HEALTH, CARE & SOCIETY II 1999-2000

SYLLABUS AND READING MATERIAL

THEME LEADERS
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INTRODUCTION

August 18, 1999

In the first meeting we will go over the goals and objectives of the course. We will describe the philosophy of the course and its relevance to medical practice. All of the assignments throughout the year will be described so that there is a clear understanding of what is expected from each student.
MODULE ONE:  
The Patient's Illness Experience

Session #1  
The Meaning of Illness through the Eyes of HIV+ Patients

Date: August 26, 1999 (1:00 p.m. to 3:00 p.m.)

Format: Small groups (Attendance Mandatory) (6 guest patients)

Objectives:

Knowledge
To be able to define and distinguish between the concepts of “illness” and "disease".

Analytic Skills
To be able to apply this distinction and do a psychosocial assessment of a patient.

Professional/Personal Development
To empathize with patients for whom this distinction is real and to process how this experience will impact the future care of your patients.

Readings:


Glossary:

Clinician  Sick person
Clinical evidence  Plan of management
Communication  Wise sensor
Qualities of the “good physician”  Discipline
Methodical  Crisis-oriented model
Preventive model  Comprehensive assessment
Reassessment  Start where the client is
Evaluation process  Baseline
Chronic illness  Physical functioning
Cognitive and psychiatric functioning
Coping ability  Physical environment
Support system  Equilibrium
Session #2
Uses of Illness Narratives in Clinical Practice

Date: September 1, 1999 (1:00 p.m. to 2:00 p.m.)

Format: Large group

Objectives:

Knowledge
To be able to define and discuss the meaning of "illness narratives" and the "narrative approach" as way to broaden your understanding of patients' total needs.

Analytic Skills
To be able to apply the "narrative approach" to a real patient case in order to better understand the patient's needs.

Professional/Personal Development
To contemplate how you may use the "narrative approach" as a tool for becoming a more effective caregiver.

Presenter: Rita Charon, MD, Ph.D., Associate Professor of Clinical Medicine, College of Physicians and Surgeons, Columbia University.


Glossary: Illness narrative
Narrative model to understanding illness

MODULE ONE REFLECTION:
Describe, in narrative or story form, an illness experience of your own or that of a family member or friend. Do not focus on the medical aspects of the experience. Instead, describe how the individual was affected by the illness. Your description must include: 1) an account of the relevant psychosocial dimension of the illness; 2) a clear distinction between "illness" and "disease"; and 3) how a patient's illness narrative can help you as a physician in caring for a patient. (2 -3 pages)
MODULE TWO:
Spirituality and Health

Session #1
The Application of Spirituality to Patient Care

Date: September 15, 1999 (1:00 p.m. to 2:00 p.m.)

Format: Large group

Objectives:

Knowledge
To be able to define the meanings and uses of 'spirituality' as it applies to the clinical setting.

Analytic Skills
To be able to analyze the spiritual issues and needs of patients in order to develop a more patient-centered care plan.

Professional/Personal Development
To better understand the meaning and significance of spirituality in your life and how this self-understanding will impact your role as a caregiver.

Presenter: Harlan Ratmeyer, Director, Pastoral Care, AMC.

Readings:
"Finding Comfort in their Dying Days." Summary of key findings.
Gallup Poll, Fall 1998.
T. A. Maugans, "The Spiritual History", Arch Fam Med. vol. 5, January 1996.

Glossary:
Spirituality
Spirituality belief system
Spiritual community
Religion vs. Spirituality
Spirituality history
Personal Spirituality
Advance care planning
Session #2
Spiritual Assessment Exercise

Date: September 23, 1999 (3:00 p.m. to 4:00 p.m.)

Format: Small groups (Attendance Required)

Objectives:

Knowledge
To understand how a spiritual assessment can be used as an important clinical tool for better patient care.

Analytic Skills
To be able to conduct and analyze a belief/values assessment with a peer.

Professional/Personal Development
To better understand your own beliefs and values in relation to becoming a "good doctor".

