

## Ethics consultation: a practical guide

John LaPuma and David Schiedermayer, Boston, MA, Jones and Bartlett, 1993, 248 pages, \$29.95

## The health care ethics consultant

Edited by Françoise E Baylis, Totowa, NJ, Humana Press, 1994, 221 pages, \$39.50 hb

The field of bioethics has spawned sub-specialties during the past two decades, one of which, clinical ethics, has only recently received the attention it deserves. A comprehensive literature now exists to address particular problems of the clinician-patient encounter, scholarly journals have emerged, and professional associations have been created, whose focus is on the provision of clinical ethics 'consultation'. As befits a new specialty, healthy debate is occurring about what the specialty consists in and who ought to be qualified to engage in it. These two books, while not the first in this emerging specialty, provide readers with important insights not only into many of the substantive issues in clinical (or health care) ethics consultation, but also into the nature of the professional debate itself.

*Ethics Consultation: A Practical Guide* offers an approach to clinical ethics consultation which the authors believe will 'improve patient care'. It consists of four chapters, each devoted to a separate topic: case consultation; training, skills and certification; setting up practice, and consultants and committees. Many topics and issues are addressed in an easy-to-read format. Important, practical issues rarely (or never) treated elsewhere in the literature are given an airing here, including: writing job descriptions; the differences between practice settings (urban v rural; teaching v community hospitals); management of personal stress, and the role of ethicists on clinical ethics and other institutional committees. An appendix of illustrative case consultations provides some insight into how the authors see ethics consultation occurring. A modest annotated bibliography is prepared for each chapter. Thirty-nine references are given.

For those readers already familiar with one of the authors' (JL) regular contributions to the clinical ethics

literature, this book will have few surprises. It makes clear the authors' preferences that clinical ethics consultants should, ideally, be physicians capable of understanding medical terminology, performing physical examinations, and checking test results and drug prescriptions and the like. 'This is a book' they write, 'about a specific consultation method with actual patient care examples'. They are not apologists for this view, taking care to explain (unconvincingly in my view) why ethics consultants should be medical people. The argument is somewhat thin but is available, in that much of the empirical literature used to support this claim is written by one or both of the authors (and found in the bibliography). This is typical of the book, where controversial and currently debatable topics are presented as being resolved: the ethics consultant's primary activity is to resolve ethical dilemmas in patient care; clinical ethics constitutes a distinct professional activity; ethics consultants should have specific credentials/qualifications; all patients should be seen (and preferably examined) by an ethics consultant; consultations should proceed with the agreement of the attending physician, and consultations should be recorded in the patient's progress notes. Interestingly, there is an absence of discussion about what clinical ethicists ought to call themselves ('consultant', 'ethicist', 'clinical ethicist') and how professional titles ought to be used (since this affects perceptions of credibility).

Despite the caveat that the book is meant to be a practical guide focused 'primarily on the clinical model of ethics consultation', it is still somewhat frustrating to read about clinical ethics consultation constantly through the eyes of the physician-ethicist consultant. Issues of specialization, professionalism, and credibility are framed in such a way that the standard against which one ought to be judged is that of a medical doctor alone. Moreover, the context is decidedly American, although with effort it can be applied to other health care systems. It is worth noting that this approach has already been applied at the policy level. At the time of writing (Autumn 1994), the Illinois State Medical Society was considering resolution 3B (A-93), which would amend its constitution and bylaws to 'request the American Medical Association to urge the Health Insurance Association of America

(HIAA), the Health Care Financing Administration (HCFA), managed care organizations, and other third party payers to reimburse physician ethicists for ethics consultations'.

One-third of the written text is devoted to 25 illustrative cases, in which the authors use the 'case presentation' rather than 'phenomenological' tradition. This allows for more cases treated with brevity (which they readily admit to be a goal), but lacks an essential feature for those who read the cases without the benefit of having been there: how did they reason through these problems? It is regrettable then that 'most of the clinical particulars, moral reasoning and ethical analyses are not recounted'.

This text is likely to be of value to physicians contemplating career changes or career enhancement to incorporate ethics consultation into their practice. But I suspect it will also be of value for those who remain unconvinced that ethics consultation is a protected sub-specialty of medicine and want to read a clear description of that position in order to understand their own perceptions about this field.

In many respects, *The Health Care Ethics Consultant* provides a much-needed balance to the approach in the LaPuma and Schiedermayer text. It is not the polar extreme; (which would have been a text written by two philosophers and theologians arguing that the only person capable of providing ethics consultation in hospital is someone philosophically trained with some additional observational experience). The principal difference between this book and LaPuma and Schiedermayer's is that it is the direct result of a multidisciplinary research project designed to answer important questions about what a health care ethics consultant ought to look like. Each of fourteen authors from different disciplinary backgrounds participated in a series of meetings, one of the results of which were the seven chapters in this book. While the primary objective of this book is similar to LaPuma and Schiedermayer's ('... to focus on an immediate practical problem: the role and responsibilities, the education and training, and the certification and accreditation of health care ethics consultants ...'), it presumes that health care ethics consultation (a term the authors prefer to 'ethics consultant' or 'clinical ethicist') is, by its nature, multidisciplinary. The book begins, then, with a different set of

# Ethics Consultation A Practical Guide

**Jessica J Manson**



## **Ethics Consultation A Practical Guide:**

## Unveiling the Magic of Words: A Review of "**Ethics Consultation A Practical Guide**"

In some sort of defined by information and interconnectivity, the enchanting power of words has acquired unparalleled significance. Their capability to kindle emotions, provoke contemplation, and ignite transformative change is truly awe-inspiring. Enter the realm of "**Ethics Consultation A Practical Guide**," a mesmerizing literary masterpiece penned with a distinguished author, guiding readers on a profound journey to unravel the secrets and potential hidden within every word. In this critique, we shall delve to the book is central themes, examine its distinctive writing style, and assess its profound affect the souls of its readers.

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