

**Role Play – Informed Consent**

Mr. Smith is 75 years of age, fragile but alert and competent. He is a multi-year survivor of prostate cancer and, after a few months of feeling poorly, just completed diagnostic tests that showed the cancer has returned, metastasized to his lungs, liver, and femur and is beyond curable treatment. Dr. Sikorski, the current oncologist, has not cared for Mr. Smith previously. Mr. Smith's only child, Chris, corners Dr. Sikorski outside of the patient's room. He asks if the results are back yet, and when Dr. Sikorski says yes, she is stunned by his response:

*If it is bad news, do not tell him the cancer has returned. Please refer him back to his family physician. He and I agree that the news will destroy him; in fact, the doctor kept his own mother's diagnosis of cancer from her as long as he could in order to strengthen her will to live and not destroy hope. We plan to tell my father that the symptoms are due to something else that is treatable.*

Mr. Smith's son asked Dr. Sikorski to play an essential role in a plan to deceive the patient. Apparently the family physician has been a key collaborator in this plan which may have been going on for a while. If Dr. Sikorski and the care team follow Chris' request, the truth of Mr. Smith's health condition would be withheld and he would be denied adequate information for informed consent about his future treatment.