

### ***The Need for a Modern, Old-Fashioned Doctor***

..\*John Hopkins Medical Centre

Sir William Osler, probably the most famous physician of the 20th century -- and Johns Hopkins' very first physician-in-chief -- set the gold standard in general medical practice. His 1892 authoritative textbook, "The Principles and Practice of Medicine", which chronicled 50 years of advances in medical science, also emphasized ways to reach out to patients.

Osler taught medical students at the patient's bedside. He valued his patients' insights and took careful note of how they described their symptoms. He believed students learn best by conducting a thorough history and physical examination. He combined a humanistic approach to the patient with the best that medical science had to offer.

***"Care more particularly for the individual patient than for the special features of the disease."***

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- Across the country, Americans are longing for the return of the old-style family physician, the kind of doctor who puts patients above all else. The Johns Hopkins Division of General Internal Medicine wants to make that longing a reality -- but with a twist. It wants to:
- Combine old-fashioned caring with superb modern medicine.
- Train physicians in the art of communication.
- Ensure that those entering the practice of medicine learn how to listen and form partnerships with their patients.
- Teach physicians to recognize how the strains of a demanding profession can affect the way they deliver care.
- Enable physicians to appreciate cultural differences so care plans make sense to the patient.
- Emphasize the necessity of a team approach in caring for each patient.
- Underscore the maxim that the best way to care for the patient is to care about the patient.

***(\* Staffed by physicians who are expert in education and centered in one of the world's leading medical centers, the Primary Care Consortium at Johns Hopkins was developed to become a national leader in shaping the "Modern Old-Fashioned Doctor")***

# Old-Fashioned Doctors

In the 40 years that I have been a full-time medical educator, much has changed regarding what we teach and how we teach our students and house officers. As a consequence, I now confine myself to teaching basic medical principles—principles that should never change. But even so, today's trainees tell me that what I say and do is old-fashioned. I wonder:

- Is it because old-fashioned doctors spend whatever time it takes to obtain a good medical history and physical examination?
- Is it because old-fashioned doctors routinely seek *all* of the patient's previous medical records, not just the discharge summaries?
- Is it because old-fashioned doctors do not order sophisticated, expensive studies when simpler and cheaper procedures can supply the needed information?
- Is it because old-fashioned doctors order tests to substantiate, not generate, their clinical impressions?
- Is it because old-fashioned doctors use their brain and their heart, not an army of consultants, to manage their patients?
- Is it because old-fashioned doctors view consultants as opinion givers, not decision makers?
- Is it because old-fashioned doctors treat patients, not numbers?

- Is it because old-fashioned doctors do not blindly administer a ton of drugs in an attempt to alleviate every possible ill?

- Is it because old-fashioned doctors recognize that doing nothing is, at times, doing a lot?

- Is it because old-fashioned doctors understand that patients often get well *despite* what we do, not as a result of what we do?

- Is it because old-fashioned doctors realize that good rapport with their patients is their best protection against lawsuits?

- Is it because old-fashioned doctors are aware of their own fallibility and are never afraid to say, "I don't know"?

If so, then I am proud to be old-fashioned. And I believe that if more doctors today practiced medicine the old-fashioned way, our profession might regain some of the nobility and respect it once enjoyed.

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