

Ethics And The Law In Intensive Care

Law and Ethics in Intensive Care Christopher Danbury 2020-09-16 The practice of intensive care medicine raises multiple legal and ethical issues on a daily basis, making it increasingly difficult to know who to admit and when, at what stage invasive management should be withdrawn, and who, importantly, should decide? These profound dilemmas, already complicated in a setting of scarce resources, mandate an understanding of law and ethics for those working in intensive care medicine. Clinically focused, this book explains the relevance of landmark rulings to aid your day-to-day decision-making. A spectrum of ethical and legal controversies in critical care are addressed to demonstrate how law and ethics affects the care available to patients and vice versa.

Discussion of conflict resolution advises the options open to you when agreement on treatment decisions or withdrawal cannot be reached. The literature and variations surrounding Do Not Attempt Resuscitation decisions are outlined to help you navigate this complex area. This edition also provides an up-to-date analysis of issues such as futility and depreciation of liberty. Featuring contributions from leading legal and medical experts, this important reference should be read by every critical care professional.

Ethical and Legal Issues in Neurology Thomas I. Cochrane 2014-01-09 The ethics of decisions to withhold or withdraw life-sustaining therapies are reviewed. Special attention is paid to the ethical and moral distinctions - or lack thereof - between withholding and withdrawing. The

ethical principles informing decisions to forgo life-sustaining therapy are covered, along with the difficulty of making such decisions in the face of prognostic uncertainty. Specific advice is provided regarding the decision-making process, and recent literature regarding decision-making in the neurologic intensive care unit is reviewed.

Intensive Care Thomas A. Raffin 1989 Briefly sketches the history of intensive care units, describes actual cases, and discusses the medical, ethical, legal, moral, and economic problems that can arise

Ethics of Withdrawal of Life-Support Systems Douglas N. Walton 1983-06-29

Ethics and the Law in Intensive Care Nicholas A. Pace 1996 QB of the varsity football team. Passing grades in all his classes. Dating the hottest—and smartest—girl at school. Summer job paying more than minimum wage. Things in Cody's world seem to be going pretty well. Until, that is, his girlfriend, Clea, is sent off to boarding school across the country, and a torn

ACL ends his high school football career. But bad things come in threes—or in Cody's case, sixes and twelves—and the worst is yet to come. While limping through town one day, Cody sees a newspaper heading: "Local Girl Missing." Clea, now his ex, has disappeared from her boarding school in Vermont, and the only clue is a letter she sent to Cody the morning of her disappearance. With that as his guide, Cody sets out to find out what happened. Once in Vermont, he unearths the town's secrets—and finds out that football isn't the only thing he's good at. Reality Check is another edge-of-your-seat suspense novel by the New York Times bestselling and Edgar Award-nominated author of Down the Rabbit Hole.

Critical Care Ethics David F. Kelly 2002-06-11 In 'Critical Care Ethics', David F. Kelly describes and analyzes some of the major ethical issues facing American hospitals today and proposes practical approaches by which hospitals may ethically and legally resolve them. The author

includes both theory and application in a way which insures accessibility to those without a background in moral philosophy or moral theology. The book's major emphasis is on the resolution within the American hospital of the practical question of forgoing treatment. Its central thesis is that a consensus has arisen in American medical ethics concerning the ethical and legal rightness of forgoing medical treatment in some circumstances. The present consensus is based on three pillars. The first two of these are ethical principles and distinctions arising from Catholic medical ethics, which have been generally accepted in American hospital ethics and American law. The third is the development of American law itself. Together these three bases have resulted in general agreement that Americans have the right to refuse treatment for themselves, and that, with some reservations, they have the right to forgo treatment for others as well. These issues are developed in detail, including application to the

question of medical nutrition and analysis of the decision. In addition, there are chapters on pain, pain management, ethics committees, and the problems of resource allocation. The final chapter attempts to point out some of the difficulties inherent in allocation arguments and criticizes the way in which they are so often made by many ethicists and religious leaders. *Code of Ethics for Nurses with Interpretive Statements* American Nurses Association 2001 Pamphlet is a succinct statement of the ethical obligations and duties of individuals who enter the nursing profession, the profession's nonnegotiable ethical standard, and an expression of nursing's own understanding of its commitment to society. Provides a framework for nurses to use in ethical analysis and decision-making.

