

## ABBREVIATIONS AND ACRONYMS

### A

AAR: after-action review  
AARP: American Association of Retired Persons  
ABCC: Atomic Bomb Casualty Commission  
ABM: anti-ballistic missile  
ACHRE: Advisory Committee on Human Radiation Experiments  
AEC: Atomic Energy Commission  
AFMPC: Armed Forces Medical Policy Council  
AID: artificial insemination by donor  
AIDS: acquired immunodeficiency syndrome  
AIT: advanced individual training  
AMA: American Medical Association  
AMB: ambulance (company designator)  
AMEDD: Army Medical Department  
AMEDD C&S: Army Medical Department Center and School  
ANA: American Nurses' Association  
ANC: Army Nurse Corp  
ATP: adenosine 5'-triphosphate  
AVF: All Volunteer Force  
AVIP: Anthrax Vaccine Immunization Program  
AZT: azidothymidine

### B

BCG: Bacillus of Calmette and Guerin  
BW: biological warfare/weapon  
BW: biological warfare  
BWC: Biological Weapons Convention

### C

C4I: command, control, communications, computers, and intelligence  
CAT: Central American type  
CBU: cluster bomb unit  
CDC: Centers for Disease Control  
CFR: Code of Federal Regulations  
CHAMPUS: Civilian Health and Medical Program of the Uniformed Services  
CIA: Central Intelligence Agency  
CIA: Central Intelligence Agency  
CIOMS: Council for International Organizations of Medical Sciences  
CINC: Commander in Chief  
CIRO: Clinical Investigation Regulatory Office  
CLR: clearing (company designator)  
CMR: Committee on Medical Research  
CNN: Cable News Network  
CNS: central nervous system  
CO: conscientious objector  
COHORT: COHesion, Organization Readiness, and Training  
COL: colonel  
CORDS: Civil Operations, Revolutionary Development Support  
CPA: Cooperative Project Assurance  
CPOG: chemical protective overgarments  
CPR: cardiopulmonary resuscitation  
CRL: Climatic Research Laboratory  
CSS: combat service support  
CSTE: Council of State and Territorial Epidemiologists  
CW: chemical warfare/weapon

### D

DEA: Drug Enforcement Agency  
DHEW: Department of Health, Education, and Welfare  
DHHS: Department of Health and Human Services

DIVAD: division artillery defense  
DNA: deoxyribonucleic acid  
DNR: do not resuscitate  
DoD: Department of Defense  
DOE: Department of Energy  
DOJ: Department of Justice  
DSM: Diagnostic and Statistical Manual  
DTEs: deployment for training exercises  
DTF: dental treatment facility  
DVA: Department of Veterans Affairs  
DWHHRP: Defense Women's Health Research Program

### E

EPRD: Environmental Protection Research Division  
EPWs: enemy prisoners of war  
ER: emergency room  
ESAF: El Salvadoran Armed Forces

### F

FDA: Food and Drug Administration  
FEHBP: Federal Employees Health Benefits Program  
FLN: Front de libÉration nationale  
FM: field manual  
FMS: foreign military sales  
FWA: Federalwide Assurance  
FY: fiscal year

### G

GAO: Government Accounting Office  
GWS: Geneva Wounded and Sick  
GWS-SEA: Geneva Wounded and Sick at Sea

### H

H/CA: Humanitarian/Civic Assistance  
HEC: hospital ethics committee  
HFRS: Hemorrhagic Fever with Renal Syndrome  
HHS: Health and Human Services  
HIPAA: Health Insurance Portability and Accountability Act  
HIV: human immunodeficiency virus  
HMOs: health maintenance organizations  
HQAFMOA: Headquarters Air Force Medical Operations Agency  
HSETC: Health Sciences Education and Training Command  
HSS: Health Service Support  
HURRAO: Human Use Review and Regulatory Affairs Office

### I

IBM: International Business Machines  
ICBMs: inter-continental ballistic missiles  
ICH: International Conference on Harmonisation  
ICN: International Council of Nurses  
ICRC: International Committee of the Red Cross  
ICTFY: International Criminal Tribunal for the Former Yugoslavia  
ICTR: International Criminal Tribunal for Rwanda  
IDF: Israeli Defence Forces  
IMET: International Military Education and Training  
IMTFE: International Military Tribunal of the Far East  
IND: investigational new drug  
INF: intermediate-range nuclear forces  
IOM: Institute of Medicine  
IOs: international organizations  
IRB: institutional review board  
IRBs: institutional review boards  
IV: intravenous

## J

JA: (designated augmentation team)  
JCAHCO: Joint Commission for the Accreditation of Health Care Organizations  
JCCC: Joint Combat Camera Center  
JNIH: Japanese National Institute of Health  
JTF: Joint Task Force  
JTF-B: Joint Task Force Bravo

## K

KESA: [Center for Military Policy Training]  
KIA: killed in action  
KP: kitchen patrol

## L

LATAM COOP: Latin American Cooperative  
LC: (designated augmentation team)  
LDRSHIP: loyalty, duty, respect, selfless-service, honor, integrity, personal courage  
LEO: Laboratory of Experimental Oncology  
LIC: low-intensity conflict  
LIDC: Laboratory for Infectious Disease Control  
LSD: lysergic acid diethylamide  
LT: lieutenant

## M

MACV: Military Assistance Command, Vietnam  
MAD: mutual assured destruction  
MAP: Military Assistance Program  
MASH: mobile army surgical hospital  
MEDCAP: Medical Civic Action Program  
MEDCAPs: Medical Civic Action Programs  
MEDLARS: Medical Literature Analysis and Retrieval System  
MEDRETEs: Medical Readiness Training Exercises  
MHSS: Military Health Services System  
MKULTRA: [Code name given by Central Intelligence Agency to a group of projects investigating mind control]  
MO: medical officer  
MOOTW: military operations other than war  
MOS: military occupational specialty  
MPA: Multiple Project Assurance  
MROE: Medical Rules of Engagement  
MTF: Medical Treatment Facility  
MTT: Medical Training Team

## N

NABUCA: Nation Building Contributions of the Army  
NATO: North Atlantic Treaty Organization  
NAVCARE: Navy Care [now TRICARE]  
NBAC: National Bioethics Advisory Committee  
NCI: National Cancer Institute  
NCO: noncommissioned officer  
NEO: noncombatant evacuation order  
NGO: nongovernmental organization  
NGOs: nongovernmental organizations  
NIH: National Institutes of Health  
NIID: National Institute of Infectious Diseases  
NMRDC: Naval Medical Research and Development Command  
NRL: Naval Research Laboratory  
NSA: National Security Agency  
NSDAP: *Nationalsozialistische Deutsche Arbeiterpartei* [National Socialist German Worker's Party]

## O

OCNR: Office of the Chief of Naval Research

ODS: Operation Desert Shield  
ODS: Operation Desert Storm  
OFDA: Office of Foreign Disaster Assistance  
OHRP: Office for Human Research Protections  
OMB: Office of Management and Budget  
OOTW: operations other than war  
OR: operating room  
OSD: Office of the Secretary of Defense  
OSRD: Office for Scientific Research and Development

## P

PA: physician assistant  
PAHO: Pan American Health Organization  
PAS: physician assisted suicide  
PB: pyridostigmine bromide  
PDF: Panamanian Defense Forces  
PEIS: programmatic environmental impact statement  
PERSCOM: Personnel Command  
PHS: Public Health Service  
PIES: proximity, immediacy, expectancy, simplicity  
PLO: Palestine Liberation Organization  
PME: professional military ethic  
PNE: Peaceful Uses of Nuclear Energy  
POW: prisoner of war  
POWs: prisoners of war  
PPOs: preferred provider organizations  
PRIMUS: Primary Care for the Uniformed Services  
PSA: prostate-specific antigen  
PTSD: posttraumatic stress disorder

## R

RAF: Royal Air Force  
R&D: research and development  
Res.: Resolution  
RIF: reduction in force  
RM: Reichsmarks  
ROEs: Rules of Engagement  
ROWPU: reverse osmosis water purification unit  
RVN: Republic of Vietnam

## S

S-3s: operations and training officers  
SA: *Sturmabteilung* (storm trooper)  
SALT I: Strategic Arms Limitation Treaty I  
SAP: Security Assistance Program  
SD: *Sicherheitsdienst* (security service)  
SEALs: SEa, Air, and Land (forces)  
SENOT: Marine Emergency (code name for hypothermia tests)  
SICU: surgical intensive care unit  
SLBMs: Sea-launched ballistic missiles  
SMEE: Subject Matter Expert Exchange  
SOCOM: Special Operations Command  
SOD: Special Operations Division  
SOUTHCOM: Southern Command  
SPA: Single Project Assurance  
SS: *Schutzstaffel* (protection echelon)  
SSBCOM: Soldier Systems Biological and Chemical Command  
SSG: staff sergeant  
START: Strategic Arms Reduction Treaty  
STDs: sexually transmitted diseases

## T

TO: theater of operations  
TQM: Total Quality Management  
TRADOC: Training and Doctrine Command  
TRICARE: Tri-service Care

**U**

UC: University of California  
UCLA: University of California at Los Angeles  
UCMJ: Uniform Code of Military Justice  
UCSF: University of California at San Francisco  
UN: United Nations  
UNAIDS: Joint United Nations Programme on HIV/AIDS  
UNICEF: United Nations Children's Relief Fund (originally known as United Nations International Children's Emergency Fund)  
UNO: United Nations Organization  
U-Pack: [inflatable] unit pack  
URL: universal resource locator  
USAHSC: US Army Health Services Command  
USAID: US Agency for International Development  
USAMRDC: US Army Medical Research and Development Command  
USAMRIID: US Army Medical Research Institute for Infectious Diseases  
USARIEM: US Army Research Institute of Environmental Medicine  
USC: United States Code  
USIS: United States Information Service  
USMA: United States Military Academy  
USSR: Union of Soviet Socialist Republics  
USUHS: Uniformed Services University of the Health Sciences

**V**

VA: Veterans Affairs  
VEE: Venezuelan equine encephalomyelitis

**W**

WHO: World Health Organization  
WMA: World Medical Association  
WRAIR: Walter Reed Army Institute of Research

**X**

XO: executive officer



## INDEX

### A

- AARs. *See* After-action reviews
- Abortion  
 contemporary philosophers and, 1:7  
 Jews in Nazi Germany and, 2:412, 2:415  
 patient autonomy and, 1:71  
 restrictions on for healthy German women, 2:412
- Abrams, Dr. Herbert  
 Nuremberg Doctors' Trials comments, 2:516  
*The Abuse of Casuistry*, 2:693
- Academia  
 extended separatism and, 1:203, 1:211  
 fusionism and, 1:208  
 paternalistic separatism and, 1:211
- ACHRE. *See* Advisory Committee on Human Radiation Experiments
- Ackerman, T.F.  
 moral philosophers' qualification to be clinical ethicists, 1:75
- Acquired immunodeficiency syndrome. *See also* Human immunodeficiency virus  
 applied medical ethics and, 1:35  
 clinical ethics and, 1:35  
 combination therapy for, 2:731–732  
 homosexuals in the military and, 1:151–152  
 impact of within the military, 2:731–732  
 incidence of, 2:732  
 military policy regarding, 2:732–733  
 protection of people in foreign countries from HIV/AIDS infection by service persons, 2:732  
 public policy medical ethics and, 1:34–35  
 treatment progress, 2:731
- Act of healing, helping, and curing, 1:12–13
- Adenosine 5'-triphosphate  
 Lazarus Project and, 2:844–846
- Adjusting resource consumption to the mission need case study, 2:817
- Administering drugs to assist interrogation case study, 2:396–397
- Adultery  
 case study, 1:347, 1:355, 2:861  
 military culture and, 1:191  
 vulnerability to extortion and, 1:352
- Advisory Committee on Human Radiation Experiments  
 classified research and, 2:595–596  
 creation of, 2:524  
 documentation of violations of ethical conduct, 2:568  
 human research subject recruitment recommendations, 2:590  
 limitations to research, 2:521, 2:523  
 mission of, 2:548  
 plutonium research and, 2:524  
 study on why patients volunteer for research, 2:591–592
- AEC. *See* U.S. Atomic Energy Commission
- Afghanistan  
 "quick reaction" forces in, 2:783
- AFMPC. *See* Armed Forces Medical Policy Council
- African-Americans  
 lactose intolerance and, 2:700
- After-action reviews  
 description, 1:179–180
- Agent Orange  
 treatment and compensation for health conditions associated with exposure to, 2:724, 2:734, 2:735
- Aidid, Mohammed Farah  
 attempted capture of by U.S. forces, 1:181–185
- AIDS. *See* Acquired immunodeficiency syndrome
- Aizawa Saburo, Lt. Col.  
 assassination of Gen. Nagata Tetsuzan, 2:473
- Alameda County, CA  
 study of the effects of religious and spiritual commitment on survival, 2:697
- Albuquerque Tribune*  
 articles on plutonium research on human subjects, 2:523, 2:524
- Alcohol abuse  
 DoD policy on, 2:726
- Alcoholism  
 alcoholic general case study, 1:345, 2:860–861  
 religious beliefs and, 2:696  
 reporting requirements, 1:351–352  
 separation anxiety mistaken for alcoholism case study, 1:347–348
- Alexander, Maj. Leo  
 Nazi hypothermia and hypoxia research analysis, 2:441–444, 2:459–461
- "Alexander Report," 2:441–444, 2:459–461
- Algeria  
 war of national liberation, 1:231
- All Volunteer Force  
 harm principle of autonomy and, 1:256  
 increase in the number and proportion of minorities and, 2:724  
 maintenance of a 50-50 mix between careerist and first-termers, 2:729  
 resocialization and, 2:722–723  
 value of retaining trained personnel and, 2:727  
 women in, 2:726, 2:735
- Allen, Elmer  
 plutonium research subject, 2:525  
 Allocating medical resources in a rapidly changing military environment case study, 2:821
- AMA. *See* American Medical Association
- Ambrose, S.E.  
 value of initiative in battle, 1:146
- AMEDD. *See* Army Medical Department
- American Board of Internal Medicine  
 importance of teaching medical ethics, 1:83  
 statement on *Evaluation of Humanistic Qualities in the Internist*, 1:74
- American Board of Pediatrics  
*Teaching and Evaluation of Interpersonal Skills and Ethical Decisionmaking in Pediatrics*, 1:74
- American Expeditionary Force  
 surplus supplies for the American-Polish Relief Expedition, 2:778
- American Guinea Pigs*, 2:524
- American Medical Association  
 Code of Ethics, 1:5, 1:11, 1:66, 1:273  
 human experimentation position, 2:515, 2:516  
 journal article on the use of pyridostigmine bromide, 2:573  
 official position on physician participation in capital punishment, 2:394  
 Opinions of the Council on Ethical and Judicial Affairs, 1:11  
 "Principles of Medical Ethics," 1:273  
 refusal to admit African-Americans to its membership, 2:412–413

- World Medical Association membership, 2:753
- American Nurses' Association
  - code of ethics, 2:666–669, 2:679
  - Committee on Ethics, 2:667
  - "Guidelines for Implementing the Code for Nurses," 2:667
  - "Guidelines on Reporting Incompetent, Unethical or Illegal Practice," 2:681
  - "Human Rights Guidelines for Nurses in Clinical and Other Research," 2:679
  - "Preparation of Nurses for Participation in and Utilization of Research," 2:679
  - rights of persons who participate in research, 2:679
- American-Polish Relief Expedition
  - typhus elimination mission, 2:777–778
- American Psychiatric Association
  - guidelines on religious beliefs, 2:712
  - posttraumatic stress disorder diagnosis, 2:724, 2:735
- American Psychological Association
  - homosexuality guidelines, 2:729
- American Relief Administration
  - American-Polish Relief Expedition to eliminate typhus, 2:777–778
  - disaster relief to Armenian refugees, 2:777
  - establishment of by Pres. Wilson, 2:777
  - nation building missions, 2:777–778
- American Scholar*
  - forcible euthanasia merits, 2:413
- Amitani Shogo, Prof.
  - postwar activities, 2:494
- Amphetamines
  - action of, 2:841
- ANC. *See* Army Nurse Corps
- Anda
  - Japanese biomedical experimentation site, 2:484
- Animal experimentation. *See also* Human experimentation
  - alternatives to, 2:554–555
  - animal rights position, 2:554
  - animal suffering
    - versus* the primacy of human life, 2:552–553
  - ballistic phenomena studies and, 2:537
  - ethical theories and, 2:553–554
  - hypothermic suspended animation, 2:845
  - issue of how much animal use is justified, 2:555
  - "miniride" principle, 2:554
  - moral status of animals, 2:552, 2:553–554
  - use of animals for food and clothing and, 2:552
  - "worse off" principle, 2:554
- Annas, George
  - Nuremberg Doctors' Trials comments, 2:516, 2:518
- Annas, G.J.
  - conservation as metaphor, 1:283–284
- Anovulatory pill contraception option
  - women's liberation and, 1:69
- Antarctic Treaty
  - provisions, 1:235
- Anthrax
  - Iraq biological weapons program component, 2:543
  - Japanese biomedical experimentation on, 2:483, 2:492–493
  - postwar epidemics of, 2:487
  - sent through the federal mail system, 2:858
- Anthrax vaccine
  - accurate recordkeeping and, 1:298
  - empirical assumptions regarding the safety and efficacy of, 1:338
  - potential risks of mass administration, 1:299–300
  - required administration of, 1:299–300, 1:315–316, 1:337–338, 2:858
- Anthropology
  - contribution to descriptive ethics, 1:108
  - questions about normative claims and, 1:116
  - studies of societies' treatment of elderly persons, 1:112
- Anti-anxiety medications
  - addictive nature of, 2:842
  - aftereffects of, 2:843
  - alternatives to, 2:843
  - fear reduction and, 2:842
  - side effects, 2:842
  - society's awareness of soldiers' sacrifices and, 2:843–844
  - state-dependent learning and, 2:842–843
- Anti-Semitism. *See also* Judaism; Nazi medical ethics
  - Jews as scapegoats for all that was wrong in modern medicine, 2:417
  - "medicalization" of, 2:415
  - racial hygiene movement and, 2:408–409
- Antiauthoritarianism
  - causes of, 1:69
- Antifoundationalism
  - causes of, 1:69
  - human experience of illness and, 1:17–18
  - postmodernism and, 1:7
- Antipsychotic drugs
  - action of, 2:842
- Antitobacco movement
  - in Nazi Germany, 2:409, 2:419
- Anxiety. *See* Anti-anxiety medications
- Applied medical ethics
  - communitarian ethics, 1:41–43
  - deconstructionism and, 1:70
  - definition, 1:72
  - feminist ethics, 1:10, 1:43–44
  - four-principle approach, 1:34, 1:36–38
  - issues addressed, 1:34
  - libertarian ethics, 1:34, 1:39–40
  - narrative ethics, 1:10, 1:43
  - principlism, 1:36–41, 1:70–72
- Arab countries. *See also specific countries*
  - food deprivation and illness, 2:699–700
- Arab-Israeli War
  - anticipatory self-defense in the form of preemptive war, 1:227
- Araki Sadao (War Minister General, Japan)
  - patron of Ishii Shiro, 2:475
- Archiv f,r Rassen-und Gesellschaftsbiologie*, 2:408
- Argentina
  - military dominance of the government, 1:138
- Aristotle
  - "ethics" definition, 1:107
  - goodness of actions principle, 1:32
  - justice principle and, 1:37
  - Nichomachean Ethics, 1:64–65
  - prudent judgment or practical wisdom and, 1:15
  - "virtue" definition, 1:14
  - virtue theory, 1:10, 1:31, 1:33, 1:64–65
- Armed Forces Medical Policy Council
  - Nuremberg Code and, 2:521
- Army Chemical Corps
  - secret contract to test the effects of hallucinogens, 2:526
- Army Medical Department. *See also* Army Nurse Corps;  
Physician-soldiers
  - collective ethics and, 1:285
  - motto, 1:285, 1:296, 2:374
  - rotation of U.S. military medical personnel in El Salvador, 2:795
- Army Medical Department Standards of Nursing Practice*, 2:675



- Army-Navy Nurse Act  
commissioned officer status for registered nurses, 2:666
- Army Nurse Corps  
establishment of, 2:665, 2:666  
graduate education opportunities, 2:680  
specialty training, 2:666
- Army Student Nurse Program  
eligibility of men for, 2:667
- Arras, J.D.  
casuistry description, 1:64
- Artaxerxes II, King of Persia  
request for Hippocrates to provide care for Persian soldiers, 1:302–303
- Artificial feeding  
Barber and Nedjil Case, 1:88, 1:97  
Brophy Case, 1:88, 1:98–99  
Conroy Case, 1:88, 1:98  
Cruzan Case, 1:88, 1:100–102
- Asian cultures. *See also specific countries*  
dietary practices, 2:700
- Atomic Energy Commission  
test-exposure limits, 2:569
- ATP. *See* Adenosine 5'-triphosphate
- Atrocities. *See also* Japanese biomedical experimentation  
during the World-War-II era; Nazi medical ethics  
definition of criminal acts and, 1:174  
dynamics of, 1:174–175  
ethical-operational issues, 1:172–176  
national objectives, military culture and, 1:172–174  
prevention of, 1:175–176  
sociopaths and, 1:174
- Augustine, Saint  
just war doctrine, 1:223–224  
principle of discrimination and, 1:241
- Auschwitz  
hypothermia studies, 2:447
- Austere conditions model of triage  
description, 2:381, 2:383
- Autonomy principle  
absolutization of, 1:37, 1:39–40  
Americans' view of, 1:255  
beneficence and, 1:37, 1:38  
beneficence-in-trust principle and, 1:40  
bioethics debate in the United States and, 1:54  
civilian sector and, 1:253, 1:265  
clinical encounter and, 1:14  
combat stress breakdown, 2:374  
conflicting rights and duties of the military and the soldier, 1:259  
conscientious objection and, 1:257–261  
deontology theory and, 1:29–31  
diversity of people's views of morality and, 1:254  
enforced treatment for individual soldiers and, 2:380  
euthanasia on the battlefield and, 2:389–391  
extreme conditions model of triage and, 2:383–384  
following orders and, 1:261–265  
harm principle, 1:253–254, 1:255, 1:256  
human research subjects and, 2:573, 2:577  
imbalance of power within the patient-physician relationship and, 2:854  
individual liberty and the needs of the army, 1:256–265  
informed consent and, 1:314  
Judaism and patient autonomy, 2:689  
legal moralism principle, 1:254, 1:255  
libertarianism and, 1:39–40  
medical care issues, 1:256–257  
necessity for restrictions on, 1:255  
nurses in the military and, 2:674  
paternalism principle, 1:254–255  
"personal autonomy" definition, 1:253  
preponderance in American bioethics, 1:39  
reasons to value autonomy, 1:253  
self-determination and, 1:39  
as a "side constraint," 1:30, 1:38  
soldiers and, 1:253–265, 1:318, 1:324  
soldiers as research subjects and, 2:547–548  
soldiers' risk and, 2:857  
substituted judgment theory and, 1:115  
United States laws and, 1:255  
using one set of principles for each distinct goal, 1:255  
weakness of, 1:37
- AVF. *See* All Volunteer Force
- Ayer, A.J.  
philosophers as moral experts, 1:75
- Azidothymidine  
AIDS treatment, 2:731, 2:732
- AZT. *See* Azidothymidine
- ## B
- Baby M Case, 1:88, 1:99–100
- Bacillus subtilis variant niger*  
surreptitious release of in the New York City subway system, 2:527
- Bacteriological (Biological) Convention  
provisions, 1:225
- Balkans  
United Nations request for military humanitarian assistance, 2:798
- Bangkok  
Japanese biomedical experimentation site, 2:481
- Barber and Nedjil Case, 1:88, 1:97
- Bassett, Dr. Samuel  
plutonium research on human subjects and, 2:524
- Bataan Death March  
atrocities example, 1:172–173, 1:174, 1:175
- Battle at Pickett's Mill  
case study, 1:263
- Battle fatigue. *See* Combat stress breakdown
- Battlefield medical ethics. *See also* Military medical ethics  
battlefield triage, 2:380–381  
challenges of, 2:371  
euthanasia, 2:384–394  
factors encountered that have no civilian counterpart, 2:399  
logistics of combat and, 2:371  
participation in interrogation of prisoners of war, 2:394–398  
rapid evacuation of casualties and, 2:371  
return to duty considerations, 2:372–380  
uncertainty of resupply and, 2:371  
unpredictable nature of the battlefield and, 2:371  
use of medical evacuation assets to remove troops killed in action, 2:372
- Beauchamp, T.L.  
beneficence, nonmaleficence, autonomy, and justice principles, 1:13–14, 1:36, 1:71–72  
four requirements that must be met to justify "infringements" of a prima facie principle, 1:37–38  
normative ethics principles, 1:38, 1:71–72
- Beijing  
Japanese biomedical experimentation site, 2:481
- Beiyinhe  
Japanese biomedical experimentation site, 2:478  
prisoner insurrection, 2:478

- Bellamy, Dr. Ronald F.  
  medical ethics comments, 2:867
- Belligerent occupation  
  civil war and, 1:238  
  forcing an occupied population to take part in the war  
    against their own side, 1:237  
  “precarious occupation,” 1:237  
  resistance movements and, 1:238
- Belmont Report  
  beneficence principle, 2:577–578  
  description, 2:572  
  ethical conduct of biomedical research and, 2:545, 2:546,  
    2:550, 2:693  
  justice principle, 2:578–580, 2:592  
  principlism example, 1:36  
  “research” definition, 2:572–573  
  respect for persons principle, 2:573, 2:577  
  text of, 2:604–610  
  three ethical principles, 2:573, 2:577–580
- Beneficence-in-trust principle  
  autonomy and, 1:40  
  description, 1:40  
  family context, 1:41  
  healing as the good in medicine, 1:40–41  
  strengths, 1:41  
  truth-telling case study and, 1:41, 1:53  
  weaknesses, 1:41
- Beneficence principle  
  autonomy and, 1:37, 1:38  
  clinical encounter and, 1:13–14  
  deconstructionism and, 1:71  
  enforced treatment for individual soldiers and, 2:378, 2:379  
  euthanasia on the battlefield and, 2:391  
  excluding women and minorities from research protocols  
    and, 2:556, 2:579  
  Hippocratic Oath and, 1:37  
  human research subjects and, 2:577–578  
  nurses in the military and, 2:673  
  overriding of veracity by, 1:65  
  return to duty considerations, 2:376, 2:378
- Benenson, Abram  
  biological weapons testing and, 2:527
- Benevolence character trait of physicians, 1:14
- Bentham, Jeremy  
  utilitarian theory, 1:28
- Benzodiazepines  
  action of, 2:842
- Biko, Steve  
  death from head injuries received during torture, 2:396
- Bioethics. *See* Medical ethics
- Bioethicsline online resource, 1:121
- Biological determinism  
  racial hygiene movement and, 2:408–409
- Biological warfare. *See also* Biological weapons; *specific agents*,  
*e.g., Anthrax*  
  surreptitious testing in American cities, 2:527–528  
  United States biological warfare program, 2:492, 2:526–528  
  United States interest in Japanese World War II research  
    results, 2:492–493  
  U.S. Army tests in America, 2:526–528
- Biological weapons. *See also* Biological warfare; Chemical  
  weapons; Japanese biomedical experimentation during the  
  World-War-II era; *specific pathogens, e.g., Anthrax*  
  ban on, 1:234  
  contemporary considerations and questions, 2:440–441,  
    2:858–859  
  escalation of due to military biomedical research, 2:542,  
    2:543  
  Geneva Gas Protocol and, 1:225  
  immunizations and, 1:298–300, 1:314, 1:315–316, 1:337–338  
  medical biological defense research, 2:537  
  necessity of finding prophylactic agents for, 2:858–859  
  participation of physician-soldiers in research on, 1:305  
  sanctions for violations of prohibitions against, 1:238–239
- Biological Weapons Convention  
  military biomedical research and, 2:537  
  military biomedical research reports to, 2:543  
  preclusion of research into offensive agents necessary to  
    determine what means are required to defend against  
    them, 2:542  
  research consistent with the intent of, 2:543–544
- Biomedical experimentation. *See* Japanese biomedical  
  experimentation during the World-War-II era; Military  
  biomedical research
- Blanck, Lt. Gen. Ronald  
  military physicians as military officers, 2:853
- Blassie, Lt. Michael  
  DNA identification of, 2:859
- Blauer, Harold  
  hallucinogen research subject, 2:526
- Blaufarb, D.S.  
  military civic action as a viable concept, 2:782
- Bloche, M.G.  
  clinical ethics as a “dialectic of obligations,” 2:868
- Blood substitute  
  human experimentation, 2:515
- “Bloodless” war  
  “CNN effect” and, 2:835  
  society’s expectations of medical care for wounded U.S.  
    soldiers and, 2:835–836
- Boatman, J.  
  *Q Program* secret plane development, 1:211
- Bolton, Rep. Frances P.  
  efforts to appoint men as nurses in the Army, Navy, and  
    Air Force, 2:667
- Borrowing from others at the U.S. Military Academy  
  example of the harm principle, 1:254
- Bosnia  
  atrocities and the war aims of the conflicting parties, 1:172
- The Boston Medical Police*, 1:66
- Botulin  
  Iraq biological weapons program component, 2:543
- Botulism  
  insufficient supplies of agents to prevent, 1:338–339
- Bouhler, Philip  
  sterilization of Jews, 2:415
- Bourne, Dr. Peter  
  task of the Special Forces in Vietnam, 1:304
- Boxing requirement at the U.S. Military Academy  
  example of the harm principle, 1:253–254
- Brack, Viktor  
  physicians as administrators of euthanasia, 2:414  
  sterilization of Jews, 2:415
- Bray, R.M.  
  substance use and abuse by military personnel, 2:726
- Brazil  
  military dominance of government, 1:138  
  physician involvement in torture of prisoners, 2:396
- British Medical Association  
  ethical code, 1:11
- Brody, Baruch  
  criticism of principlism, 1:38  
  moral pluralism model of conflicting appeals, 1:46  
  theoretical framework for ethics research, 1:120



