

Virtual Mentor

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CASE AND COMMENTARY

The Physician's Role in On-Duty Injury Claims

Commentary by Rita Mitchell

Case

A father of three and the sole provider for his family, KC is a loading dock maintenance worker at Peterson Memorial Hospital. He presents to the Department of Employee Health Services complaining of severe lower lumbar pain, and tells the Health Services physician that he injured his back while shifting heavy boxes around on the dock. The Health Services physician advises KC to seek treatment with his primary care physician, Dr. Carlson. Dr. Carlson has been KC's physician for many years, and the 2 enjoy a close and trusting patient-physician relationship.

Dr. Carlson notes the evidence of severe pain when KC is instructed to perform physical tasks and authorizes him to be "off duty." KC continues off duty for a period of 24 weeks, during which time Dr. Carlson notes his continued complaint of the inability to bend, twist or to reach overhead without feeling a sharp pain that radiates downward. During the treatment course, X-rays and an MRI confirm that KC has significant injury to his back.

Dr. Carlson provides Dan, a third-year medical student who is completing a medical rotation in Internal Medicine, with the opportunity to participate in KC's follow-up care. During a lunch break one afternoon, Dan joins two other medical students who are discussing recent sports activities. As the two medical students talk about a friendly game of afternoon football that ended abruptly when one of the players injured his back, Dan soon realizes that the injured party is KC. The 2 students agree that KC was hurt pretty badly and would require extensive and long-term rehabilitation.

At KC's next clinic visit, Dan questions him about the cause of his injury. KC acknowledges that he was really injured playing football but asks Dan not to tell Dr. Carlson how the injury occurred and even offers to pay for Dan's silence. KC explains that if he loses his Workers' Compensation benefits, he fears that he will lose more than his ability to care for his family; he is afraid he will be prosecuted for fraud and asks Dan to help him out because, after all, only KC and Dan would know.

Questions for Discussion

1. Should Dan inform Dr. Carlson of his conversation with KC or keep the matter in confidence?

2. Does a patient-physician relationship exist between KC and Dan? Would Dan violate patient-physician confidentiality by telling Dr. Carlson what he knows? See what the AMA *Code of Medical Ethics* says about this topic in Opinion 10.01. Fundamental elements of the patient-physician relationship. American Medical Association. *Code of Medical Ethics 1998-1999 Edition*. Chicago, IL: American Medical Association; 1998. What are KC's responsibilities in this matter? See what the AMA *Code of Medical Ethics* says about this topic in Opinion 10.02. Patient responsibilities. American Medical Association. *Code of Medical Ethics 1998-1999 Edition*. Chicago, IL: American Medical Association; 1998.
3. Do you believe that Dan's silence is justified to avoid personal harm or hardship to KC and his family?
4. How might Dan's action in this case affect his medical education or his medical career? See what the AMA *Code of Medical Ethics* says about this topic in Opinion 9.04. Discipline and medicine. American Medical Association. *Code of Medical Ethics 1998-1999 Edition*. Chicago, IL: American Medical Association; 1998.

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