

PATIENT-CENTRED CARE DENTISTRY AND ITS RELATION WITH MAQASID SHARI'AH: A NARRATIVE REVIEW

Muhammad Annurudin Sabarudin^{1a*}, Faizah Abdul Fatah^{2b}, Haslinda Ramli^{3c}, Norlela Yacob^{4d},
Mohd Nasir Abdul Majid^{5e} and Muhammad Aunurrochim Mas'ad Salleh^{6f}

^aFaculty of Dentistry, Universiti Sains Islam Malaysia, Jalan Pandan Utama,
55100, Kuala Lumpur, MALAYSIA.

E-mail: annurdin@usim.edu.my

^bFaculty of Dentistry, Universiti Sains Islam Malaysia,

E-mail: drfaizah@usim.edu.my

^cFaculty of Dentistry, Universiti Sains Islam Malaysia,

E-mail: drhaslinda@usim.edu.my

^dFaculty of Dentistry, Universiti Sains Islam Malaysia,

E-mail: drnolela@usim.edu.my

^eFaculty of Shariah and Law, Universiti Sains Islam Malaysia,

E-mail: nasirmajid08@usim.edu.my

^fFaculty of Shariah and Law, Universiti Sains Islam Malaysia,

E-mail: aunn25@usim.edu.my

*Corresponding Author: annurdin@usim.edu.my

Received: 02 August 2022

Accepted: 17 November 2022

Published: 15 January 2023

DOI: <https://doi.org/10.33102/jfatwa.vol28no1.465>

ABSTRACT

Patient-centred care dentistry offers positive treatment outcome by unique combination of dental practitioners and their patients to improve quality of care and overall health outcomes. As Muslim dental practitioners, they must adhere with the Islamic principles and values in treating their patients with the Maqasid Shari'ah that blended in patient centred care approach. This narrative review aims to outline the relevance of ethics in dental practice with the concept of Maqasid Shari'ah and suggests on feasibility of Islamic principles in patient centred care approach. The concept of Maqasid Shari'ah is the purpose and objective of Shari'ah that formulated in the protection of religion, soul, mind, heredity and property. Apart from that, Qawaid Fiqhiyah is the methods that used in solving dental fiqh issues nowadays endorsed by the Muslim scholars or authorities are explored in this review.

Keywords: *Patient centered care dentistry, Maqasid Shari'ah, Qawaid Fiqhiyah, Muslim dental practitioners, dental pledge*

1. INTRODUCTION

Dentistry is a noble profession where dental practitioners often manage to bring smiles and create confidence to increase patients' quality of life. Dental practitioners treat oral diseases that are not only of biological origins but also

social influences (Baiju et al., 2017). As a doctors, they are granted the privilege of trust and status, financial reward, professional autonomy and any other benefits (Cruess & Cruess, 2004). It refers to social contract in which the community agree to give up certain rights and accept a central authority to protect their own rights. The social contract was popular in medicine since 19th century. The framework in the relationship between community and dental practitioners is provided by the social contract. The dental profession makes a commitment on continuing development for its knowledge based and treatment (Kazdin, 2008). Hence, social contract is the implicit relationship of reciprocity between community and dentistry. The subdomain of social contract is paternalism. The term “paternalism” is used for actions taken or decisions made for another person with the intention of benefitting that person (Carney et al., 2021). Conservatively, it was justified for the dental practitioners to make decisions for their patients as they were deemed to know what best for their patients (Fortuin et al., 2020). Nonetheless, paternalism is less popular but still accepted by disability or impaired patients that unable to make decision to several reasons such as coercion, limited cognitive capacity, emotional factors, dementia and under the influence of drugs (Zietlow et al., 2022).

Nowadays, with the increasing use of informative technology at the fingertips, the dentist- patient relationship has achieved new dimensions. Patient has more information and well-versed in dentistry and this dimension leads dental practitioners too often encounter legal suits brought against them by their patients (YAAKOB, 2022). These alarming issue attract much public attention in the mass media in some countries (Ozdemir et al., 2005). Therefore, dentist- patient relationship is essential especially on the mutual agreement of treatment to the success of the endeavour in dental management.

The concern for patient- centred care (PCC) approach calls for dental practitioners to interact with patients as individuals and the community as a group (Mills et al., 2014). It is essential to integrate the behavioural component as well as patient-centred care approach in which it can relates with Islamic values include *Maqasid Shari'ah*, *fiqh*, *Qawaid Fiqhiyah* and *Akhlak* (good attitude) as it provides the drive for a holistic approach in the human side of quality of oral health care. It covers all the aspect of our daily practice and can be integrated with this holistic approach which is also in line with the Qur'an in verse (34:28) and (2:208) as follows:

وَمَا أَرْسَلْنَاكَ إِلَّا كَافَّةً لِّلنَّاسِ بَشِيرًا وَنَذِيرًا وَلَكِنَّ أَكْثَرَ النَّاسِ لَا يَعْلَمُونَ ٢٨

“And We have sent you except comprehensively to mankind as a bringer of good tidings and a warner. But most of the people do not know.” (Surah Saba 34:28)

يَا أَيُّهَا الَّذِينَ ءَامَنُوا ادْخُلُوا فِي السِّلْمِ كَافَّةً وَلَا تَتَّبِعُوا خُطُوَاتِ الشَّيْطَانِ ۚ إِنَّهُ لَكُمْ عَدُوٌّ مُّبِينٌ ٢٠٨

“O you who believed, enter into Islam completely (and perfectly) and do not follow the footsteps of Satan. Indeed, he is to you a clear enemy.” (Surah Al-Baqarah 2:208)

Therefore, this paper aims of this review are 1) outline the relevance of ethics in dental practice with the concept of *Maqasid Shari'ah* and 2) to suggest on feasibility of Islamic principles in PCC approach.