- Brody, Howard  
 clinical ethics description, 1:63  
 decision tree analytic method, 1:51  
 purpose of medical ethics, 1:47
- Brooke Army Medical Center  
 battlefield medical ethics conference, 2:388–389
- Brophy Case, 1:88, 1:98–99
- Brown v Board of Education*  
 desegregation and, 2:724
- Burgdörfer, Friedrich  
 German birth rate, 2:412
- Burns v. Wilson*  
 individual rights and the overriding demands of discipline and duty, 1:150
- Burrelli, D.F.  
 complaints about care received in military medical facilities, 2:729
- Bush, Vannevar  
 Office for Scientific Research and Development head, 2:513
- Business and industry  
 extended separatism and, 1:203  
 fusionism and, 1:214
- Business model of the patient-physician relationship, 1:8–9, 1:34
- Buxton, Peter  
 questions about the morality of the syphilis nontreatment study, 2:520
- BW. *See* Biological weapons
- BWC. *See* Biological Weapons Convention
- ## C
- Cabot, Dr. Richard  
 schematic of patient needs (figure), 1:68
- Cade, Ebb  
 plutonium research subject, 2:524
- Cali, D.  
 the culture of physicians, 2:703
- Callahan, Daniel  
 Institute of Society, Ethics, and the Life Sciences founder, 1:73
- Calley, Lt. William  
 My Lai massacre and, 1:142, 1:175, 1:264
- Calvinism  
 religious tradition of, 2:691–693, 2:710
- Canada  
 Rwanda peacekeeping mission, 2:825, 2:828
- Cancer research  
 DoD's breast cancer research program, 2:557  
 protection of research subjects and, 2:519–520
- Canton  
 Japanese biomedical experimentation site, 2:481
- Caplan, A.L.  
 belief that clinical ethicists should be clinicians, 1:75
- Care of subordinates  
 administrative and logistical support, 1:168  
 balancing the mission against troops' welfare, 1:169–170  
 "can do" ethic and, 1:170, 1:189  
 caring for families and, 1:168–169  
 competent leadership and, 1:166–167  
 as a crucial component of honor, 1:165  
 demand overload and, 1:170  
 developing subordinates' competence, 1:167–168  
 effects of commanders' technical incompetence (exhibit), 1:167  
 is the unit the team, or is the officer corps the team? (exhibit), 1:171  
 overriding common sense and, 1:170  
 during the 19th century, 1:166  
 during the 20th century, 1:166
- Caregivers  
 guidelines, 2:711–714  
 psychological difficulties of medical personnel in humanitarian assistance programs, 2:825–828  
 resources, 2:714
- Caring ethics  
 case study descriptions and, 1:115  
 external morality example, 1:10  
 feminist ethics and, 1:43–44  
 influence on nursing ethics, 1:109
- Carrel, Alexis  
 euthanasia for criminals and the mentally ill, 2:413
- Carruths, P.J. and A.K.  
 continuing education in ethics for nurses, 2:677
- Carter, B.S.  
 equal treatment of prisoners of war, 1:319, 1:320
- Carter, Pres. Jimmy  
 Executive Order on Intelligence Activities, 2:526  
 seizure of U.S. Embassy and staff in Tehran and, 2:782–783
- Case-control studies  
 description, 2:582–583
- The Case for Animal Rights*, 2:554
- Case studies. *See also* Truth-telling case study  
 adjusting resource consumption to the mission need, 2:817  
 administering drugs to assist interrogation, 2:396–397  
 adultery, 1:347, 1:355, 2:861  
 alcoholic general case, 1:345, 2:860–861  
 allocating medical resources in a rapidly changing military environment, 2:821  
 Baby M Case, 1:88, 1:99–100  
 Barber and Nedjil Case, 1:88, 1:97  
 Battle at Pickett's Mill example of moral ambiguity, 1:263  
 Brophy Case, 1:88, 1:98–99  
 Capt. Yolanda Huet-Vaughn, 1:260, 1:307, 1:312, 1:318  
 changing environments in a medical assistance effort, 2:819  
 Col. Gray's dilemma and its resolution, 1:152–153  
 communicating MEDCAP limitations to a local population, 2:815  
 Conroy Case, 1:88, 1:98  
 Cruzan Case, 1:88, 1:100–102  
 "Dax" Case, 1:88, 1:96–97  
 descriptive ethics and, 1:115  
 diagnosis of local diseases, 2:812  
 disobeying orders—the "risks" associated with the desire to help, 2:820  
 Georgetown Case, 1:88, 1:93  
 the ghetto hospital, 2:387–388  
 "good intentions" left in the latrine, 2:813–814  
 Hopkins Case, 1:88, 1:93–94  
 Howard Levy, 1:304, 1:305–306, 1:312, 1:317, 1:320  
 the inappropriate surrogate, 2:862  
 life following tragedy, 2:676  
 logistics, 2:837–838  
 "looking the other way": participation by silence, 2:398  
 Lt. Stone's dilemma, 1:131, 1:154  
 a MEDCAP exercise in rural Africa, 2:810–812  
 mission priorities and medical care, 2:822  
 My Lai massacre, 1:264  
 new questions arising from, 1:116  
 political pacifism, 1:260–261  
 providing feasible medical care to indigenous populations in a combat zone, 2:818–819  
 Quinlan Case, 1:73, 1:88, 1:94–95  
 rape victim's confidentiality, 1:345–346

- Saikewicz Case, 1:88, 1:96  
separation anxiety mistaken for alcoholism, 1:347–348  
situational pacifism, 1:260  
substance abuse, 1:346–347  
survivor guilt, 1:356  
Swann scenario, 2:384–385, 2:388–394  
tailoring the organizational response to the local need, 2:818  
Tarasoff Case, 1:37, 1:88, 1:95–96  
the terrified wounded POW, 2:391  
Timothy E. Quill, “Jane Roe,” et al Case, 1:88, 1:102–104  
understanding cultural needs of patients, 2:824  
what should Leah be told?, 2:689–690  
withholding or delaying treatment to facilitate interrogation, 2:397–398
- Castro, Fidel  
guerrilla forces in El Salvador and, 2:783
- Casualty  
Catholicism and, 1:10, 1:45  
consensus on principles and, 1:45  
definition, 1:63–64  
dependence on good case descriptions, 1:115  
focus of, 1:44–45  
Jewish moral tradition and, 1:45  
as principlism’s chief opponent, 2:693  
strengths, 1:45  
weaknesses, 1:45–46
- Catholic Church  
casualty and, 1:10, 1:45  
chivalry influence, 1:134  
principle of discrimination and, 1:241, 1:242  
religious symbols, 2:699  
Vatican Council changes, 1:69
- CBUs. *See* Cluster bomb units
- CDC. *See* Centers for Disease Control
- Cellular metabolism  
Lazarus Project and, 2:844–845
- Center for Defense Information  
criticism of the military, 1:211
- Centers for Disease Control  
responsibility for governmentally sponsored medical research, 2:542  
risk assessment for zinc cadmium sulfide release over cities, 2:527  
Tuskegee Syphilis Study and, 2:520
- Central America. *See also specific countries*  
beginnings of the DoD humanitarian mission, 2:785–788  
impact of humanitarian assistance, 2:796–798  
instability in as a military interest to the United States, 2:785  
nation building in, 2:783–796  
turmoil of the late 1970s and early 1980s, 2:783, 785
- CHAMPUS. *See* Civilian Health and Medical Program of the Uniformed Services
- Chang Teh  
Japanese pathogen tests on civilians, 2:485–486
- Chang Tso-lin, Marshall  
plot to assassinate, 2:473
- Changing environments in a medical assistance effort  
case study, 2:819
- Chaplains  
combat stress breakdown and, 1:180
- Chemical warfare  
gas warfare agent research, 2:513–514
- Chemical weapons. *See also* Biological weapons; Japanese biomedical experimentation during the World-War-II era  
contemporary considerations and questions, 2:440–441  
escalation of due to military biomedical research, 2:542, 2:543  
Geneva Gas Protocol and, 1:225, 1:233–234  
Hague Conventions and, 1:233  
immunizations and, 1:298–300, 1:314, 1:315–316, 1:337–338  
military biomedical research, 2:538  
protective overgarments and, 1:313, 2:378, 2:579, 2:593  
regulations against the use of, 1:233–234  
sanctions for violations of prohibitions against, 1:238–239
- Chemical Weapons Convention  
concerns for physician-soldiers, 1:308
- Chichibu, Prince (Japan)  
biomedical experimentation role, 2:469
- Children  
equipment and staffing problems associated with treating in humanitarian assistance programs, 2:817  
as human volunteers in military biomedical research, 2:577, 2:587  
land mine injuries, 2:794  
military care issues related to, 2:728–729  
participation in medical research, 1:42  
vaccination program in Honduras, 2:796
- Childress, J.F.  
beneficence, nonmaleficence, autonomy, and justice principles, 1:13–14, 1:36, 1:71–72  
four requirements that must be met to justify “infringements” of a prima facie principle, 1:37–38  
primacy of autonomy, 1:39
- China. *See also specific provinces and cities*  
ethical code of Chinese physicians, 1:11  
Japanese biomedical experimentation in, 2:475–481  
nuclear weapons capability, 1:245  
pathogen tests on civilian villages in China (exhibit), 2:485–486  
postwar epidemics due to infected animals released by the Japanese from their research facilities at the end of the war, 2:487  
*yin* and *yang* concepts, 2:701
- Chivalry  
feudal system and, 1:134  
war-conduct law and, 1:231  
war-decision law and, 1:224
- Cholera  
Japanese biomedical experimentation on, 2:487  
vaccine research by the United States on Philippine prison inmates, 2:511
- Christianity. *See also specific Christian religions*  
influence on clinical ethics, 1:64  
introduction of Christian ethical principles, 1:71  
just war doctrine and, 1:223–224
- Christopher, Paul  
double-effect principle, 1:153
- Church, Sen. Frank  
investigation of clandestine testing by the CIA and Department of Defense, 2:526
- CIA. *See* U.S. Central Intelligence Agency
- Cicero  
influence on clinical ethics, 1:64  
“Civil Operations, Revolutionary Development Support” effort  
description, 2:782
- Civil Rights Act of 1965  
women’s liberation and, 1:69
- Civil War  
Battle at Pickett’s Mill case study, 1:263  
belligerent status principle and, 1:231  
care of subordinates and, 1:166

- Dorothea Dix's appointment as Superintendent of the Female Nurses of the Union Army, 2:664
- emergence of women from home to larger societal purpose, 2:664, 2:682
- Lieber Code and, 1:225, 1:246
- objective of all health services, 1:296
- ratio of deaths from disease *versus* combat, 2:727
- Civilian Health and Medical Program of the Uniformed Services
- retirees and, 2:728
- Civilian populations
- aspects of providing civilian medical care during contingency operations, 2:818–820
  - equipment and staffing problems associated with treating in humanitarian assistance programs, 2:817
  - Geneva Conventions and, 2:744
  - Japanese biomedical experimentation on during World War II, 2:481–487
  - as military targets, 1:310–311
  - treatment of by physician-soldiers, 1:302, 2:384
  - United States infectious disease research on, 2:514
  - U.S. military as the cause of injury, 2:823
- Classic separatism
- costs of isolation, 1:210–211
  - dangers of letting the military play important roles in social policy, 1:201–202
  - description, 1:201
  - flaws of, 1:209–211, 1:215, 1:217
  - fusionism and, 1:206–207
  - military and politics and, 1:202
  - paternalistic separatism and, 1:204
  - societal change and, 1:210
  - technological change and, 1:210
- Clement of Alexander
- overriding of veracity by beneficence, 1:66
- Clinical ethicists
- description, 1:72–73
  - ethics consultation, 1:77–78
  - medical choices and the patient's intuition, 1:74
  - medical model for, 1:75
  - new problems that arose in the 20th century, 1:73
  - organizations for, 1:74
  - physicians-in-charge and, 1:78
  - professional journals for, 1:74
  - public concern for violations of patients' rights and, 1:73
  - service responsibilities, 1:77–78
  - structured reflection and, 1:74–75
- Clinical ethics
- American medical practice in the 18th and 19th centuries, 1:66–69
  - anatomy of clinical judgments (figure), 1:80–81
  - antifoundational and antiauthoritarian influences, 1:69
  - bedside teaching of, 1:63, 1:75
  - British philosophical influences of the 18th and 19th centuries, 1:65–69
  - cases in the "corpus of precedents" of clinical ethics (table), 1:87
  - casuistry, 1:10, 1:44–46, 1:63–64
  - clinical ethicists, 1:72–75
  - competency of the patient and, 1:84–86
  - deconstructional intellectual influences, 1:70–71
  - definitions, 1:63
  - as a "dialectic of obligations," 2:868
  - disagreements arising in clinical practice and, 1:83–84
  - "English gentleman" and his obligations to society, 1:65–66
  - ethical workup guide (exhibit), 1:52
  - ethics committees, 1:78–79
  - framing the issue, 1:75, 1:77
  - Greek philosophical influences, 1:64–65
  - grid models, 1:47–51
  - healthcare professional influences, 1:72–73
  - hermeneutical, 1:46
  - house staff and, 1:79, 1:83
  - issues addressed, 1:34
  - methodological theories, 1:44–47
  - methods of, 1:75–77
  - moral pluralism, 1:46
  - normative ethics and, 1:46
  - origin of the term, 1:63–64
  - the patient as person concept, 1:68, 1:69
  - patient-physician relationship and, 1:75, 1:77
  - Pellegrino's ten-step workup (exhibit), 1:51
  - physician character traits and, 1:80–81
  - postmodern philosophical influences, 1:71–72
  - precedent-setting cases, 1:83–88, 1:93–104
  - research elements, 1:79
  - rules for, 1:46–47
  - scientific and medical influences, 1:69–70
  - scientific model of medicine, 1:68–69
  - teachers trained for, 1:82
  - therapeutic privilege concept, 1:65–66, 1:67, 1:84, 1:338
  - unitary theory, 1:46
  - workups, 1:47–53, 1:75–77
- Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical Medicine*, 1:63
- Clinton, Pres. William J.
- Advisory Committee on Human Radiation Experiments
    - creation, 2:524, 2:548
    - anthrax vaccination of troops and, 1:337
    - apology for the Tuskegee Syphilis Study, 2:474, 2:510
    - apology to the participants of the human radiation experiments, 2:510
    - appointment of an oversight board to assist the direction of the DoD investigation into Persian Gulf War illnesses, 2:725
    - establishment of the National Bioethics Advisory Commission, 2:510
    - guidelines on the use of human subjects in classified research, 2:596
- Clouser, K.D.
- principlism criticism, 1:36, 1:38
- Cluster bomb units
- use during the Vietnam War, 1:233
- CMR. *See* Committee on Medical Research
- CNN paradox
- description, 1:208
- Cocaine use. *See also* Substance abuse
- legal moralism principle of autonomy example, 1:254
- Code of Conduct for Members of the Armed Forces of the United States, 1:144, 1:145
- "Code of Ethics for Nurses With Interpretive Statements"
- nursing research and, 2:679
  - revisions and amendments, 2:666–668, 2:682
  - successive revisions of (exhibit), 2:670–671
  - 2001 version (exhibit), 2:668
- Code of Federal Regulations, Title 32—National Defense
- text of, 2:620–629
- Codes of ethics, 1:11, 1:18. *See also specific codes of ethics*
- Cognitive restructuring techniques
- description, 2:843
- Cohesion
- combat stress breakdown and, 1:179
  - homosexuality and, 1:151
  - horizontal, 1:163

- integrity and, 1:163
  - situational pacifism and, 1:257–258, 1:259
  - vertical, 1:163, 1:176, 1:184, 1:190
- Cohn, Edwin
- blood substitute research, 2:515
- Cohort studies
- description, 2:583
- Col. Gray's dilemma case study, 1:152–153
- Cold air exposure. *See* Nazi hypothermia and hypoxia research
- Cold War
- biological warfare research, 2:527
  - efforts to develop collective security, 1:226–227
  - human experimentation during, 2:521–529
  - linking of military civic action programs with the counterinsurgency movement, 2:783
  - nuclear experiments done on soldiers during, 1:207, 1:210
  - nuclear weapon development and, 1:243–244
  - relationship of the United States and the Soviet Union and, 2:492
  - return to duty considerations during (exhibit), 2:375–376
  - Soviet Military Power* portrayal of Soviet power in a “worst case scenario,” 1:204
  - U.S./NATO deterrence/defense posture, 1:245
  - war-decision law and, 1:225
- Collective ethics
- physician-soldiers and, 1:284–286
- Combat casualty care research, 2:537
- Combat ethics. *See also specific wars*
- combatants' belief that they are not alone on the battlefield, 1:177
  - confidence in skills and equipment and, 1:176–177
  - enabling military personnel to carry out morally aversive acts, 1:176–178
  - pathfinders in Iraq (exhibit), 1:177
  - restraining military personnel from committing atrocities, 1:172–176
  - strengthening resistance to combat stress breakdown, 1:178–180
  - trust in leaders and, 1:176–177
  - “what's right” and, 1:178, 1:179, 1:182, 1:183
- Combat fatigue. *See* Combat stress breakdown
- Combat stress breakdown
- after-action reviews and, 1:179–180
  - Army doctrine, 2:373–374
  - autonomy principle and, 2:374
  - basic principles of battlefield treatment for, 2:826
  - chaplains and, 1:180
  - combat stress control teams, 1:180
  - ethical and psychological support for morale and character and, 1:179–180
  - “floodgate” effect of excusing soldiers from duty, 1:334, 1:336, 1:342, 2:373, 2:860
  - intentional self-wounding and, 1:336
  - leaders' betrayal of their subordinates moral assumptions about fairness and, 1:179
  - mental health professionals and, 1:180
  - military mission and treatment of, 1:335–337, 1:342
  - PIES approach, 2:373, 2:826
  - posttraumatic stress disorder and, 1:179
  - return to duty and, 1:300, 1:316, 1:335–337, 2:373–374
  - situational pacifism and, 1:258
  - survivor guilt and, 1:315, 1:336
  - symptoms of, 1:179
  - Walter Reed Army Institute of Research's research on the human dimensions of the Army on the development of high performance units and on resistance to combat stress breakdown, 1:160
  - “what's right” and, 1:179
- “Comfort Women”
- Japanese biomedical experimentation on, 2:489
- The Commander's Handbook on the Law of Naval Operations*, 1:143
- Committee of Five
- International Committee of the Red Cross formation, 2:741–742
- Committee on Medical Research
- funding, 2:513
  - infectious disease research, 2:514
  - mission, 2:513
  - policy on human experimentation, 2:514–515
- The Common Rule
- classified research and, 2:596
  - description, 2:580–581
  - DoD's codification of, 2:581
  - exemption from institutional review boards and, 2:587
- Communicating MEDCAP limitations to a local population case study, 2:815
- Communication
- conversational analysis for patient-physician interactions, 1:108, 1:119
  - information for families—Operation Just Cause (exhibit), 1:169
  - intra-institutional communication, 1:184
  - paternalistic separatism and, 1:204
  - physician communication patterns, 2:704–705
  - poor internal communications resulting in military failure (exhibit), 1:185
- Communitarian ethics
- description, 1:41–42
  - feminist ethics and, 1:43
  - strengths, 1:42
  - suffering and, 1:42–43
  - weaknesses, 1:42–43
- Compassion and caring character trait of physicians, 1:14
- Compensatory justice principle
- Lazarus Project and, 2:845, 2:847
  - military medical ethics and, 2:855
- Competency of commanders
- requirement for, 1:321
  - technical competence, 1:166–167
- Competency of patients
- ability of surrogate decision makers to predict what treatments their loved ones would want in the event that they could not speak for themselves, 1:109
  - “Dax” Case, 1:88, 1:96–97
  - determination of patient capacity to make decisions regarding medical care (figure), 1:85
  - euthanasia and, 1:114
  - guardian role in surrogate decision making, 1:88, 1:94–95, 1:96
  - inappropriate surrogate case study, 2:862
  - physician-assisted suicide and, 1:114
  - Quinlan Case, 1:88, 1:94–95
  - referral to the courts, 1:85
  - Saikewicz Case, 1:88, 1:96
  - selection of a surrogate decision maker (figure), 1:86
  - Self-Determination Act of 1991, 1:101
- Competency of subordinates
- importance of developing, 1:167–168
- Concentration camps. *See* Auschwitz; Dachau; Nazi hypothermia and hypoxia research; Nazi medical ethics; Nazis
- Concerned Philosophers for Peace
- criticism of the military, 1:211



- Condition of possibility and postmodern philosophy (exhibit), 1:40
- Confidentiality issues. *See also* Privacy issues  
 balancing the needs of the military with the needs of patients, 1:344–346  
 case studies, 1:345–346  
 confidentiality for homosexual soldiers in epidemiological studies, 2:859  
 contemporary philosophers and, 1:7  
 disclosure of medical information to commanding officers, 1:298, 1:315  
 electronic medical records and, 2:839  
 epidemiological studies and, 2:585  
 ethics committees and, 1:78  
 evaluating pilots who may be impaired, 1:344–345  
 procedures for exchanging sensitive medical data while preserving, 2:588–589  
 referring requests for medical information to military lawyers, 1:315  
 service members' medical records, 1:350  
 Tarasoff Case, 1:37, 1:88, 1:95–96  
 using patient records in military research, 2:588–589  
 violating patient confidentiality in the name of national or military security, 1:298, 1:315
- Conflict resolution  
 deontology and, 1:30  
 utilitarian theory and, 1:28
- Conflicts of interest  
 epidemiological studies and, 2:585  
 ethics committees and, 1:78
- Congshan  
 Japanese pathogen tests on civilians, 2:486
- Conroy Case, 1:88, 1:98
- Conscientious objection  
 “absolute pacifists,” 1:307  
 Army's ability to carry out its job and, 1:259–260  
 Army's ability to reliably identify authentic situational pacifists, 1:259  
 case studies, 1:260–261  
 current regulations, 1:257  
 filing for before entering the armed forces, 1:257  
 moral pacifism, 1:257  
 nuclear pacifists, 1:241  
 political pacifism case study, 1:260–261  
 reassignment of the soldier to a noncombatant position, 1:259  
 situational pacifism, 1:257, 1:307–308
- Consequentialism  
 animal experimentation and, 2:553  
 applied medical ethics and, 1:36  
 description, 1:28, 1:33  
 principlism and, 1:72  
 strengths, 1:28  
 weaknesses, 1:28–29
- Conservation principle  
 collective ethics and, 1:284–286  
 description, 1:282  
 ecological conservation, 1:283–284  
 evolution of conservation as metaphor, 1:283–284  
 execution of the physician's mission during battle and, 1:288–289  
 “fighting strength” of the military and, 1:288  
 maintenance of resources, 1:287–288  
 market metaphor, 1:283  
 military healthcare system comparison with a civilian community hospital, 1:285–286  
 military metaphor, 1:283  
 new military-political imperative and, 1:286–289  
 operational conservation, 1:282–283  
 planning and the minimization of waste, 1:287  
 preservation of human resources, 1:287  
 training of medical personnel and, 1:286–287
- Constantine, Emperor  
 acceptance of Christianity, 1:223
- Contextual grid for clinical ethics, 1:47–48
- Convention for the Amelioration of the Condition of the Wounded in Armies in the Field  
 first Geneva Convention and, 2:742  
 text, 2:764–765
- Convention on the Physical Protection of Nuclear Material provisions, 1:235
- Convention on the Prohibition of the Development, Production, and Stockpiling of Bacteriological (Biological) and Toxin Weapons and on their Destruction provisions, 1:234
- Cooper, M.C.  
 nursing ethics, 2:673
- Cooper, Merlin  
 dysentery research, 2:514
- Cooperative Project Assurances  
 filing requirements, 2:581
- CORDS. *See* “Civil Operations, Revolutionary Development Support” effort
- Coser, L.A.  
 “greedy institution” conflict argument, 2:723
- Counterinsurgency programs. *See* Humanitarian assistance
- Courage  
 character trait of physicians, 1:15  
 military professionals and, 1:138, 1:142–143, 1:144
- Court cases. *See* Case studies; Legal issues; *specific cases*
- Covert and deceptive American medical experimentation  
 American popular press view of, 2:519  
 beriberi research on Philippine prison inmates, 2:511–512  
 biological warfare tests in America by the Army, 2:526–528  
 Central Intelligence Agency and “mind-altering” substances, 2:525–526  
 cholera vaccine research on Philippine prison inmates, 2:511  
 during the Cold War, 2:521–529  
 concerns about research risk and liability, 2:514–515  
 consent of the subjects, 2:513, 2:515  
 disclosure of biomedical research programs, 2:509–511  
 drug addiction research, 2:513  
 encephalitis research, 2:513  
 expansion of rules to protect research subjects, 2:519–520  
 financial compensation to subjects and their families, 2:525, 2:526  
 gas warfare agent research, 2:513–514  
 human experimentation before 1940, 2:511–513  
 human radiation experiments, 2:510, 2:523–525, 2:568–570  
 infectious disease research on civilian populations, 2:514  
 Lewisite research, 2:514  
 number of Americans who participated in medical research during World War II, 2:515  
 Nuremberg Code and the U.S. government, 2:521–523  
 Nuremberg Doctors' Trials impact, 2:516, 2:519  
 plutonium experimentation on unsuspecting patients, 2:439, 2:524–525, 2:528  
 postwar world and “crimes against humanity,” 2:516–521  
 “Project Whitecoat” biological weapons program, 2:527  
 research to support the American war effort, 2:513–515  
 secrecy and science, 2:528–529  
 trust in the government and, 2:529  
 tuberculosis vaccine testing on Colorado prisoners, 2:513

Tuskegee Syphilis Study, 2:510, 2:520–521  
The Wilson Memorandum: formalizing the use of human volunteers in Department of Defense experimental research (exhibit), 2:522–523, 2:568, 2:569–570  
yellow fever research conducted by the military, 2:511  
CPAs. *See* Cooperative Project Assurances  
Crimean War  
nurse's role, 2:663–664  
Croatia  
mobile army surgical hospital's instructions not to treat civilians, 1:186  
Cross-sectional studies  
description, 2:582  
Crouch, Rev. Archie  
description of Japanese pathogen tests on the village of Ningbo, China, 2:485  
Cruzan Case, 1:88, 1:100–102  
Cuba  
arms shipments to El Salvador, 2:783  
U.S. military psychiatric treatment of Haitian immigrants with mental illness, 2:823  
Cultural considerations. *See* Religious and cultural considerations in military healthcare; *specific cultures and countries*  
"Cultural Influences on Physician Communication in Healthcare Teams," 2:703  
Cultural issues. *See also* Military culture  
casuistry, 1:45  
definition of "culture," 1:159  
ethical systems as components of culture, 1:159  
libertarianism, 1:39  
medical ethics and, 1:17–18, 1:28, 1:54  
principlism, 1:37  
CW. *See* Chemical weapons

## D

Dachau  
hypothermia and hypoxia experimentation, 2:444–451, 2:459–461  
legacy of the experiments, 2:454–455  
Dallaire, Gen. Romeo  
posttraumatic stress disorder and, 2:825–826  
Daniels, A.K.  
psychiatry ethical conflict, 1:319  
Dartmouth College  
Medical School curricular goals for medical ethics, 1:82  
Darwin, Charles, 2:407  
"Dax" Case, 1:88, 1:96–97  
*De Jure Belli ac Pacis*, 1:224  
Decision-making algorithm for military medical ethics  
assessment of risk to the soldier, 2:856–857  
benefit to the military and, 2:856, 2:859–860  
clinical examples, 2:860–861  
military necessity and, 2:856, 2:857–859  
policy applications, 2:857–860  
simplified version for, 2:855  
Declaration of Geneva  
duties of the physician, 1:301  
medical ethics, 1:273  
medical ethics and, 2:753  
text, 2:765–766  
Declaration of Helsinki  
adoption of, 2:572  
ethical conduct of biomedical research and, 2:545  
international recognition of, 2:753  
text, 2:768–769  
Declaration of Tokyo  
international recognition of, 2:753

text, 2:770  
Deconstructionist intellectual influences  
normative and applied ethics and, 1:70  
shift in focus of medicine toward the autonomy of the patient and, 1:70–71  
Defense Technical Information Service  
nursing research literature, 2:680  
Defense Women's Health Research Program  
components, 2:555  
DeJong, C.  
dimensions of religion, 2:698  
Delphi panels  
description, 1:119  
Demonstration projects  
implementation of, 1:115–116  
Deontology  
animal experimentation and, 2:553, 2:554  
applied medical ethics and, 1:36  
autonomy as a "side constraint," 1:30, 1:38  
description, 1:29, 1:33–34  
legal consequences and, 1:111  
military role-specific ethical situations, 1:343  
principlism and, 1:72  
strengths, 1:29–30  
truth-telling case study and, 1:30, 1:31, 1:53  
utilitarianism comparison, 1:30, 1:31  
virtue theory comparison, 1:32  
weaknesses, 1:30–31  
Department of Defense Authorization Act  
informed consent and, 2:550  
Descriptive ethics  
anthropology and, 1:108  
case reports and, 1:115  
criteria for, 1:116–121  
demonstration projects and, 1:115–116  
description, 1:107–108  
descriptions of facts relevant to normative arguments, 1:113  
detached disinterest and, 1:121  
empirical question examples, 1:108  
empirical testing of normative theories, 1:114–115  
epidemiology and, 1:109  
ethics and opinion surveys, 1:110  
experimental methods, 1:120  
expert opinions and, 1:111–112  
fact/value distinction, 1:110  
forms of moral arguments, 1:113  
health services research and, 1:109  
historical facts and, 1:111  
illicit inferences, 1:111–112  
interdisciplinary nature of, 1:116  
legality and morality, 1:111  
majority opinions and, 1:111  
multimethod research, 1:119–120  
natural law theory and, 1:112  
normative ethics relationship, 1:110–116  
psychology and, 1:109  
purely descriptive studies, 1:112  
qualitative research, 1:118–119  
slippery slope arguments, 1:114  
sociology and, 1:108–109  
survey research, 1:116–118  
testing compliance with established or new norms, 1:113  
theoretical framework, 1:120  
types of studies in, 1:108–110  
Desert Rock exercises  
description, 2:569



