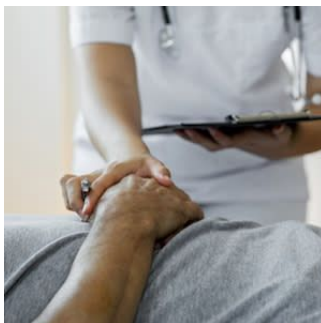

ICU Professionals' Knowledge of End-of-Life Decision-Making Law



There are laws regulating healthcare practice at the end of life. Most healthcare professionals rely on their clinical knowledge to inform treatment decisions during this time. However, the extent to which the law informs their decision-making at the end of life remains uncertain.

In this study, the researchers describe what healthcare professionals in the ICU and emergency departments know about the law related to end-of-life decision-making. They reviewed 18 quantitative and three qualitative articles. Ten studies assessed knowledge and attitudes to law or end-of-life decision-making using hypothetical scenarios. The goal was to evaluate how the law was applied when end-of-life decisions were made. Findings show significant gaps in healthcare professionals' legal knowledge about end-of-life decision-making worldwide. In most cases, clinical factors were considered more important to end-of-life decision-making than legal factors.

Physicians have poor knowledge of end-of-life law and their legal obligations and powers related to decisions regarding withholding or withdrawing treatment. There are also gaps in nurses' knowledge of the law concerning the provision of adequate pain and symptom relief at the end of life. This includes their understanding of the doctrine of double effect that provides a lawful excuse for administering pain relief at the end of life to hasten death and to relieve the patient's suffering.

The study also highlights the challenges associated with making these decisions in the ED and ICU. Often, hospitalised patients lack decision-making capacity, and/or a decision is required urgently. It is important to understand how these factors affect healthcare professionals' engagement with and application of the law. It is also important to identify methodological approaches that have previously been taken and to understand the scope of the issue globally. Future research should focus on interventions to reduce knowledge gaps or strategies to address structural barriers to applying end-of-life law.

End-of-life decision-making carries legal risk. More qualitative research is needed to ascertain the clinician-related factors that affect the integration of law with end-of-life decision-making.

Source: [Australian Critical Care](#)

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