OVERVIEW
This case involves a clinical encounter with a pregnant patient who finds out she has stage 2 cervical cancer. The patient is accompanied by her husband. Multiple religious, ethical and cultural issues underlie this scene so the case is relevant for use in undergraduate and graduate medical education. The video highlights a situation involving a pregnant patient asking for cancer treatment options but is presented to allow faculty the opportunity to discuss other issues not uncommon to the reproductive clinic. This video also allows future healthcare providers to address ethical dilemmas, such as caring for a pregnant patient needing medical treatment for cancer. The physician’s handling of the situation is also portrayed to allow discussion of professionally managing patient encounters and not as a model to follow. Students need to be conscious of how to professionally handle these sensitive situations so we encourage faculty to view this facilitator guide as suggestive but not all encompassing.

Learning Objectives
At the end of the session, the student should be able to:

1. Recognize how quality patient care can create decision dilemmas during pregnancy.
2. Discuss the healthcare team’s role in a patient’s decision-making process.
3. Discuss the role of empathetic counseling in the reproduction clinic.
4. Describe how religion and culture impact patient counseling.

Facts to Initiate Discussion

- The most common gynecological cancer diagnosed in pregnant women is cervical cancer (Bas, Bak and Roszkowski, 2015; Han, Gziri, van Calsteren and Amant, 2013).

Critical Points (Every Student Needs to Hear)

- Cancer treatment during pregnancy depends on the decision to maintain or terminate the pregnancy, gestational age and cancer stage (Bas, et al, 2015).
- The physician needs to clearly communicate to the patient that any type of treatment for cancer during pregnancy is experimental (Han, et al, 2013).
- When asked, “Doctor what would you do?” physicians tend to focus their reply on medical information (Edmonds, McKenzie, Panoch, Wocial, Barnato and Frankel, 2015).
- When asked, “Doctor what would you do?” physicians can ask the patient about their values, concerns, and preferences so decisions about their medical treatment are consistent with their goals (Edmonds, et al, 2015).

Background Information

- Cervical cancer involves the uterus, making it the most challenging cancer type to treat during pregnancy (Han, et al, 2013).
- The patient should be referred to a team of medical specialists with practice in treating cancer during pregnancy (Han, et al, 2013). The team should include a gynecological oncologist, medical oncologist, radiologist, radiotherapist, perinatologist, and neonatologist.

Questions to Ask

- What is the primary concern in the video?
- What information is important to communicate to the couple?
- Will counseling differ if she and her husband are Roman Catholic or Evangelical Christians or Muslims? Hispanic? Chinese? Latino, Caucasian, or African-American? Wealthy or impoverished?
Questions to Ask

- Would it be ethical to treat the patient for cancer without aborting the fetus? Could a physician refuse to provide this treatment plan?
- What should the clinician in the video do next?

Concluding the Session

- A patient’s long-term health is a healthcare provider’s primary concern. Accurate information should be clearly communicated in an empathic manner on all options in their medical treatment. The patient’s attitudes, fears and preferences should align with their treatment.