- Desgenettes, René-Nicolas  
battlefield euthanasia, 2:386–387
- Diagnosis of local diseases  
case study, 2:812
- Diagnostic and Statistical Manual of Mental Disorders*, third edition  
posttraumatic stress disorder diagnosis and, 2:724, 2:735
- Dietary practices  
healthcare and, 2:699–700
- Disaster relief. *See* Humanitarian assistance
- Discipline  
concept of, 1:182  
“what’s right” and, 1:183
- Discretionary situations for physician-soldiers  
acquiring prejudicial information while conducting medical research, 1:351–352  
balancing the needs of the military with the needs of patients, 1:344–346  
case studies, 1:345–348  
counseling and treating soldiers with eating disorders, 1:351  
counseling and treating suicidal soldiers, 1:350–351  
counseling soldiers with HIV who endanger third parties, 1:348–350  
evaluating homosexual soldiers who have security clearances, 1:352–353  
evaluating impaired commanders, 1:345  
evaluating pilots who may be impaired, 1:344–345  
meeting the clinical needs of soldiers with psychological disorders, 1:350–351  
meeting the medical needs of homosexual soldiers, 1:353–355  
prioritizing the needs of patients over the needs of the military, 1:351–355  
problems not related to military performance, 1:347–348  
reporting soldiers with minimal substance abuse problems, 1:346–347  
violating patient confidentiality, 1:345–346
- Discrimination  
homosexuals, 1:149–152  
women and, 1:148–149
- Disobeying orders—the “risks” associated with the desire to help  
case study, 2:820
- Dix, Dorothea L.  
Superintendent of the Female Nurses of the Union Army appointment, 2:664
- DNA analysis  
DoD policy clarifying four possible uses of DNA, 2:860  
identification of soldiers’ remains, 2:855, 2:859–860  
privacy issues, 2:860  
requirement of military personnel to provide samples for, 2:860
- Dock, Lavinia, RN  
nurse’s duty, 1:83, 1:84
- DoD. *See* U.S. Department of Defense
- DOJ. *See* U.S. Department of Justice
- Doolittle Commission Report  
postwar criticism of the officer corps, 1:188
- Double-effect principle  
battlefield triage and, 1:300  
belligerents practice of hiding combatants behind noncombatants and civilians, 1:243  
conditions necessary to justify an action, 1:153  
examples, 1:242, 1:243  
principle of discrimination and, 1:241–243
- Draper Committee Report  
Military Assistance Program recommendations, 2:779
- Dreher, R.J.  
patient triage on a MEDCAP mission, 2:816
- Drug addiction. *See* Substance abuse
- DSM-III. *See* *Diagnostic and Statistical Manual of Mental Disorders*, third edition
- Dulles, Allen  
“mind-altering” substances research and, 2:525
- Dunant, Henry  
International Committee of the Red Cross formation, 2:741–742  
red cross emblem, 2:747
- DVA. *See* U.S. Department of Veterans Affairs
- DWHRP. *See* Defense Women’s Health Research Program
- Dyckerhoff, Dr.  
review of Rascher’s work, 2:447
- Dyer, G.  
historical changes in the consequences of war, 1:131–132
- Dying. *See* Physician-assisted suicide; Right-to-die movement
- Dysentery  
research on civilian populations, 2:514
- ## E
- E. coli*  
Japanese experimentation on infants, 2:495
- Eating disorders  
counseling and treating soldiers with, 1:351
- Ebola virus  
military investigators and, 2:539
- Education. *See also* Training  
clinical ethics education, 1:79–83, 1:88  
demonstration projects and, 1:115–116  
establishment of permanent schools for advanced military education in the United States, 1:137  
graduate degrees from civilian schools for officers, 1:140  
objectives of the educational process, 1:140  
scholarships for medical education, 1:324  
senior service colleges for officers, 1:139–140  
specialized education and training for military professionals, 1:139–140, 1:323
- Education Development Center, Inc.  
“Decisions Near the End of Life” bioethics education program, 2:678
- Effacement of self-interest character trait of physicians, 1:14
- Eikenberry, K.W.  
operational conservation, 1:282–283, 1:284
- Eisenhower, Pres. Dwight  
Code of Conduct for Members of the Armed Forces of the United States, 1:144, 1:145  
Draper Committee and, 2:779
- Eitelberg, M.J.  
identicalism, 1:206
- El Salvador  
Castro’s influence in, 2:783  
decrease in mortality rate of wounded soldiers, 2:794  
El Salvadoran Armed Forces (ESAF) increase, 2:783  
foreign military observership program, 2:795  
guerilla force emphasis on small ambushes and the use of land mines, 2:783, 2:785  
military medicine in security assistance training programs, 2:792–795  
random guerilla attacks, 2:783  
rotation of Salvadoran medical personnel to service in U.S. Army hospitals, 2:795  
Security Assistance Program funding for Foreign Military Sales, 2:783, 2:793  
training of nursing and biomedical equipment maintenance

- nance personnel, 2:793
- trauma surgery system, 2:793
- El Salvadoran Armed Forces
  - approval of a small medical civic action program, 2:794
  - change in guerilla tactics and, 2:783, 2:785
  - demoralization of, 2:792
  - inadequate number of medical facilities, 2:792–793
  - increase in, 2:783
  - increased mortality rate, 2:792
  - lack of dedicated field medical evacuation assets and trained medical aid men, 2:792
  - land mine injury reduction program, 2:794
  - preventive medicine and field sanitation programs, 2:794
  - Professional Rehabilitation Center inauguration for the care of physically handicapped soldiers, 2:794
  - vaccination program, 2:794
- Elderly persons
  - anthropological studies of societies' treatment of, 1:112
  - ethics theories and, 1:35
- Ellis, A.
  - view of religion, 2:696
- Emergency War Surgery*
  - triage definition, 2:380–381
  - triage guidelines (exhibit), 2:382–383
- Empirical research on medical ethics. *See also* Research
  - biases in, 1:120–121
  - criteria for good descriptive ethics, 1:116–121
  - descriptive ethics, 1:107–123
  - detached disinterest and, 1:121
  - disciplines contributing to, 1:107
  - empirical question examples, 1:107
  - metaethics, 1:107
  - military medicine and, 1:122
  - normative ethics, 1:107, 1:112–116
  - relationship between descriptive and normative ethics, 1:110–116
  - resources in ethics, 1:121–122
  - theoretical framework, 1:120
  - types of empirical inquiry, 1:107–108
  - types of studies in descriptive ethics, 1:108–110
- Encephalitis
  - St. Louis encephalitis research by the United States on prisoners, 2:513
- Encyclopedia of Bioethics*, 1:63
- Endo Shusaku
  - novel about vivisection, 2:468
- Engel, G.L.
  - definition of medicine in terms of its knowledge base, 1:71
- Engelhardt, H.T., Jr.
  - philosophy as the queen of sciences, 1:27
  - primacy of autonomy, 1:39
  - principlism, 1:36
  - "taken-for-granted sense of moral propriety," 2:867
- Entrepreneur model of the patient-physician relationship, 1:8–9
- Epidemiological studies
  - access to data without subjects' consent and, 2:584
  - case-control studies, 2:582–583
  - cohort studies, 2:583
  - communication of study results, 2:584
  - community informed consent, 2:584, 2:845
  - confidentiality and, 2:585, 2:859
  - conflicts of interest and, 2:585
  - control groups and, 2:586
  - cross-sectional studies, 2:582
  - description, 2:582
  - ethical principles applied to, 2:583–585
  - ethical review procedures for, 2:586
  - facilitating accurate epidemiological studies of HIV in the military, 1:352–353
  - harms and wrongs caused by, 2:584–585
  - homosexual soldiers in, 2:859
  - individual informed consent and, 2:583–584
  - random allocation and, 2:586
  - randomized controlled trials, 2:583
  - representation of the community and, 2:586
  - respect for social mores and, 2:585
  - scientific integrity and, 2:586
  - "stopping rules" for, 2:586
  - types, 2:582
- Epidemiology
  - description, 1:109
  - do not resuscitate (DNR) order frequency, 1:109
- EPWs. *See* Prisoners of war
- ESAF. *See* El Salvadoran Armed Forces
- Ethics committees
  - advantages and disadvantages over a single consultant, 1:79
  - confidentiality issues, 1:78
  - conflicts of interest and, 1:78
  - functions, 1:78
  - guidelines for operation, 1:78
- Ethics consultation
  - disagreements between lawyers and ethics consultants, 2:862
  - goals, 1:77
  - service responsibilities of the ethicist, 1:77–78
- Ethnographic analysis
  - description, 1:119
- Euthanasia. *See also* Physician-assisted suicide
  - battlefield uses, 1:122, 2:384–394
  - case studies, 2:385, 2:387–388, 2:391
  - civilian example from a battlefield setting, 2:387–388
  - contemporary philosophers and, 1:7
  - as a continuing medical practice, 2:414–415
  - destruction of "lives not worth living," 2:413–414
  - a doctor's reflections (exhibit), 2:390
  - durability of the request for, 2:393
  - economic argument for, 2:413–414, 2:417
  - ethical analysis of options, 2:389–394
  - history of battlefield euthanasia, 2:386–387
  - libertarianism and, 1:39–40
  - link between euthanasia and "The Final Solution," 2:415
  - methods of, 2:390, 2:392
  - military policy *vs.* practicality, 2:394
  - military-specific ethical analysis, 2:393–394
  - Nazi Germany and, 2:413–415
  - in the Netherlands, 2:393
  - the Netherlands and, 1:109
  - patients who are unable to participate in the decision-making process and, 2:390–391
  - principle-based ethical analysis, 2:389–392
  - "slippery slope" issues, 2:393
  - Swann scenario, 2:384–385, 2:388–394
  - utilitarian ethical analysis, 2:392–393
  - virtue theory and, 1:32
  - who should perform, 2:390
- Evaluation of Humanistic Qualities in the Internist*, 1:74
- Evans, Everett I.
  - request for classification of his research on radiation burns, 2:528
- Existential ethics
  - external morality example, 1:10
- Extended separatism
  - academia and, 1:203, 1:211
  - business and industry and, 1:203

- convergence policy, 1:202–203  
 costs of isolation, 1:210–211  
 description, 1:202  
 fictional officer General Separon's thoughts on, 1:203, 1:209  
 flaws of, 1:209–211, 1:214, 1:217  
 fusionism and, 1:206–207  
 military virtues and, 1:203  
 paternalistic separatism and, 1:204  
 societal change and, 1:210  
 strategies for dealing with society's institutions, 1:202–203  
 technological change and, 1:210
- External morality  
 clinical encounter and, 1:13–16  
 description, 1:10, 1:13
- Extreme conditions model of triage  
 autonomy of the soldier and, 2:383–384  
 description, 2:383  
 military doctrine and, 2:384  
 noncombatant casualties and, 2:38
- ## F
- Fact of illness  
 patient-physician relationship and, 1:11–12, 1:13
- Fact/value distinction, 1:110
- Faden, Ruth  
 Advisory Committee on Human Radiation Experiments  
 head, 2:524
- Falklands War  
 coded weather information, 2:750
- Families  
 caring for families and the efficiency of the unit, 1:168–169  
 information for families—Operation Just Cause (exhibit), 1:169  
 as sources of anxiety for service members, 1:168–169
- Faulkner, J.  
 dimensions of religion, 2:698
- FDA. *See* U.S. Food and Drug Administration
- Federal Employees Health Benefits Program  
 military retirees and, 2:728
- Federalwide Assurances  
 filing requirements, 2:581
- FEHBP. *See* Federal Employees Health Benefits Program
- Feldshuh, D.  
 attitude of the researcher toward the volunteers in the  
 Tuskegee Syphilis Study, 2:567
- Feminist ethics. *See also* Women  
 caring ethics and, 1:43–44  
 communitarian ethics and, 1:43  
 external morality example, 1:10  
 forms of, 1:43–44  
 strengths and weaknesses, 1:44  
 truth-telling case study and, 1:43, 1:53
- Feres Doctrine  
 description, 2:588
- Feudal system  
 chivalry and, 1:134  
 foot soldiers and, 1:134  
 knightly orders, 1:134, 1:135  
 loyalty and, 1:134–135
- Fidelity character trait of physicians, 1:14
- Field Manual 8-55  
 medical battlefield rules (exhibit), 2:374, 2:377–378
- Final Report of the Advisory Committee on Human Radiation Experiments*, 2:568
- "The Final Solution"  
 link between euthanasia and, 2:415, 2:440, 2:441  
 Wannsee Protocol text, 2:431–434
- Finch, Clement  
 blood preservation research, 2:519
- Finke, [first name not provided]  
 hypothermia and hypoxia research, 2:444–450
- Fischer, Eugen  
 Kaiser Wilhelm Institute for Anthropology director, 2:410
- Fitzgerald, A.E.  
 waste and fraud in defense spending, 1:211
- Flanagan, O.J.  
 basis of gender differences, 1:44
- Fletcher, John C.  
 clinical ethics description, 1:63  
 goals of ethics consultants, 1:77  
 principlism and, 2:693
- Fletcher, Joseph F.  
 original use of the term "clinical ethics," 1:63, 1:64
- FMS program. *See* Foreign military sales program
- Focus groups  
 group methods, 1:119
- Following orders  
 action's effect on each human involved and, 1:264  
 Army's position on, 1:262, 1:264–265  
 case studies, 1:263–265  
 factors to consider, 1:264  
 immoral orders, 1:262–263, 1:264–265  
 knowledge of international law and, 1:262  
 orders which soldiers must follow, 1:261–262  
 overall consequences of the action and, 1:264  
 problematic cases, 1:262–263  
 refusal to obey illegal orders, 1:141–142, 1:261, 1:262, 1:263–264
- Ford, Loretta  
 education of nurse practitioners, 2:667
- Ford, Pres. Gerald  
 apology to Olson's family for the CIA's research, 2:526  
 appointment of the Rockefeller Commission to investigate  
 clandestine testing by the CIA and Department of  
 Defense, 2:526  
 Executive Order on Intelligence Activities, 2:526  
 executive order renouncing the first use of herbicides in  
 war, 1:234
- Foreign military sales program  
 humanitarian assistance funding, 2:775, 2:793
- Former Soviet Union  
 agreements on the reduction or elimination of specified  
 types of nuclear missiles and warheads, 1:235  
 American Relief Administration disaster relief to, 2:778  
 claim that AIDS was a biological war product engineered  
 by U.S. Army scientists, 2:733  
 Cold War role, 2:492  
 "hotline" agreements on nuclear weapons use, 1:234–235  
 interest in Japanese World War II biomedical experimenta-  
 tion results, 2:492  
 involuntary testing of assassination weapons on prisoners,  
 2:465  
 Japanese biomedical experimentation and, 2:484, 2:486  
 "no first use" principle and, 1:235
- Four-dimension grid for clinical ethics, 1:50–51
- Fox, Renee  
 contributions to descriptive ethics, 1:108
- France  
*Ecole Militaire Supérieure* establishment, 1:136  
 honor concept and, 1:170–171  
 notion of freedom and the *levée en masse*, 1:136  
 regimental system introduction, 1:135
- Freud, S.  
 view of religion, 2:696
- Frick, Wilhelm

twin studies, 2:410  
Fried, C.  
deontology and utilitarian theory comparison, 1:30  
Friedell, Dr. Hymer  
plutonium research on human subjects and, 2:524  
recommendation for declassification of plutonium research, 2:528  
Friedenberg, Edgar Z.  
corruption of weakness, 1:172  
Fromm, E.  
"character" definition, 1:159  
Frostbite research. *See* Japanese biomedical experimentation during the World-War-II era; Nazi hypothermia and hypoxia research  
Fry, S.T.  
ethic of care for physicians, 2:693  
Fukumi Hideo, Dr.  
*E. coli* experimentation on infants, 2:495  
Fundamental Rules of International Humanitarian Law  
Applicable in Armed Conflicts  
text, 2:771  
Fushita Shigeo, Lt.  
Japanese biomedical experimentation role, 2:488, 2:490  
Fusionism  
academia and, 1:208  
benefits of, 1:217  
business and industry and, 1:214  
CNN paradox, 1:208  
description, 1:206–207  
distinction between product and process technologies, 1:208  
fictional General Futon's thoughts on, 1:209, 1:214  
flaws of, 1:214, 1:215, 1:217  
honest speakers being taken advantage of by more manipulative linguistic partners, 1:217  
identicalism and, 1:205, 1:206, 1:209  
liberal democratic tradition and, 1:217  
mass media and, 1:208–209, 1:214  
medicine analogy, 1:207  
military secrets and, 1:207  
modern military activity and, 1:207–208  
naiveté of, 1:214, 1:217  
openness and, 1:207, 1:209, 1:214  
paternalistic separatism and, 1:207  
separatism and, 1:206–207  
Futagi Hideo  
postwar activities, 2:494  
Futile treatments  
beneficence-in-trust and, 1:41  
patient-physician relationship and, 1:16  
Future issues affecting individuals  
a case study in logistics (exhibit), 2:837–838  
Lazarus Project, 2:844–846  
pharmacological optimization for the battlefield, 2:840–844  
societal obligation to protect soldiers as much as possible, 2:836  
telemedicine/telepresence surgery, 2:838–840  
Future issues affecting policy  
"bloodless war," 2:835–836  
nonlethal weapons, 2:833–835  
FWAs. *See* Federalwide Assurances

## G

Gallop, R.  
nursing ethics, 2:673  
Gallup survey  
Americans' religious beliefs, 2:695

GAO. *See* U.S. General Accounting Office  
Garritson, S.H.  
beneficence principle, 2:673  
Gebhardt, Dr.  
review of Rascher's work, 2:447  
Gelven, M.  
justification for the suffering of a battlefield, 1:132  
Gender issues. *See also* Men; Women  
gender bias in selecting research subjects, 2:556–557, 2:558  
human volunteers in military biomedical research, 2:579  
military care issues related to military spouses and children, 2:728–729  
societal influences and the ethics of military healthcare and, 2:725–729  
General inspections  
military culture and, 1:181  
General Social Survey  
religious activity and life satisfaction, 2:697  
Genetic Health Courts, 2:410  
Geneva Conventions. *See also* Protocols I and II  
as an international law of war, 1:143, 1:154  
banning of weapons that cause indiscriminate and unnecessary suffering, 2:833  
belligerent occupation provisions, 1:237  
caring for the wounded and sick, 2:754–755  
Convention for the Amelioration of the Condition of the Wounded in Armies in the Field, 2:742  
conventions currently in effect, 2:743  
conventions included, 1:301  
definition of medical personnel, 2:744–745  
definition of wounded and sick, 2:743–744  
Dunant's role, 2:741–742  
humanitarian assistance and, 2:801, 2:807  
irregular combatants and, 2:743–744  
Law of Land Warfare and, 1:301  
leaving the wounded and sick behind, 2:756–757  
locating and collecting the wounded and sick, 2:754  
medical ethics and, 2:752–754  
medical records and, 2:755–756  
medical units, medical transports, and their identification, 2:747–752  
nondiscrimination principle, 2:755  
occupying force obligations, 2:757  
physical mutilation prohibition, 2:758  
physician involvement in developing nonlethal weapons, 2:834  
physician participation in interrogation of prisoners of war, 2:394–398  
prisoner of war treatment provisions, 1:225, 1:236–237, 1:238, 1:316, 2:380  
protection of the wounded and sick, 1:237, 2:824  
provision of care to enemy soldiers, 1:302  
provision of wartime healthcare, 2:702–703  
purposes of, 2:743  
resistance movements and, 1:238  
Resolutions of the Geneva International Conference, October 1863, 2:763–764  
responsibilities of medical personnel, 2:754–759  
retention of medical personnel, 2:746  
revisions to, 2:742–743  
rights of captured medical personnel, 2:371, 2:745–746  
scientific experiment prohibition, 2:758  
separation of the military and medical care functions, 1:303  
specific protections and obligations of medical personnel, 1:301  
surgery without consent prohibition, 2:758



- teaching of, 1:301  
 torture prohibition, 2:757–758  
 transplantation of tissue or organs prohibition, 2:758
- Geneva Gas Protocol  
 prohibitions against the use of chemical or biological agents, 1:225, 1:234  
 United States' ratification of, 1:234
- Geneva Protocol Relating to the Victims of International Armed Conflict  
 belligerent status and, 1:231–232
- Genocide program  
 link between euthanasia and, 2:415  
 Wannsee Protocol text, 2:431–434
- Georgetown Case, 1:88, 1:93
- German Medical Association  
*Der Erbarzt* journal, 2:410–411  
 "Solving the Jewish Question" column, 2:415
- Germany. *See also* Nazi hypothermia and hypoxia research; Nazi medical ethics; Nazis  
 atrocities during the invasion of Russia, 1:172, 1:174  
 establishment of the *Kriegsakademie*, 1:136  
 history of German medicine in the 1920s and 1930s, 2:405  
*Kriegsraison* doctrine, 1:231  
 officer corps development, 1:136  
*Ophelia* hospital ship capture, 2:750  
 politicization of German medicine, 2:405  
 timeline of political and medical events in Germany, 1918–1945, 2:422–425  
 universal conscription concept, 1:136  
 U.S. postwar policies in, 1:230  
 values requiring soldiers to behave in ways Americans perceive to be atrocious, 1:178  
 war-guilt clause of the Versailles Treaty, 1:224–225  
*Wehrmacht* and truth in reporting, 1:163, 1:164  
 World War I hunger blockade of, 1:241
- Gert, B.  
 principlism criticism, 1:36, 1:38
- The ghetto hospital  
 case study, 2:387–388
- Gilligan, Carol  
 care/justice tension in nursing ethics, 2:673  
 criticism of Kohlberg's schema of moral development, 1:109  
 patterns of moral reasoning research, 1:44
- Gillon, R.  
 principlism, 1:37
- Glanders  
 Japanese biomedical experimentation on, 2:478, 2:483  
 postwar epidemics of, 2:487
- Glaser, J.W.  
 unidimensional grid for clinical ethics, 1:48–50
- Glasgow, Scotland  
 religious activity and illness survey, 2:697
- Gonorrhea  
 human experimentation, 2:515
- "Good intentions" left in the latrine  
 case study, 2:813–814
- Goodrich, Annie W.  
 appointment as Chief Inspector Nurse of the Army, 2:665
- Goring, Hermann  
 hypothermia and hypoxia research and, 2:441
- Gorman, Gen. Paul F.  
 agenda in Honduras, 2:786  
 Central American humanitarian assistance programs role, 2:785  
 initiative in attaching a military hospital that provided care to Hondurans, 2:788  
 initiative to use medical assets in SOUTHCOM to also care for Honduran soldiers and civilians, 2:791–792
- Gottleib, Sidney  
 CIA "mind-altering" substances research and, 2:526
- Gould, Jay  
 ethics and science relationship, 2:452
- Graber, G.C.  
 types of ethical judgments, 1:27  
 unitary theory of medical ethics, 1:47
- Grawitz, Ernst  
 experiments with pathogens to test homeopathic preparations, 2:416
- Gray, J.G.  
 appeals of war, 1:278
- Greece  
 selection and training of torturers, 2:396
- Green Cross blood supply scandal, 2:494, 2:495
- Grid models for clinical ethics  
 Glaser's unidimensional grid, 1:48–50  
 Siegler's four-dimension grid, 1:50–51  
 Thomasma's contextual grid, 1:47–48
- Grodin, Michael  
 Nuremberg Doctors' Trials comments, 2:516, 2:518
- Grotius, Hugo  
 war-conduct law and, 1:224
- Grundstein-Amando, R.  
 nursing ethics, 2:673
- Guatemala  
 insurgency in, 2:785
- "Guidelines for Implementing the Code for Nurses," 2:667
- "Guidelines on Reporting Incompetent, Unethical or Illegal Practice," 2:681
- Guillotines, Andre  
 painless execution law, 2:395
- Gustafson, J.M.  
 criticism of principlism, 1:38
- Guttentag, Otto  
 protection of research subjects and, 2:519–520

## H

- Hackett, Gen. J.W.  
 feudal knights' social position, 1:134  
 mercenary soldiers, 1:135
- Hague Conventions  
 as an international law of war, 1:143  
 basis for contemporary law of land warfare, 1:225  
 belligerent occupation provisions, 1:237  
 chemical weapons prohibition, 1:233  
 cluster bomb units and, 1:233  
 definition of wounded and sick, 2:743  
 "dumdum" bullets and, 1:232  
 minimization of "superfluous suffering," 1:232  
 protection of prisoners of war, 1:236  
 protection of the wounded and sick, 1:237
- Haiti  
 military dominance of government, 1:138  
 U.S. military psychiatric treatment of Haitian immigrants with mental illness, 2:823  
 voodoo belief system, 2:701, 2:702
- Hallucinogens  
 human experiments on the effects of, 2:526, 2:545, 2:548–549, 2:570
- Hamaguchi Osachi, Prime Minister (Japan)  
 assassination of, 2:473
- Hamilton, Dr. Joseph  
 plutonium research, 2:525
- Hamman, Louis

- ethics as intrinsic to the practice of medicine, 1:68
- Hantaan virus
  - military investigators and, 2:539
- Hareyama Yoshio
  - Japanese biomedical experimentation role, 2:481
- Haritos-Fatouros, Mika
  - torturer selection process in Greece, 2:396
- Harkness, Jon
  - history of blood substitute research, 2:515
- Harm principle of autonomy
  - All Volunteer Force of the Army and, 1:256
  - Army's mandate and, 1:256
  - borrowing from others example, 1:254
  - boxing example, 1:253–254
  - description, 1:253, 1:255
  - military mission and, 1:256
  - rollerblading example, 1:254
- Hasson, Esther V.
  - Navy nurse responsibilities, 2:665
- Hastings Center
  - "Decisions Near the End of Life" bioethics education program, 2:678
- Hays, Isaac
  - AMA's ethics code, 1:66
- Health Insurance Portability and Accountability Act
  - patient record confidentiality and, 2:589, 2:839
- Health services research
  - contributions to descriptive ethics, 1:109
- Healthcare professionals. *See also* Nurses; Physician-soldiers; Physicians
  - resentment of the intrusion of philosophers, 1:72
- Heath maintenance organizations. *See* Managed care
- Heaton, Surgeon Gen. Leonard D.
  - medical civic action programs, 2:782
- Hefelmann, Hans
  - doctors and the euthanasia program, 2:419
  - exportation of Jews to Madagascar, 2:415
- Hellegers, Andre
  - Kennedy Institute of Ethics and, 1:73
- Hemorrhagic fever with renal syndrome
  - military investigators and, 2:539
- Hendin, Dr. Herbert
  - euthanasia in the Netherlands, 1:114
- Henle, Werner
  - influenza vaccine research, 2:514
- Hermeneutical clinical ethics
  - description, 1:46
- Herrington, S.A.
  - cultural empathy lack in U.S. nation-building efforts, 2:781–782
- Hersch, Seymour
  - Persian Gulf War article, 2:455
- Heydrich, Reinhard
  - Wannsee Protocol meeting chair, 2:431
- Hezbollah
  - example of strong community raising persons considered reprehensible by others, 1:31
- HFRS. *See* Hemorrhagic fever with renal syndrome
- HHS. *See* U.S. Department of Health and Human Services
- Higashikuni Naruhiko, Prince (Japan)
  - biomedical experimentation role, 2:469
- High-altitude experiments. *See* Japanese biomedical experimentation during the World-War-II era; Nazi hypothermia and hypoxia research
- Himmler, Heinrich
  - hypothermia and hypoxia research and, 2:441–450, 2:459–461
- Hindu religion
  - religious symbols, 2:699
- HIPAA. *See* Health Insurance Portability and Accountability Act
- Hippke, Dr.
  - hypothermia and hypoxia research, 2:442, 2:443
- Hippocrates
  - epilepsy description, 1:274
  - request from Artaxerxes II, King of Persia, to provide care for Persian soldiers, 1:302–303
- Hippocratic Oath
  - bioethics challenge to, 1:7
  - duty of the physician to his patient, 1:284
  - ethical code example, 1:11
  - ethical principles central to, 1:273
  - euthanasia and, 2:391, 2:393
  - formal philosophical reflection on, 1:7–8
  - Hippocratic Corpus, 1:5
  - Japanese doctors and, 2:474
  - origination of, 1:5
  - paternalism and, 1:273
  - physician as helper and healer model of the patient-physician relationship, 1:9–18
  - physicians' development of nonlethal weapons and, 2:834
  - postmodernism challenge to, 1:7
  - precepts, 1:64
  - professional philosophers' challenge to, 1:6
  - sociopolitical upheaval of the 1960s and, 1:5–6
  - text of, 1:6
  - virtue theory and, 1:43
  - Western medicine and, 1:65
- Hirano Einosuke, Capt.
  - Japanese biomedical experimentation role, 2:488, 2:490
- Hirohito, Emperor (Japan)
  - commendation to biological warfare units, 2:486
  - exploitation of his status as a symbol of the nation by militarists, 2:471, 2:474
  - Imperial decree creating the Anti-Epizootic Protection of Horses Unit, 2:480
  - Imperial decree establishing the *Boeki Kyusui Bu*, the Anti-Epidemic Water Supply and Purification Bureau, 2:478
  - role in biomedical experimentation, 2:468–470
- Hirt, Dr. August
  - review of Rascher's work, 2:447
- Historical background
  - America's religious traditions, 2:691–693
  - Central America in the late 1970s and early 1980s, 2:783, 2:785
  - clinical ethics, 1:64–73
  - early nursing ethics, 2:663–665
  - Geneva Conventions, 2:741–743
  - German medicine in the 1920s and 1930s, 2:405
  - historic relation of just war doctrine and the international law of war, 1:223–226
  - human volunteers in military biomedical research, 2:568–572
  - humanitarian assistance, 2:777–796, 2:798–800
  - International Committee of the Red Cross emblems, 2:747
  - justice principle, 1:37
  - medical ethics, 1:5–7
  - medical transportation, 1:70
  - medicine and religion, 2:696
  - military professionals, 1:131–136
  - physician-soldiers, 1:271
  - prohibition against poisoning water supplies, 1:223
- Hitler, Adolf. *See* Nazi medical ethics; Nazis