2. MATERIALS AND METHODS

This paper to summarise the Muslim dental practitioner roles, the fundamental of *Qawaid Fiqhiyah* and *Maqasid Shari'ah* in dentistry and its relation to patient centred care dentistry. A literature search was performed in electronic databases, including PubMed, Medline, OVID and Web of Science, by using the following keywords: “patient centered care dentistry”, “*Maqasid Shari'ah*”, “*Qawaid Fiqhiyah*”, “Muslim dental practitioners”, and “dental *fiqh*”. Documents published in English were selected, and the articles were further screened to identify their relevance to this review.

3. ROLES AS A MUSLIM DENTAL PRACTITIONER

Before the dental practitioners can treat their patients, they are required to uphold the professional doctorate pledge. There are many professional oaths and pledge, which are obligations that can form the basis of professional code, which if broken, it could result with disciplinary action or legal suits (Weller, 2019). The Hippocratic Oath (formed, circa 500. BC) was first developed and intended as a code of conduct in order to engender trust in the professional and ethical approach adopted by those taking the oath (Helen Askitopoulou & Antonios N Vgontzas, 2018). An oath can serve as a useful reference point and remind their personal moral obligations to the society. Furthermore, as everyone would be held to the same ethical standards, it would create an environment where people would be accountable for inappropriate behaviour. Additionally, an oath or pledge can be used as a life-long vehicle for reaffirming understanding of one's personal and professional integrity (Weller, 2019).

The main content of Hippocratic Oath is to respect teachers, parents and patients by bound the code of professional conducts. As medical practitioners they required to use those dietary and drugs regimens which will benefit to patients to their greatest ability, and do not harm or injustice to patients and others (Helen Askitopoulou & Antonis N Vgontzas, 2018).

Meanwhile, as Muslim dental practitioners, the religious faiths must be included in the oath and pledge. In this context, they were developed the Oath of a Muslim Physician (IMA, 1977) which is a composite drawn from the historical and contemporary writings of Muslim physicians. As well-known leader in the integration of Naqli and Aqli knowledge, Islamic Science University of Malaysia (USIM) is committed to produce a balanced Muslim dental practitioner at the same time it equipped to contribute and make a difference to the community in the Islamic tradition. With regards to that, dental students from Faculty of Dentistry (FoD), USIM needs to uphold their dental pledge and oath before treating their patients throughout their career.

The Oath of a Muslim dental practitioners by FoD USIM (2010):

In the name of Allah, the Most Gracious, the Most Merciful.

I, as a student of the Faculty of Dentistry USIM, shall keep this pledge and stipulations.

O Allah, Thou art the only Healer, I serve none but Thee, and as the instrument of Thy Will, I dedicate myself to Thee in all humbleness, to exercise justice, love and compassion for all Thy Creation.

I understand and accept that my primary responsibility is to my patients, and I shall dedicate myself to render, to the best of my ability, the highest standard of oral health care and to maintain a relationship of respect and confidence. Therefore, let all come to me safe in the knowledge that their total health and well-being are my first considerations.

I understand and realize that my competence rest on continuing the attainment of knowledge and skills on the arts and sciences of dentistry.

I shall dedicate to conduct myself in all endeavours to maintain the dignity of my patients, to honour the teachers, staff and fellow colleagues and to enhance the prestige and reputation of my faculty and university.

I shall strive to be resilient and versatile in shaping to be a balanced professional in dentistry.

I pray to the Almighty to bestow upon me the strength, patience and dedication to uphold this pledge.

مِنْ أَجْلِ ذَلِكَ كَتَبْنَا عَلَىٰ بَنِي إِسْرَائِيلَ أَنَّهُ مَنْ قَتَلَ نَفْسًا بِغَيْرِ نَفْسٍ أَوْ فَسَادٍ فِي الْأَرْضِ فَكَأَنَّمَا قَتَلَ
الْإِنْسَانَ جَمِيعًا ۖ وَمَنْ أَحْيَاهَا فَكَأَنَّمَا أَحْيَا النَّاسَ جَمِيعًا ۗ وَلَقَدْ جَاءَتْهُمْ رُسُلُنَا بِالْبَيِّنَاتِ ثُمَّ إِنَّ كَثِيرًا مِّنْهُمْ
بَعَدَ ذَلِكَ فِي الْأَرْضِ لَمُسْرِفُونَ ۝ ٣٢

