

# Maximising Care: Exploring the Synergy of Islamic Legal Maxims in Nursing Practice

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## ABSTRACT

**Background:** In the face of numerous challenges in nursing practice, effective decision-making tools are paramount. This research delves into the dynamic intersection of Islamic legal maxims and nursing, recognising nurses' multifaceted challenges daily. Purpose: The study explores using Qawaid al-Fiqhiyyah principles as a decision-making tool in nursing. It aims to provide nurses with a valuable framework that aligns with their professional values.

**Methods:** This study was conducted between June and October 2023 at the International Islamic University Malaysia library. It employs a document analysis design by utilising library search to analyse the interaction between Islamic legal maxims and nursing systematically. The research involves an extensive literature review of journal articles, fiqh books, and nursing texts to explore the benefits and challenges of integrating Islamic legal maxims into nursing practice. Thematic analysis was used to identify key principles and their practical applications within nursing settings.

**Results:** According to the study, integrating Islamic legal maxims into nursing practice can enhance patient autonomy, uphold justice, and improve beneficence. While the principle of 'harm must be eliminated' (al-darar yuzāl) is crucial, other maxims such as 'necessities render prohibitions permissible' (al-darūrāt tubīḥ al-maḥzūrāt), 'hardship begets facility' (al-mashaqqah tajlib al-taysīr), and 'certainty is not overruled by doubt' (al-yaqīn lā yazūl bi al-shakk) also provide valuable ethical guidance for nursing professionals. These maxims support culturally sensitive and ethically driven nursing care, ensuring that decision-making aligns with Islamic ethical principles and patient needs. The study's findings highlight the significance of applying these legal maxims holistically in nursing practice, reinforcing their role in shaping patient-centred, morally grounded, and Shariah-compliant healthcare.

**Conclusion:** The research has important implications for healthcare ethics and opens a new horizon by highlighting the importance of Islamic legal maxims in nursing practice. Nurses can advocate for compassion and integrity by adopting this innovative approach.

**Keywords:** Islamic legal maxims; Nursing ethics; Harm prevention; Culturally sensitive care; Islamic healthcare practices

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## INTRODUCTION

Healthcare is crucial for human life, and healthcare professionals must uphold ethical and moral principles when providing care. Islamic ethical values hold great importance in healthcare practices, including nursing, in the Muslim world (1). Islamic legal maxims, also known as Al-Qawa'id Al-Fiqhiyyah, are fundamental principles derived from Islamic legal tradition that can be applied to daily life, including healthcare practices (2,3). Islamic legal principles are being integrated into nursing practices to improve healthcare's ethical and moral aspects.

The ethical and moral principles of nursing care are applicable worldwide. Nevertheless, these principles may vary in their interpretation and implementation depending on different cultural and religious contexts (2). Islamic legal maxims help guide nursing practices and promote Islamic ethical values. They offer guidance for patient care, decision-making, and effective communication with patients and their families. By utilising these maxims, Muslim patients can receive improved quality of care.

The Quranic scripture highlights the significance of offering compassionate and ethical treatment to people. In Surah Al-Isra, verse 70, Allah (SWT) clearly states this:

*"And We have certainly honoured the children of Adam and carried them on land and sea and provided for them of the good things and preferred them over much of what We have created, with [definite] preference."*

The Islamic legal maxims or 'qawaid al fiqhiyyah' are fundamental principles in Islamic jurisprudence used to deduce legal rulings across various areas of Islamic law. The principles are based on the Quran, the teachings of Prophet Muhammad (Sunnah), the consensus of scholars, and analogical reasoning. Islamic legal maxims help to ensure the continuity, coherence, and flexibility of Islamic legal reasoning by providing general rules that can be applied to specific cases. It assists in deriving new rulings and solutions for contemporary issues while staying true to the foundational sources of Islamic law (3).

