President’s Message: Changing Times

Dear SVME Members,

Another summer has gone by that saw another interesting Ethics session at the AVMA meeting. Our speakers, Drs. Bernard Rollin and Alice Villalobos, who talked about ethics of cancer treatment, and Dr. Carol Morgan, who spoke on veterinary ethics and the human animal bond, did an outstanding job at presenting the ethical issues related to those topics.

The beginning of my year of presidency was the occasion for me to go back to the Society's constitution and have a look at the Society's goals. I realized that in the past few years, emphasis was put on implementing the following goals of the Society:

"To encourage ethical practices and professional behavior of veterinarians in all aspects of the profession."

“To exchange information about veterinary ethical issues via bulletins, periodicals, and newsletters."

"To increase the understanding of the philosophical, social, moral and ethical values encountered by the veterinary profession."

Not much has been done toward reaching the other goals. Therefore, this year I would like to continue working on these goals but I would also like to work on some of the other goals of the Society.

Working on the attainment of these goals should allow us to increase the outreach of the Society and make it grow larger.

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President’s Message
Continued…

Among other things, I would like to work on these two goals:

"To sponsor seminars and other presentations on ethics and values at local, state, regional and national meeting of veterinarians and other interested individuals."

"To promote the teaching of ethical and value issues at colleges of veterinary medicine and to identify speakers on these subjects."

Everyone is faced with ethical issues at some point. The more we discuss those issues, the easier it should be to understand them and deal with them. Since SVME’s main goal is to promote discussion and debate about ethical issues arising in and relevant to veterinary practice, the Society should play a major role in the promotion and dissemination of information related to veterinary ethics.

Being of a different background (I have a Ph.D., not a degree in veterinary medicine) and working in the field of animal welfare, I would also like to put some effort toward the attainment of the following goal:

"To encourage persons from other professions and disciplines, such as biomedical research, medicine, law, political science, philosophy and theology, to engage in cross-disciplinary discussions and studies of these issues."

Many people in various fields are working with animals and are facing ethical issues related to the use of animals. Those people have different experiences. Sharing experiences with others may help expand our view and see things from a different perspective. I think it is important to encourage persons from other professions and disciplines to join the society.

Some might think that this is a lot to do in one year! I agree. I am not expecting to reach all these goals in the next year. However, I believe that the more we can do this year, the easier it will be in the future to reach one of these goals. It is a long-term process and to succeed we have to start working on it right away. For now, I am asking you to think about ways in which the Society can reach these goals? Which goal(s) should the Society prioritize? What can we do to achieve these goals? Let us know what you think!

To conclude, I would like to thank Dr. Brian Forsgren, our past president, and welcome our new officers Drs. Earl Dixon (President-Elect) Carol Morgan (Secretary and Historian), and John Wright (Treasurer). Dr. Robert Speth is returning as the parliamentarian of the society. We are already working towards reaching some of the Society's goals, to make this year a memorable one.

Sylvie Cloutier, Ph.D
President, SVME

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Officers of the Society

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<tr>
<th>Position</th>
<th>Name</th>
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<tr>
<td>President</td>
<td>Sylvie Cloutier</td>
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<tr>
<td>President Elect</td>
<td>Earl Dixon</td>
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<td>Treasurer</td>
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<td>Past-President</td>
<td>Brian Forsgren</td>
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Treasurer’s Report

As the newly elected treasurer of SVME I would like to take this opportunity to mention that the as the newly elected treasurer of SVME I also became the chair of the SVME Membership Committee. In that capacity I want you to know that the membership committee is strongly interested in learning your ideas for making SVME a stronger organization in the promotion, discussion, and debate about ethical issues arising in and relevant to veterinary practice. Perhaps many of you feel, as I do, that these discussions and debates have never been so important as they are in the rapidly changing times in which we live.

