President’s Message

The Society for Veterinary Medical Ethics continues to grow and develop. This past year, the main focus of our discussions has been the use of animals in research and the related topics of animal rights and animal welfare. These issues were covered well at our Annual Meeting in Reno this summer, and the proceedings are published elsewhere in this newsletter. Our e-mail discussion list (thank you, Ione Smith, for your efforts to get the list up and running, and for keeping it functioning superbly) has also explored these issues in depth in recent months. While the relationship between human beings and animals will always remain a focal point in any discussion of veterinary ethics, there are other areas that are important as well. It is my goal to focus the Society’s attention on some of these other areas in the coming year.

In my present position as Executive Director of the National Board Examination Committee, I have the privilege of working with many dedicated individuals who serve on state and provincial licensing boards. These individuals, both practicing veterinarians and public members, volunteer their time to help ensure that licensed veterinarians fulfill the responsibilities they assume under the practice act. I plan to explore some of the ethical issues faced by private practitioners and veterinary licensing boards at next year’s Annual Meeting in Baltimore.

One of the issues that is central to any discussion of ethics is honesty. The responsibility to tell the truth and to deal honestly with colleagues and clients is a basic principle of any ethical system. I don’t know about you, but I tend believe that most people are honest, and I am often disappointed when it turns out that they are not. We can all think of recent instances where politicians, business and labor leaders, celebrities, and, yes, veterinarians have acted dishonestly. For licensed professionals, dishonesty can threaten the long-standing ability of professions to be essentially self-governing. I hope to explore these issues more in the coming months.

This is the last SVME newsletter to be published by Bob Speth. We all owe Bob a heartfelt thank you for his tireless efforts on behalf of the Society. The responsibility of publishing the newsletter moves to Jerry Tannenbaum, and I am sure that Jerry will do an equally fine job.

John R. Boyce, DVM, PhD

Proceedings of the Fourth Plenary Session of the Society for Veterinary Medical Ethics.

For the first time, the Proceedings of the Plenary Session of the Society for Veterinary Medical Ethics are being published. Our thanks to all the presenters who took the time to prepare manuscripts describing their presentations to share them with the entire membership.

The Proceedings of the meeting held on July 21, 1997 in Reno, Nevada are included as a Supplement to this Newsletter.

Bob Speth, Editor
President Elect’s Message

I feel honored to have been selected to be President-Elect of this worthy Society and thank the members for the vote of confidence they have given me to continue to work toward the Society’s goals. I hope that I can live up to the ideals of our first President, Robert ‘Bob’ Shomer, who, together with our second President, Albert ‘Al’ Dorn, established this Society to serve to the betterment of all aspects of Veterinary Medicine.

I believe that the Profession of Veterinary Medicine can play an important role, indeed, should play the leading role in promoting the ethical use of animals. I look with optimism for the Society for Veterinary Medical Ethics to continue to grow and to play an increasing role in this area. I welcome the opportunity to work with our President, John Boyce, and the rest of the membership this year as we continue our efforts to further establish the Society as a leading voice for Veterinary Ethics.

The relationship between humans and animals has been, and will continue to be of crucial importance to the well-being of both humans and animals. As we have grown both intellectually and culturally, we have gained a greater appreciation for animals and our need to coexist with them in a symbiotic manner. More and more we are coming to appreciate that in providing for the well-being of our fellow animals that they can, in turn, better sustain our needs. To this extent, I hope to guide the Society towards promoting the examination of animal well-being issues, so that the lives of the animals, upon which we depend for our physical and psychological well-being, can be enhanced. Specifically, I hope to encourage scientific studies of animal well-being which can objectively determine what is best for the animals that have been placed in our care.

I do not pretend to believe that there are easy decisions regarding the ethical use of animals. The world in which we live is subject to economic and practical realities which dictate how much of our resources can be directed toward animal well-being, and how we will use animals. It is precisely for this reason that thorough consideration be given to the development of principles of ethics that can be used to govern our use of animals. I would hope that the Society can play a pivotal role in developing such rationally based decision-making principles.

Bob Speth, Ph.D.

Treasurer’s Message

The Society continues to grow, both in number of members and financially. As of November 1, 1997 the Society now has 157 paid members: 147 regular members and 10 student members. Expenditures for this year to date are $886.59, The Society’s assets are $4794.30.