Incorporating Islamic legal maxims into nursing practices can assist in guaranteeing

that nursing care is consistent with Islamic ethical principles, such as justice, beneficence, non-maleficence, and autonomy (4). In the field of nursing, it is essential to prioritise values such as respect, compassion, and cultural sensitivity to ensure that patients receive the best possible care. Nursing professionals can achieve this by studying and implementing Islamic legal maxims, enabling them to provide a framework for ethical decision-making.

This research article focuses on exploring the use of Islamic legal maxims in nursing practices. The study comprehensively examines the relevance of Islamic legal maxims to the healthcare landscape and emphasises the need for their integration into nursing practice. It aims to guide how Islamic ethical values can be incorporated into nursing care and how nursing practice can integrate these legal maxims. The study reviews literature from nursing professionals and Muslim scholars on how to develop nursing practices that align with Islamic ethical values and principles in Muslim healthcare practices.

## METHODS

The study was conducted between June and October 2023 in the library of the International Islamic University of Malaysia using library research. The methodology involves a comprehensive literature review using secondary sources such as journal articles and fiqh books written by Muslim scholars. The inclusion criteria required literature authored by prominent scholars in both Malay and English. Journal articles were accessed through electronic databases, including Scopus, PubMed, Google Scholar, and the IIUM library's digital repository. A keyword-based search strategy was employed to identify relevant sources, using terms such as 'Islamic legal maxims in healthcare,' 'Islamic ethics in nursing,' 'Qawaid al-Fiqhiyyah in medical practice,' and 'Islamic jurisprudence in nursing ethics.' Boolean operators (AND, OR) were used to refine the search and ensure relevant results. Hardcopy sources, including classical fiqh books, were obtained from the IIUM library's physical collection. The selected materials were then reviewed and analysed thematically to extract key insights on the integration of Islamic legal maxims into nursing practice.

The study followed a four-step approach. First, the researcher conducted a literature review, selecting sources based on predefined inclusion and exclusion criteria. Relevant journal articles, books, and online resources were identified through keyword-based searches in databases such as Scopus, PubMed, and Google Scholar.

In the second step, the identified Islamic legal maxims were analysed in relation to their definitions, interpretations, and applications within nursing, guided by fiqh principles and ethical frameworks.

The third step involved reviewing nursing literature, including textbooks, peer-reviewed journals, and professional guidelines, to determine how Islamic legal maxims align with contemporary nursing practices.

Finally, the research findings were synthesised using thematic analysis to identify key insights on the incorporation of Islamic legal maxims in nursing ethics. The thematic coding process involved identifying patterns related to ethical decision-making, patient care, and professional conduct. This approach ensured a systematic and rigorous understanding of the topic.

## ETHICAL APPROVAL

This study was approved by the Medical Research and Ethics Committee, Ministry of Health Malaysia on 16/5/2023; NMRR ID-23-00135-QU9.

## RESULTS

This study retrieved a total of 32 journal articles, 10 books, and 15 online resources related to Islamic legal maxims and their application in nursing. These sources were obtained through structured keyword searches in databases such as Scopus, PubMed, Google Scholar, and the IIUM library repository, as well as physical collections of fiqh books.

The analysis identified that the principle of eliminating harm (*al-ḍarar yuzāl*) is the most relevant Islamic legal maxim guiding nursing practices in preventing harm. This maxim underscores the ethical obligation of nurses to eliminate harm in all its forms, including injustice, negligence, and unsafe medical practices. The reviewed literature supports that prioritising harm prevention enhances patient

safety, autonomy, and ethical decision-making in nursing.

By integrating this principle into nursing practice, healthcare professionals can ensure culturally sensitive, ethically sound, and patient-centred care. The findings also indicate that the concept of harm elimination aligns with international nursing ethical frameworks, such as the ICN Code of Ethics, further reinforcing its relevance.