Ethics in Intensive Care Medicine Andrej Michalsen 2023-07-19 In this book, part of the European Society of Intensive Care Medicine (ESICM) textbook series, experts in the field of

clinical ethics describe basic principles of clinical ethics and ethical reasoning, the fundamental pillars of intensive care medicine as well as the decision-making processes necessary to arrive at appropriate decisions for each individual patient. Specifically, the complex decision-making process, with regard to limiting life-sustaining therapies and integrating palliative care into intensive care, are expounded. Furthermore, the still controversial topics of ethical climate, proportionate care, and prioritization are elaborated upon. The so-called “soft skills” of inter-professional communication and co-operation are given the attention they deserve in order to overcome the gap between technological progress and interpersonal standstill. Finally, widely accepted ethical values and principles were challenged by the Covid-19 pandemic, forcing clinicians to elaborate recommendations regarding the prioritization of scarce resources. The book will be an invaluable tool for clinicians to understand ethical

principles and reasoning to contend ethical challenges in intensive care medicine across the boundaries of disciplines and professions, in order to provide an appropriate individual plan of treatment for their patients.

Ethics of Newborn Intensive Care Albert R. Jonsen 1976

Compelling Ethical Challenges in Critical Care and Emergency Medicine Andrej Michalsen 2020-07-22 This book addresses the ethical problems that physicians have to face every day while caring for critically ill patients. Advances in medical technology, ageing societies worldwide, and their increased demands on health care systems have, on the one hand, led to better care and remarkable longevity in many parts of the world. On the other hand, however, improved treatments in many medical fields, amongst others in emergency and critical care, have resulted in more patients surviving with reduced quality of life. This entails tradeoffs for many patients,

their families, and the teams caring for them. At the same time, health care expenditures have risen dramatically and have to be balanced against costs for other public goods. Finally, the humane aspects of care have often failed to keep pace with the remarkable technological strides made in recent years. In this book, experts in their respective fields describe compelling ethical challenges resulting from these discrepancies and discuss potential solutions. The book is primarily intended for clinicians who care for two of the most vulnerable patient subpopulations - those being treated in ambulances or emergency rooms, and those being treated at intensive care units - due in part to the fact that they may be temporarily or permanently incapacitated. Core medical skills, such as diagnosis and predicting outcomes, as well as implementing treatment, remain challenging. However, without adequate communication and collaboration both within the inter-professional treatment teams and between

the teams and the patients/their families, delivering excellent care is difficult at best. Therefore, the so-called "soft skills" are given the attention they deserve in order to overcome the gap between technological progress and interpersonal standstill.

Ethics and Law for Australian Nurses Kim Atkins 2020-01-02 A sound understanding of moral and legal obligations is critical to developing responsible nursing practice and building the nurse-patient relationship. *Ethics and Law for Australian Nurses* provides a practical framework for understanding the ethical and legal dimensions of nursing practice. The fourth edition has been thoroughly revised to include updates to legislation, the NMBA professional standards and case examples. A new chapter on the legal system and a fully revised chapter on duty of care and negligence provide a thorough overview of the law as it applies to nursing practice. The text also includes expanded material on the regulation of

nursing practice, advanced care directives, cultural safety, practice in the context of digital environments, person-centred care and assisted dying. Written in an accessible and engaging style, *Ethics and Law for Australian Nurses* provides a comprehensive guide for nurses training and practising in clinical, research and policy settings.

Neonatal Bioethics John D. Lantos 2006-06-16
Neonatal intensive care has been one of the most morally controversial areas of medicine during the past thirty years. This study examines the interconnected development of four key aspects of neonatal intensive care: medical advances, ethical analysis, legal scrutiny, and econometric evaluation. The authors assert that a dramatic shift in societal attitudes toward newborns and their medical care was a stimulus for and then a result of developments in the medical care of newborns. They divide their analysis into three eras of neonatal intensive care. The first, characterized by the rapid

advance of medical technology from the late 1960s to the Baby Doe case of 1982, established neonatal care as a legitimate specialty of medical care, separate from the rest of pediatrics and medicine. During this era, legal scholars and moral philosophers debated the relative importance of parental autonomy, clinical prognosis, and children's rights. The second era, beginning with the Baby Doe case (a legal battle that spurred legislation mandating that infants with debilitating birth defects be treated unless the attending physician deems efforts to prolong life "futile"), stimulated efforts to establish a consistent federal standard on neonatal care decisions and raised important moral questions concerning the meaning of "futility" and of "inhumane" treatment. In the third era, a consistent set of decision-making criteria and policies was established. These policies were the result of the synergy and harmonization of newly agreed upon ethical principles and newly discovered epidemiological

characteristics of neonatal care. Tracing the field's recent history, notable advances, and considerable challenges yet to be faced, the authors present neonatal bioethics as a paradigm of complex conversation among physicians, philosophers, policy makers, judges, and legislators which has led to responsible societal oversight of a controversial medical innovation.

