

VIGNETTES ON PROFESSIONALISM

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The following vignettes have been suggested by Program Directors as possible ways to open ongoing dialogue regarding aspects of professionalism. Feel free to modify them in any way to fit your program's needs. Use of these vignettes as teaching tools may help meet ACGME institutional requirements for discussion of substance abuse, sexual harassment, and ethics.

1. The resident on sick call is called by the Chief Resident and told that she needs to come in and cover for a sick colleague. The sick call resident explains that she can't come in because she has not arranged for a baby-sitter for her own children. She says it's impossible to keep a baby-sitter on alert for the whole month in case she gets called in. She tells the Chief Resident to call in somebody else and that she will cover next time provided she has ample warning.

Points to consider during discussion:

- What if the resident were male?
- What if the baby-sitter gets sick and can't come?
- What if this were the first time?
- What if this is a chronic problem?

2. On morning rounds the intern responds to your inquiry regarding the patient's electrolytes from the night before by saying that the results are pending. You asked if he pre-rounded and looked into the computer for the results that morning. He says that he did. You had checked the computer before leaving your office and found the results clearly documented. The senior resident sees the look of surprise on your face and corroborates that he saw the intern checking for the results just before your arrival.

Points to consider during discussion:

- What message is conveyed when attendings ask such questions?
- Is it professional for the attending to ask?
- Was the senior resident's response appropriate?
- What would you do as the attending; as a resident; as an intern?

3. You're precepting in clinic and the nurse comes to tell you that a family has arrived an hour late for the appointment. The resident has refused to see this family of three because she is backed up already and this mother is always late. The mother of the three children is upset that she is being turned away when her children are behind on their shots.

Points to consider during discussion:

- What if the mother is usually on time?
- What if the resident has personal plans?
- What if it means the resident would miss the noon conference?
- What if your clinic policy prevents late patients from being registered and you feel that policy is not appropriate?

4. A resident applying for a subspecialty fellowship is accepted for a position at a prestigious program. You wrote the resident a very strong letter of recommendation that was well deserved. She accepts the position via a verbal agreement over the telephone. In the interim between the verbal commitment and the actual contract signing, she decides that there is another program that she wants to pursue and asks you for a letter of recommendation.

Points to consider during discussion:

- Use an example of a resident who is forced to commit to the position because of a short decision time demanded by the fellowship program.
 - Consider the viewpoint of the resident.
 - Consider the viewpoint of the Program Director.
5. A resident in your clinic group comes to ask you to reassign one of his continuity families to another resident. He explains that he just doesn't see eye to eye with the mother, who he believes is noncompliant with his advice. He's frustrated with her and prefers that someone else take care of her child.

Points to consider during discussion:

- Consider putting an ethnic/cultural/gender spin on the situation.
6. A second-year female pediatric resident is doing a one-month block rotation in your office. One day, while she is speaking with a mother in the corridor, a male colleague of yours places his arm around her waist and thanks her for the outstanding job she did with one of his patients.

Points to consider during discussion:

- Consider a male resident/female attending.
 - Consider an older versus younger attending.
7. You are called early Monday morning by the Emergency Department because one of your patients, a 10-year-old boy with insulin-dependent diabetes, was brought in dead on arrival. The boy's parents are divorced and

have joint custody, with the mother having physical custody. The patient had spent every other weekend with his father. Both parents are in the ED when you arrive. The father explains they had a "great" weekend and went to a county fair. They went on lots of rides and enjoyed the food booths. The dad was a little bit worried that his son "overdid it," so he increased the regular and NPH insulin just before bedtime. His son was restless and sweating about 1:00 am and the father gave him another 10 units of regular insulin. His son continued to be sweaty and then had a seizure during which he stopped breathing. Both parents are demanding to know why their son died. What do you say?

8. You care for a 7-year-old girl with mild MRCP, most likely related to prematurity. The girl is enrolled in a special school program and is transported to school by a van. The mother requests that you write a letter attesting to the fact that she (the mother) cannot work because of her daughter's medical condition.

9. Your son is scheduled to graduate from high school this afternoon. You are trying to get out of the office and have finished seeing all of your patients when you receive a call from the Emergency Department that a child with asthma whom you follow has just been admitted with severe respiratory distress. The mother is insisting that you be contacted to come in because you are the only one who has been able to keep her son out of the hospital.

10. You are in the hallway when you hear loud voices coming from a patient room. You walk over and see your intern is arguing with a nurse because an IV has run dry. The mother is sitting in the room. The intern is beside himself because it took over an hour to get the IV in and this seemed to be the last vein.