"Whoever killeth a human being, not in lieu of another human being nor because of mischief on earth, it is as if he hath killed all mankind. And if he saveth a human life, he hath saved the life of all mankind." (Surah Al-Maidah 5:32)

As Muslim dental practitioners, a good attitude must be aligned with the knowledge and skills. If the dental practitioners (and one of the Arabic words for dental practitioners is *al-hakim* or the wise one) possesses a good ethics (*akhlaq*), patients will often feel at ease (Arawi, 2010). A proper intention (*Niat*) should be cultivated before treating patients for the sake of Allah as khalifah in the earth and serve people equally with *Ihsan*. In the Hadith Rasulullah SAW said:

حَدَّثَنَا مُحَمَّدُ بْنُ عَبْدِ اللَّهِ بْنِ نُمَيْرٍ، حَدَّثَنَا أَبِي، حَدَّثَنَا زَكَرِيَاءُ، عَنِ الشَّعْبِيِّ، عَنِ النُّعْمَانِ بْنِ بَشِيرٍ،
قَالَ قَالَ رَسُولُ اللَّهِ صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ " مَثَلُ الْمُؤْمِنِينَ فِي تَوَادُّهِمْ وَتَرَاحُمِهِمْ وَتَعَاطُفِهِمْ مَثَلُ
الْجَسَدِ إِذَا اشْتَكَى مِنْهُ عُضْوٌ تَدَاعَىٰ لَهُ سَائِرُ الْجَسَدِ بِالسَّهَرِ وَالْحُمَّى "

Al-Nu'man ibn Bashir reported: The Messenger of Allah, peace and blessings be upon him, said, "The parable of the believers in their affection, mercy, and compassion for each other is that of a body. When any limb aches, the whole body reacts with sleeplessness and fever."

(Hadith Sahih Muslim:2586)

Apart from that, they must treat their patients with the values of *ikhlas* (sincerity). Sincerity can be considered as a situation whereby they perform, communicate and commit to their tasks wholeheartedly for the sake of Allah and not for praise or recognition. Secondly, the concept of *tawakal* is crucial in treating patients. *Tawakal* is element that proves faithfulness which means surrendering decisions on all matters, efforts and endeavours to Allah of the Entire Universe (Hasan et al., 2022). It is aligned with the Qur'an in verse (27:65) as follows:

قُلْ لَا يَعْلَمُ مَنْ فِي السَّمَاوَاتِ وَالْأَرْضِ الْغَيْبَ إِلَّا اللَّهُ ۗ وَمَا يَشْعُرُونَ أَيَّانَ يُبْعَثُونَ ۝ ٦٥

Say, 'O Prophet,' "None in the heavens and the earth has knowledge of the unseen except Allah. Nor do they know when they will be resurrected. (Surah An-Naml 27:65)

Additionally, as Muslim dental practitioners, they should not lie to their patients and abuse their power, which in line in the Qur'an in verse (4:108) as follows:

يَسْتَخْفُونَ مِنَ النَّاسِ وَلَا يَسْتَخْفُونَ مِنَ اللَّهِ وَهُوَ مَعَهُمْ إِذْ يُبَيِّتُونَ مَا لَا يَرْضَى مِنَ الْقَوْلِ ۗ وَكَانَ اللَّهُ بِمَا يَعْمَلُونَ مُحِيطًا ١٠٨

They try to hide 'their deception' from people, but they can never hide it from Allah—in Whose presence they plot by night what is displeasing to Him. And Allah is Fully Aware of what they do. (Surah An-Nisa 4:108)

They also need to keep their patient's information as a confidential and not to expose to others (Tariq & Hackert, 2022). Another focal term in the life of the servant of Allah as well as Muslim dental practitioners is *taqwa* (piety). Indeed, in his farewell sermon, the Prophet Rasulullah SAW has mentioned that there is no difference between people except in *taqwa*. In addition, Imam Tarmidhi also reported to whom the Prophet Rasulullah SAW once said:

حَدَّثَنَا أَبُو كُرَيْبٍ، مُحَمَّدُ بْنُ الْعَلَاءِ حَدَّثَنَا عَبْدَةُ بْنُ سُلَيْمَانَ، عَنْ مُحَمَّدِ بْنِ عَمْرٍو، حَدَّثَنَا أَبُو سَلَمَةَ، عَنْ أَبِي هُرَيْرَةَ، قَالَ قَالَ رَسُولُ اللَّهِ صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ " أَكْمَلُ الْمُؤْمِنِينَ إِيمَانًا أَحْسَنُهُمْ خُلُقًا وَخِيَارُكُمْ خِيَارُكُمْ لِنِسَائِهِمْ خُلُقًا " . قَالَ وَفِي الْبَابِ عَنْ عَائِشَةَ وَابْنِ عَبَّاسٍ . قَالَ أَبُو عِيسَى حَدِيثُ أَبِي هُرَيْرَةَ هَذَا حَدِيثٌ حَسَنٌ صَحِيحٌ

Abu Hurairah narrated that The Messenger of Allah said: "The most complete of the believers in faith, is the one with the best character among them. And the best of you is those who are best to your women."

