

Spring 2018

Ethical Issues and Consequences as Portrayed by Medical Dramas: An Analysis of the Effect of Cultivation Theory

Molly Johnson
mmj40@zips.uakron.edu

Please take a moment to share how this work helps you [through this survey](#). Your feedback will be important as we plan further development of our repository.

Follow this and additional works at: http://ideaexchange.uakron.edu/honors_research_projects

 Part of the [Mass Communication Commons](#), and the [Social Psychology Commons](#)

Recommended Citation

Johnson, Molly, "Ethical Issues and Consequences as Portrayed by Medical Dramas: An Analysis of the Effect of Cultivation Theory" (2018). *Honors Research Projects*. 633.

http://ideaexchange.uakron.edu/honors_research_projects/633

This Honors Research Project is brought to you for free and open access by The Dr. Gary B. and Pamela S. Williams Honors College at IdeaExchange@UAkron, the institutional repository of The University of Akron in Akron, Ohio, USA. It has been accepted for inclusion in Honors Research Projects by an authorized administrator of IdeaExchange@UAkron. For more information, please contact mjon@uakron.edu, uapress@uakron.edu.

Ethical Issues and Consequences as Portrayed by Medical Dramas:

An Analysis of the Effect of Cultivation Theory

Molly Johnson

Honors Research Project - Psychology

Spring 2018

Advisor: Dr. Kevin Kaut

Abstract

Television medical dramas, like American Broadcasting Company's Grey's Anatomy, strive to make the program as accurate as possible while creating a dramatic and entertaining program.

Grey's Anatomy, since the first episode in 2005, has employed medical consultants to help write episodes in order to make the television program as realistic as possible (Otto, 2014).

Although there are some realistic aspects of Grey's Anatomy, as a whole it is a fictional medical drama with plotlines and characters used for entertainment purposes only. However, previous research shows that fictional programs can still have an effect on its viewers. Cultivation Theory states that television has a long-term effect on its viewer's perceptions about their own social reality (Potter, 2014). This implies that the hospital experience shown on Grey's Anatomy can shape the viewers perception of real-life hospital experiences. This paper includes an analysis of ethical issues that occur in the hospital of ABC's Grey's Anatomy and the results of a survey on the ethical implications that Grey's Anatomy cultivates in its viewers.

Ethical Issues and Consequences as Portrayed by Medical Dramas:
An Analysis of the Effect of Cultivation Theory

When medical dramas first began airing mid-twentieth century, the American Medical Association (AMA) was given control over the medical and ethical aspects of the programs. The AMA was able to control how doctors were portrayed and ensured that television doctors made no mistakes. Although the AMA attempted to make the medical dramas more realistic, they were willing to sacrifice authenticity for the portrayal of doctors as perfect people. Television networks allowed their doctors to be controlled by the AMA in order to have the AMA's approval of the medical aspects of the show. However, the AMA only held control of the medical aspects and the portrayal of doctors for a short period of time once new shows began airing without the AMA seal of approval (Katz & Wright, 2005). The television show *M*A*S*H*, although set on the front lines of a war instead of in a hospital, became popular with its focus on the doctor's lives and followed their mistakes instead of keeping the program's focus on the patient as the AMA had previously insisted (Dishell, 2003). After the sudden popularity of *M*A*S*H*, medical dramas continued to focus on the lives of the doctors and the AMA lost control of the portrayal of doctors as perfect people (Katz & Wright, 2005).

The networks, producers, and writers of medical dramas did not completely sacrifice medical accuracy when they refused to follow AMA standards. Instead, they hired nurses and medical consultants to ensure that their programs were as medically and ethically accurate as possible; however, advice from medical consultants is sometimes ignored, resulting in shows not always being as accurate as the consultants hope for. *Grey's Anatomy*, since the premiere, has multiple medical consultants employed that are involved in the writing of all medical

procedures on the show (Otto, 2014). Grey's Anatomy is, however, a medical drama and sometimes the writers and producers are willing to sacrifice an accurate medical and ethical portrayals on the show in order to play up the drama and increase ratings. Grey's Anatomy is a fictional show and has never claimed to be a completely accurate portrayal of the medical experience, meaning the show has done nothing technically wrong by occasionally being inaccurate. However, multiple studies have been done to prove that Grey's Anatomy has an effect on its viewers and their perception of the medical experience.