Reading: Interview Guide for Spiritual/Values History

Glossary:

<table>
<thead>
<tr>
<th>Spiritual belief system</th>
<th>Personal spirituality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spiritual community</td>
<td>Advance care planning</td>
</tr>
<tr>
<td>Spiritual assessment</td>
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</tbody>
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MODULE TWO REFLECTION:
Describe a case in which a spiritual assessment improves the quality of patient care. You may use a real or imaginary scenario. (1-2 pp.)
MODULE THREE:
The Multi-Disciplinary Team Approach

Session #1
The AIDS Team: Demonstration of a Team Approach to Patient Care

Date: September 29, 1999 (1:00 p.m. to 2:00 p.m.)

Format: Large group

Objectives:

Knowledge
To be able to describe the characteristics of a multi-disciplinary team and its functions in addressing diverse needs of a patient.

Analytic Skills
To be able to analyze a patient case in order to identify which professional team members are best able to address the particular needs of the patient in question.

Professional/Personal Development
To consider how you will relate to other professionals and develop skills to work effectively in a team.

Reading: N. Coyle, J. Ingham. "The Role of the Health Care Team and Case Study". The Network Project, MSKCC.

Glossary:

<table>
<thead>
<tr>
<th>Team approach</th>
<th>Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continuity</td>
<td>Collaborative practice</td>
</tr>
<tr>
<td>Mobilization of resources</td>
<td>Educational role</td>
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<tr>
<td>Hospice team</td>
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<tr>
<td>Key elements for effective team functioning</td>
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<tr>
<td>Physician involvement when goal of care changes from cure to Comfort</td>
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<tr>
<td>Respect for other professionals</td>
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MODULE THREE REFLECTION:
Use the HW patient that you met in your small group session as a case to which to apply the workings of an effective team approach. Develop a clearly defined team-based care plan, including the perspectives of at least three team disciplines, and the issues each would address.
MODULE FOUR:
Death and Dying

Session #1
Living with a Life-Threatening illness

Date: October 14, 1999 (1:00 p.m. to 3:00 p.m.)

Format: Large group

Objectives:

Knowledge
To better understand patients who face a life threatening illness.

Analytic Skills
To be able to analyze and discuss the fears and hopes of patients living with cancer.

Professional/Personal Development
To visualize how you will attend to the needs of a patient who faces a life-threatening illness.

Presenters: Chris Blanchard, Ph.D., Division of Hematology/Oncology, AMC, and two patients


Glossary:

\[\begin{array}{ll}
\text{Attitude and disposition} & \text{Mind-spirit-body connection} \\
\text{Breaking the news} & \text{Handling the responses} \\
\text{Discussing prognosis} & \text{Denial} \\
\text{Collusion with relatives} & \text{Cultural differences} \\
\end{array}\]
Session #2
Cultural and Medical Perspectives on Dying/Death

Date: October 27, 1999 (1:00 p.m. -2:00 p.m.)

Format: Large group

Objectives:

Knowledge
To understand the cultural and medical attitudes in the United States on death and dying.

Analytic Skills
To be able to critically explore and evaluate how attitudes on death in the United States are reflected in the goals and practice of medicine.

Professional/Personal Development
To develop more awareness of your own attitudes and feelings about death and to consider how this self-awareness will impact caring for dying patients.

Presenters:
Michael Murphy, MD

Readings:


Glossary:

From the sacred to the secular
An open wound
Death and American Medicine
Why I care for the dying
Session #3
The Philosophy of Hospice Care

Date: November 10, 1999 (1:00 p.m. to 2:00 p.m.)

Format: Large group

Objectives:

Knowledge
To be able to define goals and objectives of hospice care.

Analytic Skills
To be able to compare and contrast the goals of hospice care and the goals of curative care.

Professional/Personal Development
To imagine what it will be like to help a patient make the transition from "cure" to "care".

Presenter: George Davis, MD, Medical Director, St. Peter's Hospice.

Reading: J. Lynn, M. Koshuta, P. Schmitz, "Hospice and End-Of-Life Care"

Glossary: Ethical conflicts between families and patients
Killing versus letting die
Artificial nutrition and hydration
Access to hospice care

MODULE FOUR REFLECTION:
Write one page on each of the following:
1. Reflect on and describe what "a good death" means to you.
2. How does the cultural denial of death influence end of life medical care?
MODULE FIVE:
Ethical Decision Making and End of Life Care

Session #1
Making Sense of End of Life Care Terminology

Date: November 17, 1999 (1:00 p.m. to 2:00 p.m.)

