1. Record Nr. UNINA9910255218103321 Autore Benedict James L Titolo A Revised Consent Model for the Transplantation of Face and Upper Limbs: Covenant Consent [[electronic resource] /] / by James L. Benedict Cham:,: Springer International Publishing:,: Imprint: Springer,, Pubbl/distr/stampa 2017 ISBN 3-319-56400-5 Edizione [1st ed. 2017.] Descrizione fisica 1 online resource (IX, 256 p.) International Library of Ethics, Law, and the New Medicine, , 1567-8008 Collana ; ; 73 Disciplina 617.52059 Soggetti **Bioethics** Surgical transplantation Health—Religious aspects Transplant Surgery Religion and Health Lingua di pubblicazione Inglese **Formato** Materiale a stampa Livello bibliografico Monografia Nota di bibliografia Includes bibliographical references and index. Nota di contenuto Introduction -- Vascularized Composite Allotransplantation -- The Ethics of Consent -- The Meaning of Covenant -- Covenant Consent --Conclusion. Sommario/riassunto This book supports the emerging field of vascularized composite allotransplantation (VCA) for face and upper-limb transplants by providing a revised, ethically appropriate consent model which takes into account what is actually required of facial and upper extremity transplant recipients. In place of consent as permission-giving, waiver, or autonomous authorization (the standard approaches), this book imagines consent as an ongoing mutual commitment, i.e. as covenant consent. The covenant consent model highlights the need for a durable personal relationship between the patient/subject and the care provider/researcher. Such a relationship is crucial given the recovery

period of 5 years or more for VCA recipients. The case for covenant consent is made by first examining the field of vascularized composite allotransplantation, the history and present understandings of consent in health care, and the history and use of the covenant concept from its

origins through its applications to health care ethics today. This book explains how standard approaches to consent are inadequate in light of the particular features of facial and upper limb transplantation. In contrast, use of the covenant concept creates a consent model that is more appropriate ethically for these very complex surgeries and long-term recoveries.