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AMA CODE SAYS

AMA Code of Medical Ethics Serves as "Gold Standard"

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Paul Glader's *Wall Street Journal* article (11/12/02), "Doctors Question Use of Dead or Dying Patients for Training" begins with a provocative statement: "Unbeknownst to the vast majority of family members, after a patient dies in the emergency room of many hospitals, a senior physician draws a curtain and supervises young doctors practicing several rounds of emergency medical techniques on the deceased." Glader quickly acknowledges that the AMA's Council on Ethical and Judicial Affairs adopted a report in June 2001 that no training be performed on newly dead patients unless the patient or family members had given prior consent.

That report became Opinion 8.181 in the 2002-2003 *Code of Medical Ethics*.¹ But the AMA *Code* is non-binding, and there is no way to know how many hospitals enforce the "with-consent-only" guideline. Some physicians think the AMA position hinders the training of medical students and residents, arguing that emergency room physicians must know how to perform difficult procedures such as intubation. If they don't, some say, future patients will die.

Supporters of the *Code's* position, like Paul Wolpe at the Center of Bioethics at the University of Pennsylvania whom Glader quotes in the *WSJ* article, believe that the AMA policy "will serve as a gold standard for hospital ethics boards."

Glader mentions that the *Code* opinion, entitled "Performing Procedures on the Newly Deceased for Training Purposes", does not address the practice followed in some hospitals of allowing training on *nearly* dead patients. While that statement is correct as it applies to this particular opinion, other *Code* opinions specifically prohibit performing procedures on living patients without their consent, that of their family members, or that of their designated decision makers.

References

1. Opinion 8.181 Performing Procedures on the Newly Deceased for Training Purposes. American Medical Association. *Code of Medical Ethics 2002-2003 Edition*. Chicago, IL: American Medical Association; 2002.

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