(Sunan At-Tarmidhi. Hadith No. 1162)

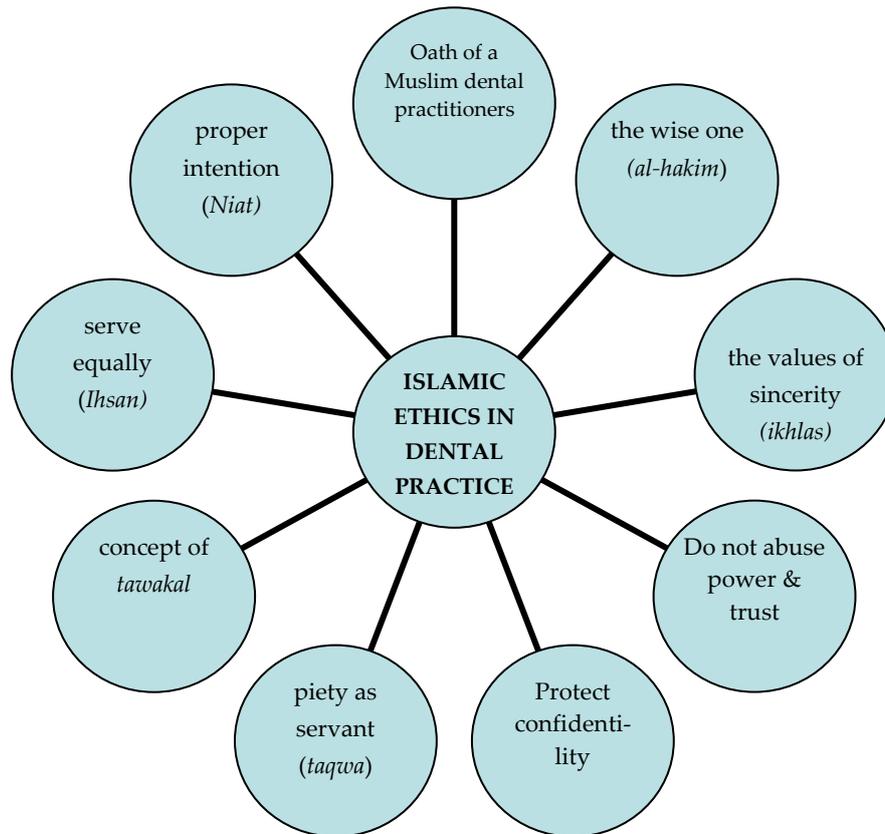


Figure 1. The relevance of ethics in dental practice with the concept of *Maqasid Shari'ah*

4. QAWAID FIQHIYAH AND MAQASID SHARI'AH CONCEPT IN DENTISTRY

Early Muslim scholars like Ibn Sina and al-Razi are among noticeable medical professionals who have highlighted the role of Islamic values in medicine and healthcare (Hashi, 2019). The knowledge becomes evolved and the contemporary Muslim scholars in the medicine field have also studied the applications maqasid shariah (Sadeghi & Ghaffari, 2017). The fundamental principle of Islam basically the former sense is used to speak about Islam as a religion, including devotional (*aqa'id*), devotional (*'ibadat*) and laws of social order (*shari'ah law*) (Hashi, 2019).

Fiqh was originated from Arabic word which means “the knowledge of the practical shari’ rules which is deduced from their respective particular evidence”. Meanwhile, the word *Shari’ah* is defined as “the rules which are ordained by a law for his servants by sending his Messenger”. *Shari’ah* is wider circle which

embraces in its orbit all human actions, in contrast, *fiqh* is the narrow one, and deals with what are commonly understood as legal acts (Baderin, 2021).

The Muslim community during the Prophet’s Rasulullah SAW was not so diversified and complex as it became later. Dental *fiqh* issues is frequently discussed among Muslim dental fraternity nowadays. In this respect, it will be solved based on the sources of Islamic laws (*al-Ahkam*) with the expert on Islamic laws (*Mujtahid*), *Qawaid Fiqhiyah* (Figure 2) and *Maqasid Shari’ah* (Yacob et al., 2017).

5 elements in *Qawaid fiqhiyah* (Islamic legal maxims)

الأمر بمقاصدها

Behaviours are judged by their goals and intention

العادة محكمة

Traditions (norm) is basis of judgement

المشقة تجلب التيسير

Hardship begets ease

اليقين لا يزال بالشك

Sureness is not to be overruled by doubt

الضرار يزال

Harm must be abolished

Figure 2. *Qawaid Fiqhiyah* (Islamic legal maxims)

The sources of Islamic law can be divided into two categories which are primary and secondary sources (Figure 3). From the dental *fiqh* issues, sources of *al-ahkam* will be referred and analyzed using *Qawaid Fiqhiyah* and *Maqasid Shari’ah*. Finally, the Islamic laws regarding that dental *fiqh* issues will be endorsed by the Islamic Authorities as *halal* (permissible), *haram* (non-permissible), and *ibahah* (permissible).

