

Inland Southern California Bioethics Consortium

presents sessions focused on

Non-Beneficial Treatment

In this short conference we explore different aspects of the clinician's experience with non-beneficial treatment (NBT). Sessions include an examination of DNAR options, strategies for clinicians in talking to patients about NBT, and a working session for interested clinicians in crafting guidelines for gastrostomy tube placement in patients with advanced dementia. This conference also includes a Bioethics Grand Rounds presentation on the ethical considerations of the recently passed national Right to Try law.

Time	Title
10:00 – 10:40 AM	Code Status and DNAR – Using Case Studies to Understand Non-Beneficial Treatment
10:50 – 11:45 AM	Discussing Goals of Therapy / Treatment Roundtable Discussion
12:00 – 1:00 PM	Bioethics Grand Rounds
1:15 – 2:00 PM	Working Session – Guidelines for Gastrostomy Tube Placement in Patients with Advanced Dementia

Session 1 – Code Status and DNAR: Using Case Studies to Understand Potentially Inappropriate Treatment

Objectives:

1. Review the indications for performing cardiopulmonary resuscitation for cardiopulmonary arrest
2. Examine scenarios in which clinicians may be confused in how to appropriately treat patients within the confines of a DNAR order

Scenarios:

A 58-year-old male suffers severe traumatic brain injury requiring decompressive craniectomy. Two weeks later the patient is minimally responsive on exam. His head CT shows evolving strokes in both hemispheres. He remains intubated and ventilated. His family has requested DNAR status. Currently the patient has a ventilator associated pneumonia and has requires frequent suctioning for management of his secretions. The last three times he was suctioned by the respiratory therapies the patient's heartrate dropped down into the 20's briefly before self-resolving. The team is requesting clarification if they should code the patient if his bradycardia does not self-resolve.

A 9 month old female with history of extreme prematurity, severe bronchopulmonary dysplasia, and secondary severe pulmonary hypertension is on maximal medical therapy. She has a tracheostomy, is sedated and paralyzed, and is currently requiring high frequency ventilation. She has had three prior severe pulmonary hypertensive crises and has recovered each time to her "baseline" of tracheostomy / ventilator dependence with moderate to high ventilator settings. She is not a candidate for home mechanical ventilation because of her high ventilator settings. Currently she is being treated for a respiratory infection, which is thought to be the cause of the current pulmonary hypertensive crisis. She has multiple episodes of severe oxygen desaturation to the 20's every shift that require prolonged bag valve ventilation. The team is accepting oxygen saturations over 70%. The NICU attending physician feels that chest compressions in the event of cardiac arrest will not be effective due to her multiple medical co-morbidities. Additionally, the patient has severe osteopenia secondary to her prolonged NICU course and the attending is concerned that chest compressions will result in rib fractures. The parents have consistently requested aggressive interventions. The physician and nursing team is requesting clarification on an appropriate code status recommendation. Specifically, they are asking can bag-valve ventilation still be provided if chest compressions are not done?

Session 2 – Discussing Goals of Therapy: Pro Tips of the Trade Roundtable Discussion

Objectives:

1. Identify useful strategies in speaking to patients, families, and treatment teams about appropriate treatment goals
2. Analyze the role of the ethics consultant in helping a patient or family set appropriate treatment goals

Grand Rounds – Going Down Fighting: Do Patients Have the Right to Experimental Therapies?

Objectives:

1. Describe recently passed federal and state laws on a patient's Right to Try experimental therapies
2. Analyze the ethical conflicts inherent to Right to Try laws
3. Evaluate the potential impact of Right to Try laws on public health, clinical trials, and development of novel therapeutics

Session 3 – Working Session – Crafting a Common Set of Guidelines for Gastrostomy Tube Placement in Patients with Advanced Dementia

Objectives:

1. Define a population of patients who are unlikely to benefit from gastrostomy tube placement
2. Understand the medical and ethical considerations for gastrostomy tube placement in patients with advanced dementia

This session is intended to be the first of many sessions to create a “model” guideline for use in hospitals and institutions within the ISC area regarding this issue.