Portraying medical doctors as flawed human beings who make mistakes can have positive effects on people's perceptions about the hospital experience. People could expect to relate to doctors more and may find it easier to talk to doctors about difficult topics based on doctor-patient relationships and communication portrayed on medical dramas (Aboud, 2012). However, medical dramas that show the mistakes of doctors can create a negative opinion towards doctors and the amount of trust that patient is willing to have towards hospital experiences. Therefore, it is important for the medical dramas to portray mistakes and their consequences as accurately as possible whenever possible. Grey's Anatomy provides both positive and negative examples of patient-doctor relationships and mostly accurate depictions of medical procedures. However, Grey's Anatomy does not succeed in accurately portraying the way that ethical situations and issues are handled in the hospital. Both minor and major ethical issues are treated as unimportant and doctors that break ethical and legal rules are given insignificant consequences. This could be harmful to the viewer's perception of the hospital because it implies that real life doctors do not have to abide by the rules as long as the result of breaking the rules is worth it in the end (Czarny, Faden, Nolan, Bodensiek, & Sugarman, 2008).

Patients then learn to develop a distrust in doctors and possibly a fear of entering hospitals because there are no consequences for going against the patient's wishes. The doctors on Grey's Anatomy have been guilty of some of the most unforgivable medical crimes, yet they are never punished more than a few days of suspension.

In the first episode of Grey's Anatomy (2005 - current), the interns sit in multiple locations of the hospital and discuss the cases and patients they are working on that day. They share facts about their patients and the procedures that they were able to perform that day. The doctors share the names of their patients, their diagnoses, and the course for treatment; sometimes they even joke about their patients or tell personal stories about them. There are more than 300 episodes of Grey's Anatomy and this legal issue is in every single episode. Each episode doctors share unnecessary information about their own patients and the patients of other doctors. In season one, episode six, a doctor makes fun of a patient's record breaking tumor and is removed from the case. However, he is not removed from the case as a punishment from the hospital for talking about his patient in a negative way with other doctors, but instead he is removed from the case by the patient herself after she overheard him speaking about her. The doctor faces no repercussions for his actions from the hospital, similar to how the doctors who converse about their patients to everyone never face punishment for disclosing confidential patient information. In reality, there is an entire law that ensures privacy for patients and their medical information, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) (United States, 2004). Doctors, according to HIPAA, are required to keep information about the patient, diagnosis, and treatment private unless given written permission from the patient to disclose the information. If HIPAA is violated, and a patient's information is

not being protected, there are multiple fines that are assessed depending on the type of violation. If HIPPA is unknowingly violated the fine is \$100 per violation. If HIPPA is knowingly neglected and not corrected within the required period of time the fine is assessed at \$50,000 per violation (American Medical Association, 2018). Every doctor on Grey's Anatomy has shared unnecessary information about their patients, violating HIPPA, and resulting in what should be at least a \$100 fine every time a doctor discusses unnecessary information about a patient. However, breaking HIPPA is a common occurrence in medical dramas and doctors on Grey's Anatomy have never been shown paying a fine for their violations. Although this may seem like a minor ethical violation that has no impact on the viewers, every time a doctor shares information or laughs about a diagnosis, they are cultivating the idea in viewers that their medical information is not sensitive or private. This could lead to a distrust in doctors and cause some patients to not disclose necessary information to their doctors. If people believe that the doctors on Grey's Anatomy are realistic portrayals of actual doctors, then there is no reason to believe that there is any punishment stopping any doctor from sharing a patient's private information.