The growth of the organization is largely attributable to all of you who have encouraged others to join the Society. On behalf of the Society I thank you for your efforts, and encourage you to keep up the good work.

With my election as President-elect of the Society it is necessary for us to find someone to take over the position of Treasurer of the Society. If you wish to nominate someone (yourself included) for this position, please contact either John Boyce or me:

John R. Boyce, DVM; PhD
Executive Director, Natl. Board
Examination Com. for Veterinary Medicine
P.O. Box 1356
Bismarck, ND 58502
TEL: 701-224-0332
FAX: 701-224-0435
EMAIL: 74232.42@compuserve.com
nbec@tic.bisman.com

Robert C. Speth, PhD
College of Veterinary Medicine
Washington State University
Pullman, WA 99164-6520
TEL: 509-335-8631
FAX: 509-335-4650
EMAIL:speth@vetmed.wsu.edu

Bob Speth, Ph.D.
New Member Profiles

Sheila Allen, DVM, MS is the Associate Dean for Academic Affairs and Professor of Small Animal Surgery at the College of Veterinary Medicine at the University of Georgia in Athens, Georgia. Her interest in SVME comes from a general interest in the subject of Veterinary Ethics, and that she teaches a course on Veterinary Ethics at the University of Georgia Veterinary College.

Eric Averill, DVM, is a practitioner at the Cat Clinic of Plymouth, in Massachusetts. His interest in Veterinary ethics derives from his desire to act ethically in clinical Veterinary Medicine and to promote good ethics in all phases of the profession.

Mary Bate, BVSc is Animal Welfare Officer at the University of Newcastle in Callaghan, Australia. Her interest is in the ethics of the use of animals for research and teaching purposes.

Peter Beeman, DVM, is a practitioner at Sunset Veterinary Hospital in San Francisco, California. He has been a member of the Ethics Committee of the SF-VMA for many years. Stated simply (as he is a "two finger typist"), his interests in Veterinary Ethics are "broad based."

Denna Benn, DVM, MSc, is the Director of Animal Care Services at the University of Guelph, Ontario, Canada. She has served on the University Animal Care Committee since 1983 and has interests in the use of animals in teaching, research, and the education of undergraduates, graduates, researchers and personnel in the use of animals in Biomedical and Biological research. She is also interested in the implementation of environmental enrichment strategies for animals used in teaching and research.

Marilyn Berkley, DVM, is the County Veterinarian for the Oakland County Animal Control Agency, in Auburn Hills, Michigan. She is interested in how Veterinary Ethics impacts her life at home and at work.

Jeff Boehm, DVM is the Vice-President for Research/Veterinary Services at the John G. Shedd Aquarium in Chicago, Illinois. He is interested in discussions regarding research programs based on animals in zoos and aquariums. He is also interested in discussions regarding the veterinarian's role in the ethical care and exhibition of managed collections of exotic animals and wildlife.

Ruth Chodrow, VMD, MS, is a practitioner (At Home Pet Care) and Adjunct Assistant Professor of Biology at James Madison University. She has developed and teaches a course "Issues in Animal Welfare" at JMU that discusses topics such as animals in medical research, the human-animal bond, religious and ethical perspectives on animal welfare, etc. She is interested in finding other people who have developed undergraduate level courses such as hers.

Profesor Leopoldo Estol, Medico Veterinario, Diplomado en Salud Publica, is the Dean of the Veterinary School, Universidad del Salvador, in Buenos Aires, Argentina and his country's first Professor of Animal Welfare. He is also an Invited Professor on Ethics.

Jan Feldman, RVT, has a strong interest in legislation and enforcement of the Animal Welfare Act. She has just started working as an Animal Health Technician with USDA,APHIS, Veterinary Services.

William Folger, DVM is a practitioner at Memorial Cat Hospital in Houston, Texas. He would like to form a Veterinary Information Network for AOL (America On-line). Having read Jerry Tannenbaum's book *Veterinary Ethics* he perceives a severe deficiency of ethical behavior brought about by competitive forces which concerns him.

Peter Gollub, DVM, is a law student at Boston University. He is also a member of the Massachusetts VMA Ethics and Grievance Committee. He is interested in most aspects of veterinary ethics, but particularly in the scope and nature of the role (if any) veterinarians and governmental bodies should play in maintaining the integrity and reputation of the profession.

