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Case 2: Stroke Patient

Dr. Murphy [played by faculty]

Patty/Peter Harper [patient's daughter/son played by standardized patient]

Ethics consultants [played by students]

Background

This is a 78-year-old female, Mrs. Henderson, who had a cerebrovascular accident and was admitted to an outside hospital and was transferred to Big Teaching Hospital Medical Center (a day later) secondary to the possibility of surgical management of her CVA. This patient was intubated prior to transfer for airway protection. The patient was found to have a large 7 cm right-sided hemorrhagic stroke.

When the patient arrived at Big Teaching Hospital Medical Center, the neurosurgeon determined that surgery would not help this patient. Currently she is minimally responsive to pain, is ventilated and is partially breathing above the ventilator, but is otherwise noncommunicative.

This patient has one living brother. Her husband is deceased. She has a daughter/son, Patty/Peter, who is with her today. Patty/Peter is a former nurse in an emergency room. Prior to her recent stroke, Mrs. Henderson was a very active, independent individual, who was caring for her sister-in-law who had a stroke many years ago. Mrs. Henderson always said that she would not want to have things “dragged out like that.” Thus, when the neurologist said that surgery was not an option and that it would be several days before they could determine what would happen with Mrs. Henderson, Patty/Peter asked that all life-sustaining treatment be withdrawn.

The attending physician, Dr. Murphy, believed that it was clearly too soon to know if this patient would wake up or how severe the brain injury is. Thus, he asked for several days to continue treatment. When the patient's daughter/son insisted they should stop all aggressive care today, Dr. Murphy called the ethics consult team.

Ethics Consultants [played by students]

This case is tricky for a number of reasons that you want to explore in the case conference.

- You want to see the patient's wishes followed. But whether it's clear that those wishes to forgo life-sustaining treatment apply today as opposed to a few days from now, is not clear.
- You definitely think a couple of days of observation might be in order. But, you want to pin the physician down on exactly when we'll know something and what will happen then.
- You might want to mention a palliative care consult or hospice consult if the patient does not improve.
- The law in your state is not clear about the surrogate's rights in this case. Your state's surrogate decision maker act requires the patient be "terminal," "permanently unconscious," or suffering from an "irreversible condition." It's not clear if the patient presently meets those criteria.