Consider the types of information needed

- Medical facts
- Patient’s preferences and interests
- Other parties’ preferences and interests
- Ethics knowledge
  - Codes of ethics, ethics guidelines, and consensus statements
  - Published literature
  - Precedent cases
  - Institutional policy and documents, and law
  - Outside ethics experts

Identify the appropriate sources of information

- Face-to-face patient visit
- Direct examination of the health record and other documents
- Interviews with key staff members
- Interviews with family members and friends

Gather information systematically from each source

- Adapt the content and depth of information to fit the needs of the case
- Collect firsthand information whenever possible
- Independently verify critical information
- Distinguish medical facts from value judgments
- Notify the attending physician before interviewing the patient

Summarize the information and the ethics question

- Communicate the summary to key participants
- Respectfully report information from various sources
- Attempt to reconcile contradictory information
- Reformulate the ethics question, if necessary

Determine whether a formal meeting is needed

- Prepare by communicating with key participants and reviewing relevant ethics knowledge
- Explain goals and set ground rules
- “Level the playing field”

Engage in ethical analysis

- Apply ethics knowledge to the circumstances and ethics question
- Apply various approaches to ethical analysis

Identify the ethically appropriate decision-maker

- Determine whether the patient has decision-making capacity
- If the patient lacks capacity, determine his/her known preferences and authorized surrogate
- Clarify the limits of the surrogate’s authority
- If no surrogate is available, facilitate the process described in policy
- Health care professionals determine what clinical interventions are consistent with sound medical practice
- The patient/surrogate determines whether to accept these interventions
- The health care organization may legitimately place limits on patient/surrogate or provider choice

Facilitate moral deliberation about ethically justifiable options

- Offer options that may not have been considered
- Review the range of ethically justifiable options
- Cite sources to support the argument that a particular option is/is not ethically justifiable
- Support the ethically appropriate decision-maker in the decision-making process
Communicate the synthesis to key participants
- Communicate directly to key participants
- Describe what transpired as well as the resolution and any recommendations or plans
- Indicate willingness to continue working with participants

Provide additional resources
- Consider what might be most useful to participants
- Make available copies of articles or other publications. Recommend websites for additional information

Document the consultation in the health record
- Name and role of requester
- Date and time of request
- Name(s) of consultant(s)
- Description of case and ethics concern
- Ethics question
- Sources and summary of relevant information (e.g., medical facts, patient interests, other interests, ethics knowledge)
- Description of formal meetings held
- Summary of ethical analysis
- Determination of ethically appropriate decision-maker
- Options considered and whether consensus was reached
- Recommendations and plans

Document the consultation in consultation service records
- All health record notes
- Inter-consultant communications and notes
- Activities supporting the consultation process
- Use ECWeb (if available)

Follow up with participant
- What happened with the case?
- Have any new ethical concerns emerged?
- Were the recommendations followed? If not, why not?

Evaluate the consultation
- Conduct a critical self-review of each case
- Compare actual processes followed to established standards
- Determine participants’ satisfaction with the consult process
- Obtain feedback from peers and supervisors
- Explore opportunities for external peer review

Adjust the consultation process
- Consider results of follow-up and evaluation steps
- Make changes in policies and/or procedures as appropriate

Identify underlying systems issues
- For each case, consider whether underlying systems issues need to be addressed
- Periodically review records to look for patterns of recurrent cases or concerns
- Bring significant systems issues to the attention of the individual or body responsible for handling such concerns

The National Center for Ethics in Health Care designed the CASES approach to standardize the process of ethics consultation throughout VA. For consultations involving active clinical cases, consultants should follow all of the steps in the CASES approach. For other types of consultations, such as general questions about ethics, policy interpretations, or requests for ethical analysis of organizational ethics topics, the CASES approach should be modified as needed.

The CASES steps are designed to guide ethics consultants through the complex processes needed to effectively resolve ethical concerns in ethics case consultations. We intend these steps to be used similarly to the way clinicians use a standard format for taking a patient's history, performing a physical exam, or writing up a clinical note. Even when some steps don’t require specific, observable action, each step should be considered systematically as part of every ethics consultation.