Pioneering Healthcare Law Catherine Stanton 2015-10-16 This book celebrates Professor Margaret Brazier's outstanding contribution to the field of healthcare law and bioethics. It examines key aspects developed in Professor Brazier's agenda-setting body of work, with contributions being provided by leading experts in the field from the UK, Australia, the US and continental Europe. They examine a range of current and future challenges for healthcare law and bioethics, representing state-of-the-art scholarship in the field. The book is organised into five parts. Part I discusses key principles

and themes in healthcare law and bioethics. Part II examines the dynamics of the patient-doctor relationship, in particular the role of patients. Part III explores legal and ethical issues relating to the human body. Part IV discusses the regulation of reproduction, and Part V examines the relationship between the criminal law and the healthcare process. Chapter 10 of this book is freely available as a downloadable Open Access PDF at <http://www.taylorfrancis.com> under a Creative Commons Attribution-Non Commercial-No Derivatives (CC-BY-NC-ND) 3.0 license.

The Medical-Legal Aspects of Acute Care Medicine James E. Szalados 2021-04-02 The Medical-Legal Aspects of Acute Care Medicine: A Resource for Clinicians, Administrators, and Risk Managers is a comprehensive resource intended to provide a state-of-the-art overview of complex ethical, regulatory, and legal issues of importance to clinical healthcare professionals in the area of acute care medicine; including, for

example, physicians, advanced practice providers, nurses, pharmacists, social workers, and care managers. In addition, this book also covers key legal and regulatory issues relevant to non-clinicians, such as hospital and practice administrators; department heads, educators, and risk managers. This text reviews traditional and emerging areas of ethical and legal controversies in healthcare such as resuscitation; mass-casualty event response and triage; patient autonomy and shared decision-making; medical research and teaching; ethical and legal issues in the care of the mental health patient; and, medical record documentation and confidentiality. Furthermore, this volume includes chapters dedicated to critically important topics, such as team leadership, the team model of clinical care, drug and device regulation, professional negligence, clinical education, the law of corporations, tele-medicine and e-health, medical errors and the culture of safety, regulatory compliance, the regulation of

clinical laboratories, the law of insurance, and a practical overview of claims management and billing. Authored by experts in the field, *The Medical-Legal Aspects of Acute Care Medicine: A Resource for Clinicians, Administrators, and Risk Managers* is a valuable resource for all clinical and non-clinical healthcare professionals.

Ethics in Critical Care Medicine James P. Orłowski 1999

Ethics and Critical Care Medicine J.C.

Moskop 2012-12-06 The expense of critical care and emergency medicine, along with widespread expectations for good care when the need arises, pose hard moral and political problems. How should we spend our tax dollars, and who should get help? The purpose of this volume is to reflect upon our choices. The authors whose papers appear herein identify major difficulties and offer various solutions to them. Four topics are discussed throughout the volume: First, encounters between patients and health

professionals in critical situations in general, and where scarcity makes rationing necessary; second, allocation and social policy, including how much to spend on preventive, chronic or critical care medicine, or for medicine in general compared to other important social projects; third, conflicts between or ranking of important goals and values; and fourth, conceptual issues affecting the choices we make. Since these topics are raised by the authors in almost every essay, we did not divide the papers into separate sections within the volume. Warren Reich begins the volume with a parable illustrating a key problem for contemporary medicine and two very different approaches to its solution. His story begins with the "delivery" of three indigent, critically ill, foreign patients to the emergency room of a large American private hospital. Although the hospital is legally bound to care for these patients, providing long term, high cost care for them and others soon becomes a major financial strain.

