

## TORRANCE MEMORIAL MEDICAL CENTER

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<b>DEPARTMENT:</b>	<b>MEDICAL STAFF</b>	
<b>POLICY/PROCEDURE:</b>	<b>BIOETHICS CONSULTATION GUIDELINES</b>	
<b>DATE APPROVED/ REVISED:</b>	<b>BIOETHICS COMMITTEE:</b>	<b>12/12/91, 1/20/97, 5/20/02, 4/28/11, 2/22/12, 4/23/14</b>
	<b>MEDICAL EXECUTIVE COMMITTEE</b>	<b>2/11/97, 7/01, 6/11/02, 5/16/11, 3/10/12, 7/8/2014</b>
	<b>BOARD OF TRUSTEES</b>	<b>7/31/2014</b>

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### **Goals**

1. Respond to requests for bioethics consultations for patients of Torrance Memorial Medical Center.
2. Maintain a forum for discussion and review of consultations and bioethics concerns.

**Membership:** The membership of the consultation team will vary case to case. The Bioethics Chair will have the discretion to call on one or more members of the Bioethics Committee, the Committee as a whole, as well as outside persons, as appropriate. The attending physician and primary care providers will be notified of the meeting and urged to attend consultation meetings.

### **Consultation Procedure**

1. Initiation - Any request for a consultation will be made through the Medical Staff Services Department and channeled through to the Chair of the Bioethics Committee, or his/her designee. A request for consultation may come at any time from any individual who is concerned about an existing or potential ethical dilemma for a patient.
2. The Chair of the Bioethics Committee will review the case and determine if a formal consultation team meeting is required. If a consultation team meeting is required, it will be arranged by the Chair of the Bioethics Committee and the documentation of the consultation will be placed in the MR.
3. The attending physician will be notified of the consultation request by the Chair of the Bioethics Committee as early as possible.
4. The consultation team will meet as necessary and will develop options to be considered. At no time will the team render an absolute decision relative to a patient's care.
5. Following the consultation, the Chair of Bioethics or his/her designee will write or dictate a consultation note, which will be placed in the patient's medical record. This dictation will include the reason for the request, summary of discussion, and options. All consultations performed will be reported to the Bioethics Committee.

**Consultation Process:**

1. Process for consultation may include any of the following:
  - a. Collection of data
  - b. Case Presentation
  - c. Identification of medical problems
  - d. Identification of psychosocial problems
  - e. Identification of ethical problems
  - f. Identification of advance directive, surrogate and similar issues
  - g. Discussion of ethical issues and/or spiritual problems
  - h. Suggestions for approaches to the problems
  - i. Discussion with initiator, patient, if possible, and other involved individuals not present at consultation meeting
  - j. Issues discussed and suggested approaches will be written or dictated by the Chair and/or the Committee and placed in the patient's chart.
2. The team does not make patient care or medical decisions.
3. Each consultation will be reviewed, discussed, and presented by the Chair at the next Bioethics Committee meeting.

**Employee Distress Over Care Decisions:** There may be situations where care decisions are made that will be in conflict with what an employee feels or believes. These issues of conflict may not be true bioethics situations, however, they may require intervention and support. In these circumstances, the Director of Employee Support or the Employee Assistance Program should be contacted to provide the employee with assistance and the opportunity to debrief as appropriate.

**Miscellaneous:** These guidelines will be reviewed periodically.