As of August 13, 2003 the Society of Veterinary Medical Ethics is financially healthy with a checking account balance of $1,212.89, and a savings account balance of $22,335.75. I might add that much of the financial well-being is due to a very generous bequest from the founding President of SVME, the late, Dr. Robert Shomer.

Despite the present financial health of SVME, increased membership is necessary to make SVME a healthier organization. Please be assured that the SVME membership committee and the SVME Executive Committee wants your suggestions to make SVME an organization that you feel is useful to the veterinary profession as well as yourself. To this end, the membership committee would very much appreciate your responses to a survey of membership satisfaction, and suggestions that you may be receiving in the future. Please send me your suggestions, and constructive criticism.

Respectfully submitted,
John S. Wright, DVM

Dr. Wright can be contacted at:
wrigh008@uman.edu
Dept. of Small Animal Clinical Sciences
University of Minnesota
1352 Boyd Ave. St. Paul, Mn. 55108
Office 612-626-1280 Fax. 612-624-0751

Interesting Links

Centre for Bioethics and Health Law
http://www.uu-cbg.nl/index.html

Applied Ethics Resources – Animal Welfare
http://www.ethicsweb.ca/resources/animal-welfare/

Center for the Study of Ethics in the Professions
http://www.iit.edu/departments/csep/PublicWW/codes/

Centre for Applied Ethics - UBC
http://www.ethics.ubc.ca/start/

Minutes SVME Annual Meeting
July 20, 2003 Denver Colorado

Members present: Sylvie Cloutier, Earl Dixon, Don Draper, Brian Forsgren, Carol Morgan, John Wright

A. Call to order

On the proposition of Brian Forsgren, seconded by Don Draper the order was approved.

B. Secretary’s report & approval of minutes

The minutes of last year’s meeting were published in the January 2003 Newsletter of the Society which was also available on the web site of the society. The minutes were approved unanimously.

C. Treasurer’s report

The treasurer’ report provided by Mary Kraeszig noted a balance of $22,312.56 in the checking account, and $4,952.89 in the savings account (total of $27,265.45).

Continued pg4...
D. Officer reports
No officers’ reports were presented.

E. Committee reports
No committee reports were presented.

F. Old business
1. Status of SVME student chapters

In 2001, Bill Folger started contacting the Associate Deans for Academic Affairs and SCAVMA chapters of all the Colleges of Veterinary Medicine in US and Canada to inform them that SVME could provide financial aid for the development of a SVME student chapter. By the end of 2002, 4-5 schools had contacted SVME and started Student Chapters. However, we have not heard about the chapters since their creation, and the list of members was not forwarded to the manager of VETETHIC to add them to the listserv. Consequently, the students were unable to get involved in the activities of the Society other than those organized by their own chapter.

2. Strategic plan
This issue was not followed up in 2002-2003.

3. Web site and listserv

The problem of improper conduct on the VETETHIC discussion list was raised again since two incidents occurred in the past year. The use of a moderator and the creation of guidelines were discussed. As the manager of the list, Sylvie Cloutier indicated she was not interested in moderating the list. Don Draper mentioned that there were guidelines for the listserv when the list was created. Sylvie Cloutier agreed to check on that.

G. New business
1. How to increase attendance of members at annual meeting.

It was noticed that the attendance to the Ethics session was higher this year than previous years. The attendance at the Society Business meeting was also at its highest. Brian Forsgren mentioned that the SVME has to compete with several other societies and organizations to attract members. Brian Forsgren said that the amount of money provided by AVMA is not sufficient to attract well-known speakers, he suggested using some of the Shomer's money to invite speakers at the meeting. It was also mentioned that SVME should submit the program for next year's meeting early (in September). If the program is submitted before that first deadline, it should get more publicity. The society also needs to find topics and speakers that are of interest and are most likely to attract high attendance. Earl Dixon mentioned that he was meeting later during the week with Dr. Wendy Emerson, program section manager, he will check with her about ways to increase publicity for the Ethics session.

