe-the-role-of-nurse-in-medico-legal-case-3235383035393234. [Accessed: Jan. 20, 2026].

[9] Mahani and R. Zadu, "Medicolegal issues in multidisciplinary cancer care: Navigating challenges and recommendations for shared decision-making," *Indian Journal of Forensic and Community Medicine*, vol. 11, no. 3, pp. 87–95, Oct. 2024, doi: 10.18231/j.ijfcm.2024.022. [Online]. Available: https://www.researchgate.net/publication/385269864_IndianJForensicCommunityMed-11-3-87-95

[10] F. O. Agbo and B. K. Devu, "An overview of the medicolegal and ethical issues in nursing practice: The Nigerian experience," *AEFULJ*, vol. 1, pp. 46–56, 2024. [Online]. Available: https://www.nigerianjournalsonline.com/index.php/AEFULJ/article/viewFile/5386/5228