

# AMC Roundtable: Managing Clinical Conduct and Professional Faculty Issues in AMCs

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# Hypothetical: Part 1

- Dr. Mary Jones, Chief Resident for Emergency Medicine at University Hospital, approaches her Program Director to report that Dr. John Smith, an attending physician at University Hospital and senior tenured faculty member in the School of Medicine, increasingly has been making inappropriate comments to three female Asian residents in the program while in the presence of other residents. Dr. Jones, notes that some of the behavior occurred during a research rotation in a lab.
- Dr. Jones is now observing Dr. Finn, a male resident engaging in similar behavior.
- Dr. Jones says she can handle “it” and has intervened twice when Dr. Smith made others uncomfortable. She notes that Dr. Smith’s targets are fearful of coming forward and have pleaded with her not to say anything.
- The Program Director thanks her and promises he’ll talk to Dr. Smith off the record and without identifying anyone and talks to Dr. Smith that evening.

# Hypothetical: Part 2

- The following morning, Dr. Smith tells Dean Ima Knowitall that his new chair, Dr. Johnny Onthespot, is harassing and intimidating him in retaliation for raising patient safety concerns at University Hospital.
- Dr. Smith also alleges that Dr. Onthespot (who is 20 years his junior) has been making comments that senior attendings should step aside to make way for younger doctors and is trying to run him out of the department.
- Dean Knowitall tells Dr. Smith not to worry, nobody is trying to run him out, and that he's a valued colleague.
- Dean Knowitall immediately refers the complaint to the office responsible for investigating discrimination complaints that do not fall within Title IX. An investigation is launched and Dr. Smith hires a lawyer to be sure his rights are protected.

# Hypothetical: Part 3

- A month later, the ER at University Hospital is unusually busy with a bus accident when the ER learns of a serious apartment fire that is expected to bring additional patients. Dr. Willie Duright, the attending physician on duty, pages Dr. Smith, who is on call this week, to come in to assist.
- Dr. Smith fails to respond to three separate pages. He finally calls back almost 1.5 hours later, explaining that his phone and pager were charging in another room and apologized for missing the three separate calls.
- When Dr. Smith finally shows up 30 minutes later, he is a bit disheveled, though this is not unusual for him lately since he separated from his wife of 22 years.

# Hypothetical: Part 3 cont.

- Dr. Smith makes a triage choice that to Dr. Jones (Chief Resident) seems counterintuitive, but given his typical reaction to anyone who questions his judgment and the institution's failure to address her prior complaints, she does not raise questions.
- As they are working on the patient, Dr. Smith seems a bit unsteady and Dr. Jones asks if he is okay. He says he tripped on the gurney wheel and waves her off and mutters under his breath that he has been practicing medicine since she was playing with dolls. As they continue to work on the patient, Dr. Smith makes a serious error, and the patient nearly bleeds out.
- The charge nurse steps away and calls in Dr. Duright, who appears and asks Dr. Smith to help with another patient. Dr. Duright in fact takes him outside and asks if he is ok. He says he is fine and there are no further incidents that night.

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