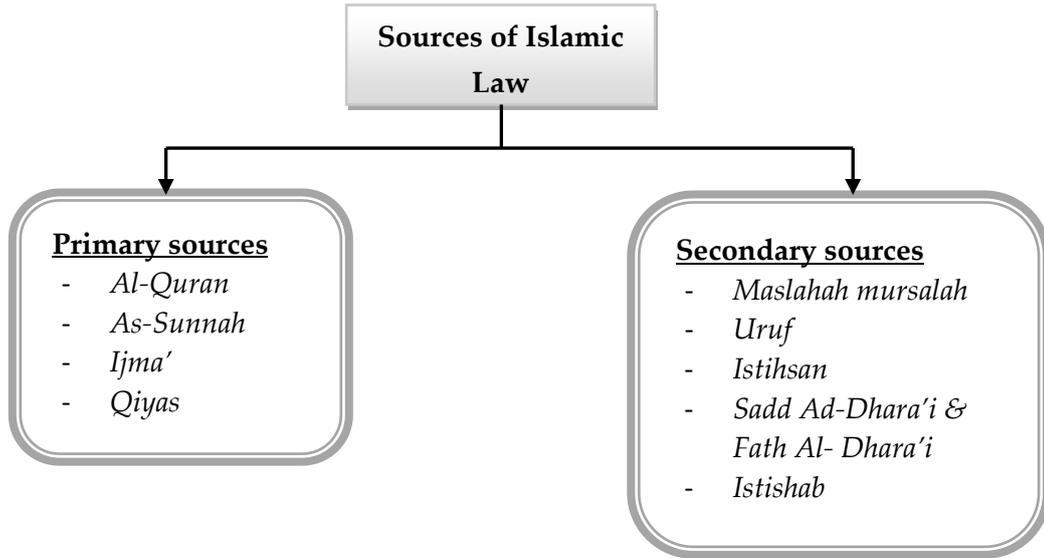


Figure 3. Sources of Islamic Law (*Al-Ahkam*)

Maqasid and *Shari'ah* are the two terms that make up the composite word "*Shari'ah*." As general, Maqasid means intention and goal. Meanwhile, according to Ibn Manzur, maqasid (plural of *maqasid*) define as a justice (BP & Wijaya, 2018). *Shari'ah* is term Arabic that derived from root *shara'a* which basically mean straight "pathway to be followed" or "path to the waterhole", particularly the waterhole in desert environment" (Mohammad Ya'qub et al., 2002). Collectively, *Maqasid Shari'ah* is the rules/law set by Allah that have the objectives to benefit to human (BP & Wijaya, 2018). It is based on the Qur'an in verse (45:18) as follows:

ثُمَّ جَعَلْنَاكَ عَلَىٰ شَرِيعَةٍ مِّنَ الْأَمْرِ فَاتَّبِعْهَا وَلَا تَتَّبِعْ أَهْوَاءَ الَّذِينَ لَا يَعْلَمُونَ ۝ ١٨

Then We put you, [O Muhammad], on an ordained way concerning the matter (of religion); so, follow it and do not follow the inclinations of those who do not know. (Surah Al- Jaathiyah 45:18)

Moreover, *Maqasid Shari'ah* can be classified into three broad categories which are *dharuriyat* (necessities), *hajiyyat* (need), and *tahsiniyat* (luxuries). The first level of *maslahah* cannot be achieved without fulfilling five universals of *Maqasid*: preservation of deen, life, intellect, lineage, and wealth, which is known as *dharuriyat* (necessities). The second level of *Maqasid* is *hajiyyat* (need), which focus on to eliminate hardship, narrowness in the practice of five universals of *Maqasid*. Meanwhile, the third level of *Maqasid Shari'ah* is *tahsiniyat* (luxuries) which regarded as complementary of human life (BP & Wijaya, 2018).

