New York Medical College School of Health Sciences and Practice Department of Health Policy and Management

ETHICS IN HEALTH CARE – HPMM 6062

Semester: Fall, 2017

Faculty: Daniel G. O'Hare, Ph.D.

Contact Information: E-mail: Daniel OHare@nymc.edu

Meeting Day and Time: Tuesdays, 4:30 to 6:50 p.m.

Room: 112

Students are reminded that all instructional materials used in courses are the property of the course instructor. Use of course materials is limited to students registered in the course. Dissemination of course materials in any form or on any electronic platform requires advance permission of the course instructor. Failure to follow this process is a violation of the Student Code of Academic Integrity and Professionalism.

I. Course Description:

The course will be directed at the practical application of the Principles of Health Care Ethics to contemporary issues in health care planning, management, and delivery. Particularly in an era of increasing regulatory mandates and decreasing availability of both human and institutional resources, an understanding of the function of ethical analysis is of critical importance in the identification, elucidation, and resolution of health care controversies.

To that end, the course will include an overview of the philosophical foundations of the principles of medical ethics and present a methodology for their employment in the attempted resolution of the myriad of issues which obtain at the confluence of health care delivery and morals. Of particular importance will be a consideration of the issues of patient and professional autonomy, beneficence and non-maleficence, confidentiality, informed consent, and distributive justice.

Application to contemporary concerns will include attention to the questions of euthanasia, physician-assisted suicide, and AIDS. The course will be conducted as a seminar centered on the analysis of case studies.

Pre/Co-requisites and Credit Assigned:

This three credit course has no prerequisites.

Course Requirements:

Minimally, it is expected that to satisfy requirements for the course, students will:

- attend class,
- prepare reading and other assignments,

- participate in discussions, and
- both present case studies individually assigned and contribute to the analysis of others.

Thus, in addition to the reading assignments, requirements for the completion of the course will include brief reflection papers, assigned in-class case presentations, and a final comprehensive case study.

II. Learning Objectives:

The course is intended to provide an understanding of and an appreciation for the function of philosophical inquiry and ethical analysis in the field of health care delivery. Attempting to provide students with the tools requisite to negotiate the health care system more effectively in general, either professionally or personally, this consideration of health care ethics is specifically designed to expose individuals to the process of philosophical reasoning as a basis for the application of certain principles in the resolution of difficulties most often encountered in the particular circumstances of either seeking or providing health care.

The course will highlight the function of values clarification in ethical analysis, identify recurrent medical-ethical entanglements impacting the delivery of care, comprehensively detail the major principles of health care ethics, and suggest a manner of their employment to enhance the process of decision-making.

To amplify lecture material and in an effort to facilitate gaining familiarity with the application of the principles of health care ethics in the process of decision-making, clinical cases will be introduced for analysis and discussion.

Upon completion of the course, it is anticipated that students will have:

- 1. gained a familiarity with the process of philosophical reasoning as applied to traditional issues as well as contemporary questions of health care delivery;
- 2. engaged in the process of values clarification as an essential propaedeutic to ethical analysis;
- 3. identified a variety of bioethical quandaries which limit access to and compromise the delivery of health care;
- 4. understood the rationale for and the potential contribution of the principles of health care ethics; and
- 5. developed a facility with the employment of those principles in resolving conflicts at the interface of health care delivery and morals.

III. Assessment and Grading Policy:

Criteria for Evaluation:

Criteria (exercises, examinations, papers, participation and/or other activities as assigned)	Points per criteria	Learning Objective Met/Measured
Class participation	33.33	
In class case presentations	33.33	
Final case study	33.33	
Total Points	100	

Grading System:

Letter grade	Total points out of 100
A	95-100
A-	90-94
B+	87-89
В	84-86
B-	80-83
C +	77-79
C	74-76
C-	70-73
F	<70

IV. Instructional Materials (textbooks, reading, case studies, and other materials)

<u>Required</u> readings will be <u>provided</u> <u>gratis</u> and <u>assigned</u> <u>sequentially</u> to supplement lecture presentations and case discussions.

V. Student Code of Academic Integrity and Professionalism

http://www.nymc.edu/media/schools-and-colleges/nymc/pdf/shsp/StudentCodeofAcaIntegrity.pdf

VI. Course Evaluations: Important Notice for All Students

You are required to fill out a course evaluation for this course. Near the end of the course you will be sent a URL address to your NYMC email account, where you can go online and complete the evaluation. We are not permitted to give an official final grade to any student. This information is emailed to you from the registrar's office.

VII. Class Schedule – sessions 1-14:

The following is a topic outline accompanied by the anticipated chronological sequence of readings. From a certain point in the course, each lecture will be supplemented by the presentation of case studies assigned to students.

Lecture 1 Ov

Overview of the Course Nature of Philosophical Reasoning Process of Ethical Analysis Medical Ethics as an applied field Issues of Entanglement

References:

- 1. "Ethical Decision-Making in the Medical Context," in Flynn, E., <u>Issues in Health Care Ethics</u>. Upper Saddle River, New Jersey: Prentice-Hall, 2000.
- 2. "Principles of Medical Ethics in Supportive Care: A Reflection," O'Hare, D., in <u>Supportive Care In Cancer</u>, Vol. 12, No. 2, 2004.
- 3. "Imelda," Selzer, R., in <u>Letters to a Young Doctor</u>. New York: Simon and Schuster, 1982.

