

2025



CODE OF ETHICS OF THE NURSING PROFESSIONS

Deliberated by the Central Committee and approved by the National Council of Orders for Nursing Professions at its session held in Rome on 21 February 2025, with entry into force on 22 March 2025



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CHAPTER |

PROFESSIONAL PRINCIPLES AND VALUES

ART. 1 - IDENTITY

The nurse is the healthcare professional, registered with the Order for Nursing Professions. They are supported by a specific set of values, scientific and humanistic knowledge and professional skills. They act proactively, consciously and autonomously within their own responsibilities in professional care pathways and processes. They recognize that every person, at all ages and in all life circumstances, represents a value.

ART. 2 - ACTION

The nurse directs their actions toward the well-being of the individual, the family, and the community. Their activities are carried out and developed within the areas of clinical practice, organization, education, and research.

ART. 3 - RESPECT AND NON-DISCRIMINATION

The nurse cares for the individual, their significant others, the family, and the community. They act with respect for their dignity, freedom, and equality, as well as for their life choices and conceptions of health and well-being, without any distinction of age, ethnicity, religion, social status, gender identity, sexual and cultural orientation. In accordance with the ethical values and deontological norms of the nursing professions, the nurse ensures a relationship based on mutual trust. They promote a culture of respect and inclusion, helping to reduce inequalities in the social and healthcare context. The nurse refrains from all forms of discrimination and blame towards anyone encountered in their actions.

ART. 4 - THE CARE RELATIONSHIP

The nurse provides care by building relationships with people, in which empathy is an essential element. The nurse ensures that the patient is never left alone, involving, with the consent of the person concerned, their significant others, as well as other professional and institutional figures. The time of care is time of relationship.

ART. 5 - ETHICAL QUESTION

The nurse is committed to the analysis of ethical issues and contributes to their investigation. They avail themselves of the discussion with those involved in the care and seek ethical consultation, including that of the Order. They acknowledge the importance of continuous education in ethical, moral, and deontological matters.

ART. 6 - ETHICAL CONFLICTS AND FREEDOM OF CONSCIENCE

If the person being cared for expresses ethical beliefs different from those of the nurse, the nurse maintains the care relationship with them, as well as with their significant others, other professionals, and institutions. If requests are made that are contrary to the nurse's personal values or to their ethical and professional principles, the nurse may exercise freedom of conscience, while ensuring continuity of care and taking responsibility for abstaining from the care intervention.

CHAPTER II

CARE RESPONSIBILITY

ART. 7 - HEALTH CULTURE

The nurse promotes eco-sustainable and environmentally friendly lifestyles, recognizing the interconnection between human health, animal health, and the environment, for integral health at the global level.

ART. 8 - EDUCATION AND TRAINING

The nurse, at their various levels of responsibility, is actively involved in the education and training of students and in the integration of new colleagues, also from an interprofessional perspective.

ART. 9 - SCIENTIFIC RESEARCH AND EXPERIMENTATION

The nurse adheres to ethical standards of research and recognizes the value of scientific research and experimentation. They participate in, design, and conduct research in clinical care, organizational, and educational fields, giving value to the potential of collected data and making the results available. They maintain continuous updating with regard to best practices.

ART. 10 - KNOWLEDGE, TRAINING AND UPDATING

The nurse bases their own behavior on knowledge validated by the scientific community and updates their competencies in a critical and reflective manner, in order to responsibly ensure the quality and safety of their professional conduct. They plan, carry out, and participate in training initiatives, fulfilling the obligations of continuous updating, including regulatory requirements.

ART. 11 - SUPERVISION AND SAFETY

The nurse undertakes training and seeks supervision when engaging in new activities, or when they have limited knowledge or competence, and in any case whenever the need arises.

CHAPTER |||

PROFESSIONAL RELATIONSHIPS

ART. 12 - COOPERATION AND COLLABORATION

The nurse is committed to supporting cooperation with other professionals involved in the care process. They adopt a loyal and collaborative attitude towards colleagues and other professionals, recognizing and valuing their specific contributions.

