

# Patient's Interest Foremost

the good doctor's ethics



Arthur SM Lim

# Patients Interest Foremost The Good Doctors Ethics

**Wolfgang Guggemos**



## **Patients Interest Foremost The Good Doctors Ethics:**

### **Patient's Interest First: The Nature Of Medical Ethics And The Dilemma Of A Good Doctor** Arthur S M

Lim,1998-08-17 Many of the challenges of medical ethics today were nonexistent during the time when Hippocrates wrote his famous oath In an increasingly complex world many more new ethical issues will impact on the practice of medicine in the 21st century quality care growing patient demand high technology the definition of death and controversies relating to the right to live and the right to die In addition there will be questions raised with regard to issues and practices such as research on embryos genetic engineering experiments on animals and clinical trials and the problems of limited medical resources These can lead to grave dilemmas causing uncertainty and confusion in the medical profession This book is based on the lectures and essays on medical ethics by a number of leading Singapore doctors It records the thoughts of the leaders on medical ethics and discusses a range of important and controversial issues It will be a valuable reference for medical students as well as interesting and informative reading for both the professional and the lay reader What the Doctor

Didn't Say Jerry Menikoff,Edward P. Richards,2006-08-24 Millions of people each year decide to participate in clinical trials medical research studies involving an innovative treatment for a medical problem For the patient such participation can sometimes be a life saving choice But it can also be just the opposite Our country years ago adopted rules designed to assure that people are making informed choices about participation This book explains the reality behind those rules that our current system of clinical trials hides much of the information patients need to make the right choices Witness the following scenarios Hundreds of patients with colon cancer undergo a new form of keyhole surgery at leading cancer centers never being told that 85% of colorectal surgeons worried that it increases the risk of the cancer returning would not themselves undergo that procedure Tens of thousands of women at high risk of developing breast cancer are asked to participate in a major research study They are told about the option of having both breasts surgically removed but not told about the option of taking a standard osteoporosis pill that might cut the risk of getting breast cancer by one half or more What The Doctor Didn't Say principally written by a nationally prominent expert is the first book to reveal many heretofore hidden aspects about the true nature of participation in clinical trials It shows why options not commonly known including getting a new treatment outside of a research study can often be the best choice It explains how patients can make good decisions even if there is only limited information about a treatment's effect And it does this through the eye opening stories of what is happening daily to thousands of people This book ends up confronting the fundamental dilemma of medical research Participation in clinical trials plays a vital role in advancing knowledge and many experts fear that if the information provided herein became widely known fewer people would participate But the authors demonstrate that there is no need to deceive people into participating in research We can have a system that promotes participation while still providing truthful information to participants **Patient's Interest Foremost: The Good Doctor's Ethics** Arthur S M Lim,1996-06-01

Throughout history men have repeatedly made judgments regarding their own conduct and that of their fellow men Some acts have been judged to be right or good while other acts have been denounced as wrong or evil Ethical judgment in medicine as in other areas of life is an attempt to distinguish between good and bad conduct This book is based on three lectures given by the author The first lecture was an address delivered to medical undergraduates at the National University of Singapore in 1995 The second was a Commonwealth Medical Association lecture delivered a decade ago The third was a Singapore Medical Association lecture delivered in 1981 This volume while emphasising the principles of medical ethics has been kept simple and brief and will make insightful and interesting reading for both the professionals and the general public

**An Introduction to Medical Ethics** Arthur Siew Ming Lim, 2008 Throughout history men have repeatedly made judgments regarding their own conduct and that of their fellow men Some acts have been judged to be right or good while other acts have been denounced as wrong or evil Ethical judgment in medicine as in other areas of life is an attempt to distinguish between good and bad conduct This book is based on three lectures given by the author as the Medical Director of Eye Clinic Singapura International The first lecture was an address delivered to medical undergraduates at the National University of Singapore in 1975 The second was a Commonwealth Medical Association lecture delivered a decade ago The third was a Singapore Medical Association lecture delivered in 1981 This volume emphasizing the principles of medical ethics has been kept simple and brief and it is hoped that it will make interesting reading for both medical professionals and the general public Sample Chapter s History 77 KB Introduction 58 KB What makes a good doctor 46 KB Contents Introduction History Good Doctor Changes What of Singapore Perfection Finance Technology Relationship with Colleague Relationship with Patients Relationship with Society Advertising Conclusion Readership Medical students and doctors

*Medicare and Medicaid Initiatives* United States. Congress. House. Committee on Energy and Commerce. Subcommittee on Health and the Environment, 1989 *The Trusted Doctor* Rosamond Rhodes, 2020-04-06 Common morality has been the touchstone of medical ethics since the publication of Beauchamp and Childress s Principles of Biomedical Ethics in 1979 Rosamond Rhodes challenges this dominant view by presenting an original and novel account of the ethics of medicine one deeply rooted in the actual experience of medical professionals She argues that common morality accounts of medical ethics are unsuitable for the profession and inadequate for responding to the particular issues that arise in medical practice Instead Rhodes argues that medicine s distinctive ethics should be explained in terms of the trust that society allows to the profession Trust is the core and starting point of Rhodes moral framework which states that the most basic duty of doctors is to seek trust and be trustworthy Building from this foundation Rhodes explicates the sixteen specific duties that doctors take on when they join the profession and demonstrates how her view of these duties is largely consistent with the codes of medical ethics of medical societies around the world She then explains why it is critical for physicians to develop the attitudes or doctorly virtues that comprise the character of trustworthy doctors and buttress physicians efforts to fulfil their

professional obligations Her book s presentation of physicians duties and the elements that comprise a doctorly character together add up to a cohesive and comprehensive description of what medical professionalism really entails Rhodes s analysis provides a clear understanding of medical professionalism as well as a guide for doctors navigating the ethically challenging situations that arise in clinical practice *The Ethics of Managed Care: Professional Integrity and Patient Rights* W.B. Bondeson,J.W. Jones,2013-03-09 in the culture of medicine and they saw their mission as a generation of profit for stockholders not necessarily medical care for clients Cost effective medicine was the goal in the context of a profit making enterprise Although preventive health care programs were promised very few were realized and they were not nearly comprehensive The definition of unnecessary testing slowly expanded to mean virtually any high cost test requiring the service of a medical specialist and low priced generalist physicians with limited diagnostic and therapeutic skills were made available to patients with the instruction they should limit their access to high cost specialists Managed care organizations tended to re ward primary care physicians who avoided specialty referrals and severed contracts with those who persisted in sending their patients to outside consultants Most notoriously managed care organizations maintained veto authority over the provision of complex and expensive care and that veto was often wielded in defiance of a physician s recommendation by managed care employees without medical training or experience Managed care did indeed slow the rate in increase of medical costs but not without limitations on the care provided to patients and the professional integrity of physicians Managed care organizations were so successful that they could provide extremely high salaries to their executives even in the context of limiting cost and care It is these developments that the papers of this symposium addressed The most fundamental ethical issue is posed in the first paper by Dr *Reconceiving Medical Ethics* Christopher Cowley,2012-02-09 This volume of original work comprises a modest challenge sometimes direct sometimes implicit to the mainstream Anglo American conception of the discipline of medical ethics It does so not by trying to fill the gaps with exotic minority interest topics but by re examining some of the fundamental assumptions of the familiar philosophical arguments and some of the basic situations that generate the issues The most important such situation is the encounter between the doctor and the suffering patient which forms one of the themes of the book The authors show that concepts such as the body suffering and consent and the role such concepts play within patients lives are much more complicated than the Anglo American mainstream appreciates Some of these concepts have been discussed with subtlety by Continental philosophers like Heidegger Ricoeur and a secondary purpose of the volume is to apply their ideas to medical ethics Designed for upper level undergraduates and graduate students with some philosophical background in ethics *Reconceiving Medical Ethics* opens up new avenues for discussion in this ever developing field **Geriatric Anesthesiology** J. G. Reves,Sheila Ryan Barnett,Julie R. McSwain,G. Alec Rooke,2017-10-27 Surgical and anesthetic techniques have evolved to allow a growing number of older adults to undergo surgery and current estimates are that 50% of Americans over the age of 65 years old will have an

operation However as the knowledge regarding perioperative care of the elderly surgical patient grows so do the questions In this edition each chapter includes a section entitled Gaps in Our Knowledge meant to highlight areas in which research is needed as well as hopefully inspire readers to begin solving some of these questions themselves Building upon the strong foundation of the first two editions Geriatric Anesthesiology 3rd edition also assembles the most up to date information in geriatric anesthesia and provides anesthesiologists with important new developments Topics covered include several new chapters that reflect the evolution of multidisciplinary geriatric care throughout the perioperative continuum as well as the growing body of literature related to prehabilitation In addition discussion of the surgeon s perspective and geriatrician s perspective on surgery in the geriatric population is covered as well as the systematic physiologic changes associated with aging and the pharmacologic considerations for the geriatric patient undergoing procedures Finally the last section discusses postoperative care specific to the geriatric population including acute pain management ICU management recent evidence and up to date practice regarding delirium and postoperative cognitive dysfunction and palliative care

Complications of Regional Anesthesia Brendan T. Finucane, 2007-08-02 This updated and expanded 2nd Edition offers practical advice on the prevention and management of complications associated with regional anesthesia and nerve blocks Besides comprehensive coverage of potential pitfalls for the practicing anesthesiologist the book adds new material exploring outcomes of regional and general anesthesia The book offers full chapters on specific anatomic sites including spinal epidural ophthalmic and brachial plexus anesthesia Other chapters address specialties of practice obstetrics pediatrics and cancer The book includes clinical studies and closed case analyses and practical advice on prevention of complications A concluding section offers detailed real world oriented practice guidelines for Regional Anesthesia

**Getting Doctors to Listen** Philip J. Boyle, 1998-01-01 This book examines why physicians are often surprisingly reluctant to follow guidelines for treating patients based on research data It assesses the merits of these concerns which include worries about legal liability financial incentives the scientific validity of the data and the objectivity of the issuer of the guidelines It also proposes ways of developing more useful data and more effective guidelines that would reduce their objections

**Artificial Intelligence - Social, Ethical and Legal Issues** , 2025-06-11 Artificial Intelligence AI is the backbone of developing smart machines that slowly but steadily replace people s roles hence probably becoming a threat to the existence of humanity AI has been discussed globally as a technology that demonstrates enormous potential for improving society if it is developed and implemented properly On the contrary it will have a negative impact if it is not developed and implemented responsibly This book presents the social ethical and legal issues of Artificial Intelligence Various applications of Artificial Intelligence have been discussed particularly in the fields of Medical Healthcare Education Libraries Labor Gender Equality Private Businesses and Government Operations This book can help and support decisions for policymakers on crafting laws regarding Artificial Intelligence High risk AI systems must follow a strict set of requirements to be used in practice The assessment of the

trustworthiness and transparency of the developed AI based system has also been discussed Also included in this book is a detailed examination of case studies and theoretical approaches that offer practical insights on how AI can be harnessed to foster a balanced representation of genders ultimately contributing to more equitable technological advancements A critical analysis of the impact of AI on the digital and data divide is discussed The book also investigates the directions and development of AI research in medicine over the next decade