## DISCUSSION

### The Concept of Islamic Legal Maxim

Islamic legal maxims or *al-qawā'id al-fiqhiyyah* are general rules of fiqh, which can be applied in various cases under common rulings. A maxim is "a general rule that applies to all of its related particulars." Islamic legal maxims are crucial in formulating Islamic law as they serve as principles for deducing fiqh rules (3). Numerous situations can be resolved by referring to these maxims, such as determining the legality of certain deeds. Islamic legal maxims are theoretical abstractions that typically take the form of short epithetic statements that express the goals and objectives of Shari'ah in a few words (5). Most of these are generalisations drawn from in-depth analyses of relevant fiqh rulings on specific topics (6). There are five leading maxims, such as "matters are determined according to intentions" (*al-umūr bi-maqāṣidihā*), "certainty is not overruled by doubt" (*al-yaqīn lā yazūl bi-al-shakk*), "hardship begets facility" (*al-mashaqqah tajlib al-taysīr*), "harm must be eliminated" (*al-ḍarar yuzāl*) and "custom is a basis for judgment" (*al-'ādah muḥakkamah*).

### The Five Leading Maxims

The principle of '*al-umūr bi-maqāṣidihā*' states that intentions are a determining factor. The word '*al-maqāṣid*' is derived from '*al-maqṣad*,' its singular form. *Al-maqṣad* means intention, destination, purpose, goal, and aim (7). Other maxims that emphasise the importance of intention, goal, and aim are '*al-a'māl bi-al-niyyāt*' (actions are based on their intentions) and '*lā thawāb illā bi-niyyah*' (there is no reward without an intention) (4). Mohamad Akram defines intention as the will directed towards an action or the directing of the will towards any human action (8). Intentions are the primary criterion for distinguishing

between moral and immoral actions. In nursing, intention plays a crucial role in shaping ethical and professional behaviour. A nurse who serves patients with sincerity and compassion, driven by the intention to help others and seek the pleasure of God, will naturally demonstrate higher moral standards, empathy, and integrity in their care. For example, a Muslim nurse who consciously intends to care for patients not only as a professional duty but also as an act of worship (ibadah) is more likely to remain patient, kind, and dedicated even in challenging situations. A nurse may provide comfort and emotional support to a critically ill patient, not merely as a routine task but as a means of fulfilling the Islamic value of rahmah (mercy). Similarly, when faced with ethical dilemmas, a nurse with a strong niyyah (intention) to uphold justice and ethical integrity will prioritise patient well-being and adhere to Islamic ethical principles, even under pressure. This maxim highlights that beyond technical competence, the inner motivation behind nursing actions influences the quality of care, patient trust, and personal spiritual fulfilment. Thus, integrating the principle of 'al-umūr bi-maqāsidihā' into nursing practice ensures that healthcare is not only effective and ethical but also spiritually rewarding.

'Certainty is not overruled by doubt' – this is the principle of al-yaqīn lā yazūl bi al-shakk. Shakk denotes doubt or suspicion (7). Per this maxim, preexisting certainty cannot be invalidated by doubt alone. The sole means of supplanting certainty is through the demonstration of a more specific alternative (3). Prophet Muhammad (s.a.w) said,

*"If one of you feels something in his stomach and is not sure whether something came out of him or not, let him not leave the Masjid (continue his prayer) unless he hears a sound or notices a smell."*

*(Reported by Muslim, hadith no. 805)*

Prophet Muhammad advised to avoid doubtful matters without clear evidence and stand firm in one's original stance. In nursing, this principle is essential in clinical decision-making, particularly in patient assessments and medication administration. For example, if a nurse is certain that a patient has already received their prescribed medication but later experiences doubt due to memory lapse or an unclear record, the nurse should not administer

another dose unless there is clear evidence confirming a missed dose. Administering additional medication based on mere doubt could lead to medication errors, overdose, or adverse reactions. Similarly, during wound care, if a nurse is certain that sterile procedures have been followed but later doubts whether the dressing remained uncontaminated, they should not discard and redo the procedure unless there is clear evidence of contamination. This approach ensures that decisions in nursing are made based on verified information rather than uncertainty, reducing unnecessary risks and maintaining patient safety. Thus, applying the principle of al-yaqīn lā yazūl bi al-shakk in nursing practice promotes evidence-based decision-making, patient safety, and adherence to professional standards, ensuring that actions are guided by certainty rather than unwarranted suspicion.