- HIV. *See* Human immunodeficiency virus
- HMOs. *See* Managed care
- Hoberg, A.  
risk of ill health among female military personnel, 2:726–727
- Holistic health paradigms, 2:702
- Holmes, R.L.  
criticism of principlism, 1:38
- Holy days, 2:699
- Holzloehner, Prof.  
hypothermia and hypoxia research, 2:443–450, 2:459–461
- Homosexuality  
AIDS and associated healthcare costs, 1:151  
American fundamental social values and, 1:151  
as a basis for discharge, 1:150–151, 1:352, 1:355, 2:859  
behavioral components, 2:731  
commander's request to review patients' charts to gain information about, 1:335  
confidentiality for soldiers in epidemiological studies, 2:859  
courts' view of the special status of the military and, 1:150  
defense for exclusionary practices, 1:191  
discrete homosexuals, 1:191  
"don't ask, don't tell" policy, 1:149, 2:731, 2:732  
impact of HIV/AIDS, 2:731–732  
increased tolerance for, 2:729–730  
integration of African-Americans and acceptance of women and acceptance of in the military, 2:729, 2:731, 2:736  
meeting the medical needs of homosexual soldiers, 1:353–355  
military culture and, 1:191–192  
security clearances and, 1:352–353  
social controversy over, 1:150  
societal views of, 2:729–730  
as a threat to the general military population, 1:151–152  
unit cohesion and, 1:151, 1:352  
warnings from physicians about self-incriminating information, 1:354  
writing euphemisms on medical charts and, 1:350
- Honduras  
development of medical civic action activities as part of medical exercises for deployed U.S. medical personnel, 2:783  
humanitarian assistance mission, 2:785–786, 2:796, 2:816  
Joint Task Force-Bravo MEDCAP mission, 2:816  
joint training exercises, 2:786  
Medical Readiness Training Exercise services, 2:788–789  
Military Assistance Program and, 2:792  
nation building activities, 2:785  
overproduction of physicians, 2:797  
president's fear of the spread of HIV/AIDS by U.S. troops, 2:786  
reasons why the United States should deploy troops to, 2:785  
SOUTHCOM model for military medicine in civic action programs, 2:791–792  
U.S. military medical units in (exhibit), 2:787  
vaccination program, 2:796
- Honig, C.R.  
standard for scientific inquiry, 2:452
- Honor  
care of subordinates component, 1:165–170  
command climate that fosters security and, 1:172  
definition of the concept, 1:160  
integrity component, 1:160–165  
is the unit the team, or is the officer corps the team? (exhibit), 1:171  
loyalty and, 1:172  
perversions of honor, 1:170–172
- Hood, C.H.  
criteria for planning, executing, and evaluating medical civic action programs, 2:815
- Hooker, Worthington  
therapeutic privilege and, 1:66–67
- Hopkins, J.E.T.  
returning sick soldiers to duty, 1:339
- Hopkins Case, 1:88, 1:93–94
- Hospital ships  
conversion of merchant ships to, 2:751  
Geneva Conventions and, 2:750–751  
humanitarian assistance and, 2:821  
size of, 2:750–751
- Howland, Dr. Joseph  
plutonium research on human subjects and, 2:524
- Huet-Vaughn, Capt. Yolanda  
situational pacifism case study, 1:260, 1:307, 1:312, 1:318
- Human experimentation. *See also* Animal experimentation; Human volunteers in military biomedical research; Research conducting appropriate research (exhibit), 2:453  
covert and deceptive American medical experimentation, 2:509–529  
Geneva Conventions and, 2:758  
government support and researcher responsibility, 2:439  
Japanese biomedical experimentation during the World-War-II era, 2:450, 2:465–506  
national interest as a rationale for, 2:439–444  
Nazi hypothermia and hypoxia research, 2:439–461  
Nazi medical experiments on human subjects, 2:415–417, 2:439–461  
Nazi racial hygiene movement and, 2:410  
uncovering the process in Germany, 2:441–444  
unethical experiments, 2:439  
United States plutonium research, 2:439, 2:524–525  
use of soldiers as research subjects, 2:538, 2:547, 2:551
- Human immunodeficiency virus. *See also* Acquired immunodeficiency syndrome  
facilitating accurate epidemiological studies in the military, 1:352–353  
Honduran president's fear of the spread of HIV/AIDS by U.S. troops, 2:786  
impact of within the military, 2:731–732  
military policy on reporting, 1:348  
military policy regarding, 2:732–733  
military research program, 2:536  
protecting identified third parties, 1:348–349  
protecting unidentified third parties, 1:349–350  
protection of people in foreign countries from HIV/AIDS infection by service persons, 2:732  
reporting requirements, 1:353  
treatment progress, 2:731
- Human radiation experiments  
documentation of, 2:510  
ethical problems, 2:568–570  
informed consent and, 2:548–549  
openness policy about, 2:523–524, 2:528  
overcoming the fear of radiation and, 2:569  
plutonium research, 2:439, 2:524–525, 2:528  
radioactive isotopes to tag molecules for the study of iron metabolism, 2:525
- "Human Rights Guidelines for Nurses in Clinical and Other Research," 2:679
- Human systems technology research, 2:537–538
- Human volunteers in military biomedical research

- assurance filing, 2:581
  - attitude of the researcher towards the volunteer, 2:567
  - the *Belmont Report* and, 2:572–580
  - civilians who are not government employees, 2:596–597
  - classified research, 2:595–596
  - the Common Rule, 2:580–581
  - deception in, 2:595
  - development of the Natick, MA, climatic research program, 2:570–572
  - disagreement between the commander and the IRB and, 2:593–594
  - electronic data, 2:597
  - epidemiological study considerations, 2:582–583
  - ethical guidelines governing, 2:572–581
  - ethical problem situations, 2:567
  - example of a program, 2:597–600
  - fear of war and, 2:594
  - Feres Doctrine and, 2:588
  - food preference research, 2:590, 2:595
  - foreign participants and, 2:591
  - fundamental rules for research, 2:566
  - gender issues, 2:579
  - historical background, 2:568–572
  - human radiation experiments, 2:568–570
  - “I-thou” relationship and, 2:567
  - incentives to participate, 2:592, 2:596–597
  - investigator responsibilities, 2:591
  - military rank issues, 2:589–590
  - military regulations pertaining to, 2:587–594
  - officers and enlisted personnel mixture, 2:579–580
  - patient record confidentiality, 2:588–589
  - pressure on investigators and, 2:567
  - pressure to participate and, 2:590–591
  - racial issues, 2:579
  - rapid deployment to areas with extreme heat, cold, or altitude and, 2:593
  - research and therapy comparison, 2:565–566
  - “research” definition, 2:565
  - research team member participation, 2:592
  - research
    - vs.* public health practice: when does a study require IRB review? (exhibit), 2:574–577
  - research with no direct benefit for the test subject, 2:592–593
  - risk and reward perception, 2:594
  - scientific reviews, 2:587–588
  - special compensation programs, 2:596–597
  - special ethical problems, 2:589–594
  - special features of military regulations, 2:587–588
  - stress pay, 2:596
  - use of data obtained without consent, 2:581–582
  - “volunteer” definition, 2:567, 2:591
  - vulnerable populations and, 2:577, 2:587, 2:591
- Humanitarian assistance
- after World War II, 2:778–779
  - aftermath of the Vietnam War and, 2:782–783
  - aspects of providing civilian medical care during contingency operations, 2:818–820
  - beginnings of (1900-1945), 2:777–778
  - beginnings of military civic action doctrine, 2:779–780
  - benefit of military medical forces providing, 2:807
  - benefits of for host countries, 2:796–797
  - caregiver care, 2:825–828
  - case studies, 2:810–812, 2:813–814, 2:815, 2:817, 2:818, 2:819, 2:820, 2:821, 2:822, 2:824
  - changing concept of nation building (1975-2000), 2:782–796
  - chronic diseases and, 2:822
  - Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in disaster relief (exhibit), 2:820
  - concept of counterinsurgency, 2:779
  - conflict-related contingency operations, 2:808, 2:818–825
  - constraints on the ability to provide quality diagnostic and medical care, 2:814
  - controversies over, 2:775
  - coordination with host governments and, 2:815
  - criticisms of, 2:775–776
  - cultural sensitivity and, 2:817, 2:824
  - dearth of international law, policy guidance, and doctrine for, 2:807
  - equipment and staffing problems associated with treating civilians and children, 2:817
  - establishment of mission priorities and their implementation, 2:822–824
  - establishment of quality peacetime engagement programs, 2:815–816
  - “expendable supplies” and, 2:797
  - formalization of DoD’s role in, 2:788–791
  - healthcare for civilians used to legitimize military operations, 2:809–810
  - historical background, 2:777–796, 2:798–800
  - hospital ship deployment, 2:821
  - identifying potential problems early, 2:816
  - impact of in Central America, 2:796–798
  - impact on the local population, 2:817
  - implementation of civic action programs in Southeast Asia and Vietnam, 2:780–782
  - inability to provide long-term assistance, 2:814
  - inadequate implementation of, 2:797
  - included programs, 2:775
  - inclusion of host-nation healthcare professionals, 2:801
  - joint training exercises with the host country, 2:781, 2:786
  - language difficulties and, 2:812–813
  - legal and moral basis for, 2:766–767
  - lessons learned from, 2:816
  - limited coordination with other caregivers, 2:798
  - local customs and capabilities and, 2:815
  - long-term care concerns, 2:822–823
  - low-intensity conflict doctrine and, 2:783
  - medical mobile training teams, 2:775
  - medical resource allocation and, 2:820–822
  - “Medical Rules of Engagement” and, 2:819, 2:826
  - medication compliance, 2:813
  - medication swapping, 2:813
  - meeting emergent needs in disaster relief operations, 2:816–818
  - military medicine in security assistance training programs in El Salvador, 2:792–795
  - misidentifying a training exercise as a “civic action” project, 2:798
  - misunderstanding of the concept of, 2:797
  - nation/building/counterinsurgency programs (1945-1975), 2:778–782
  - nation building in Central America, 2:783–796
  - necessary actions for a successful medical humanitarian project (exhibit), 2:814
  - need for planning to anticipate the potential problems accompanying, 2:828
  - negative outcomes as a result of the host country’s unrealistic expectations, 2:801
  - nongovernmental agencies and, 2:800, 2:801
  - patient-physician relationship and, 2:812–814
  - peacekeeping operations by U.S. military forces and, 2:776
  - peacetime engagement projects and disaster relief

- operations, 2:808, 2:810–818
- peacetime projects as a means of introducing a foreign nation to the U.S. military, 2:810
- pitfalls of peacetime engagement projects, 2:810–815
- the pitfalls of peacetime engagement projects (exhibit), 2:811
- planned provision of care and, 2:810
- political pressure within the United States for, 2:809
- preparing military medical personnel for, 2:826–827
- present and future of nation building (2001), 2:798–800
- principles governing, 2:776
- problems associated with, 2:797–798
- problems with donations of medical goods, 2:818
- project coordination and accountability, 2:795–796
- psychiatric disorders and, 2:823–824
- quality of care concerns, 2:815
- reasons for U.S. military involvement in, 2:808–810
- reentering “normal” society and, 2:827
- respect for American medicine and, 2:800–801
- security issues in conflict-related contingency operations, 2:824–825
- Special Forces role, 2:780, 2:782–783, 2:788, 2:798
- support for civilian government and, 2:777
- term “civic action” to replace “medical readiness training exercises,” 2:792
- training benefits to the U.S. military medical forces, 2:810, 2:814–815
- training programs, 2:781
- types of military medical operations (exhibit), 2:807
- types of U.S. military humanitarian missions, 2:807–808
- unrealistic patient expectations, 2:813, 2:821
- U.S. military as the cause of civilian injury, 2:823
- Western-trained military physicians’ lack of training in medical and public health issues in underdeveloped countries, 2:817
- Hume, David
- fact/value distinction, 1:110, 1:111
- Humility character trait of physicians, 1:15
- Humphrey, D.
- right-to-die movement and, 1:40
- Huntington, S.P.
- development of the officer ranks, 1:136
- identicalism, 1:205
- need for the professional military to serve the state, 1:138–139
- profession and vocation comparison, 1:272
- roles for the professional soldier, 1:277, 1:289
- separatism, 1:202
- Hutcheson, Francis
- benevolent deception in medicine, 1:65, 1:66
- Hypothermia. *See also* Japanese biomedical experimentation during the World-War-II era; Nazi hypothermia and hypoxia research
- Lazarus Project and, 2:845
- Hypoxia research. *See* Japanese biomedical experimentation during the World-War-II era; Nazi hypothermia and hypoxia research
- I**
- ICBMs. *See* Inter-Continental Ballistic Missiles
- ICN. *See* International Council of Nurses
- “ICN Code of Ethics for Nurses,” 2:668–669
- ICRC. *See* International Committee of the Red Cross
- Identicalism
- aim of, 1:205
- description, 1:205
- ease of recruitment of qualified personnel and, 1:206
- emergence of a new conservatism and, 1:205
- fictional General Iden’s thoughts on, 1:206, 1:212–213
- flaws of, 1:212–214, 1:215, 1:217
- fusionism and, 1:205, 1:209
- increased interaction between the military and the rest of society and, 1:206
- making military personnel no different from those in other jobs, 1:206
- military personnel performing civilian-like work in military settings and, 1:213
- unavoidability of isolation, 1:213
- wearing of uniforms and, 1:206, 1:213–214
- Ienaga Saburo, Prof.
- publication of the history of Japanese medical experimentation, 2:496
- Immorality of war. *See* Conscientious objection
- Immunizations
- as a civilian health practice, 1:315
- imposition of, 1:298–300, 1:314, 1:315–316, 1:337–338
- required administration of the anthrax vaccine to troops, 1:299–300, 1:314, 1:337–338
- The inappropriate surrogate
- case study, 2:862
- India
- Non-Proliferation Treaty and, 1:235
- Indian Code
- ethical code example, 1:11
- Infectious diseases. *See also specific diseases*
- Committee on Medical Research funding for research on, 2:514
- military disease hazards research, 2:536
- Influenza
- vaccine research on civilian populations, 2:514
- Informed consent
- basic elements in the consent process, 2:546–547
- chemical weapons experiments and, 1:297, 1:314
- civilian research volunteers, 2:597
- community informed consent, 2:584, 2:845
- compassionate use of new treatments and, 1:314
- definition of, 2:595
- distinction between research and practice and, 2:550–551
- documents in the evolution of, 1:361–365
- elements of (exhibit), 2:578
- epidemiological studies and, 2:583–584
- good of the patient and, 1:13–14
- human radiation experiments and, 2:548–549
- investigational drugs and vaccines and, 1:297, 1:313–314, 2:538, 2:549–551, 2:573
- Leah case study, 2:689–690
- lysergic acid diethylamide research and, 2:548–549, 2:570
- military biomedical research and, 2:546–547
- Natick, MA, climatic research program and, 2:570–572, 2:599
- nuclear weapons tests and, 1:297
- Nuremberg Code and, 1:297, 1:352, 2:548–550
- performing medical research on soldiers and, 1:297–298
- practice point of view, 2:550
- Presidential Commission on Radiation Experimentation surveys on, 1:122
- President’s Commission study of informed consent in clinical practice, 1:109
- research involving deception and, 2:595
- research on patient perceptions of, 1:109
- research point of view, 2:540–550
- return to duty considerations, 2:374, 2:376
- subjects of United States human experimentation, 2:513, 2:515, 2:520–521, 2:524–525, 2:527

- subjects who lack the capacity to give consent for emergency treatments, 1:297–298
- untested treatments and, 1:314
- use of data obtained without consent, 2:581–582
- vaccine trials in Africa, 1:108
- “voluntary” nature of military service and, 1:314
- voluntary participation by soldiers in research and, 2:547
- Institute of Medicine
  - anthrax vaccination study, 2:858
  - anthrax vaccine analysis, 1:300
  - military biomedical research program reviews and development, 2:558
  - report on the causal relationship between exposure to mustard gas and Lewisite and the development of certain types of cancer, 2:514
- Institute of Society, Ethics, and the Life Sciences
  - foundation of, 1:73
- Institutional review boards
  - advertisements used to recruit civilians, 2:597
  - classified research and, 2:595–596
  - disagreement between the commander and the IRB, 2:593–594
  - epidemiological studies and, 2:583, 2:584, 2:585
  - equipment testing and, 2:587
  - exemptions, 2:587
  - expedited reviews, 2:587
  - foreign participants and, 2:591
  - human experimentation subject protection and, 2:521, 2:538
  - military biomedical research and, 2:587
  - new bleeding prevention substances and, 2:844
  - pyridostigmine bromide research and, 2:573
  - questionnaires and, 2:587
  - research involving deception, 2:595
  - research *vs.* public health practice: when does a study require IRB review? (exhibit), 2:574–577
  - scientific reviews, 2:587–588
- Institutional Review Boards: A System in Jeopardy*, 2:521
- Integrity
  - as an operationally essential value in a military culture, 1:165
  - cohesian and, 1:163
  - definition of the concept, 1:160
  - digitized information and, 1:164
  - duty and, 1:161
  - honesty and, 1:160–163
  - institutional self-examination and, 1:163–165
  - military operations and, 1:161–163
  - military professionals and, 1:144–145
  - strength of the military institution and, 1:160–161
- Intellectual honesty character trait of physicians, 1:15
- Inter-Continental Ballistic Missiles
  - agreements on the reduction or elimination of, 1:235
- Internal morality
  - act of healing, helping, and curing, 1:12–13
  - act of pro-fession and implicit promise of the physician, 1:12, 1:13
  - clinical encounter, 1:13–16
  - definition, 1:11, 1:13
  - elements of, 1:11–13
  - ends of medicine, 1:12–13
  - fact of illness, 1:11–12, 1:13
  - good of the patient concept, 1:12–13, 1:18
  - internal codes, 1:11, 1:18
  - patient as a human being, 1:12
  - quality of life and, 1:12
  - spirituality of the patient, 1:12–13
- International Code of Medical Ethics, 2:753, 2:766
- International Committee of Military Medicine and Pharmacy
  - adoption of rules concerning war and armed conflict, 2:753
- International Committee of the Red Cross
  - abuses of the emblem, 2:749
  - adoption of rules concerning war and armed conflict, 2:753
  - Central Tracing Agency establishment to reestablish contact between victims of war and their families, 2:756
  - cluster bomb units and, 1:233
  - Code of Conduct, 2:819–820
  - emblem as a target for attack, 2:824
  - emblems for, 2:747–749
  - formation of, 2:741–742
  - Fundamental Rules of International Humanitarian Law
    - Applicable in Armed Conflicts, 2:771
  - indicative uses of the emblem, 2:748–749
  - inspection of medical records, 2:755
  - napalm treaty, 1:233
  - nondiscrimination principle, 2:755
  - peacetime use of the emblem, 2:748
  - prisoners of war and, 1:236
  - protective uses of the emblem, 2:747–748
  - red crescent emblem, 2:747
  - red cross emblem, 2:747
  - red lion and sun emblem, 2:747
  - Red Shield of David emblem, 2:747
  - wartime use of the emblem, 2:748
- International Council of Nurses
  - code of ethics, 2:666, 2:668–669, 2:671
- International Court of Justice
  - use of threat of use of nuclear weapons as contrary to international law except under extraordinary circumstances, 1:307
- International Ethical Guidelines for Biomedical Research Involving Human Subjects
  - text of, 2:630–660
- International guidance on humanitarian care
  - attachments, 2:763–771
- International law of war
  - application of war-decision law, 1:246
  - Geneva Conventions and, 1:143, 1:154
  - Hague Conventions and, 1:143
  - historic relation of just war doctrine and, 1:223–226
  - knowledge of and following orders, 1:262
  - nomenclature of (exhibit), 1:226
  - rules of engagement and, 1:246
  - sanctions for violations of, 1:238–240
- International Military Tribunal of the Far East
  - prosecution of Japanese war criminals, 2:490
- International Standing Commission for Aid to Wounded Soldiers. *See* International Committee of the Red Cross
- Internet
  - listing of pertinent resources for bioethics research, 1:121–122
- Interpersonal psychological interventions
  - description, 2:843
- Inukai Tsuyoshi, Premier (Japan)
  - assassination of, 2:473
- Investigational drugs and vaccines
  - informed consent for, 1:297, 1:313–314, 2:538, 2:549–551, 2:573
- IOM. *See* Institute of Medicine
- Ionizing radiation research. *See* Human radiation experiments
- Iran
  - Non-Proliferation Treaty and, 1:235
  - “rogue” state status, 1:245
  - seizure of U.S. Embassy and staff in Tehran, 2:782–783



- Iran-Contra scandal  
 separatism and, 1:215
- Iraq. *See also* Persian Gulf War  
 invasion of Kuwait, 1:229  
 Non-Proliferation Treaty and, 1:235  
 nonmilitary sanctions against, 1:229–230, 1:306  
 offensive biological and chemical weapons, 2:543, 2:544  
 “rogue” state status, 1:245  
 use of chemical weapons, 1:234, 1:313, 1:337
- IRBs. *See* Institutional review boards
- Irwin, Bernard J.D.  
 combatant role, 1:303
- Ishibashi Naokata  
 Japanese biomedical experimentation role, 2:489
- Ishii Shiro, Dr.  
 commendation from Emperor Hirohito, 2:486  
 immunity from prosecution for medical experimentation  
 on human subjects, 2:490–491, 2:492  
 role in Japanese biomedical experimentation, 2:475–478,  
 2:482–484
- Islam  
 dietary practices, 2:699  
 influence on clinical ethics, 1:64  
 just war doctrine, 1:224  
 moral education view, 2:708–709  
 prayer, 2:698  
 principles of medical ethics, 2:709–710  
*Quran* teachings, 2:709, 2:710  
 Ramadan observance, 2:699  
*Shari’a* system, 2:708  
 view of wellness and illness, 2:708–709
- Israel  
 belligerent status and, 1:231  
 Israeli Defence Forces and truth in reporting, 1:163  
 Non-Proliferation Treaty and, 1:235  
 physician involvement in torture of prisoners of war,  
 2:395–396
- Italy  
 mercenary soldiers and, 1:135
- Ivy, Andrew C.  
 testimony on the issue of voluntary participation in  
 human experimentation, 2:516, 2:517  
 validity of the Dachau data, 2:449
- Iwanami Hiroshi, Capt.  
 Japanese biomedical experimentation role, 2:489
- ## J
- Jackson, Stephen  
 Nuremberg Code recommendations, 2:521
- Janousek, J.T.  
 ethical dilemmas of triage, 1:297
- Janowitz, M.  
 civilian control of the military, 1:207  
 elements the American military inherited from the British  
 military tradition, 1:137  
 professional soldier description, 1:137  
 value of initiative in battle, 1:147
- Jansenism  
 religious tradition of, 2:691–693
- Japan  
 absence of courses on medical ethics in medical schools,  
 2:474  
 assassination of suspected unsympathetic officials by the  
 military, 2:473–474  
 Bataan Death March, 1:172–173, 1:174, 1:175  
 belief of the Japanese people that Japan was a victim  
 rather than an aggressor in World War II, 2:491–492  
 brutalization of soldiers, 2:475  
*Bushido* warrior code, 2:470, 2:471  
 cultural isolation of, 2:470  
 “The Greater East Asia Co-Prosperty Sphere” euphemism  
 for imperialism, 2:473  
 Green Cross blood supply scandal, 2:494, 2:495  
 inclusion in history textbooks of an account of Japan’s  
 biomedical and chemical warfare programs, 2:496  
 influence of militarism on military medicine, 2:474–475  
 Japanese medical school and United States medical school  
 comparison, 2:474  
 Japanese National Institute of Health, 2:494–495  
 military’s lack of interest in humanitarian or human rights  
 concepts after 1920, 2:475  
 Mukden rebellion, 2:473–474  
 number of prisoners of war captured after Pearl Harbor,  
 2:487  
 prosecution of war criminals, 2:490–491  
 racial superiority belief, 2:470–472  
 secret military societies, 2:472–474  
 in the 21st century, 2:496  
 ultranationalist fanaticism within the Japanese military  
 (exhibit), 2:473  
 U.S. bombing of Hiroshima and Nagasaki, 1:235, 1:239–240  
 U.S. postwar policies in, 1:230  
 use of racism to justify imperial adventures in East and  
 Southeast Asia, 2:471  
 victories after Pearl Harbor, 2:487
- Japanese biomedical experimentation during the World-War-  
 II era  
 academic community’s postwar attempts to minimize,  
 2:491  
 agricultural experiments, 2:480  
 annual expenditures for, 2:468  
 biological warfare laboratory experiments, 2:482–484  
 biological warfare research operations throughout the  
 Japanese empire (exhibit), 2:477  
 biomedical experimentation and the Royal family  
 (exhibit), 2:469  
*Bushido* warrior code and, 2:470, 2:471  
 civilian government role, 2:470  
 contamination of foods with pathogens, 2:487  
 contamination of wells with pathogens, 2:487  
 delivery systems for pathogens, 2:483  
 description of subjects as  
*marutas*, or logs, 2:480  
 dimensions of the problem, 2:466  
 diseases investigated, 2:480  
 estimated number of prisoners killed in experiments, 2:484  
 as a feature of Japanese military planning, 2:467  
 field tests of biological warfare, 2:484, 2:486–487  
 free-lance medical procedures and experiments on  
 prisoners of war, 2:487–490  
 free-lance vivisection description (exhibit), 2:468  
 frostbite research, 2:480, 2:484  
 funding and staffing for, 2:478  
 government-sponsored biomedical research, 2:475–487,  
 2:489  
 government-sponsored human vivisection (exhibit), 2:489  
 historical context, 2:470–475  
 immunity from prosecution of war criminals, 2:490–491  
 Imperial decree establishing the  
*Boeki Kyusui Bu*, the Anti-Epidemic Water Supply and  
 Purification Bureau, 2:478  
 Japanese casualties resulting from, 2:486  
 Japanese military involvement, 2:467–468  
 lack of accountability of doctors, 2:465

- malaria research on prisoners, 2:488
- map showing locations of Japanese biomedical experimentation sites (figure), 2:482
- medical and academic profession involvement, 2:466
- nationalistic racism and, 2:470–472
- Nazi experiments comparison, 2:484
- nutrition research on how little food humans require to stay alive, 2:488, 2:490
- objectives of, 2:483
- origin of the programs, 2:475–478
- pathogen effects research, 2:483–484
- pathogen production objective, 2:483
- photographs from Ping Fan Museum, 2:503–506
- plague and anthrax experiments, 2:450
- postwar epidemics due to infected animals released by the Japanese from their research facilities at the end of the war, 2:487
- postwar failure to apologize for, 2:491–492
- postwar medical careers of biowarfare personnel, 2:493–496
- postwar view of Japanese war crimes, 2:491
- professional involvement in (exhibit), 2:467
- public knowledge of, 2:509–510
- “The Report of ‘A’”, 2:492
- Royal family role, 2:468–470
- “sacrificing” of subjects, 2:478
- “sanitization” of by the Japanese government and American Occupation officials, 2:465, 2:491
- “The Togo Unit,” 2:478
- types of experiments, 2:478
- ultranationalism in the military and, 2:472–474
- Unit 731, the Ishii Unit, 2:478, 2:484
- United States interest in Japanese research results, 2:492–493
- use of prisoners for teaching surgery to medical students, 2:488
- vivisection and immediate postmortem dissection, 2:490
- Japanese National Institute of Health
  - cooperation with the Atomic Bomb Casualty Commission in recording the progress of the Hiroshima survivors, 2:495
  - experimentation with *Rickettsia tsutsugam shi* on mental patients, 2:495
  - foundation of, 2:494
  - human experimentation, 2:495
  - official research agenda, 2:495
  - role in the hold up of vaccine distribution, 2:495
  - use of untested vaccines, 2:495
- Jarisch, Dr.
  - hypothermia and hypoxia research, 2:443
- Javits, Sen. Jacob
  - human experimentation subject protection and, 2:521
- JCAHO. *See* Joint Commission on Accreditation of Healthcare Organizations
- Jehovah’s Witnesses
  - blood transfusions and, 2:710, 2:711
- JNIH. *See* Japanese National Institute of Health
- Joffre, Gen. Joseph
  - perversion of honor example, 1:170
- Johns Hopkins School of Nursing
  - ethics courses, 2:664
- Johns Hopkins University
  - asthma trial, 2:592
- Johnson, Pres. Lyndon
  - authorization of the CORDS program, 2:782
  - “Great Society” program, 1:69
- Johnson, W.H.
  - protection of research subjects and, 2:519–520
- Joint Commission on Accreditation of Healthcare Organizations
  - military hospital compliance with, 2:702
  - requirement for written policies and procedures concerning human values issues, 1:74
- Jonas, Han
  - ethics and scientific research, 2:455
- Jones, F.D.
  - combat fatigue and return to duty, 1:336
  - combat stress treatment, 2:826
- Jonsen, A.R.
  - American moralism, 2:693
  - casuistry as principlism’s chief opponent, 2:693
  - casuistry definition, 1:63–64
  - clinical ethics definition, 1:63
  - four-dimension grid for clinical ethics and, 1:51
  - moral pluralism, 1:46
- Joseph, Dr. Stephen
  - public expectations of medical care for wounded U.S. soldiers, 2:836
- Journal of the American Institute of Homeopathy*
  - forcible euthanasia merits, 2:413
- Journal of the American Psychiatric Association*
  - euthanasia for retarded children, 2:413
- Journals
  - for bioethics, 1:121
  - for clinical ethicists, 1:74
- Judaism
  - casuistry, 1:45
  - dietary practices, 2:699, 2:700
  - Halakic tradition, 1:10, 2:706, 2:708
  - influence on clinical ethics, 1:64
  - patient autonomy and, 2:689
  - principles of Jewish medical ethics, 2:707–708
  - religious garments, 2:699
  - religious symbols, 2:699
  - Sabbath observance, 2:699
  - Talmudic instructions on illness and healing, 2:707
  - view of life and illness, 2:706–707
- Judgment at Nuremberg
  - defendants, verdicts, and punishments, 2:435–436
- Junkerman, C.
  - clinical ethics rules, 1:47
- Jus ad bellum*. *See* War-decision law
- Jus in bello*. *See* War-conduct law
- Just and Unjust Wars*, 1:242
- Just war doctrine
  - application of international law of war, 1:246
  - Christianity and, 1:223–224
  - Classical Antiquity and, 1:223
  - common sense and, 1:246
  - historic relation of just war doctrine and the international law of war, 1:223–226
  - increase in the study of, 1:246
  - limitation of war by the requirements of morality and law, 1:223
  - military biomedical research and, 2:540
  - public debates over the morality of nuclear deterrence/defense, 1:246
  - war-conduct law, 1:225–226, 1:230–245
  - war-decision law, 1:224–230, 1:240
- Justice principle
  - clinical encounter and, 1:14
  - euthanasia on the battlefield and, 2:391–392
  - historical basis, 1:37
  - human research subjects and, 2:578–580, 2:592