11. You are sitting in the cafeteria at lunchtime and hear the surgical residents discussing the case of a surgical baby in the NICU. They complain that the pediatricians keep calling them because they are worried

that the premature infant is fluid overloaded. They comment that the pediatricians are a bunch of wimps and overreact to everything.

Points to consider during discussion:

- What is the "fall-out" of physicians talking about one another in disparaging ways?

12. A resident who almost never attends core conferences explains her absences by saying that if she skips conference she can get home an hour earlier. It is important for her to get home so she can spend time with her young children.

Points to consider during discussion:

- What do you say if you are a resident at her level?
- If you are Chief Resident?
- If you are Program Director?

13. You are an intern on a very busy ward service. You find that your resident seems to criticize everything you do. He has started managing your patients and takes over their care without even including you in discussion of the cases.

14. You are evaluating a patient in the Emergency Department, and the mother tells you about the care she received at another facility. You are outraged at the things the mother is telling you. It appears that there was gross malpractice.

Points to consider during discussion:

- How accurate are patients' reports of the care they receive elsewhere?
- Is it important to corroborate allegations of poor medical care?

15. You are on rounds with your attending, and one of the medical students is presenting. The student has been working very hard and doing a good job. The attending asks the student about the results of a laboratory test that the student was to have checked on. You know that the student did not have an opportunity to get the results, but the student responds by saying that the test was normal.

Points to consider during discussion:

- What would you do as the senior resident; as the medical student?
- What are the consequences of ignoring the student's comments?
- What is the downside of saying something immediately during rounds?

16. You are a resident who is presenting a case to your attending, and you think you detect alcohol on the attending's breath. Her speech seems a bit rapid, but she is clear and lucid.

Points to consider during discussion:

- What if this were a surgical resident or attending?
- What if you were the parent and the patient were your child?

17. You are evaluating a patient in the clinic, and you have a question about how to manage one of the patient's problems. You are concerned that the patient may have a serious underlying condition, and you wish to obtain a rather expensive imaging study. The attending, however, disagrees and says

that watching over time is sufficient. You are discussing this with one of the other residents when his/her attending overhears and agrees with your assessment that more studies are indicated at this point in time.

18. A fourth-year medical student who is a known Honors student is completing a rotation as a sub-intern in the Pediatric Intensive Care Unit. Her performance has been outstanding, and the senior resident on the service has already submitted an evaluation. It is the last day of the rotation, and she arrives at work obviously intoxicated and unable to appropriately care for her patients. The senior resident, without knowledge of the attending, sends her home to "sleep it off." She receives Honors for the course. Approximately five months later, at the Resident Selection Committee meeting, two resident members of the committee describe the incident and recommend that she be left off the list of potential candidates for the residency program.

Points to consider during discussion:

- What are other courses of action the senior resident in the PICU could have taken five months previously?
- What should the Program Director do at the present time?
- Does this incident affect her ranking in your program?
- What is your obligation to the medical student?

19. You are a practicing pediatrician who has recently completed residency training. You have a high debt load, and you and your spouse have not had a real vacation in many years. You are approached by a pharmaceutical representative to enroll your patients in a trial testing a new antibiotic. You are told that you will be paid \$300 for each patient enrolled.

Points to consider during discussion:

- How will the money influence your antibiotic decisions?
- What are options you face if you want to participate in the study?

20. During the second year of your pediatric residency, you gradually observe that one of your resident colleagues has become less responsible in his patient care duties and attends conference less often.

Points to consider during discussion:

- What is your responsibility if one of your colleague's behavior changes?
- What are possible reasons for changes in behavior?
- What if you suspect the behavior is secondary to use of alcohol or an illicit drug; a result of depression; a result of physical illness?

21. As a first-year resident, you care for a 15-year-old boy with a malignancy. You develop a close relationship with him during your residency. By the time you are a PL-3, he is terminal and has begun to talk openly with you about dying. You have assured him that you will be there as a support for him whenever needed. He is admitted to the hospital conscious but close to death and asks one of the other residents to call you at home and ask you to come in. You are not on call and are just on your way out the door to your 3-year-old daughter's dance recital.

Points to consider during discussion:

- How appropriate is it for physicians to make promises to patients?

22. A first-year pediatric resident has become unhappy with her choice of

pediatrics as a specialty. Approximately one month before the end of the PL-1 year, she approaches the Program Director to announce that she is leaving to switch into Pathology and requests that she be granted a leave for the last two weeks of training so that she can pack up and move.

Points to consider during discussion:

- What factors should the Program Director consider in making a decision?
- Is it appropriate to solicit input from other residents?

23. A six-month-old ex-premie you cared for in the NICU returns from surgery to the PICU. You learn that during surgery the endotracheal tube had been in the right main stem bronchus for several hours. You are no longer directly responsible for the infant, but the father continues to talk to you about his infant's progress. The next three weeks are stormy. The infant contracts RSV, improves, and then dies suddenly. The autopsy is unrevealing. The father asks you if anything went wrong.

Points to consider during discussion:

- How does one balance responsibilities to patients/parents and departments/ institutions?

24. Residents at your hospital are provided free pharmaceuticals for immediate family members as a benefit of employment by the hospital. A resident has been writing prescriptions for sumatriptan for his sister, using the name of his wife. When this comes to the attention of the Chief Resident and the resident is confronted, his response is "that the hospital isn't paying me enough for my services, so there's nothing wrong with my obtaining free medication for members of my family."

25. The representative from one of the major formula companies makes you, as Chief Resident, an offer to provide free lunches for residents at their Friday noon conference.

Points to consider during discussion:

- Does your institution have a policy regarding CME and free food?
- What are the obligations you have to the pharmaceutical company?

26. You are a resident on a longitudinal rotation in a private pediatrician's office. The pediatrician prescribes valproic acid (Depakote) for migraine headaches to one of the patients, but he doesn't advise the family of the risks and benefits. You ask: "Shouldn't you mention the possibility of liver disease or other complications?" The pediatrician replies: "That's just PDR stuff."

Points to consider during discussion:

- What is your role vis-à-vis the pediatrician; the family?
- What are your concerns if the physician is evaluating you?

27. A respected and well-liked division chief approaches a resident for a prescription for meperidine (Demerol) for his headaches. He explains that he has been too busy to get to his own physician for a new prescription and today his headaches are particularly bad. When the resident sheepishly says that she would rather not write the prescription, the faculty member nervously withdraws the request and apologizes.

28. At morning report, there is a discussion of a patient from Haiti. During the patient's admission, two residents joke briefly about voodoo and

superstitions that they associate with Haitians. Another of the residents present at morning report is Haitian and feels offended. He mentions his disappointment and anger to the Program Director privately after morning report and asks how to proceed in resolving the issue.

Points to consider during discussion:

- What is a medical doctor's responsibility when racial, ethnic, gender, or cultural bias is apparent during open discussions?
- What are the barriers to straightforward confrontations?

29. Members of a respected pediatric practice have admitting privileges at a hospital that requires 25 CME credits per year to maintain admitting privileges. One member of the practice is approached by a partner with a request to sign that person in for Grand Rounds to get CME credit, explaining: "I'm just too busy to get there today, and you know we need the credits."

Points to consider during discussion:

- What is the function of CME?
- What is the downside of refusing or of signing in for the physician?

30. You are the senior resident in the pediatric Emergency Department when a 10-year-old girl who sustained severe anoxic brain damage during a complicated delivery is brought for evaluation of increasing seizure activity at home. She is the parents' only child, and they care for her meticulously. They have never been willing to consent to a "do not resuscitate" order. You plan to consult the child's neurologist to discuss her anticonvulsant medications, but the parents want her admitted to the hospital and have requested a MRI scan of her head.

Points to consider during discussion:

- How do you deal with parental requests for laboratory or diagnostic tests you feel are unwarranted?

31. An 8-month-old boy is brought to the Emergency Department because of an apparent painful right leg. You determine that the infant has suffered a fracture of the femur. When questioned, the mother cannot recall any trauma consistent with the degree of injury.

Additional points to consider during discussion:

- What if the mother is one of the pediatric nurses?
- What if the mother has called your attending and he forbids you to call protective services?

32. One of your continuity clinic patients, a 3-year-old boy, is brought to see you by his mother. When you enter the examination room you are also introduced to a 6-year-old girl, the step-sister of your patient. The mother explains that the older sister has just come to live with them, having spent the first years of her life with her grandmother. It is two days before school is to begin, the child needs immunizations before she can be enrolled in school, and she is not yet registered on the mother's Medicaid policy. The mother asks that you immunize her daughter using the brother's Medicaid number.

Points to consider during discussion:

- What is the downside of following the mother's request?
- What is the downside of not following the mother's request?

33. You are a senior resident supervising an intern's encounter with a 15-year-old girl in the Emergency Department. The intern has done a very nice job of gaining the teenager's trust, and the adolescent has disclosed to the intern that she may be pregnant. After confirming an early pregnancy, the intern comes to you for guidance in referring the patient for prenatal care. You ask whether the patient has considered abortion. The intern states that she (the intern) is Catholic and adamantly refuses to present abortion as an option to the patient.

Points to consider during discussion:

- How do you reconcile personal beliefs with medical decision making?