Sharon Gwaltney, DVM, PhD, is with the ASPCA National Animal Poison Control Center in Urbana, IL. Her primary interest in the Society relates to animal welfare and alternative uses to animals in
research, as well as the humane use of research animals when alternatives are not available.

**David Haas, DVM** is an associate at the Lihue Veterinary Clinic in Lihue, HI. He is interested in the behavioral aspects of ethics in an evolutionary perspective.

**Nadine Hackman, VMD, MS Ed.** is the Director of the Veterinary Technology Program at Harcum College in Bryn Mawr, PA. She is also a student in the Masters of Bioethics Program at the University of Pennsylvania.

**Jack Hessler, DVM, MS** is Chief Veterinary Medical Officer for the Dept. of Veterans Affairs in Washington, DC. His primary interest in the Society is the use of laboratory animals in research but he also has an interest in all aspects of veterinary ethics.

**Regina M. Housley D.V.M., Diplomate A.C.L.A.M.** is Lab Head, Lab Animal Resources Amgen, Inc. in Thousand Oaks, CA. She has been working with lab animals for 25 years, starting as a part time animal care taker in 1972 and professionally since obtaining her D.V.M. in 1985. Having witnessed a lot of changes, “for the good, in animal care” she is finding it increasingly difficult to justify personally and professionally, certain attitudes towards the care and use of animals in and out of the research environment. By extending her knowledge and understanding of ethical issues and becoming more conversant in this area will benefit me personally and professionally. The area of animal ethics is of particular interest currently as new molecular techniques expand and possibly redefine or definitions of species and individuality.

**Marilyn O’Boyle Koch** is the Executive Director of The Health, Safety and Research Alliance of New York State. She hopes to gain additional insight on the ethical issues surrounding animal research through the Society. Her organization was formed to educate the public about animal research. In doing so, she is often asked to defend how lab animals are treated and cared for in research facilities; ensure that they are alleviated of pain and suffering; and to explain the roles animals play in scientific discovery that benefits humans and animals. She feels that she has a responsibility to ensure the health and well being of lab animals personally and professionally.

**Mercedes Kuroski de Bold, PhD,** is an Assistant Professor at the University of Ottawa Heart Institute. Her interests in the Society relate to: 1) Ethical issues in bioengineering and biotechnology, 2) Ethical issues arising from the use of experimental laboratory animals in medicine and psychology, 3) Ethical issues arising from xenotransplants, and 4) Training of personnel from the medical profession on the care and use of animals used in biomedical research.

**Denyne Levesque, DVM,** is a Research Associate at the Yerkes Regional Primate Center in Atlanta, Georgia. She has been a member of a University Institutional Animal Care and Use Committee (IACUC) for 4 years as a Laboratory Animal Veterinarian. She is now doing research with non-human primates. Everything related to nonhuman primates is a high concern for her. She is also interested in transgenic animals, analgesia (research and private practice) and comparison/standardization of international regulations for animal use in research.

**Michael List, DVM,** is a practitioner at Blue Sky Veterinary Clinic in Bloomington, Indiana. The issues of Veterinary Medical Ethics has always fascinated him. For more than a decade he has addressed the Indiana University Pre-Veterinary Club annually on the subject of Veterinary Medical Ethics, and finds it to be one of the most interesting and stimulating evenings of the year. He is interested in the conundrum of applying the Veterinary Oath to real life, and in the “uneasy marriage of medicine and commerce.”

**Sean Maguire** is a veterinary student at the University of Pennsylvania. He is interested in the use of animals in research.

**Ulysses McElyea, Jr, DVM, MS,** is a private practitioner in Las Cruces, New Mexico and the attending Veterinarian at New Mexico State University. He is interested in regulatory ethics and laboratory animal ethics. He reports that he was one
of the first Veterinarians to advocate a national disciplinary database.

Mary McCauley, JD, DVM, is a small animal relief Veterinarian in Summerville, South Carolina. Her interests in Veterinary Ethics are: "The whole ball of wax--most issues in most species."

Lauri Paoli is the Director of Educational Programs at the California Biomedical Research Association. She is interested in coordinating the activities of her organization with the principles of Veterinary Ethics.

