Bioethics: Philosophical Issues

CREDIT HOURS 3

LEVEL UPPER

EXAM CODE 359  CATALOG NUMBER HUMx310

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Before You Choose This UExcel Exam

Uses for the Examination

- Excelsior College, the test developer, recommends granting three (3) semester hours of upper-level undergraduate credit to students who receive a letter grade of C or higher on this examination.

- This recommendation is endorsed by the American Council on Education.

- The examination may be used to help fulfill the Humanities requirement or as a free elective for all Excelsior College degree programs that allow for free electives. For the baccalaureate degree in Nursing, it fulfills the Ethics requirement. For the Liberal Arts degrees, it may be used to help fulfill requirements for the Biology and Philosophy concentrations.

Exam-takers who have applied to Excelsior College should ask their academic advisor where this exam fits within their degree program.

Exam-takers not enrolled in an Excelsior College degree program should check with the institution from which they wish to receive credit to determine whether credit will be granted and/or to find out the minimum grade required for credit. Those who intend to enroll at Excelsior College should ask an admissions counselor where this exam fits within their intended degree program.

Examination Length and Scoring

The examination consists of approximately 100 questions, most of which are multiple choice; for samples of all the item types on this exam, see the sample items in the back of this guide. Some items are unscored, pretest items. The pretest items are embedded throughout the exam and are indistinguishable from the scored items. You will have two (2) hours to complete the examination. Your score will be reported as a letter grade.

UExcel Exam Resources

Excelsior College Bookstore

The Excelsior College Bookstore offers recommended textbooks and other resources to help you prepare for UExcel exams.

The bookstore is available online at: www.excelsior.edu/bookstore

UExcel Practice Exams

The official UExcel practice exams are highly recommended as part of your study plan. Once you register for your UExcel exam, you are eligible to purchase the corresponding practice exam, which can be taken using any computer with a supported Web browser. Each practice exam includes two forms that you may take within a 180-day period.
Excelsior College Library

Enrolled Excelsior College students can access millions of authoritative resources online through the Excelsior College Library. Created through our partnership with the Sheridan Libraries of The Johns Hopkins University, the library provides access to journal articles, books, websites, databases, reference services, and many other resources. Special library pages relate to the nursing degree exams and other selected exams. To access it, visit www.excelsior.edu/library (login is required).

Our library provides:

- 24/7 availability
- The world’s most current authoritative resources
- Help and support from staff librarians

Online Tutoring

Excelsior College offers online tutoring through SMARTTHINKING™ to connect with tutors who have been trained in a variety of academic subjects. To access SMARTTHINKING, go to www.excelsior.edu/smartthinking. Once there, you may download a copy of the SMARTTHINKING Student Handbook as a PDF.

MyExcelsior Community

MyExcelsior Community enables Excelsior College students and alumni to interact with their peers online. As members, students can participate in real-time chat groups, join online study groups, buy and sell used textbooks, and share Internet resources. Enrolled students have automatic access from their MyExcelsior page. Visit www.excelsior.edu/myexcelsiorcommunity.

Preparing for UExcel Exams

How Long Will It Take Me to Study?

A UExcel exam enables you to show that you’ve learned material comparable to one or more 15-week college-level courses. As an independent learner, you should study and review as much as you would for a college course. For a 3-credit course in a subject they don’t know, most students would be expected to study nine hours per week for 15 weeks, for a total of 135 hours.

Study Tips

Become an active user of the resource materials. Aim for understanding rather than memorization. The more active you are when you study, the more likely you will be to retain, understand, and apply the information.

The following techniques are generally considered to be active learning:

- **preview or survey** each chapter
- **highlight or underline text** you believe is important
- **write questions or comments** in the margins
- **practice re-stating content** in your own words
- **relate what you are reading** to the chapter title, section headings, and other organizing elements of the textbook
- **find ways to engage** your eyes, your ears, and your muscles, as well as your brain, in your studies
- **study with a partner or a small group** (if you are an enrolled student, search for partners on MyExcelsior Community)
- **prepare your review notes** as flashcards or create recordings that you can use while commuting or exercising

When you feel confident that you understand a content area, review what you have learned. Take a second look at the material to evaluate your understanding. If you have a study partner, the two of you can review by explaining the content to each other or writing test questions for each other to answer. Review questions from textbook chapters may be helpful for partner or individual study, as well.
Using UExcel Practice Exams

We recommend taking the first form of the practice exam when you begin studying, to see how much you already know. After taking the first practice exam, check your performance on each question and find out why your answer was right or wrong. This feedback will help you improve your knowledge of the subject and identify areas of weakness that you should address before taking the exam. Take the second form of the practice exam after you have finished studying. Analyze your results to identify the areas that you still need to review.

