There are several considerations relevant in assessing whether Dr. Daley ought to concede to Kelly Patterson’s request of breast augmentation. I will review several of these considerations, here, though I do suspect there are a host of other considerations relevant to the discussion as well. I present these considerations in no particular order.

**Autonomy Related Concerns**

First, Kelly is a minor. As a minor, one might question her capacity for autonomous decision-making. On the one hand, Kelly does seem to understand the procedure, its accompanying risks, and consequences. If we understand autonomous decision-making as decision-making that is well informed, and demonstrative of understanding, then Kelly certainly seems to qualify as more than capable of autonomous decision-making. But if autonomous decision-making is understood in a more robust sense, then it is not quite clear that Kelly does engage in autonomous decision-making.

Suppose, for example, we define autonomous decision-making as decision-making that is reflective of stability of choice and authenticity of choice. If this is the case, then it is not clear that Kelly’s decision-making is autonomous. As a minor, it might be that her values and commitments are not yet well developed and sturdy to lend stability to her choice. Also, it might be the case that her choice is not genuinely reflective of her current value structure if her choice results from pressure to conform to cultural standards of beauty. If the latter is the case, then not only is Kelly’s choice not autonomous in the sense of reflecting authentic choice, but her choice might not be autonomous if her choice results from coercive pressures to conform to culturally imposed beauty standards.
A Feminist Perspective

From a feminist perspective, one might question whether Dr. Daley’s participation in Kelly’s request is morally criticizable because it reinforces oppressive paradigms of beauty. As this objection goes, Kelly’s participation in breast augmentation and Dr. Daley’s concession to the request might be criticized because it reinforces male-centered paradigms of beauty, standards that reinforce and maintain women’s oppressed status.

Kelly’s Best Interests

Is it in Kelly’s best interest to have breast augmentation surgery? One might argue that it is not in Kelly’s best interest to have breast augmentation surgery because of its attendant risks. Kelly might not be appreciating the future-oriented risks that surgery brings with it, because she gives more priority to her acting career versus her future interests, interests that might be compromised because of surgery (e.g., breast numbness making breast feeding difficult). Additionally, one might question Kelly’s motivation for breast augmentation surgery. Similar to her decision to pursue rhinoplasty, Kelly’s decision for breast augmentation surgery is motivated, in part, by her desire to improve confidence and self-esteem. One might question whether pursuing cosmetic surgery is the best means through which to achieve this end. For example, an argument could be made that cosmetic surgery does not address directly the fundamental underlying issue of less-than-ideal confidence and self-esteem. Instead, cosmetic surgery alters Kelly’s physical body without addressing Kelly’s conception of (and worries regarding) body image.

Conscientious Objection?

Dr. Daley is uncomfortable with performing breast augmentation surgery on account of Kelly being a minor. One question that comes to mind is whether Dr. Daley has a professional duty to express his concerns to Kelly. If Dr. Daley’s concerns extend beyond Kelly’s minor status, is it appropriate for him to express his concerns to Kelly, or would doing so be inappropriate insofar as it amounts to Dr. Daley assuming the role of moral advisor?
ENHANCEMENT VERSUS THERAPY

This case raises an interesting issue with respect to the enhancement versus therapy distinction. This case challenges this distinction. Kelly’s breast augmentation surgery counts as enhancement in the sense that there is no illness or injury for which the surgery is being pursued. While Kelly’s breast augmentation surgery does not count as therapy in the strict sense, Kelly will be at a disadvantage, professionally, without the surgery. Surgery, then, could be understood as a measure to level the playing field. If surgery is understood in this latter sense, then one could make the case that considerations of justice are relevant to the discussion.