'Hardship begets facility' is a common saying (al-mashaqqah tajlib al-taysīr). The maxim emphasises the importance of finding solutions to problems. Hardship presents challenges that must be overcome in order to achieve excellence. Illness, for example, is a common hardship that people face, but it is crucial to remember that solutions do exist. Various Qur'ānic verses highlight the maxim that hardship comes with ease. In chapter 2 of the Qur'ān, verse 185, God says:

*"God intends every facility for you; He does not want to put you to difficulties."*

God also says in chapter 4 of the Qur'ān, verse 28,

*"God does wish to lighten your (difficulties)."*

In nursing practice, this principle is particularly relevant in patient care and treatment adaptation. For example, when caring for critically ill or elderly patients who find it difficult to perform their daily prayers (ṣalāh), Islamic teachings provide flexibility in their practice. A bedridden patient may perform prayers while sitting or lying down, ensuring that their spiritual needs are met without causing additional physical hardship. Similarly, in medical procedures such as fasting during Ramadan, Islam allows exemptions for patients whose health would be compromised by fasting. Nurses play a vital role in educating patients about these exemptions, reassuring them that their religious obligations remain

intact despite their health conditions. Moreover, this maxim applies to nursing professionals themselves. The demands of shift work, long hours, and emotional stress can be overwhelming, but Islam encourages perseverance while also providing allowances for ease. For instance, a nurse experiencing extreme fatigue during a long shift may be allowed to combine prayers (jamak) as permitted in Islam, ensuring that religious duties do not become a source of undue burden. Thus, applying al-mashaqqah tajlib al-taysir in both patient care and nursing practice ensures that hardship is met with reasonable accommodations, promoting compassionate, flexible, and patient-centred care in accordance with Islamic ethical principles.

Custom holds a significant role in making judgments, as stated by the Islamic legal maxim 'al-ʿadah muḥakkamah' (custom is a basis of judgment). Al-ʿadah refers to habit and custom, specifically in the context of Usul al-fiqh. The term uruf is commonly used to refer to custom. The Hanafi and Maliki schools of thought rely more heavily on uruf in their methodology for deriving hukm than the Shafi'i and Hanbali schools (10). According to Shari'ah, strict conditions must be met for uruf to be considered valid. It is imperative that the custom is maintained with unwavering consistency within society, while also ensuring that it does not transgress the boundaries of Shari'ah (9). In nursing practice, this principle is particularly relevant in culturally sensitive healthcare. For instance, in many Muslim communities, it is customary for female patients to prefer treatment from female healthcare providers whenever possible. This preference aligns with Islamic values regarding modesty and gender interaction. Hospitals and clinics in Muslim-majority regions often respect this custom by ensuring that female nurses or doctors are available to attend to female patients, provided it does not compromise medical care.

Another example is the practice of removing footwear before entering a patient's room in some cultures. In certain Muslim communities, this is seen as a sign of respect and cleanliness. A nurse who is aware of this cultural expectation may accommodate such preferences where feasible, ensuring that the patient feels comfortable and respected. By applying al-ʿadah muḥakkamah in nursing, healthcare professionals can provide care that

respects cultural customs while maintaining ethical and professional standards. Recognising and adapting to valid customs ensures a more patient-centred approach and fosters trust between healthcare providers and patients.