Format: Small groups (Attendance mandatory)

Objectives:

Knowledge
To be able to define the key terms relating to end of life care.

Analytic Skills
To be able to critically evaluate the ethical obligations of physicians in end of life care.

Professional/Personal Development
To reflect upon your own personal values in regards to decision-making at the end of life.

Reading: Handout: "Making Sense of Terms in the End of Life Care Debate". Excerpt from the AMA Code of Medical Ethics.

Glossary: Handout, part A, all listed terms
Session #2  
The Scotty Matthews Case

**Date:** December 1, 1999 (1:00 p.m. to 3:00 p.m.)

**Format:** Hour #1 – Large group  
Hour #2 – Small groups (Attendance mandatory)

**Objectives:**

- **Knowledge**  
  To understand the ethical and legal parameters in New York State of medical decision making involving removing or withholding life-sustaining treatment.

- **Analytic Skills**  
  To be able to analyze a difficult case involving quality versus quantity of life.

- **Professional/Personal Development**  
  To grapple with the Scotty Matthews case and to imagine how you would respond to the requests of his parents to forgo what was viewed as life-sustaining treatment.

**Presenter:** Kathy Matthews, mother of Scotty.

**Readings:**  


Handout: Scotty Matthews case; four aspect framework.

**Glossary:**  
*Clear and convincing evidence*  
*Moral position of Scotty Matthews' parents*  
*Moral position of the Center For The Disabled*  
*Quantity vs. Quality of Life.*  
*Outcome of Court Opinion*
Session #3
PAS and End of Life Care - A Debate

Date: December 8, 1999 (1:00 p.m. to 3:00 p.m.)

Format: Hour #1-Large group (film and guest)
Hour #2-Small groups (Attendance mandatory)

Objectives:

Knowledge
To be able to articulate the arguments for and against PAS.

Analytic Skills
To be able to critique and discuss case scenarios which involve patients that request they be given assistance in dying.

Professional/Personal Development
To become more aware of your own values in relation to PAS and to visualize how you will handle this issue as a physician.


Glossary: Case of Diane
Public image of dying in relation to palliation-by-death
Role of communication

MODULE FIVE REFLECTION:

Scenario #1:
A patient in the ICU is currently on a respirator and faces a very dire prognosis. The respirator is sustaining his life by breathing for him. He has capacity and clearly indicates that he wishes the respirator to be removed.

Scenario #2:
A patient who has a diagnosed terminal illness has about 3 months to live. This patient approaches her physician and requests that she be given a prescription for barbiturates for the purpose of ending her own life when she is ready.

First, apply appropriate terms that explain the requests made in scenario #1 and scenario #2. Next, present a justification of your ethical-stance toward these requests. Be sure to bring to bear relevant ethical terminology (including key distinctions such as active/passive, etc.) and present a cogent justification for your point of view.
MODULE SIX:
Current Ethical Issues in Health Care

Session #1.
Development in Genetics

Date: January 5, 2000 (1:00 p.m. to 2:00 p.m.).

Format: Large group

Objectives:

Knowledge
To be able to articulate some of the key ethical conflicts which arise out of the human genome project.

Analytic Skills
To be able to analyze those conflicts and to develop and critique arguments on both sides.

Professional/Personal Development
To empathize with a patient's perspective who must deal with one of these conflicts and to imagine how you would address this matter in future practice.

Presenters: Jeroo Kotval, Ph.D., School of Public Health, SUNY, and guest.


Glossary: Genetic information in relation to privacy
Legitimate vs. illegitimate breeches of confidentiality
Session #2
Futility and the Goals Of Medicine

Date: January 12, 2000 (1:00 p.m. to 2:00 p.m.)

Format: Small groups (Attendance mandatory)

Objectives:

Knowledge
To be able to articulate the various meanings and uses of "medical futility".

Analytic Skills
To be able to analyze a patient case and discern precisely the ethical conflict involving medical futility.

Professional/Personal Development
To discuss with peers how the goals of medicine should be defined in relation to the problem of medical futility.

Readings:

Glossary:
Case 21
The Wanglie Case
Anti-futility arguments
Futility and professional integrity
Futility conversation vs. justice conversation
Physiological futility
Qualitative futility
Session #3
Abortion

Date: January 26, 2000 (2:00 p.m. to 4:00 p.m.)