- Rawls' contractarian theory, 1:37  
 traditional medical ethics and, 1:37
- ### K
- Kaneko Junichi  
 Japanese National Institute of Health role, 2:495
- Kant, Immanuel  
 assumption of moral goodness, 1:32  
 deontology theory, 1:7, 1:10, 1:29–31, 1:33  
 theoretical focus of, 1:30
- Kanter, R.  
 stress and women in the military, 2:726
- Kaplan, S.H.  
 communication styles of physicians, 1:119
- Kass, L.R.  
 teleological theory of medicine, 1:71
- Katz, Jay  
 attitude of the researcher towards the volunteers in the  
 Tuskegee Syphilis Study, 2:567  
 human experimentation comments, 2:454–455
- Kawashima Kiyoshi, Maj. Gen.  
 testimony on the number of prisoners killed in experi-  
 ments, 2:484
- Keegan, J.  
 history of warfare and the history of the world relation-  
 ship, 1:133  
 Roman centurions as the first professional fighting  
 officers, 1:133  
 world need for skillful and disciplined soldiers, 1:154
- Keenan, J.  
 casuistry description, 1:64
- Kellogg-Briand Pact  
 war-decision law and, 1:225
- Kennedy, Pres. John F.  
 endorsement of military civic action, 2:779–780  
 program in support of host-nation military civic action  
 programs within Latin America, 2:780
- Kennedy, Sen. Edward  
 human experimentation subject protection and, 2:521
- Kennedy Institute of Ethics  
 ethics training, 1:82  
 foundation of, 1:73  
 National Reference Center for Bioethics Literature, 1:121
- Kidd, Alexander  
 protection of research subjects and, 2:519–520
- Kidder, R.M.  
 conservation principle, 1:283
- Kidney transplants  
 transplantation of chimpanzee kidneys into human  
 patients, 2:520
- Kitano Masaji, Lt. Gen.  
 immunity from prosecution for medical experimentation  
 on human subjects, 2:490–491  
 Japanese biomedical experimentation role, 2:480–481  
 postwar activities, 2:494
- Kitaoka Masami, Dr.  
 experimentation on mental patients, 2:495
- Kluckhohn, F.  
 cultural and religious values, 2:691
- Knights Hospitaller  
 defense of hospitals against “enemies of the Faith,” 1:303  
 loyalty and service and, 1:135
- Knights Templar  
 loyalty and service and, 1:135
- Kobrick, Dr. John  
 recruitment of volunteers for the Natick program and,  
 2:571
- Koehler, R.H.  
 percentage of soldiers returned to duty after surgery, 1:288
- Koizumi Chikahiko (Japanese Surgeon General)  
 patron of Ishii Shiro, 2:476
- Kojima Takeo, Capt.  
 Japanese biomedical experimentation role, 2:487
- Kolmer, John A.  
 polio vaccine research, 2:511
- Komoto Saisaki  
 plot to kill Marshall Chang Tso-lin, 2:473
- Kong, H.  
 ethical teaching rounds on the Obstetrical Service of the  
 Toronto Western Hospital, 1:83
- Konold, D.E.  
 early years of American medical ethics, 1:66
- Korea  
 Armed Forces Assistance to (exhibit), 2:780
- Korean War  
 abstinence from the use of chemical weapons, 1:234  
 care of subordinates and, 1:166  
 disease as the cause of morbidity, 2:539  
 fixed-length tours, 1:166  
 officers' technical competence and, 1:166–167  
 treatment of prisoners of war, 1:236  
 United Nations participation, 1:227  
 war crimes trials and, 1:239
- Koski, Dr. Greg  
 human experimentation subject protection and, 2:521
- Krieger, Dr. Knut  
 creation of incapacitating systems, 2:834
- Kriegsraison* doctrine, 1:231
- Kushner, Rabbi Harold, 2:706
- Kuwait  
 invasion by Iraq, 1:229
- Kyushu Imperial University  
 vivisection experiments on prisoners of war, 2:489
- ### L
- La Puma, J.  
 goal of ethics consultants, 1:77
- Lain Entralgo, Pedro  
 patient-physician relationship, 1:8, 1:11
- Lamiel, Col. James M.  
 soldier's perception of medical care, 2:840
- Land mines  
 estimation of injuries from, 2:794  
 follow on care for victims of, 2:794  
 injury reduction program, 2:794  
 regulation of the use of, 1:233  
 Salvadoran guerilla use of, 2:783, 2:785
- LATAM COOP. *See* Latin American Cooperative Fund
- Latin America. *See also* Central America; *specific countries*  
 Kennedy's program in support of host-nation military  
 civic action programs within Latin America, 2:780  
 military medical programs, 2:775
- Latin American Cooperative Fund  
 Subject Matter Expert Exchange program support, 2:775
- Laughton, C.J.  
 spouse support as a predictor of career commitment  
 among married men in the military, 2:729
- Law for the Prevention of Genetically Diseased Offspring  
 encouragement of reproduction of desired traits, 2:411–412  
 estimated number of people sterilized in Germany, 2:411  
 minimizing reproduction of “defectives,” 2:410–411, 2:441  
 provisions, 2:410  
 text, 2:426  
 United States as a model for, 2:411

*The Law of Land Warfare*

- ammunition restrictions, 1:232
  - duty of medical impartiality, 1:303
  - Geneva Conventions and, 1:301
  - refusal to obey illegal orders and, 1:141–142
  - sanctions for violations of international law, 1:238
  - torture restriction, 1:154
- Laws. *See also* Legal issues; *specific laws and pieces of legislation*
- casuistry and Anglo-Saxon law, 1:45
  - ethics and the requirements of laws or regulations, 1:333–334
  - external and internal morality and, 1:11
  - “good samaritan” law, 1:334
  - paternalistic and moralistic laws of the United States, 1:255
  - public policy medical ethics and, 1:35–36
- Laws of war
- Hague and Geneva Conventions, 1:143, 1:154
  - professional military ethic and, 1:139, 1:142, 1:147–148
- Lazarus Project
- ATP administration issues, 2:846
  - cellular metabolism and, 2:844–845
  - compensatory justice principle and, 2:845, 2:847
  - description, 2:844–846
  - ethical issues of using ATP in combat, 2:845–846
  - personnel status monitor (PSM) system (exhibit), 2:846
  - telemonitoring and personnel status monitors and, 2:846
  - U.S. Navy sponsorship and funding of, 2:844
- League of Nations
- war-decision law and, 1:225
- Lebanon War
- Israeli siege of the PLO forces, 1:233
  - PLO’s practice of putting antiaircraft batteries, artillery, and military vehicles in residential neighborhoods, 1:243
- Leedom, Stanley
- death of son due to blood preservation research, 2:519
- Legal issues. *See also* Laws
- algorithm for conflicts between ethics and the law, 2:861–863
  - courts’ view of the special status of the military, 1:150
  - inappropriate surrogate case study, 2:862
  - legal consequences and moral decisions, 1:111
  - physician-assisted suicide, 1:114
- Legal moralism principle of autonomy
- description and examples, 1:254, 1:255
- Legislation. *See* Laws; *specific pieces of legislation*
- Lehmann, J.F.
- racial hygiene movement and, 2:408
- Leininger, M.
- observations of an American nurse with a Philippine patient, 2:711
- Lenz, Fritz
- human genetics textbook, 2:409
  - racial hygiene movement and, 2:408
  - status of women as childbearers, 2:411
  - sterilization of “defectives,” 2:411
- Levy, Howard
- refusal to obey an order to train Special Forces Aidmen in dermatological skills, 1:304, 1:305–306, 1:312, 1:317, 1:320, 2:753
- Lewisite
- U.S. research on, 2:514
- Liability issues
- human experimentation subjects, 2:515
  - radiation research, 2:528
- Libertarianism
- autonomy and, 1:39–40
  - strengths, 1:39
  - weaknesses, 1:39–40
- Lieber, Prof. Francis
- war-conduct code, 1:225, 1:246
- Liebrand, Werner
- testimony on the issue of voluntary participation in human experimentation, 2:516, 2:517
- Life following tragedy
- case study, 2:676
- Limited Test Ban Treaty
- provisions, 1:235
- Livingston, Gordon
- treatment of prisoners of war, 1:319, 1:320
- Livingston, Robert
- protection of human research subjects and, 2:520
- Llewellyn, C.
- practice of medicine in peacetime and wartime, 2:723
- Lloyd’s of London
- insurance coverage for human experimentation, 2:515
- Loewy, E.N.
- “suffering” and communitarian ethics, 1:42, 1:44
- Logistics
- case study (exhibit), 2:837–838
- Longitudinal studies
- description, 2:583
- “Looking the other way”: participation by silence
- case study, 2:398
- Loyalty
- feudal system and, 1:134–135
  - honor and, 1:172
  - mercenary soldiers and, 1:135
  - military professionals and, 1:141, 1:142, 1:144
  - as a professional value, 1:142
- LSD. *See* Lysergic acid diethylamide
- Lt. Stone’s dilemma case study, 1:131, 1:154
- Lutz, Dr. W.
- hypothermia and hypoxia research, 2:442–450, 2:459–461
- Luz, G.A.
- criteria for planning, executing, and evaluating medical civic action programs, 2:815
- Lying. *See* Truth-telling case study
- Lynch, A.
- ethical teaching rounds on the Obstetrical Service of the Toronto Western Hospital, 1:83
- Lysergic acid diethylamide
- Army research, 2:570
  - CIA research, 2:526
  - informed consent and, 2:548–549, 2:570
  - unethical nature of research, 2:545

**M**

- MacArthur, Gen. Douglas
- denial of the presence of Chinese soldiers in Korea, 1:160
- MacIntyre, Alasdair
- different perspectives for moral enquiry, 1:54
  - fact/value distinction, 1:110
  - virtue theory, 1:32
- Macklin, R.
- moral philosophers’ qualification to be clinical ethicists, 1:75
- MAD. *See* Mutual assured destruction
- Magsaysay, Ramon
- concept of counterinsurgency, 2:779
- Mahlmeister, L.
- work design and quality of nursing care, 2:681
- Malaria
- German research on, 2:452

- Japanese biomedical experimentation on, 2:488  
 returning sick soldiers to duty, 1:339  
 soldiers' poor compliance in taking Atabrine and incidence of, 1:340
- Managed care  
 description, 2:705  
 patient-physician relationship and, 1:8–9  
 physicians as gatekeepers to care, 1:17, 1:37  
 public policy medical ethics and, 1:34, 1:35  
 research on the quality of care, 1:109  
 as a subculture of healthcare, 2:705–706
- Manchester, James  
 death of Iraqi prisoners and soldiers during “friendly fire” incident, 2:455
- Manchuria  
 Japanese acquisition and renaming of, 2:472–473, 2:477, 2:486  
 natural resources of, 2:472
- Mandel, Ernest  
 cancer research, 2:520
- Manhattan Project  
 plutonium research and, 2:524
- Mansfield Amendment  
 requirement that DoD-funded research solve military problems, 2:536
- MAP. *See* Military Assistance Program
- Marcus Aurelius  
 influence on clinical ethics, 1:64
- “Marital Health Law.” *See* Nuremberg Laws
- Markey, Rep. Edward J.  
 plutonium research and, 2:524
- Marlowe, D.H.  
 technology and the modern army, 1:213
- Marriage. *See* Nuremberg Laws
- Marshall, S.L.A.  
 number of soldiers who fire their weapons in combat, 1:176
- Marx, K.  
 view of religion, 2:696
- Masuda Tomasada  
 “Rape of Nanking” role, 2:481
- Matsumoto Hiroshi  
 testimony on Japanese biomedical experimentation, 2:484
- McCullum, J.K.  
 CORDS program success, 2:782
- McCormick, R.A.  
 double-effect principle, 1:242
- McCullough, L.B.  
 normative ethics principles, 1:38
- McGee, Dr. Anita Newcomb  
 selection of nurses for the Army, 2:664
- Mead, Margaret  
 studies of child rearing in various cultures, 1:108
- Mechanic, D.  
 behavioral-science approaches to disease, illness, and sickness, 2:733–734
- A MEDCAP exercise in rural Africa  
 case study, 2:810–812
- MEDCAPs. *See* Medical civic action programs
- Médecins du Monde*  
 alternative to military service for physicians, 1:309
- Médecins sans Frontières*  
 alternative to military service for physicians, 1:309  
 objection to U.S. military airdrops of humanitarian supplies in Afghanistan, 2:808  
 view that humanitarian aid must be delivered by neutral organizations, 2:819
- Media  
 American popular press view of covert and deceptive American medical experimentation, 2:519  
 “bloodless” war and, 2:835  
 fusionism and, 1:208–209, 1:214  
 “human interest” articles in the American press on Nazi hypothermia research, 2:516  
 paternalistic separatism and, 1:211, 1:212
- Mediation models  
 description, 1:51  
 strengths, 1:51  
 weaknesses, 1:51, 1:53
- Medicaid  
 establishment of, 1:69
- Medical aircraft  
 Geneva Conventions and, 2:749–750
- Medical Biological Defense Research Program  
 criticisms of, 2:541
- Medical civic action programs  
 in El Salvador, 2:794  
 in Honduras, 2:783  
 programs that are of long-term value to patients, 2:816  
 training value of, 2:814–815  
 Vietnam War and, 2:782
- Medical ethics. *See also* Military medical ethics; Nazi medical ethics; *specific types of ethics, e.g., Clinical ethics*  
 analysis of ethical judgments, 1:27  
 ancient forces in, 1:27–28  
 common ethics for health professions, 1:18  
 complexity of developing a model for, 1:54  
 culture and, 1:17–18, 1:28  
 definition, 1:25, 1:26–27, 5  
 essence of ethical behavior, 1:295  
 external sources, 1:10, 1:13–16  
 focus of, 1:27, 1:47  
 growth of since World War II, 1:25  
 historical basis, 1:5–7  
 internal sources, 1:11–16, 1:18  
 intertwining branches of, 1:34–35  
 philosophy and, 1:28  
 physician-soldiers and, 1:273–274, 1:280  
 public policy branch, 1:34, 1:35–36  
 reconstruction of, 1:7–8  
 religion and, 1:27  
 resources, 1:121–122  
 science and, 1:27–28  
 “total institutions” and, 1:306
- Medical mobile training teams  
 humanitarian assistance and, 2:775  
 sent to El Salvador by Pres. Reagan, 2:793
- Medical professionals. *See also* Physician-soldiers; Physicians  
 responsibility to society, 1:271
- Medical readiness training exercises  
 as a model for U.S. military deploys to medically underserved areas, 2:766  
 services provided in Honduras, 2:788–789  
 term “civic action” to replace, 2:792
- Medical records  
 Geneva Conventions and, 2:755–756  
 telemedicine and, 2:839
- Medical Rules of Engagement  
 humanitarian assistance and, 2:819, 2:826
- Medical schools  
 ethics training, 1:81–83
- Medical students  
 clinical ethics education, 1:79–83, 1:88  
 the culture of physicians and, 2:703–704

- pledge signed during the Vietnam War, 1:309
- societal obligations, 1:16–17
- Medical transports
  - Geneva Conventions and, 2:749–751
- Medical units
  - acting as depots for military weapons, 2:752
  - acts harmful to the enemy and, 2:751
  - capture of, 2:752
  - conditions that do not deprive a medical unit of its protections, 2:752
  - destruction of material and stores, 2:752
  - fixed units, 2:752
  - Geneva Conventions and, 2:751–752
  - mobile units, 2:752
  - primary right of, 2:751
  - sentries, guards, or armed escorts and, 2:752
  - unintentional harm to, 2:751
- Medicare
  - establishment of, 1:69
  - military retirees and, 2:728
- MEDRETEs. *See* Medical readiness training exercises
- Meiling, Dr. Richard
  - human radiation experiments and, 2:569
- Men. *See also* Women
  - commissioning as nurses, 2:667
  - spouse support as a predictor of career commitment among married men in the military, 2:729
- Mengele, Josef
  - activities under the Nazi regime, 2:410
- Mental health professionals. *See also* Psychiatry
  - combat stress breakdown and, 1:180
- Mental illness. *See* Psychiatric disorders
- Mercenary soldiers
  - loyalty and, 1:135
- Merck, George
  - biological warfare tests and, 2:527
- Metaethics
  - description, 1:107
- Methods in Medical Ethics*, 1:108
- Mexican-Americans
  - diet of, 2:700
- Meyer, Gen. Edward C.
  - reforms initiated by, 1:163–164, 1:165
- Michigan State University
  - Medical Humanities Program, 1:82
- Mikasa, Prince (Japan)
  - biomedical experimentation role, 2:469
- Military Assistance Program
  - Draper Committee Report recommendations, 2:779
- Military biomedical research. *See also* Human volunteers in military biomedical research
  - animal experimentation issues, 2:552–555
  - civilian applications, 2:539
  - combat casualty care research, 2:537
  - criteria for conducting ethically responsible research, 2:546
  - distinction between offensive and defensive research, 2:540, 2:544, 2:545
  - “do no harm” principle and, 2:539, 2:540, 2:545
  - escalation of biological and chemical weapons and, 2:542, 2:543
  - ethical conduct of, 2:545–552
  - ethical distinction between constructive and destructive research, 2:535
  - ethical legitimacy, 2:535, 2:538–545
  - ethical status of soldiers and, 2:547–548
  - exclusion problem, 2:556–557
  - five research areas, 2:536
  - funding for, 2:541–542
  - funding limitations and, 2:540
  - gender bias in selecting research subjects, 2:556–557, 2:558
  - human systems technology research, 2:537–538
  - informed consent issues, 2:546–547
  - just war doctrine and, 2:540
  - medical biological defense research, 2:537
  - medical chemical defense research, 2:538
  - militarization of medicine and, 2:541–542, 2:543
  - military disease hazards research, 2:536
  - Military Research Volunteer Program and, 2:548
  - military significance requirement, 2:536
  - military women’s research program, 2:555–557
  - mission of, 2:557
  - monitoring and inspection of, 2:543
  - national risk *versus* national security, 2:544–545
  - nature of, 2:536–538
  - nonlethal microwave weapon technology, 2:545
  - nonparticipation view of, 2:541–542
  - participation point of view, 2:542–544
  - Persian Gulf War experience, 2:549–552
  - potential uses for both good and evil, 2:540
  - practicality and American moral ideals, 2:548–549
  - pregnancy possibility as a justification for excluding women, 2:556–557
  - programmatic environmental impact statements and, 2:543
  - prohibition of, 2:541
  - prohibition of research that poses unacceptable risk, 2:544–545
  - public safety and, 2:544
  - risk and benefit analysis, 2:541, 2:544–545
  - risks to nonresearch participants, 2:544
  - scientists’ concerns over control over their research and, 2:540
  - violation of law, morality and ethics and, 2:542, 2:543–544
- Military culture
  - adultery and, 1:191
  - atrocities and, 1:172–174
  - authoritarian command climate, 1:188–189
  - authority, discipline, and maladaptive cultural practices, 1:181–182
  - building a sense of security for subordinate leaders, 1:187–189
  - building security among subordinates and, 1:181–182
  - building support for discipline and the command structure, 1:182–186
  - command in ethically ambiguous situations, 1:184–186
  - contingencies of reinforcement that evolve in, 1:159–160
  - creating an ethical framework, 1:183–184
  - “do more with less” slogan and, 1:186–187
  - Doolittle Commission Report (exhibit), 1:188
  - elements of an ethically supportive culture, 1:186–192
  - empowerment of subordinates, 1:189
  - ethical components of, 1:180
  - general inspections and, 1:181
  - homosexuality and, 1:191–192
  - institutionalized fraud and, 1:181
  - intrainstitutional communication, 1:184
  - leader self-maintenance, 1:189, 1:190
  - managing subordinates’ time and energy, 1:186–187
  - nature of discipline, 1:182–183
  - reasons why it is difficult to live by ethical principles in, 1:192
  - sexual abuse and, 1:190–191
  - sexual behavior in gender-integrated units, 1:189–192
  - sleep deprivation and command decisions (exhibit), 1:190
  - tradition of threatening subordinates, 1:187–189

- unit status reports and, 1:181
- weak and insecure commanders (exhibit), 1:187
- Military Health Services System
  - provision of care to families of military personnel and retirees, 2:728
- Military medical ethics. *See also* Battlefield medical ethics
  - compensatory justice principle, 2:855
  - conflicts between ethics and the law algorithm, 2:861–863
  - conflicts between the exclusive moral visions of various groups, 2:867
  - decision-making algorithm, 2:855–861
  - descriptive bioethics and, 1:122
  - military physicians as military officers, 2:853
  - mixed agency in, 1:333–365
  - overriding of soldiers' interests, 2:854
  - physician-soldiers and, 1:271–325
  - proposed military medical ethic, 2:853–855
  - vulnerability of patients and, 2:854
- Military Medicine*
  - articles concerning military medical triage, 1:297, 1:301–302
  - Swann scenario, 2:384–385, 2:388–389
- Military physicians. *See* Physician-soldiers
- Military professionals. *See also* Military-society relationship; Physician-soldiers
  - American professional military ethic, 1:141–148
  - Army Command and General Staff College for field grade officers, 1:139
  - autonomy and, 1:253–265, 1:259, 1:318, 1:324
  - autonomy principle and, 2:380, 2:383–384, 2:547–548
  - basic courses for junior officers, 1:139
  - bonding and, 1:278, 1:342
  - characteristics of the profession, 1:137–141
  - common experience and, 1:278
  - comparison of military and medical professions (table), 1:281
  - corporateness and, 1:140–141, 1:272, 1:276
  - courage and, 1:138, 1:142–143, 1:144
  - development of professional military forces, 1:132
  - discipline and, 1:138
  - emphasis of professionalism, 1:131
  - enhancing soldiers' capacity to fight, 2:840
  - ethics in the military, 1:276–277
  - ethos of, 1:276–282, 1:322
  - expertise and, 1:272, 1:276
  - female soldier issues, 2:555, 2:556
  - feudalism and, 1:134–135
  - graduate degrees from civilian schools for officers, 1:140
  - historical roots, 1:131–136
  - homosexuals in the military, 1:149–152
  - international laws of war and, 1:139, 1:142, 1:147–148
  - laws of war and, 1:139, 1:142, 1:147–148
  - loyalty and, 1:141, 1:142, 1:144
  - Lt. Stone's dilemma case study, 1:131, 1:154
  - mercenaries and militia, 1:135
  - moral dilemmas of leadership case studies, 1:131, 1:152–153, 1:154
  - moral example role, 1:272
  - necessity of military forces, 1:133
  - oath of enlistment (exhibit), 1:276
  - overriding ethical principles, 1:296
  - parent society and, 1:138
  - persons who qualify as, 1:137
  - pluralism and, 1:148–152
  - possession of necessary skills and, 1:138
  - present-day military, 1:137–154
  - primitive societies and, 1:132
  - "profession" definition, 1:272
  - professional beginnings, 1:135–137
  - professional ethics as a moral compass, 1:131
  - professional similarities between medicine and the military, 1:279–280
  - professional soldier description, 1:137
  - professional values, 1:142–147
  - professionalism and membership in the military profession as a matter of degrees, 1:137–138
  - refusal to obey illegal orders, 1:141–142
  - responsibilities, 1:272, 1:276
  - return to duty considerations of minimally wounded soldiers, 2:373
  - roles of, 1:277
  - senior service colleges for officers, 1:139–140
  - shaping influences of the professional military ethic, 1:138–139
  - societal obligation to protect soldiers as much as possible, 2:836
  - societal values and, 1:139
  - society's awareness of soldiers' sacrifices, 2:843–844
  - special benefits for, 2:855
  - specialized education and training, 1:139–140
  - the state and the genesis of armies, 1:133–134
  - systematic warfare introduction, 1:133
  - tasks of a capable military strategist, 1:140
  - U.S. Constitution and, 1:143, 1:148, 1:151, 1:276–277
  - use of soldiers as research subjects, 2:538, 2:547, 2:551
  - violence and destruction and, 1:277–279
  - warriors and soldiers, 1:132–133
  - women in the military, 1:148–149
- Military Psychiatry*, 2:826
- Military Psychiatry: Preparing in Peace for War*, 2:373
- Military Research Volunteer Program, 2:548
- Military role-specific ethical situations
  - administration of unproven pharmaceuticals, 1:337–339
  - allowing commanders to make decisions, 1:340, 1:341
  - combat fatigue treatment, 1:335–337
  - counseling and utilization of irradiated soldiers, 1:342–343
  - deontological values and, 1:343
  - euthanasia on the battlefield, 2:393–394
  - removing mentally unstable soldiers from combat, 1:342
  - rule-utilitarian reasoning and, 1:340, 1:341
  - treating and conserving the fighting strength, 1:339–342
  - treatment to return soldiers to duty, 1:339–340
  - triage treatment priorities, 1:340–342
  - truth telling in the combat theater, 1:338–339
- Military-society relationship. *See also* Military professionals
  - assessing the theories, 1:209–216
  - classic and extended separatism, 1:201–203, 1:209–211, 1:215, 1:216
  - fusionism, 1:206–209, 1:214, 1:216, 1:217
  - identicalism, 1:205–206, 1:212–214, 1:215, 1:216
  - modern war and, 1:201
  - moral example role of the military professional, 1:272
  - overview of, 1:272
  - paternalistic separatism, 1:204–205, 1:211–212, 1:215, 1:216, 1:217
  - placing the needs of society ahead of personal needs and, 1:272
  - relationship of the military to the society it serves:
    - summary of the four major theories (table), 1:216
  - role of physicians and society, 1:271
  - theories concerning, 1:201–217
- Militia
  - development of citizen armies, 1:135
  - in the United States, 1:137



- Mill, John Stuart  
autonomy principle and, 1:253  
individual conceptions of freedom, 1:30  
paternalism and, 1:254–255  
principle of utility maximization, 1:7, 1:10  
utilitarian theory, 1:28, 1:33
- Millennium Cohort Study  
description, 2:583
- Minneapolis, MN  
surreptitious release of bacterial agents over, 2:527
- Minnesota Multiphasic Personality Inventory  
identifying homosexuals and, 1:354  
“Miss Evers’ Boys,” 2:567
- Mission priorities and medical care  
case study, 2:822
- Mixed agency in military medicine  
battlefield issues, 2:371, 2:373  
civilian physicians and, 1:333, 1:357  
clinical research and, 1:295  
conflicting duties of physicians, 2:853  
description, 1:295, 1:333  
discretionary situations, 1:333, 1:343–355  
emotional effect of role conflict, 1:356  
medical role-specific situations, 1:333  
military role-specific ethic situations, 1:333, 1:335–343, 1:357  
peacetime and wartime mission and, 2:702–703  
requirements of law or regulations and, 1:333–334
- MMPI. *See* Minnesota Multiphasic Personality Inventory
- Mondale, Sen. Walter  
human experimentation subject protection and, 2:521
- Moore, Joseph Earle  
CMR’s policy on human experimentation and, 2:514
- Moral pacifism  
description, 1:257, 1:259  
resignation from the Army and, 1:257, 1:259
- Moral pluralism  
description, 1:46
- Moral protests  
civilian judgment of military personnel’s participation in, 1:318  
physician-soldiers and, 1:306–308, 1:318
- Mormons  
life expectancy, 2:697–698  
religious garments, 2:699
- Moskos, C.C.  
institutional/occupational thesis, 2:722–723, 2:730
- Moynihan, Sen. Daniel P.  
secrecy and research comments, 2:529
- MPAs. *See* Multiple Project Assurances
- MTTs. *See* Medical mobile training teams
- Multimethod research  
triangulation and, 1:119–120
- Multiple Project Assurances  
DoD points of contact for (exhibit), 2:580  
filing requirements, 2:581
- Munroe, J.  
“character” definition, 1:159
- Murray, John Courtney  
excessive force views, 2:834
- Muslims. *See* Islam
- Mustard gas  
Navy experiments using naval personnel, 2:568  
U.S. research on, 2:513–514
- Mutilations  
Geneva Conventions and, 2:758
- Mutter und Kind program, 1:28
- Mutual assured destruction  
nuclear weapons and, 1:244
- My Lai massacre  
atrocious example (exhibit), 1:175  
case study, 1:264  
cover-up of, 1:207  
obeying orders and, 1:142, 1:264  
Wakin’s analysis of, 1:308
- Myanmar  
military as government, 1:138
- N**
- Nabetani, Surgeon Lieutenant  
Japanese biomedical experimentation role, 2:489
- NABUCA. *See* Nation Building Contributions of the Army
- Nagata Tetsuzan, Gen.  
assassination of, 2:473  
patron of Ishii Shiro, 2:475
- Naito Ryoichi, Lt. Col.  
human experimentation program comments, 2:466  
Japanese biomedical experimentation role, 2:481–482  
postwar activities, 2:494
- Nakamura Keizo  
Japanese National Institute of Health role, 2:494
- Nanking  
Japanese biomedical experimentation site, 2:481
- Napalm  
“superfluous suffering” principle and, 1:233  
Weapons Convention regulation of, 1:225
- Napoleon  
development of the officer ranks and, 1:136
- Narrative ethics  
case study descriptions, 1:115  
external morality example, 1:10  
strengths and weaknesses, 1:43  
truth-telling case study and, 1:43, 1:53
- Natick, MA, climatic research program  
development of, 2:570–572  
example of a program, 2:597–600  
number of dropouts, 2:599  
permanent party volunteers, 2:600  
reassignment to another installation and, 2:599–600  
success of, 2:600  
“voluntariness” of, 2:599
- Nation building. *See* Humanitarian assistance
- Nation Building Contributions of the Army  
“Civil Operations, Revolutionary Development Support”  
effort, 2:782  
study description, 2:781–782
- National Academy of Sciences  
military biomedical research program reviews and  
development, 2:558
- National Bioethics Advisory Commission  
establishment of, 2:510
- National Breast Cancer Coalition  
lobbying effort for funding, 2:557
- National Cancer Institute  
breast cancer research, 2:557
- National Command Authority  
military ethics and, 1:192
- National Commission for the Protection of Human Subjects  
creation of, 1:73
- National Commission for the Protection of Human Subjects of  
Biomedical and Behavioral Research  
*Belmont Report* and, 2:572  
biomedical research principles, 2:693  
creation of, 2:521



- distinction between research and accepted medical practice and, 2:538
- National Endowment for the Humanities  
Society for Health and Human Values funding, 1:74
- National Institute of Mental Health  
Epidemiologic Catchment Area substance abuse survey, 2:696
- National Institutes of Health  
assurance filing requirements, 2:581  
“community consultation” for research performed in an emergency setting, 2:845  
guidelines for the inclusion of more women and minorities in research, 2:555  
legislation calling for oversight of, 2:521  
Office of Protection From Research Risks and anthrax vaccination of troops, 1:337  
protection of human research subjects, 2:520  
responsibility for governmentally sponsored medical research, 2:542  
transplantation of chimpanzee kidneys into human patients, 2:520
- National Library of Medicine  
National Reference Center for Bioethics Literature support, 1:121
- National Quality of Life Survey  
religious activity and, 2:697
- National Reference Center for Bioethics Literature, 1:121
- National Research Act  
creation of the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 2:521  
institutional review boards, 2:521
- National Security Industrial Association Medical Technology Education Conference  
Dr. Joseph’s speech to, 2:836
- National Socialist Party. *See* Nazi medical ethics; Nazis
- National Socialist Physicians’ League  
formation of, 2:409
- National Technical Information Service  
nursing research literature, 2:680
- Native American Indians  
lactose intolerance and, 2:700  
religious symbols, 2:699
- NATO. *See* North Atlantic Treaty Organization
- Natural law theory  
basis for, 1:112  
description, 1:30, 1:32  
descriptive ethics and, 1:112  
principlism and, 1:72  
war-conduct law and, 1:230
- Naturalistic fallacy, 1:110
- Naval Medical Center, Portsmouth, VA  
multidisciplinary Medical Ethics Committee, 2:678
- Naval Research Laboratory  
gas warfare agent research, 2:514
- Nazi Doctors and the Nuremberg Code*, 2:518
- Nazi hypothermia and hypoxia research  
anthrax threat as a contemporary analogy, 2:440  
appropriateness of using data from, 2:449–450  
body-to-body rewarming, 2:446, 2:449–450  
careful recording of data, 2:441, 2:448  
as classic example of lethal unethical scientific conduct, 2:439  
clothing and hypothermia protection, 2:445  
contemporary considerations and questions, 2:440–441  
cooling studies, 2:445–446  
ethanol effects on hypothermia, 2:442, 2:446–447  
ethical replication of, 2:449–450  
ethics and science relationship and, 2:452  
experimental methods of the hypothermia studies, 2:444–445  
“human interest” articles in the American press, 2:516  
“hypothermia” definition, 2:442  
impetus for, 2:439  
initial emphasis, 2:440  
internal knowledge of the hypothermia data, 2:447–448  
Japanese experiments comparison, 2:484  
legacy of the Dachau experiments, 2:454–455  
list of researchers and assistants (exhibit), 2:443  
number of experiments performed, 2:445  
number of recorded deaths, 2:445  
number of subjects, 2:445  
physiological dilemmas concerning human performance in hostile thermal environments, 2:439–440  
rapid rewarming therapy, 2:442, 2:446, 2:447  
results of the hypothermia research, 2:445–447  
rewarming studies, 2:446–447  
safeguards against future unethical human experimentation, 2:452–453  
SENOT code name, 2:443  
social and political movements and, 2:440  
steps used (figures), 2:450–451  
subject selection, 2:445  
uncovering the process in Germany, 2:441–444  
use of the Dachau data after World War II, 2:448–449  
validity of the data, 2:449–450
- Nazi medical ethics  
birth control use, 2:407–408, 2:415  
chronology of the implementation of medical ideology, 2:410–415  
“crisis” in modern medicine and, 2:417  
“euthanasia” operation, 2:413–415, 2:440, 2:441  
genocide program (“The Final Solution”), 2:415, 2:431–434, 2:440, 2:441  
growth of medical community under the Nazis, 2:417–418  
history of German medicine in the 1920s and 1930s, 2:405  
Law for the Prevention of Genetically Diseased Offspring (“Sterilization Law”), 2:410–412, 2:426  
medical experiments, 2:415–417  
misunderstandings concerning, 2:405–406  
National Socialist Physicians’ League formation, 2:409  
Nazi scientific accomplishments (exhibit), 2:406  
Nuremberg Laws, 2:412–413, 2:427–430  
politicization of German medicine, 2:405, 2:419  
racial hygiene movement, 2:407–410  
reasons why German physicians supported the Nazis, 2:417–419  
“reluctant physician” myth, 2:405, 2:409  
research funding, 2:418–419  
“science vs. facism” thesis, 2:405–406  
“selection” and “counterselection,” 2:409  
severity of the ethical breach, 2:405  
starvation of mental patients, the homeless, and other “useless eaters,” 2:414  
timeline of political and medical events in Germany, 1918–1945, 2:422–425
- Nazis. *See also* Germany; Nazi hypothermia and hypoxia research; Nazi medical ethics  
argument for eugenics, 1:28  
communitarian ethics and, 1:42, 1:44  
example of loyalty to one’s nation and race, 1:32  
example of strong community raising persons considered reprehensible by others, 1:31  
genocidal conduct of, 1:230, 1:317, 1:334, 1:343

