

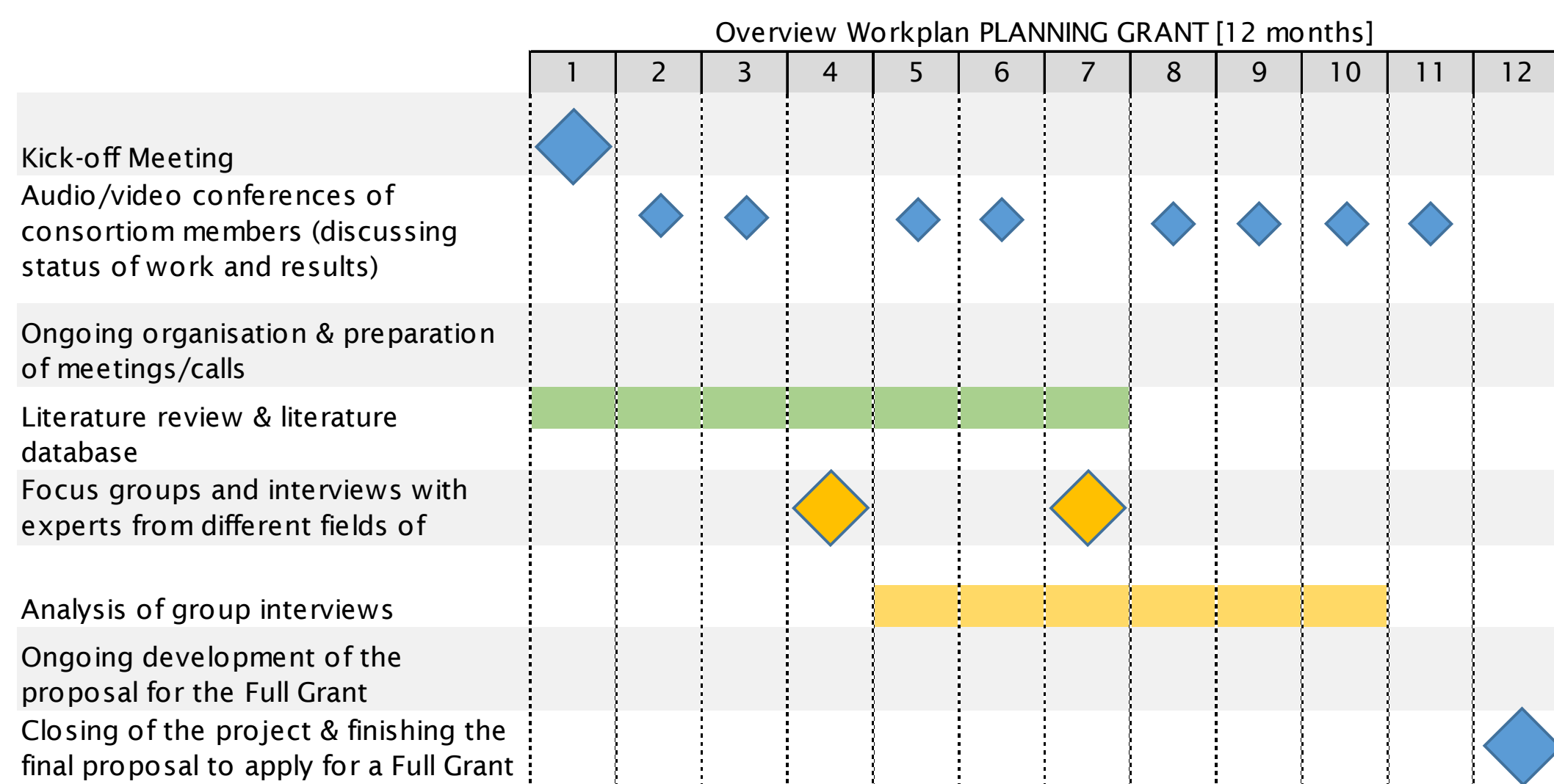
Saving autonomy: Assessing patients' capacity to consent using artificial intelligence (SMART)

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Starting point



In healthcare, respect for patient's autonomy is a key concern (e.g. Beauchamp & Childress 2009). The principle of **patient autonomy** basically demands that patients themselves decide about medical interventions and, from a legal point of view, secures the right of self-determination. Such autonomous decisions are achieved when the patient has been informed about the nature and consequences of the intervention, has the **sufficient mental capacities** to understand this information, is free to decide, and is not influenced by other persons and no other factors (Pfaeffgen & Zabel 2017, Henking & Mittag 2015, Faden & Beauchamp 1986). In this case, the so called **informed consent** legitimizes medical treatment both ethically and legally.



Guiding questions

- How do physicians decide about a patient's decisional capacity? What are the difficulties/restrictions in determining this capacity in clinical practice?
- Can these identified elements be translated into AI algorithms? What are potential limitations/challenges? How can AI compensate for: (i) lack of time among clinical staff in assessing the ability to give informed consent; (ii) subjective values and beliefs of clinical staff in assessing the ability to give informed consent; (iii) lack of experience of the clinical staff in assessing the ability to give informed consent?
- What risks can AI entail, and should it be implemented in clinical practice at all? Does it undermine professional authority? What about the incoherence that patients who are identified as not being able of decision-making are to be assessed by AI-based assessment tools, but should – in the logic of informed consent – give their consent for the usage of such an AI-based assessment tool in the first place? How to solve that problem (Jannes et al. 2018)?
- How would an automatic, AI-based assessment procedure influence our self-understanding?

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