ART. 13 - COMPETENT ACTION, ADVICE AND SHARING INFORMATION

The nurse acts according to their level of competence and seeks advice or the intervention of expert nurses or specialists when necessary. They provide advice by making their knowledge and skills available to both their own and other professional and institutional communities. They ensure that, throughout the care process, the person being cared for receives all information related to their health needs, thereby promoting informed care choices.

ART. 14 - DECORUM

The nurse takes care of their own person and personal decorum. They promote and protect the professional prestige.

ART. 15 - CARE OF THE CARERS

The nurse, at different levels of responsibility, cares for their colleagues, as well as their families and designated support persons, offering support and assistance and contributing to the creation of a positive and collaborative work environment. They promote principles of altruism and professional solidarity.

ART. 16 - PROTECTION POSITION

The nurse, in order to protect and safeguard the well-being and safety of the person being cared for, of health professionals, and of the community, intervenes and promptly reports to the relevant authorities any situations involving psycho-physical impairment of a professional or other worker, particularly in the exercise of their duties.

CHAPTER IV

RELATIONSHIP WITH PERSONS BEING CARED FOR

ART. 17 - PROVIDING INFORMATION ABOUT HEALTH CONDITIONS

The nurse, in agreement with the care team, ensures that the person being cared for, or their designated support person, receives in a timely and appropriate manner, precise and complete information about their health status, in respect of their needs and values.

ART. 18 - INTERACTION AND INTEGRATION

The nurse recognises intra- and interprofessional interaction and integration as important elements in responding to the person's health needs.

ART. 19 - RELATIONSHIP WITH THE NURSE IN THE CARE PROCESS

In the care process, the nurse welcomes and values the contributions, perspectives, and emotions of the person being cared for, facilitating the expression and communication of pain. The nurse informs, involves, educates, and supports the person being cared for and, with their free consent, their designated support persons, in order to promote adherence to the care process and to assess and activate available resources.

ART. 20 - CONFIDENTIALITY AND PRIVACY

The nurse guarantees and protects the confidential nature of the relationship with the person being cared for. Data collection is limited strictly to what is necessary. All data are handled confidentially, in accordance with the person's rights and relevant legislation.

ART. 21 - REFUSAL OF INFORMATION

The nurse respects the explicit wishes of the person being cared for not to be informed about their health condition. If the withheld information is necessary to prevent a health risk to third parties, the nurse works to foster the patient's sense of responsibility, providing information about the risks and any potentially harmful behaviour.

ART. 22 - STRATEGIES AND COMMUNICATIVE METHODS

The nurse supports the relationship with the person being cared for, also when they are in a condition that limits the expression, through effective strategies and communicative methods.

ART. 23 - DEPRIVATION, VIOLENCE AND MISTREATMENT

The nurse recognises the importance of preventing violence, including within the healthcare setting, to ensure a safe and protected environment for the person being cared for, family members, designated support persons, and professionals. When the nurse detects deprivation, violence, or physical or psychological abuse, they take action to address the critical situation, using appropriate strategies to ensure prompt intervention for the protection of those affected. The nurse also provides assistance to perpetrators of violence, promoting non-violent behaviours to reduce the risk of recurrence.

ART. 24 - CHILD'S WILL

The nurse, taking into account the degree of maturity of the minor being cared for, strives to enable them to express their wishes so that these are duly considered with regard to decisions about conventional and experimental treatment paths. When the minor being cared for consciously opposes the treatment choice, the nurse, involving the parents or legal guardians where deemed useful, works to acknowledge, manage, and overcome the conflict.

ART. 25 - ART.25 - PAIN

The nurse prevents, detects and documents the patient's pain during the care process. They work for the management of pain and the correlated symptoms, applying guidelines, recommendations and good clinical-care practices, respecting the wishes of the person themselves.

ART. 26 - END OF LIFE CARE

The nurse guarantees care until the end of the life of the person being cared for. The nurse recognises the importance of planning and delivering care according to the palliative care model, providing relief in physical, psychological, relational, spiritual, and environmental dimensions. They recognise, promote, and support the value of shared care planning. The nurse also cares for the family members and designated support persons of the person being assisted in the final stages of illness, at the time of loss, and during the grieving process.