- medical atrocities, 1:73, 1:333
- Mutter und Kind* program, 1:28
- The Netherlands
  - euthanasia and, 1:109, 1:114, 2:393
  - Op ten Noort* hospital ship detention by the Japanese, 2:750
- New Haven, CN
  - religious activity and illness survey, 2:697
- New York City subway system
  - surreptitious release of bacterial agents in, 2:527
- New York State Psychiatric Institute
  - hallucinogen research on patients, 2:526
- NGOs. *See* Nongovernmental organizations
- Nicaragua
  - Contra civil war, 2:785
- Nightingale, Florence
  - promotion of military nursing, 2:663–664
- Nightingale Pledge
  - recognition of, 2:682
  - text of, 2:665–666
- Nightingale School of Nursing
  - founding of, 2:664
- NIH. *See* National Institutes of Health
- 1991 International Guidelines for Ethical Review of Epidemiological Studies, 2:582, 2:611–619
- Ningbo
  - Japanese pathogen tests on civilians, 2:485, 2:486
- Nishimura Yeni, Col.
  - Japanese biomedical experimentation role, 2:481
- Niven, Edward
  - death from
    - Serratia* infection, 2:527
- Nobel, Albert
  - mutual annihilation view, 2:834
- Nominal Group Technique
  - description, 1:119
- Nomonhan Incident
  - field testing of biological weapons, 2:484, 2:486
- Non-Hodgkin's lymphoma
  - Vietnam veterans and, 2:735
- Non-Proliferation Treaty
  - provisions, 1:235
- Nonaustere conditions model of triage
  - description, 2:381
- Nongovernmental organizations
  - humanitarian assistance and, 2:800, 2:801
  - identifying potential problems with humanitarian assistance programs early, 2:816
  - mental health counseling, 2:823–824
  - preparation of workers for the experience of being taken hostage or tortured, 2:827
  - vulnerability of, 2:820, 2:824
- Nonlethal weapons
  - maximizing the overall good, 2:834–835
  - medical ethical concerns, 2:834–835
  - types of, 2:833–834
- Nonmaleficence principle
  - clinical encounter and, 1:13–14
  - euthanasia on the battlefield and, 2:391
  - excluding women from research protocols and, 2:557
  - Hippocratic Oath and, 1:37
- Normative ethics
  - clinical ethics and, 1:46, 1:71–72
  - deconstructionism and, 1:70
  - description, 1:38, 1:107
  - descriptions of facts relevant to normative arguments, 1:113
  - empirical studies and, 1:112–116
  - empirical testing of normative theories, 1:114–115
  - human responses to normative questions and, 1:112
  - principles of, 1:38
  - purely descriptive studies, 1:112
  - relationship between descriptive ethics and, 1:110–116
  - strengths, 1:38
  - substituted judgment theory, 1:115
  - testing compliance with established or new norms, 1:113
  - weaknesses, 1:38–39
- North Atlantic Treaty Organization
  - Serbian war against Croatia and Bosnia and, 1:228
- North Korea
  - "rogue" state status, 1:245
- Nozick, R.
  - libertarianism, 1:39
- NRL. *See* Naval Research Laboratory
- Nuclear radiation exposure. *See also* Human radiation experiments
  - counseling and utilization of irradiated soldiers, 1:342–343
- Nuclear weapons
  - degree of threat and, 1:244
  - deterrence-plus strategy, 1:244–245
  - detering the use of, 1:234–236, 1:243–245
  - "hotline" agreements, 1:234–235
  - International Court of Justice position on, 1:307
  - mutual assured destruction and, 1:244
  - nuclear pacifists and, 1:241
  - participation of physician-soldiers in research on, 1:305
  - public debates over, 1:246
  - reasons for nations to develop, 1:243–244
- Nuremberg Code
  - ethical conduct of biomedical research and, 2:545, 2:572
  - informed consent and, 1:297, 1:352
  - informed consent requirements, 2:548–550
  - principles of, 2:516
  - text (exhibit), 2:518–519
  - U.S. government and, 2:521–523
- Nuremberg Doctors' Trials
  - American participation, 2:516
  - defendants, verdicts, and punishments, 2:435–436, 2:511
  - the issue of "voluntary prisoner participation" raised by the defense at (exhibit), 2:517
  - Nuremberg Code and, 2:516
  - reports on in the American press, 2:516
- Nuremberg Laws
  - Law for the Protection of German Blood and German Honor, 2:428
  - Law for the Protection of the Genetic Health of the German People, 2:429–430
  - provisions, 2:412, 2:415
  - Reich Citizenship Law, 2:427–428
  - United States miscegenation legislation and, 2:412
- Nuremberg Trials. *See also* Nuremberg Doctors' Trials
  - Crimes Against Humanity and, 1:230
  - criticisms of, 1:239
  - obeying illegal orders and, 1:141–142
- Nurses
  - care-based ethics and, 1:109
  - Lavinia Dock's statement on nursing ethics, 1:83, 1:84
  - professional independence of, 1:69, 1:70
- Nurses' Associated Alumnae of the United States and Canada
  - code of ethics, 2:666
- Nursing ethics and the military. *See also* Physician-soldiers; Physicians
  - administrative and clinical dilemma comparison, 2:680–681
  - "advanced practice nurses," 2:668

- associations with the private nursing sector and the status of women in society, 2:663
- autonomy principle, 2:674
- beneficence principle, 2:673
- clinical interactions, 2:674–677
- collaborative practice between physicians and nurses and, 2:676
- continuing education in ethics, 2:677–678, 2:683
- deliberation and integration components of the ethical decision-making process, 2:677
- early nursing ethics, 2:663–665
- ethical decision making, 2:673–674
- ethical principles in the conduct, dissemination, and implementation of nursing research (exhibit), 2:679
- ethical standards for nurses, 2:665–669
- etiquette focus of early nursing, 2:664, 2:682
- fair and cost-effective recruitment and retention practices and, 2:681
- goal of nursing, 2:671
- institutional ethics committees in healthcare facilities and, 2:675–676
- Internet site for ethics education, 2:678
- junior nurse's personal account of an ethical dilemma, 2:677
- male registered nurses, 2:667
- miscommunication and, 2:672–673, 2:683
- multidisciplinary approach, 2:676
- Nightingale Pledge, 2:665–666, 2:682
- nurse participation in advertising professional services and in setting terms and conditions of employment, 2:666
- nurse practitioners, 2:667, 2:668
- nurses as "forgotten veterans," 2:663
- nurses' experience of war, 2:663
- nurses' role in research, 2:679–680, 2:683
- nurses' role in the Vietnam War and, 2:667, 2:674–675
- nursing administration and, 2:680–682, 2:683
- nursing and medicine, 2:669, 671–673
- "nursing" definition, 2:669–670
- physician and nurse comparison, 2:672, 2:673–674, 2:683, 2:703
- protection from workplace violence and, 2:681–682
- relationships between superiors and subordinates and, 2:675
- reporting questionable actions or situations, 2:681, 2:683
- resolving ethical dilemmas, 2:674–682
- social contract for nursing, 2:669
- topics most addressed by ethics committees, 2:676
- traditional ethical questions in healthcare and, 2:669
- traditional view of nurses, 2:663
- wartime nursing and, 2:674–675, 2:683
- work design and quality of care, 2:681
- Nursing Ethics for Hospital and Private Use*, 2:665
- Nursing Ethics Network
- Internet site for ethics education, 2:678
- Nutrition
- Japanese biomedical experimentation on how little food humans require to stay alive, 2:488, 2:490
- Nye, R.H.
- tasks of a capable military strategist, 1:140
- O**
- Oak Ridge Hospital, TN
- plutonium research on human subjects and, 2:524
- Objectivity character trait of physicians, 1:14–15
- Occupying forces. *See also specific countries*
- responsibilities of under the Geneva Conventions, 2:757
- Office for Scientific Research and Development
- Committee on Medical Research, 2:513, 2:514–515
- establishment, 2:513
- mission, 2:513
- Okuyama, Surgeon Commander
- Japanese biomedical experimentation role, 2:489
- O'Leary, Hazel
- documentation of human radiation experiments, 2:510, 2:523–524
- Olson, Frank
- CIA "mind-altering" substances research subject, 2:526
- OMB. *See* U.S. Office of Management and Budget
- On Liberty*, 1:30
- "On the Duties of Patients to Their Physicians," 1:273
- Open heart surgery
- Dachau hypothermia data and, 2:448–449
- Operation Desert Storm
- Army reforms and, 1:164
- Operation Just Cause
- Army reforms and, 1:164
- information for families—Operation Just Cause (exhibit), 1:169
- objective of avoiding casualties among civilian and military personnel, 1:183–184
- "Sand Flea" operations, 1:183
- vertical cohesion and, 1:184
- "Operation Redwing"
- studies of radioactive clouds, 2:569
- Operation Restore Hope
- United States role, 1:184–186
- "Operation Teapot"
- studies of radioactive clouds, 2:569
- Oppenheimer, Robert
- secrecy of research results, 2:528
- Organ transplantation. *See also* Kidney transplants
- communitarian ethics and, 1:42
- Geneva Conventions and, 2:758
- moral arguments against liver transplants for alcoholics, 1:113
- Origin of Species*, 2:407
- Orthner, D.K.
- spouse support as a predictor of career commitment among married men in the military, 2:729
- Osler, William
- essay on Sir Thomas Browne, 1:67–68
- introduction of the case method of instruction, 1:67
- philosophy of medicine, 1:67–68
- Ota Kiyoshi, Col.
- pathogen tests on civilians in Chang Teh, 2:485–486
- Outer Space Treaty
- provisions, 1:235
- "Overwhelming Force: What Happened in the Final Days of the Gulf War?", 2:455
- P**
- Pacifism. *See* Conscientious objection
- PAHO. *See* Pan American Health Organization
- Pakistan
- Non-Proliferation Treaty and, 1:235
- Palestine Liberation Organization
- belligerent status and, 1:231
- practice of putting anti-aircraft batteries, artillery, and military vehicles in residential neighborhoods, 1:243
- treatment of prisoners of war, 1:236
- Pan American Health Organization
- problems with mobile military hospitals, 2:817–818
- Panama. *See also* Operation Just Cause

- objective of the U.S. invasion of, 1:174
- Pare, Ambroise
  - battlefield euthanasia, 2:386
- Paris Convention on the Prohibition of the Development, Production, Stockpiling and Use of Chemical Weapons and on their Destruction
  - provisions, 1:234
- Park Ridge Center, Chicago
  - Project Ten, 1:27
- Parker v Levy*
  - military as a separate society, 1:151
- Parrish, J.A.
  - physician-soldiers, 1:271, 1:289
- Participant observation studies
  - description, 1:109, 1:118
  - labor intensive nature of, 1:118–119
- PAS. *See* Physician-assisted suicide
- Paternalism principle of autonomy. *See also* Paternalistic separatism
  - description, 1:254, 1:255
  - Hippocratic Oath and, 1:273
  - Mill's position on, 1:25:4–255
- Paternalistic separatism. *See also* Paternalism principle of autonomy
  - academia and, 1:211
  - "black budget" buying of military equipment, 1:204
  - classic or extended separatism and, 1:204
  - communication with the government and society and, 1:204
  - corruption example, 1:212
  - critics of the military and, 1:211
  - degenerative form, 1:212, 1:215, 1:217
  - description, 1:204
  - fictional General Paterson's thoughts on, 1:204–205, 1:211
  - flaws of, 1:211–212, 1:215, 1:217
  - fusionism and, 1:207
  - media and, 1:211, 1:212
  - side effects of evasive strategies, 1:211–212
- The Patient as Person: Explorations in Medical Ethics*, 1:71, 2:693
- Patient duties, principles, and virtues, 1:15–16
- Patient-physician relationship
  - basis for, 1:63
  - clinical encounter, 1:13–16
  - clinical ethics and, 1:75, 1:77
  - conservation principle and, 1:286
  - conversational analysis of patient-physician interaction, 1:108, 1:119
  - decision making within, 1:334
  - definition of "patient," 1:12
  - dialogues about values, 1:41
  - ending a relationship, 1:12, 1:16
  - entrepreneur model, 1:8–9
  - external morality, 1:10
  - futile treatments and, 1:16, 1:41
  - humanitarian assistance and, 2:812–814
  - imbalance of power within, 2:854
  - internal ethics, 1:11–13
  - managed care model, 1:8–9
  - narrative ethics and, 1:43
  - patient duties, principles, and virtues, 1:15–16
  - patients who threaten harm to others, 1:16
  - phenomena of, 1:11–13, 1:17–18
  - physician and nurse role comparison, 2:672
  - physician as body mechanic model, 1:8, 1:9
  - physician as businessman model, 1:8–9, 1:34
  - physician as clinical scientist model, 1:8, 1:9
  - physician as helper and healer model, 1:9–18
  - physician as social servant model, 1:9
  - physician virtues or character traits crucial to, 1:14–15
  - physician's bond to the individual patient, 1:275–276
  - principles and duties of the clinical encounter, 1:13–14
  - psychomotor skills and, 1:13
  - rationing of care and, 1:17, 1:34, 1:37
  - religious and cultural considerations, 2:689
  - societal obligations and, 1:16–17
  - soldier-patients in battle as synonymous with civilian-patients in peacetime, 1:284
  - uniqueness of, 1:10
  - vulnerability of the patient and, 1:13, 1:16
- Patient Self-Determination Act
  - facilitation of communication between clinicians and patients about end-of-life care, 1:113
  - implementation studies on Navajo Indian reservations, 1:108
- Patient's Bill of Rights
  - consumer movement and, 1:6
- Patterson, Secretary of War Robert
  - Doolittle Commission Report and, 1:188
- PB. *See* Pyridostigmine bromide
- Peabody, Francis
  - ethics as intrinsic to the practice of medicine, 1:68
- Peace Corps
  - criticism of humanitarian assistance programs in Central America, 2:797
- Peaceful Uses of Nuclear Energy Treaty
  - provisions, 1:235
- Peers, Lt. Gen. William F.
  - ethical bankruptcy of the Army culture, 1:182
- PEISs. *See* Programmatic environmental impact statements
- Pellegrino, Edmund D.
  - beneficence-in-trust principle, 1:40–41
  - clinical ethics education beliefs, 1:79–82
  - clinical ethics focus, 1:63
  - clinical ethics research elements, 1:79
  - collective ethics and, 1:284
  - microcultural-level conflicts, 2:694
  - phenomenological philosophy of medicine, 1:71
  - physician character, 1:32
  - principlism and, 1:72
  - rationing of care, 2:867–868
  - Society for Health and Human Values and, 1:73–74
  - ten-step workup (exhibit), 1:51
  - virtue ethic for physicians, 2:693
- Pence, G.E.
  - core virtues necessary for any decent society, 1:32
- Penicillin
  - Tuskegee Syphilis Study and, 2:512, 2:521
  - use for U.S. military personnel during World War II, 1:297, 1:341, 2:383
- Pennsylvania State University
  - Department of Humanities at the College of Medicine, 1:82
- The Pentagon Papers*, 1:162
- Percival, Thomas
  - "English gentleman" and his obligations to society, 1:65–66
  - ethical code, 1:11, 1:272, 1:273
  - therapeutic privilege concept, 1:65–66, 1:67
- PERSCOM. *See* U.S. Army Personnel Command
- Persian Gulf War. *See also* Iraq
  - anthrax vaccination and, 1:298, 1:314, 1:337–338
  - combat stress control teams, 1:180
  - concept of discipline and, 1:183
  - constitutional basis for, 1:229
  - double-effect principle and, 1:242
  - efficacy of cooling devices research, 2:454



- exposure of American service members to toxic chemicals, 1:160  
 female soldier issues, 2:555, 2:556  
 insufficient supplies of agents to prevent botulism and, 1:338–339  
 Iraqi's practice of putting anti-aircraft batteries, artillery, and military vehicles in residential neighborhoods, 1:243  
 Iraq's use of chemical weapons and, 1:234, 1:337  
 military biomedical research issues, 2:549–552  
 objective of the U.S. invasion of Kuwait, 1:174  
 pyridostigmine bromide as a pretreatment against nerve agent exposure, 1:297, 1:313, 2:378, 2:538, 2:573, 2:857–858  
 sleep deprivation and, 1:189  
 United Nations participation, 1:227  
 veterans' illness after, 2:725, 2:735, 2:736, 2:858  
 war crimes trials and, 1:239
- Peter, E.  
 nursing ethics, 2:673
- Pharmacological optimization for the battlefield  
 anti-anxiety drugs, 2:842–844  
 enhancing soldiers' capacity to fight and, 2:840  
 fear reduction and, 2:840  
 sleep-inducing medications, 2:840–841  
 stimulants, 2:841–842
- Philippines  
 cholera and beriberi research on prisoners, 2:511–512  
 female privacy and modesty, 2:711  
 Huk insurgency, 2:779
- Philosophical structure  
 analysis of ethical judgments, 1:27  
 ancient forces in ethics, 1:27–28  
 applied medical ethics, 1:34, 1:36–44, 1:70, 1:72  
 chapter overview, 1:25–27  
 character of the moral agent(s), 1:27  
 "civic republican thinking" and, 1:26  
 clinical ethics, 1:34, 1:44–53  
 comparison of principles, axioms, and rules (figure), 1:26  
 complexity of perspectives, 1:25  
 condition of possibility and postmodern philosophy (exhibit), 1:40  
 consequentialism, 1:28–29, 1:33, 1:36  
 deontology, 1:29–31, 1:33–34  
 double-effect moral rule, 1:27  
 ethics tree (figure), 1:24  
 intertwining of the branches of ethics, 1:34–35  
 medical ethics definition, 1:25, 1:26–27  
 moral obligation judgments, 1:27  
 natural law theory, 1:30, 1:32  
 postmodernism, 1:17–18, 1:40, 1:71–72, 7  
 professional philosophers' challenge to the Hippocratic Oath, 1:7  
 public policy branch of medical ethics, 1:34, 1:35–36  
 radical relativism, 1:54  
 realms of ethics, 1:26, 1:48  
 teleology, 1:28–29, 1:33  
 traditional ethical theories and associated theorists (table), 1:33  
 utilitarianism, 1:28–29, 1:33  
 virtue theory, 1:31–33, 1:34
- Phyllis J. Verhonick Nursing Research Symposium, 2:680
- Physician-assisted suicide. *See also* Euthanasia  
 beneficence-in-trust principle and, 1:41  
 contemporary philosophers and, 1:7  
 legal issues, 1:114  
 slippery slope arguments and, 1:114  
 Statement on Physician-Assisted Suicide, 2:753  
 Timothy E. Quill, "Jane Roe," et al Case, 1:88, 1:102–104
- Physician-soldiers. *See also* Military professionals; Mixed agency in military medicine  
 alternatives to military service, 1:308–309  
 autonomy and, 1:318, 1:324  
 basic training and, 1:271  
 "burn out" and, 2:836  
 care for enemy soldiers and, 1:302–303  
 civilian populations as targets (figures), 1:310–311  
 coercive capabilities compared with civilian physicians, 1:298  
 combining combat capabilities with medical care, 1:304  
 comparison of military and medical professions (table), 1:281  
 competency requirement, 1:321  
 conscientious objection and, 1:307–309  
 conservation principle, 1:282–289  
 corporateness and, 1:272, 1:273  
 defense of society and, 1:282  
 differing values and, 1:271  
 differing views of the ethical basis of military medicine, 1:322  
 enhancement of the military's ability to wage war and, 1:271, 1:333  
 ethical dilemmas, 1:296–308  
 ethics in medicine and, 1:273–274, 1:280  
 ethics in the military and, 1:276–277  
 exercise of power and, 2:854, 2:856–857  
 expertise and, 1:272, 1:273  
 failing to provide care, 1:301–303  
 "floodgate" effect of excusing soldiers from duty, 1:334, 1:336  
 as a formal part of the military, 1:271  
 Geneva Conventions' protections and obligations, 1:301  
 goals of war and, 1:271  
 historical background, 1:271  
 imposing immunization and, 1:298–300, 1:315–316, 1:337–338  
 mandate of, 1:321, 1:333  
 medical profession and military profession and, 1:271  
 mixed agency and, 2:853  
 moral nature of military medicine, 1:321–322  
 moral obligation of the U.S. military medical service, 1:320–325  
 moral opposition to a commander's decision and, 2:862–863, 2:868  
 moral protest and, 1:306–308, 1:318  
 necessity of military medicine, 1:322–323  
 neutral volunteers as care providers, 1:319  
 noncombatant status of, 1:280  
 nonlethal weapons and, 2:834–835  
 oath of enlistment (exhibit), 1:276  
 overidentification with one's unit and, 1:302, 1:319, 1:324, 2:854  
 overriding patients' wishes, 1:298–301  
 participating in combatant roles, 1:303–304  
 participating in militarily useful research and development, 1:304–305, 1:313–314  
 participation in interrogation of prisoners of war, 2:394–398  
 preventing physicians from acting as moral agents within the military and, 1:305–308  
 primary role of, 1:296, 1:333  
 profession of arms and, 1:276–279, 1:289  
 profession of medicine and, 1:273–276, 1:289  
 professional similarities between medicine and the military, 1:279–280  
 psychiatric problems from a military perspective, 1:300,



- 1:316
- psychological effects of failing to save wounded soldiers' lives, 2:836
- rebuttals of key points of Sidel and Levy's comments, 1:312–318
- recordkeeping accuracy and, 1:298, 1:315
- responsibility and, 1:272, 1:273, 1:289
- restructuring medical service in the military and, 1:308
- setting medical priorities for military purposes, 1:296–297
- soldier-patients in battle as synonymous with civilian-patients in peacetime, 1:284
- "special responsibility" of, 1:323
- subordinating the best interest of the patient, 1:296–298
- torture and, 1:305, 1:317–318, 2:395–396, 2:757–758
- treatment of civilians, 1:302, 2:384
- treatment of civilians and, 1:302, 1:316–317
- treatment of prisoners of war and, 1:316–317, 1:319
- triage and, 1:300–301, 1:313
- using medicine as a weapon, 1:304, 1:317
- violating patient confidentiality in the name of national or military security, 1:298, 1:315
- withholding service from the Armed Forces and the end of war, 1:309, 1:322, 1:323
- Physicians. *See also* Nursing ethics and the military; Patient-physician relationship; Physician-soldiers
  - alternatives to military service, 1:308–309
  - anesthesia development and the advent of safe surgery, 1:273
  - body mechanic model of the patient-physician relationship, 1:8, 1:9
  - changing understanding of the origin of disease and the role of science and, 1:273–274
  - clinical scientist model of the patient-physician relationship, 1:8, 1:9
  - communication patterns, 2:704–705
  - comparison of military and medical professions (table), 1:281
  - corporateness and, 1:272, 1:273
  - cost containment and, 1:17
  - the culture of, 2:703–705
  - curing role, 1:275
  - "English gentleman" concept, 1:65–66
  - ethos of, 1:273–276, 1:280–282, 1:322
  - expertise and, 1:272, 1:273
  - as gatekeepers to care, 1:17, 1:37
  - goals of medicine in the presence of disease and death, 1:275–276
  - healing role, 1:275
  - helper and healer model of the patient-physician relationship, 1:9–18
  - International Code of Medical Ethics duties, 2:766
  - Japanese biomedical experimentation during the World-War-II era and, 2:465–506
  - military physician's relationship to other military personnel, 1:18
  - military vocabulary and, 1:279–280
  - mixed agency and, 1:295, 1:333–365
  - Nazi medical ethics and, 2:405–436
  - openness and, 1:207
  - operational conservation, 1:283
  - overriding ethical principles of medical practice, 1:295–296
  - philosopher role, 1:274
  - physician and nurse role comparison, 2:672, 2:703
  - physicians-in-charge and clinical ethicists, 1:78
  - prevention role, 1:275
  - priest role, 1:274
  - professional similarities between medicine and the military, 1:279–280
  - rationing of care and, 1:17, 1:34, 1:37
  - relationship between cost-containing attitudes of physicians and their willingness to prescribe assisted suicide, 1:114
  - religious beliefs influence on clinical decisions, 2:712
  - responsibility and, 1:272, 1:273, 1:289
  - responsibility for reporting medical situations to the appropriate agencies, 1:295
  - roles of, 1:274
  - scientist role, 1:274
  - social servant model of the patient-physician relationship, 1:9
  - societal obligations, 1:16–17, 2:379
  - specialization of, 1:70
  - therapeutic privilege, 1:65–66, 1:67
  - "total institutions" and, 1:298, 1:306, 1:324, 1:334
  - virtues or character traits crucial to the patient-physician relationship, 1:14–15, 1:80–81
- Physicians for Social Responsibility
  - nuclear war position, 1:323
- Pictet, Jean
  - care of civilians, 2:744
- "The pill" contraception option
  - women's liberation and, 1:69
- Pilots
  - evaluating pilots who may be impaired, 1:344–345
- Ping Fan
  - Japanese biomedical experimentation site, 2:478–480, 2:483
  - photographs from Ping Fan Museum, 2:503–506
- Pinson, Gen. Ernest A.
  - human radiation experiments and, 2:569
- Plague
  - Japanese biomedical experimentation on, 2:478, 2:483, 2:485–486
  - postwar epidemics of, 2:487
- Planning for Health Service Support*, 2:374, 2:375–376
- Plato
  - justice principle and, 1:37
  - natural law theory, 1:32
  - "virtue" definition, 1:14
  - virtue theory, 1:64
- PLO. *See* Palestine Liberation Organization
- Ploetz, Alfred
  - classification of Jews, 2:408
- Plutonium research
  - on human subjects, 2:439, 2:524–525, 2:528
- Poland
  - American-Polish Relief Expedition to eliminate typhus in, 2:778
- Political pacifism case study, 1:260–261
- Polonium research
  - on human subjects, 2:525
- Portugal
  - belligerent status and, 1:231
- Post, S.G.
  - psychotherapy and middle class values, 2:712
- Postmodernism
  - antifoundationalism and, 1:17–18, 7
  - condition of possibility (exhibit), 1:40
  - Hippocratic Oath and, 1:7
  - historical basis, 1:71–72
- Posttraumatic stress disorder
  - combat stress breakdown and, 1:179
  - health problems related to, 2:734
  - humanitarian assistance and, 2:825–826
  - legitimacy of the diagnosis of, 2:724, 2:735

- The Power Game*, 1:212
- POWs. *See* Prisoners of war
- Pregnancy  
 possibility of as a justification for excluding women from research, 2:556–557  
 as a reason for discharge of female military personnel, 2:727
- “Preparation of Nurses for Participation in and Utilization of Research,” 2:679
- Presbyterian Church  
 Society for Health and Human Values funding, 1:74
- Presidential Advisory Committee on Gulf War Veterans’ Illnesses  
 criticism of the military’s recordkeeping accuracy, 1:298, 1:300
- Presidential Commission on Radiation Experimentation  
 empirical surveys regarding military medical experiments and informed consent, 1:122
- President’s Commission for the Protection of Human Subjects in Research  
*Belmont Report*, 1:36
- President’s Commission for the Study of Ethical Problems in Medicine and Biomedical Behavioral Research  
 creation of, 1:73
- President’s Commission on the Study of Ethical Problems in Medicine  
 care of the terminally ill and patients in the vegetative state, 2:693
- The Prevention of Communicable Diseases of Man—General*, 2:568
- Priest, E.R.  
 goal of ethics consultants, 1:77
- Principles of Biomedical Ethics*, 1:36
- Principlism  
 American moralism movement and, 2:693  
 criticisms of, 1:37–38  
 cultural neutrality and, 1:37  
 ethics workups and, 1:36–37  
 euthanasia ethical analysis, 2:389–392  
 four-principle approach, 1:36–38, 1:71–72, 2:389, 2:693  
 limitations, 1:37–38  
 normative ethics, 1:38–39, 1:70  
 principle-based ethics of Western cultures, 2:693–694  
 strengths, 1:36–37  
 truth-telling case study and, 1:38  
 weaknesses, 1:37–38
- Prisoners of war  
 case studies, 1:131, 1:154, 2:391  
 collaboration with the enemy, 1:144  
 discipline in camps, 1:236  
 Geneva Conventions and, 1:225, 1:236–237, 1:316, 2:380, 2:394–398  
 hierarchy of treatment and, 1:316–317, 1:319  
 humane treatment of, 1:174  
 Japanese biomedical experimentation on, 2:487–490  
 Japanese warrior code of  
*Bushido* and treatment of, 2:470, 2:471  
 living conditions for, 1:236  
 overidentification with one’s unit and, 1:319  
 physician participation in interrogation of, 2:394–398, 2:757–758  
 prohibition of reprisals against, 1:236–237, 1:238  
 protection of, 1:236–237  
 removal from combat area, 1:236  
 retention of medical personnel, 2:746, 2:752  
 right to survive capture, 1:236  
 the terrified wounded POW case study, 2:391  
 torture and, 1:154, 1:317–318
- U.S. military regulations against using as human research subjects, 2:587
- Privacy issues. *See also* Confidentiality issues  
 DNA samples, 2:860  
 Philippine females’ privacy and modesty issues, 2:711
- Pro-fession and the physician’s implicit promise to help, 1:12, 1:13
- Professional military ethic. *See also* Military professionals  
 American professional military ethic, 1:141–148  
 commitment to the welfare of one’s fellows and subordinates, 1:146  
 context of military experience and, 1:144  
 courage element, 1:142–143  
 double-effect principle, 1:153  
 functional requirements, 1:138–139  
 fundamental values of American Society and, 1:143, 1:148, 1:151  
 guidelines for, 1:147  
 initiative and, 1:146–147  
 integrity and, 1:144–145  
 limitations on individuals and, 1:148  
 loyalty element, 1:141, 1:142, 1:144  
 moral dilemmas of leadership and, 1:152–153  
 pluralism and, 1:148–152  
 professional values, 1:142  
 religious tradition and, 1:146  
 selfless service element, 1:144, 1:145
- Programmatic environmental impact statements  
 military biomedical research and, 2:543
- Project Ten  
 description, 1:27
- “Project Whitecoat” biological weapons program, 2:527
- Prospective studies  
 description, 2:583
- Protestant tradition of medical ethics, 1:10
- Protocols I and II  
 criteria for justifying medical procedures, 2:755  
 definition of medical personnel, 2:744–745  
 definition of wounded and sick, 2:744  
 denouncing of, or informing on, wounded members of enemy forces or resistance movements, 2:745–746  
 medical aircraft and, 2:749–750  
 medical ethics and, 2:752–753  
 medical records and, 2:755  
 “medical unit” definition, 2:751  
 patients’ right to refuse surgery, 2:758–759  
 provisions, 2:743  
 rights of medical personnel, 2:745–746  
 special signals displaying the red cross, 2:748
- Providing feasible medical care to indigenous populations in a combat zone  
 case study, 2:818–819
- Prudence character trait of physicians, 1:15
- Pruitt, Col. Basil  
 combat surgery quote, 2:399
- Prussia. *See also* Germany  
 development of military forces, 1:135  
 lowering of class barriers for officer appointments, 1:136
- Psychiatric disorders. *See also specific disorders*  
 counseling and treating suicidal soldiers, 1:350–351  
 euthanasia for the mentally ill in Nazi Germany, 2:413, 2:414  
 humanitarian assistance and, 2:823–824  
 involuntary hospitalization and, 1:349–350  
 Japanese experimentation with  
*Rickettsia tsutsugam shi* on mental patients, 2:495  
 meeting the clinical needs of soldiers with, 1:350–351

patients with HIV and, 1:349  
removing mentally unstable soldiers from combat, 1:342  
return to duty and, 1:300, 1:316  
somatization disorder, 1:336–337  
starvation of German mental patients, 2:414  
survivor guilt and, 1:315, 1:336

