MEDIA RELEASE

To operate or not to operate: moral decision making in the hospital setting

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Open and honest communication that seeks a consensual decision from both the patient and the surgeon is the key to moral decision making in surgery according to an article written by Professor David Watters in the latest issue of the Australia and New Zealand Journal of Surgery (ANZJS), the peer-review publication of the Royal Australasian College of Surgeons (RACS).

Additionally, Professor Watters says that recognising frailty as opposed to age, and placing greater emphasis on documentation of the discussion and decision with the patient will better assist with advanced care planning and may avoid over-treatment or unnecessary treatment at the end of life.

Professor Watters raises some common questions faced by surgeons around when to operate on a patient who may insist on a procedure when there are high risks of complication, unplanned return to theatre, increased hospital stay or death.

"Are we seduced to act by the patient's confidence in our ability to perform the procedure? Should we do a procedure we would not advise to our relatives just because a patient strongly desires it?"

"The answer is, avoid 'spin' that over-sells the potential benefits of a particular operation and reflect on values, expectations, benefits, risks and unwanted outcomes."

Professor Watters explains that listening to the patient, taking their concerns, needs and wishes seriously and engaging in dialogue which enables the patient to make an informed decision, consensual to both the patient and the surgeon will inevitably determine the safety, quality and outcome of care.

“When there are unexpected or unwanted outcomes, the surgeon will be best placed when such dialogue with the patient or their medical treatment decision maker has been well documented in clinical records,” he concludes.

Read the full article here

The ANZ Journal of Surgery, published by Wiley-Blackwell, is the pre-eminent surgical journal published in Australia, New Zealand and the South-East Asian region for the Royal Australasian College of Surgeons. The Journal is dedicated to the promotion of outstanding surgical practice, and research of contemporary and international interest.

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RACS is the leading advocate for surgical standards, professionalism and surgical education in Australia and New Zealand. The College is a not-for-profit organisation that represents more than 7000 surgeons and 1300 surgical trainees and International Medical Graduates. RACS also supports healthcare and surgical education in the Asia-Pacific region and is a substantial funder of surgical research. There are nine surgical specialties in Australasia being: Cardiothoracic surgery, General surgery, Neurosurgery, Orthopaedic surgery, Otolaryngology Head-and-Neck surgery, Paediatric surgery, Plastic and Reconstructive surgery, Urology and Vascular surgery.

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