Critical Care Ethics Dan R. Thompson
2014-01-01 The intensive care unit can be the site of many ethical controversies. Critical Care Ethics: A Practice Guide, explores thought-provoking ethical questions that critical care professionals must face in real-life situations. Topics include: euthanasia, artificial nutrition, the ethics of drug shortages, palliative care, religious views of end-of-life care, and unique considerations regarding pediatric and neonatal care. The references and suggested readings that accompany each chapter will help the reader pursue further information.

The Lazarus Case John D. Lantos 2006-06-16 A gripping exploration of the legal and ethical dilemmas in neonatal intensive care—a truly original work. Chosen as an Outstanding Academic Title in 2003 by Choice Magazine In this new, startlingly original book, John D. Lantos weaves a compelling story that captures the dilemmas of modern medical practice. The Lazarus Case: Life-and-Death Issues in Neonatal

Intensive Care begins with a fictional malpractice case—an amalgam of typical cases in which Lantos appeared as an expert witness—and uses it as the framework for addressing the ethical issues surrounding neonatal intensive care. Lantos draws on his experience in neonatal medicine, pediatrics, and medical ethics to explore multiple ethical dilemmas through one poignant representative situation. In Lantos's model case, a doctor decides to stop resuscitation of a premature infant, a tiny "preemie" who seems past reasonable care. The baby survives with severe neurological defects and the parents sue the doctor, alleging that stopping treatment was negligent. From this case, Lantos considers our moral obligations to critically ill babies, the meaning of negligence, and the sorts of social structures that shape the moral consciences of doctors. Each chapter begins with Lantos deposing in the conference room of the plaintiffs' lawyers. The questions put to Lantos

throughout the deposition spark an engrossing retelling of his personal experiences with premature babies, as well as his thoughtful discussions of ethics, morality, history, and medical statistics. Sprinkled throughout the book are references to fictional works by Camus, Dostoevsky, Shakespeare, Twain, and others. Lantos uses these literary examples to further illustrate the ambiguities, misunderstandings, responsibilities, and evasions that plague our decisions regarding life and death, medical care and medical education, and ultimately the cost and value of preserving the lives of the most vulnerable among us.

Clinical Ethics Albert R. Jonsen 1992 Clinical Ethics introduces the four-topics method of approaching ethical problems (i.e., medical indications, patient preferences, quality of life, and contextual features). Each of the four chapters represents one of the topics. In each chapter, the authors discuss cases and provide comments and recommendations. The four-

topics method is an organizational process by which clinicians can begin to understand the complexities involved in ethical cases and can proceed to find a solution for each case.

Legal and Ethical Aspects of Anaesthesia, Critical Care and Perioperative Medicine Dr.

Stuart White 2004-12-09 A one-stop reference for all medical professionals who encounter ethicolegal problems during their management of patients.

Medical Futility Alireza Bagheri 2013-07-23

Medical futility is a controversial issue not only in its definition but also in its application. There are few books on the subject, and those in existence mostly focus on the situation in the United States. This title, however, provides extensive international perspectives on medical futility. This book will benefit healthcare professionals as well as health policy makers around the world. It allows them to see how different countries approach the issue of medical futility and their experiences in dealing with this

issue. The complexity of the issue, and in particular how some countries innovatively address it in an ethically sound manner, is clearly presented. Contents: So-Called Futile Care: The Experience of the United States (Robert M Veatch) The Reality of Medical Futility (Dysthanasia) in Brazil (Leo Pessini and William Saad Hossne) Medical Futility and End-of-Life Issues in Belgium (Jan L Bernheim, Thierry Vanswevelt and Lieven Annemans) The Concept of Medical Futility in Venezuela (Gabriel d'Empaire) Medical Futility in the Russian Federation (Olga I Kubar, Galina L Mikirtichian and Marina I Petrova) Medical Futility in Australia (Dominique Martin) Medical Futility in Japan (Yasuhiro Kadooka and Atsushi Asai) Medical Futility in China: Ethical Issues and Policy (Yongxing Shi, Mingjie Zhao, Yang Yang, Cunfang Mao, Hui Zhu and Qingli Hu) Medical Futility in Korea (Ivo Kwon) Medical Futility from the Swiss Perspective (Tanja Krones and Settimio Monteverde) Medical Futility in Turkey

