Physicians’ primary ethical obligation to promote the well-being of individual patients encompasses an obligation to collaborate in a discharge plan that is safe for the patient. As advocates for their patients, physicians should resist any discharge requests that are likely to compromise a patient’s safety. The discharge plan should be developed without regard to socioeconomic status, immigration status, or other clinically irrelevant considerations. Physicians also have a long-standing obligation to be prudent stewards of the shared societal resources with which they are entrusted. That obligation may require physicians to balance advocating on behalf of an individual patient with recognizing the needs of other patients.

To facilitate a patient’s safe discharge from an inpatient unit, physicians should:

(a) Determine that the patient is medically stable and ready for discharge from the treating facility.

(b) Collaborate with those health care professionals and others who can facilitate a patient discharge to establish that a plan is in place for medically needed care that considers the patient’s particular needs and preferences.

If a medically stable patient refuses discharge, physicians should support the patient’s right to seek further review, including consultation with an ethics committee or other appropriate institutional resource.

*AMA Principles of Medical Ethics: I,II,VIII*