ART. 27 - WILL TO LIMIT INTERVENTIONS

The nurse promotes the active involvement of the person being cared for in the decision-making process regarding their treatment pathway. If the person being cared for wishes, a designated support person may also be involved in this process. The nurse provides information to enable the person receiving care to consciously express their wishes and preferences, including the possibility of placing limits on health treatments that are not considered proportionate or consistent with their concept of quality of life.

ART. 28 - BLOOD, TISSUE, HUMAN MILK AND ORGAN DONATION

The nurse promotes information about the donation of organs, blood, tissue and human milk as a free act of solidarity; they educate and support donors and the recipients.

ART. 29 - PROFESSIONAL SECRECY

The nurse always respects professional confidentiality not only as a legal obligation, but also out of personal conviction and as a concrete expression of the relationship of trust with the person being cared for. The death of the person being cared for does not exempt the nurse from respecting professional confidentiality.

CHAPTER V

COMMUNICATION

ART. 30 - VALUES AND BEHAVIOURS IN COMMUNICATION

The nurse uses communication, including digital communication, in an ethical, clear, and responsible manner, encouraging dialogue and exchange in order to contribute to constructive debate. They act with integrity, respect, transparency, and truthfulness. The nurse protects the privacy of the person being care for and refrains from any form of expression that may harm individuals, institutions, the dignity, or the image of the profession.

ART. 31 - NEW TECHNOLOGIES

In the implementation and use of new technologies, the nurse works to ensure that people receiving care have equal access and are always placed at the center of the care pathway.

CHAPTER VI

ORGANISATION

ART. 32 - RESPONSIBILITIES IN THE ORGANISATION

At the various levels of care, management, and education, the nurse participates in and contributes to organizational decision-making, the definition of care, educational, and organizational models, the equitable allocation of resources, and the promotion of the nursing function and professional role.

ART. 33 - EVALUATION OF THE ORGANISATION

The nurse evaluates the organisational, managerial and logistic context in which the person receiving care is located in order to protect them. They document and communicate the result of the evaluations in order to improve the context itself.

ART. 34 - PARTICIPATION IN CLINICAL GOVERNANCE

The nurse participates in clinical governance, promotes the best safety conditions of the person receiving care, embraces the pathways of risk prevention and management, including infectious risk, and actively adheres to the operational procedures, the methodologies for analysing the events that have occurred and the ways of informing the involved persons.

ART. 35 - PUBLIC HEALTH EMERGENCIES

The nurse responds to needs and critical issues related to public health emergencies, acting according to needs and measures prescribed by the competent authorities.

In a context that requires overcoming habitual patterns, they ensure appropriate, effective and timely intervention.

They work to implement the necessary skills and are available for interprofessional collaboration.

ART. 36 - CLINICAL DOCUMENTATION

The nurse is responsible for the accurate preparation of the clinical documentation entrusted to them, emphasizing the importance of completeness and truthfulness, also to enable the patient's informed expression of consent or refusal regarding nursing care.

ART. 37 - CONFLICT RESOLUTION

The nurse, if the organisation requests or plans clinical, managerial or educational activities that are counter to the principles, values and norms of the profession, at all levels of responsibility, reports the situation to the appropriate Authorities and takes action to suggest alternative solutions.

ART. 38 - RESTRAINT

The nurse recognises that restraint is not therapeutic. It is exclusively of a precautionary nature, of exceptional and temporary nature; it can be implemented by the team, or in cases of urgency, by the nurse if the conditions require it, in order to protect the safety of the patient, of other persons and of the professionals. The restraint must be motivated and noted in the clinical care documentation, must be temporary and monitored over time to verify whether the conditions that justified its implementation persist and whether it has negatively affected the health condition of the patient.

ART. 39 - SUPPORTING STAFF

The nurse at various levels of clinical and managerial responsibility plans, supervises and verifies for the safety of the patient the activity of the supporting professionals who are present in the care process and entrusted.

ART. 40 - GUIDELINES AND GOOD CARE PRACTICE

The nurse, due to the high level of professional responsibility, follows the guidelines and good clinical practices and ensures their correct application, promoting their continuous updating.

