


Name of Policy: <u>Institutional Ethics Committee</u> Policy Number: 3364-87-14 Approving Officer: Chief of Staff Medical Director Responsible Agent: Medical Director Scope: All University of Toledo Campuses	 Effective date: 03/14/01
<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy
<input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Reaffirmation of existing policy

(A) Policy statement

The Institutional Ethics Committee is a committee of the University of Toledo Medical Center and its Medical Staff which consults and advises in patient care situations in which moral or ethical questions are raised.

(B) Purpose of policy

To define the composition, purpose, principles, and processes of the Institutional Ethics Committee.

(C) Procedure

(1) Composition

The IEC shall be a broad representational committee of not less than twelve (12) members appointed yearly by the Chief of Staff after consultation with the Chair of the IEC, including a cross-section of the members of the medical staff and other appropriate personnel. A UTMC attorney serving as legal counsel may serve as an ex officio member. The chairperson shall be an active member of the medical staff member appointed yearly by the Chief of Staff.

(2) Purpose

Upon request in individual situations in which moral or ethical considerations are raised about clinical care, or the hospital environment, the IEC shall provide the University of Toledo Medical Center, their Staffs, students, and patients or patients' families/caretakers with:

- (a) facilitation of communications with health care providers, patients, friends and families;

- (b) assistance in resolving ambiguities or disagreements;
- (c) identification and clarification of moral or ethical issues;
- (d) relevant literature regarding ethical issues, if requested;
- (e) recommendations for resolution of the question.
- (f) emotional support

The IEC will help educate the hospital and members of the medical staff and patients and their families, about moral and ethical issues in decision making in relation to patient care. These issues could include, but are not limited to, such areas as patients' rights, decisions regarding the withholding or withdrawing of life-sustaining treatment, and the right to refuse treatment.

The IEC shall review, or help develop institutional policies and procedures dealing with patient care to ensure the moral and ethical perspectives and considerations are respected.

The Institutional Ethics Committee is a peer review committee as defined by section 2305.25 of the Ohio Revised Code. As such, the committee's proceedings and records are held in confidence.

(3) Principles

The expressed wishes of the patient with decisional capacity shall be the primary consideration of the committee. If unable to obtain the expressed wishes of the patient, the designated decision maker, the family's wishes, and recommendations of health care providers will be considered to promote the best interests of the patient

The committee shall be advisory in nature and shall provide recommendations to aid decision making within the physician/patient relationship.

(4) Meetings

The committee shall meet at least quarterly. Emergency meetings for individual case review shall be called whenever necessary by the chairperson or his/her alternate. The chairperson shall submit minutes of the meetings to the Chief of Staff.

(5) Ethics Consultation Service and IEC Patient Case Review:

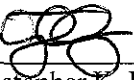
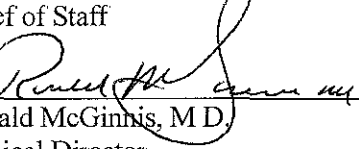
In situations where moral or ethical issues about clinical care or the hospital environment are raised, either the Ethics Consultation Service or the IEC may be contacted.

- (a) The Ethics Consultation Service will provide prompt consultation by one of the ethicists on the Medical Staff for individual patient care situations. The ethicist on call must be contacted by the attending physician of the patient or his/her designee. Written consultations will be submitted to the medical record and to the IEC for review.
- (b) The Institutional Ethics Committee Case Consultation
 - (i) Anyone, i.e. patient and/or family, guardian or caretaker, any UTMC health care professional, or any other concerned individual, may request a case review by referring a case or issue to the IEC. The IEC shall regularly appoint teams, including a team leader who has completed IEC approved education, and submit call schedules to the hospital operator.
 - (ii) Access to the IEC may be obtained by calling the UTMC operator and asking for the IEC team leader. Access may also be obtained by contacting any member of the IEC who will then contact the Chair. The request for case review is confidential, and the identity of the caller will be kept confidential if requested.
 - (iii) Once the call is received, the team leader and IEC chair will jointly decide:
 - a. Whether more information needs to be obtained.
 - b. Whether the issue could be resolved with only the involvement of the team leader and IEC chair.
 - c. Whether the matter requires emergent consultation, or could feasibly be reviewed at the next regularly scheduled meeting of the IEC.
 - d. Whether it is necessary to call an emergency meeting of the team or the entire IEC.
 - e. If emergent consultation is indicated, the team will convene and provide a written consultation to the medical record and to the IEC for review.
 - (iv) The committee will meet at the earliest possible time if an urgent meeting of the IEC is required. A minimum of 4 members need to be present, at least one of whom is a physician. The Chair or his/her designee will assure adequate representative membership for this meeting.
 - (v) The patient, if an adult with decision making capacity, should be informed if the case will be discussed by the IEC. The attending physician must also be informed. The attending physician, and if

appropriate, other health care professionals, family and significant others may be present at the case presentation and discussion.

- (vi) The format of the review the by committee will be flexible and will generally consist of one or two persons assigned by the Chair/designee to present the case and the issues to the IEC followed by discussion, a consensus development and recommendations.
- (vii) At the conclusion of the case presentation and discussion, the IEC members may meet in closed session for deliberation.
- (viii) Recommendations will be made by consensus if possible. If necessary, recommendations may be made by the majority with inclusion of a minority opinion.
- (ix) The recommendations of the IEC are advisory in nature. An attending physician may not refuse to allow the IEC to address ethical issues raised by the patient, family, or other caregivers.
- (x) Recommendations of the IEC have no legally binding authority and do not necessarily provide legal protection
- (xi) The recommendations of the IEC will generally be placed in the patient's medical record, signed by the Chair and/or team leader, conveyed to the appropriate individuals, including the attending physician, and presented at the next IEC meeting for review.

(c) Ethics consultations shall be reviewed at the next regular meeting of the Institutional Ethics Committee.

<p>Approved by:</p> <div style="text-align: center;">  <hr/> Christopher K. Lynn, M.D. Chief of Staff </div> <div style="text-align: center;">  <hr/> Ronald McGinnis, M.D. Medical Director </div> <div style="text-align: center;"> <p>9-11-08</p> <hr/> Date </div> <p><i>Review/Revision Completed by:</i> Institutional Ethics Committee Medical Executive Committee</p>	<p>Policies Superseded by This Policy:</p> <ul style="list-style-type: none"> • <i>MS-014 Institutional Ethics Committee</i> <p>Review/Revision Date: 03/13/02 11/19/03 09/14/05 06/25/08</p> <p>Next review date: 06/25/11</p>
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