Ethical Decision-Making Aid for Patients with Diminished Capacity

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ETHICAL DECISION-MAKING AID FOR PATIENTS WITH DIMINISHED CAPACITY

**Ethical Insight #1:**
**Distinguishing Nature of Capacity in Decision-Making & Engaging Care**

- Decisional capacity: Ability to decide to provide or refuse consent
- Executive capacity: Ability to manage the tasks for which the patient is responsible

**Ethical Insight #2:**
**Soliciting Input of Interdisciplinary Team to Determine Nature of Patient’s Capacity**

- Dementia
- Mental illness
- Delirium
- Encephalopathy
- Developmental delay
- Other cognitive impairment

**Ethical Insight #3:**
**Acknowledging Expression of Patient’s Will as Ethically Relevant Whether Passively Receiving or Actively Resisting Care**

**Ethical Insight #4:**
**Respecting Patient Autonomy:**
1. Minimizing interference with autonomous living, and
2. Maximizing patient’s ability to live autonomously.

**Ethical Insight #5:**
**Accounting for Nonmaleficence:** Fulfilling duties to protect the patient and staff

**Ethical Insight #6:**
**Recognizing Limits of Beneficence:** Ensuring feasibility of care plan; no one is obligated to do the impossible.

**Ethical Insight #7:**
**Considering Significance of Care Plan’s Impact on Patient Well-Being and Therapeutic Relationships**

**Ethical Insight #8:**
**Benefit:Harm Ratio?**

**Ethical Insight #9:**
**Anticipating Clinical Milestones to Know When to Re-Evaluate the Care Plan**

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*One author (JFT) presented an earlier version of this decision aid, which focused exclusively on patients with mental illness.*

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