## Podcast Series
**Reynolds Geriatrics Series • USMLE Step 2CK Prep**

<table>
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<tr>
<th>Episode Title &amp; Question Number</th>
<th>“Insulin vs. Autonomy,” based on question 36 of the 2010 USMLE sample exam</th>
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<td>Personnel</td>
<td>Robert Booth, Wesley Jones, Stefan Friemel, Amber Wright</td>
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<td>Recording Date</td>
<td>January 26, 2011</td>
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| Episode Description           | **Question 36, p. 35**  
   Three days after hospitalization for diabetic ketoacidosis, an 87-year-old woman refuses insulin injections. She says that her medical condition has declined so much that she no longer wishes to go on living; she is nearly blind and will likely require bilateral leg amputations. She reports that she has always been an active person and does not see how her life will be of value anymore. She has no family and most of her friends are sick or deceased. On mental status examination, she is alert and cooperative. She accurately describes her medical history and understands the consequences of refusing insulin. There is no evidence of depression. She dismisses any attempts by the physician to change her mind, saying that the physician is too young to understand her situation. She says, "I know I will die, and this is what I want." Which of the following is the most appropriate next step in management?  
   (A) Discharge the patient after she has signed an "against medical advice" form  
   (B) Seek a court order to appoint a legal guardian  
   (C) Offer insulin but allow the patient to refuse it  
   (D) Admit to the psychiatric unit  
   (E) Administer insulin against the patient's wishes |
## Learning Objectives

The listener should be able to:

- Understand when an AMA (Against Medical Advice) form is necessary
- Define a legal guardian
- Know the utility of asking a psychiatrist if a patient is capable of making choices for themselves
- Explain the medical value of autonomy
- Understand when to choose the value of autonomy over that of beneficence

## Key Teaching Points

1. “Against medical advice” forms are to be filled out when a patient requests to leave the treatment facility when leaving could be potentially harmful. AMA forms can be signed if the patient is over 18, exhibits no evidence of altered level of consciousness or alcohol/drug ingestion impairing judgment, and understands the nature of their medical condition and the consequences of refusing care.

2. A legal guardian has legal authority to make medical choices in behalf of a patient. A legal guardian may be appointed to a patient that does not have the mental capacity to make his or her own decisions.

3. Sometimes a psychiatric consult is appropriate to determine the end-of-life decision making capacity of a patient. However, admission to a psychiatric hospital is not necessary unless patient is suicidal or homicidal or has an acute psychiatric problem.

4. Autonomy means that adults aware of the nature and significance of their choices, and having the mental capacity to make choices about end-of-life issues, have the right to refuse any and all medical treatments, even life-sustaining treatments.

5. Autonomy is a very important medical value. The medical values of autonomy and beneficence are sometimes in conflict with each other. Central to medical ethics is the principle of respect for persons, which means that the choices of competent adults should be respected, even if one finds them objectionable.

## Comments

Medical Ethics Values: Autonomy, Beneficence, Non-maleficence, Justice, Dignity, Truthfulness

## References


