

## Case Study – Beneficence: Obligatory, Ideal and the Gray Space In Between



By [Ryan Pferdehirt, DBe,HEC-C](#)

March 2025

Bioethics case study on beneficence.

A foundation of modern medical ethics is the principle of beneficence, the obligation of the healthcare professional to do good for patients. This is a proactive responsibility, meaning the healthcare professional has to do something, which thus begs the question, how much is that healthcare professional supposed to do?

Beneficence can be seen as two different ideas, obligatory beneficence and ideal beneficence. **Obligatory beneficence** asks, what is your obligation, what are you supposed to do, what is your responsibility? **Ideal beneficence** is going beyond your responsibilities, acting ideally. These two ideas can come into conflict in some interesting ways. Take this patient scenario.

The patient was in his mid-40s, had recently immigrated to the United States, and had been having difficulty and not had a bowel movement in over a month. The patient came to the hospital and was diagnosed with colon cancer and a complete blockage of his lower intestines. He needed chemotherapy and did an initial round but did not respond well to it because his intestines were completely blocked.

He would not be able to eat anything orally or receive a feeding tube. So the only way to provide hydration and nutrition was through TPN, intravenous hydration and nutrition.

The patient would have to stay in the hospital for about three weeks until he was ready for another round of chemotherapy.

The questions then came:

- What is our responsibility to this patient? He is likely never going to be able to afford that round of chemotherapy or that three-week stay in the hospital.
- What does this patient deserve? Would it be obligatory beneficence for this patient to receive chemotherapy, or would it be ideal beneficence for that patient to receive it?
- Does this patient deserve this treatment?

It also comes to the idea of what is our responsibility to our fellow man, and who are our responsibilities toward? Is our responsibility toward citizens, or is it toward patients, or is it to the general idea of the larger good?

Beneficence is a challenging principle because, of the four major medical ethics principles, it is the only one that is proactive. This is going to become more and more challenging as more and more patients struggle with insurance, finances and immigration status. This needs to be corrected and thought of. What is our obligation, and who are our obligations toward?