



# Conflicts of Conscience in Health Care: An Institutional Compromise (Basic Bioethics)

*Holly Fernandez Lynch*

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Physicians in the United States who refuse to perform a variety of legally permissible medical services because of their own moral objections are often protected by "conscience clauses." These laws, on the books in nearly every state since the legalization of abortion by *Roe v. Wade*, shield physicians and other health professionals from such potential consequences of refusal as liability and dismissal. While some praise conscience clauses as protecting important freedoms, opponents, concerned with patient access to care, argue that professional refusals should be tolerated only when they are based on valid medical grounds. In *Conflicts of Conscience in Health Care*, Holly Fernandez Lynch finds a way around the polarizing rhetoric associated with this issue by proposing a compromise that protects both a patient's access to care and a physician's ability to refuse. This focus on compromise is crucial, as new uses of medical technology expand the controversy beyond abortion and contraception to reach an increasing number of doctors and patients. Lynch argues that doctor-patient matching on the basis of personal moral values would eliminate, or at least minimize, many conflicts of conscience, and suggests that state licensing boards facilitate this goal. Licensing boards would be responsible for balancing the interests of doctors and patients by ensuring a sufficient number of willing physicians such that no physician's refusal leaves a patient entirely without access to desired medical services. This proposed solution, Lynch argues, accommodates patients' freedoms while leaving important room in the profession for individuals who find some of the capabilities of medical technology to be ethically objectionable.

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