**An Extraordinary Journey** Teik Oh, 2020-08-07 Today with most deaths in developed countries occurring in hospitals and the likely exponential increase of this over the coming decades it is an opportune time to reflect on the care of patients in the hospital setting and how the quality of care can be optimised to ensure that patient needs and expectations are sufficiently met Written by Teik E Oh author of the internationally acclaimed Oh's Intensive Care Manual this timely new title addresses the clinical ethical societal and legal imperatives of end of life care Oh includes considered reflections on death and dying in hospitals which address issues in hospital end of life care and the choices that patients families and healthcare professionals face during this extraordinary journey all of which improve understanding of dying and end of life care in hospitals Provides road maps of critical illness and dying in our hospitals that will guide you through end of life processes and issues Covers essential topics including treatment choices rights ethics living wills informed consent communication advanced care directives the dilemmas doctors face why and how decisions are made evaluating prognoses and concepts of futility withdrawing treatment and how religion and culture influence care Corrects misconceptions of conditions associated with death and dying including withdrawing treatment brain death and persistent vegetative states euthanasia organ donation consent and patient autonomy This is an indispensable and contemporary guide to understanding hospitalbased end of life care

**Managing Relationships with Industry** Steven C. Schachter, William Mandell, Scott Harshbarger, Randall Grometstein, 2010-07-28 Now more than ever doctors are being targeted by government prosecutors and whistleblowers challenging the legality of their relationships with drug and device companies With reputations at stake and the risk of civil and criminal liability it is incumbent upon doctors to protect themselves Managing Relationships with Industry A Physician's Compliance Manual is an indispensable resource for doctors professional societies academic medical centers community hospitals and group practices struggling to understand the ever changing law and ethical standards on interactions with pharmaceutical and device companies It is the first comprehensive summary of the law and ethics on physician relationships with industry written for the physician Authored by a former state Attorney General Harvard Medical School Professor health care lawyer and professor of ethics Managing Relationships approaches the topic from a balanced and reasoned perspective adding to the on going national dialogue and debate on the proper limits to medicine's relationship with industry The first complete and up to date summary and analysis of the law and ethics on physician industry relationships Focuses on major enforcement actions and whistleblower lawsuits and the lessons learned for physicians Provides options and guidance for maintaining compliant relationships and avoiding traps for the

unwary Covers both drug and device company relationships Summarizes the types of industry relationships that are necessary and productive and those that are harmful and abusive Details the law and ethics for each type of relationship including gifts off label uses and marketing CME speaker s bureaus free samples grants consulting arrangements etc Includes sample contracts for permissible consulting and CME speaker engagements      **Clinical Ethics in Anesthesiology** Gail A. Van Norman,Stephen Jackson,Stanley H. Rosenbaum,Susan K. Palmer,2010-10-28 Ethical issues facing anesthesiologists are more far reaching than those involving virtually any other medical specialty In this clinical ethics textbook authors from across the USA Canada and Europe draw on ethical principles and practical knowledge to provide a realistic understanding of ethical anesthetic practice The result is a compilation of expert opinion and international perspectives from clinical leaders in anesthesiology Building on real life case based problems each chapter is clinically focused and addresses both practical and theoretical issues Topics include general operating room care pediatric and obstetrical patient care the intensive care unit pain practice research and publication as well as discussions of lethal injection disclosure of errors expert witness testimony triage in disaster and conflicts of interest with industry An important reference tool for any anesthesiologist whether clinical or research oriented this book is especially valuable for physicians involved in teaching residents and students about the ethical aspects of anesthesia practice      Encyclopedia of Forensic and Legal Medicine ,2015-09-29 Encyclopedia of Forensic and Legal Medicine Volumes 1 4 Second Edition is a pioneering four volume encyclopedia compiled by an international team of forensic specialists who explore the relationship between law medicine and science in the study of forensics This important work includes over three hundred state of the art chapters with articles covering crime solving techniques such as autopsies ballistics fingerprinting hair and fiber analysis and the sophisticated procedures associated with terrorism investigations forensic chemistry DNA and immunoassays Available online and in four printed volumes the encyclopedia is an essential reference for any practitioner in a forensic medical healthcare legal judicial or investigative field looking for easily accessible and authoritative overviews on a wide range of topics Chapters have been arranged in alphabetical order and are written in a clear and concise manner with definitions provided in the case of obscure terms and information supplemented with pictures tables and diagrams Each topic includes cross referencing to related articles and case studies where further explanation is required along with references to external sources for further reading Brings together all appropriate aspects of forensic medicine and legal medicine Contains color figures sample forms and other materials that the reader can adapt for their own practice Also available in an on line version which provides numerous additional reference and research tools additional multimedia and powerful search functions Each topic includes cross referencing to related articles and case studies where further explanation is required along with references to external sources for further reading      *Dermatoethics* Lionel Bercovitch,Clifford Perlis,2011-12-06 There has been a sea change in dermatology in the last three decades Managed care electronic records and communication cosmetic dermatology direct to