Although there is no guarantee, our research suggests that students who do well on the practice exams are more likely to pass the actual exam than those who do not do well (or do not take advantage of this opportunity).

Preparing for This Exam

Prior Knowledge
A familiarity with introductory ethics and philosophy is assumed.

Using the Content Outline
Each content area in the outline includes (1) the recommended minimum hours of study to devote to that content area and (2) the most important sections of the recommended resources for that area. These annotations are not intended to be comprehensive. You may need to refer to other chapters in the recommended textbooks. Chapter numbers and titles may differ in other editions.

This content outline contains examples of the types of information you should study. Although these examples are numerous, do not assume that everything on the exam will come from these examples. Conversely, do not expect that every detail you study will appear on the exam. Any exam is only a broad sample of all the questions that could be asked about the subject matter.

Using the Sample Questions and Rationales
Each content guide provides sample questions to illustrate those typically found on the exam. These questions are intended to give you an idea of the level of knowledge expected and the way questions are typically phrased. The sample questions do not sample the entire content of the exam and are not intended to serve as an entire practice test.
Recommended Resources for the UExcel Exam in Bioethics: Philosophical Issues

The study materials listed below are recommended by Excelsior College as the most appropriate resources to help you study for the examination. For information on ordering from the Excelsior College Bookstore, see page 1 of this guide. You may also find resource materials in college libraries. Public libraries may have some of the textbooks or may be able to obtain them through an interlibrary loan program.

You should allow sufficient time to obtain resources and to study before taking the exam.

Textbooks

These textbooks were used by the examination development committee to verify all questions on the exam.

These study materials may be purchased from the Excelsior College Bookstore. www.excelsior.edu/bookstore


This textbook was identified by the examination development committee as a resource to help you gain a deeper understanding of the subject.


Open Educational Resources

MIT offers free, high quality course materials for many of their courses.

MIT: Bioethics

Reducing Textbook Costs

Many students know it is less expensive to buy a used textbook, and buying a previous edition is also an option. The Excelsior College bookstore includes a buyback feature and a used book marketplace, as well as the ability to rent digital versions of textbooks for as long as students need them. Students are encouraged to explore these and the many other opportunities available online to help defray textbook costs.
Content Outline

General Description of the Examination

The UExcel Bioethics: Philosophical Issues examination is based on material typically taught in a one-semester, three-credits, upper-level course in bioethics. The content of the examination corresponds to course offerings such as Ethics, Bioethics, Biomedical Ethics, and Environmental Ethics.

The examination measures knowledge of facts and terminology, an understanding of concepts and theories of bioethics, clinical topics in biomedical ethics, social topics in bioethics, topics in environmental ethics, and the ability to apply this knowledge and understanding in an analysis of the philosophical issues concerning biomedical and environmental ethics.

Those beginning to study for this exam should be familiar with the concepts typically covered in introductory ethics and philosophy.

Learning Outcomes

After you have successfully worked your way through the recommended study materials, you should be able to demonstrate the following learning outcomes:

1. Recognize and distinguish among basic theories and ethical concepts related to a study of bioethics.

2. Discuss the bioethical implications of different types of relationships between patients and health care professionals, and describe a case study in bioethics.

3. Discuss the bioethical implications of clinical issues such as genetic engineering/selection, reproductive engineering (such as cloning and assisted fertilization), and end-of-life care.

4. Assess the impact of social topics pertaining to bioethics, such as medical resource management, types of health care payment systems, HIV/AIDS, cultural difference, and biomedical research.

5. Discuss the moral criteria pertaining to environmental ethics, and discuss how these criteria inform a philosophy of bioethics.

6. Explain the basic ideological and philosophical bases of speciesism, biocentrism, ecofeminism, and social ecology.

7. Describe the importance of special topics in environmental ethics, such as animal rights, ecosystems and biological communities, pollution, and consumption/conservation.
Content Outline

The content outline describes the various areas of the test, similar to the way a syllabus outlines a course. To fully prepare requires self-direction and discipline. Study involves careful reading, reflection, and systematic review.