(Berna Arda and Ahmet Aciduman)Medical Futility in the United Arab Emirates (Said Abuhasna and Ali Abdulkareem Al Obaidli)Medical Futility in Iran (Alireza Bagheri) Readership: Healthcare professionals, health policy makers, physicians and nurses, lawyers academics, researchers, graduate students and lay public. Keywords:Medical Futility;Bioethics;End of Life;Clinical Ethics;Healthcare SystemsKey Features:Each chapter discusses medical futility in a particular country, including the US, China, Australia, Switzerland, Brazil, Korea, Japan, Iran, United Arab Emirates, Venezuela, Russia, Italy, and TurkeyPresents experiences and challenges relating to medical futility in several countries with different cultural and economic backgroundsProvides information about the topic and elaborates on healthcare systems, payment and insurance systems as well as end-of-life issues in contributing countriesReviews: "The topic of 'futility' is at once important and

controversial. Important because it deals with a critical element of end-of-life care, and yet controversial because of disagreements about its meaning and use. This superb collection of papers deals well and fully with those elements, and in a rich global context." Daniel Callahan President Emeritus of the Hastings Center "As medical costs continue to escalate internationally and technology offers more and more chances of prolonging the length of life — but not necessarily its quality — it is vital that we think more clearly and systematically about what can be justifiably described as 'medically futile'. Dr Bagheri's edited volume is a major contribution to this highly topical subject, and one of its great strengths is its international scope, with scholarly contributors from a wide range of countries in Europe, the Americas, Australia and Asia. The book should become a standard text for all courses in healthcare ethics." Alastair V Campbell Chen Su Lan Centennial Professor in Medical Ethics National

University of Singapore “Medical futility — a term that is often used but seldom clearly understood — is the quintessential bioethics topic, combining as it does philosophical questions about the ends of medicine, central issues in physician-patient and patient-family relations, and controversies about societal obligations to continue care that can extend life but not restore functioning. It is thus perfect for the sort of comparative examination that this cross-national volume so richly provides. The chapters are individually fascinating, while collectively illuminating how historical, cultural, economic, political and philosophical differences make medical futility such a rich subject for study and such a difficult issue to resolve clinically.” Alexander M Capron University Professor, University of Southern California; former Director of Ethics, Trade, Human Rights and Health Law, World Health Organization “Bagheri and his colleagues give a fascinating account of change in concepts of medical futility

and allied concepts in a world of globalization and knowledge sharing ... and teach us that global exchanges of diverse cultural, religious, and socioeconomic beliefs and factors are invigorating both intranational and international debate over what constitutes medical futility, slowly but surely leading to changes in medical practices and policies that reflect the global pluralism of our age.” The American Journal of Bioethics

Health Care Ethics Kath M Melia 2004-03-31 Health Care Ethics examines the way ethical dilemmas are played out in everyday clinical practice and argues for an approach to ethical decision-making which focuses more on patient needs than competing professional interests. While advances in medical science and technology have improved the ability to save and prolong lives, they have also given rise to fundamental questions about what constitutes life and personhood, especially in the context of what are termed ‘persistent vegetative state’ and

'brain death'. Drawing on the example of intensive care where such questions feature strongly in everyday practice, Kath M Melia examines how decisions are taken within the context of multiprofessional teamworking, including · whether to admit a patient and commence treatment · what the aim of treatment should be (i.e. palliation, care or cure) · when to limit, withhold or withdraw treatment · when to donate organs. As an area in which different professional groups work closely together, the author argues that there are lessons to be learnt from intensive care which can be applied to ethical decision making in all areas of health care for the greater good of patients. The book makes a significant contribution to the literature on ethics in health care and to the development of ethical decision making which prioritises the needs of patients. It is essential reading for ethicists, sociologists and health care professionals.

Ethics of Withdrawal of Life-Support

Systems Douglas N. Walton 1987-07-28 A well-organized, thoughtful, and logical discussion of a difficult ethical issue frequently encountered by clinicians. Journal of the American Medical Association Walton has made a successful attempt to write about medical concerns without ever leaving the layperson to flounder in confusion. Probate Law Journal In recent years the question of when to terminate life-extending medical treatments has become a thorny social issue. Douglas Walton has brought together a number of these case studies and analyzed the very difficult issues they raise.

Intensive Care Robert Zussman 1992 From this superb fieldwork--observing medical staff on their rounds; interviewing staff, patients, and families; and systematically reviewing hospital records--Zussman reveals the existence of deep conflicts of opinion on how to allocate treatment and resources. He shows that these perspectives depart from the formal principles of medical ethics. He argues that courts and hospital

administrators, with their new insistence on taking the rights of patients seriously, have reshaped the way life and death decisions are made. At the same time, Zussman examines doctors' frequent resistance to the precepts of medical ethics: doctors, he shows, often override patients' wishes, justifying their decisions in the name of the patients' best interests while maintaining control over the decision-making process.

