know before consenting) and the principle of autonomy (the patient must be told what he or she needs to know to make an informed choice, even if the information is doubtful) and developing a more advanced pharmacist-doctor working relationship system.

Keywords: bioethics, pharmacy, veracity, condition of doubt

7. BIOETHIZATION OPPORTUNITY OF THE MEDICAL STUDENTS IN THE PRECLINICAL YEARS OF STUDY

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Introduction: The evolution of medical knowledge is situated between two apparently opposite tendencies: the exacerbation of realism and undoubtable needs, and, on the other hand, accentuated extension of the humanistic and philanthropic concepts. Placing this two antagonistically orientations in an equation, gave birth to a discipline that is meant to equilibrate the transformation of the human destiny under the pressure of science. Bioethics can be defined as an ethic and multidisciplinary demarches, that makes the humanist and moral values of a person compatible with the science development, according personal actions with this ethical-moral values. In this context we may affirm that bioethics are the cross point of the moral norms with the technical-scientific progress. The bioethization of medical students, involves values and norms which perpetuates humanism without distorting the basic purpose of medicine.

Purpose and objectives: Highlighting the importance of the bioethization process among medical students in the preclinical years of study, in order to form the moral conscience of the future doctor.

Materials and methods: There were used various specialized materials (publications, courses, analytical programs, etc.). It was given priority to sociological analysis of practical situations involving concepts of morality, as well to analytical, bioethical, and medical methods.

Results: During his academic and scientific training, medical student often find himself in contradictory situations that need a complex approach through the prism of moral values and trough the perspective of medical sciences. The bioethical demarche, starts from the basic idea that not everything that is medical possible is also moral. Different from the unilateral approach of traditional ethical systems that are up to an idealized approach of the human being, bioethics studies the person in his social-cultural and natural relations. In this context we may affirm the fact, that surviving becomes a key concept of the present, invocating evolution demarches , but which are equilibrated by moral values and norms. Therefore we can say that life, humanity and survival are some categories that complement each other, mutual explaining their essence, leading the activities of the future doctors, to further progress in accordance with the imperatives of bioethics.

Conclusion: The wellbeing, life, and health of the patient is the primary concern of a doctor, not only because it is his professional duty, but also because, in such a way, a doctor reconfirms his professional choice, the purpose of training and developing himself, the main reason of his continuous improvement process, reconfirming each time his value, not only as a doctor but as a human being too. From the bioethics perspective, the need for science implies a need for morality and, conversely, from need of morality, should result more scientific advancements. The higher is technologization of medical exercise, the greater is the need for morality in its practice. The higher health risks are, the greater is the need of medical care based on humanity and need to increase quality of care. The easiest ways of assimilating bioethical knowledge by medical students are in the preclinical years of study, fact that was proved abundantly in our research.

Keywords: bioethics, bioethization, morality, medicine, medical education, medical students