

DAY ONE: MORNING

Participants will gain a clear perspective and understanding of the history, science and principles of Biomedical Ethics in a multidisciplinary presentation. The central moral issue in the approaches to healthcare and ethics consultation and the physician / patient relationship is concerned with who has the authority and responsibility for making the decision about what is in the best interests of the patient. This lecture will analyze four ethical components of the physician-patient relationship and show how the central moral issue of deciding the patient's best interests is understood differently in each model. Objectives: 1. Identify and outline the Principles of Biomedical Ethics 2. Explain why Bioethics is Essential 3. Identify and discuss key moments of medical ethics history 4. Engage their clinical practice with a new level of appreciation and awareness of how ethics touches everything they do. 5. Recognize the reasons why the physician-patient relationship has changed . 6. Define the central moral issue in the physician-patient relationship. 7. Identify the four models or ways the physician-patient relationship can be understood. 8. Compare the different images of the physician and the patient in the four models.

DAY ONE: AFTERNOON

The purpose of this intensive workshop is to assist healthcare professionals to define the predominant ethical theories and principles used in health care, determine any legal and regulatory implications, and in collaboration with their colleagues and patients/clients, make effective decisions that determine the appropriate course of treatment, or refusal of such, for and with those for whom they care. Upon completion of this course, participants should be able to: 1. Review the basics of forming an analytical ethical framework. 2. Describe the complex ethical issues facing healthcare professionals today. 3. Discuss national ethical standards frameworks and their relationship to ethical decision making for patients. 4. Apply the Military Decision Making Process (MDMP) to an effective Ethical Decision making tool. 5. Define terminology regarding bioethics, including the seven principles guiding medical ethical decision making.

DAY TWO: MORNING

A multidisciplinary review of the Code of Ethics with a focus on standards related to practice, administration and supervision. This section will also present the newest findings of spirituality and healing in medicine as well as those supporting the significance of emergence in the full integration of spirituality and health. OBJs: 1. List ethical systems of thought that aid Behavioral Health providers and managers in their pursuit of ethical decision making in military settings. 2. Identify the four core principles of bioethics and explain how they relate to ethical practice. 3. Use case examples to illustrate the relevance of ethical theories to the real-life dilemmas of providers, managers, and leaders. 4. Relate the theories and examples to principles of ethical practice, leadership. 5. Identify and define ethical decision-making models and apply them to clinical Behavioral Health cases. 6. The role of spiritual practices in medicine and clinical care. 7. How to weave the concepts of spirituality and healing into healthcare and medical education. 8. The possible role of emergence in spirituality and healing. 9. Need and importance of Spiritual Assessments on intake and through patient care.

DAY TWO: AFTERNOON

Ethical issues abound in the military hospital setting. When a provider is addressing life threatening and/or end of life, IVF / other genomic issues or issues pertaining to cultural diversity it can be extremely stressful for both the provider and patient/family. The importance of communication between provider and patient is crucial in advance of a health crisis developing. OBS's: 1. Discuss cultural competence in the healthcare setting and how this relates to medical ethical decision making. 2. State the laws and regulations governing cultural competence. 3. Identify special populations in the community that may be significant in addressing ethical issues. 4. Address the diversity of individuals and populations when implementing policies, programs, and services. 5. Explain how cultural beliefs shape clinical encounters. 6. Define physician-assisted suicide (PAS) and euthanasia and identify root causes of suffering that prompt requests & present patients' core needs at the end of life. 7. Recognize different types of advanced directives: identify characteristics of a useful advanced directive and indicate the barriers in creating advanced directives. 8. Examine ethical issues in family team conferences and their role in determining capacity, managing conflicts, identifying family roles and determining decision making factors. 9. Integrate a multidisciplinary approach in dealing with ethical issues to provide not only

understanding and acceptance but also a support system for the patient and/or their family. Discuss the variety of genomic procedures available and explore the ethics behind each. 11. Apply principles of health care planning to practical cases.