2. Action items from committees
No action items were presented

Continued pg. 5…
3. Other new business
3.1 SVME student chapter members on the VETETHIC list:

Sylvie Cloutier mentioned that she had not received the list of members from each new student chapters created in 2001 and 2002. Consequently those members were not included on the VETETHIC list and were unable to participate in discussions on the list. Brian Forsgren volunteered to contact Bill Folger who is in charge of the student chapter creation to find out how it is going and how we can get the list of members from each chapter.

3.2 Discussion forum on veterinary ethics with AVMA and JAVMA.

Brian Forsgren has been discussing with AVMA to publish in the AVMA journal (JAVMA) a monthly or quarterly section dedicated to ethical challenges within the veterinary profession. Brian indicated that he has contacted AVMA officials without success. Don Draper volunteered to contact other AVMA officers on that matter.

H. Nomination committee report

The slate of candidates for SVME officer positions is:

President-Elect: Dr. Earl Dixon
Treasurer: Dr. John Wright
Secretary: Dr. Carol Morgan
Parliamentarian: Dr. Robert Speth
Historian: Dr. Carol Morgan (temporary)

I. Election of officers
The slate was approved unanimously and the new officers were installed.
The new president is Dr. Sylvie Cloutier

J. Adjournment
The meeting was adjourned at 6pm.

Sylvie Cloutier, PhD

Secretary’s Report

As secretary of the SVME, I am given the privilege of editing the newsletter. Although the SVME has mailed hard copies to the veterinary libraries in North America for some years, the executive of the SVME has decided to mail hard copies of the newsletters to all members. This way you can read the SVME Newsletter at your leisure rather than sitting at the computer.

The upcoming newsletter will also concentrate on specific topics. The topic for the January Newsletter will be Animal Rights and Veterinary Medicine. Submissions for the next newsletter are due January 15, 2004. All articles, commentaries, book reports and letters will be considered. I look forward to a thought-provoking year with the SVME.

Carol Morgan, DVM
SVME Secretary
**Editor’s Note**

The ethical framework presented below is a very practical way of managing ethical decisions in a step-by-step manner. Although the framework was developed for human biomedical decisions, most of the questions and certainly the method are quite applicable to veterinary medicine and veterinary ethics. Many thanks to Michael McDonald for sharing his wisdom.

*Carol Morgan DVM*

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**Ethics in Action**

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**A Framework for Ethical Decision-Making: Version 6.0**

**Ethics Shareware (Jan. '01)**

by Michael McDonald\(^1\)

With additions by Paddy Rodney and Rosalie Starzomski\(^2\)

1. Collect information and identify the problem.

1.1. Be alert; be sensitive to morally charged situations

Look behind the technical requirements of your job to see the moral dimensions. Use your ethical resources to determine relevant moral standards [see Part III]. Use your moral intuition.

1.2. Identify what you know and don’t know

While you gather information, be open to alternative interpretations of events. So within bounds of patient and institutional confidentiality, make sure that you have the perspectives of patients and families as well as health care providers and administrators. While accuracy and thoroughness are important, there can be a trade-off between gathering more information and letting morally significant options disappear. So decisions may have to be made before the full story is known.

1.3. State the case briefly with as many of the relevant facts and circumstances as you can gather within the decision time available

- What decisions have to be made?
- Who are the decision-makers? Remember that there may be more than one decision-maker and that their interactions can be important.
- Be alert to actual or potential conflict of interest situations. A conflict of interest is "a situation in which a person, such as a public official, an employee, or a professional, has a private or personal interest sufficient to appear to a reasonable person to influence the objective exercise of his or her official duties. " These include financial and financial conflicts of interest (e.g., favouritism to a friend or relative). In some situations, it is sufficient to make known to all parties that you are in a conflict of interest situation. In other cases, it is essential to step out a decision-making role.\(^3\)

*Continued pg. 7...*
1.4. Consider the context of decision-making
Ask yourself why this decision is being made in this context at this time? Are there better contexts for making this decision? Are the right decision-makers included?
Consider the following questions:

Clinical Issues

- What is the patient’s medical history/ diagnosis/ prognosis?
- What are the goals of treatment?
- What are the probabilities of success?
- What are the plans in case of therapeutic failure?
- In sum, how can the patient be benefited by medical, nursing, or other care, and harm avoided?

