



Approved April 2020

Ethical Issues at the End of Life

Revised April 2020

Reaffirmed April 2014

Revised with current title
June 2008

Originally approved titled
“Ethical Issues in Emergency
Department Care at the End
of Life” September 2005

The American College of Emergency Physicians believes that:

- Emergency physicians play an important role in providing care at the end of life (EOL).
- Helping patients and their families achieve greater control over the dying process will improve EOL care by ensuring care is provided in accordance with patients’ wishes.
- Advance care planning can help patients formulate and express individual wishes for EOL care and communicate those wishes to their health care providers by means of advance directives (including state approved advance directives such as POLST, MOLST, MOST, DNAR orders, living wills and durable powers of attorney for health care).

To enhance EOL care in the emergency department, the American College of Emergency Physicians believes that emergency physicians should:

- Respect the dying patient’s needs for care, comfort, and compassion.
- Communicate promptly and appropriately with patients and their families about EOL care choices.
- Elicit the patient’s goals for care before initiating non-life-threatening treatment, recognizing that EOL care includes a broad range of therapeutic and palliative options, including forgoing treatments that may increase distress or are not aligned with the goals of the patient.
- Respect the wishes of dying patients including those expressed in advance directives. This also includes making a reasonable attempt at identifying their specific advance directives.
- Assist surrogates to make EOL care choices for patients who lack decision-making capacity, based on the patient’s own preferences, values, and goals.
- Encourage the presence of family and friends at the patient’s bedside near the end of life, if desired by the patient.
- Recognize when family distress or goals may not align with the patients’ goals.
- Protect the privacy of patients and families near the end of life.
- Promote liaisons with individuals and organizations in order to help patients and families honor EOL cultural and religious traditions.

- Physicians have a responsibility to communicate difficult information in a sensitive way.
- Comply with institutional policies regarding recovery of organs for transplantation.
- Obtain informed consent from surrogates for postmortem procedures.