Ethical Decision-making in Anesthesia Practice

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DEFINITION OF TERMS

LAW--Definition

A binding custom or practice of a community.

The whole body of such customs, practices, or rules.

The control brought about by the existence or enforcement of such law

LEGAL--Definition

Conforming to or permitted by law or established rules


Criminal Law vs Civil Law

<table>
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<th>TABLE 1. Differences between Criminal and Civil Law</th>
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<td><strong>Criminal Law</strong></td>
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<td>Crime as public wrong</td>
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<td>Punishment as incarceration or death</td>
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<td>Government as prosecutor</td>
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<td>Proof: Beyond a reasonable doubt</td>
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AND LET’S NOT FORGET OUR OTHER FRIENDS...
But laws give us order and so they have to be a good thing... right?

Fine...but that could never happen here...right?
JIM CROW LAWS

"IT SHALL BE UNLAWFUL for a negro and white person to play together or in company with each other in any game of cards or dice, dominoes, or checkers."

CHICAGO, ILLINOIS 1895

"IT SHALL BE UNLAWFUL for any white prisoner to be handcuffed or otherwise chained or tied to a negro prisoner."

KANSAS, 1903

"NO COLORED BARBER shall serve as a barber to white persons or girls."

ATLANTA, GEORGIA, 1874

"MARRIAGES ARE VOID when one party is a white person and the other is possessed of one-eighth or more negro, Indian, or Chinese blood."

NEBRASKA, 1911

RATFORD'S CAFE
WHITE
COLORED

DRINKING FOUNTAIN
WHITE
COLORED
US Supreme Court

• 1857: In Dred Scott v. Sanford
• 1896: In Plessy v. Ferguson
• 1944: In Korematsu v. U.S.
• 1954: In Brown v. Board of Education
But we’re not talking about racial discrimination... so, what does this have to do with healthcare?
**1907 Indiana Eugenics Law**

Indiana Supreme Court ruled 1907 law unconstitutional 1921 citing denial of due process under Fourteenth Amendment. 1927 law reinstated sterilization, adding court appeals. Approximately 2,500 total in state custody were sterilized. Governor Otis R. Bowen approved repeal of all sterilization laws 1974; by 1977, related restrictive marriage laws repealed.

**Legislative Status of Eugenical Sterilization in the United States**

**BUCK v. BELL**

In 1924, Virginia, like a majority of states then, enacted eugenic sterilization laws. Virginia’s law allowed state institutions to operate on individuals to prevent the conception of what were believed to be “genetically inferior” children. Charlottesville native Carrie Buck (1905–1942), involuntarily committed to a state facility near Lynchburg, was chosen as the first person to be sterilized under the new law. The U.S. Supreme Court, in Buck v. Bell, on 2 May 1927, affirmed the Virginia law. After Buck more than 6,000 other Virginians were sterilized before the most relevant parts of the act were repealed in 1974. Later evidence eventually showed that Buck and many others had no “hereditary defects.” She is buried south of here.
So, all of these things were legal...but did that make them right?

Besides, that’s all in the past... right?
Which brings us to our topic today:

Should we do something just because we can?

This leads us to…
ETHICS--Definition

A set of moral principles

The principles of conduct governing an individual or a group

A guiding philosophy


ETHICAL--Definition

Conforming to accepted standards of conduct

A *socially defined* basis of right and wrong


To Be... Or Not To Be...
To tube...or not to tube

Simple....right?

2 + 2 = ?

Not so much...
MORAL--Definition
Sanctioned by or operative on one’s conscience


DIFFERENCES BETWEEN LAW AND ETHICS IN ANESTHESIA PRACTICE

• The law tells us what we must do or not do to avoid punishment and has the threat of sanctions, imposed on us by force if necessary, if we fail to comply.

• Ethics tells us how we ought to behave as a member of our profession with the professional body having the right to rescind or refuse admittance/continuance for failure to comply.
The AANA CODE OF ETHICS

PURPOSE:

The Code of Ethics offers guidance to the Certified Registered Nurse Anesthetist to make ethical decisions in all practice roles.

ETHICAL RESPONSIBILITY

The CRNA’s ethical responsibility is primarily to the patient, as well as to the profession, other healthcare providers, self, and society. The CRNA acknowledges, understands, and is sensitive to the vulnerability of the patient undergoing anesthesia, pain management, and related care and preserves the patient’s trust, confidence, and dignity.

PERSONAL RESPONSIBILITY

The CRNA has the personal responsibility to understand, uphold, and adhere to these ethical standards of conduct.

Deviation from the Code of Ethics occurs rarely in practice and any deviation must be supported by ethical decision making, compelling reasons, and best judgment specific to the situation.
RESPONSIBILITY TO THE PATIENT

The CRNA respects the patient's moral and legal rights, and supports the patient's safety, physical and psychological comfort, and well-being.

The CRNA collaborates with the patient and the healthcare team to provide compassionate, holistic, patient-centered anesthesia, pain management, and related care.

Respects human rights and the values, customs, culture, and beliefs of patients and their families.

PATIENT'S RIGHT TO SELF-DETERMINATION

Presents accurate, complete and understandable information to the patient to facilitate informed healthcare decisions.

Encourages patients, including minors, to participate in healthcare decision making that is appropriate for their developmental capacity.

Supports a patient's decision making without undue influence or coercion.
Acts in the patient’s best interest and advocates for the patient’s welfare

If the CRNA has a moral, religious or ethical conflict related to the patient’s healthcare decisions or plan for care, the CRNA may, without judgement or bias, transfer care to an appropriately credentialed anesthesia provider willing to perform the procedure.

Protects patients from healthcare providers who are incompetent, impaired, or engage in unsafe, illegal, deceptive, abusive, disrespectful, or unethical practice.
Participates in honest and transparent disclosure of an adverse or unanticipated event to the patient and others with the patient’s consent.

RESPONSIBILITY AS A PROFESSIONAL
As an independently licensed professional, the CRNA is responsible and accountable for judgments made and actions taken in his or her professional practice.

Requests or orders by physicians, other healthcare professionals, or institutions do not relieve the CRNA of responsibility for judgments made or actions taken.

Competence and Responsibility in Professional Practice
Addresses issues of scope of practice, competency, evidence-based practice and continuing education. Also states:

Is honest in all professional interactions to avoid any form of deception.

Treats all others, including patients, families, staff, students, and colleagues, in a culturally sensitive manner and without prejudice, bias, or harassment.

Maintains professional boundaries in all communications and actions.
ROLE MODELLING AND EDUCATION OF OTHERS

*Fosters a safe and trusting environment for successful learning for students, colleagues, and members of the healthcare team.*

Educates the student registered nurse anesthetist regarding the ethical responsibilities of the profession.

OTHER SECTIONS

- The Profession
- Leadership
- Responsibility in Research
- Responsibility in Business Practices
- Responsibility When Endorsing Products and Services
- Responsibility to Society

COMMON ETHICAL ISSUES IN ANESTHESIA PRACTICE
The busy schedule we haven’t got time for a spinal or PERIPHERAL block blues 🎼...
Decisions...decisions...decisions...

THE SOLUTION?
IT'S NOT HARD, REALLY.

Change jobs...he really looks happy!
OR JUST REMEMBER....

YOU'RE NOT THERE FOR YOU...OR THE SURGEON...OR THE HOSPITAL SYSTEM...

YOUR THERE FOR THEM!!!

Treat everyone like they were your mom or dad.
Or someone else you love…

QUESTIONS?