The major content areas on the Bioethics: Philosophical Issues examination, the percent of the examination, and the hours to devote to each content area are listed below.

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<th>Content Area</th>
<th>Percent of the Examination</th>
<th>Hours of Study</th>
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<td>I. Ethical Theories in Bioethics</td>
<td>15%</td>
<td>20</td>
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<td>II. Basic Concepts in Bioethics: Relationships</td>
<td>15%</td>
<td>21</td>
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<tr>
<td>Among Patients and Health Care Professionals</td>
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<tr>
<td>III. Clinical Topics in Biomedical Ethics</td>
<td>25%</td>
<td>34</td>
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<tr>
<td>IV. Social Topics in Bioethics</td>
<td>20%</td>
<td>27</td>
</tr>
<tr>
<td>V. Topics in Environmental Ethics</td>
<td>25%</td>
<td>34</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
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**NOTE:** Occasionally, examples will be listed for a content topic to help clarify that topic. However, the content of the examination is not limited to the specific examples given.

I. Ethical Theories in Bioethics

15 PERCENT OF EXAM | 20 HOURS OF STUDY

Munson (2012)
- Ch. 2, Research Ethics and Informed Consent
- Part VI, Foundations of Bioethics

Warren (1997)
- Ch. 3, Sentience and the Utilitarian Calculus

A. Utilitarian theories
B. Kantian theories

C. W.D. Ross’s *prima facie duties*

D. Natural law theory

E. Concepts of justice
   1. John Rawls’s Theory of Justice
   2. Patterns in distribution of justice
      a. Equality
      b. Need
      c. Merit
      d. Effort

F. Virtue ethics

G. Care/feminist ethics
II. Basic Concepts in Bioethics: Relationships Among Patients and Health Care Professionals

15 PERCENT OF EXAM | 21 HOURS OF STUDY

Munson
Ch. 1, Physicians, Patients, and Others: Autonomy, Truth Telling, and Confidentiality
Part VI, Foundations of Bioethics

A. Truth telling
B. Informed consent
C. Beneficence/nonmaleficence
D. Autonomy
E. Paternalism
F. Confidentiality
G. Case Study: Tarasoff v. Regents of the University of California

III. Clinical Topics in Biomedical Ethics

25 PERCENT OF EXAM | 34 HOURS OF STUDY

Munson
Ch. 3, Genetic Control
Ch. 4, Reproductive Control
Ch. 5, Abortion
Ch. 7, Euthanasia and Physician-Assisted Suicide

Warren
Ch. 8, Euthanasia and the Moral Status of Human Beings
Ch. 9, Abortion and Human Rights

A. Genetic interventions
1. The stem cell debates
2. The Human Genome Project
3. Screening, diagnosis, and counseling (for example: prenatal and perinatal testing)
4. Eugenics
   a. Positive eugenics
   b. Negative eugenics
5. Research, therapy, and technology (for example: germ-line therapy)
6. Case Study: Huntington’s disease

B. Reproductive issues
1. Abortion
2. Assisted reproduction practices (for example: artificial insemination, in vitro fertilization)
3. Human cloning
4. Surrogate pregnancy (for example: Baby M)
5. Case Study: Louise Brown — First “Test-Tube Baby”

C. End-of-life issues
1. Terminating treatment (for example: Karen Ann Quinlan)
2. Euthanasia
   a. Active euthanasia
   b. Passive euthanasia
3. Physician-assisted suicide (PAS)
4. Medical futility
5. Hospice and palliative care
6. Case Study: Nancy Cruzan

IV. Social Topics in Bioethics

20 PERCENT OF EXAM | 27 HOURS OF STUDY

Munson
Ch. 2, Research Ethics and Informed Consent
Ch. 8, Organ Transplants and Scarce Medical Resources
Ch. 9, Distributing Health Care
Ch. 10, Women and Medicine
Ch. 11, African Americans and Medicine
Ch. 12, Epidemic! AIDS and HIV

A. Acquisition and allocation of scarce medical resources
1. Availability of organs and tissues for transplant
2. Availability of technology
3. Availability of medical services

B. Payment for health care
   1. Health care as right or privilege
   2. Payment systems
      a. Managed care
      b. Single payer

C. HIV/AIDS
   1. History
   2. Therapy
   3. Confidentiality/anonymity
   4. Responsibility
      a. Government
      b. Individuals