The maxim 'harm must be eliminated' or 'al-ḍarar yuzāl' must be strictly adhered to in order to ensure the complete removal of harm and the elimination of any potential threats to one's faith, life, lineage, intellect, or property. Failure to do so could result in catastrophic consequences. It is imperative that this principle is taken seriously and acted upon with the utmost urgency and diligence. Abdul Karim Zaidan demands that individuals abstain from causing harm and eradicate it whenever feasible (9). Safety and well-being come first in Islam, even when dealing with mixed outcomes.

### The Importance of Harm Prevention and its Use in Nursing Practices

The Islamic legal maxim 'harm must be eliminated' (al-ḍarar yuzāl) mandates the eradication of harm in nursing practice in order to prioritise the preservation and promotion of well-being. The priority of this Islamic legal maxim is to prevent and eliminate harm, which aligns perfectly with healthcare ethics. The focal point of nursing lies in the promotion of patient welfare and the prevention of harm. The maxim 'harm must be eliminated' reinforces the principle of minimising harm, highlighting the crucial need for proactive measures in delivering care. It is an absolute obligation for healthcare professionals to prioritise patient safety, well-being, and prevention of any harm (11).

Surah Al-Ma'idah, verse 32, unequivocally underscores the significance of safeguarding life and avoiding harm. It emphatically states that:

*"Whoever kills a soul unless for a soul or corruption [done] in the land – it is as if he had slain mankind entirely. And whoever saves one – it is as if he had saved mankind entirely".*

This verse highlights the sacrosanctity of human life and the obligation to protect it, a cornerstone principle in Islamic ethics.

## Discussion on the Sub-Legal Maxims Related to 'Harm Must Be Eliminated' (al-ḍarar yuzāl)

*Repelling harm takes precedence over bringing benefits (dar' al mafasid muqaddam ala jalb al masolih).*

One of the key principles in Islamic legal maxims is the principle that 'repelling harm takes precedence over bringing benefits' (al-darar yuzal wa'l-mashru' yuqaddam). Preventing harm and reducing risks is more important than providing benefits, especially in healthcare where patient safety and illness prevention take priority over medical interventions. In other words, this principle emphasizes avoiding harm, even if it means sacrificing potential benefits. This principle can be used in nursing to guarantee that individuals are safe while receiving care. When deciding whether or not to prescribe a medication with potential side effects because of a patient's condition, nurses must weigh the benefits against the risks. Chemotherapy-induced nausea and vomiting (CINV) remains a major side effect despite the availability of new antiemetic medications. Its delayed symptoms are more common than its acute manifestations and cannot be ignored. By improving the precision of patient assessments before and during chemotherapy, oncology nurses can significantly lessen the impact of CINV (12).

*Harm may neither be inflicted nor reciprocated (la darar wa la dirar)*

Doing harm is never acceptable under any circumstances. It outlaws any intentional harm one person does to another (13). While there is some benefit to inflicting harm on others, doing so is morally repugnant. We recognise that others may cause us harm or discomfort, but the other main point of this maxim is that we are not to retaliate against them. Muslims are commanded by their faith to avoid acting maliciously. Islam teaches that even if wrong, you should not hurt someone back out of spite (14). Similarly, inexperienced nursing students should always be supervised by experienced senior nurses during medical procedures to prevent patient harm. Attempting dangerous procedures without proper guidance can lead to severe injuries like rib fractures, hypoxia, and urethral trauma.

*Necessities render prohibited things permissible (al-darūrāt tubīḥu al-maḥzūrāt)*

All healthcare procedures are permissible unless Islam principles clearly state to avoid it (15). This guideline is based on one of the Islamic legal maxims stated by Imam al-Suyuthi, who said: "The basics in the middle of nowhere" or the origin of something is a must (16). When God forbids something, it is not just bad behaviour that is outlawed; God also warns his followers to stay away from evil. However, there are times when preserving one's faith, health, intelligence, lineage, or wealth makes it necessary to engage in harm conduct. According to Islamic thought, it can be considered acceptable if something is essential. Among Muslim patients, the use of highly purified insulin is fraught with controversy due to concerns about the presence of impure substances (mughallazah). Nurses will always worry about giving patients unclean items. Skipping insulin injections can harm some patients. This could simplify nurses' moral decisions. In emergencies, doctors may provide patients with insulin. Moreover, exposing ʿawrah like both arms (female nurses) in front of patients is another situation that causes guilt and uncertainty for nurses. Nurses must roll up their sleeves when performing procedures requiring aseptic techniques or washing hands according to standard protocols. Therefore, it is ethically sound for them to roll up their long sleeve to protect the patient from potential infection.

