<table>
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<tr>
<th>Date</th>
<th>Time</th>
<th>Topic</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>27 August</td>
<td>1300-1420</td>
<td>Introduction to the Course</td>
<td>E. Howe, M.D., J.D./P. Mitchell/A. Jankowski</td>
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<td>1430-1600</td>
<td>Discussion Groups*</td>
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<tr>
<td>3 September</td>
<td>1300-1350</td>
<td>Infants with Defects, Religion, Microallocation</td>
<td>J. Childress, Ph.D.</td>
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<td>1350-1430</td>
<td>Military Triage - R. Rozin, M.D.</td>
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<td>1440-1455</td>
<td>The Student/Patient Relationship</td>
<td>D. Cohen, LCOL, USAF, MC</td>
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<td>1500-1600</td>
<td>Discussion Groups*</td>
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<td>10 September</td>
<td>1300-1350</td>
<td>The Student &amp; Doctor/Patient Relationship</td>
<td>E. Pellegrino, M.D.</td>
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<td>1400-1450</td>
<td>FILM: The Case of Dax Cowart</td>
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<td>17 September</td>
<td>1300-1350</td>
<td>Deciding to Live or Die</td>
<td>R. Veatch, Ph.D.</td>
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<td>1400-1420</td>
<td>D. Smurr</td>
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<td>24 September</td>
<td>1300-1420</td>
<td>The Doctor/Patient Relationship in the Military</td>
<td>R. Bellamy, COL, MC, USA/E. Dolev, M.D./C. Llewellyn, COL, MC, USA</td>
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<td>1430-1500</td>
<td>FILM: (1) The Silent Scream</td>
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<td>1500-1600</td>
<td>Discussion Groups*</td>
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Lectures will be held in Lecture Room D, Building C
*Discussion group will be held around tables in cafeteria marked by letter
1 October

1400 - 1450 Abortion and the Fetus
   P. King, J.D.

1500 - 1600 Discussion Groups*

8 October

1400 - 1450 Genetic Screening and Counseling
   R. Murray, M.D.

1500 - 1600 Discussion Groups*

15 October

1400 - 1415 Experimentation in the Military
   H. Holloway, COL, MC, USA

1415 - 1600 Experimentation on Animals
   Film, Class Discussion and Panel
   R. Simmonds, DVM, Moderator
   J. Fletcher, Ph.D., E. Howe, M.D., J.D., Panelists

22 October

1400 - 1450 "A Philosopher on the Wards"
   S. Gorovitz, Ph.D.

1500 - 1600 Discussion Groups*

29 October

1400 - 1415 "Coercive Influences in Medicine"
   R. Rahe, CPT, MC, USN

1420 - 1450 Dramatic Presentation: "Frankenstein"
   Jon Spelman

1450 - 1500 INTERMISSION

1500 - 1530 Frankenstein (Continued)

1530 - 1600 Panel - E. Dolev, M.D./C. Llewellyn, COL, MC, USA
   and Class Discussion
SESSION I: TUESDAY, AUGUST 28, 1985

27 Aug 1300-1420  INTRODUCTION  Edmund G. Howe, M.D., J.D.
                  Pat Mitchell
                  Anthony Jankowski

1430-1600  DISCUSSION GROUPS*

Objectives:  1) To understand course goals and requirements

             2) To acquire basic knowledge of ethical reasoning and of the distinction between deontological and utilitarian values

             3) To learn the value of listening to persons' experience in order to enhance clinical sensitivity

             4) To identify issues and arguments related to the treatment of infants born with severe birth defects

             5) To identify issues involved in discussing religious views with patients

             6) To identify problems in deciding how to ration scarce resources

             7) To identify ethical concerns related to military triage

Subscription Form:  The Hastings Center Report

Required Reading:


*Attendance is mandatory.
Recommended Readings:


3) Parental and Community Response to the Birth of a Down's Syndrome Child.


