

## **Family Conflict Over Withdrawing Life-Sustaining Treatment**

### **School of Medicine Case - Transition to Residency – Professionalism, Ethics & Law**

A 76 year man has been ventilator dependent, fed with a gastric tube, and unresponsive for 30 days following quadruple coronary artery bypass surgery. His domestic partner of 12 years believes that he would not want to go on with this life-sustaining treatment. He has no advance directive. His domestic partner states he would not want to be sustained by long term life support or feeding tube. In preparation for surgery he specifically told the domestic partner that he would not want to live like Terri Schiavo. The domestic partner has requested that the ventilator and feeding tube be withdrawn. The patient has three adult children from his first wife, who has been deceased for twenty years. The oldest daughter steadfastly insists that her father is a fighter and should be given every chance to survive. Her sister and brother defer to her because they do not want to face her wrath. She also contends that the domestic partner is not capable of making decisions because, in her opinion, the domestic partner shows some “strange behaviors.”

The nursing staff of the ICU is in a state of moral distress. The head nurse has asked for an ethics consultation.

- 1. Does the patient qualify under Oregon law for his health care representative to request the removal of the ventilator and gastric feeding tube?**
- 2. How would you manage the conflict between the two families?**
- 3. May the surgeon withdraw on the grounds of conscientious objection to removing the life-sustaining treatment?**
- 4. Is this patient’s condition medically futile?**