# **Hot Topic**

## Suspension of DNR for Surgery

This topic has come up recently for several ethics committees and has been a challenging topic of discussion nationwide. As some may know, many facilities suspend a patient's DNAR following surgery. Most likely, this is done as risk aversion, both for the facility and the patient so that appropriate measures can be taken if any unforeseen complications arise during surgery. The suspension intends that if the patient were to die, he/she would die from a natural progression of his/her condition rather than die from the surgery.

### **Extended Suspensions**

Typically, the DNAR is suspended in the immediate post-operative period (48 hours), then reinstated. Recently, however, we are hearing about suspension periods set at 30 days post operation, with some even up to 90 days. This ethical discussion is not new. In his seminal article Dr. Robert D. Truog writes that while there are some arguments for the suspension in general, "rigid policies related to management of DNR orders during anesthesia and surgery would restrict rather than enhance the options of patients and physicians in facing this difficult issue" (p. 608). With respect to the principle of autonomy, he says that "it would be inappropriate not to seek the patient's guidance and provide as much latitude as possible within the constraints of the physician's own ethical standards" (p. 608).

# Right to Self-Determination

His article had such an impact that the American Society of Anesthesiologists reestablished its Committee on Ethics to address this issue the following year (Jackson, 2015, p. 231). In their Ethical Guidelines for the Anesthesia Care of Patients with Do-Not-Resuscitate Orders or Other Directives that Limit Treatment (Reaffirmed October 2018) they state, "Policies automatically suspending DNR orders or other directives that limit treatment prior to procedures involving anesthetic care may not sufficiently address a patient's right to self-determination in a responsible and ethical manner. Such policies, if they exist, should be reviewed and revised, as necessary, to reflect the content of these guidelines."

#### Open Communication

With these established perspectives in place, we suggest a policy of open communication. There are legitimate medical indications for suspension of DNAR for surgery, but not uniformly and certainly not without the patient's understanding and consent. Patient engagement and discussion, while at times uncomfortable, is the most reliable means for the upholding of the ethical principles.

#### Bioethics in the News

"Unregulated clinics are threatening the credibility of the entire stem cell research field"

Consent language can be too complicated for patients

From reproduction to the right to die: bioethics now

What Ethical Rules Should Guide Using CRISPR in People?

# Case Study of the Month

80-year male with multiple medical problems with esrd, dementia, stroke, bedridden and with low blood pressure. Not responsive to medical team. Pt 2010 Advance Directive states, "if only artificially prolonging life and no

meaningful interactions with family...withhold treatments". Medical team believes the clinical situation is at this point, daughter (DPOA) disagrees. Daughter is primary caregiver, quit work to care for her father. Siblings disagree with her and think they should move to comfort measures. A second opinion for determination of non-beneficial care had nephrologist disagree with approach by the medical team, but agreed care was non-beneficial.

Question: Do you do another round of dialysis?

## **Ethical Musings**

The establishment of trust between patient and provider is a fundamental aspect of quality healthcare. If providers set a precedent of purposefully violating the principle of veracity, then the entire healthcare system will suffer as other patients will enter into physician relationships with an initial level of skepticism and distrust.

### Obligation of Veracity

Beauchamp and Childress (2013) state three arguments supporting an obligation of veracity, with the third being, "...based on the role of trust in relationships between health professionals and patients and subjects. Its thesis is that adherence to rules of veracity is essential to the development and maintenance of trust in these relationships" (p. 303).

This does not be mean that the situation cannot be reassessed later. Relating to this month's Hot Topic, the unilateral suspension of DNRs for surgeries may have a negative effect on the physician/patient relationship going forward. In order for the physician to benefit the patient, there must be a foundation of trust. The patient needs to feel that the information his/her provider is offering is honest and in his/her best interest. The patient also needs to feel supported in his/her decisions.

### Affirming Trust

The prolonged suspension of DNR could leave the patient feeling that the provider is not acting in the his/her best interest but rather the provider's, which would then erode the foundation of trust. In the final chapter of their book Trick or Treatment: The Undeniable Facts about Alternative Medicine, Ernst & Singh argue against the intentional use of the placebo effect in medicine. They argue that trust is necessary in medicine, and if the placebo effect is utilized in medicine, every patient would go into a patient/provider relationship with an understandable level of distrust.

Every effort should be made to affirm trust, and this includes having difficult conversations pre-surgery with patients regarding their DNR status. This does not mean that all information needs to be given at a single time or that harmful information must be given. Beauchamp and Childress also state, "Some information can be delayed and spread over a period of time, and some may justifiably never be mentioned...the best approach is to balance the need for disclosure with careful attention to the patient's responses" (p. 304). Ultimately, the conversation relies on the professional judgement of the provider with involvement of the patient and with the intention of promoting beneficence.

- Ryan Pferdehirt