D. Race, gender, class, and health care in the United States
   1. African Americans
   2. American Indians and Alaska Natives
   3. Asians and Pacific Islander
   4. Hispanics/Latinos
   5. Women
   6. Persons living in poverty
   7. Case Study: Tuskegee Syphilis Study

E. Biomedical research
   1. Informed consent (for example: Nuremberg Code)
   2. Beneficence and nonmaleficence (for example: clinical drug trials)
   3. Autonomy (for example: human experimentation)
   4. Case study: Willowbrook Hepatitis Experiments

V. Topics in Environmental Ethics

25 PERCENT OF EXAM | 34 HOURS OF STUDY

DesJardins (2013)
   Entire text

Warren
   Ch. 3, Sentience and the Utilitarian Calculus
   Ch. 4, Personhood and Moral Rights
   Ch. 10, Animal Rights and Human Limitations

A. Moral status
   1. The concept of moral status
   2. Suggested criteria for moral status
      a. Sentience
      b. Personhood
      c. Capacity for relationships
      d. Alternatives
   3. Application: animal rights

B. Basic concepts and theories
   1. Speciesism (for example: anthropocentrism)
   2. Biocentrism (for example: Paul Taylor, Albert Schweitzer)
   3. Ecocentrism
      a. Land ethic (for example: Aldo Leopold, J. Baird Callicott)
      b. Deep ecology (for example: Arne Naess)
   4. Ecofeminism (for example: Karen J. Warren)
   5. Social ecology (for example: Murray Bookchin)

C. Special topics in environmental ethics
   1. Animal rights
      (for example: Tom Regan)
      a. Experimentation
      b. Farming
      c. Welfare
   2. Ecosystems and biological communities
3. Pollution
   a. Pesticides (for example: Rachel Carson)
   b. Economics
   c. Toxic waste (for example: environmental racism)

4. Consumption and conservation of resources (for example: population ethics)
Sample Questions

The sample questions give you an idea of the level of knowledge expected in the exam and how questions are typically phrased. They are not representative of the entire content of the exam and are not intended to serve as a practice test.

Rationales for the questions can be found on pages 14–18 of this guide. In that section, the correct answer is identified and each answer is explained. The number in parentheses at the beginning of each rationale refers to the corresponding section of the content outline.

For any questions you answer incorrectly, return to that section of the content outline for further study.

1. Which statement is acceptable to someone who believes a fetus is a person and accepts Kant’s idea about how persons must be treated?
   1) The fetus has moral rights, so it must be treated with respect.
   2) We should not act on maxims that can be universally willed.
   3) We should act on maxims that promote happiness for the future child.
   4) A fetus may be treated simply as a means to an end if it is a good end.

2. Which situation most clearly suggests that a society is not acting in accordance with a principle of distributive justice based on the pattern of effort?
   1) Physicians generally earn less than plumbers.
   2) Some plumbers earn more than other plumbers.
   3) Electricians retiring at age 57 collect larger pensions than electricians retiring at age 67.
   4) Some mathematicians retiring at age 67 earn more than some physicians retiring at age 57.

3. A physician is skillful and proficient in practice, but became a physician in order to make money and attain a high status. What does this situation best illustrate?
   1) a case in which the physician exhibits moral virtue
   2) very little difference between moral and non-moral virtues
   3) an example of non-moral virtues as opposed to moral virtues
   4) the problem of distinguishing virtuous behavior in a physician

4. Which feature of the reasonable person standard of informed consent creates the most difficulty in ensuring adequate physician communication with the patient?
   1) Patients may vary in the amount of information they desire.
   2) Patients are usually not reasonable when facing serious health problems.
   3) Treating all patients as equally reasonable shows a disregard for autonomy.
   4) Physicians cannot be certain how much information is reasonable for the patient.
5. Under which circumstances could a physician ethically limit an adult patient’s autonomy?
   1) The patient does not understand the treatment and denies being ill.
   2) The patient believes that the treatment is not beneficial and rejects it.
   3) The treatment violates the patient’s religion and the conditions may be fatal.
   4) The treatment will be too expensive and the patient has no health insurance.

6. How did the dissenting opinion in the case of *Tarasoff v. Regents of the University of California* argue against the majority opinion?
   Under the majority ruling,
   1) patients would fear disclosing information to the therapist.
   2) too many people seeking care would overburden the system.
   3) therapists would be placed in personal danger from their patients.
   4) therapists would be allied with the state rather than with their patients.