Intensive and Critical Care Medicine José Besso 2009-11-21 The World Federation of Societies of Intensive and Critical Care Medicine (WFSIC- CM) has reached the age of maturity. Physicians, nurses, and many others associated with the field of Intensive and Critical Care Medicine will be coming from all corners of the world to Florence, Italy in August, 2009 to celebrate the 10th quadrennial congress. Every 4 years for the last 36 years, congresses in the magnificent venues of London (1973), Paris (1977), Washington (1981), Jerusalem (1985),

Kyoto (1989), Madrid (1993), Ottawa (1997), Sydney (2001), and Buenos Aires (2005) have signified an ever-developing process which has resulted in the four pillars of the field of Intensive and Critical Care Medicine, namely partnership, ethics, professionalism, and competence. The first pillar is based on a stronger interdisciplinary collaboration and a multi-professional partnership in the field of Intensive and Critical Care Medicine. In recent decades, professional activity in medicine has been regulated by well-defined, universal principles, such as the welfare of the patient, autonomy, social justice, and the patient-physician relationship. The second pillar, ethics, has offered welcomed assistance to all these principles in establishing an ethics curriculum.

Ethics at the Bedside June Levine-Ariff 1987
Legal and Ethical Aspects of Anaesthesia, Critical Care, and Perioperative Medicine 2004

Oxford Textbook of Critical Care Webb

2020-01-10 Now in paperback, the second edition of the Oxford Textbook of Critical Care is a comprehensive multi-disciplinary text covering all aspects of adult intensive care management. Uniquely this text takes a problem-orientated approach providing a key resource for daily clinical issues in the intensive care unit. The text is organized into short topics allowing readers to rapidly access authoritative information on specific clinical problems. Each topic refers to basic physiological principles and provides up-to-date treatment advice supported by references to the most vital literature. Where international differences exist in clinical practice, authors cover alternative views. Key messages summarise each topic in order to aid quick review and decision making. Edited and written by an international group of recognized experts from many disciplines, the second edition of the Oxford Textbook of Critical Care provides an up-to-date reference that is

relevant for intensive care units and emergency departments globally. This volume is the definitive text for all health care providers, including physicians, nurses, respiratory therapists, and other allied health professionals who take care of critically ill patients.

Religion and Ethics in the Neonatal Intensive Care Unit Ronald M. Green

2019-08-22 Each year, neonatal Intensive care units (NICUs) in the U.S. and around the world help thousands of sick or premature newborns survive. NICUs are committed to the ideals of family-centered care, which encourages shared decision-making between parents and NICU caregivers. In cases of infants with conditions marked by high mortality, morbidity, or great suffering, family-centered care affirms the right of parents to assist in making decisions regarding aggressive treatment for their infant. Often, these parents' difficult and intimate decisions are shaped profoundly by their religious beliefs. In light of this, what precisely

are the teachings of the major world religious traditions about the status and care of the premature or sick newborn? Few studies have grappled with what major religious traditions teach about the care of the newborn or how these teachings may bear on parents' decisions. This volume seeks to fill this gap, providing information on religious teachings about the newborn to the multidisciplinary teams of NICU professionals (neonatologists, advance practice nurses, social workers), as well as to parents of NICU patients, and students of bioethics. In chapters dealing with Judaism, Catholicism, Denominational Protestantism, Evangelical Protestantism, African American Protestantism, Sunni and Shi'a Islam, Hinduism, Buddhism, Navajo religion, and Seventh Day Adventism, leading scholars develop the teachings of these traditions on the status, treatment, and ritual accompaniments of care of the premature or sick newborn. This is an essential book that will serve as a first resort for clinicians who need to

understand the religious dynamics influencing anyone making a difficult decision about her sick newborn.

