

## Respect for Patient Self-Determination: Ambiguities, Barriers, and Possibilities

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## **ERRATA LIST**

## Jenny Lindberg:

Respect for Patient Self-Determination: Ambiguities, Barriers, and Possibilities.

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Lund University, Faculty of Medicine. To be defended on 13<sup>th</sup> November 2025.

	Location	Original text	Correction
1.	Paper I, p. 161, left column, Introduction, line 33	This temporal aspect of decision making	This temporal aspect of decision-making
2.	Paper I, p. 163, left column, line	as is sometimes the case in end- stage kidney disease	as is the case in end-stage kidney disease
3.	Paper I, p. 163, right column, line 33	minimally requires that patients to be	minimally requires that patients be
4.	Paper I, p. 164, left column, line	3.8	3,8
5.	Paper I, Reference 1		The page number indicated is the total number of pages of the book, not a reference to a specific page number.
6.	Paper II, p. 127, line 2	Not only is there is widespread agreement	Not only is there widespread agreement
7.	Paper II, p. 129, lines 27-28	what would best promote her own health the most.	what would best promote her own health/what would promote her own health the most.
8.	Paper II, p. 131, line 17	(p. 579)	(p. 579-580)
9.	Paper III, p. 4, left column, third quote	"It's going to be a problem and it. or it can be"	"It's going to be a problem and it or it can be"
10.	Paper III, p. 6, left column, third quote	"but it feels likewemust deal"	" but it feels like we must deal"
11.	Paper IV, footnote 2	all subjective values are not equally valid. Rather, there is a notion of self-determining freedom: the freedom to authentically choose what is worthwhile, things that matter in a more objective sense. This notion involves moral reflection and social responsibility, encouraging dialogue with and recognition by others.	not all subjective values are equally valid. Instead, authenticity requires the subject to choose what is worthwhile - things that matter in an objective sense. This condition requires moral reflection and social responsibility, encouraging dialogue with and recognition from others.
12.	Thesis summary, p. 17, ch. 4.1, line 7	discussed in thesis.	discussed in this thesis.
13.	Thesis summary, p. 22, line 10	The narrow focus of not harming patients, and of protecting	The narrow focus on not harming patients, and on protecting
14.	Thesis summary, p. 24, line 8,	(Sumner, 1996, p. 87)/(Sumner, 1996, pp. 43, 65, 139, 143)	(Sumner, 1996, ch. 6)
15.	Thesis summary, p. 26, line 1	potential harm that information could cause	potential harm that certain information could cause
16.	Thesis summary, p. 35, line 24	generalized or replicable	generalized to, or replicable
17.	Thesis summary, p. 35, line 20- 22	Reference missing to the COREQ checklist	Add reference: Tong A, Sainsbury P, Craig J. (2007). Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups. International Journal for Quality in Health Care, 19(6), 349 – 357.
18.	Thesis summary, p. 36, line 2	to record the interviewers' initial	to record the interviewer's initial
19.	Thesis summary, p. 37, line 25	chairman of the Society.	scientific secretary of the Society.
20.	Thesis summary, p. 47, line 11	self-determination.	self-determination and other moral values.
21.	Thesis summary, p. 52, line 40	that patients did not need	that patients do not need

22.	Thesis summary, p. 53, lines 25-26	O'Neill, 2002, pp. 38-39, 151-152, 192	O'Neill, 2002, pp. 38-39, 151-154, 192
23.	Thesis summary, p. 55, line 39	making decisions, such as	making decisions that serve their own interests, such as
24.	Thesis summary, p. 56, line 5	afterwards	retrospectively
25.	Thesis summary, p. 56, line 24	was the context	is the context
26.	Thesis summary, References	The link is superfluous.	Carlberg, A. (2009). Patientens bästa. En kritisk introduktion till läkaretiken. Nordic Academic Press.
27.	Thesis summary, References	Missing volume and pages	Grover, S., Fitzpatrick, A., Azim, F. T., Ariza-Vega, P., Bellwood, P., Burns, J., Burton, E., Fleig, L., Clemson, L., Hoppmann, C. A., Madden, K. M., Price, M., Langford, D., & Ashe, M. C. (2022). Defining and implementing patient-centered care: An umbrella review. <i>Patient Educ Couns</i> , 105(7), 1679-1688. https://doi.org/10.1016/j.pec.2021.11.004
28.	Thesis summary, References	Incomplete reference	Hanna, J. (2018). In Our Best Interest: A Defense of Paternalism. Oxford University Press. https://doi.org/10.1093/oso/97801908 77132.001.0001
29.	Thesis summary, References	The link is superfluous	Kahneman, D. (2011). Thinking, fast and slow. Farrar, Straus and Giroux.
30.	Thesis summary, References	Missing page number	Lanini I, Samoni S, Husain-Syed F, Fabbri S, Canzani F, Messeri A, Mediati RD, Ricci Z, Romagnoli S, Villa G. (2022). Palliative Care for Patients with Kidney Disease. J Clin Med, 11(13):3923. doi: 10.3390/jcm11133923.
31.	Thesis summary, References	Missing volume and page numbers	Santana S, Brach C, Harris L, Ochiai E, Blakey C, Bevington F, Kleinman D, Pronk N. (2021). Updating Health Literacy for Healthy People 2030: Defining Its Importance for a New Decade in Public Health. J Public Health Manag Pract, 27(Suppl 6):S258-S264. doi:10.1097/PHH.00000000000001324.
32.	Thesis summary, References	Missing volume and page numbers	Song, MK., Plantinga, L., Metzger, M., Noorani, N., Lea, J., Kshirsagar, A. V., Jhamb, M., Abdel-Rahman, E. M., Laszlo, M., Wu, E., Englert, J., Manatunga, A., Benloukil, S., Timmons, W., Turberville-Trujillo, L., & Ward, S. E. (2025). Implementation of An Advance Care Planning Intervention in Dialysis Clinics. Am J Kidney Dis, 85(6), 679-686.https://doi.org/10.1053/j.ajkd.2024.12.003

General note: "End-stage kidney disease" is used in Paper I and III. According to recent terminological recommendations for publications in nephrology, this has been changed to "kidney failure" in the Thesis summary (Levey A.S. et al. Nomenclature for kidney function and disease: executive summary and glossary from a Kidney Disease: Improving Global Outcomes consensus conference. Clin Kidney J. 2020;13(4):485-493). In Paper IV, "end-stage kidney disease" is still used by error.