*Necessity is determined by the extent thereof (al-darūrāt tuqaddar bi qadrihā)*

Some previously forbidden actions may now be tolerated under the strictures of necessity, but only to a limited extent. The permission is only in place while the need exists, and it expires once the need is no longer pressing. Even though highly purified insulin contains impure substances, this medication is permitted as long as patients genuinely need it and there are no suitable substitutes. Nurses are responsible for discussing the switch to a drug that complies with Shari'ah law with their superior physicians once alternatives, such as synthetic insulin (free from pork), become available. In this situation, highly purified insulin is unnecessary. When washing one's hands (surgical handwash), for instance, it is acceptable to expose some ʿawrah even if the sleeve is rolled up. Because of the nature of the

procedure, the nurse's ʿawrah will be exposed, but care must be taken to limit that exposure as much as possible. A little praise for the nurses' hard work is always appreciated.

*Harm cannot be removed by similar harm (al-ḍarar lā yuzālu bi mithlihi)*

When it comes to saving lives, nurses know that any potential sources of harm must be eliminated. But you cannot undo that wrong by doing something even worse, even if it has the same or a similar effect. The only safe method for nurses to remove it, is to cause minimal discomfort. Patients receive individual medication regimens on the wards. They have to take the drugs at precise times and in exact quantities. Nurses do not act immorally by giving a patient another medication when only that patient's medication remains. The latter patient may also require the drugs in question, and the shortage could significantly slow his recovery or even prove fatal.

*A specific harm is tolerated to ward off a general harm (yutahammal al-ḍarar al-khāṣ li-dafʿi al-ḍarar al-ʿāmm)*

When there is a choice between minimising individual harm and minimising potential widespread harm, the latter should be prioritised. To protect the rights of the majority, it is acceptable to restrict the rights of the minority, and when doing so temporarily, it will prevent an unacceptable risk to a larger group of people. Patients with infectious diseases often have their right to privacy and independence severely compromised. They are sometimes coerced into isolation, medical treatment, or vaccination (17, 18). COVID-19 cases have skyrocketed in recent years, causing widespread alarm in several countries. Acute respiratory distress syndrome and death are the most severe consequences of contracting COVID-19 (19,20). Even though the virus spreads quickly, isolating the patient is the best way to stop it. Stressed, lonely patients may recover slower. Isolation can be harmful to mental health, but the wider community benefits from it. This is in accordance with Allah's Messenger's PBUH instruction to his ummah that they should not travel to the affected area. Complete protection against contracting the pandemic would be facilitated by not entering the affected area. The attitude of entering the affected area is one of facing the

pandemic, which is against both reason and Shariʿah (21,22).

*A greater harm is removed by lesser harm (al-ḍarar al-ashadd yuzālu bi al-ḍarar al-akhaf)*

Fiqh al-muwāzanah is a crucial branch of Islamic jurisprudence, especially when dealing with conflicts of interest. The fiqh balance, or fiqh al-muwāzanah, is an essential legal decision-making process to resolve moral dilemmas (23). It offers invaluable assistance in making well-informed decisions that consider all pertinent circumstances. The three most common contexts in which al-muwāzanah plays a role are as follows: (1) when there are multiple desirable options, but only one can be pursued, this is called a 'choice dilemma'; (2) when one must choose between two or more bad options that cannot both be avoided at the same time; and (3) when an individual is coerced into doing work where the intended benefit cannot be realised without causing harm to others (24). Replacing one harmful illness with a less severe one may be necessary to protect a patient's health. If the goal is to eliminate more significant harm, it is acceptable to introduce some more minor harm first. Nurses play crucial roles in the operating room, including those of the scrub nurse, anaesthetic nurse, and circulation nurse. Nurses frequently assist in caesarean sections on mothers still alive, but they rarely do so on women who have passed away. Islam allows caesarean sections on deceased women to save babies. The surgery could harm the dead woman, but it would significantly improve the baby's chances. It is better to suffer an operation to save the baby than lose both of them.