ART. 41 - REPORTS TO THE PROFESSIONAL ORDER

The nurse reports to the professional Order any inappropriate nursing care that lacks a foundation in scientific evidence or validated results.

CHAPTER VII

PRIVATE PRACTICE

ART. 42 - PERFORMING PRIVATE PRACTICE

In the exercise of private professional practice, the nurse strives to ensure fair competition and to promote both the value of their own work, through the principle of fair compensation, and the principle of solidarity among professionals, in compliance with the indications of the National Federation of the Orders of Nursing Professions regarding fees.

ART. 43 - CARE CONTRACT

The nurse, with transparency, integrity, and compliance with regulations, formalizes a special care contract with the patient that outlines the adequate and appropriate care needs; the patient's informed consent or dissent regarding the proposed treatments; explicit elements of personal data protection; and the components of the professional fee.

ART. 44 - SAFETY AND CARE CONTINUITY

The nurse practicing privately protects patient safety and continuity of care, also respecting their bio-physiological recovery time.

CHAPTER VIII

FINAL PROVISIONS

ART. 45 - FREEDOM FROM CONSTRAINTS

The nurse and the Order of Nursing Professions commit to ensuring that the professional's actions are free from improper influences and interests, as well as undue pressure from third parties, including designated support persons, other operators, companies, and associations.

ART. 46 - COUNTERING THE ABUSIVE PRACTICE OF THE PROFESSION

The nurse and the Order of Nursing Professions oppose and report the unlawful practice of nursing and undeclared work.

ART. 47 - PROFESSIONAL REPRESENTATION

The nurse performs the role of representing the profession with dignity, integrity, and transparency, avoiding any conflicts of interest. They use expressions and adopt behaviors that uphold and promote the reputation of the professional community and its institutional representatives.

ART. 48 - HEALTHCARE ADVERTISING

The nurse complies with regulations regarding healthcare advertising, safeguarding the safety and health of patients while respecting the appropriateness of treatments, in accordance with principles of transparency and truthfulness. In using communication and promotional tools related to their professional activities, the nurse avoids disseminating messages with an appealing or suggestive nature aimed at promoting professional interventions, aids, or devices that may encourage the use of purchases or treatments not supported by evidence of efficacy and appropriateness of care. They ensure that any conflicts of interest are never concealed and, if present, are openly declared.

ART. 49 - OBLIGATION TO RESPECT REGULATIONS

The nurse respects the administrative, legal, and ethical rules and obligations concerning the profession, also adhering to the guidelines of the Professional Order of Nursing Professions.

ART. 50 - CONSULTANCY AND EXPERT ACTIVITIES

The nurse who provides consultancy and expert services avoids any conflicts of interest and situations that may compromise their independence.

ART. 51 - BINDING NATURE OF THE ETHICAL REGULATIONS

The rules contained in this Code of Ethics are binding for all members of the Order of Nursing Professions. Non-compliance is sanctioned by the competent bodies, taking into account the severity and intentionality of the conduct, as well as any recurrence thereof.

ART. 52 - PROFESSIONAL ORDERS. SUBSIDIARY INSTITUTIONS OF THE STATE

The Orders of Nursing Professions acknowledge and implement the regulatory provisions inherent to their nature as subsidiary institutions of the State, possessing functional autonomy and operating based on the principle of institutional responsibility.

ART. 53 - PROFESSIONAL ORDERS AND CODE OF ETHICS

The Orders of Nursing Professions are required to adopt this Code and ensure compliance with its provisions, within the framework of the guiding and coordinating role exercised by the National Federation of Nursing Professions Orders. They are required to officially provide the Code of Ethics to members of the Associations and to organize periodic training courses on ethical matters.

ART. 54 - PROFESSIONAL ORDERS AND OTHER PUBLIC ROLES

The Orders of Nursing Professions do not interfere with nurses engaged in institutional or political roles in the performance of their duties.

ART. 55 - FINAL CLAUSE

Any other behaviour that breaches decorum and professional dignity is sanctioned by the Order of Nursing Professions.



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