Preferences

- What has the patient expressed about preferences for treatment?
- Has the patient been informed of benefits and risks; understood, and given consent?
- Is the patient mentally capable and legally competent? What is evidence of incapacity?
- Has the patient expressed prior preferences, e.g., Advanced Directives?
- If incapacitated, who is the appropriate surrogate? Is the surrogate using appropriate standards?
- Is the patient unwilling or unable to cooperate with treatment? If so, why?
- In sum, is the patient’s right to choose being respected to the extent possible in ethics and law?

Quality of Life/Death

- What are the prospects, with or without treatment, for a return to the patient’s normal life?
- Are there biases that might prejudice the provider’s evaluation of the patient’s quality of life?
- What physical, mental, and social deficits is the patient likely to experience if treatment succeeds?
- Is the patient’s present or future condition such that continued life might be judged undesirable by him/her?
- Are there any plans and rationale to forego treatment?
- What are the plans for comfort and palliative care?

Contextual Features

- What chapter is this in the patient’s life?
- Are there family/cultural issues that might influence treatment decisions?
- Are there provider (e.g. physicians and nurses) issues that might influence treatment decisions?
• Are there religious, cultural factors?
• Is there any justification to breach confidentiality?
• Are there problems of allocation of resources?
• What are the legal implications of treatment decisions?
• Is there an influence of clinical research or teaching Involved?

2. Specify feasible alternatives.

State the live options at each stage of decision-making for each decision-maker. You then should ask what the likely consequences are of various decisions. Here, you should remember to take into account good or bad consequences not just for yourself, your profession, organisation or patients, but for all affected persons. Be honest about your own stake in particular outcomes and encourage others to do the same.

3. Use your ethical resources to identify morally significant factors in each alternative.

3.1. Principles
These are principles that are widely accepted in one form or another in the common moralities of many communities and organizations.

• **Autonomy**: Would we be exploiting others, treating them paternalistically, or otherwise affecting them without their free and informed consent? Have promises been made?
• **Non-maleficence**: Will this harm patients, caregivers, or members of the general public?
• **Beneficence**: Is this an occasion to do good to others? Remember that we can do good by preventing or removing harms.
• **Justice**: Are we treating others fairly? Do we have fair procedures? Are we producing just outcomes? Are we respecting morally significant rights and entitlements?
• **Fidelity**: Are we being faithful to institutional and professional roles? Are we living up to the trust relationships that we have with others.

3.2. Moral models
Sometimes you will get moral insight from modelling your behaviour on a person of great moral integrity.

3.3. Use ethically informed sources
Policies and other source materials, professional norms such as institutional policies, legal precedents, and wisdom from your religious or cultural traditions.

3.4. Context
Contextual features of the case that seem important such as the past history of relationships with various parties.

3.5. Personal judgements
Your judgements, your associates, and trusted friends or advisors can be invaluable. Of course in talking a tough decision over with others you have to respect client and employer confidentiality.
Discussion with others is particularly important when other decision-makers are involved, such as, your employer, co-workers, clients, or partners. Your professional or health care association may provide confidential advice. Experienced co-workers can be helpful. Many forward-looking health care institutions or employers have ethics committees or ombudsmen to provide advice. Discussion with a good friend or advisor can also help you by listening and offering their good advice.

3.6 Organized procedures for ethical consultation
Consider a formal case conference(s), an ethics committee, or an ethics consultant.

