

RESOLUTION

Subject: Health Care Decision-Making for the Unbefriended. Two Physicians Rule for withdrawal of non-beneficial treatment of the Incapacitated and Alone

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Referred to: Reference Committee

WHEREAS, Clinicians increasingly confront un-represented patients who are incapacitated and have no “next of kin” or available surrogate to make their decisions or represent their treatment preferences; and

WHEREAS, Clinicians and researchers have described these patients as “unimaginably helpless,” “highly vulnerable,” because “no one cares deeply if they live or die,” unfortunately most often these patients continue to receive futile non beneficial care that may increase pain and suffering; and

WHEREAS, the estimated prevalence of decisional incapacity approaches 40% among adult medical inpatients and residential hospice patients and exceeds 90% among adults in some intensive care units²; and

WHEREAS, the growing therapeutic capabilities of medical science have become more effective in offering overzealous treatment to sustain failing vital functions, they may not always be promoting health.” Pope Francis; and

WHEREAS, despite articles drawing attention to this situation in law journals, medical journals, and bioethics journals, only a few States have adopted the two physician rule for withdrawing futile care in an unbefriended patient; now, therefore, be it

RESOLVED, that the Kentucky Medical Association requests Kentucky state legislative authority to authorize two attending physicians or a hospital ethics committee to withdraw non beneficial treatment when it has been determined that there is no discernable medical benefit, and that any intervention only postpones the imminent moment of death without serving the integral good; and be it further

RESOLVED, that a process be in place that provides the important safeguards of expertise, neutrality, and careful deliberation.

References

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