

## ***Virtual Mentor***

**American Medical Association Journal of Ethics**

**September 1999, Volume 1, Number 1:1-6**

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## ***Virtual Mentor***

American Medical Association Journal of Ethics  
September 1999, Volume 1, Number 1: 2.

### **CASE AND COMMENTARY**

#### **If a Colleague is Impaired**

Commentary by Audiey Kao, MD, PhD

#### **Case**

Tom and Jack have been friends since the start of medical school, and are about to start their third-year rotations. Tom considers himself a social drinker, but he noticed that Jack has been drinking more and more over the last year. Tom was not concerned about this during the 2 years of basic science training, but now that Jack will start seeing patients on a more regular basis, he has become worried. He wants to get some help, but does not want to strain his friendship.

#### **Question for Discussion**

- What should Tom do?

AMA *Code of Medical Ethics* Opinion E-8.15 on substance abuse, E-9.031 on reporting impaired, incompetent or unethical colleagues, and E-9.04 on discipline and medicine, as well as AMSA principles regarding physician impairment and substance use, all speak to the issues facing Tom. Are these opinions and principles helpful in your decision-making regarding this case? Why or why not?

**Audiey Kao, MD, PhD** is editor in chief of the *AMA Journal of Ethics*.

*The people and events in this case are fictional. Resemblance to real events or to names of people, living or dead, is entirely coincidental. The viewpoints expressed in this article are those of the author(s) and do not necessarily reflect the views and policies of the AMA.*

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## ***Virtual Mentor***

American Medical Association Journal of Ethics  
September 1999, Volume 1, Number 1: 3.

### **ART OF MEDICINE**

#### **Call for Images of Healing and Learning**

Audiey Kao, MD, PhD

Healing and learning appear to be paired processes, occurring together throughout human activity. But nowhere are these processes as prominently seen as they are during medical training.

Most any medium can be used to capture a representation of an aspect of healing and learning: the Chinese characters on this page represent the call that appears on banners when medical students graduate to become physicians. It urges them to apply what they have learned to prevent suffering and to heal mankind.

For most students, the medium that most readily lends itself to retaining some visual memory of a succession of fleeting moments is the camera. Through photographs, the highlights of yesterday's happenings remain vivid and communicable to others. The subtle interplay of light and shadow that renders a photograph unique may even be likened to the delicate shifts that characterize interactions between patient and physician or between student and teacher.

We invite students to send photographs portraying aspects of healing and learning. Accompany your photos with a description of what is captured in the image and the special significance the picture has for you. Through these images, students can communicate their personal perspectives on medical training and share their observations and reflections with others.

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## *Virtual Mentor*

American Medical Association Journal of Ethics  
September 1999, Volume 1, Number 1: 4.

### VIEWPOINT

#### Medical Trivia

Audiey Kao, MD, PhD

- Sir William Osler's middle name was Bart [1].
- Van Gogh's melancholy portrait of his physician, Dr. Gachet, was purchased in May 1990 for about \$120 million, the highest price ever paid for a painting. Concerns about the painting's whereabouts surfaced after the Japanese owner died in 1996. The painting is reported to have been purchased by an anonymous US buyer who has no plans to display it [2].
- Total blood volume in a human being recirculates every 13 seconds.
- A bacterium entering a cut finger can reach the lungs in under 4 seconds.
- Lazaro Spallanzani, an Italian priest and physiologist, put diapers on male frogs to keep any released sperm from contact with the female's eggs and thereby proved that physical mingling of sperm and egg was necessary for fertilization to occur. Spallanzani also considered the possibility of preserving human semen in a frozen state for later use.
- Thomas Aquinas, the preeminent theologian, philosopher, and *Angelicus Doctor* of the Roman Catholic Church, was so quiet as a child that fellow students considered him dim-witted and called him the Dumb Ox [3].

#### References

1. Swartz BJ. Sir William Osler. UMDNJ and Coriell Research Library. Accessed August 26, 1999.
2. Cezzane to Van Gogh: the collection of Doctor Gachet. The Metropolitan Museum of Art. Available at: Metropolitan Museum of Art. Accessed August 26, 1999.
3. St Thomas Aquinas. *Catholic Encyclopedia*. Accessed August 26, 1999.

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## ***Virtual Mentor***

American Medical Association Journal of Ethics  
September 1999, Volume 1, Number 1: 5.

### **VIEWPOINT**

#### **Sir William Osler, MD**

Audiey Kao, MD, PhD

Much has been written and spoken to guide healers in the appropriate principles and practices of patient care. Yet, essential as it is for a healer to understand the moral framework of his or her approach to patients, often the best teacher is a living example. For it is through individual speech and behavior that we see ethical precepts translated into the art of healing.

A physician long considered a role model extraordinaire was Sir William Osler, who practiced at the end of the 19th century and the beginning of the 20th. A great advocate for the value of equanimity or balance, Osler thought that for physicians to practice with a clear head and kind heart, they had to maintain coolness and presence of mind, to remain imperturbable throughout. Today, patients as well as physicians might perceive an unflappable demeanor in a less flattering light, but the cultivation of inner balance may still be a necessary discipline for physicians practicing under stressful circumstances. What are the qualities that students seek in those they identify as role models at the beginning of the 21st century? How different or similar are the qualities these people exemplify from role models of the past?

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## ***Virtual Mentor***

American Medical Association Journal of Ethics  
September 1999, Volume 1, Number 1: 6.

### **PERSONAL NARRATIVE**

#### **Through the Patient's Eyes: When You Come into My Room**

Audiey Kao, MD, PhD

What is it like to be a patient, experiencing a debilitating, potentially life-threatening illness or encountering the health care environment, perhaps for the first time, from a position of vulnerability? Through the stories of patients, physicians come to see themselves, and most especially their communications, from the other side of the equation. When patients—and that includes physicians who become patients—voice their most intimate thoughts, feelings, and reactions, much can be learned.

To arrive at the place where respectful, trusting, open, and truly informed patient-physician communications can take place, one begins by giving the patient undivided, close attention, listening for what is said as well as unsaid. To cultivate this habit of closely attending to another requires practice in listening and interpreting the language, voice, and intonations of others' speech. Through such conscious exercise, each of us also becomes more aware of our own speech affect. Every month, we will present narrated stories from the *JAMA* column *A Piece of My Mind* because spoken words reveal much about the relationship between patient and physician.

#### **September Patient Story**

Schmidt SA. When you come into my room. *JAMA*. 1996;276(7):512.

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