Jeff Parke, DVM, is with ECP Consulting, in Seattle, Washington. He is a Biomedical engineer involved for years in the animal research environment turned small animal veterinarian doing clinical medicine in Seattle. He describes himself as a "Hopeless computer nerd using programming skills with internet lists to create a sense of community among veterinary professionals." His interest in veterinary ethics arises from a desire to do the "right thing".

Pat Perkins, MT, is a veterinary student at the University of Missouri in Columbia. She writes: "As a veterinary student in a school without an organized program for education in veterinary ethics, I am interested in membership as a means to further my education. I have taken one course in medical ethics, taught through our medical school, which has intensified my interest in how decisions are made and opinions are formed with regard to both clinical veterinary medicine and research. I want to know more about how others view the client/veterinarian relationship in areas of disclosure, financial limitations vs medical recommendations, and the veterinarians role in that relationship as it may extend beyond the scope of the patient's health (i.e., the owner's mental or emotional well-being). I would also like to be included in discourse relating to the use of animals in research and how others balance the advancement of their knowledge with the difficult distinction of an individual animal as; patient, pet, or laboratory preparation."

James Serpell, BSc, Ph.D. is the Marie A. Moore Chair of Humane Ethics and Animal Welfare, in the Dept. of Clinical Studies at the School of Veterinary Medicine at the University of Pennsylvania, in Philadelphia. His interest in Veterinary Ethics relate to his teaching activities, resolving ethical dilemmas in veterinary practice and chairing a large veterinary hospital ethics committee.

Richard Simmonds, DVM, MS is the Director of Laboratory Animal Medicine for the University and Community College System of Nevada, based in Reno. His relate to ethical issues regarding the use of animals in research, education, entertainment and zoos/aquaria. He was also a featured speaker at our 4th annual meeting in Reno this year and his talk is presented in the Proceedings of that meeting in this Newsletter.

Daniel Simpson, DVM, is not only a veterinary practitioner, he is also a college professor, animal welfare committee member, spokesman for the Rhode Island VMA, and a radio/TV talk show host. He is interested in the application of Veterinary Ethics to his various endeavors, and to enhance his understanding and processing of day to day issues in his life and Veterinary Medicine specifically. By necessity (or choice?) he wishes to learn more about the roles of DVM's, animal welfarists/rightists, researchers, teachers, and students in the maintenance of a rational discussion of analgesia/anesthesia, animal 'use', pet ownership, etc., legislative matters and euthanasia of pets.

Alvin W. Smith, DVM, PhD, is Professor and Head of the Laboratory for Calicivirus Studies at the College of Veterinary Medicine at Oregon State University. He teaches a course entitled "Veterinary Professionalism, Ethical, Legal and Moral Aspects of Veterinary Medicine." His goals are to elevate the ethical and moral standards of the Veterinary Profession.

Emily Stewart, RVT, is a full time student from Garden Grove, CA. She will be doing graduate studies in bioethics with an emphasis on Laboratory Animal Medicine. She would like to hear about the latest publications in Veterinary Medical Ethics to have a resource for discussions and ideas as her studies progress.

Patricia Turner, DVM, MSc, DVMSc is the Director of Animal Care Services at Queen's
University in Kingston, Ontario, Canada. She just received her DVSSc this past May. Congratulations!

R. Leland West, DVM, MS is a retired Veterinarian from Colorado Springs, Colorado. His interest in Veterinary Ethics focuses on relations between Veterinary colleagues and between Veterinarians and clients. He expresses concern about organizations with meaningful names that turn out to simply be vehicles for groups dedicated to combating animal experimentation.

Editor’s Note: This list covers new members through October 15, 1997. New members who have joined the Society since this date will be profiled in the next issue of the Newsletter, Vol. 4, No. 1, to be published in February 1998.


Dr. Barbara Orlans served as on organizer of the Fourth Kennedy Institute Ethics workshop on Applied Ethics in Animal Research: From Theory to Decision Making, held in Albuquerque this past June (see synopsis below). Dr. David Morton was a presenter at this conference.

If any members have accomplishments or announcements they wish to have noted in the Newsletter, please forward them to the new Editor of the Newsletter, Jerry Tannenbaum <jtannenbaum@earthlink.net>.

