

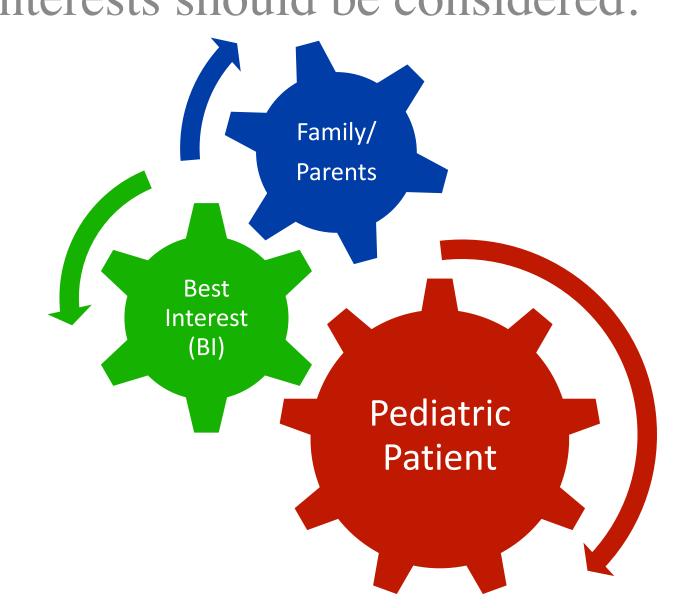
# What Exactly is a Patient's Best Interest?

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#### Introduction

In any clinical setting, the patient's preferences are respected and valued by the medical team. As clear as that may seem, that can be tough when considering all the perspectives of what makes up a patient's best interest (BI), especially for a minor. In the literature, there is wide disagreement about the interpretation of BI. The primary goal of this project is to unearth the perspectives that play into a pediatric patient's best interest and delineate how and whether family interests should be considered.



### **Aims and Objectives**

**Aim I:** Develop search strategy in conjunction with mentors and search strategist (Stephanie Swanberg).

Aim II: Conduct search, import into COVIDENCE, and conduct inclusion/exclusion review of search results.

> a. Search terms: See subheading "Search Terms' b. Inclusion/exclusions: See subheading "Inclusion/Exclusion Criteria"

Aim III: Develop Coding strategy and then code articles

a. Coding will include orientation of author (clinical versus academic) b. Construct used