9) Doctor's Dilemmas. Gorovitz, Preface and Ch. 1.
SESSION II: TUESDAY, 3 SEPTEMBER 1985

3 Sept 1300-1350 Infants with Defects, Religion, Microallocation
        J. Childress, Ph.D.
1350-1430 Military Triage - R. Rozin, M.D.
1440-1455 The Student/Patient Relationship
        D. Cohen, LCOL, USA, MC
1500-1600 Discussion Groups*

Objectives: 1) To gain greater understanding of issues discussed in last
week's discussion groups
2) To explore the nature of the physician-patient relationship
   and its theoretical basis
3) To explore conflicts regarding truth telling and confidentiality
4) To identify potential difficulties in students' attempting to
   respect patients' interests in a teaching environment
5) To discuss issues and arguments related to medical students'
   roles such as whether or not to tell patients one is a
   student, how much to tell patients about one's prior
   experience in performing procedures; and what to do when one
   believes that a member of the house staff or an attending
   physician is acting unethically

Required Reading:

1) Legal Aspects of Critical Care Pharmacology. Howe, from the
   Pharmacologic Approach to the Critically Ill Patient, 1983

Recommended Readings: 1) Terrified Consent. Coleman,
   Physician's World, May 1974
2) Ethical and Cultural Dimensions of Informed Consent. Cross
   Feb, 1983 (On Reserve)
4) A Student Examines Life on the Wards, Hoffman
5) Bad News About Doctors' Bad News. Restak, Washington Post,
   B1, July 14, 1985

*Attendance is mandatory.


8) *Doctor's Dilemmas*, Gorovitz, Chps. 2 & 3
SESSION III: TUESDAY, 10 SEPTEMBER 1985

10 Sept  The Student & Doctor/Patient Relationship
E. Pellegrino, M.D.

1400-1450 FILM: The Case of Dax Cowart

1500-1600 Discussion Groups*

Objectives: 1) To gain greater understanding of issues discussed in last week's discussion group
2) To discuss aspects of telling patients and their families the truth about terminal illness
3) To discuss legal and ethical considerations in regard to decisions to forego life sustaining treatment
4) To discuss specific approaches to assessing patient's competency to refuse treatment and ethical considerations when making this assessment
5) To discuss issues relating to the withholding of treatment from incompetent patients

Required Reading: 1) Ethical Decisions in the Case of a Patient Terminally Ill with Metastic Cancer. Lo and Jonsen, Annals of Internal Med. 92: 107-111, 1980
2) Law/Debate on the Boundary of Life. Time, April 11, 1983, p. 68-70

4) Cancer Patient Gets to Die "Peacefully". Smith, The Washington Post, March 1, 1 1985, c 1
6) Patient Sues to Block Amputation of Leg, The Washington Post, June 2, 1984
8) In the Matter of Bertha Harris, 477 A 2nd 724 (1984) (On Reserve)


11) Doctors' Dilemmas. Gorovitz, Ch 4
SESSION IV TUESDAY, SEPTEMBER 17, 1985

17 Sept 1300-1350 Deciding to Live or Die  
R. Veatch, Ph.D.

1400-1420 D. Smurr

1430-1600 DISCUSSION GROUPS*

Objectives:  
1) To gain greater understanding of issues discussed in last week's discussion groups.
2) To gain familiarity with ethical issues of particular concern for military physicians.
3) To appreciate practical aspects of pursuing ethical beliefs in a military context.
4) To discuss values and possible conflicts between military physicians’ duties to the military, patients, the medical profession, and humanity.

Required Reading:  

Recommended Readings:  


Recommended Readings:


SESSION V: TUESDAY, 24 SEPTEMBER 1985

24 September 1300-1420  The Doctor/Patient Relationship in the Military
R. Bellamy, COL, MC, USA/E. Dolev, M.D.
C. Llewellyn, COL, MC, USA
1430 -1500  FILM: (1) The Silent Scream
1500 -1600  Discussion Groups*

Objectives:
1) To gain greater understanding of critical issues discussed in last week's discussion group.
2) To discuss the justification or lack of justification of a physician's using his medical role to influence others to adopt his point of view.
3) To appreciate different approaches to considering whether or not abortion should be permissible.
4) To consider various clinical issues which concern the fetus, such as whether fetal experimentation should be permitted, and what should be done when a fetus is alive after a saline abortion is performed.

Required Reading:
1) But is it a Person? Adler and Carey, Newsweek, January 11, 1982, p. 44.

Recommended Reading:
3) Nuclear War, Patriotism, and Medical Ethics. Bruwer, The Pharos, Summer, 1982. (On Reserve)
5) Doctors' Dilemmas, Gorovitz, Chps. 5 & 10.