Noteworthy Activities and Recent Accomplishments of SVME Members

The Second Edition of James Serpell’s book “In the Company of Animals” ISBN: 0-521-57779-9 a paperback edition from Cambridge University Press. It is part of Cambridge’s Canto Series directed at offering “some of the best and most accessible of Cambridge publishing to a wider readership. I picked up my copy for $11.95 at a conference where Cambridge was selling books at a discount. It is very worthwhile and interesting reading. Look for a review in the next Newsletter (Ed.)

SVME charter member Carl Osborne, DVM, Ph.D., forwarded a copy of his article “The Golden Rule: A Cornerstone in the Foundation of Veterinary Medical Ethics” which was published in the August/September 1996 issue of Trends Magazine which is published by the American Animal Hospital Association (AAHA). He begins the article with a brief definition and history of Veterinary Medical Ethics and goes on to note how the golden rule can be applied in a variety of situations that occur involving those in the Veterinary Profession. Definitely worth reading. Thanks Carl.

Our Historian, Larry Carbone, DVM, had an article published in a special volume of Society &

Kennedy Institute Takes Bioethics Workshop to the South

The Fourth Annual Kennedy Institute of Ethics workshop on Applied Ethics in Animal Research: From Theory to Decision Making, was held over two and a half days in June this year with about 60 persons attending. This popular seminar, having been run for 2 years in Georgetown, has now taken to the road and was held in Albuquerque, New Mexico. The basic formula is that of one or two plenary sessions followed by breakout group discussions, an approach that has proved its worth in the past and was no less true this time. One of the aims of the workshop was to provide information as well as elaborating critical lines of reasoning on the major ethical principles invoked by those supporting and those objecting to animal research. The delegates then had the opportunity to discuss these matters further in small groups. These philosophical considerations were subsequently broadened to include practical considerations on animal use. On the third day, the theory was applied to an evaluation of research protocols as an IACUC might do - there was even a demonstration of an IACUC in session!

Those attending came from six countries and a variety of backgrounds including laboratory animal veterinarians, practicing veterinarians, veterinary technicians, and graduate students from psychology.
as well as the biological sciences. Speakers were recognized experts in their fields and from various countries which brought an interesting comparative aspect to the proceedings. The program organizers are Dr. Barbara Orleans, Senior Research Fellow, Kennedy Institute of Ethics, Georgetown University, Washington, D.C., 20057 and Professor John Gluck, Department of Psychology, University of New Mexico, and next year they intend to take the conference to another location. If you wish to have further information about the workshop contact them through the mailing address of the Kennedy Institute of Ethics above, Tel: 301-229-7525, Fax: 202-687-8089 or Email: jgluck@unm.edu.

Information forwarded by Dr. John Gluck

If anyone would like to obtain the published proceedings of this and previous conferences of the Kennedy Institute of Ethics workshops on Applied Ethics in Animal Research: From Theory to Decision Making, the following information was provided by Dr. Barbara Orleans:

Ethics and Behavior, special issue: ethics in the use of animals in research. Guest Eds. Kenneth Pimple, F.Barbara Orleans, and John P. Gluck. Volume 7, number 2, 1997. The articles are some of the papers that were given at two annual conferences organized by the Kennedy Institute of Ethics, Georgetown University, in cooperation with other universities on ethical use of animal in research.

Also there will be a published commentary on one of the papers in volume 7, #2 that will appear in the next issue, volume 7, #3, 1997, by John Gluck and Barbara Orleans, entitled :"Animal Care and Use Committees".

Single issues of Ethics and Behavior can be purchased from:
Lawrence Erlbaum Associates Inc
Journal Sales Department
10 Industrial Avenue
Mahwah, NJ 07430-2262
Tel: 201-236-9500
Fax: 201-236-0072

VETETHIC is Very Active

In just over 4 months of operation, there have been nearly 500 posts on the VETETHIC listserver which is available to all SVME members who are connected to the Internet. Topics of discussion have included euthanasia (both Veterinary and Human), ethics literature review, the psychology of pet ownership, the dilemma of divergent views of standards of practice within a practice, pro bono work, economic constraints on the provision of services by Veterinarians and other tough decisions faced by veterinary practitioners, e.g., amputation versus complicated limb fracture repair at a low cost/charity clinic.

On a lighter note, there were esoteric thought provoking quotes, e.g., Henry Beston's comments regarding the coexistence of humans and animals, there was an interesting discussion as to what constitutes a kickback: does a pizza dinner qualify or should it be limited to a minimum of an all expenses paid two week vacation to Hawaii for the practitioner and spouse for every 500 cases of Philbert's Fabulously Fortified Ferret Feed that are sold through the practice?

