GWUH ETHICS COMMITTEE

ETHICS CONSULTS

“TIPPING POINTS” AND “CHECK LISTS”
What is a tipping point?

AN ISSUE THAT PROVOKES AN ETHICS CRISIS AND ETHICS CONSULT
What is a check list?

ACTIONS THAT MAY HELP TO ADDRESS OR AVERT AN ETHICS CRISIS
CASE 1:
WHO SHOULD DECIDE?
An elderly male with advanced cancer has undergone multiple surgical procedures to debulk the tumor. Chemotherapy and radiation have failed. The surgeon is proposing yet another debulking procedure to “buy some time”. The ICU attendings believe further surgery would be futile.
Case 1, cont’d

The patient is physically wasted but cognitively intact. He is, however, usually very sedated with high dose pain meds.

He has appointed, in writing, a durable power of attorney for health care— a close friend of many years standing. She believes he would want no further interventions and agrees with the ICU attendings’ assessment that the patient belongs on hospice.

His second wife of only a few years disagrees. She prefers the surgeon’s recommendations, and asserts that the physicians should listen to her, as the patient’s wife.
What are the ‘Tipping Points’ in this case?
Case 1: Tipping points

- Absence of direct information about patient preferences
- Conflict among the clinicians
- Conflict between surrogate decision makers
What ‘Check List’ actions might have averted this crisis?
Case 1: Check List actions

• Involve the patient directly in decision making

• Hold a clinician conference to arrive at a coherent and unified plan of care; or, a set of options all can agree to

• Consult with Palliative Care
CASE 2:

‘SHE WON’T COOPERATE.’
Case 2

60ish y/o woman is admitted with sepsis, and limb pain, with suspected osteomyelitis. After initially agreeing to antibiotic therapy, she starts to refuse blood draws and imaging procedures. She pulls out her IV repeatedly. She is uncooperative and hostile.

She repeatedly asks to leave the hospital. Although she has been in the hospital for two weeks, she has no known surrogate.

The attending believes that she will lose her leg if she does not remain inpatient for IV antibiotics and he questions her ability to care for herself. Although he isn’t familiar with her home situation, he does not want to discharge her.
What are the ‘tipping points’ in this case?
Case 2: Tipping Points

• Patient may lack capacity to make complex medical decisions

• External factors or unspoken fears may be influencing her refusals

• Lack of information about her support network/ surrogate adds to attending’s distrust
What ‘Check List’ actions might have averted this crisis?
Case 2: Check List actions

• Consult psychiatry to assess capacity

• Identify surrogate and/or external supports early in admission
  – If no surrogate, seek guardianship.

• Explore of reasons for refusals; seek out opportunities for compromise.
Preventive Ethics

Aversion of Ethics Crisis

- Anticipate ‘Tipping Points’
- Consult ‘Check List’ for actions that address ‘Tipping Points’
- Seek Ethics Consult EARLY
To Call a Consult

Medical Staff Office:  202-715-4676

Ethics Staff  (David Claussen)  202-715-4475

Web Exchange: http://svrwebexch/directory
search on call for Ethics Committee