*Attendance is mandatory.
SESSION VI: TUESDAY, 1 OCTOBER 1985

1 Oct 1400-1450 Abortion and the Fetus  
P. King, J.D.

1500-1600 Discussion Groups*

Objectives:  
1) To gain greater understanding of issues discussed in last week's discussion groups

2) To appreciate potential benefits and harms of genetic screening

3) To know arguments for remaining “neutral” and for giving advice when doing genetic counselling

4) To discuss problems arising in genetic counselling when counselling might indicate non-paternity, when risks to the fetus are uncertain, and when relatives would benefit from disclosure but the patient wishes genetic findings kept confidential

Required Readings:  


Recommended Readings:  


3) Studying Sickle Cell Trait in Healthy Army Recruits: Should the Research be Done? Howe, Kark, Wright, Clinical Research 31: 119-125, 1983

4) Doctors' Dilemmas. Gorovitz, Chps 6 & 11

*Attendance is mandatory
SESSION VII, TUESDAY, OCTOBER 8, 1985

8 Oct 1400-1450 Genetic Screening and Counseling  
R. Murray, M.D.  
1500-1600 Discussion Groups*

Objectives: 1) To gain greater understanding of issues discussed in last week's discussion groups.

2) To identify conflicting values in experimentation using human subjects.

3) To consider ethical dilemmas which could arise for military physicians asked to do research related to medical weaponry.

4) To know arguments for and against conducting research on animals.

Required Reading: 1) Biological Warfare/Lifting the Quarantine. Allman, Science 85, July/August p. 12.


4) "Or Not Emulating the Ostrich: Ethical Concerns About Animal Use that Won't Go Away." Caplan.


2) "Medical Ethics and Biological Warfare." Rosebury, Perspectives in Biology and Medicine, Summer 1963, pp. 512-523. (On Reserve)

3) "On the Morality of Chemical/Biological War." Krickus, J. of Conflict Resolution 9(2):200-210,
June 1965. (On Reserve)


8) "Has Not An Animal Organs, Disillusions, Senses, Affections, Passions?" Solomon, Psychology Today, 1982, pp. 36-45. (On Reserve)

9) Doctor's Dilemmas. Gorovitz, Chap. 7.
15 Oct 1400-1415 Experimentation in the Military
H. Holloway, COL, MC, USA

1415-1600 Tools for Research: Questions About Animal Rights
Film, Class Discussion and Panel
R. Simmonds, D.V.M., M.S., Moderator
J. Fletcher, Ph.D., E. Howe, M.D., J.D., Panelists

Objectives:
1) To gain greater understanding of issues raised in last week's discussion groups.
2) To consider ethical dilemmas which could arise for military physicians asked to do research related to medical weaponry.
3) To know arguments for and against conducting research on animals.

Recommended Reading: Doctors' Dilemmas, Gorovitz, Ch. 8
ETHICAL, LEGAL, AND SOCIAL ISSUES IN MEDICINE

SESSION IX: TUESDAY, 22 OCTOBER 1985

1400 -1450 "A Philosopher on the Wards"
S. Gorovitz, Ph.D.

1500 -1600 Discussion Groups*

Objectives: 1) To gain perspective on the ways in which ethical analysis can contribute to clinical care.
2) To gain awareness concerning when it might be useful to obtain an ethics consultant when treating patients.
3) To acquire knowledge of more subtle aspects of patient / doctor communication and their clinical importance.
4) To know means of enhancing one's awareness and sensitivity to patients' feelings.

Required
Reading:
1) Hi, Lucille, This is Dr. Gold. Natkins, JAMA 247:2415, May 7, 1982.

Recommended
Reading:
1) Doctor-Patient Communication. Krosch, Negrete (On Reserve)
4) Folk Medical Beliefs and Their Implications for the Care of Patients. Snow, Annals of Int. Med. 81:82-96, 1974. (On Reserve)
8) Doctors' Dilemmas. Gorovitz, Chps. 9 and 12.

The lecture will be held in Lecture Room D, Building C
* Discussion group will be held around tables in cafeteria marked by letter
SESSION X, TUESDAY, 29 OCTOBER 1985

1400 -1415 "Coercive Influences in Medicine"
R. Rahe, CAPT, MC, USN

1420 -1450 Dramatic Presentation: "Frankenstein"
Jon Spelman

1450 -1500 Intermission

1500 -1530 "Frankenstein" (continued)

1530 -1600 Panel - E. Dolev, M.D./C. Llewellyn, COL, MS, USA
and Class Discussion

Objectives:
1) To learn a means of evaluating one's approach to ethical decision making.
2) To be aware of cognitive versus non-cognitive approaches to decision making.
3) To consider moral biases in favor of utility one may already have acquired.
4) To better appreciate ways in which the processes of becoming a physician and being a physician can affect your values and emotions.
5) To experience how viewing a play can stimulate greater awareness of your own and other persons' and patients' feelings.

Required Readings:
1) Cognitive Moral Development
Recommended Reading: