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## **The Great Physician**

## Nicole Fogel<sup>1,2\*</sup>

<sup>1</sup>Department of Neuroscience, Cell and Molecular Biology and Philosophy, Victoria University, Canada

<sup>2</sup>Medical Candidate in Royal College of Surgeons, Ireland

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\*Corresponding author: Nicole Fogel, HBSc, Department of Neuroscience, Cell and Molecular Biology and Philosophy, Victoria University, Toronto, Canada and Medical Candidate in Royal College of Surgeons, Ireland; Tel: 2017079158/+97333635920; Email: nicole.fogel@mail.utoronto.ca; nicolej.fogel@gmail.com

## Opinion

Stethoscope and white coat- the professional look of a doctor, one who heals a patient's ailments. This is the traditional view of a doctor. But what actually makes a good doctor aside from aesthetics?

Is it the number of diagnoses he or she manages to identify correctly? Is it the amount of hours he or she puts into working, climbing to be the best she can be? Maybe it's the trust and comfort she is able to instill in another?

I think that those are all true to make one a good physician. But I feel that while being trustworthy and professional are characteristics of a good physician, I think more is required to be a physician in today's world. I think you have to be a true leader; you need to have skills. And by that I mean to be reflective, work as a team, be empathetic and be willing to change. Good medical practice will follow.

Let's take patient LM. She comes into the Emergency Department with skin redness and swelling and oozing sores on her lower legs and feet. Might be a case of cellulitis and you might very well know how to treat this and what necessary procedures to take. But, what if something else comes into play, Chronic eczema with no known knowledge of the pregnancy. You then find out later she had an ectopic pregnancy, causing an allergic reaction. Her history reveals chronic eczema and you've treated her for this before but the unusual ectopic pregnancy leading to a massive reaction is something you've never seen before or never experienced in the ED.

This is one of the cases I saw that threw off experienced physicians in the ED at the University of Utah hospital. Would you say the physician was a bad one, practicing medicine poorly? I would not say so. Even though his initial diagnosis was not correct, I think the reflective approach of what happened and why after the patient goes home makes a good physician into a great one. Adapting to the situation allows for change in how future cases are treated and how the physician thinks about such cases the next time around, when the unexpected happens. This to me is what defines the great physician - pulling all your resources and knowledge to care for the patient.

Atul Gawande, in his book Being Mortal, details the nineteenth-century case of Ivan Ilyich, a magistrate whose pain in his side makes him enfeebled and depressed. Everyone overlooks the obvious - all Ivan really wished for was to be comforted. In a search for medical knowledge, physicians "took for granted that honesty and kindness were basic responsibilities of a modern doctor". In offering more treatment options, comfort and guidance on the reality of his disease were simply overlooked. This might be an old story, but the lesson still holds today - to be a great physician in the modern world more is required. It isn't enough to possess knowledge, but to have a certain, what Atul Gawande calls, 'satisfaction of competence'. I like this term because what it really means is that the successful physician is competent both in knowledge and in understanding humanity, leading to satisfaction of care for both the patient and the doctor.

Now I have another question. Is what the physician does outside of his duty influence good medical practice? For example, a physician who longs to be an anesthesiologist finally becomes one. He's living a great life, has a great family and everything for the most part is perfect. He then one day decides to take whatever excess anesthetics are available for personal use. Now if the physician is still performing his duties, coming to work on time, and overall still doing a great job, is this physician still great - is he practicing good medicine? He might be satisfied, but is he still competent? Some might argue yes and others no for their own reasons. This introduces a twist to how we as physicians think about medicine and medical practice.

When I first heard this story from a physician living in California at the time I thought, well, abusing the system and abusing medications certainly isn't good practice. How could this happen in a hospital system teeming with checks and balances? But why did I think this. What makes his drug abuse, negative in the eyes of a practicing medical student? If what makes a great physician someone who is competent in both knowledge and humanity as I stated before, then isn't Dr. X here great? I think that while mistakes are made and while he felt deeply sorry for what he had done and didn't exactly know why he did it, being a great physician means also having satisfaction in your own self. By that I mean caring for yourself as much as you care for your patients.

Physicians are held to high standards - they are expected to be models of trust, kindness and control. They should be

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someone you'd want to be and emulate. While physicians are humans too, and they aren't perfect, the term medical doctor comes with an underlying societal distinction. Apart from other professions, you're dealing with life and death. You need to be competent in knowledge, humanity, and also in knowing yourself and your limits/boundaries.

This is what makes you great. This is what makes you distinct in an already distinguished profession. You are a professional. It's that simple.

The white coat symbolizes more than meets the eye.

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