The Pelvic Exam

Introduction

Medical students learn by doing. The oft quoted maxim, watch one - do one - teach one, captures the importance of practice in the world of the teaching hospital. What happens, however, when the desire to teach and the passion to learn infringe on the rights of a patient, specifically the right to privacy and informed consent? Some would argue that when harm is minimal, even nonexistent, the greater good of teaching and learning carry the argument. In this unit we explore issues of necessity, rights, professionalism and truth telling as they arise in the encounter between a medical student and an inquisitive patient.

Relevance

As a medical student in clerkship or as a resident you may find yourself asked to participate in care which you consider personally or professionally unethical. This may arise for many reasons including utility, tradition, lack of time or reflection, or simply ignorance of law, patient rights, or good practice. Thinking in advance about how one might respond to such a situation.

Objectives

At the end of this class you should be able to:
- Describe precisely what permissions are granted by formal UH consent forms and to whom those permissions are granted.
- Explain, legally and morally, what obligations of truth telling are incumbent upon a medical student.
- Be able to discuss what steps a teaching hospital can take to provide appropriate opportunities for medical student learning while protecting the rights of patients.

Preparation

- Read the case: The Pelvic Exam
- Read the articles and consent information on the resources page.
- Think about this question and be prepared to discuss it in class: Do you think that Arpad is obligated to honestly answer Ms. Able’s question.

Process

Class begins with a brief lecture on the issues and on the importance of analogy in medical reasoning.
In Section:
- As a group outline and discuss the ethical issues raised by the case. Have one the student leader act as a scribe to outline these issues for the others.
- The principal task today is to role play the conversation between Arpad and Ms. Able. I suggest you conceive and role play several different scenarios according to the issues raised by the group. For example:
1. A scenario in which Arpad acknowledges the pelvic exams. What might Ms. Able’s reaction be?
2. A scenario in which Arpad is evasive and does not answer her question?
3. What might he say to the attending? (In the operating room or afterward)
   - I encourage you to think of as many variations as you can and to test them in the role play situations.
   - Evaluate the role play sessions. They are really opportunities for you to test the successfulness and practicalities of what we think Arpad should do.
   - What is learned about the effectiveness, professionalism, and integrity of Arpad’s conversation with Ms. Able?

**Study Questions**

1. How and when do patients give consent for medical students to take part in diagnostic examinations and other procedures?
2. What ethical reasons might justify student practice on patients and what ethical concerns might prohibit such practice?
3. According to Kim, Gates, and Lo, what patient attitudes should attending physicians, residents, and students be aware of in speaking with patients about proposed procedures.

**Articles on File**

The Ethics of Intimate Examinations—teaching tomorrow’s doctors, Yvette Coldicott, Catherine Pope, Clive Roberts

Please Don’t Touch Me There, BMJ VOLUME 326 14 JUNE

Kim HN, Gates E, Lo B. What Hysterectomy Patients Want to Know about the Roles of Residents and Medical Students in Their Care? Academic Medicine 1988 March 73(3): 339-341

**Resource Links** *(Ctrl-Click on bold text when online)*

- University Hospital Policies and Procedures
  - Patients Bill of Rights
- Patients for Practice, CNN, Ethics Matters January 25, 2000
- Tutoring and Demonstrating: A Guide for the University of Melbourne