

Patient Refusal of Treatment

School of Medicine Case: Transition to Residency – Professionalism, Ethics & Law

Mr. Turner is a 65-year-old man with chronic paranoid schizophrenia. He lives alone in a downtown residential hotel. He is prescribed risperidone, an antipsychotic drug, but his adherence is poor and he has not been seen at the clinic or hospital for over nine months. He has no known family and is normally suspicious and reclusive.

Yesterday, Mr. Turner fell in his hotel room and now has a moderately displaced intertrochanteric hip fracture. He is admitted to orthopedic surgery, where you are an intern. On exam, he is a disheveled man with poor personal hygiene who fervently writes nonsensical words and symbols in a tattered spiral notebook. He says he is documenting military secrets and that he fell because attackers were after his work. Other than poor personal hygiene and pain with hip movement, his physical exam, including vital signs, is unremarkable. On mental status exam, he is alert and oriented to person, place, and time, but cannot stay “on topic” and is mildly agitated and irritable. He says he hears voices because of his special forces training; they tell him what to write and whom to avoid, but not to harm himself or anyone else. He declines past medical history as a “pack of lies.”

Your staff recommends pinning the hip ASAP, because of the instability of the fracture with weight bearing, and the patient’s pain, immobility, and risk of pressure ulcers and deep venous thromboses. They also describe the risks of the surgery, including bleeding, infection, heart attack, and even death. The patient refuses the procedure and in fact denies that his hip is broken, even though you review his X-rays with him. He also refuses to take risperidone and says, “You’re trying to poison me.” He asks to be returned to his hotel room where he says he will be fine. However, you know that his hip must be stabilized ASAP, as he can’t bear weight or even change position in bed without assistance and severe pain.

- 1. What ethical principles are in conflict here?**
- 2. Does this patient have decision-making capacity? How is this determined?**
- 3. How can you assure he gets the care he needs? What steps might you take?**
- 4. What is the role of a mental health directive?**