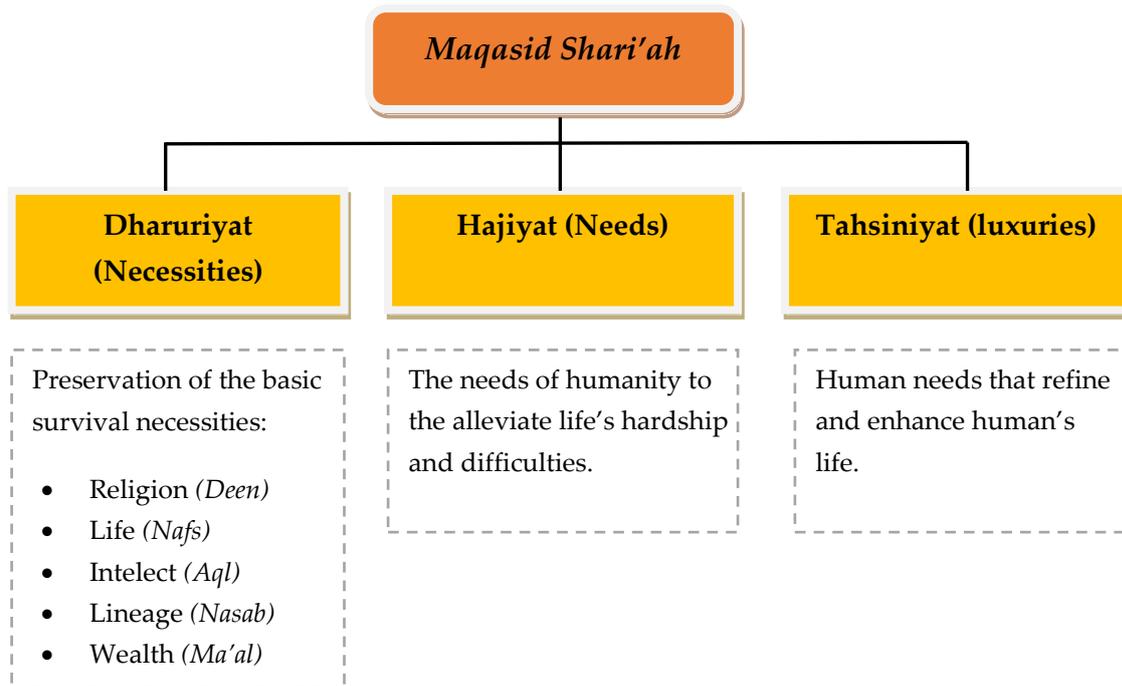


Figure 4. The concept of *Maqasid Shari'ah*

As summary, majority of dental *fiqh* issues is under contemporary *fiqh* (*fiqh muassarah*) which solve based on sources of *al-Ahkam* (primary and secondary sources) with specific methods in *Qawaid Fiqhiyah* (Islamic legal maxims) and *Maqasid Shari'ah* (Figure 5).

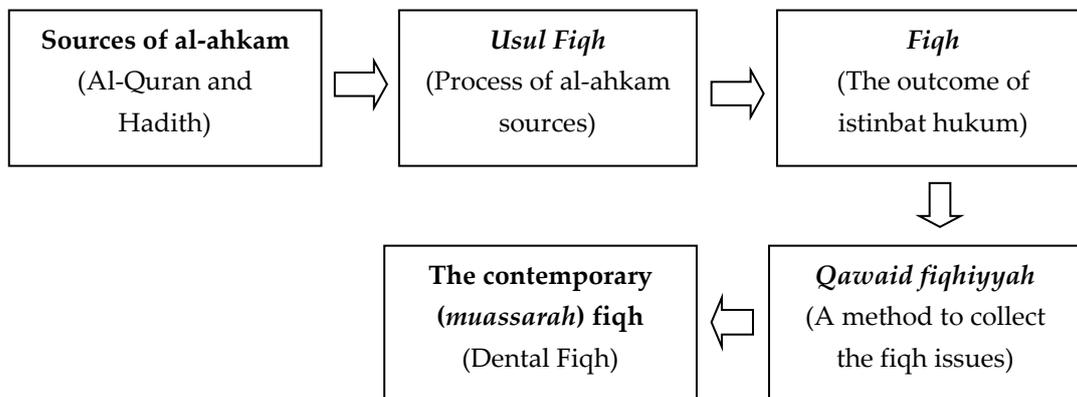


Figure 5. The flowchart of *fiqh* and *Qawaid Fiqhiyah* in dental *fiqh* issues

5. PATIENT-CENTRED CARE DENTISTRY AND ITS RELATION TO MAQASID SYARIAH

To achieve optimal oral health, the dental practitioners must giving the choice to patients to increase patient's compliance (Newton & Asimakopoulou, 2008). From that, PCC has come across for patients being actively involved in shared decision making, supported in making decisions

about treatment that are important to them and experiencing care that is meet their needs and personal preferences (Scambler et al., 2015).

PCC has been defined as being a process where “providing care with respectful and responsive to individual patient preferences, needs and values, as well as ensuring that patient values guide all clinical decisions making” (Corrigan, 2005). Therefore, PCC is a mode of dental health care delivery that puts patient at the forefront of all decisions making and treatment (Scambler et al., 2015).

There are two important roles in PCC which are dental practitioners and their patients. In this context, PCC can be related to *Maqasid Shari'ah* while giving patient information and tailored with their needs and preferences. To achieve that, Muslim dental practitioners should be equipped with current evidence-based dentistry, high skills, Islamic ethics (as mentioned in the roles of Muslim dental practitioners) as well as fundamental *fiqh* and *Maqasid Shari'ah* knowledge. These valuable knowledges would be useful of enhance the ethical responsibility of dental professionals and facilitate management of patient, particularly Muslim. Meanwhile, as patient they need to understand their dental condition and from that shared decision making can be made based on patient and dentist expected outcomes, values and risk based on current evidence-based dentistry and *Maqasid Shari'ah*. Dental practitioners must respect patient's belief, religion and culture. For dependence patient (e.g, geriatric or disable patient), they must include family caregiver for choosing appropriate and suitable treatment options. Being Muslim dental practitioners, they are required to adhere to the directives of their religious beliefs particularly derived from *Al-Quran* and *as-Sunnah*. They should always practice the following aspects include belief in oneness of Allah, treat equally with courtesy (*Ihsan*), always make prayer (*Dua'*) together with putting all the efforts and faith in healing through the blessing of Allah who is the healer. In the Quran verse (26:80), Allah mentioned:

وَإِذَا مَرَضْتُ فَهُوَ يَشْفِينِ ٨٠

When I am ill, He cures me. (Surah As-Shu'ara 26:80)

For instance, a patient came and consulted regarding replacing a missing front tooth with a permanent prosthesis. A dentist discussed with her and explained the clinical conditions and details of potential treatment options of either dental bridge or implant. Pamphlet contains information on procedures and advantage or disadvantage, and graphics of treatments was given to the patient. The patient was also directed to online resources, where she could

access for further evidence-based information. The dentist aware of patient is a Muslim has provided further information regarding materials involved and esthetic concern in relation to maqasid syariah. The patient would feel comfortable to decide after obtaining all the details including matters related to her religious belief.

Finally, the patients' treatment goals of dental management are to increase quality of life for them and ease for them to perform *ibadah* to serve as servant of Allah as well as *khalifah* in the Earth. From there, positive value treatment outcomes can be achieved throughout the management based on patient-centred care approach with relation to the *Maqasid Shari'ah*.

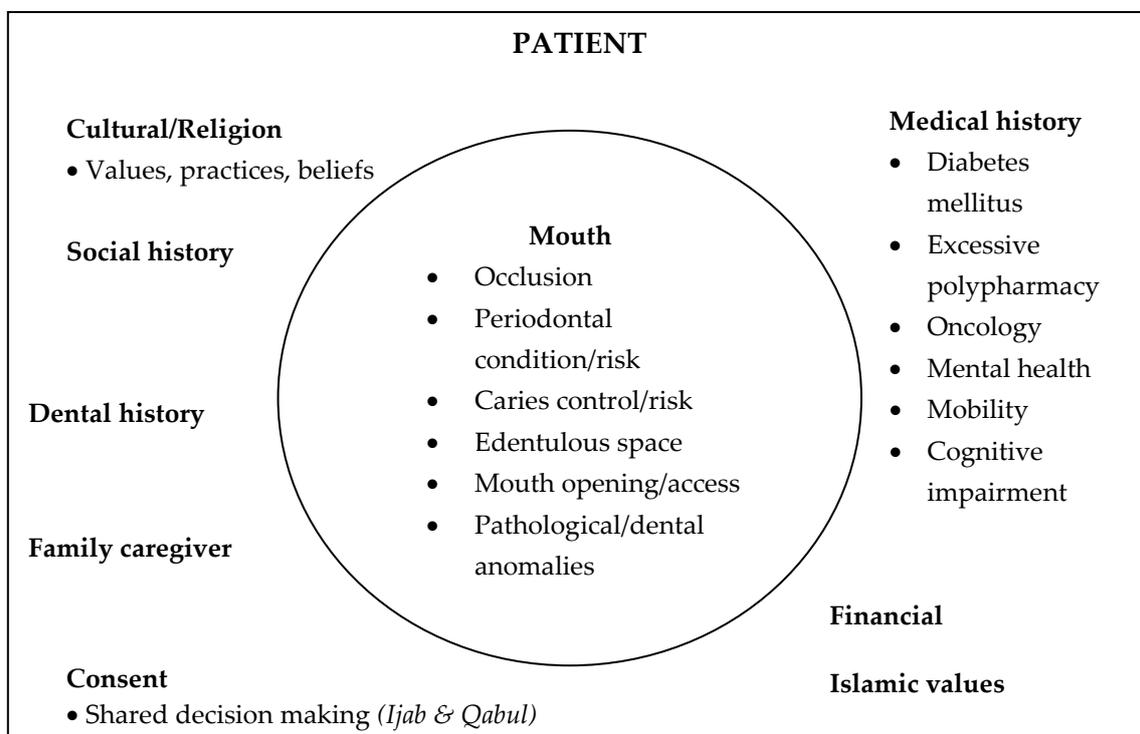


Figure 6. The patient component based on patient-centred care approach in Islamic perspectives

6. CONCLUSION

Patient-centred care approach could be related to the concept of *Maqasid Shari'ah* and *Qarwaid Fiqhiyah* based on the Islamic principles and values that essential in daily dental practice. Future studies and recommendations related to dental *fiqh* issues should be based on the *Maqasid Shari'ah* and *Qarwaid Fiqhiyah* that referred from various sources of Islamic law. The Muslim dental practitioner should have in depth of fundamentals knowledge of dental *fiqh* to enhance patients' trust and compliance for better quality of life.

