"Doctor! Did your colleague do the right thing?"

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The questions patients ask physicians are diverse. They might be about diagnosis, etiology of the disease, treatment options and the probable side effects, duration of treatment, prognosis, and so on. Although responding to some of these questions might not be easy, especially those concerning life-threatening diseases, such as cancer, causing physicians to follow related protocols to answer them, sometimes it is even more difficult due to the nature of the questions. An instance of such issues is when a patient, referring to a clinic in a hospital or private office, asks a physician about the appropriateness of the therapeutic measures taken in the hospital by his/ her colleague who has had the responsibility of the patient's treatment.

There might be a defined answer to this question in those health care systems that observe international standards and that train their health care providers about how to deal with such situations, but in the health care systems lacking appropriate policies and procedures physicians might face problems originating from not knowing the suitable answer and experience concerns due to uncertainty.

In the latter system, some questions may come to the

mind of the physicians, some of which might be:

- Professionally, do I "have to" answer this question?

- If I refuse to answer the patient's question, is it fair and ethical to do so or not?

- If I believe that my colleague has made a mistake, is it legally necessary to tell this to the patient?

- If I believe that my colleague has committed medical negligence during treatment of the patient that has caused an injury to him/ her but I do not disclose it to the patient, have I practically been involved in a "conspiracy of silence"¹?

- If I tell the truth to the patient and my colleague realize that, is it possible s/he and other physicians boycott me as punishment?

- If I believe that my colleague has made a mistake but I cover it up, will it damage the quality of care over the time and in the long run?

The above questions indicate that dealing with such a situation can be challenging for physicians and might annoy them if the health care system does not provide the necessary arrangements in advance.

According to medical ethics and international standards, it is the patient's right to complain about health care systems and health care providers such as phy-

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sicians. Furthermore, to ensure safety for patients and improve the quality of care, the hospitals both in developed and developing countries are expected to adopt an appropriate policy for quality control and strategies for outcome improvement based on research literature², and that standards of safety and quality are met and applicable policies, procedures, and protocols are implemented³.

In this regard, hospitals are expected to have a peer review committee with clearly defined roles and responsibilities, consisting of qualified health professionals, to ensure patients' rights, support patients to communicate their concerns, manage received complaints, and investigate physicians' performance. In this way, instead of "one" physician, in a "restricted time", with "limited medical evidence", and "without listening to the concerned physician's remarks", "a group of qualified professionals", in "sufficient time", and after "listening to the words of the both sides" investigates the "forensic" case. As mentioned above, it is important to notice that such an issue is a "forensic medicine" case and the relationship between the referring patient and the second physician is not a "therapeutic" one. The scenario presented here clarifies that health systems observe standards can not only cause the "patients" to be confident that it is the mission of the health system to deliver safe and acceptable-quality health care but also cause the "physicians" to work with more tranquillity in such an environment in which procedures are transparent and well-defined. Therefore, it is important to keep in mind that following standards ensures not only quality of care for "patients", but also quality of work life (QWL) for "physicians and other health care providers". In this relation, physicians

should make attempts to establish and implement the standards in any health facility such as hospitals. Returning to the patient's question about the accuracy of medical performance of a colleague and how to respond to the patient, it seems that based on the mentioned principles, the appropriate response to the patient might be: "I understand your concerns. I think it is your right to receive a convincing response. To address your case and similar conditions, there is a committee in the hospital, where you received treatment. The committee consists of medical specialists and they will investigate the business and inform you the result. Concerning your request, you can refer to the section ... in the hospital."

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