Other topics included fox hunting and alternatives, laws regulating the practice of Veterinary Medicine, laws applicable to sentient beings, horse genetics and breeding, violence and the animal rights movement, lots of other stuff on animal rights, the science of animal welfare, lots of provocative case studies and scenarios, and even some occasional humor.

Needless to say the discussions have been broad ranging and spirited, generating much useful information. If anyone who has internet access who wishes to join and has not yet done so, they can get connected by contacting Jerry Tannenbaum <jtannenbaum@earthlink.net> or Ione Smith <ilsmith@UTKUX.UTCC.UTK.EDU>

Also, check out the SVME homepage: http://funnelweb.utcc.utk.edu/~ilsmith/ethics.html which is being maintained through the dedicated effort of our Secretary Ione Smith.
Ethical Guidelines of the National Academies of Practice NAP

At the suggestion of SVME member Dr. Jean Dodds, DVM and with the assistance of Dr. John McCarthy, DVM, the Executive Director of the National Academies of Practice, we are reprinting the Guidelines developed by the National Academies of Practice to share them with our members.

BACKGROUND INFORMATION ON THE NATIONAL ACADEMIES OF PRACTICE

The National Academies of Practice (N.A.P.) is an organization comprised of professionals in each of nine health care fields. The specific health disciplines represented by the membership include the following: dentistry, medicine, nursing, optometry, osteopathic medicine, podiatric medicine, psychology, social work, and veterinary medicine. The N.A.P. is dedicated to quality health care for all, by serving as the nation's distinguished interdisciplinary policy forum that addresses public policy, education, research, and inquiry. Membership in the N.A.P. is contingent upon election as a Distinguished Practitioner in one of the nine Academies. Distinguished Practitioners are chosen by their peers and are individuals who have spent a significant portion of their professional careers as practitioners in the direct delivery to, and practice of health care to the consumer: and who have been judged by the Academy to which they pertain to have made significant and enduring contributions to the advancement of professional practice. Health Care Policy Forums held to date by the N.A.P. have discussed the subjects of “Aging in Good Health”, “Healthy Children 2000”, “The Dollars and Sense of Health Care”, “Ethical Dilemmas in a Changing Health Care Environment” (which became the initiation of the Ethical Guidelines) and “Prevention: An Interdisciplinary Approach”. The N.A.P. has offices at 1511 K. St. Suite 327, Washington, DC 20005.

Information provided by John McCarthy, DVM

N.A.P. Council Adopts Ethical Guidelines

Completing a process that began in April of 1996 with the 6th N.A.P. Health Care Forum, Ethical Decision Making in a Changing Health Care Environment - An Interdisciplinary Approach, the Council of the N.A.P. adopted Ethical Guidelines for Professional Care and Services in a Managed Health Care Environment. The Guidelines were developed by a Project Team chaired by Alden N. Haffner, PhD, OD, Distinguished Scholar in Optometry, which had at least one member of each of the nine Academies in the N.A.P. This Project Team labored tirelessly and confidently over a twelve month period to complete a document that was acceptable to all nine of our disciplines.

The Preamble of the guidelines begins “Ethical guidelines of the National Academies of Practice regarding professional care and services are founded on an ideology of patient advocacy. Moreover, preserving the patient’s welfare must be the principal objective in resolving ethical dilemmas or challenges that arise from patient care delivery systems”. It goes on further to state “During the last decade, reimbursement arrangements in the health care enterprise have increasingly changed from fee-for-service to some type of externally managed care. However, virtually all managed care plans tend to shift financial risk from payers to health professionals. This transfer of financial risk has the potential to invite ethical conflicts by way of creating a tension between economic availability and clinical care considerations bearing on patient care, patient rights and advancing the knowledge base of the health care professions. The purpose of the ethical guidelines is to set forth the positions of the National Academies of Practice on certain of these pertinent issues”.

The Guidelines cover five separate subjects and in each area state a reason, a position and a rationale for that position. The five subjects with the basic N.A.P. positions are:
I. Professional Commitment to Patient Needs Must Remain the Prime Concern
It is the position of the National Academies of Practice that it is unethical to compromise a patient’s needs and quality care concerns to satisfy financial objectives.