Critical Care of Children with Heart Disease

Ricardo Munoz 2010-06-21 Critical Care of Children with Heart Disease will summarize the comprehensive medical and surgical management of the acutely-ill patient with congenital and acquired cardiac disease. The aim of the book is to teach bedside physicians, nurses and other caregivers, basic and practical concepts of anatomy, pathophysiology, surgical techniques and peri-operative management of critically ill children and adults with congenital heart disease, allowing these professionals to anticipate, prevent or else treat such pathologies. The book will cover specific cardiac lesions, review their anatomy, pathophysiology, current preoperative, intraoperative and postoperative assessment and management; medical and surgical complications will be briefly described with each lesion further

discussed in specific chapters. In addition, the book will have dedicated chapters to management of cardiac patients on extracorporeal membrane oxygenation, hemofiltration, hemo or peritoneal dialysis and plasma exchange. Practical guidelines for cardiovascular nursing care will be also included.

For-Profit Enterprise in Health Care Institute of Medicine 1986-01-01 "[This book is] the most authoritative assessment of the advantages and disadvantages of recent trends toward the commercialization of health care," says Robert Pear of The New York Times. This major study by the Institute of Medicine examines virtually all aspects of for-profit health care in the United States, including the quality and availability of health care, the cost of medical care, access to financial capital, implications for education and research, and the fiduciary role of the physician. In addition to the report, the book contains 15 papers by experts in the field of for-profit health

care covering a broad range of topicsâ€"from trends in the growth of major investor-owned hospital companies to the ethical issues in for-profit health care. "The report makes a lasting contribution to the health policy literature." â€"Journal of Health Politics, Policy and Law. *Law and Ethics in Nursing and Health Care* Judith Hendrick 2000 Provides an overview of the British legal and ethical issues that nurses and other health professionals come across. Hendrick (Oxford Brookes U.) discusses the relationship between law and ethics and how at times they overlap or diverge. Chapters include case studies, theoretical discussion, possible outcomes, and a summary of how the legal and ethical approaches compare. They also examine the patient-client relationship (confidentiality, consent, responsibility and accountability) as well as the relationship between the law, codes of practice, and health care circulars. The book includes guidelines from professional bodies. Distributed in the US by ISBS. c. Book News Inc.

Moral Distress in the Health Professions Connie M. Ulrich 2018-01-31 This is the first book on the market or within academia dedicated solely to moral distress among health professionals. It aims to bring conceptual clarity about moral distress and distinguish it from related concepts. Explicit attention is given to the voices and experiences of health care professionals from multiple disciplines and many parts of the world. Contributors explain the evolution of the concept of moral distress, sources of moral distress including those that arise at the unit/team and organization/system level, and possible solutions to address moral distress at every level. A liberal use of case studies will make the phenomenon palpable to readers. This volume provides information not only for academia and educational initiatives, but also for practitioners and the research community, and will serve as a professional resource for courses in health professional schools, bioethics, and business, as well as in the hospital wards, intensive care

units, long-term care facilities, hospice, and ambulatory practice sites in which moral distress originates.

Speaking for the Dying Susan P. Shapiro 2019-06-12 Seven in ten Americans over the age of age of sixty who require medical decisions in the final days of their life lack the capacity to make them. For many of us, our biggest, life-and-death decisions—literally—will therefore be made by someone else. They will decide whether we live or die; between long life and quality of life; whether we receive heroic interventions in our final hours; and whether we die in a hospital or at home. They will determine whether our wishes are honored and choose between fidelity to our interests and what is best for themselves or others. Yet despite their critical role, we know remarkably little about how our loved ones decide for us. *Speaking for the Dying* tells their story, drawing on daily observations over more than two years in two intensive care units in a diverse urban hospital. From bed-sides, hallways,

and conference rooms, you will hear, in their own words, how physicians really talk to families and how they respond. You will see how decision makers are selected, the interventions they weigh in on, the information they seek and evaluate, the values and memories they draw on, the criteria they weigh, the outcomes they choose, the conflicts they become embroiled in, and the challenges they face. Observations also provide insight into why some decision makers authorize one aggressive intervention after the next while others do not—even on behalf of patients with similar problems and prospects. And they expose the limited role of advance directives in structuring the process decision makers follow or the outcomes that result. Research has consistently found that choosing life or death for another is one of the most difficult decisions anyone can face, sometimes haunting families for decades. This book shines a bright light on a role few of us will escape and offers steps that patients and loved ones, health

care providers, lawyers, and policymakers could undertake before it is too late.

