

Autonomy and terminal illness

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For the past years, the Do not resuscitate (DNR) order has been employed in patients who are terminally ill. This physician's order is seen as the right ethical decision for the most medical team if resuscitating has no reasonable benefit to the patient. However, its popularity among health professionals has evoked an issue as to whether the order is to be exercised or not more so if the patient is not informed.

Sally is described as terminally ill with metastasis in other vital organs by her oncologist and confirmed by her attending physician as a poor candidate for the continuance of chemotherapy treatment. As a patient, Sally has the right to be informed on all the treatment that she is supposed to receive and so with her family members. However, since she is in denial of her condition and in the panic of her impending death, the physician has the autonomy to decide to write the Do not resuscitate order. In this scenario, the involvement of the patient in decision making is not that important since she will be less concern about the adverse effects of resuscitation on her health. Equally important to consider is the wish of the patient to be treated the way she likes. Treating the patient as she wishes is within the scope of the professional code of the doctors. It is their responsibility to deliver quality care to their patients and treat them the way their patients like it to be. However, this seems not applicable in Sally's condition because it is not consistent with the physician's AMA code of ethics which dictates they have the obligation to modify management goal to palliative form if other treatments are ineffective (McCabe, 2008). This is further supported by the statement of Dr. Reith Rose, Sunnybrook executive vice president in her written statement that when clinical teams determine that further interventions would have no benefit to the patient, health care providers are

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not obliged to provide intervention that lies outside the standard care which indeed may well cause harm (Smith, 2010).