Psychiatry  
confidentiality issues effect on ability to treat patients,  
1:319–320

Psychological studies  
physician-assisted suicide, 1:114

Psychology  
contributions to descriptive ethics, 1:109

PTSD. *See* Posttraumatic stress disorder

Public policy medical ethics  
age-based rationing and, 1:34  
institutional policies, 1:35  
issues addressed, 1:34, 1:35  
legislation, 1:35–36  
regulations, 1:35

Pyridostigmine bromide  
female soldier dosage rates, 2:556  
investigational use of for “pretreatment” of the effects of  
nerve gas, 1:297, 1:313, 2:378, 2:538, 2:549–551, 2:573,  
2:857–858

“Pyridostigmine Used as a Nerve Agent Pretreatment Under  
Wartime Conditions”  
article in the *Journal of the American Medical Association*,  
2:573

Pythagorean corpus  
influence on clinical ethics, 1:64

## Q

Q Program  
secret plane development, 1:211

Qualitative research  
communications research, 1:119  
Delphi panels, 1:119  
ethnographic analysis, 1:119  
focus groups, 1:119  
participant observation, 1:118–119

Quinlan Case  
description, 1:88, 1:94–95  
public concern for violations of patients’ rights and, 1:73

## R

Rabaul, New Britain  
Japanese biomedical experimentation site, 2:488, 2:490

Rachford, B.K.  
dysentery research, 2:514

Racial hygiene movement  
blood group studies, 2:410  
in the German medical community, 2:409–410  
increasing anti-Semitism and evolving biological deter-  
minism, 2:408–409  
preventive care for the German germ plasm, 2:419  
as a primary research goal, 2:410  
social Darwinism and, 2:407–408  
twin studies, 2:410

Racial issues  
exclusion of minorities from military biomedical research,  
2:556, 2:579

Racism  
in Japan, 2:470–472  
in the United States, 2:471  
worldwide nature of, 2:440, 2:471

Radoiu, M.  
patient triage on a MEDCAP mission, 2:816

Ramm, Rudolf  
medical ethics text, 2:419

Ramsey, Paul  
American moralism, 2:693  
Christian ethical principle introduction, 1:71  
principle of discrimination, 1:241

Randomized clinical trials  
assessment of the quality of, 1:120

Randomized controlled trials  
description, 2:583

Rangoon  
Japanese biomedical experimentation site, 2:481

Rascher, Sigmund  
execution of, 2:447–448  
hypothermia and hypoxia research, 2:442–450, 2:459–461

Rationing of care  
physicians and, 1:17, 1:34, 1:37, 2:867–868

Raud, Jacob F.  
combatant role, 1:303

Rawls, J.  
contractarian theory of justice, 1:37

Reagan, Pres. Ronald  
counterinsurgency movements in Central America, 2:783  
Executive Order on Intelligence Activities, 2:526  
sending of a U.S. Army medical mobile training team to El  
Salvador, 2:793

Reche, Otto  
German Society for Blood Group Research founder, 2:410

Red Cross. *See* International Committee of the Red Cross

Red Cross emblem  
illegal and commercial use of, 2:743, 2:749

Reed, Maj. Walter  
yellow fever research, 2:511, 2:568

Reemtsma, Keith  
transplantation of chimpanzee kidneys into human  
patients, 2:520

Reflective equilibrium  
external morality and, 1:10

Regan, T.  
animal experimentation views, 2:554

Registered Nurse Student Program  
eligibility of men for, 2:667

Regulations in Time of Armed Conflict  
international recognition of, 2:753  
text, 2:767

Reichart, J.F.  
separatism, 1:202

Rein, Dr. F.  
criticism of Nazi human experiments, 2:448

Religious and cultural considerations in military healthcare.  
*See also specific religions and cultures*

a-religious caregivers, 2:712  
American moralism, 2:692–693, 2:710  
America’s religious traditions, 2:691–692  
caregiver guidelines, 2:711–714  
caregiver resources, 2:714  
causes of disease as a cultural issue, 2:701  
conflicts arising from, 2:710–714  
coping with long-term and terminal illness, 2:697  
cultural concepts of health, 2:701  
cultural considerations in healthcare provision, 2:700–706  
cultural differences in end-of-life care, 2:712–713  
cultural world views, 2:700–701  
culture characteristics, 2:700  
culture of military healthcare, 2:702–706

- the culture of physicians, 2:703–705  
 development of an awareness of the potential conflicts in  
 healthcare, 2:711  
 dietary practices, 2:699–700  
 documented medical and psychological benefits of  
 religious beliefs, 2:696–698  
 does healthcare possess religious values that affect  
 patient-care decisions? (exhibit), 2:690  
 effects of religious and spiritual commitment on survival,  
 2:697–698  
 “etiology of disease” of Western medicine, 2:702  
 expressions of religious beliefs, 2:698–700  
 faith healers, 2:695  
 five basic human problems, 2:700–701  
 garments, 2:699  
 healing systems, 2:702  
 hidden nature of, 2:689  
 holistic health paradigms, 2:702  
 holy days, 2:699  
 “honest broker” caregivers, 2:713–714  
 importance of understanding diversity, 2:690–691  
 major dimensions of religion, 2:698–700  
 major subcultures in healthcare, 2:703–706  
 managed care subculture, 2:705–706  
 medicine and nursing subculture, 2:703  
 mixed agency and, 2:702–703  
 one’s own religious or cultural values, 2:712–713  
 patient autonomy, 2:712  
 potential for conflict, 2:710–711  
 prayer, 2:698–699  
 principle-based ethics of Western cultures, 2:693–694  
 religious beliefs and values, 2:694–695  
 religious beliefs and values of the American patient, 2:694–  
 698  
 religious considerations in healthcare provision, 2:691–700  
 religious-cultural views of wellness and illness, 2:706–710  
 religious culture’s influence on Western medicine, 2:693–  
 694  
 religious symbols, 2:699  
 seeing patients as individuals rather than stereotypes,  
 2:711–712  
 Western culture’s influence on other nations, 2:694  
 Western view of science, 2:693
- Religious garments, 2:699  
 Religious symbols, 2:699  
 Rimmellink Commission  
 euthanasia report, 2:393
- Research. *See also* Empirical research on medical ethics;  
 Human experimentation; Human volunteers in military  
 biomedical research; Informed consent; *specific types of  
 research*  
 acquiring prejudicial information while conducting  
 medical research, 1:351–352  
 children’s participation in, 1:42  
 conducting appropriate research (exhibit), 2:453  
 growth of public interest in ethics and, 2:724  
 Guidelines for Research, 1:36  
 institutional review boards, 1:36, 1:313–314  
 nurses’ role in, 2:679–680  
 participation of physician-soldiers in militarily useful  
 research and development, 1:304–305, 1:313–314  
 President’s Commission for the Protection of Human  
 Subjects in Research, 1:36  
 public policy medical ethics and, 1:35  
 recordkeeping accuracy and, 1:298, 1:315
- Resocialization  
 All Volunteer Force and, 2:722  
 contrast with continuous socialization, 2:722  
 “democratization of risk” and, 2:723  
 inclusion of previously excluded groups, 2:731  
 institutional/occupational thesis, 2:722–723  
 integration of the family and the military and, 2:723  
 military medicine and, 2:723  
 of new recruits, 2:722  
 prevention of alcohol, tobacco, and drug use by military  
 personnel, 2:726
- Resolutions of the Geneva International Conference, October  
 1863  
 text, 2:763–764
- Resources in ethics  
 Bioethicsline, 1:121  
 Internet listings for bioethics research, 1:121–122  
 National Reference Center for Bioethics Literature, 1:121
- Retirees. *See also* Veterans  
 healthcare programs for, 2:728  
 past, present, and future of healthcare for retirees and  
 family members (exhibit), 2:730
- Return to duty considerations  
 arguments for and against the enforced treatment for  
 individual soldiers, 2:378–380  
 beneficence principle, 2:376, 2:378  
 during the Cold War (exhibit), 2:375–376  
 combat stress breakdown, 1:300, 1:316, 1:335–337, 2:373–  
 374  
 “floodgate phenomenon,” 1:334, 1:336, 1:342, 2:373, 2:860  
 informed consent and, 2:374, 2:376  
 medical battlefield rules (exhibit), 2:377–378  
 minimally wounded soldiers, 2:373  
 “preserve the fighting strength” principle, 2:374  
 self-inflicted wounds and, 2:373
- Revolutionary War  
 nurse’s role, 2:663
- Rewarming research. *See* Nazi hypothermia and hypoxia  
 research
- Richards, Alfred Newton  
 CMR’s policy on human experimentation, 2:514–515  
 Committee on Medical Research head, 2:513
- Rickettsia tsutsugamushi*  
 Japanese experimentation on mental patients, 2:495
- Rift Valley Fever  
 vaccine for, 2:539
- Right-to-die movement  
 libertarianism and, 1:40
- Rister, Staff Sergeant Gary  
 example of how confidence based on trust can counteract  
 isolation on the battlefield, 1:177
- Ritalin®  
 action of, 2:841
- Robb, Isabel Hampton  
 nursing ethics text, 2:665
- Rock of Ages*, 2:452
- Rockefeller, Vice Pres. Nelson  
 investigation of clandestine testing by the CIA and the  
 Department of Defense, 2:526
- Rockefeller Commission  
 investigation of clandestine testing by the CIA and  
 Department of Defense, 2:526
- Rollerblading example of the harm principle, 1:254
- Rollins, Dr. A.E.  
 “Tucker Telephone” design, 2:395
- Roman Catholicism. *See* Catholic Church
- Roman Empire  
 area controlled, 1:133  
*bellum justum* doctrine, 1:223

- combat practices, 1:223
- role of professional soldiers, 1:133–134
- role of the military in Roman society, 1:134
- Romberg, Dr. Hans Wolfgang
  - hypoxia research, 2:443
- Roosevelt, Pres. Franklin D.
  - Office for Scientific Research and Development establishment, 2:513
- Rose, Gerhard
  - experimental vaccines against spotted fever, 2:416
- Rosen, L.N.
  - study of sexual abuse in the U.S. Army, 1:191
- Rosen, S.
  - postmodernism argument, 1:7
- Ross, W.D.
  - prima facie principles, 1:7, 1:30–31, 1:36, 1:37–38, 1:71
- Roter, D.L.
  - conversational analysis technique, 1:119
- Rüdin, Ernst
  - Kaiser Wilhelm Institute for Genealogy director, 2:410
- Ruff, Dr. Siegfried
  - hypoxia research, 2:443, 2:444
- Rules Governing the Care of Sick and Wounded, Particularly in Time of Conflict
  - international recognition of, 2:753
  - text, 2:767
- Rush, Dr. Benjamin
  - demystification of medicine and, 1:273
- Russia. *See* Former Soviet Union
- Russo-Japanese War
  - lack of atrocities by the Japanese during, 2:470, 2:472
- Rwanda
  - Canadian peacekeeping forces in, 2:825, 2:828
  - genocide in, 2:828
- Ryle, John A.
  - withholding service from the Armed Forces and the end of war, 1:309, 1:322

## S

- Saikewicz Case, 1:88, 1:96
- San Francisco, CA
  - surreptitious release of *Serratia marcescens* over, 2:527
- Sargon of Agade
  - wars fought, 1:133
- Sato Shunji, Gen.
  - Japanese biomedical experimentation role, 2:481
- Schiedermayer, D.
  - clinical ethics rules, 1:47
- Schilling, Dr. Klaus
  - malaria research, 2:452
- School of Aerospace Medicine, Brooks, Air Force Base, TX
  - nursing research literature, 2:680
- Schultz, Eda
  - radiation experiments subject, 2:525
- Scott, W.J.
  - homosexuality in the military, 2:729
  - politics of readjustment of Vietnam veterans, 2:725
  - posttraumatic stress disorder diagnosis and, 2:735
  - reasons that healthcare issues are important for the readjustment of the veteran, 2:733
  - sociology of veterans' issues, 2:734–735, 2:736
- The Sea and Poison*, 2:468
- Sea-Launched Ballistic Missiles
  - agreements on the reduction or elimination of, 1:235
- Seabed Arms Control Treaty
  - provisions, 1:235
- Searle, John
  - fact/value distinction, 1:110
- Security Assistance Program
  - funding for training to a host nation, 2:775
- Security clearances
  - homosexuality and, 1:352–353
- Seelkopf, Dr. K.
  - hypothermia and hypoxia research, 2:442
- Segal, M.W.
  - spouse support as a predictor of career commitment among married men in the military, 2:729
- Seldin, D.
  - medicine as applied biology, 1:71
- Self-Determination Act of 1991, 1:101
- Senate Veterans' Affairs Committee
  - efficacy and safety of the anthrax vaccine, 1:299
- Sencer, Dr. David
  - Tuskegee Syphilis Study and, 2:520
- Seneca
  - influence on clinical ethics, 1:64
- Separation anxiety
  - case study, 1:347–348
- Separatism. *See* Classic separatism; Extended separatism; Paternalistic separatism
- September 11 terrorist attacks
  - vulnerability of United States and, 1:320
- Serbia
  - "ethnic cleansing," 1:228
- Serratia marcescens*
  - surreptitious release of into the Pentagon's air-conditioning system, on naval vessels, and over San Francisco, 2:527
- Seventh Day Adventists
  - biological weapons testing on members serving in the military as noncombatants, 2:527
  - life expectancy, 2:697
- Sexual abuse
  - female military personnel and, 2:727
  - military culture and, 1:190–191
- Sexual harassment
  - women in the military and, 2:726
- Sexual intercourse with patients
  - contemporary philosophers and, 1:7
- Sexual preference. *See* Homosexuality
- Sexually transmitted diseases. *See specific diseases*
- Shalala, Donna
  - creation of the Office for Human Research Protection, 2:521
- Shannon, James
  - protection of research subjects and, 2:519–520
- Shay, J.
  - "character" definition, 1:159
  - destruction of a combatant's character in a moral vacuum, 1:178
- Sheehan, M.N.
  - problem solving in clinical ethics, 1:47
- Shigella*
  - Japanese experimentation on unsuspecting soldiers, 2:495
- Shimkin, Michael
  - protection of research subjects and, 2:519–520
- Shinto faith
  - Emperor as a living god, 2:471
- Sidgwick, Henry
  - overriding of veracity by beneficence, 1:65, 1:71
- Siegler, M.
  - clinical ethics definition, 1:63
  - clinical ethics education beliefs, 1:79–82



- clinical ethics research elements, 1:79  
concept of good clinical medicine, 1:63  
ethical teaching rounds on the Obstetrical Service of the Toronto Western Hospital, 1:83  
ethics committees and, 1:78  
four-dimension grid for clinical ethics, 1:50–51  
medical model for clinical ethicists, 1:75  
moral pluralism, 1:46  
process-oriented philosophy of medicine, 1:71  
teaching clinical ethics at the bedside, 1:63
- Silver, Dr. Henry  
education of nurse practitioners, 2:667
- Singapore  
Japanese biomedical experimentation site, 2:481
- Singer, Peter  
animal experimentation views, 2:553
- Singer, Peter A.  
clinical ethics education beliefs, 1:79–82  
clinical ethics research elements, 1:79  
ethical teaching rounds on the Obstetrical Service of the Toronto Western Hospital, 1:83  
medical model for clinical ethicists, 1:75
- Singer, Prof. Dr.  
hypothermia and hypoxia research, 2:443
- Single Project Assurances  
filing requirements, 2:581
- Situational pacifism  
case studies, 1:260, 1:304, 1:305–306, 1:307  
contractual obligation to the state and, 1:258–259  
description, 1:257, 1:259  
morale of the unit and, 1:258  
resignation from the Army and, 1:257–259, 1:307  
unit cohesiveness and, 1:257–258, 1:259  
unit competence and, 1:258, 1:259
- SLBMs. *See* Sea-Launched Ballistic Missiles
- Sledge, Eugene  
following orders and, 1:264
- Sleep deprivation  
command decisions and, 1:189, 1:190
- Sleep-inducing medications  
addictive nature of, 2:840–841  
inherent coercion and, 2:841  
soldiers' alertness and, 2:840
- Slippery slope arguments  
types of, 1:114
- SMEE. *See* Subject Matter Expert Exchange program
- Smith, A.M.  
military medicine and combat preparedness, 2:723
- Smith, Headrace, 1:212
- Smith, K.V.  
continuing education in ethics for nurses, 2:677
- Social contract theory  
normative ethics and, 1:39
- Social Darwinism  
Nazi movement and, 2:407–408
- Societal influences and the ethics of military healthcare  
complaints about care received in military medical facilities, 2:728–729, 2:736  
demographics of the military and, 2:721  
distinction between disease, illness, and sickness and, 2:733–734, 2:736  
gender considerations, 2:725–729, 2:735–736  
general well-being and voluntary resocialization, 2:721–723  
governmental policy and receipt of health care, 2:724  
overview of societal influences, 2:724–725  
past, present, and future of healthcare for retirees and family members (exhibit), 2:730  
radical movements and subsequent social change, 2:724  
sexual preference, 2:729–733  
veterans' healthcare issues and the politics of eligibility, 2:733–735
- Society for General Internal Medicine  
establishment of, 1:74
- Society for Health and Human Values  
organization of, 1:73–74
- Society for Law and Medicine  
establishment of, 1:74
- Society for Social Responsibility in Science  
advocacy of personal moral responsibility, 2:535
- Sociology  
contributions to descriptive ethics, 1:108–109  
partial codes and, 1:108–109  
participant-observer studies, 1:109  
President's Commission study of informed consent in clinical practice, 1:109  
questions about normative claims and, 1:116
- SOCOM. *See* Special Operations Command
- Socrates  
merits of virtue, 1:31
- Sodium Amytal®  
uses in interrogation, 2:397
- The Soldier and the State*, 1:202, 1:205
- Soldiers. *See* Military professionals
- Somalia  
ground troops in (exhibit), 2:799  
leaving Somali patients behind after withdrawal of U.S. forces, 2:823  
Operation Restore Hope, 1:184–186, 2:819  
United Nations request for military humanitarian assistance, 2:798  
use of nonlethal weapons during withdrawal from, 2:833
- Sonata®  
action of, 2:840
- South Africa  
belligerent status and, 1:231
- Southam, Chester  
cancer research, 2:520
- SOUTHCOM. *See* Southern Command
- Southeast Asia. *See also specific countries*  
implementation of civic action programs, 2:780–782  
Japan's use of racism to justify imperial adventures in, 2:471
- Southern Command  
description (exhibit), 2:784  
humanitarian/civic action assistance programs, 2:783–796, 2:784–785, 2:791–792
- Soviet Military Power*  
portrayal of Soviet power in a "worst case scenario," 1:204
- Soviet Union. *See* Former Soviet Union
- Spanish-American War  
nurses' role, 2:664
- SPAs. *See* Single Project Assurances
- Special Operations Command  
establishment of, 2:780  
nation-building role (exhibit), 2:781
- SSBCOM. *See* U.S. Army Soldier Systems Biological and Chemical Command
- St. Germaine, Arthur  
posthumous pardon for, 2:515
- St. Louis, MO  
surreptitious release of bacterial agents over, 2:527
- Stanley, James  
lysergic acid diethylamide research subject, 2:570

- spouse support as a predictor of career commitment among married men in the military, 2:729
- Stanley, S.C.  
homosexuality in the military, 2:729
- START. *See* Strategic Arms Reduction Treaty
- Statement on Physician-Assisted Suicide  
international recognition of, 2:753  
text, 2:770
- Stein, Dr.  
review of Rascher's work, 2:447
- Steinberg, Surgeon General George M.  
Nurse Corps and, 2:664–665
- Stelling, H.G.  
returning sick soldiers to duty, 1:339
- Sterilization Law. *See* Law for the Prevention of Genetically Diseased Offspring
- Stevens, Albert  
plutonium research subject, 2:525
- Steven's Amendments  
humanitarian assistance and, 2:789–790, 2:792
- Stewart, William  
protection of human research subjects and, 2:520
- Stimpson, Secretary of War Henry L.  
biological warfare test support, 2:527
- Stimson, Maj. Julia C.  
Army School of Nursing Dean, 2:665
- Stimulant medications  
action of, 2:841  
adverse symptoms, 2:841  
combat pilots and, 2:841–842  
inherent coercion and, 2:842
- Stollerman, Eugene  
Tuskegee Syphilis Study and, 2:520
- Stone, Dr. Robert  
plutonium research, 2:525  
secrecy of research and, 2:528
- Strategic Arms Reduction Treaty  
ballistic missile reduction, 1:235
- Strategic bombing  
World War II and, 1:239–240, 1:241, 1:307
- Strong, Richard P.  
cholera and beriberi research on Philippine prisoners, 2:511–512
- Strughold, Dr.  
knowledge of Nazi human experiments, 2:448
- Study on Military Professionalism*  
ethical bankruptcy of the Army culture and, 1:182  
supplanting of integrity with careerism and "looking good," 1:163
- Sturm, S.R.  
separatism, 1:202
- Suarez, Francisco  
war-conduct law and, 1:224
- Subcommittee on National Security, Veterans Affairs and International Relations  
criticism of the Anthrax Vaccine Immunization Program, 1:300
- Subject Matter Expert Exchange program  
description (exhibit), 2:775  
Latin American Cooperative Fund support, 2:775
- Substance abuse. *See also* Alcoholism  
DoD policy on, 2:726  
religious beliefs and, 2:696  
reporting requirements, 1:351–352  
reporting soldiers with minimal substance abuse problems, 1:346–347  
U.S. studies of drug abuse on prisoners, 2:513
- Substituted judgment theory  
patient autonomy and, 1:115
- Succinylcholine  
uses in interrogation, 2:396–397
- Suicide. *See also* Physician-assisted suicide  
counseling and treating suicidal soldiers, 1:350–351
- Sullivan, Gen. Gordon  
view of the Army as being in a perpetual state of change, 1:163
- Sulmasy, D.P.  
education of house officers in clinical ethics, 1:79
- Sumerian Empire  
state-army symbiosis, 1:133
- Surplus Property Law  
disaster relief and, 2:778–779
- Surrogate motherhood  
Baby M Case, 1:88, 1:99–100
- Surveys  
criteria for assessing the quality of, 1:117  
criteria of methodological rigor in survey research, 1:116–118  
Cronbach's  $\alpha$  test, 1:117  
design for, 1:117  
pilot testing, 1:117  
Presidential Commission on Radiation Experimentation  
surveys on military medical experiments and informed consent, 1:122  
random sampling, 1:117  
statistical analysis of, 1:117–118  
uses of in ethics, 1:110, 1:116
- Survivor guilt  
case study, 1:356  
combat stress breakdown and, 1:315, 1:336
- Swan, K.G.  
ethical dilemmas of triage, 1:297
- Swan, K.G., Jr.  
ethical dilemmas of triage, 1:297
- Swann, Dr. Steve  
scenario of the ethical dilemmas facing the military physician, 2:384–385, 2:388–394
- Swann scenario, 2:384–385, 2:388–394
- Sweden  
citizen armies, 1:135
- Swine flu vaccine  
potential risks of mass administration, 1:300
- Syphilis. *See* Tuskegee Syphilis Study

## T

- Tailhook scandal  
description, 1:207
- Tailoring the organizational response to the local need  
case study, 2:818
- Takeda Tsuneyoshi, Prince (Japan)  
biomedical experimentation role, 2:469
- Tarasoff Case, 1:37, 1:88, 1:95–96
- Taylor, C.  
clinical ethics definition, 1:63
- Taylor, Frederick  
interchangeability of personnel, 1:166
- Taylor, Gen. Maxwell  
Armed Forces Assistance to Korea and, 2:780
- Taylor, Telford  
Nuremberg Doctors' Trial statement, 2:405
- Teaching and Evaluation of Interpersonal Skills and Ethical Decisionmaking in Pediatrics*, 1:74
- Telemedicine  
electronic medical records and, 2:839

- use within the military, 2:838–839
- Teleology
  - animal experimentation and, 2:553, 2:554
  - description, 1:28, 1:33
  - strengths, 1:28
  - virtue theory comparison, 1:32
  - weaknesses, 1:28–29
- Telepresence surgery
  - data transmission concerns, 2:839–840
  - description, 2:839
  - perception of the wounded soldier and, 2:840
- Temazepam
  - action of, 2:840
- The terrified wounded POW
  - case study, 2:391
- Terrorism
  - biological weapons and, 2:537
  - emergence of, 2:782
- Terry, Luther
  - protection of human research subjects and, 2:520
- The Patient as Person: Explorations in Medical Ethics*, 2:693
- Theodosius, Emperor
  - acceptance of Christianity as the Roman Empire’s official religion, 1:223
- Theory and Practice in Medical Ethics*, 1:47
- Therapeutic privilege concept, 1:65–66, 1:67, 1:84, 1:338
- Thermal research. *See* Nazi hypothermia and hypoxia research
- Third World countries. *See also specific countries*
  - biological weapons and, 2:543
- Thirty Years War
  - European law of nations and, 1:224
- Thomas, Lewis
  - medical education in the 1930s, 1:273–274
- Thomas Aquinas, Saint
  - analysis of war, 1:224
  - goodness of actions principle, 1:32, 1:34
  - influence on clinical ethics, 1:64
  - principle of discrimination and, 1:241
  - prudent judgment or practical wisdom and, 1:15
  - theological ethics, 1:10
  - wisdom of the government passing laws regarding moral life, 1:111
- Thomasma, D.C.
  - beneficence-in-trust principle, 1:40–41
  - collective ethics and, 1:284
  - contextual grid for clinical ethics, 1:47–48
  - experimental methods and bioethics, 1:120
  - phenomenological philosophy of medicine, 1:71
  - unitary theory of medical ethics, 1:47
  - virtue ethic for physicians, 2:693
- Threshold Test Ban Treaty
  - provisions, 1:235
- Thurman, Gen. Maxwell R.
  - combat stress control teams, 1:180
  - evaluation of medical military civic action (exhibit), 2:789
  - humanitarian assistance role, 2:788
  - lack of long-term development plan for Panama, 1:184
- Timothy E. Quill, “Jane Roe,” et al Case, 1:88, 1:102–104
- Tobacco use
  - DoD policy on, 2:726
- Tojo Hideki, Prime Minister (Japan)
  - postwar portrayal of, 2:491
- Tokyo Trials
  - criticisms of, 1:239
- Toronto Western Hospital
  - ethical teaching rounds on the Obstetrical Service, 1:83
- Torrey, E.
  - religious beliefs influence on psychiatric practice, 2:712
- Torture
  - case studies, 2:396–398
  - physician involvement in, 2:395–396, 2:757–758
  - physician-soldiers and, 1:305, 1:317–318
  - psychological, 1:316
  - restrictions against, 1:154
  - selection and training of torturers in Greece, 2:396
- Total institutions
  - feigning illness and the “floodgate” effect, 1:334
  - medical ethics and, 1:298, 1:306, 1:324, 1:334
- Total Quality Management
  - description, 1:208
- Totally Artificial Heart Assessment Panel
  - ethical and moral implication assessment, 2:693
- Toulmin, S.
  - casuistry as principlism’s chief opponent, 2:693
- Toulmin, S.E.
  - casuistry definition, 1:63–64
- TQM. *See* Total Quality Management
- Training. *See also* Education
  - accidents during, 1:168
  - basic training for physician-soldiers, 1:271
  - bonding and, 1:213
  - confidence and, 1:176
  - hatred of the enemy as a goal of, 1:173
  - isolation and, 1:213
  - safety officers and, 1:168
- Treatise of Human Nature*, 1:110
- “The Treatment of Shock from Prolonged Exposure to Cold, Especially in Water,” 2:441–444, 2:459–461
- Tri-Service Nursing Research Program
  - description, 2:680
- Triage
  - “double effect” and battlefield triage, 1:300
  - Emergency War Surgery* guidelines (exhibit), 2:382–383
  - establishing and maintaining prioritization of treatment, 2:381
  - ethical dilemmas, 1:297, 1:300–301, 1:313
  - hierarchy for, 1:301–302
  - maintaining equity between soldiers, 1:341
  - military role-specific ethical situations, 1:340–342
  - models of triage, 2:381, 2:383–384
  - nurses and, 2:674
  - sacrificing of individual interests when necessary for the military mission and, 1:341
  - triage concept, 2:380–381
  - unethical basis of physicians making triage decisions, 2:868
- Triangle Institute for Security Studies
  - poll showing the public’s tolerance for military casualties, 2:835
- TRICARE healthcare program, 2:728
- Trice, Robert
  - military and mass media relationship, 1:208–209
- Truth-telling case study
  - beneficence-in-trust principle and, 1:41
  - deontology and, 1:30, 1:31
  - feminist ethics and, 1:43
  - narrative ethics and, 1:43
  - principlism and, 1:38
  - resolution of truth-telling case according to specific theories (exhibit), 1:53
  - unidimensional grid for clinical ethics and, 1:48, 1:50
  - unitary theory and, 1:53
  - utilitarianism and, 1:29