Lecture 2

Values Clarification Nature of the "Good" Theories of Moral Reasoning Freedom and Responsibility Dialectic Defining Personhood

Reference:

1. "Concepts of Personhood" in Beauchamp, T. and Walters, L., <u>Contemporary Issues in Bioethics</u>, 3rd ed. Belmont, California: Wadsworth, 1989.

Lecture 3 Principle of Autonomy Personal and Professional Perspectives

References:

1. "The Principle of Respect for Autonomy" in Beauchamp, T. and Childress, J., <u>Principles of Biomedical Ethics</u>, 6th ed. New York: Oxford, 2009.

2. "Paternalism and Autonomy" in Flynn, E., <u>Issues in Health Care Ethics</u>. Upper Saddle River, New Jersey: Prentice-Hall, 2000.

Lecture 4 Advance Directives

References: 1. "Advance Directives" in Flynn, E., <u>Issues in Health Care Ethics</u>. Upper Saddle River, New Jersey: Prentice-Hall, 2000.

- 2. Appointing Your Health Care Agent: New York State's Proxy Law. Albany: New York State Department of Health, 2001.
- 3. Five Wishes. Aging With Dignity. Tallahassee, Florida, 1997.
- 4. "Avoid Leaving Your Heirs With a Headache," <u>Wall Street</u> Journal, April 18, 2004.

Lecture 5 Principles of Non-Maleficence and Beneficence

References: 1. "Non-Maleficence" in Beauchamp, T. and Childres, J., <u>Principles of Biomedical Ethics.</u>, 6th ed., New York, New York: Oxford, 2009.

2. "Beneficence" in Beauchamp, T. and Childres, J., <u>Principles of</u> Biomedical Ethics., 6th ed., New York, New York: Oxford, 2009.

Lecture 6 Principle of Informed Consent

Reference: 1. "Informed Consent" in Beauchamp, T. and Childress, J., <u>Principles</u> of Biomedical Ethics, 1st ed. New York: Oxford, 1979.

Lecture 7 Principle of Confidentiality

References: 1. "Privacy," in Beauchamp, T. and Childress, J., <u>Principles of Biomedical Ethics</u>, 6th ed., New York: Oxford, 2009

2. "Professionalism in Health Care Occupations" in Flynn, E., Issues in Health Care Ethics. Upper Saddle River, New Jersey: Prentice-Hall, 2000.

Lecture 8 Principle of Distributive Justice

References: 1. "Justice," in Beauchamp, T. and Childress, J., <u>Principles of Biomedical Ethics</u>, 6th ed., New York: Oxford, 2009.

2. "Ethical Responses to Sickness" in Flynn, E., <u>Issues in Health Care</u> Ethics. Upper Saddle River, New Jersey: Prentice-Hall, 2000.

Lecture 9 Rational-Irrational Dimensions Begin "Ends of Life" issues

References:

- 1. "Ethical Issues at Life's Beginning" in Flynn, E., <u>Issues in Health Care Ethics</u>. Upper Saddle River, New Jersey: Prentice Hall, 2000.
- 2. "Abortion and Maternal Fetal Conflict," in Garrett, Y., et. al., <u>Health Care Ethics.</u> 5th ed., Upper Saddle River, New Jersey: Prentice-Hall, 2010.

Lecture 10 Parameters of the Abortion Debate

Lectures 11 and 12 Death and Dying Questions Avoidance, Denial, Attempted Control "Killing" vs. "Letting Die" Euthanasia

References:

- 1. "Euthanasia" in Flynn, E., <u>Issues in Health Care Ethics</u>. Upper Saddle River, New Jersey: Prentice-Hall, 2000.
- 2. "Artificial Hydration and Nutrition in the Terminally Ill," Frederich, M., in <u>American Academy of Hospice and Palliative Medicine</u>, Fall, 2002.
- 3. "Medical Futility, Personal Goods, and Social Responsibility," Day, L., in <u>American Journal of Critical Care</u>, Vol. 18, No. 3, 2009.
- 4. "Culture of Life-Politics at the Bedside, The Case of Terri Schiavo, Annas, G., <u>The New England Journal of Medicine</u>
- 5. "Terri Schiavo–A Tragedy Compunded," Quill, T., <u>The New</u> England Journal of Medicine

Lectures 13 Physician-Assisted Suicide

References:

- 1. "The Supreme Court and Physician-Assisted Suicide—The Ultimate Right," Angell, M., in <u>The New England Journal of Medicine</u>, Vol. 336, No. 1, January 2, 1997.
- 2. Legalized Physician-Assisted Suicide in Oregon-The First Year's Experience," Chin, A. et. al., in <u>The New England Journal of Medicine</u>, Vol. 340, No. 7, February 18, 1999.

- 3. "Competent Care for the Dying Instead of Physician-Assisted Suicide," Foley, K., in <u>The New England Journal of Medicine</u>, Vol. 336, No. 1, January 2, 1997.
- 4. "Determinants of the Willingness to Endorse Assisted Suicide," Portenoy, R. et. al., in <u>Psychosomatics</u>, Vol. 38, No.3, May-June, 1997
- 5. "Physician-Assisted Death-From Oregon to Washington State," Steinbrook, R., in <u>The New England Journal of Medicine</u>, Vol. 359, No. 24, December 10, 2008.
- 6. "Physician-Assisted Death in the United States: Are the Existing 'Last Resorts' Enough," Quill, T., <u>Hastings Center Report</u>, Vol. 38, no, 5, 2008.

Lecture 14 Review

N.B. Additional articles of interest will be made available and special topics will be presented as time permits.

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