7. REFERENCES

- Arawi, T. A. (2010). The muslim physician and the ethics of medicine. *J ima*, 42(3), 111-116. <https://doi.org/10.5915/42-3-5403>
- Askitopoulou, H., & Vgontzas, A. N. (2018). The relevance of the Hippocratic Oath to the ethical and moral values of contemporary medicine. Part I: The Hippocratic Oath from antiquity to modern times. *European spine journal*, 27(7), 1481-1490.
- Askitopoulou, H., & Vgontzas, A. N. (2018). The relevance of the Hippocratic Oath to the ethical and moral values of contemporary medicine. Part II: interpretation of the Hippocratic Oath—today's perspective. *European spine journal*, 27(7), 1491-1500.
- As-Sa'di, A. R. N. (2018). Tafseer as-Sa'di. English Edition 1. Publish by International Islamic Publishing House.
- Baderin, M. (2021). 2. The nature of Islamic law. In (pp. 19-25). <https://doi.org/10.1093/actrade/9780199665594.003.0002>
- Baiju, R., Peter, E., Varghese, N., & Sivaram, R. (2017). Oral health and quality of life: current concepts. *Journal of clinical and diagnostic research: JCDR*, 11(6), ZE21.
- BP, A. M., & Wijaya, R. P. (2018). The implementation of maqashid shari'ah as the tool of data analysis in Islamic economic law research. *Al-Iktisab: Journal of Islamic Economic Law*, 2(1), 59-72.
- Carney, T., Bigby, C., Then, S.-N., Smith, E., Wiesel, I., & Douglas, J. (2021). Paternalism to empowerment: all in the eye of the beholder? *Disability & Society*, 1-21.
- Corrigan, J. M. (2005). Crossing the quality chasm. *Building a better delivery system*, 89.
- Cruess, S. R., & Cruess, R. L. (2004). Professionalism and medicine's social contract with society. *AMA Journal of Ethics*, 6(4), 185-188.
- Fortuin, A., Sykes, L., & Crafford, E. (2020). Yes, you can say no. *South African Dental Journal*, 75(4), 219-222.

- Hasan, A., Rahman, Z., Arif, R., Rathakrishnan, B., Achour, M., & Huda, M. (2022). Relationship between Tawakal, Resilience, Internal and External Factors of Mental Health Disorders in A Healthy Sustainable Soul According to Islamic Psychotherapy in COVID 19 Pandemic. *International Journal of Special Education*, 37, 2022-7426.
- Hashi, A. A. (2019). 01 | The Applications of Maqasid Al-Shari'ah in Medicine: An Overview. *Revelation and Science*, 9(02), 1-20.
- Jami` at-Tirmidhi (n.d.). <https://sunnah.com/tirmidhi>
- Jami` Sahih Muslim (n.d.). <https://sunnah.com/muslim>
- Kazdin, A. E. (2008). Evidence-based treatment and practice: new opportunities to bridge clinical research and practice, enhance the knowledge base, and improve patient care. *American psychologist*, 63(3), 146.
- Mills, I., Frost, J., Cooper, C., Moles, D. R., & Kay, E. (2014). Patient-centred care in general dental practice--a systematic review of the literature. *BMC Oral Health*, 14, 64. <https://doi.org/10.1186/1472-6831-14-64>
- Newton, P., & Asimakopoulou, K. (2008). Response to Professor Anderson's commentary on empowerment article by Asimakopoulou, K. *International Diabetes Nursing*, 5(1), 36-36.
- Ozdemir, M. H., Saracoglu, A., Ozdemir, A. U., & Ergonen, A. T. (2005). Dental malpractice cases in Turkey during 1991-2000. *J Clin Forensic Med*, 12(3), 137-142. <https://doi.org/10.1016/j.jcfm.2005.01.003>
- Sadeghi, S., & Ghaffari, F. (2017). Physician's professional competence exam in Adab al-Tabib. *Journal of Islamic and Iranian Traditional Medicine*, 8(3), 389-397.
- Scambler, S., Gupta, A., & Asimakopoulou, K. (2015). Patient-centred care--what is it and how is it practised in the dental surgery? *Health Expectations*, 18(6), 2549-2558.
- Tariq, R. A., & Hackert, P. B. (2022). Patient Confidentiality. In *StatPearls*. StatPearls Publishing Copyright © 2022, StatPearls Publishing LLC.

Weller, G. (2019). Trust Me, I'm a Doctor: Proposal for a Professional Doctorate Pledge. *Work Based Learning e-Journal International*, 8(1), 195-203.

YAAKOB, H. (2022). Dento-Legal Issues in Malaysia: A General Guide for Dental Practitioners. *Malaysian Journal of Health Sciences/Jurnal Sains Kesihatan Malaysia*, 20(1).

Yacob, N., Ramli, H., Abdul Majid, M. N., Abdul Fatah, F., & Md Zahid, D. (2017). The Application of Maqasid Shariah and Legal Maxims in Aesthetic Dentistry Involving Malocclusion and Root Canal Treatment: Case Discussion. *Advanced Science Letters*, 23, 4550-4553. <https://doi.org/10.1166/asl.2017.8894>

Zietlow, K., Dubin, L., Battles, A., & Vitale, C. (2022). Guardianship: A medicolegal review for clinicians. *Journal of the American Geriatrics Society*.

Disclaimer

The views expressed in this article are those of the author. Journal of Fatwa Management and Research shall not be liable for any loss, damage or other liability caused by / arising from the use of the contents of this article.