Throughout the series, we learn that Doctor Meredith Grey's mother suffers from early onset Alzheimer's Disease. This is what drives Meredith's husband, Dr. Shepherd, to begin a clinical study throughout season seven on rapidly progressive Alzheimer's disease where patients are blindly given either an experimental drug or a placebo drug during treatment. Meredith is working on the clinical study with Dr. Shepherd, but she is temporarily removed after it is revealed that she tampered with the trial. The wife of the Chief of Surgery was accepted to be a participant in the trial and Meredith switched the drugs to ensure that his wife

would receive the treatment instead of the placebo. Meredith is caught, questioned, and found guilty of tampering with the clinical trial, which causes the chief to immediately tell her she will lose her job. After further questioning, the chief learns that Meredith tampered with the results to help his wife, which he pressured her into doing. The chief then decides not to fire her but that he will suspend her for a few days so that it does not look like he completely allowed her to tamper with the clinical trial. Messing with a clinical trial is completely unethical and considered a criminal act by the entire world (Gupta, 2013). If Grey's Anatomy showed the accurate punishment for this ethical issue, Meredith would have been immediately suspended, the national organization in charge of the clinical trial would have been notified, and Meredith's actions would have been thoroughly investigated. Considering she openly admitted to rigging the trial, Meredith would have been found guilty by the Institutional Review Board. This would have meant she would immediately lose her job at the hospital as the Chief of Surgery originally threatened, and she could possibly have even been sentenced to jail time (Gupta, 2013). The average viewer of Grey's Anatomy may never be given the chance to participate in a medical study; however, this does not mean that the affect that this inaccurate portrayal of clinical trials is not important for people who do not know how exactly clinical trials work. If a person does not know the different levels of security that exist to prevent bias during the trial, they may believe that rigging a clinical trial is as simple as it appears to be in Grey's Anatomy. This could lead to people refusing to participate in clinical trials, due to a fear of their medical care and treatment being manipulated in unethical ways.

Another situation that Grey's Anatomy inaccurately depicts is how often doctors are willing to go against the wishes of patients and their families in order to gain medical

experience. In season one, episode four, Dr. Cristina Yang forms a connection with a patient who has opted to not be brought back to life if she begins to “crash” or her heart stops, this is called a do not resuscitate (DNR) patient. When her patient begins to crash, Dr. Yang immediately begins to perform CPR and calls a code blue, meaning that a crash cart is brought in to attempt to save the patient’s life. However, when the crash cart arrives, they note that the patient is DNR and tell Dr. Yang to stop CPR and call the time of death. It takes multiple doctors to convince Dr. Yang to stop performing CPR even though she knew that the patient was DNR. Doctors are trained to abide by the patient’s wishes, even if their wish is to allow a natural death. Legally, *Grey’s Anatomy* portrayed ignoring DNRs correctly, there is no law stopping doctors from ignoring DNR forms; however, a patient’s family could possibly sue doctors for causing more damage to the family’s emotional, physical, mental, and financial well-being (Saitta & Hodge, 2013). Although there is nothing wrong with the portrayal of DNR patients on *Grey’s Anatomy*, viewing a doctor ignoring a DNR could lead a patient to believe that their own ideas for their medical care are not important or taken into consideration by the doctors. This could create fear towards doctors or create situations where patients do not feel comfortable admitting their own wishes to their doctors.

A second example of a *Grey’s Anatomy* doctor not abiding by what the patient and family wants is when Dr. Miranda Bailey operates on a pediatric patient without the parent’s permission. Child consent laws are different in each state, but typically a child cannot give consent about their medical procedure and instead requires the legal parent or guardian to give consent (Minor Consent to Medical Treatment Laws, 2013). In episode 23, season 10, Dr. Bailey reveals that she performed a stem cell transplant on a child patient who has Severe Combined

Immunodeficiency (SCID), which has forced him to live alone inside of a bubble. The treatment saved the boy's life and allowed him to live his life outside of his bubble; however, this was against his parents' wishes. When Dr. Bailey tells the hospital board, they applaud her because the treatment worked, but when the parents find out that Dr. Bailey went against their wishes they decide to take legal action. The family files assault and battery charges against Dr. Bailey who believes she has not made a mistake because the treatment helped the child get better. By the end of the episode the parents realize that the treatment helped their child live freely and drop all charges against Dr. Bailey. The hospital does nothing else to punish Dr. Bailey for performing a surgery without the consent of the parents and the incident is never spoken of again. This is another example of how patients can lose trust in their doctors based on what they see and believe is true in medical dramas. If surgeons on television are able to perform surgeries without complete consent from the patient, parent, or guardian, then this could possibly also be true for real life doctors. Although the Minor Consent to Medical Treatment Laws (2013) legally requires consent from the patient, parent, or guardian, it could still mean that people who are unfamiliar with the law may believe that what the surgeons on television are able to do without consequences is how their real doctors act as well.

