**Ethics Work-up 3**

Due: Tuesday, December 6 by 4pm; upload to Canvas

under “Assignments” in .doc or .pdf format

**Instructions for Work-up 3**

1. Read Case Study C below and complete the Ethics Work-up. The Complete Ethics Work-up guide can be found at the bottom of “Assignments and Grading” on the digital syllabus.
2. You will find the grading rubric immediately following the case study below.
3. Copy each step of the rubric into your document (.doc or .pdf).
4. Place all your responses in bullet point lists under each rubric step, rather than paragraphs
5. Upload to Canvas under “Assignments” by Tuesday 12/6 by 4pm

*\*\*Please ensure that you fill out the rubric within the case study file (highlighted yellow) for yourself before you submit.*

**Case Study C: Advanced Directives**

Ms. T is a 55-year old woman who lives alone and is very active and in good health. However, after playing golf one day, she suffers a subarachnoid hemorrhage (bleeding in the brain). She was admitted to the hospital unconscious and in respiratory distress. Her physicians determine that the source of the hemorrhage was likely a ruptured cerebral aneurysm. Although her brainstem remains intact, Ms. T has cardiac arrhythmias. She also is unable to communicate. Ms. T is intubated and provided ventilator support.

Mrs. T’s sister is contacted and she arrives at the hospital with a directive to physicians (living will) bearing Ms. T’s signature and the signature of a witness. Written on the document is the statement, *“I fear death less than the indignity of dependence and deterioration.*” The neurologist believes that Ms. T has a good chance of recovery with little functional deficit. He mentions to the sister that Ms. T might have right-side paralysis but will likely regain cognitive function. The neurologist further explains that he expects Ms. T to be able to return home with assistance from her sister or a home health agency. The sister responds, *“I know she wouldn’t want to live with that.”* The sister requests that life-sustaining treatment be withdrawn.

Should Mrs. T’s physician extubate her immediately given that doing so will likely result in Ms. T’s death? Make an ethically justified argument for your recommendation.

Background: This case actually occurred in Ohio Hospital in 2004. Source: Baylor College of Medicine

Outcome: Your facilitator can provide the outcome at the end of the exercise.*Grading rubric on next page*

**Ethics Work-up 3 Grading Rubric (60 points total)**

*\*Please fill out rubric for yourself (column highlighted in yellow) for Work-up 3 before submitting. Please aim for Aristotle’s “Golden Mean” regarding the virtue of honest assessment based on the rubric criteria, avoiding exaggeration and modesty. “Notes” section is not required, but you can add anything you like there.*

*For this Work-up, please copy each step into your document and put all your responses in bullet point lists under that step, rather than paragraphs. Upload completed file (.doc, .pdf).*

*Please see details on each appeal can be found in the Complete Ethics Work-up Guide (*at the bottom of “Assignments and Grading” on the digital syllabus*).*

|  |  |  |  |
| --- | --- | --- | --- |
| **Task** | **Points possible** | **Points earned** | **Notes/Feedback** |
| **Step 1.** Identify relevant facts of the case and any additional information you want to know. | **8** |  |  |
| **Step 2.** Identify the available alternate courses of action.  *\*You are welcome to number/letter your options; however, please describe the options substantively when evaluating with appeals. If you only use “option A” when evaluating, I quickly lose the meaning.* | **4** |  |  |
| **Step 3.** Assess each available alternative from the perspective of the relevant ethical appeals.  *Under your paragraph response of each appeal (except appeal A), put a bullet point list of normative ethical theories (and particular concepts/commitments of those theories) that inform your analysis.*  *Also, try to use as many bioethical terms (beneficence, paternalism, external constraint, among several others) in your analysis.*  A. Appeal to established legal and professional standards  *\*no normative theories needed for this appeal* | **4** |  |  |
| B. Appeal to autonomy (a) decision-making autonomy, and (b) fundamental rights to confidentiality, honesty, control over one’s health/body, be free of interference, etc. | **8** |  |  |
| C. Appeal to consequences (serious and far-reaching, irreversible, probable) | **8** |  |  |
| D. Appeal to virtues;  name/explain at least 2 (compassion, respect, integrity, self-sacrifice, courage, honesty, or others) | **4** |  |  |
| E. Appeal to justice (fairness, feminist ethics, ethics of care, or access issues [if relevant] libertarian, egalitarian, or basic decent minimum) | **8** |  |  |
| F. Appeal to special obligations name/explain at least 2  (to vulnerable patients, to those lacking decision-making capacity, for patient’s family’s decisions, moral/religious constraints, for legitimate self- interest and professional integrity.) | **6** |  |  |
| **Step 4.** Make a considered decision with the first three steps (minimum) s you would attempt   * state clear reasons based on your assessment of appeals for assigning priority to one course of action over another. * state a critique of your decision and respond to that critique * *ensure you note which two normative theories inform your judgment most with a brief explanation of why* | **8** |  |  |
| **Step 5.** Identify steps that might have been taken to prevent the ethical challenge(s) that arose in this case. | **2** |  |  |
| **TOTAL** | **60** |  |  |