

BIOETHICS CONSULTATION FORM

Intake by:

Date

Patients Chart Number:

Age and Sex:

Occupation:

Religion:

Case Referred By:

Medical Problem List:

Prognosis:

Case Report:

Argument or Resolution:

Checklist for Consult:

1. Patient's attitudes & competence
2. Patient's values & beliefs (Living Will, Other Advance Directives)
3. Family situation (Dynamics, Guardian)
4. Family's values & beliefs
5. Related case specific value factors (Medical, Professional, Social, & Personal)
6. Major value conflicts
7. Prioritize the values (Rationale)
8. Argument of resolution
9. Support ethical norms
10. Basis of support (values, rights, & duties)
11. Autonomy
12. Beneficence – Paternalism, Avoidance of harm, Avoidance to third parties
13. Contract keeping
14. Honesty
15. Justice
16. Other principles or virtues

Please send completed form to:

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