The majority of doctors, before finishing medical school, take an oath based on the ancient Hippocratic Oath. Typically, this is the Declaration of Geneva, which has a section where doctors pledge to respect human life and not use their knowledge to violate human rights (Declaration of Geneva, 2017). Doctors help people, which is why medical dramas use doctors who harm people as plot twists and ratings boosters. However, people who watch doctors on television cause harm, or possible harm, to patients without consequences could begin to

believe that doctors in real life have no consequences when they intentionally cause harm to patients.

Perhaps the biggest ethical dilemma in the 14 seasons of *Grey's Anatomy* occurs in season two. Surgical intern, Izzie Stevens, falls in love with heart transplant patient, Denny Duquette, which is an ethical issue in itself, who is on the United Network for Organ Sharing (UNOS) transplant list. However, Denny's condition is not currently at the top of the UNOS transplant list and he will most likely not receive a new heart in time. Izzie, temporarily forgetting that she took the Hippocratic Oath promising to do no harm as a doctor, cuts the Left Ventricular Assist Device (LVAD) wire, worsening his condition, but making him immediately become number one on the transplant list. Denny gets the heart he needs; however, he dies from a stroke the night after his surgery. Izzie is immediately suspended and is told that there will be severe consequences, but she quits before any consequences are given to her. However, Izzie is offered her job back in the next season as long as she stays on probation and does not touch any patients for a brief period of time. By the end of the season, Izzie is back in the hospital treating patients as if she did not deliberately cause harm to her patient. A real doctor who causes intentional harm to a patient would lose their medical license, face legal consequences, and never be offered their job back with only limited supervision. This can also cause people to distrust UNOS and its methodical system for assigning transplants. People who are lower on the transplant list may believe that people are ranked above them for unethical reasons and may attempt to commit medical fraud, similar to Izzie, in an attempt to reach a higher status on the list. They may also believe that, similar to *Grey's Anatomy*, there will be no consequences for their actions, which is untrue (Kelly Walla, 2006).

Another example of a Grey's Anatomy doctor causing possible harm to patients occurs during the very first episode of Grey's Anatomy. Dr. Preston Burke is an attending surgeon at Mercy West Hospital who each year selects one of the new surgical interns to scrub-in and perform a procedure during one of his surgeries that day. In this episode, Dr. Burke chooses intern George O'Malley to scrub-in even though George is not the most promising intern. During the surgery, Dr. Burke allows George to make the first cut on the patient and perform the appendectomy. He carefully watches over George's shoulder to ensure that everything is going well. However, when George breaks the strings for his purse-string suture and the patient begins to bleed out, he has no idea what to do and Dr. Burke does not intervene. Dr. Burke waits until the patient's blood pressure drops a significant amount before intervening. Interns in real life are not allowed to perform surgeries on their own and very rarely see the inside of an operating room; however, if one was allowed and was unsure of what to do, the attending doctor would immediately step in to ensure no harm was caused to the patient (Kirzner, 2014). So, although no harm was done to the patient, Dr. Burke's lack of assistance with the intern's first procedure could have ended differently. This happens in the first episode, meaning that any person who has begun to watch the series Grey's Anatomy, has seen an unprepared doctor perform a surgery for the first time without real assistance from his attending doctor. This could cause fear for a person who may then believe that untrained interns could be performing, or assisting, on surgeries for people in real life. It can also lead people to believe that attending doctors allow interns to make mistakes, without immediately correcting them until absolutely necessary. Real life doctors who have pledged to cause no harm to their patients would immediately step in after the blood pressure began to drop. The surgery was successful,

meaning that Dr. Burke had no consequences for his action of allowing an intern to perform a surgery on his own and also for not intervening sooner. If the patient had died there would have been consequences and both Dr. Burke and George could be in legal trouble for their actions during the surgery.

