CASE: A SON'S GUILT, A FATHER'S WISHES

Following a massive stroke, Mr. Smith was transported from the Rope nursing facility to a local hospital by ambulance on July 4, 2004. Smith, 94 years of age, had been a resident at the Rope nursing facility for the past 12 years. Before being placed in Rope, Smith had been living with Mr. Curry, a close friend, for the previous 8 years. He had an advance directive indicating that he would never want to be placed on a respirator.

Smith's son and only child, Barry, who now lives in Los Angeles and had been estranged from his dad for more than 20 years, was notified by Curry that his dad had been admitted to the hospital in a terminal condition. Smith had mistakenly been placed on a respirator by hospital staff contrary to the directions in his advance directive, which had been placed on the front cover of Smith's medical chart. Curry, who was legally appointed by Smith to act as his health care surrogate decision maker, called Barry and explained that, according to his dad's wishes and advance directives, he was planning to ask hospital staff to have the respirator removed. Barry asked Curry to wait until he flew in from California to see his dad. Curry agreed to wait for Barry's arrival the following day, July 5. After arriving at the hospital, Barry told Curry that he would take responsibility for his dad's care and that Curry's services would no longer be needed. Barry told hospital staff that he objected to the hospital's plan to remove his father from the respirator. He said that he needed time to say goodbye to his dad, which he did by whispering his sorrows in his dad's ears. Smith, however, did not respond. Barry demanded that the hospital do everything that it could to save his dad's life, saying, "I don't know if Dad heard me. We have to wait until he wakes up so that I can tell him how sorry I am for not having stayed in touch with him over the years." Smith's physicians explained to Barry that there was no chance Smith would ever awaken out of his coma. Barry threatened legal action if the hospital did not do everything it could to keep his dad alive. Smith's physician again spoke to Barry about the futility of maintaining his dad on a respirator. Barry remained uncooperative. The hospital chaplain was called to speak to Barry, but had little success. Finally, hospital staff requested an ethics consult.

Ethical and Legal Issues

1. Discuss the ethical dilemmas in this case.
2. Discuss the issues and the role of the ethics committee in this case.

HELPFUL HINTS

The reason for studying ethical and legal issues is to understand and help guide others through the decision-making process as it relates to ethical dilemmas. The following are some helpful guidelines when faced with ethical dilemmas:

- Be aware of how everyday life is full of ethical decisions and that numerous ethical issues can arise when caring for patients.
- Help guide others to make choices.
- Ask your patient how you might help him or her.

- Be aware of why you think the way you do. Do not impose your beliefs on others.
- Ask yourself whether you agree with the things you do. If the answer is no, ask yourself how you should change.
- When you are not sure what to do, the wise thing to do is to talk it over with another person, someone whose opinion you trust.
- Do not sacrifice happiness for devotion to others.
- Do not lie to avoid hurting someone's feelings.

CHAPTER REVIEW

1. Ethics committee serves as a resource for patients, families, and staff, offering an objective counsel when dealing with difficult health care dilemmas.
2. Ethics committee should be structured to include a wide range of community leaders in positions of political stature, respect, and diversity.
3. The goals of the ethics committee are to:
   - Promote the rights of patients.
   - Promote shared decision making between patients and clinicians.
   - Assist the patient and family in coming to consensus when faced with ethical dilemmas.
4. The functions of ethics committees are multifaceted and include:
   - Policy and procedure development.
   - Staff and community education.
   - Consultation and conflict resolution.
     - A resource tool in resolving ethical dilemmas.
     - Patients and family should be encouraged to participate in addressing ethical dilemmas.
5. Decision making is difficult when there are:
   - A variety of value beliefs held by patients, family members, and caregivers.
   - Alternative choices that offer both good and bad outcomes.
   - Limited resources.
6. The resolution of ethical dilemmas is a perplexing task. Ethics committee member must be prepared to understand the challenge by actively participating in the decision-making process without bias.

TEST YOUR UNDERSTANDING

TERMINOLOGY

circular reasoning
conflict resolution
ethical decision making
health care ethics committee
ethics consultation
partial reasoning
reasoning and decision making