

**NEWS FROM THE ETHICS COMMITTEE**

**Summary of Group Project or Activities – Posted June 2024**

Name of Project or Activity	Description	Project Status (New, Ongoing, Complete, Near Completion, Long Term, Abandoned)
Activity 1	Benchmarks/Action Items for BOD	Complete/submitted

**Summary of Group Meetings – Posted June 2024**

Type of Group Meeting	Date	Action Items from Meeting
Zoom call	February 8, 2024	Welcome New/Departing Members; Review past committee activities; confirm day/time for in person meeting at Annual Meeting.

**POSTED NOVEMBER 2023**

- Email planning for virtual fall meeting in leu of in-person SCA committee meeting at ASA.
- Continued Insertion of “ethical dilemmas/cases” into various program topics/venues for consistent presence of ethic topics in the annual program.

**POSTED JUNE 2023**

**Summary of Group Meeting**

- “email planning for in-person SCA committee meeting”
- Virtual Fall meeting (10/11/22); summary of previous committee accomplishments and planning for next meeting.

**COLLABORATION**

- Peter Neuburger, Bylaws Committee Chair—Planning for a “PRO CON Debate: DCD organ transplants” .....with CA Napolitano, Ethics Committee Chair.

**FUTURE PROJECTS**

- Continued Insertion of “ethical dilemmas/cases” into various program topics/venues for consistent presence of ethic topics in the annual program.

**POSTED NOVEMBER 2022**

Summary of Group Meeting 1: May 14, 2022 (SCA Annual Meeting)

- Members in Attendance: Agnieszka Trzcinka, Sarah Smith, Steven Miller, Nick Markin, Linda Shore-Lesserson (Board Liaison)
- Discussion Summary:
  - Welcome new Board Liaison, Linda Shore-Lesserson
  - Welcome new members and thank outgoing members their service
  - Review the mission of the committee
  - Review recent/prior committee decisions
  - Plan Annual Meeting Ethics Discussion Platforms
    - Insertion of “ethical dilemmas/cases” into various program topics/venues for consistent presence of ethic topics in the annual program.

Summary of Group Meeting 2: July 2022 (email discussion/comment)

- Summary of Discussion: *SCA Code of Ethics/Standards of Conduct* document submitted to BOD/President following request.

COLLABORATION

- Peter Neuburger, Bylaws Committee Chair—SCA Code of Ethics/Standards of Conduct document creation.

FUTURE PROJECTS

- Insertion of “ethical dilemmas/cases” into various program topics/venues for consistent presence of ethic topics in the annual program.

**POSTED OCTOBER 2021**

**Summary of Group Meeting: August 27, 2021**

- **Members in Attendance:** Charles A. Napolitano, Wendy Bernstein, Mikel Gorbea, Nicholas Markin, Agnieszka Trzcinka, Glenn Gravlee (Board Liaison)
  - Welcoming of new members
  - Future SCE Annual Meeting educational offering supported by Ethics Committee:
    - Suggestion of a “standing panel” for current ethical issue(s) facing SCA members. (e.g., The COVID pandemic has had impact regarding resources stemming from personal choices of patients, physician opting out of care, and the unvaccinated (patient or caretaker).)
    - Suggestion of an AdHoc Ethics Committee member on Education Committee for same.
  - Chair’s response to COI question posed by Research Committee in reviewing, evaluating, or commenting upon grant applications received—“committee issues regarding individual COI should be resolved internally in the accepted self-reflective manner in disclosures relating to person, affiliation, or self-interest.”
  - Review of Board’s decisions regarding Committee’s recommendations for election procedures:
    - 1. The Nominating Committee should work to provide a choice of candidates for each position. Motion APPROVED as listed above.**
    - 2. Once the SCA Board puts forth a slate of “endorsed” candidates, individual Board members shall refrain from endorsing candidates. Motion APPROVED with the following language – Once the SCA Board puts forth a slate of “endorsed” candidates, individual Board members shall refrain from further endorsing candidates.**
    - 3. SCA to provide more thorough information on each candidate’s qualifications for the position sought. Motion REJECTED**
    - 4. Special Interests Groups (SIGs) or any collective of members can advocate for candidates, however this must be done without the use of SCA resources. Motion APPROVED as listed above.**

**5. On the SCA Organizational Chart, SIGs should be moved back under the Member Engagement Committee. Motion REJECTED**

- Review of mechanisms for developing future Board Leaders; a general discussion of current avenues and suggestions of ways of identifying and directing future leaders.

**POSTED JUNE 2021**

The Ethics Committee discussed its future involvement in the educational component of the SCA. The committee members will communicate in planning future projects similar in scope to the ethics presentations held at the 2021 SCA Annual Meeting. A previous proposal included:

Panel discussion of “Who is in my chest?” for an upcoming submission, each panelist would address one of the bulleted topics:

- The various specialties performing cardiac/major vascular chest procedures (CTS, Interventional cardiologist, Interventional radiologist, Vascular); surgical back-up for non-surgeons/OR availability, and Hospital Credentialing; would love to have outcome data and regional variation in practices.
- Off label use of devices & procedures, their oversight, and Industry Reps assisting with procedures.
- The adequacy of our Informed Consent; sufficient coverage of new products, procedures, disclosure the level of proceduralist’s experience and non-medical personnel/Rep involvement, DNR suspensions/discussions relating to such (regional differences/cultural influences) in non-operative procedural candidates.
- Role of the Anesthesiologist regarding the poorly performing proceduralist and so patient safety: in the immediate procedural period, following procedure/repeated procedures (e.g., reporting to outcomes committee/initiating FPPE); as associated with burnout when the physician becomes the patient and so the balance of confidentiality, intervention to assure physician wellness and patient safety, and ramifications towards continued licensure and credentialing.