II. Informational Disclosure
It is the position of the National Academies of Practice that all reasonable clinical options for care and services, consistent with sound and accepted clinical standards, should be presented to the patient and that the practitioner should not be deterred through gag rules or otherwise constrained to present only those options for care and services that are covered by the patient’s policy or plan.

III. Teaching and Research in Patient Care
It is the position of the National Academies of Practice that demands for increased economy and efficiency in the health care environment should not be allowed to conflict with teaching and research functions.

IV. Confidentiality
It is the position of the National Academies of Practice that utilization studies and quality assurance reviews are appropriate functions in an efficient and effective health care system. However, safeguards must be adopted, codified and implemented to protect the privacy and confidentiality of patient data and the practitioner’s clinical material.

V. Prevention
It is the position of the National Academies of Practice that every health care enterprise should acknowledge the critical importance of the teaching and inculcation of prevention as well as the need for competently delivered patient care services. The N.A.P. Council is currently considering the most appropriate means to distribute and publicize the Guidelines. A letter has been sent to the Advisory Commission on Consumer Protection and Quality in the Health Care Industry requesting an opportunity to present the Guidelines to them. This special commission was created by President Clinton who named Secretary of Health and Human Services, Donna Shalala, its Chair. All N.A.P. Active and Emeritus Members will receive a copy of the complete guidelines with a message from President Ron Fair. Any other Newsletter reader who would like a copy of the guidelines should contact the N.A.P. office at:

National Academies of Practice
1511 K. St. Suite 327
Washington, DC 20005.

Telephone: 202-842-5015
FAX: 202-637-9617
EMAIL: 74253.511@compuserve.com

Information provided by John McCarthy, DVM

The Ethical Guidelines of the NAP are reprinted in their original format on succeeding pages of the Newsletter.

The National Academies of Practice Ethical Guidelines Project Team that developed these guidelines was composed of the following individuals:

Alden N. Haffner, O.D., Ph.D. - Chair
Daniel M. Laskin, D.D.S., M.S.
Tracy Gordy, M.D.
Roberta Conti, Ph.D., R.N.
Stephen Urban, D.O.
Larry Harkless, D.P.M.
Norma Simon, Ed.D. (Psychology)
Jean L. Athey, M.A., Ph.D. (Social Work)
David Phillips, D.S.W.
Alex Ardans, D.V.M.
NATIONAL ACADEMIES OF PRACTICE
AN INTERDISCIPLINARY ASSOCIATION OF PROFESSIONALS
ETHICAL GUIDELINES FOR PROFESSIONAL CARE AND SERVICES
IN A MANAGED HEALTH CARE ENVIRONMENT

PREAMBLE

Ethical guidelines of the National Academies of Practice regarding professional care and services are founded on an ideology of patient advocacy. Moreover, preserving the patient’s welfare must be the principal objective in resolving ethical dilemmas or challenges that arise from patient care delivery systems. Many health care professionals recognize that managed care was created with the intent to offer an excellent opportunity to advance quality standards of practice and care while reducing unnecessary and wasteful health care. A further purpose was to achieve a more balanced and socially responsive approach to the achievement of desirable health outcomes in our communities through the use of prudent interdisciplinary resources.

During the last decade, reimbursement arrangements in the health care enterprise have increasingly changed from fee-for-service to some type of externally managed care. However, virtually all managed care plans tend to shift financial risk from payers to health professionals.
This transfer of financial risk has the potential to invite ethical conflicts by way of creating a tension between economic availability and clinical care considerations bearing on patient care, patient rights and advancing the knowledge base of the health care professions. The purpose of the ethical guidelines is to set forth the positions of the National Academies of Practice on certain of these pertinent issues.

1. PROFESSIONAL COMMITMENT TO PATIENT NEEDS MUST REMAIN THE PRIME CONCERN

Patient-focused care has the potential to be threatened by economic pressures to abbreviate the utilization and scope of professional services. While mindful of economy and efficiency in health care services, an ethically based patient-practitioner relationship should admit no unreasonable diminution of the professional’s commitment to the patient’s need and care consistent with accepted standards of clinical care.