7. Which outcome is most likely to result from a program of positive eugenics?
   1) Genes that predispose individuals to disease will be increased.
   2) Humans with genetically desirable traits will increase in the population.
   3) Couples who have the same recessive gene will be encouraged to propagate.
   4) People with genes for traits favored by nature will be encouraged to reproduce.

8. In *A Defense of Abortion*, Thomson draws an analogy between a pregnant woman maintaining the life of her fetus and a person who has had their kidneys, without consent, connected to the renal system of a famous violinist to save the violinist from dying of kidney failure. Which conclusion does Thomson draw from this analogy?
   Abortions are permissible if the pregnancy results
   1) from a rape.
   2) from carelessness.
   3) from contraceptive failure.
   4) intentionally but the woman changes her mind.

9. Which descriptor best illustrates artificial insemination (homologous)(AIH)?
   1) using fresh sperm from a donor
   2) using sperm from the male partner
   3) using previously frozen sperm from a donor
   4) using a mixture of sperm from the male partner and a donor

10. Which term applies to the action of removing life support from an incompetent person who is terminally ill?
    1) active voluntary euthanasia
    2) passive voluntary euthanasia
    3) active nonvoluntary euthanasia
    4) passive nonvoluntary euthanasia

11. Which reason best defends physician-assisted suicide?
    1) The goal of medicine is to heal.
    2) The goal of patients is to live pain-free.
    3) People have a right to decide when to end their lives.
    4) People have a right to a good doctor/patient relationship.

12. What was the basis of the court’s final decision in the Nancy Cruzan case?
    1) Cruzan had a right to privacy.
    2) Cruzan had a durable power of attorney.
    3) Cruzan would have wanted the final result.
    4) Cruzan’s feeding tube was not medical treatment.

13. Which moral argument most strongly supports a doctor’s obligation not to disclose a patient’s HIV status without the patient’s permission?
    1) The physician may seriously doubt the validity of the patient’s HIV clinical test results.
    2) The physician can be sued for violating the confidentiality of a patient who has HIV.
    3) The physician must abide by the patient’s decision concerning revealing the patient’s health status.
    4) The physician tacitly agrees not to reveal the medical status of any patient who has an epidemic disease.
14. What is the most likely reason for an Asian American/Pacific Islander patient to refuse a prescribed treatment?
   1) They usually cannot afford medical care.
   2) They generally do not perceive a need for treatment.
   3) Their cultural beliefs may conflict with medical protocols.
   4) Their traditional methods of treatment are more effective than Western medicine.

15. Patients who are angered because the United States Food and Drug Administration (FDA) prevents access to possibly beneficial new or investigational drugs experience conflict between which two moral principles?
   1) justice and beneficence
   2) justice and respect for autonomy
   3) beneficence and nonmaleficence
   4) beneficence and respect for autonomy

16. According to the reverence for life principle, which type of value do all living things share?
   1) consequential value
   2) instrumental value
   3) intrinsic value
   4) sentient value

17. What does Mary Ann Warren consider to be the chief advantage of a uni-criterial approach to moral status?
   1) credibility
   2) explanatory power
   3) conceptual simplicity
   4) ease of practical application

18. Which focus of moral theories is most often considered to be speciesist?
   1) anthropocentric focus
   2) biocentric focus
   3) ecocentric focus
   4) utilitarian focus

19. Which assertion is incompatible with Deep Ecology?
   1) Science alone cannot establish normative conclusions.
   2) Nonhuman life forms often have instrumental value for humans.
   3) The human population must decrease so nonhuman life can flourish.
   4) Solutions to the environmental crisis require a worldwide change of attitude.

20. Which statement contradicts Murray Bookchin’s theory regarding the connection between social domination and the domination of nature?
   1) Social domination is not causally connected with the domination of nature.
   2) Social hierarchies do not encourage efforts that attempt domination of nature.
   3) Social hierarchies must be eliminated in order to meet environmental challenges.
   4) Social hierarchies are more likely to identify social progress with control of nature.

