

Case Study
James vs. the
Board of Education

*Case and discussion questions
by Robert L. Potter*

Jimmy is twelve years old, bright, interacts well with teachers and other students, and really likes to go to school. However, his osteosarcoma has advanced to a terminal stage, and he is now enrolled in hospice for good palliative care. Because of his terminal condition, Jimmy and his parents have agreed together with the hospice team that any resuscitation attempt would be unwanted and unwarranted.

An Out of Hospital DNR form has been completed, and James's doctor signed it. When Jimmy's parents presented their request that CPR be withheld if Jimmy's death should occur at school, the school nurse told them that their wishes could not be met. The school board had specifically rejected a policy that would honor DNR requests for students during the time they were the responsibility of the school system. The nurse and the principal reinforced the policy and insisted that EMS would be called to the scene and CPR initiated if Jimmy's condition became critical.

Jimmy was reluctant to attend school under these circumstances, but was committed to getting back into the classroom without having to give up his DNR status. His parents enlisted the help of the ethics committee at the local hospital for the purpose of presenting the argument for a school board policy to honor Out of Hospital DNR requests for students with life-threatening conditions.

As a member of that ethics committee, how would *you* respond to the following questions?

1. What is it about being a minor that disqualifies a person from having DNR requests honored?
2. Did Jimmy "assent" to the DNR order?

Questions, continued

3. If Jimmy had not "assented" to the DNR order should it be honored?
4. Why is the school board reluctant to have a policy honoring a DNR?
5. Is there experience elsewhere that gives insight as to what are the consequences of having such a policy?
6. Would it be undesirable or harmful to the teachers or other students if Jimmy's death occurred at school in the presence of his cohorts?
7. Would such harm be so great a burden as to offset the benefit to Jimmy of not having to endure CPR?
8. We allow primary school age children to watch death and dying in multiple forms on TV and film — could a "well conducted death" in the presence of his school mates be a potential benefit to Jimmy and his class mates?
9. Is it justified to put teachers and school authorities in a position to have to "conduct death well" in the school setting?
10. If CPR is not to be done what are the appropriate actions of teachers and administrators?
11. Would the policy require that teachers and administrators be trained in "managing death well?"
12. Is it likely that parents of students will protest such a policy on the grounds that they do not want their children exposed to death?
13. Does the Out of Hospital DNR statute of Kansas apply to minors?
14. Was the intent of the legislators to apply the law to minors?
15. Ought the law to apply to minors?

Discussion

See also, the American Academy of Pediatrics Committee on School Health and Committee on Bioethics. 2000. "Do Not Resuscitate Orders in Schools." *Pediatrics* 105(4): 878-879.