There have been studies done previously on the effect of cultivation theory and on the different effects Grey's Anatomy has on its viewers. One study by Weaver and Wilson (2011), looks at the effect that viewing medical dramas has on medical students' perception of professionalism, ethics, and realism. They found that medical students believe that medical and ethical issues are not portrayed well in medical dramas, and the students were able to critically analyze the show's portrayal of these issues. The current study aims to extend this research on the ethical aspect of Grey's Anatomy and the effect that it could have on all of its viewers, not just medical students.

Method

A modified form of Czarny et al.'s (2008) medical television drama survey, using the website SurveyMonkey.com, was shared on Facebook to friends, family, and strangers (see Appendix A). 183 responses were collected and the results of the 100 who answered yes to the question, "Do you watch the television program Grey's Anatomy" were analyzed. Unlike previous surveys, there was no age or education requirement to participate in the survey. The modifications to the survey removed questions that asked about nursing and other medical dramas and added questions specific to ethical issues in the program Grey's Anatomy mentioned earlier. The following reports the results of this survey.

Results

A total of 100 responses were collected. Of that 100, 75% were under the age of 40 (46% were under the age of 25). Eighty-four of the responders identify as female. 7.14% of participants watch the medical drama Grey's Anatomy every day, 22.45% watch a few times a week, 21.43% watch about once a week, 6.12% watch once a month, 25.51% watch less than once a month, and two of the participants chose not to answer the question. Of the participants who watched Grey's Anatomy every day, 100% identified as female. When asked if medical dramas accurately depict ethical issues in a clinical practice, 66.67% of participants reported "only sometimes". Ten percent of participants believe that medical dramas never handle ethics issues accurately. One person answered that medical dramas always depict medical television programs accurately. The same person also rated TV medical dramas as their most important source of information for medical issues. Eleven participants believe that none of the doctors handle ethical issues properly and Dr. Meredith Grey and Dr. Miranda Bailey both were each selected by 18 people as the doctor who best handles ethical issues. Question five investigates the perceived consequences for doctors in the hospital setting when they break ethical and legal rules (see Appendix B). Thirty-six percent of participants answered that there are no consequences for doctors willingly discussing a patient's case with friends and 48% of participants answered that there are no consequences for a doctor willingly discussing a patient's case with other doctors. Only 12% of participants believe that there are no consequences for doctors who violate a patient's DNR. The data shows that participants almost always gave the same consequences for doctors who tamper with the clinical trial procedures

and the clinical trial results. The only difference occurs in the amount of the monetary fine and the consequence of having their medical license revoked.

Discussion

The results of the study show that the participants were mostly females under the age of 40 (10% of participants were males under the age of 40) who watched the medical drama Grey's Anatomy once or a few times a week. Our results showed a correlation between the frequency Grey's Anatomy is watched and the accuracy portrayed by Grey's Anatomy's managing of ethical issues. Participants who report watching Grey's Anatomy more than once a week, were more likely to also report that they believed television programs only sometimes accurately depict ethical issues that arise in clinical practice. This may be due to the fact that these people may have viewed episodes of Grey's Anatomy more than once and are therefore able to accurately remember how ethical issues were handled in the program, which sometimes is authentic to real life laws and practices.

The current study suggests that viewing habits of Grey's Anatomy has a correlation with the understanding of when an issue is ethically inappropriate; however, there is little correlation with the knowledge of the correct punishment for ethically inappropriate situations. Over half of the participants believed that sharing patient information deserves a warning at the worst, or no consequences at all; however, sharing information is a violation of HIPPA and results in a fine of \$100 minimum per violation. Only 12% of participants correctly selected the option, "A monetary fine less than \$1,000" and of that 12%, 83.33% participants reported watching Grey's Anatomy less than a few times a month. The same was true for the 12% of participants who answered that doctors who violate a DNR will receive no consequences. When