21. According to the Cartesian view, what is the primary criterion for establishing moral standing?
   1) consciousness
   2) potentiality
   3) self-awareness
   4) sentience

22. According to classical free market economics, what is the best way to ensure effective distribution of scarce environmental resources?
   1) Reduce competition in open markets.
   2) Create economic equity across the society.
   3) Apply utilitarian principles to the methods of allocation.
   4) Rely on markets that have minimal governmental regulations.
Sample Case Study and Associated Questions

According to the practice guidelines of a large health maintenance organization (HMO), Mrs. Camden, a 57-year-old widow, is medically ready to be discharged from the hospital. Her physician, Dr. Jackson, knows, however, that she will need some assistance and support when she is at home, particularly during the first few days. Unfortunately, Mrs. Camden has no one at home to provide her with this help. Her daughter and son-in-law, who live in another city, have agreed to come for the weekend to take care of her, but today is only Thursday. Sending her home to an empty house would involve serious risk of injury. Dr. Jackson’s first response is to keep her in the hospital for another day and then send her home when her daughter arrives. But Mrs. Camden’s HMO refuses to pay for an extra day, claiming that it is medically unnecessary. Mrs. Camden has no savings, lives on a small pension, and is unable to pay out-of-pocket for another day in the hospital. As it is, it will be very difficult for her to make her co-pay.

Beckley, the hospital social worker, is angered by the HMO’s decision, saying that it violates Mrs. Camden’s right to adequate health care. This comment irritates Dr. Jackson and she asks who has the obligations that correspond to patients’ rights. “Should doctors be required to provide treatment regardless of patients’ ability to pay, or regardless of doctors’ willingness to treat those patients?” Beckley acknowledges that the health care system needs to consider the autonomy of doctors as well as that of patients. “But,” Beckley continues, “that shouldn’t mean that Mrs. Camden should be discharged before she is well enough to take care of herself. Why not just keep her in the hospital for one more day? Then later, the HMO can go through the appeals process to see if it will have to pay for it after all.” Dr. Jackson is not enthusiastic about this suggestion. She knows from experience that the appeals process is lengthy and difficult, and that the appeal often fails. Furthermore, although she does not mention it, Dr. Jackson knows that if the HMO reverses its decision, it would probably result in a smaller payment for her later on. The HMO uses financial incentives to encourage doctors to limit the cost of patients’ care. In Mrs. Camden’s case, Dr. Jackson has a financial incentive to keep the hospital stay as short as possible.

23. Which kind of right does Beckley cite when claiming that Mrs. Camden has a right to medical care?
   1) economic right
   2) legal right
   3) moral right
   4) political right

24. According to Marcia Angell, how should Dr. Jackson respond to the HMO’s payment decision about extending Mrs. Camden’s hospital stay?
   Dr. Jackson should
   1) be concerned only with Mrs. Camden’s health and not with controlling costs.
   2) be concerned with both Mrs. Camden’s health and saving money for the HMO.
   3) accept the gatekeeper role imposed by the HMO and provide expensive care only to patients who need it.
   4) always follow the practice guidelines of the HMO because they are designed to minimize health care costs.

25. How would Marcia Angell describe the rationing system used to make decisions about Mrs. Camden’s care?
   1) an open system guided by medical needs
   2) a closed system guided by medical needs
   3) an open system guided by the goal of saving the company’s money
   4) a closed system guided by the goal of saving the company’s money.

26. How would Marcia Angell view the role of scarce resources in deciding Mrs. Camden’s health care?
   1) There is no problem of scarce resource funding in the U.S.
   2) The problem of funding scarce resources is central to the case.
   3) Money is fairly important, but less so than Mrs. Camden’s well-being.
   4) Money is fairly important, but less so than Dr. Jackson’s medical judgment.
1.(IB)

*1) This is what Kant means when he says to treat something as an end in itself.
2) Kant says we should do the opposite of this.
3) Kant does not consider this in determining what we should do.
4) According to Kant, persons should never be treated as means only.

2.(IE2d)

1) This is consistent with distribution according to effort if the average plumber exerts more effort than the average physician.
2) This is consistent with distribution according to effort if some plumbers exert more effort than some other plumbers exert.
*3) This would be inconsistent with distribution according to effort because it provides greater rewards for less effort.
4) All things being equal, this would be consistent with distribution on the pattern of effort because it rewards people who work more years than people who work fewer years.

3.(IF)

1) This physician is described as having only non-moral virtues of skill and proficiency. He lacks moral virtues desirable in a physician.
2) Although possibly vague, there are distinct differences between moral and non-moral virtues based on living a good life, or the practical aspects of living.
*3) This physician has non-moral virtues (skill and proficiency), not moral virtues.
4) There is no problem in identifying either the physician’s skill or his motives for practicing medicine.