4. Propose and test possible resolutions.
4.1. Find the best consequences overall
Propose a resolution or select the best alternative(s), all things considered.
4.2. Perform a sensitivity analysis
Consider your choice critically: which factors would have to change to get you to alter your decision? These factors are ethically pivotal.
4.2. Consider the impact on the ethical performance of others
Think about the effect of each choice upon the choices of other responsible parties. Are you making it easier or harder for them to do the right thing? Are you setting a good example?
4.3. Would a good person do this?
Ask yourself what would a virtuous person – one with integrity and experience – do in these circumstances?
4.4. What if everyone in these circumstances did this?
Formulate your choice as a general maxim for all similar cases?
4.5. Will this maintain trust relationships with others?
If others are in my care or otherwise dependent on me, it is important that I continue to deserve their trust.
4.6. Does it still seem right?
Are you and the other decision-makers still comfortable with your choice(s)? If you do not have consensus, revisit the process. Remember that you are not aiming at “the” perfect choice, but a reasonably good choice under the circumstances.

5. Make your choice.
5.1. Live with it
5.2. Learn from it
This means accepting responsibility for your choice. It also means accepting the possibility that you might be wrong or that you will make a less than optimal decision. The object is to make a good choice with the information available, not to make a perfect choice. Learn from your failures and successes.

Postscript
This framework is to be used as a guide, rather than a “recipe”. Ethical decision-making is a process, best done in a caring and compassionate environment. It will take time, and may require more than one meeting with patient, family, and team members.

The W. Maurice Young Centre for Applied Ethics, University of British Columbia
[2] School of Nursing, University of Victoria
SVME Membership

We appreciate your past support and look forward to a new and even better year for the Society. Yearly membership runs July 1, 2003 – June 30, 2003. The dues payment of $20.00 ($5.00 for students) is payable to:

*Society for Veterinary Medical Ethics or SVME.*

Send checks and the below form to:

SVME

c/o John Wright,
Dept of Small Animal Clinical Sciences
College of Veterinary Medicine
C339 Veterinary Teaching Hospital
1352 Boyd Avenue
St. Paul, MN 55108

Payment Date: ______________Check Number: _____________________

Please return this section of this form with your dues payment (see amount above) to help us keep our records up to date.

NAME and ADDRESS CORRECTION IF NECESSARY:

NAME____________________________________________________________
ADDRESS:________________________________________________________
__________________________________________________________________
__________________________________________________________________

TELEPHONE NUMBER:    (_______)  _______________
FAX  NUMBER:          (_______)  _______________
ELECTRONIC MAIL ADDRESS:
__________________________________________________________________

Check this box • if you are not on VETETHIC and would like to be. (Email address is required)
In conjunction with the Human Animal Bond Veterinarians Continuing Education Committee present:

**People and Pets Falling Through the Cracks: Meeting the Needs of Animals and Clients in a Transformed Time**

Can clients Afford Our Philosophy of Care? Addressing ethics and economics, compassion and cost.
*Patricia N. Olson, DVM, PhD*

Ethics and the Human-Animal Bond.
*Bernard Rollin, PhD*

Downside Risks From The Benefits of 'The Bond:
Rapidly Changing Precedents for Non-economic Damages.
*Jim Wilson, DVM, JD*

Innovative Health Care Delivery Plans At San Francisco SPCA.
*Jeffrey Proulx, DVM, ACVECC*

Building A Bond-Centered Veterinary Curriculum.
*Shirley Johnston, DVM, PhD*

The Human-Animal Bond in Human Health Promotion and Disease Prevention.
*Charles Hendrix, DVM, PhD*

Practical, Legal, Economical, and Ethical Solutions to the Crises.
*Panel Discussion*

Meet the Professor Lunch: Your Burning Ethical Questions.
*Bernard Rollin PhD*

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**AVMA Annual Convention**

**Philadelphia, PA, July 25, 2004**

Animal Guardianship
*Duane Flemming, DVM, JD*
*Jim Wilson, DVM, JD*

The Role of the Veterinarian in Farm Animal Welfare
*David Fraser, PhD*