

Case Study – Should Leo’s Nonadherence be Grounds for Firing Him as a Patient?



By Ryan Pferdehirt, D.Bioethics, HEC-C

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Patient Nonadherence Bioethics Case Study

The patient, Leo, is a 54-year-old male, suffering from multiple medical condition including shortness of breath, COPD, renal complications, and confusion. Leo has a history of alcohol and substance abuse. The patient does have decision making capacity but is also supported and spoken for (not in an official way) by his large family. The family and the patient are particularly demanding, regarding care, attention, and the direction of care.

The medical team have expressed concern for multiple reasons. First, Leo is approaching medical standard for discharge, but would likely need to go to a skilled nursing facility or rehab, but due to a history of noncompliant/nonadherence behavior, finding an accepting facility would be very difficult. Secondly, Leo and the family do not believe he is ready for discharge and do not accept the opinion of the medical team. They are demanding additional testing, care, and procedures. These procedures are not standard or indicated for Leo in his current state. When this is brought up and discussed, the family and Leo become extremely agitated and aggressive, raising voices and threatening lawsuits.

The medical team, particularly the attending physician, believe there is nothing more they can provide, and are considering firing (dismissing) the patient. This is complicated because the patient has been dismissed from most other hospitals and therefore would not be able to access care if dismissed.

The physician and team request ethics for support.