asked how often participants watch Grey's Anatomy, 83.3% of those participants reported less than a few times a month. This is one of the ethical situations that Grey's Anatomy correctly depicts, yet it was the less frequent viewers of the medical drama who answered with the accurate consequence of violating a DNR. This could possibly be due to the belief that Grey's Anatomy only depicts ethical issues handled correctly sometimes, therefore the viewers might assume that Grey's Anatomy was depicting the DNR case inaccurately. More than 60% of viewers believe that a doctor's medical license would be revoked if they caused harm to a patient on purpose, caused the death of a patient, or tampered with a clinical trial in any way, even though these cases on Grey's Anatomy results in doctors receiving nothing more than a suspension. This study shows that Cultivation Theory may have an effect on Grey's Anatomy viewers when it involves smaller consequences, like a \$100 fine for violating HIPPA, but it does not seem to show an effect on the perception of how larger ethical issues are handled in the hospital, like knowingly causing unnecessary harm to a patient. This implies that viewers of Grey's Anatomy are able to distinguish that the program is a fictional drama and should not be compared to real life doctors and hospital experiences.

Limitations and Future Directions for Research

This study does have limitations that should be considered in future studies of Cultivation Theory and medical television dramas. First, the survey was created using a company with its own restrictions, allowing only 10 questions and 100 responses to be analyzed at a time. This limited the amount of responses that could be analyzed, which represented only a small portion of the viewers of Grey's Anatomy. Future studies should ensure that more responses from various locations are collected and analyzed in order to better represent the

population. Another limitation is that only responses from people who viewed Grey's Anatomy, therefore there was no control group to compare the ethical beliefs to. Future studies may want to include a question about whether or not the ethical situation has occurred on Grey's Anatomy and if the participants can recall what the consequence for the doctor was on the medical drama.

References

- About KA. (2012) Medical dramas – the pros and the cons. *Dermatology Practical & Conceptual*, 2(1):75-77. doi:10.5826/dpc.0201a14.
- American Medical Association. (2018). HIPAA violations & enforcements. Retrieved from <https://www.ama-assn.org/practice-management/hipaa-violations-enforcement>
- Czarny, M. J., Faden, R. R., Nolan, M. T., Bodensiek, E., & Sugarman, J. (2008). Medical and Nursing Students' Television Viewing Habits: Potential Implications for Bioethics. *The American Journal of Bioethics: AJOB*, 8(12), 1–8.
<http://doi.org/10.1080/15265160802559153>
- Declaration of Geneva* (1948). Adopted by the General Assembly of World Medical Association at Geneva Switzerland, September 1948.
- Dishell, W. (2003, November 18). "Walter Dishell interview part 3 of 6 – emmytvlegends.org" *Archive of American Television*. Interviewer Gary Rutkowski. Retrieved from <http://www.emmytvlegends.org/interviews/people/walter-dishell>
- Gupta, A. (2013). Fraud and misconduct in clinical research: A concern. *Perspectives in Clinical Research*, 4(2), 144–147. <http://doi.org/10.4103/2229-3485.111800>
- Katz, I., & Wright, A. (2005, September 26). Paging Dr. Welby: The medical sins of Grey's Anatomy. Retrieved from <http://www.slate.com/human-interest/2018/04/surviving-holidays-with-your-partners-ex-wife-in-this-weeks-dear-prudie-extra.html>
- Kelly Walla, JD. (2006). Fact and fiction in Oregon transplant waiting list fraud. Retrieved from [https://www.law.uh.edu/healthlaw/perspectives/2006/\(KW\)TransplantFraud.pdf](https://www.law.uh.edu/healthlaw/perspectives/2006/(KW)TransplantFraud.pdf)