It is the position of the National Academies of Practice that it is unethical to compromise a patient’s needs and quality care concerns to satisfy financial objectives. The patient’s right to appropriate care must not be diluted by economic pressures. The benefits offered by all health care providers should:

- provide access by the patient to appropriate professional services;
- meet with patient satisfaction;
- avoid contamination by an overly rigid adherence to clinical guidelines such that the practitioner’s decision making is hampered;
- provide delivery by uniquely trained personnel, such as medical specialists and other professionals trained in delivering psychosocial services, when the complexity of the patient’s condition requires the knowledge base and expertise beyond those of the primary care provider.
The rationale for these positions derives from a patient or consumer-focused value, that has remained constant in the historical evolution of Western ethics, is reiterated in contemporary health professional codes of ethics and can be found in current regulatory statements such as the Patient Rights Standards of the Joint Commission on the Accreditation of Healthcare Organizations. Health professionals must refrain from subordinating the patient’s welfare to economic mandates thereby potentially creating an incursion on the patient’s rights. The fiduciary role of the provider must be balanced with the patient’s needs.

II. INFORMATIONAL DISCLOSURE

Questions frequently arise over whether the practitioner has an ethical obligation to present reasonably considered clinical options for care and services regardless of those economic restrictions or contractual prohibitions, such as “gag rules”, that may be dictated by the patient’s insurance or managed health care plan.

It is the position of the National Academies of Practice that all reasonable clinical options for care and services, consistent with sound and accepted clinical standards, should be presented to the patient and that the practitioner should not be deterred through gag rules or otherwise constrained to present only those options for care and services that are covered by the patient’s policy or plan.

The rationale for this position inheres in the patient’s right of informed consent as a service consumer. This right entitles the patient access to information whose scope may exceed that allowed by the health insurance policy or health care plan. The patient’s right of informed consent also repudiates attempts to restrict patient-provider discussions to the plan coverage.
III. TEACHING AND RESEARCH IN PATIENT CARE

A clinical environment that includes teaching and research functions traditionally has represented a hallmark of health care delivery. Teaching and research functions are quintessential ingredients in the advancement of knowledge about the patient’s needs and the deployment of sophisticated services. With pressures to produce utilization efficiencies and fiscal economies, managed care arrangements may conflict with teaching and research functions. The values of teaching and research, which are enduring in the advancement of science, must not be lost.

It is the position of the National Academies of Practice that demands for increased economy and efficiency in the health care environment should not be allowed to conflict with teaching and research functions. Such demands risk retarding the advancement of knowledge and training in the health sciences and are of consequential importance.

The rationale for this position inheres in the ongoing necessity of scientific research to realize patient-centered achievements. These beneficial goals require an unremitting effort not only to train but to advance the knowledge base of health care professionals.

IV. CONFIDENTIALITY

The confidentiality of patient data in clinical encounters is a primary concern. Although utilization review and quality assurance are customary and appropriate functions in every health care environment, these activities should not breach the confidentiality of patient data. Safeguards must be adopted when persons engaged in utilization and quality assurance reviews have access to patient files.

It is the position of the National Academies of Practice that utilization studies and quality assurance reviews are appropriate functions in an efficient and effective health care system.
However, safeguards must be adopted, codified and implemented to protect the privacy and confidentiality of patient data and the practitioner’s clinical material. Confidential information can be disclosed only with the patient’s consent except in instances where withholding that information poses unreasonable and foreseeable harm to the patient or identifiable others.

The rationale for this position is founded on the patient’s autonomous right to control sensitive personal information. It is further based upon an historical recognition in the Oath of Hippocrates and corroborated throughout the centuries, of the enduring value of preserving confidentiality in order to enhance mutual trust and respect in the patient-provider relationship.

V. PREVENTION

While direct care based upon episodes of illness, disease, or disability is always appropriate; concerns about preventive services as an integral part of clinical care should be of utmost concern to all practitioners.

It is the position of the National Academies of Practice that every health care enterprise should acknowledge the critical importance of the teaching and inculcation of prevention as well as the need for competently delivered patient care services.

The rationale for this position derives from the ethical principle of beneficence, which recognizes the desirability of preventing illness and disease and promoting health among all persons and communities. The principle of autonomy argues for the informed patient’s right to initiate preventive and wellness measures. This right is dependent upon the patient having access to relevant health information and strategies which are essential ingredients of patient care and services.

Approved by mail ballot of the Council of the National Academies of Practice and affirmed by President Ron Fair, O.D. on 2 June 1997.