Critical Care Jack Tinker 1995-10-17 'Critical Care: Standards, Audit and Ethics' brings together the important issues which are topical and relevant to the dilemmas faced by all concerned with the management of critically ill patients. The standards of resources that should be available to deliver this care are discussed, including transport of the critically ill, the design of intensive care units, technical support, and the staffing and training within related disciplines, viewed from a world wide perspective. The authors review and debate: current theories and practice in audit to quantify critical illnesses; the selection of patients; the results of critical care and the quality of survival as well as the cost benefits; the ethics of establishing health care priorities; withholding and withdrawing life-support; the ethical issues of organ donation; clinical research, medico-legal, moral and religious aspects of critical

care. This is the first book to look in depth at the principles and practice of the organisational aspects of intensive care delivery and will be of value to all members of the multidisciplinary Intensive Care team: physicians, nurses, trainees and managers. Every Intensive Care Unit should have a copy.

Ethics in Anaesthesia and Intensive Care

Wendy E. Scott 2003 Good clinical practice inevitably raises both ethical and legal issues and demands an understanding of both.

Different environments produce different problems in practice, and similarly, different patients raise different considerations. All these situations demand the clinician to make decisions that balance both the clinical and ethical considerations.

Rationing in Medicine F. Breyer 2013-03-09

The book series on the ethics of science and technology assessment edited by the Europäische Akademie is devoted to the publication of the work-reports of its project

groups, works on the foundations of ethics, the philosophy science, and other issues related to the work of the Europäische Akademie. In addition, the series comprises the proceedings of conferences organized by the academy. The 13th volume documents the proceeding of the academy's spring symposium in 2000 on Rationing in Medicine which was held in Bad Neuenahr-Ahrweiler on March 23-25, 2000. An intense discussion on the future of health care in Europe has been stimulated by increasing difficulties of securing adequate and needs orientated medical care in the face of scarce resources and medical progress. Unfortunately, quite of ten a rational discussion of rationing is drowned out by the political talk of the day. But only an open and well-informed debate, if anything at all, can lead to transparent and just rationing procedures which eventually might be acceptable to the public at large. For this debate much can be learnt from observing the experiences other countries have made with

their health care arrangements. What kinds of mistakes should be avoided and what might be useful in the different states and perhaps also in the supra-national context of an emerging Europe are interesting and important issues.

Comprehensive Neonatal Nursing Care

Carole Kenner 2013-08-21 Print+CourseSmart

Bioethics in the Pediatric ICU: Ethical Dilemmas Encountered in the Care of Critically Ill Children

Laura Miller-Smith 2019-03-13 This book examines the many ethical issues that are encountered in the Pediatric Intensive Care Unit (PICU). It supports pediatricians, nurses, residents, and other providers in their daily management of critically ill children with the dilemmas that arise. It begins by examining the evolution of pediatric critical care, and who is now impacted by this advancing medical technology. Subsequent chapters explore specific ethical concerns and controversies that are commonly encountered. These topics include how to conduct end-of-life

discussions with families facing a myriad of challenging choices. It goes on to explore the concept of futility, and what that does and does not mean in the pediatric ICU setting. Controversial subjects such as children as organ donors, particularly using donation after cardiac death, in addition to issues surrounding the declaration of brain death are covered. Additional chapters address resource allocation, and also analyze the use of long-term technology in chronically critically ill children. Chapters include case examples with guidance on how to work through similar difficulties and decision-making. While this book is specifically targeted for care providers at the ICU bedside, it is also of benefit to medical students, students in bioethics, practicing ethical consultants and families who are dealing with critically ill children.

Ethical Dilemmas for Critically Ill Babies Eduard Verhagen 2015-10-06 Most neonates who now survive intensive care would have died 50 years

ago, and “nature” would have decided the outcomes, making ethical discussions about initiating or withholding resuscitation irrelevant. Medical developments in neonatology have changed the way we respond to diseases of neonates, to their illness, and to their parents. Not only as physicians, but also as a society. Decisions on when to start, withhold, or withdraw life-saving interventions in critically ill neonates are among the most difficult decisions in pediatric practice. These decisions are fraught with ethical dilemmas, for example deciding whether withholding intensive care -leading to death- is superior to uncertain survival with a risk of disability and the additional burden of intensive care. This book covers important ethical questions that arise in neonatal intensive care units. Questions such as, whether to intervene medically and whether we are good at predicting the outcome of fragile neonates; whether a medical intervention should be withheld or withdrawn, and who should be

primarily responsible for these decisions and how?

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