- Kirzner, A. (2014, September 5). 'Grey's Anatomy' vs. real-life residency: You already know how this turns out. *The DO, American Osteopathic Association*. Retrieved from <https://thedo.osteopathic.org/2014/09/greys-anatomy-vs-real-life-residency/>
- Medical Consent to Medical Treatment Laws (updated 2013). Retrieved from [https://www.ndaa.org/pdf/Minor%20Consent%20to%20Medical%20Treatment%20\(2\).pdf](https://www.ndaa.org/pdf/Minor%20Consent%20to%20Medical%20Treatment%20(2).pdf)
- Otto, L. (2014). Scrubbing in on the small screen. *GW School of Medicine & Health Sciences*. Retrieved from <https://www.gwmedicinehealth.com/spring-2014/scrubbing-in-small-screen/>
- Potter, W.J. (2014). A critical analysis of cultivation theory. *Journal of Communication*, 74, 1015-1036. Doi:10.1111/jcom.12128
- Rhimes, S. (Producer). (2005). *Grey's Anatomy* [television series]. ABC Network. Los Feliz, California: Prospect Studios.
- Saitta, N. M. & Hodge, S. D. (2013). What are the consequences of disregarding a "do not resuscitate directive" in the United States? *Medical Law* 32(4), 441-58.
- United States. (2004). *The Health Insurance Portability and Accountability Act (HIPAA)*. Washington, D.C.: U.S. Dept. of Labor, Employee Benefits Security Administration.
- Weaver, R., & Wilson, I. (2011). Australian medical students' perceptions of professionalism and ethics in medical television programs. *BMC medical education*, 11(1), 50.

Appendix A.

Survey

This survey is a modified form of Czarny et al.'s (2011) Medical Television Drama Survey. It is intended to gather information about the ethical implications that are caused by medical television programs. Questions relate to demographic information, medical drama television program viewing habits, and consequences of ethical issues presented. The survey takes less than 10 minutes to complete and your responses are anonymous.

By clicking 'okay' and moving to the next page, you are agreeing to participate in this survey. You have the option to exit the survey at any time with consequences. Questions can be directed towards Molly Johnson at mmj40@zips.uakron.edu.

Question 1: What is your age?

18 – 25 / 26 – 40 / 41 - 60 / 61+

Question 2: What is your sex?

Female / Male / other / prefer not to specify

Question 3: How often do you watch the medical drama "Grey's Anatomy"

Every day / A few times a week / About once a week / A few times a month / Once a month / Less than once a month

Question 4: Do you think that television programs accurately depict ethical issues that arise in clinical practice?

Always / Usually / Sometimes / Rarely / Never

Question 5: What do you believe is the accurate consequence of the following actions when performed by doctors in a professional, hospital setting:

A doctor willingly discusses a patient's case with a friend over lunch: No consequences / A warning / Suspension for a brief period of time / Suspension for a long period of time / A monetary fine less than \$1,000 / A monetary fine between \$1,000 and \$25,000 / A monetary fine between \$26,000 and \$50,000 / Legal Action from patient/family / Fired from position / Removal of medical license / Jail

A doctor willingly discusses a patient's case with a friend over lunch: No consequences / A warning / Suspension for a brief period of time / Suspension for a long period of time / A monetary fine less than \$1,000 / A monetary fine between \$1,000 and \$25,000 / A monetary fine between \$26,000 and \$50,000 / Legal Action from patient/family / Fired from position / Removal of medical license / Jail

A doctor causes harm to a patient (not resulting in death): No consequences / A warning / Suspension for a brief period of time / Suspension for a long period of time / A monetary fine less than \$1,000 / A monetary fine between \$1,000 and \$25,000 / A monetary fine between \$26,000 and \$50,000 / Legal Action from patient/family / Fired from position / Removal of medical license / Jail

A doctor causes harm to a patient (resulting in death): No consequences / A warning / Suspension for a brief period of time / Suspension for a long period of time / A monetary fine less than \$1,000 / A monetary fine between \$1,000 and \$25,000 / A monetary fine between \$26,000 and \$50,000 / Legal Action from patient/family / Fired from position / Removal of medical license / Jail

A doctor does not intervene when an intern is unsure of what to do during a procedure: No consequences / A warning / Suspension for a brief period of time / Suspension for a long period of time / A monetary fine less than \$1,000 / A monetary fine between \$1,000 and \$25,000 / A monetary fine between \$26,000 and \$50,000 / Legal Action from patient/family / Fired from position / Removal of medical license / Jail

A doctor performs a surgery on a child without legal consent of a parent or guardian: No consequences / A warning / Suspension for a brief period of time / Suspension for a long period of time / A monetary fine less than \$1,000 / A monetary fine between \$1,000 and \$25,000 / A monetary fine between \$26,000 and \$50,000 / Legal Action from patient/family / Fired from position / Removal of medical license / Jail