Format: Hour #1-Large Group
         Hour #2-Small Groups (Attendance mandatory)

Objectives:

   Knowledge
   To be able to define the ethical arguments on both sides of the abortion debate.

   Analytic Skills
   To be able to analyze particular case scenarios involving the issue of abortion and to develop a cogent argument for a course of action.

   Professional/Personal Development
   To interact with peers and appreciate the various value perspectives regarding abortion, and to imagine how you will handle specific scenarios as a physician.

Presenter: Daniel Edelstone, MD, Chairman, OB/GYN


Handout: Case

Glossary: Major ethical issues
           Value of fetal life
           Personal autonomy/reproductive choice
           Case analysis in terms of four box framework
Session #4
Managed Care: The Solution, or the Problem?

Date: February 2, 2000 (1:00 p.m. to 2:00 p.m.)

Format: Small groups (Attendance mandatory)

Objectives:

Knowledge
To understand the philosophy of a managed care organization.

Analytic Skills
To be able to discern some of the key ethical conflicts and problems in the physician-patient relationship which occur in the context of managed care.

Professional Development
To examine with peers how you will balance the various, and sometimes conflicting, physician loyalties inherent in today's practice of medicine.

Readings:


Handout: Case

Glossary:
Managed care
Private market solutions
Annual rate of increase in per capita national health care expenditures
Access to routine health care services
Moral vs. political crisis.
Universal coverage
Consolidation of providers'
Consumer protection
Medicaid and Medicare
10 million of uninsured are below the age of 18
Pernicious managed care
Cost shifting
Fairness
Session #5
Organ Donation

Date: February 16, 2000 (2:00 p.m. to 3:00 p.m.)

Format: Large Group

Objectives:
Knowledge 
To understand the social and political context relative to the allocation of donor livers.

Analytic Skills 
To be able to develop cogent arguments for and against certain policies involving the fair allocation of donor livers.

Professional Development 
To develop a sense of your own orientation toward various public policy perspectives involving the allocation of donor livers.

Presenters: Genetic Counselor and patient


Handout: Two cases

Glossary: Definition of alcoholism
Alcoholism as a medical illness
Alcoholism in relation to other self-destructive illness
Moral differences between ARESLD and ESLD
Clinical prognosis vs. moral judgment

MODULE SIX REFLECTION:
Select two topic areas from Module Six that are of particular interest to you. Use the four aspect framework (see reading by Siegler, Module v, Session #2, p. 17) to provide a thorough analysis of a case from each of those two topic areas. See the cases below from each session.

Genetic Testing: Case of the guest speaker in large group class on January 5, 2000.
Futility: Case of Evelyn from the readings.
Abortion: Contrast cases 1 and 2 from the readings.
Managed Care: Case of 35 year old man with heart murmur from the readings.
Organ Donation: Case #2 from readings.
Session #6
The Dartmouth Survey
Part 2

Date: March 1, 2000 (1:00 p.m. to 4:00 p.m.)

It is very important that all students participate in this survey. As you recall you took part 1 of this survey early in your first year, and you will take part 3 during your fourth year. AMC has made a substantial investment in working within the Dartmouth consortium in order to evaluate how our curriculum is affecting your professional development as a soon to be physician. We thank you for your cooperation.
Session #7
The Social and Political Responsibility of Physicians

Date: March 8, 2000 (12:00 p.m. to 2:00 p.m.)

Format: Hours #1 & #2 - Large group - Lunch served.

Objectives:

Knowledge
To be able to articulate the problem of defining the moral boundaries of responsibility for practicing physicians.

Analytic Skills
To be able to develop a cogent position regarding the moral responsibility of physicians.

Professional/Personal Development
To contemplate with peers how you might fulfill your social and political obligations as a future physician.

Presenters: Professor John Balint, MD
Gerald Coleman, MD

Readings:


Glossary:
Access to health care
Socioeconomic disparities in health
Leveling effect
Relationship between health, social conditions and self-management
Relevance of access and the biomedical model for inpatient vs. outpatient care
EXAM #2
March 22, 2000 (1:00 p.m. to 3:00 p.m.)