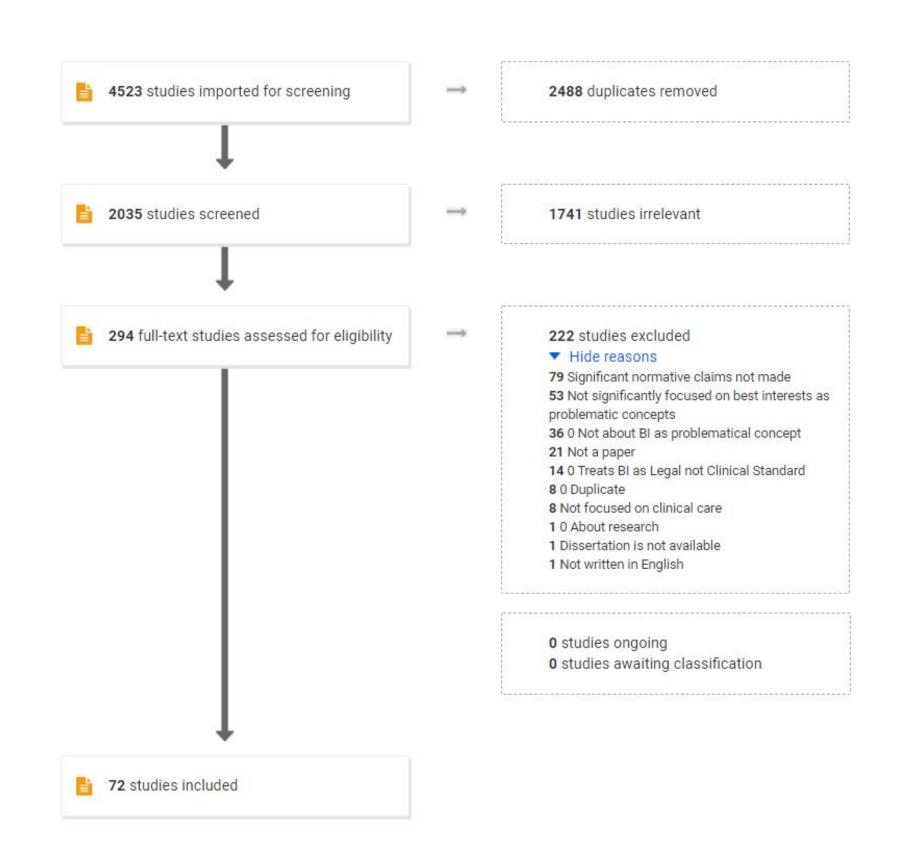
c. Core clinical issue

**Aim IV:** Determine if there is a sizable consensus on the best interest of pediatric patients.

**Aim V:** Determine how best interest is operationalized depending on the context of family.

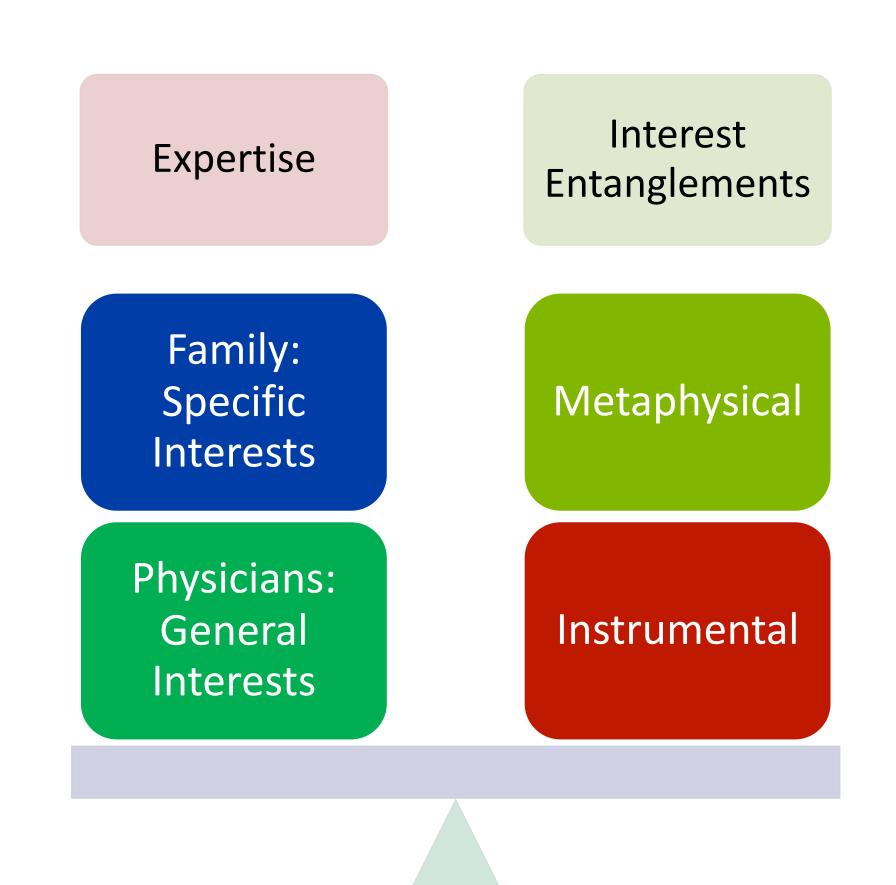
#### Methods

A critical scoping analysis of 4523 search results in normative clinical bioethics literature was conducted. An inclusion/exclusion criterion was used with a two-person systematic screening process in COVIDENCE, followed by a review of the abstracts, and full text articles. A final 72 publications were analyzed using the criterion.



#### Results

There is near consensus that children's interests are entangled with the interests of family, but there is disagreement about how they are entangled and how much expertise family have about their children's interests. The entanglements included metaphysical interests (overlapping interests between patient and family) and instrumental interests (family's interest matter due to the better care provided to the child). Additionally, the expertise of the family is in question where 'specific' interests are the focus, while the clinicians have a larger role to play on the side of 'general' interests.



#### Conclusions

The idea that family interests are entangled with the child does not follow that they have special knowledge about that entanglement or that they have special moral authority to make decisions for their children. It's clear that there is dissensus on the role of family in the care of the childpatient. A more focused study will need to be done to provide a standardized practice in today's era.

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