

Ethical Foundations of Clinical Practice

Foundations of Healthcare Ethics Seminar Sequence
Fall 2019

Presented by:

Carrie Stott, PhD, LSW

Program Development Director, Consortium Ethics Program
Adjunct Professor, Duquesne University School of Nursing

Ethics:

The branch of philosophy dealing with values relating to human conduct.

Ethics look at the rightness and wrongness of certain human actions and to the goodness and badness of the motives and outcomes of such actions.

Bioethics:

An interdisciplinary field of study that seeks to examine controversial issues brought about by advances in science and technology.

- This broad field consists of healthcare ethics, animal ethics, and environmental ethics.
- The field is multidisciplinary because it takes into consideration relationships between science, biotechnology, medicine, politics, law, philosophy, and a variety of other fields.

Healthcare Ethics:

The area of bioethics that focuses on the controversial issues in healthcare including clinical care, clinical research and public health.

- Clinical ethics looks at ethical issues that arise between patients and providers, and seeks to assist in resolving and preventing these issues.

The Oath of Hippocrates

SWEAR by Apollo the physician, and Aesculapion, and Health, and All-heal, and all the gods and goddesses, that according to my ability and judgment, I will keep this Oath and this stipulation — to reckon them who taught me this Art equally dear to me as my parents, to share my substance with them, and relieve the necessities of them; to look upon his offspring in the same footing as my own brothers, and to teach them this Art, if they shall wish to learn; to refuse to or stipulations, and that by precept, lecture, and every other mode of instruction, I will impart a knowledge of the Art to my own sons, and those of my teachers, and no disciples bound by a stipulation and oath according to the law of medicine, but to men others; if I will follow the system of regimen which, according to my ability and judgment, I consider for the benefit of my patients, and abstain from whatever is deleterious and unjust; I will give no deadly medicine to one of whom I am engaged to give care; and in like manner I will not give to a woman a pessary to produce abortion. With purity and with holiness I will pass my life and practice my Art. I will not use enemas following under the name, but will have due to be done by men who are practitioners of that work. I keep the Oath of Aesculapion. I will give none of the secret of the Art, and will abstain from every voluntary act of malice and corruption and feigning, from the seduction of females or males, of freemen and slaves. If whatever, in connection with my professional practice, or any in connection with it, I see or hear, in the life of man, which ought not to be published abroad, I will keep it secret, as reckoning that all such should be kept secret. While I continue to keep this Oath unshaken, may I be granted to live in happy life and the practice of the Art, respected by all men, in all times; but should I trespass and violate this Oath, may the reverse be my lot.



Rapid advances occurred in science and technology following World War II. These advances changed the course of illness and disease, as well as the practice of medicine leading to the need for a re-evaluation of the role of ethics in healthcare.

<u>Prior to WW II</u>	<u>Following WW II</u>
<ul style="list-style-type: none"> • Limited science and technology • Common illness infectious in nature Small pox, dysentery, plague • Illness tended to have a rapid onset followed quickly by recovery or death • Life expectancy was low, infant mortality was high • Paternalism was the accepted relationship between doctors and patients • Compassion was exercised by all doctors and providers 	<ul style="list-style-type: none"> • Rapid advances in science and medical technology • Rise in chronic and degenerative diseases Cancer, stroke, heart disease... • Many conditions are not immediately terminal and require long term monitoring and intervention • Life expectancy increased, infant mortality rates decreased • Shared decision making replaced paternalism as the accepted patient-provider relationship • Technology and pharmaceutical use increased leading some to claim these replaced compassion

Ethical Dilemmas

A dilemma is a situation that requires a choice be made between two or more alternatives. Alternatives which include equally desirable options or equally undesirable options. Dilemmas become morally relevant when each alternative can be justified by moral rules or principles.

“As a member of your hospital’s ethics committee, you have been called by Dr. Thomas, a second-year surgical resident who was paged for the following consult: Ms. Lawrence is a 23-year-old woman who was returning home from her bridal shower when her car skidded on the ice and hit an oncoming truck. Although her multiple injuries are serious, with immediate surgery and replacement of lost blood, her chances of full recovery are excellent. Ms. Lawrence is in considerable pain, but she appears coherent and her answers to Dr. Thomas’s questions reflect understanding of her condition, the treatment options, and their consequences. Because of her beliefs as a Jehovah’s Witness, however, she will not accept blood or blood products and will not consider surgery unless she is promised that it will be done without transfusions. Dr. Thomas knows that surgical and hemodynamic intervention can prevent this patient’s almost certain death. He also knows that saving her life in this way will violate Ms. Lawrence’s deeply held religious convictions.” (Post, et. al. p. 3)

To determine what to do when confronted with a moral dilemma we must expand our framework of thinking to critically examine all relevant options.

What, all things considered, ought to be done or ought not be done?

Guiding Principles of Healthcare Ethics

- **Respect for Autonomy**
People have the right to make their own decisions with understanding and without controlling influence. Furthermore, individual decisions should be respected.
 - ✓ Moral decision making assumes most people are rational agents and capable of making informed and voluntary decisions.
 - ✓ When people are incapable of making their own decisions, a surrogate decision maker will make decision based upon the best interest of the patient.
- **Beneficence**
The duty to try to bring about benefit to the patient.
- **Nonmaleficence**
The duty to prevent harm.
- **Justice**
The fair distribution of benefits and burden among all participants or members of a particular social system.

*Beauchamp, Tom L. and James F. Childress. Principles of Biomedical Ethics. 7th ed. New York: Oxford University Press, 2012.

Ethics Committees

Ethics committees provide a forum for discussing ethical issues related to patient care.

They are made up of individuals from an array of healthcare disciplines as well as members of the community. The group may have a formally trained ethics professional but most members are still not formally trained in biomedical ethics.

The goals are to enhance the delivery of excellent patient care by:

- providing education on bioethical issues to the organization's employees and to the community at large.
- providing ethics case consultation.
- advising hospital executives on the ethical considerations relevant to existing hospital policy or new policies being developed.

Ethics committees are not standardized.

The Joint Commission recognizes the importance of ethics committees in quality issues and requires that all healthcare organizations have access to an ethics mechanism.



A significant focus of healthcare ethics is that most medical decisions can be made at the bedside not in the courtroom!

How can ethical medical decisions be made at the bedside?

1. Each clinician can practice **excellent clinical care**. Excellent clinical care includes consistently incorporating ethical understanding and the application of ethical knowledge into practice.
2. Through the incorporation of **ethics committees** into organizations where clinical care is provided.
3. Through the proper use of **clinical ethics consultations**.
