

A new survey has found that doctors at many teaching hospitals learn techniques by practicing upon people who have just died, but rarely ask permission from the patient's families. A survey of 449 training centers was conducted. Of the 353 centers that responded, 39 percent said they used the bodies of people who had just died to teach medical procedures, such as putting a tube in the trachea, putting needles in the liver or bones, or even opening the chest to massage the heart, but just 10% of the center's required the patients' families' consent. Most physicians believe that, at least with infants, there is no substitute for practicing the above mentioned techniques on an actual human body.

In your opinion what is an ethically appropriate policy for a teaching hospital in regard to use of newly dead bodies for teaching purposes. Justify your response.

MODERATOR'S ANSWER: The problem in connection with a policy in this area is to secure the informed consent of the family of the recently deceased person, to secure it in a way that adequately takes the family's emotions into account, and to limit the use of the bodies of recently deceased persons for teaching purposes to circumstances where no alternatives exist. In this regard, Children's Hospital in Boston recently has adopted a policy requiring explicit consent of the family of a recently deceased person before the person's body may be used. The consent is requested when the person enters the hospital, rather than immediately after he or she dies. The body is used, under the policy, only to teach procedures to doctors who must know them, the procedures must be non-mutilatory, and the doctors must first practice with mannequins. This policy appears to address the relevant ethical concerns.

Case from the 1995 Intercollegiate Ethics Bowl. Copyright Robert Ladenson, Center for the Study of Ethics in the Professions, Illinois Institute of Technology, 1995.