

Editorial

Being a Good Doctor: The First Steps

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The first and foremost task of doctors is to diagnose diseases correctly and then suggest the best available treatment. In the good olden days diagnosis was a combination of art and science. Physicians used to listen to history of the patient, examine her and then using deductive analysis, we call it algorithmic process currently, reach a conclusion regarding diagnosis and then prescribe treatments. Many patients did not get a proper diagnosis and did not get well. The doctor who did not make mistakes most of the time (90%) was considered a good doctor. It was believed that a human experience, humanism, is important in healthcare. Both logical thinking and at times illogical digressions in the algorithmic diagnosis pathway were considered important. Over the years, methods of learning evolved from interactive didactic learning and laboratory experimentation to bed-side learning. Teachers were guides at every stage of medical education. These learning technologies are thousands of years old and have continued to the present.

Parmar¹ describes the following characteristics of a good doctor (in alphabets):

- A: attentive (to patient's needs), analytical (of self), authoritative, accommodating, adviser, approachable, assuring
- B: balanced, believer, bold (yet soft), brave
- C: caring, concerned, competent, compassionate, confident, creative, communicative, calm, comforter, conscientious, compliant, cooperative, cultivated
- D: detective (a good doctor is like a good detective), a good discussion partner, decisive, delicate (don't play "God")
- E: ethical, empathy, effective, efficient, enduring, energetic, enthusiastic
- F: friendly, faithful to his or her patients, flexible
- G: a "good person," gracious
- H: a "human being," honest, humorous, humanistic,

humble, hopeful

- I: intellectual, investigative, impartial, informative
- J: wise in judgment, jovial, just
- K: knowledgeable, kind
- L: learner, good listener, loyal
- M: mature, modest
- N: noble, nurturing
- O: open minded, open hearted, optimistic, objective, observant
- P: professional, passionate, patient, positive, persuasive, philosopher
- Q: qualified, questions self (thoughts, beliefs, decisions, and actions)
- R: realistic, respectful (of autonomy), responsible, reliever (of pain and anxiety), reassuring
- S: sensitive, selfless, scholarly, skilful, speaker, sympathetic
- T: trustworthy, a great thinker (especially lateral thinking), teacher, thorough, thoughtful
- U: understanding, unequivocal, up to date (with literature)
- V: vigilant, veracious
- W: warm, wise, watchful, willingness to listen, learn, and experiment
- Y: yearning, yielding
- Z: zestful.

Sir Peter Rubin,² Chair of the British General Medical Council, on the other hand opines, "Doctors have the enormous privilege of touching and changing lives. Through all the changes driven by research and public expectations, some of the art and science of medicine has endured down the ages and defines medicine as a profession, whatever a doctor's area of practice. Doctors synthesise conflicting and incomplete information to reach a diagnosis; deal with uncertainty - protocols are great, but doctors often must work off-protocol in the best

interests of the patient, for example when the best treatment for one condition may make a co-existing condition worse; manage risk - many patients are alive today because doctors took risks and as doctors we bring all our professional experience to bear on knowing when acceptable, informed and carefully considered risk ends and recklessness begins - and we share that information openly and honestly with our patients, always respecting that the final decision is theirs; recognise that change both in medicine and society is constant, ensuring that those standards which are immutable are preserved while those that are simply a product of their time are consigned to history; and carry and accept ultimate responsibility for our actions. Those of us who practise and teach medicine now are merely the custodians of those core values which were passed on to us by earlier generations and which we in turn will pass on to those who come after us. It is these values and these qualities which define a good doctor: they are timeless and long may they remain so."

However, In the twenty first century the train of progress is fast pulling out of station. In order to get a seat on it you need to understand twenty first century technology and influence on healthcare, and in particular power of biotechnology and computer algorithms. These powers are more potent than steam and telegraph and they will

merely not be used for production of foods, textiles, vehicles and weapons. The main products of twenty first century would be bodies, brains and minds- all related to health and healthcare. Liberal humanism ideals are now pushing humankind to reach for immortality, bliss and divinity.³ Medical education has to move in this direction. Genetic engineering and artificial intelligence shall be at forefront of medicine in the next fifty years. To understand these breakthroughs you need to spend time reading scientific articles and conducting lab experiments instead of memorizing and debating ancient texts. Then only can you become a good doctor in the 21st century.

REFERENCES

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