DAY THREE: MORNING

The central moral issue in the approaches to healthcare and ethics consultation and the physician / patient relationship is concerned with who has the authority and responsibility for making the decision about what is in the best interests of the patient. This lecture will analyze four ethical models of the physician-patient relationship and show how the central moral issue of deciding the patient's best interests is understood differently in each model. Past and current health debates are used to illustrate contemporary challenges and the critical need for practice experts. Objectives: 1. Recognize the reasons why the physician-patient relationship has changed 2. Define the central moral issue in the physician-patient relationship 3. Identify the four models or ways the physician-patient relationship can be understood. 4. Compare the different images of the physician and the patient in the four models. 5. Ethical, legal and federal health policy issues will be explored. 6. Key ethical principles will be presented as a class topic and case studies will be used to demonstrate how theories, principles, frameworks, and code of ethics guide decision-making when practice, research and policy dilemmas are at hand. 7. Examine current issues and legislative actions and nursing involvement in the policy making process.

DAY THREE: AFTERNOON

Research Ethic Issues: Human Subjects Protection. This presentation will explore a spectrum of research ethics issues to highlight the underpinnings of ethical principles. What is a human? What is a human-subject? What is to be protected? (Are there other views?) Case studies illustrate lapses in consideration of and care for human test subjects. Objectives: 1. Describe one historical and one current lapse of human research protections 2. Differentiate between ethical principles and regulatory compliance in human research protections when reviewing research 3. Recognize the potential competing interests of institutions, IRBs, investigators, and the public and some strategies to consider 4. Describe at least two enduring requirements of IRB membership composition. 5. Illustrate the IRB's embodiment of the ethical principles in reviewing and approving research with human subjects. 6. List two factors that threaten the functioning of IRBs.

DAY FOUR: MORNING

It has become evident that the moral and spiritual dilemma our modern warriors face , currently claiming 25 veteran lives per day, is not being successfully addressed by current treatment methods. This presentation examines the premise that the issue at stake today for the modern soldier is the true state of his or her spirituality – and thus their very souls. The presentation examines issues of trauma and moral injury from both a clinical and a spiritual perspective. OBJs: 1. What are the ethics involved in a state's adoption of training methods that results in quantifiably more efficient killers and a lower rate of morbidity yet also is empirically shown to result in higher rates of long term physical and moral injuries (such as paraplegia and PTSD). What are the ethics involved in combat casualty care? 2. If the state chooses to utilize this approach is it obligated to provide some greater restitution / therapy/ superior medical options (better prosthetics, etc.) to those injured in service of this type to the state than to those who have a) never served their nation in a military capacity; b) served in the military, but not in combat; c) served in combat but are not service connected for combat trauma related issues? What, if any, obligations does the state retain in relation to these former combatants, perhaps even above and beyond the state's responsibilities to the "average" veteran?

DAY FOUR: AFTERNOON:

This workshop looks at three areas of research and its implications on those involved and those it ultimately. OBJs: 1. To gain a basic understanding of the complexity of product development and ethical challenges which accompany the development process 2. Identify current methods for addressing the ethical challenges in the various stages of product development. 3. The implications of ethics management and oversight as products move through stages of approval. 4. Discuss the need in the military for a streamlined Health Emergency Preparedness and Response and why Bioethical considerations must be an integral factor in every area of planning and execution. 5. Discuss the goals which must be set prior to any MASCAL event in order to ensure the dignity of all involved are upheld. 6. Consider the roles of public health, liberty, and justice – taking into consideration how these themes often conflict and/or must be balanced in times of national and regional disaster relief. 7. Emphasize the importance of analytical analysis when choosing between health and liberty; 5. Share essential features of any MASCAL - planning and operations. 8. Stimulating the moral imagination. 9. Recognizing bioethical issues related to space exploration and travel. 10. Developing analytical skills to deal with these unique circumstances. 11. Understanding the operational theaters of advanced military technologies and the nuances this creates for bioethics. 12. Eliciting a sense of moral obligation and responsibility. 13. Coping with moral ambiguity.