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The Army's Medical Ethical Dilemma with Patient Rights

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Abstract

In this paper we will discuss the ethical issues of a patient's autonomous right to self-determination of treatment, in other words should a physician decide what treatment plan a patient be provided without the input from their patient. Is this loss of a patient's right to self-determination ever ethical and if so should it be only if the patient is mentally competent to make that decision or under all combat situations. We will also explore a second ethical question; with the advancements in technology today in the Army's health records system, and continued security risks in a web based world. Is the Army ethically right in its efforts to shift to a digitized medical records and if so do the benefits outweigh the risk? These are the issues discussed in this paper.

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There are two ethical dilemmas posed to the military health care system today, the first of these deal with the role of a physician and his relationship with his or her patient by providing the best care possible. When is it ever ethical for a physician's judgment to prevail over their patient's autonomous right to decide his or her treatment plan without prejudice to their rank and if so when. The second dilemma deals with the advancements in technology in the Army's health records system, which has to consider the continued security risks in a web based world. Is the Army right in its efforts to shift to a digitized medical record? If so, do the benefits outweigh the risk of securing your information. We must continually ask ourselves these questions in order to protect those patients' rights.

As we discuss the first of these dilemmas, we find that the military doctor is unique because they serve under combat situations and have to make decisions that are under duress, which can affect the quality of care given. I understand that military doctors cannot be expected to spend critical time need to treat life-threatening injury by asking a patient what treatment course they would prefer, this is because time is their enemy. However, I believe that a doctor should provide that choice if possible. I understand that it is hard for a doctor to relinquish this authority and trust the patient no matter their rank to determine what would be the best course of treatment for them. I believe in order to provide the best care possible we must allow the patient the right to determine what treatment plan would be right for them, even in combat, but understandably not under emergency conditions.

Some physicians according to Arthur Schafer, a philosopher/bioethics' states, "some physicians will object that it is never possible to anticipate every medical contingency. Hence, the physician must reserve the right to act in that manner which is most appropriate in the

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circumstances as they unfold.” In other words, they should not be expected to consult with the patient in all cases. I do not think that this is a bad idea, but this issue treads on difficult ground because of the patient's ability to determine their destiny is lost; after all, they are the benefactors of those decisions.

Most Military physicians are committed to the ideology that appropriate treatment for a Soldier (patient) is presenting the treatment plan they think is right, since they are the subject matter expert. They tend not to understand their error, by not providing the patient an opportunity to participate in their treatment plan, and not providing them all courses of actions available to them independent of their rank. Because of this the patient become the child and the doctor the father. This ideology is not conducive to a good doctor patient relationship. This ideology exists because we are a military organization and is ranks structured, in most cases that I have experienced the physician's feels their knowledge of the patient's condition far exceeds the patient's thus they feel that the patient is not qualified to make the right choice.

As a medical professional in the military for the passed 21 years as a combat medic, and as a patient myself, and have seen and experienced the lack of a patient ability to decide what treatment plan would be best for them, especially at the more junior ranks. As I said, I have also had first hand knowledge as a patient in the military, in which I had lost my right to decide as a privet which treatment plan was best for me, this I feel cost me more pain and injury in the end. That pain is still with me today and if I had been given a choice I would have made the right choice for me since I was more in turn with my body than the doctor. Because of my experiences, in my opinion most military doctor's tend not provide their patients with all the choices, and this is especially true for junior ranks were they then to treat them more like

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children, because they feel those patients lack the knowledge to make a sound judgment for them selves. Whatever the reason in order to provide top quality healthcare to all patient, all patients should be afforded a say in their treatment plan no matter what the patients rank is, because the patient is the benefactor of the care provided.

The Army needs to continue to focus more efforts in training their doctors to ensure that all patient's are provided with all the choices available because they have right to decide what course of treatment would best serve their needs, as many civilian physicians do. The military must get away from the rank syndrome when it comes to providing healthcare. The only situation in which a physician's role should only be dominant is when a patient is mentally in capable of make decisions for them selves or in a medical emergency to save their life.

Now let us explore the second ethical dilemma the Army has been dealing with over the past several years. The security of your medical information because of the advancements in technology today the question we have to ask does access of your records out way the risk of your information being obtained without your consent. This was a difficult issue for the Army to make this change, because in the past a hardbound medical record were more secure and the only people that had access to those record were the employees and the patients. This caused a problem be cause access of your information was not obtainable in many cases, which did hinder a doctor's ability to provide the best care possible. Therefore, because of this reason and the increase use of technology, the VA, and all Military Medical facilities are now shifting their efforts towards digital medical records and away from hardbound documents that are not as accessible. This shift is a benefit and makes your records more accessible to all physicians in this digital age of battlefield, which is a benefit when dealing with emergency conditions

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