- virtue theory and, 1:32–33
- Tuberculosis
  - vaccine testing on Colorado prisoners, 2:513
- “Tucker Telephone” torture method, 2:395
- Turkey
  - obligation of military doctors to give priority to the chain of command above the medical code of ethics, 1:305
- Tuskegee Syphilis Study
  - description, 2:474, 2:512, 2:520
  - ethical violations of, 2:512–513
  - monetary compensation for participants and their families, 2:474
  - public disclosure of, 2:510
  - public reaction to, 1:73
  - “surrogate informed consent,” 2:520–521
  - termination of, 2:510
- Twin studies
  - in Nazi Germany, 2:410
- Typhoid
  - Japanese pathogen tests on civilians, 2:486, 2:487
- Typhus
  - American-Polish Relief Expedition to eliminate, 2:777–778

## U

- Ueda Yataro
  - pathogen effects research role, 2:483–484
- Umezawa Hamao
  - Japanese National Institute of Health role, 2:494–495
- Umi to Dokuyaku*, 2:468
- UN. *See* United Nations
- Un Souvenir de Solferino*, 2:741
- Understanding cultural needs of patients
  - case study, 2:824
- Underwood, Col. George
  - U.S. military human experimentation policy and, 2:521
- Unidimensional grid for clinical ethics
  - three realms of ethics and, 1:48
  - truth-telling case study and, 1:48, 1:50
- The Uniform Code of Military Justice*
  - “conduct unbecoming an officer,” 1:272
  - professional military ethic and, 1:141, 1:272
  - sodomy and, 1:150
- Unit status reports
  - military culture and, 1:181
- Unitary theory
  - clinical ethics rules and, 1:47
  - description, 1:46
  - truth-telling case study and, 1:53
- United Kingdom
  - class-based standards for officer commissioning, 1:136
  - honor concept and, 1:170–171
  - naval strength, 1:136–137
  - “organ stripping” scandal, 2:452–453
- United Nations
  - condemnation of the use of nuclear weapons, 1:234
  - Declaration of Human Rights, 1:32
  - establishment of, 1:225
  - humanitarian assistance role, 2:798, 2:808
  - International Criminal Court, 1:239
  - International Criminal Tribunal for Rwanda, 1:239
  - International Criminal Tribunal for the Former Yugoslavia, 1:239
  - military biomedical research reports to, 2:543
  - nonmilitary sanctions, 1:229–230, 1:306
  - Operation Restore Hope, 1:184–186
  - revelation that Iraq had an active offensive biological and chemical weapons program, 2:543
  - Serbian war against Croatia and Bosnia and, 1:228
  - war crimes trials and, 1:239
  - war-decision law and, 1:225
- United Nations Charter
  - actions taken in self-defense and, 1:227, 1:228
  - assumption that collective security will deter threats to the peace and terminate them when they occur, 1:226–227
  - assumption that peaceful means of conflict resolution will render war unnecessary, 1:226
  - assumption that the main threats to peace are posed by interstate conventional wars, 1:226
  - exceptions to the general principle of nonintervention in foreign affairs, 1:227–228
  - provisions of Articles 42 and 51, 1:227
  - Security Council enforcement actions, 1:227, 1:228
  - Security Council use of armed force, 1:227
  - war-decision law and, 1:226–228
- United States. *See also* Covert and deceptive American medical experimentation; *specific states, counties, and cities*
  - agreements on the reduction or elimination of specified types of nuclear missiles and warheads, 1:235
  - American moralism, 2:692–693
  - American professional military ethic, 1:141–148
  - America’s religious traditions, 2:691–692
  - Atomic Bomb Casualty Commission’s role in recording the progress of the Hiroshima survivors, 2:495
  - biological warfare program initiation, 2:492
  - “Blood for Britain” program, 2:513
  - bombing of Hiroshima and Nagasaki, 1:235, 1:239–240
  - Cold War role, 2:492
  - covert and deceptive medical experimentation, 2:509–529
  - deterrence-plus position on nuclear weapons, 1:244, 1:245
  - distrust of standing armies, 1:137
  - elements inherited from the British military tradition, 1:137
  - establishment of permanent schools for advanced military education, 1:137
  - gene therapy experiments, 2:452–453
  - human cloning experiments, 2:452–453
  - interest in Japanese World War II biomedical experimentation results, 2:492–493, 2:510
  - Japanese medical school and United States medical school comparison, 2:474
  - military assistance to El Salvador, 2:783, 2:785
  - militia concept, 1:137
  - miscegenation legislation as a model for German Nuremberg Laws, 2:412
  - multicultural and pluralistic nature of, 2:693–694, 2:710
  - “no first use” principle and, 1:235
  - “Operation Paperclip,” 2:452
  - paternalistic and moralistic laws, 1:255
  - political system comparison to other nations, 2:694
  - racism in, 2:471
  - ratification of Geneva Convention Protocols I and II and, 2:744
  - ratification of the Geneva Gas Protocol, 1:234
  - religious beliefs and values of the American patient, 2:694–698
  - slow development of military professionalism, 1:137
  - sterilization legislation model for Nazi Germany, 2:411
  - Tuskegee Syphilis Study, 2:474, 2:510, 2:512–513, 2:520–521
  - use of the Dachau data on hypothermia after World War II, 2:448–449
- United States Cadet Nurse Corps
  - establishment of, 2:666
- United States Code
  - humanitarian assistance and, 2:808



- military biomedical research and, 2:548, 2:595
  - Secretary of the Army direction of medical care of anyone on active duty, 2:853
  - treatment of soldiers without their consent, 2:378
- United States Military Academy
  - boxing requirement, 1:253–254
  - paternalistic practices, 1:255
  - practice of borrowing from others, 1:254
- University of California at San Francisco
  - plutonium research on human subjects, 2:525
  - protection of research subjects, 2:519
- University of Chicago
  - Center for Clinical Ethics, 1:82
  - plutonium research on human subjects and, 2:524
- University of Cincinnati
  - human radiation experiments, 2:525
- University of Minnesota
  - Center for Biomedical Ethics, 1:82
- University of Rochester
  - plutonium research on human subjects and, 2:524–525
- University of Tennessee
  - Department of Human Values and Ethics at the College of Medicine, 1:82
- Uranium research
  - on human subjects, 2:525
- Uruguay
  - military physicians' participation in torture, 1:305
- U.S. Agency for International Development
  - Bureau for Program and Policy Coordination role in humanitarian assistance, 2:791
  - Developmental Assistance Program creation, 2:782
  - humanitarian assistance role, 2:782, 2:800, 2:808
  - Office of Foreign Disaster Assistance, 2:808
- U.S. Air Force
  - acceleration and high-gravity response research, 2:593
  - continuing education in ethics for nurses, 2:678
  - humanitarian assistance funding, 2:799
  - Nurse Corps, 2:666
  - nursing research, 2:680
  - percentage of women in, 2:726
  - scientific reviews of human biomedical research, 2:587–588
  - studies of radioactive clouds, 2:569
  - Values, 1:142
- U.S. Army. *See also* All Volunteer Force; Army Medical Department
  - biological warfare tests in America, 2:526–528
  - Center for Health Promotion and Preventive Medicine, 2:528
  - Civil Affairs Office, 2:779
  - commissioned officer status for registered nurses, 2:666
  - conscientious objection and, 1:257–261
  - development of the DIVAD air defense system, 1:212
  - humanitarian assistance funding, 2:799
  - individual liberty and the needs of, 1:256–265
  - mandate for, 1:256
  - Nation Building Contributions of the Army*, 2:781–782
  - necessity for “good order” and, 1:256
  - as a nondemocratic, absolutist system, 1:253
  - Nursing Research Advisory Board, 2:680
  - paternalism and, 1:256
  - Phyllis J. Verhonick Nursing Research Symposium, 2:680
  - professional values, 1:142–147
  - scientific reviews of human biomedical research, 2:587–588
  - SOUTHCOM humanitarian assistance programs, 2:783–796
  - Special Forces civic action mission, 2:780
  - Special Operations Command, 2:780
- U.S. Army Medical Research and Development Command
  - breast cancer research program, 2:557
  - U.S. Army Medical Research and Materiel Command management of appropriations, 2:557–558
  - U.S. Army Medical Research Institute for Infectious Diseases vaccine, drug, and diagnostic test development, 2:593
  - U.S. Army Personnel Command
    - human volunteers in military biomedical research and, 2:597, 2:600
  - U.S. Army Research Institute of Environmental Medicine
    - assignment to, 2:597
    - effects of pyridostigmine bromide research, 2:594
  - U.S. Army Soldier Systems Biological and Chemical Command
    - environmental research and development of protective clothing, 2:593
    - informed consent procedures, 2:571
    - provision of military training and physical fitness programs and monitoring for research soldier-volunteers, 2:600
  - U.S. Atomic Energy Commission
    - plutonium research and, 2:524
    - policies to forestall access to information relating to health risks that radiation posed to workers and to the public, 2:528
    - public relations and secrecy, 2:528
    - written consent for human research subjects, 2:525
  - U.S. Central Intelligence Agency
    - humanitarian assistance role, 2:782
    - “mind-altering” substances research, 2:525–526
  - U.S. Congress. *See also specific legislation*
    - Defense Women's Health Research Program establishment, 2:555
    - Developmental Assistance Program creation, 2:782
    - funding for low-intensity conflict programs in Central America, 2:785
    - human experimentation subject protection, 2:521
    - humanitarian assistance programs and, 2:775, 2:789
    - monitoring of military biomedical research, 2:543
    - public policy medical ethics issues, 1:35
    - rotation of U.S. military medical personnel in El Salvador and, 2:795
  - U.S. Constitution
    - Fourteenth Amendment, 1:69
    - military professionals commitment to, 1:143, 1:148, 1:151, 1:276–277
  - U.S. Department of Defense
    - anthrax vaccination of troops, 1:299–300, 1:337–338
    - authorization to fund a wider variety of humanitarian assistance/civic action programs, 2:799
    - beginnings of the DoD humanitarian mission in Central America, 2:785–788
    - breast cancer research program, 2:557
    - commissioning of male registered nurses, 2:667
    - Common Rule and, 2:581, 2:587
    - DNA repository, 2:860
    - DoD points of contact for multiple project assurances (exhibit), 2:580
    - formalization of the humanitarian assistance role, 2:788–791
    - gas warfare agent research involvement, 2:514
    - HIV/AIDS policy, 2:731, 2:732–733
    - human experimentation policy, 2:521
    - Humanitarian Task Force, 2:786, 2:787
    - included humanitarian assistance programs, 2:799–800
    - medical care for research subjects, 2:588
    - National Security Strategy initiatives, 2:786
    - negative connotations of the nation-building role, 2:788



- Office of Humanitarian Assistance, OPR: OSD/ISA (Global Affairs), 2:788, 2:799
- patient record confidentiality, 2:589
- Persian Gulf War illnesses and, 2:725
- policy clarifying four possible uses of DNA, 2:860
- policy for the conduct and review of human subjects research, 2:535, 2:547–548
- policy on prevention of alcohol, tobacco, and drug use by military personnel, 2:726
- protection of people in foreign countries from HIV/AIDS infection by service persons, 2:732
- recommendation for expansion of the civic action programs in underdeveloped countries, 2:779
- request for a waiver permitting military use of investigational drugs and vaccines without informed consent, 1:297
- rotation of U.S. military medical personnel in El Salvador and, 2:795
- soldiers with HIV infection and protection of third parties, 1:349
- special compensation programs, 2:596–597
- TRICARE healthcare program, 2:728
- waiver of informed consent for the use of investigational drugs and vaccines, 2:538, 2:549, 2:550–551, 2:573
- The Wilson Memorandum: formalizing the use of human volunteers in Department of Defense experimental research (exhibit), 2:522–523, 2:568, 2:569–570
- women's health needs study, 2:726
- U.S. Department of Energy
  - human radiation experiments and, 2:523–524
- U.S. Department of Health and Human Services
  - anthrax vaccination of troops and, 1:337
  - assurance filing requirements, 2:581
  - Common Rule codification, 2:581
  - human subject research definition, 2:581
  - institutional review boards report, 2:521
  - public policy medical ethics considerations, 1:35
- U.S. Department of Justice
  - anthrax vaccination of troops and, 1:337
- U.S. Department of State
  - humanitarian assistance program approval, 2:791
  - humanitarian assistance role, 2:776–777, 2:808
  - Protocols I and II reservations, 2:753–754
  - rotation of U.S. military medical personnel in El Salvador and, 2:795
- U.S. Department of Veterans Affairs
  - finite resources and veteran healthcare issues, 2:735
  - public policy medical ethics considerations, 1:35
- U.S. Food and Drug Administration
  - AIDS treatment licensing, 2:731
  - basic responsibility of, 2:551
  - public policy medical ethics considerations, 1:35
  - waiver of informed consent for investigational drugs and vaccines, 1:297, 1:313, 1:337, 2:538, 2:549, 2:550, 2:573
- U.S. General Accounting Office
  - criticism of DoD for expending appropriations for humanitarian/civic assistance missions, 2:788
  - monitoring of military biomedical research, 2:543
  - procedures for exchanging sensitive medical data while preserving confidentiality, 2:589
  - report on the exclusion of women from research, 2:555
- U.S. Information Service
  - humanitarian assistance role, 2:782
- U.S. Marine Corps
  - percentage of women in, 2:726
- U.S. Navy
  - compensation for volunteers, 2:596
  - Core Values, 1:142
  - decompression impact research, 2:593
  - design for the DD-21 submarine, 1:208
  - humanitarian assistance funding, 2:799
  - Lazarus Project sponsorship and funding, 2:844
  - medical care for research subjects, 2:588
  - mustard gas experiments, 2:568
  - Nurse Corps (female) establishment, 2:665
  - nursing research, 2:680
  - “relative rank” for nurses, 2:666
  - scientific reviews of human biomedical research, 2:587–588
  - study using prisoners at San Quentin to test an influenza vaccine, 2:568
- U.S. Office of Management and Budget
  - anthrax vaccination of troops and, 1:337
- U.S. Public Health Service
  - humanitarian assistance role, 2:778
  - St. Louis encephalitis research on prisoners, 2:513
  - transplantation of chimpanzee kidneys into human patients, 2:520
  - Tuskegee Syphilis Study and, 2:510, 2:512–513, 2:520–521
  - United States Cadet Nurse Corps establishment, 2:666
- U.S. Veterans Administration
  - compensation for health injuries resulting from gas warfare research, 2:514
  - medical care for research subjects, 2:588
  - Persian Gulf War illnesses and, 2:725
- USAID. *See* U.S. Agency for International Development
- USAMRIID. *See* U.S. Army Medical Research Institute for Infectious Diseases
- USARIEM. *See* U.S. Army Research Institute of Environmental Medicine
- USC. *See* United States Code
- Use of Volunteers as Subjects of Research*, 2:572
- USIS. *See* U.S. Information Service
- USMA. *See* United States Military Academy
- Utilitarianism
  - animal experimentation and, 2:553–554
  - deontology comparison, 1:30, 1:31
  - description, 1:28, 1:33
  - euthanasia ethical analysis, 2:392–393
  - military role-specific ethical situations and, 1:340, 1:341
  - strengths, 1:28
  - truth-telling case study and, 1:29, 1:53
  - weaknesses, 1:28–29

## V

- VA. *See* U.S. Department of Veterans Affairs
- Valium®
  - action of, 2:842, 2:843
- Vanderbilt University
  - human radiation experiments, 2:525
  - Medical Humanities Program, 1:82
- Varmus, Dr. Harold
  - creation of the Office for Human Research Protection and, 2:521
- Veatch, R.M.
  - applied ethics definition, 1:72
  - ethical principles central to the Hippocratic tradition, 1:273
  - normative ethics principles, 1:38
  - principlism, 1:36
  - social contract theory, 1:39
- VEE. *See* Venezuelan equine encephalomyelitis
- Venereal disease. *See also specific diseases*
  - Japanese biomedical experimentation on, 2:489
  - penicillin use for U.S. military personnel with venereal

- disease, 2:383
- Venezuelan equine encephalomyelitis  
vaccine for, 2:539
- Versailles Treaty  
war-guilt clause, 1:224–225, 1:239
- Veterans. *See also* Retirees  
constructivist perspective on health and, 2:734  
distinction between disease, illness, and sickness and,  
2:733–734, 2:736  
finite resources available for healthcare and, 2:733  
healthcare issues and the politics of eligibility, 2:733–735  
objectivist perspective on health and, 2:734  
politics of readjustment of Vietnam veterans, 2:725  
sociology of veterans' issues, 2:734–735, 2:736  
variation in response to veterans of different conflicts,  
2:734
- Vietnam  
civic action programs, 2:780–782, 2:800  
CORDS program success in, 2:782
- Vietnam War  
Agent Orange exposure, 2:724, 2:733, 2:734  
ammunition restrictions, 1:232  
authoritarianism and, 1:189  
cluster bombs and, 1:232–233  
disease as the cause of morbidity, 2:539  
Hamlet Evacuation System (exhibit), 1:161  
having no clear war aim for, 1:172  
herbicide use, 1:234  
inappropriately evacuating casualties, 2:373–374  
lack of constitutional basis for, 1:229  
medical civic action programs and, 2:782  
medical students' pledge, 1:309  
napalm use, 1:233  
nation building and civic action after, 2:782–783  
nurses' role, 2:667, 2:674–675  
officers' technical competence and, 1:166–167  
otherworld experience of soldiers fighting in, 1:278  
patterns of deceit in U.S. policy makers (exhibit), 1:162  
politics of readjustment of Vietnam veterans, 2:725  
pot-shotting civilians from helicopters (exhibit), 1:178  
practice of putting anti-aircraft batteries, artillery, and  
military vehicles in residential neighborhoods, 1:243  
principle of proportion and, 1:240  
probability of success and, 1:229  
short command assignments, 1:166  
Special Forces Aidmen role, 1:304  
student revolt of the late 1960s and early 1970s and, 1:69  
tear gas use, 1:234  
Tet offensive, 1:161–163  
treatment of prisoners of war, 1:236  
triage during mass casualty situations, 2:383, 2:384  
using medicine as a weapon during, 1:304, 1:317  
veterans and non-Hodgkin's lymphoma, 2:735  
volunteer recruitment for the Natick, MA, program, 2:572,  
2:594  
war crimes trials and, 1:239
- Vietnam Women's Memorial  
dedication of, 2:663
- Virtue theorys  
applied medical ethics and, 1:36  
deontology comparison, 1:32  
description, 1:31–32, 1:33, 1:34  
"do good and avoid evil" principle, 1:32, 1:33, 1:34  
international rights and, 1:32  
strengths, 1:32  
strong communities and, 1:31–32  
teleology comparison, 1:32
- temperance and courage examples, 1:31  
truth-telling case study and, 1:32–33, 1:53  
"virtue" definitions, 1:14, 1:31  
weaknesses, 1:32
- Virtues or character traits crucial to the patient-physician  
relationship, 1:14–16
- Vitoria, Francisco de  
war-conduct law and, 1:224
- Vivisection. *See* Animal experimentation; Japanese biomedical  
experimentation during the World-War-II era
- von Dieringshofen, Prof. Dr.  
Rascher's work and, 2:447
- von Verschuer, Otmar  
Institute for Racial Hygiene director, 2:410
- von Werts, Dr. R.  
hypothermia and hypoxia research, 2:442
- Voodoo belief system, 2:701, 2:702
- Voorhees, T.S.  
returning sick soldiers to duty, 1:339
- Vulnerability of the patient  
duties of the physician and, 1:16  
physician competence and, 1:13
- ## W
- Wakamatsu Yujiro, Maj.  
commendation from Emperor Hirohito, 2:486  
immunity from prosecution for medical experimentation  
on human subjects, 2:490–491  
Japanese biomedical experimentation role, 2:480  
Japanese National Institute of Health role, 2:494–495
- Wakin, Col. Malham  
My Lai massacre analysis, 1:308
- Walla Walla (WA) State Prison  
human radiation experiments, 2:525
- Walter Reed Army Institute of Research  
authoritarianism creation of an adversarial relationship,  
1:182  
cognitive functioning decrements associated with sleep  
deprivation, 1:189  
Department of Nursing establishment, 2:680  
Military Nursing Practice and Research Course, 2:680  
research on the human dimensions of the Army on the  
development of high performance units and on resis-  
tance to combat stress breakdown, 1:160  
Tri-Service Nursing Research Program, 2:680
- Walter Reed Army Medical Center  
"Decisions Near the End of Life" bioethics education  
program, 2:678
- Walzer, M.  
double-effect principle, 1:242–243  
principle of discrimination, 1:241
- Wannsee Protocol for "The Final Solution"  
text, 2:431–434
- War-conduct law  
application of, 1:246  
belligerent occupation and, 1:237–238  
chemical and biological agents and, 1:233–234, 1:307  
chivalry principle, 1:231  
consensus and, 1:235–236  
contemporary legal and moral restraints on, 1:230–245  
controlling the means and methods of warfare, 1:232–236  
determination of belligerent status and, 1:231–232  
disposal of the dead, 1:237  
Geneva Conventions and, 1:225, 1:231–232, 1:234, 1:236–  
237, 1:238, 1:246  
genocidal conduct and, 1:230  
Hague Conventions and, 1:225, 1:232, 1:233, 1:236, 1:237,

- 1:246
- historical background, 1:225–226
- humanity principle, 1:231
- just war doctrine and, 1:225–226, 1:240–245
- Lieber Code and the Civil War, 1:225, 1:246
- limitations of natural law and, 1:230
- military necessity principle, 1:230–231, 1:240
- minimization of “superfluous suffering,” 1:232–233
- “no first use” principle, 1:233–234, 1:235
- nuclear pacifists and, 1:241
- nuclear weapon deterrence, 1:234–236, 1:243–245, 1:246
- principle of discrimination and, 1:231, 1:241–243, 1:306
- principle of double effect and, 1:241–243
- principle of proportion and, 1:240–241, 1:244, 1:306
- principles of, 1:230–231
- protection of prisoners of war, 1:236–237
- protection of the wounded and sick, 1:237
- sanctions for violations of international law, 1:238–240
- sanctions for violations of the international law of war, 1:238–240
- “total war” and, 1:241
- weapons of mass destruction and, 1:225–226, 1:306
- War crimes trials. *See also* Nuremberg Doctors’ Trials
  - abuse of, 1:239
  - inability to take control of the alleged war criminals, 1:239
  - as a sanction against violations of international law, 1:239
- War-decision law
  - actions taken in self-defense and, 1:229
  - Age of Chivalry and, 1:224
  - application of, 1:246
  - comparative justice condition, 1:229
  - competent authority to go to war and, 1:228–229
  - conditions constituting, 1:224, 1:306
  - conditions for waging war, 1:228–230
  - contemporary legal and moral restraints on, 1:226–230
  - exhaustion of peaceful remedies and, 1:229–230, 1:306
  - general presumption against war, 1:228
  - historical background, 1:223–224
  - just cause condition, 1:229
  - nonmilitary sanctions and, 1:229–230
  - principle of proportion and, 1:240
  - probability of success condition, 1:229
  - right intention condition, 1:230
  - United Nations Charter and, 1:226–228
- War of 1812
  - belligerent status principle and, 1:231
- War Psychiatry*, 2:373, 2:826
- War Research Service
  - biological warfare tests, 2:527
- The Warriors, Reflections on Men in Battle*, 1:278
- Washington County, MD
  - effects of religious and spiritual commitment on survival study, 2:697
- Weapons Convention
  - napalm use regulation, 1:225, 1:233
- Weapons of mass destruction
  - war-conduct law and, 1:225–226
- Welsome, Eileen
  - documentation of human radiation experiments, 2:523, 2:524
- Weltz, Georg August
  - hypothermia and hypoxia research, 2:442–450, 2:459–461
- Werley, Dr. Harriet
  - nurses’ participation in research, 2:679–680
- What should Leah be told?
  - case study, 2:689–690
- When Bad Things Happen to Good People*, 2:706
- Whitbeck, C.
  - societal-cultural theory of medicine, 1:71
- White, J.F.
  - risk of ill health among female military personnel, 2:726–727
- Whitfield-Bell, Elmerine
  - plutonium research and, 2:525
- Whitney, Lt. Col. Carl L.
  - recruitment of volunteers for the Natick program and, 2:571
- Wiggins, Capt. David
  - political pacifism case study, 1:260–261
- Williams, Robert H.
  - blood preservation research, 2:519
- Willowbrook study
  - public reaction to, 1:73
- Wilson, Carroll
  - plutonium research and, 2:525
- Wilson, Charles E.
  - human experimentation policy, 2:521–523, 2:568, 2:569–570
- Wilson, Pres. Woodrow
  - American Relief Administration establishment, 2:777
- The Wilson Memorandum
  - exhibit, 2:522–523
  - human radiation experiments and, 2:568, 2:569–570
- Winslade, W.J.
  - clinical ethics definition, 1:63
  - four-dimension grid for clinical ethics and, 1:51
  - moral pluralism, 1:46
- With the Old Breed, at Peleliu and Okinawa*, 1:264
- Withholding or delaying treatment to facilitate interrogation
  - case study, 2:397–398
- Wolthuis, Dr. Robert K.
  - humanitarian assistance role, 2:788
- Women. *See also* Feminist ethics; Men; Nursing ethics and the military
  - Army’s recruiting needs and, 1:190
  - Civil War and the emergence of women from home to larger societal purpose, 2:664
  - discharge of female military personnel who become pregnant, 2:727
  - equipment and staffing problems associated with treating in humanitarian assistance programs, 2:817
  - exclusion from direct combat, 1:149, 1:189–190
  - exclusion of women from physiological testing as a common practice, 2:579
  - gender integration support, 1:190
  - health status of female military personnel, 2:726–727
  - Hitler’s “Honor Cross of German Motherhood,” 2:411–412
  - Japanese biomedical experimentation on “Comfort Women,” 2:489
  - military women’s research program, 2:555–557
  - nonsurgical sterilization procedures developed by Nazi doctors, 2:411
  - pace of integration into the military, 1:149
  - parental role as a basis for discrimination, 1:149
  - pregnancy possibility as a justification for excluding women from research protocols, 2:556–557, 2:579
  - professional independence of, 1:69
  - role of women in the armed forces, 2:726–728
  - sexual abuse and, 1:190–191
  - shift to midwifery for delivery of babies to German women, 2:412, 2:419
  - special consideration under the Geneva Conventions, 2:755
  - status in Nazi Germany, 2:409, 2:411–412
  - supporting role for, 1:148–149

- Wood, Leonard  
 combatant role, 1:303–304
- Workups  
 clinical ethics, 1:47–51, 1:75–77  
 ethical workup guide (exhibit), 1:52  
 mediation models, 1:51, 1:53  
 principlism, 1:36–37
- World Court. *See* International Court of Justice
- World Health Organization  
 ethical code, 1:11  
 military investigators and the Ebola virus outbreak, 2:539  
 multidimensional conceptualization of well-being, 2:721, 2:735  
 objective of health and social well-being, 2:725
- World Medical Association  
 adoption of rules concerning war and armed conflict, 2:753  
 Declaration of Geneva, 1:273, 1:301  
 document texts, 2:766–770  
 International Code of Medical Ethics, 1:273  
 stipulation that medical procedures must be for the benefit of the patient, 2:755
- World War I  
 attacks on merchant vessels, 1:172  
 care of subordinates and, 1:166  
 chemical warfare during, 1:239  
 gas warfare, 1:233  
 humanitarian assistance after, 2:777–778  
 hunger blockade against Germany, 1:241  
 maritime law principles and, 1:239  
 reaction against war as an instrument of foreign policy, 1:224  
 retention of medical personnel to care for prisoners of war, 2:746  
 returning soldiers experiencing combat stress to duty, 2:373  
 starvation of German mental patients during, 2:414
- World War II. *See also* Japanese biomedical experimentation during the World-War-II era; Nazi hypothermia and hypoxia research; Nazi medical ethics; *specific countries*  
 abstention from the use of gas, 1:234  
 attacks on medical facilities, 2:824  
 belief of the Japanese people that Japan was a victim rather than an aggressor in the war, 2:491–492  
 “can do” ethic, 1:170, 1:189  
 care of subordinates and, 1:166  
 combat stress breakdown and, 1:179  
 criticism of the officer corps, 1:187–188  
 discrimination and, 2:755  
 effect on Americans, 1:69  
 emergence of communism after, 1:201  
 firebombing of Dresden and use of nuclear weapons against Japan, 1:172  
 growth of medical ethics since, 1:25, 1:69  
 humanitarian assistance after, 2:778–779  
 lack of a prohibition against genocidal conduct, 1:230  
 medical aircraft protection under the Geneva Conventions, 2:750  
*Op ten Noort* hospital ship detention by the Japanese, 2:750  
*Ophelia* hospital ship capture, 2:750  
 penicillin use for U.S. military personnel with venereal disease, 1:297, 1:341, 2:383  
 physiological dilemmas concerning human performance in hostile thermal environments, 2:439–440  
 policy of rotating soldiers in and out of units, 1:166  
 protection of civilians under the Geneva Conventions, 2:744  
 protection of irregular combatants under the Geneva Conventions, 2:743–744  
 resistance movements and, 1:238  
 retention of medical personnel, 2:746, 2:752  
 returning soldiers experiencing combat stress to duty, 2:373  
 returning soldiers with high fevers from malaria to duty, 1:339–340  
 scientific and medical advances and, 1:69–70  
 sleep deprivation and command decisions (exhibit), 1:190  
 strategic bombing, 1:239–240, 1:241  
 tradition of threatening subordinates, 1:187–188  
 weak and insecure commanders, 1:187  
 women’s participation concerns, 2:726
- Wounded and sick  
 benefit of military medical forces providing care to, 2:807  
 caring for, 2:754–755  
 Geneva Conventions and Hague Conventions definitions of, 2:743–744  
 leaving behind, 2:756–757  
 locating and collecting, 2:754  
 medical personnel left behind with, 2:756–757  
 protection of under the Geneva Conventions, 2:824
- Wounded and sick persons  
 protection of, 1:237
- WRAIR. *See* Walter Reed Army Institute of Research
- X**
- X-rays  
 sterilization by, 2:411
- Y**
- Yellow fever  
 research conducted by the U.S. military, 2:511, 2:568
- Yin* and *yang* concepts, 2:701
- Yoshimura Hisato, Dr.  
 postwar activities, 2:494
- Z**
- Zajtchuk, Col. Russ  
 medical mission in Honduras, 2:786, 2:798
- Zelezny, Edwin G.  
 recruitment of volunteers for the Natick program and, 2:571