4.(IIB)

1) The reasonable person standard does not depend on the level of information desired by the patient.
2) Though some distressed patients may be fully reasonable, the standard assumes they are all reasonable enough to want enough information to make a good decision about their therapy.
3) Even if all patients are judged by the same standard of reasonableness, they may be allowed the autonomy or freedom to make independent decisions about appropriate therapy. This is not a disadvantage of the standard.
*4) Since this standard encourages physicians to cite all risks and benefits of every alternative procedure, physicians have difficulty knowing if the information is complete.
5.(IID)

*1) Autonomy can be sacrificed where the patient does not understand all the facts.

2) The patient, in not understanding the treatment or not believing she is ill, may have mental difficulties and could therefore be placed into counseling or referred for psychiatric assessment.

3) As an adult capable of making decisions and understanding consequences, the patient can legitimately refuse treatment on religious grounds.

4) Although this situation is unfortunate, the patient may still reject treatment and even be denied treatment if he has no insurance.

6.(IIG)

*1) The majority ruling would create distrust between therapist and patient, and discourage disclosure by the patient.

2) The argument was just the opposite. It was felt that reporting patients considered to be a danger would discourage them and others from continuing treatment and being totally open with the therapist, a condition necessary for adequate treatment.

3) There is no way of knowing if the therapist would be in danger.

4) This was not the argument regarding alliance. The question involved confidentiality between therapist and patient.

7.(IIA4a)

1) This is a goal of negative eugenics.

*2) Increasing the number of favorables in the human population is the goal of positive eugenics.

3) Negative eugenics is concerned with hereditary diseases resulting from parents who both possess the same recessive gene.

4) This characterizes natural selection. Positive eugenics requires exerting some control over reproduction in order to increase the gene traits that a society values.

8.(IIIB1)

*1) Thomson's analogy is “probably conclusive” when applied to the extreme case of pregnancy resulting from rape.

2) Thomson's analogy is not useful with respect to pregnancies resulting from carelessness.

3) Thomson's analogy is not useful with respect to pregnancies resulting from contraceptive failure.

4) Thomson's analogy is not useful with respect to intentional pregnancies in which the woman changes her mind.

9.(IIIB2)

1) This is artificial insemination (donor)(AID).

*2) AIH involves using sperm from the male partner for insemination.

3) This is artificial insemination (donor)(AID).

4) This is artificial insemination (confused)(CAI).

10.(IIIC2b)

1) Removing something is not active euthanasia.

2) Euthanasia is not voluntary if patient is incompetent.

3) Active euthanasia is doing something positive to hasten death; withdrawing support is passive euthanasia.

*4) Passive indicates withdrawing; it is nonvoluntary if the patient is incompetent.

11.(IIIC3)

1) Facilitating death is not a kind of healing.

2) Dying is usually not necessary to avoid pain.

*3) Having a right to decide when to die supports a practice of helping people die when they choose.

4) One can have a good doctor/patient relationship without it involving physician-assisted suicide.

*correct answer
12.(IIIC6)  
1) This was the basis of the Roe v. Wade abortion decision.  
2) There was no such legal document.  
3) The court considered evidence of what Cruzan's wishes would have been if she were competent.  
4) This did not determine the court’s decision.  

13.(IVC3)  
1) This is a legal requirement, not a moral argument.  
2) Because a doctor might be mistaken about her or his diagnosis does not necessarily mean that the doctor should never take a moral action on the basis of a diagnosis.  
3) This response appeals to a moral attitude of respect for others and justifies complete confidentiality on moral grounds.  
4) This is not true, nor does it provide a moral justification for strict confidentiality. Doctors might have other reasons for not revealing medical status.  

14.(IVC2)  
1) Poverty is not the primary reason for refusal by these patients.  
2) Asian Americans/Pacific Islanders are as likely as anyone to perceive a need for treatment.  
3) Beliefs and customs of individuals from Asian or Pacific Island backgrounds are highly diverse and may conflict with Western medicine.  
4) This is not a major reason for refusal by these patients.  

15.(IVE2)  
1) Justice is not central to the conflict; it does not focus on whether access is equal or whether everyone is subject to the same requirements.  
2) See 1).  
3) This omits respect for autonomy, which is central to the conflict. Autonomous individuals are entitled to choose treatments that involve risk or whose effectiveness is not established.  
4) The FDA's regulations are to promote patients’ well-being. They act on the principle of beneficence. As autonomous individuals, patients are entitled to choose treatments that involve risk or whose effectiveness is not established.  

