

ETHICS

ETHICS IN ACTION

PATIENT ACCOMMODATION

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It is a busy day in the emergency department. As the physician in charge of the pediatric area in the ED, you scan the board to ensure that sick patients are not missed, and that those patients with straightforward complaints are appropriately fast-tracked. A 15-year-old boy is waiting in the waiting room with a chief complaint of foot/ankle trauma. The patient, who is dressed in the garb of a Hasidic Orthodox Jew, is sitting in a wheelchair. He is accompanied by his mother. You step out into the waiting room to assess the patient, hoping to rapidly determine whether he needs pain medication and an x-ray. After introducing yourself, you begin to move the wheelchair to a more private location for a focused physical exam. The patient becomes noticeably upset, and begins speaking to his mother in Yiddish. It seems that he is not comfortable with you, a female, as his doctor, and is even uncomfortable with you moving the wheelchair. You are in a bit of a quandary, yet this type of situation is not an unusual one for ED providers. Within the diversity of the ED, there are times when, for example, an elderly patient may express concern that the doctor is a woman or of a minority ethnic group. Although this type of reaction is surprising, it is something ED providers must be prepared to deal with.

As a female physician in the United States, I have become accustomed to being treated as an equal of my male colleagues; however, in much of the developing world, women cannot necessarily expect such treatment. The melting-pot environment in many large cities in the US brings great cultural diversity into our EDs. With this diversity, different culturally based expectations and needs come into play. Those of us that have grown up in the US pride ourselves on our ability to overcome prejudice and eliminate ethnic and gender bias, allowing us to make every attempt to treat all our patients as equals. Is it acceptable to acquiesce to requests based on bias?

As physicians, we have a duty first and foremost to the patient. We aim to treat patients, and to make them as comfortable as

possible. In medical school, we are taught that being a patient is challenging. The patient must put herself into the care of another individual who is often a stranger. Personal and private information must be shared, bodies touched in an unhindered way, and permission given to run tests that may cause discomfort. It is the responsibility of the treating physician to empathize with her patient. Helping a person acclimate to her role as patient will ultimately expedite and help assure her appropriate care. Should physicians therefore accede to a patient's personal preferences and in certain instances her prejudices to assure comfort?

The ED is the gateway of the hospital. By nature, it is a hectic environment that attracts a culturally diverse patient population. New immigrants often frequent the ED: without other access to medical care, they arrive in the ED, adding to the chaotic patient mix. These patients are often not familiar with the expectations of the general American culture. It becomes the ED provider's responsibility to behave in a culturally sensitive fashion.

The fourth principal of medical ethics is justice. When discussing justice, an ethicist generally refers to fairness with regard to distribution of goods, with a specific focus on those goods that may be in short supply. It can also be defined as equality in the treatment of individuals. Could accommodating a patient's bias be viewed as treating her in a just way?

A doctor's increased tolerance of seemingly minor cultural attitudes that she does not share may allow a patient to feel comfortable in an already frightening environment such as the ED. Our patient interactions are often rapid and without time for niceties. Small gestures that may violate our own cultural beliefs, such as finding a male staff member to push our Hasidic patient's wheelchair, can make the patient feel at ease. These small changes and accommodations increase a patient's trust and enhance communication. In turn, the patient receives better care. ▀