consumer advertising core competencies and conflicts of interest were either nascent concepts or not even on the horizon as recently as the mid 1980s The public accrediting organizations and physicians themselves recognize the need for training resources in dermatology ethics and professionalism There is a need to address these topics in a format that will stimulate dialogue and reflection

**Health Care Ethics** John F. Monagle, David C. Thomasma, 2005 Provides expert help you need to make difficult bio ethical decisions covering a broad range of current and future health care issues as well as institutional and social issues applicable to multiple disciplines and settings

*Mayo Clinic Internal Medicine Board Review* Robert D. Ficalora, Paul S. Mueller, 2013-08 Mayo Clinic Internal Medicine Board Review 10th edition is designed to meet the needs of physicians in training and practicing clinicians by updating their knowledge of internal medicine and preparing them for the ABIM certification and maintenance of certification examinations in internal medicine For the 10th edition contributors were asked to map chapters according to ABIM goals At least 50 percent of the material will be new with the remainder changed and updated The redesign is intended to cover all ABIM goals while streamlining the text to make it more user friendly Large chapters have been broken up into smaller content oriented chapters to facilitate shorter more focused study opportunities This book is divided into subspecialty topics eg allergy cardiology dermatology etc and cross content topics related to general internal medicine eg men s health women s health geriatrics etc Questions and answers have been pulled from the main text to a companion book of Q As to facilitate study

*Encyclopedia of Medical Decision Making* Michael W. Kattan, 2009-08-15 Decision making is a critical element in the field of medicine that can lead to life or death outcomes yet it is an element fraught with complex and conflicting variables diagnostic and therapeutic uncertainties patient preferences and values and costs Together decisions made by physicians patients insurers and policymakers determine the quality of health care quality that depends inherently on counterbalancing risks and benefits and competing objectives such as maximizing life expectancy versus optimizing quality of life or quality of care versus economic realities Broadly speaking concepts in medical decision making MDM may be divided into two major categories prescriptive and descriptive Work in the area of prescriptive MDM investigates how medical decisions should be done using complicated analyses and algorithms to determine cost effectiveness measures prediction methods and so on In contrast descriptive MDM studies how decisions actually are made involving human judgment biases social influences patient factors and so on The Encyclopedia of Medical Decision Making gives a gentle introduction to both categories revealing how medical and healthcare decisions are actually made and constrained and how physician healthcare management and patient decision making can be improved to optimize health outcomes Key Features Discusses very general issues that span many aspects of MDM including bioethics health policy and economics disaster simulation modeling medical informatics the psychology of decision making shared and team medical decision making social moral and religious factors end of life decision making assessing patient preference and patient adherence and more Incorporates both quantity and quality of life in optimizing a medical decision Considers characteristics

of the decisionmaker and how those characteristics influence their decisions Presents outcome measures to judge the quality or impact of a medical decision Examines some of the more commonly encountered biostatistical methods used in prescriptive decision making Provides utility assessment techniques that facilitate quantitative medical decision making Addresses the many different assumption perspectives the decision maker might choose from when trying to optimize a decision Offers mechanisms for defining MDM algorithms With comprehensive and authoritative coverage by experts in the fields of medicine decision science and cognitive psychology and healthcare management this two volume Encyclopedia is a must have resource for any academic library

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