

# Continuing Education Questions

SPRING 2008

To receive 1.5 contact hours of basic level P.A.C.E.® credit for the **Focus: Bioethics** questions, insert your answers in the appropriate spots on the continuing education registration form that follows, then mail a photocopy of the form as directed.

## LEARNING OBJECTIVES

After completing the articles in **Focus: Bioethics**, the reader should be able to:

1. compare the Kantian view of ethics and utilitarianism as tools for medically-related decision-making.
2. compare and contrast autonomy and beneficence as tools for medically-related decision-making.
3. justify the use of these ethical theories in each of the three settings.
4. assess the philosophical theory used by a facility in situations concerning decision-making.
5. assess the philosophical theories used by a facility in situations concerning informed consent.

## CONTINUING EDUCATION QUESTIONS

1. Immanuel Kant believed that acts should be judged on the basis of:
  - a. the positive outcomes it produced.
  - b. the negative outcomes it produced.
  - c. the value that the decision has at the time of the deciding.
  - d. whether the decision can be applied universally.
2. When viewing a situation through Kant's ethical principles, using people only as a means to an end:
  - a. is never possible.
  - b. can be viewed as necessary when there are unusually great benefits to be gained.
  - c. could be possible if they were used as both the means and the end.
  - d. is always correct.
3. In order for an act to be ethical for a person using Kant's principles, it:
  - a. is judged to be ethical only on the basis of pure motives.

- b. should be the more beneficial choice.
  - c. protects the person who is making the decision from unwanted consequences.
  - d. can be applied to all people in all circumstances.
4. According to Kant, lying in order to protect a person from hearing some unwanted news would be:
    - a. acceptable in all cases.
    - b. acceptable when there is a greater good to be gained from the lie.
    - c. unacceptable save for situations in which the person is incapable of receiving the truth in a logical fashion.
    - d. unacceptable.
  5. The determinant element for people who believe in utilitarian ethics is the:
    - a. motives of the decision maker.
    - b. outcome for the decision maker.
    - c. motives for both the decision maker and the maker of the dilemma.
    - d. outcomes for all involved.
  6. In the assessment of a utilitarian decision, the most important aspect is the:
    - a. question of informed consent.
    - b. quality of the motives.
    - c. seriousness of consequences.
    - d. situation in which the decider finds him/herself.
  7. The use of scientific information gathered from unwilling participants in scientific experiments such as that gathered from concentration camp prisoners could be:
    - a. acceptable by Kant.
    - b. acceptable by utilitarians.
    - c. unacceptable by Kant because it is a specific situation.
    - d. unacceptable by utilitarians because the data is not that valuable.

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8. Coercion as part of obtaining informed consent is:
  - a. totally unacceptable to Kant and his followers under any circumstances.
  - b. totally unacceptable to consequentialists.
  - c. acceptable to Kant in some circumstances.
  - d. acceptable to consequentialists in some circumstances.
9. As a system of thought, beneficence is simply a method to:
  - a. allow the person most involved in a situation to make a decision.
  - b. use the greatest good as the measure of good decision making.
  - c. have the most able person make a beneficial decision.
  - d. develop a consensus before making a decision.
10. Is a form asking for permission to perform surgical procedures such as appendectomy, bowel resection, hysterectomy, transurethral resection, or cardiac catheterization an acceptable method of informed consent?
  - a. No
  - b. Yes
  - c. Since the symptoms caused by the conditions are difficult to separate, it is logical to group these together.
  - d. These conditions require surgical intervention and, as such, are grouped together under DRGs.
11. When would a person who believes as Kant does view failing to use extraordinary life support as ethical?
  - a. Never.
  - b. Only if you did not have the legitimate opportunity to do so.
  - c. If you believe there is no significant difference in the outcome.
  - d. Extraordinary means is not an ethical responsibility, so it doesn't matter.
12. Recent discussions in the US suggest that paying for organ donations will increase supply. Which of the following would be considered an example of free and informed consent?
  - a. A forty-five-year-old attorney who wishes to donate a kidney for a friend
  - b. A thirty-two-year-old woman who will use the money to pay off debts
  - c. An eighteen-year-old whose mother has asked him to
  - d. An Indian father for whom the money is equal to one year's salary
13. Which of the following statements could be considered coercive?
  - a. "If you don't participate in this action, it could be construed that you are against its principles."
  - b. "If you join this study, you will be paid for all supplies."
  - c. "If you agree with me on this point, you could be eligible for a raise in pay."
  - d. "If you don't agree with this decision, you will be exercising autonomy."
14. It could be argued that most patients have no real autonomy over the choice of treatment because they:
  - a. do not understand the technical aspects of their treatment.
  - b. can not separate themselves from the non-objective more emotional aspects of the situation.
  - c. do not understand the entirety of the process they will be experiencing.
  - d. surrendered that right when they accepted this particular physician/patient relationship.
15. One socially accepted example of patient autonomy is:
  - a. a seventeen year old female requesting birth control pills.
  - b. making a choice to forego treatment and enter hospice.
  - c. preference of alternative in place of conventional medication.
  - d. the use of alternative therapies.
16. The form that is signed by all patients prior to admission into a hospital allows for:
  - a. all treatment decisions to be made by physicians.
  - b. only those treatments listed in the form to be provided to the patient.
  - c. the right of the patient to refuse the treatments that the physicians choose.
  - d. decisions to be made by a health proxy as defined by the hospital.
17. An example of an informed consent would be one in which the decision maker is:
  - a. thoroughly familiar with ALL of the aspects of the situation.
  - b. has some familiarity with most of the aspects and can learn of the others through "full disclosure" of risks, etc.

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- c. has adequate familiarity with at least one side of the situation.
  - d. has limited knowledge of the situation but is willing to assume the burden.
18. Physicians are often unwilling to abide by the decisions of patients because they believe:
- a. they will be the ones sued if things go wrong.
  - b. patients only hear what they want to hear.
  - c. the patient's emotional state makes informed consent impossible.
  - d. patients do not have adequate scientific/medical knowledge to make such decisions.
19. In general, medical decisions for patients under legal age of adulthood are:
- a. always the physician's right.
  - b. always the parents' right.
  - c. the physician's right in cases of emergency treatment when no parent/guardian is available.
  - d. the child's right if he/she understand the complexities of the situation.
20. The Vulcan axiom "the needs of the many outweigh the needs of the few" is an example of:
- a. Kantian ethics
  - b. utilitarianism
  - c. beneficence
  - d. autonomy

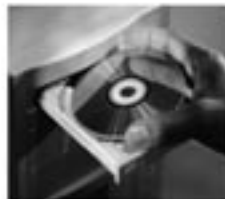


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