*Repelling evil is preferable to securing benefit (darʿu al-mafāsīd awlā min jalb al-masāliḥ)*

Nurses must prioritise harm prevention over securing benefits when faced with challenging choices. The nurses and patients are safer when harm is not allowed to come to them. As a result, it is a method of guaranteeing advantages. However, unintended consequences may result if the pursuit of benefit is prioritised over other considerations. It is imperative to thoroughly analyse the nature of physical contact between individuals of opposite sexes. This is because therapeutic touch is a critical communication skill integral to nursing care and must be treated with utmost care and attention. To improve

communication between the sexes, therapeutic touch is not sanctioned by Shari'ah guidelines despite its widespread acceptance in nursing. From an Islamic perspective, touching a patient to convey meaning is not considered *ḍharurah*. Besides physical contact, nurses can improve patient relationships by showing empathy and respect. Thus, avoid touching opposite-sex patients arbitrarily.

*Harm is removed as far as possible (al ḍarar yudfa'u bi qadr al-imkān)*

The duty to remove harm is obvious. It is not always simple to fulfil this duty of eradicating it. If a person has done everything to fix a problem, but the damage remains, Islam will excuse them. Code blue requires nurses to perform cardiopulmonary resuscitation (CPR). These procedures assist the heart and lungs. Nurses should continue resuscitation despite stress and fatigue. Stopping resuscitation could kill the patient. The nurse may stop CPR if the doctor decides the patient is unlikely to survive. Although challenging, this decision is made in the patient's best interest and quality of life. It allows for a more peaceful and dignified passing rather than subjecting them to unnecessary and potentially harmful interventions. The healthcare team works together to ensure that the patient's wishes and values are respected. According to a fatwa issued by the Permanent Committee for Research and Fatwa in 1989 (Fatwa No. 12086), a military hospital in Saudi Arabia had inquired about CPR and Do-Not-Resuscitate orders. The fatwa states that if three reliable specialist doctors have determined that the patient's condition is unsuitable for resuscitation, there is no requirement to resuscitate the patient (25). A DNR order is requested only when the physician determines that CPR would be ineffective and provide no advantage to patients with advanced-stage cancer, terminal illness, or those nearing the end of their life (26).

## CONCLUSION

In conclusion, applying Islamic legal maxims to nursing practices can serve as a valuable framework for Muslim nurses to navigate the ethical and legal dilemmas they may encounter in routine practice. These maxims, such as the preservation of life, prevention of harm, and necessity overriding prohibition, can guide nurses in making sound decisions that align

with Islamic principles and values. Integrating Islamic values into nursing practice can improve patient care by promoting compassion, dignity, and respect.

Islamic legal maxims present a crucial framework for Muslim nurses to navigate intricate ethical and legal dilemmas they could encounter daily. Nurses could integrate Islamic legal maxims into their practice to ensure the provision of compassionate and culturally sensitive healthcare that aligns with Islamic values. This approach can potentially elevate the quality of patient care by prioritising the preservation of life, prevention of harm, and other fundamental principles of Islamic ethics.

## CONFLICT OF INTEREST

The authors declare that they have no competing interests.

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## AUTHOR CONTRIBUTIONS

**MFMI:** drafted the manuscript and played a role in developing and designing the article by gathering, analysing and interpreting data.

**SZS:** revised the manuscript critically for important intellectual content.

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