A doctor resuscitates a patient who is DNR (do not resuscitate): No consequences / A warning / Suspension for a brief period of time / Suspension for a long period of time / A monetary fine less than \$1,000 / A monetary fine between \$1,000 and \$25,000 / A monetary fine between \$26,000 and \$50,000 / Legal Action from patient/family / Fired from position / Removal of medical license / Jail

A doctor tampers with the procedures of a clinical trial: No consequences / A warning / Suspension for a brief period of time / Suspension for a long period of time / A monetary fine less than \$1,000 / A monetary fine between \$1,000 and \$25,000 / A monetary fine between \$26,000 and \$50,000 / Legal Action from patient/family / Fired from position / Removal of medical license / Jail

A doctor tampers with the results of a clinical trial: No consequences / A warning / Suspension for a brief period of time / Suspension for a long period of time / A monetary fine

less than \$1,000 / A monetary fine between \$1,000 and \$25,000 / A monetary fine between \$26,000 and \$50,000 / Legal Action from patient/family / Fired from position / Removal of medical license / Jail

Question 6: Which character on Grey's Anatomy, in your opinion, responds properly to ethical issues that arise?

Meredith Grey / Cristina Yang / Miranda Bailey / Derek Shepherd / Alex Karev / George O'Malley / Izzie Stevens / Preston Burke

Question 7: Please rank the following choices from 1 to 10 in terms of their importance in informing you about ethical issues: (1 being the most important, 10 being the least important)

Clergy / Family / Friends / Popular magazines / Medical or nursing school / Newspapers / Religious values / Scholarly journals / TV medical dramas / TV news

Appendix B.

Consequences of Ethical Issues Performed by Doctors in the Professional Hospital Setting

	NO CONSEQUENCES	A WARNING	SUSPENSION FOR A BRIEF PERIOD OF TIME	SUSPENSION FOR A LONG PERIOD OF TIME	A MONETARY FINE LESS THAN \$1,000	A MONETARY FINE BETWEEN \$1,000 AND \$25,000	A MONETARY FINE BETWEEN \$26,000 AND \$50,000	LEGAL ACTION FROM PATIENT/FAMILY	FIRED FROM POSITION	REMOVAL OF MEDICAL LICENSE	JAIL
A doctor willingly discusses a patient's case with a friend over lunch.	36.0%	40.0%	8.0%	0.0%	12.0%	4.0%	0.0%	4.0%	0.0%	0.0%	0.0%
A doctor willingly discusses a patient's case with other doctors over lunch.	48.0%	36.0%	0.0%	0.0%	12.0%	0.0%	0.0%	4.0%	0.0%	0.0%	0.0%
A doctor intentionally causes harm to a patient (not resulting in death)	0.0%	0.0%	16.0%	28.0%	4.0%	44.0%	20.0%	60.0%	32.0%	24.0%	4.0%
A doctor intentionally causes harm to a patient (resulting in death)	0.0%	0.0%	0.0%	4.0%	0.0%	0.0%	72.0%	76.0%	80.0%	60.0%	32.0%
A doctor does not intervene when an intern is unsure of what to do during a procedure.	12.0%	28.0%	36.0%	12.0%	16.0%	8.0%	0.0%	40.0%	20.0%	4.0%	0.0%
A doctor performs a surgery on a child without legal consent of a parent or guardian	0.0%	0.0%	8.0%	20.0%	8.0%	24.0%	28.0%	100.0%	32.0%	16.0%	0.0%
A doctor resuscitates a patient who is DNR (do not resuscitate)	12.0%	12.0%	24.0%	16.0%	24.0%	4.0%	8.0%	48.0%	4.0%	12.0%	4.0%
A doctor tampers with the procedures of a clinical trial	0.0%	0.0%	0.0%	0.0%	4.0%	16.0%	16.0%	8.0%	68.0%	88.0%	32.0%
A doctor tampers with the results of a clinical trial	0.0%	0.0%	0.0%	0.0%	0.0%	24.0%	16.0%	8.0%	68.0%	84.0%	32.0%