16.(VA1)  
1) The value of living things is not a function of what goods or ills they bring others.  
2) The value of living things is not just a function of how they might be used.  
3) The value of living things is primitive, basic, and based on their internal essence.  
4) The value of living things doesn’t depend on any particular capacities they have.  

17.(VA1)  
1) Because the uni-criterial approach lacks explanatory power in hard moral cases, it may not be especially believable.  
2) Though the uni-criterial approach is conceptually simple, its power to explain what to do in morally complicated situations may be limited by its simplicity.  
3) The uni-criterial approach to moral status provides the consistent application of one single moral principle, which makes it easy to state and easy to understand.  
4) The uni-criterial approach may be so general that it is unclear how to apply it in the hard cases.  

*correct answer
18.(VB1)

*1) Most Western ethical theories are anthropocentric, with no justification given for that focus. Many defenders of animal rights claim this lack of justification shows a preference for humans and is prejudicial.

2) Biocentric focus de-emphasizes human focus.

3) Ecocentric focus de-emphasizes human focus.

4) Some versions of utilitarianism are anthropocentric but some are not.

19.(VB3b)

*1) Science alone cannot establish normative conclusions. We cannot derive values from facts nor an ought from an is.

2) Plants and animals have intrinsic value and instrumental value for humans.

3) This is a core belief of Deep Ecology.

4) Radical fundamental changes in attitudes, values, and beliefs are needed to avert an environmental crisis.

20.(VB5)

1) Bookchin does not assert that there is a necessary causal connection between social domination and the domination of nature.

*2) This belief would undermine Bookchin's theory.

3) Bookchin accepts this claim because he believes that there is historical connection between social hierarchies and the idea of dominating nature.

4) This supports, not contradicts, Bookchin’s theory.

21.(VC1a)

*1) Descartes holds that reality is divisible into minds and bodies. Since non-humans are in the realm of bodies, they are little more than machines. To have moral standing, one must be or possess a mind.

2) Potentiality can be used, but this is not what Descartes saw as the main criterion.

3) Self-awareness may be a subset of consciousness, but Descartes was not specific about its relevance to moral standing.

4) Singer argues that sentience is the major criterion for moral standing.

22.(VC3)

1) Classical free market economics advocates competitive open markets.

2) Economic equity would help ensure equal access to scarce resources, but classical free market economists believe that markets alone can achieve efficient allocation of scarce resources.

3) Utilitarianism is useful for decision making, but not to guide choices for classical free market economics.

*4) According to classical free market economics, competitive, open, and free markets alone, with minimal governmental regulations to prevent fraud and coercion, can achieve the most efficient allocation of scarce resources.

23.(VB1)

1) Statutory rights are explicitly recognized in law. US law does not recognize a statutory right to health care other than emergency care.

2) Legal rights are statutory rights. The US does not give citizens a legal right to health care other than emergency care.

*3) If Mrs. Camden has a right to medical care, it is a moral right derived from the principles of a moral theory.

4) Political rights are required by political commitments or principles. It is unclear that a political right to health care exists in the U.S.
24. (IVB1)

1) Angell would say that doctors should follow a patient-centered ethic that does not involve making rationing decisions. Cost-cutting decisions should be made by others.

2) This “double agent” role is described by Angell as ethically troubling.

3) Angell provides five arguments against giving this responsibility to doctors.

4) Focusing on following the HMO’s rules gives too little emphasis to the patient’s well-being.

25. (IVB1)

1) Managed care systems are open, because resources withheld from patients may not be used to care for other patients and they are not guided by the patient’s medical needs. Managed care systems often withhold needed care.

2) Managed care systems are not closed, because resources withheld from patients may not be used to care for other patients. Nor are decisions guided by the patient’s medical needs; managed care systems often withhold needed care.

3) Managed care systems are open, because resources withheld from one patient may not be used to care for other patients. They are also guided by the goal of saving the company’s money.

4) Managed care systems are guided by the goal of saving the company’s money. However, managed care systems are not closed, because resources withheld from patients may not be used to care for other patients.

26. (IVB1)

1) Angell would say that America’s health care system has ample money, but uses it very inefficiently.

2) Angell would say that the problem is with waste and inefficiency, not scarce funding.

3) Concern for the patient’s well-being is not responsible for denying Mrs. Camden another night in the hospital.

4) The doctor’s medical judgment is not responsible for denying Mrs. Camden another night in the hospital.
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