

written account of these. Ideally, with any life-changing diagnosis, and especially one in which decisional incapacity is expected during the course of treatment, the informed consent process with a capacitated patient should take place together with the surrogate decisionmaker, and perhaps with other members of the social circle.

Taking the time to fill in the picture the son has sketched of his father's preferences is the only way to respect the patient, the family, and the health-care team. Thoroughly addressing the patient's symptoms should alleviate the distress he and his son are experiencing to allow enough time for that picture to emerge.

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What Actually Happened

Due to the attending physician's doubts about whether it was ethically acceptable to honor the son's request to discontinue life-extending treatment, she requested an ethics consultation. After discussing the case with the attending and reviewing the patient's chart, the ethics consultant met with the patient's son. The consultant spoke with the son and concluded that his primary reason for wanting to stop treatment and change the goal of his father's care to keeping him comfortable was to honor his father's wishes and to spare him from a more protracted and painful death. The consultant also concluded that the son's concern about the quality of his parents' relationship did not appear to be a major factor in his request to stop treatment. The consultant recommended that the patient's son contact other family members before making a final decision, and the son agreed. Two days later, after consulting various family members, including his mother, the son decided to stop treatment, and the attending physician wrote an order to "withhold all support" and to limit care to "comfort measures only." The patient died a few days later.