

The Justice of Withholding Medical Student and Resident Education Regarding Contraceptive Techniques at Catholic Health Sponsored Hospitals and Implications for Rural General Surgeons



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PUBLISHED ABSTRACT

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ABSTRACT

General surgical training for a rural area often focuses on many procedures outside the traditional scope of general surgery as there is typically a larger geographic distance to the nearest specialty surgeon. Currently there is one general surgery residency in Minnesota with a specific training track for rural general surgery; this program requires residents to spend 2 years in Duluth, part of which is at a catholic sponsored institution. Unfortunately, in catholic sponsored institutions, under normal circumstances, surgeons are not allowed to perform vasectomies as a means of contraception per the Ethical and Religious Directives for Catholic Health Care Services [1, 2]. Often, if general surgeons are not trained on a specific procedure, they will not perform this procedure as part of their practice. I believe each of the four ethical principles could be explored, but the one this article will focus on is justice. At its most basic definition justice can be described as fairness if medical decision making, but on a deeper level can be considered the equal distribution of resources or treatment [3]. The application of the principle of justice is important to a rural area because if our rural general surgeons are not being trained to perform these procedures, the procedure may not be performed at all within a large geographical area. This would require patients to either travel significant distances to attain this procedure or, if they are unable to travel, forgo the procedure entirely. Training physicians and surgeons for rural America ought to include training to equip him or her to confidently practice to the full extent of his or her education. Lack of training on a specific procedure, especially one allowing a patient to control reproductive rights, ultimately unjustly distributes medical treatment and does not allow this population the same rights/privileges afforded to those with easier access to medical care. In order for medical treatment to be delivered justly to a rural population, rural-focused general surgery residencies should train surgeons for a broad scope to meet the needs of their unique patient population which will ultimately best serve the patients in their care.

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COMPETING INTERESTS

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2

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