Unveiling the Shadows: Pitfalls in Medical Practice and Their Remedies: A Review
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Abstract:
In the realm of human experience, no individual can assert with absolute certainty that they have traversed their journey without stumbling upon the terrain of error. Such missteps are a universal aspect of our existence. Yet, it is the discerning mind that acknowledges these misjudgments, endeavors towards self-refinement, and endeavors to eschew their recurrence.

Within the confines of this traditional review, we delve into the prevalent missteps that physicians may encounter in the course of their esteemed careers. Furthermore, we proffer prospective remedies to each of these pitfalls. It is our fervent belief that this discourse will prove invaluable to a multitude of physicians and their cherished clientele, recognizing that the fallibility of physicians can exert a direct influence on the well-being of their patients.

Keywords:
Mistake, arrogance, neglect, doctor-patient relationship, learning, overconfidence, ethics, communication.

Introduction:
Within the realm of human existence, fallibility is an inherent facet [1], one that ripples through our interactions, impacting not only ourselves but those around us. It is of paramount importance to delve into the weighty subject of commonplace missteps that may befall physicians, a facet often relegated to the shadows. A formidable body of literature has been dedicated to this discourse in times past [2].

Let it be clear, we do not assert that every healer is ensnared by the pitfalls detailed in this exposition. Nonetheless, it is an irrefutable truth that certain practitioners do find themselves ensnared in these misjudgments [3]. Indeed, many clinicians have stood culpable of lapses, be it momentarily overlooking a patient’s exigencies while tending to another, or grappling with personal affront when their imperfections are laid bare. These are shared missteps, woven into the tapestry of healers across the globe. In reality, fallibility is the common thread that binds us all, a tenet underscored by the teachings of nearly every major faith and culture. Hence, it behooves us to acknowledge that physicians, too, are beholden to this frailty, their missteps manifesting in the course of their patient-facing duties or in the execution of ancillary tasks, such as the labyrinthine world of paperwork, deportment, and other conduct-related pursuits. Let us abstain from hasty judgment of those who err, and rather, lend our support to these healers in their pursuit of enlightenment and refinement, for they too are in need [3].

Thus, we have elected to engage with this discourse on the matter of commonplace errors, not only as a mirror to our own fallibility but also as a beacon of guidance to fledgling healers and those seasoned practitioners who might unknowingly or knowingly tread this treacherous ground. The gravity of addressing these missteps lies in the fact that a lone lapse, like the inadvertent oversight of a patient’s urgent needs, bears the potential not only to jeopardize the patient’s well-being but to venture into perilous realms of mortality. Furthermore, grave misjudgments, those that transgress ethical boundaries, may culminate in a physician forfeiting their sacred license to practice medicine. Thus, this treatise, dissecting the foibles that even a virtuous healer may unwittingly commit, aspires to be the catalyst for refined conduct in the hallowed halls of healing, ultimately weaving a tapestry of enhanced patient care.

Within this exposition, as elucidated earlier, we will navigate the familiar missteps encountered by physicians in their journeys and posit remedies, in equal measure, to fortify the healers and safeguard the sanctity of the healer-patient bond. To craft this narrative, we culled wisdom from antecedent scholarly endeavors and wove in the tapestry of our own experiences and erudition on this subject.

The Common Mistakes Doctors Make:
1. Arrogance:

The foremost and pivotal comportment for physicians to eschew is that of arrogance. Within the realm of healing, it is imperative for a doctor to comprehend that their patients look to them as paragons of aid, entrusting them with their well-being. A profound yearning exists within each patient to forge an emotional tether, a harmonious bond with their healer. However, when a
doctor dons the garb of arrogance, this vital connection falters, leaving the doctor-patient relationship bereft.

The quandary of physician hubris is not a new revelation and has been the subject of scholarly contemplation in times prior [4]. Many a healer, for myriad reasons, has been known to exude an air of haughtiness in their interactions with patients. One such catalyst, as expounded by Berger AS, lies within the intrinsic power dynamic inherent to the doctor-patient dynamic [4].

How can this issue be resolved?

2. Humility: A Solution to Over Arrogance:

To counteract arrogance, physicians ought to embrace humility [5]. The virtue of humility not only stands as a cornerstone in cultivating patient relationships, but also serves as an indispensable key to broader success. It beckons forth a perpetual journey of learning and self-improvement. In stark contrast, arrogance begets a belief in self-infallibility, leaving no room for personal evolution in character, knowledge, or thought. Thus, the arrogant soul inadvertently stifles their own potential for growth, incapable of forging genuine, substantive connections. Indeed, none seek the company of an arrogant spirit. Furthermore, the ostentation of superiority or self-importance is a bane to effective communication and collaboration, not only with patients, but also with esteemed colleagues. This, in turn, can cast a shadow upon one’s professional standing, inevitably impacting their career trajectory.

Bear in mind that you stand among the privileged few, bestowed with the rarefied opportunity to don the mantle of a healer. The corridors of this profession are trod by many aspirants, yet only a select cohort ascends to its ranks. Therefore, approach this vocation with a spirit of gratitude and a mantle of humility. Doing so shall not only refine you as an individual and as a practitioner of the healing arts, but will also endear you to the respect and admiration of both peers and patients.

*3. Neglect: *

It is not the extent of your knowledge, but the depth of your compassion, that resonates with those entrusted to your care. As a healer, it is incumbent upon you to hold in sacred regard the well-being and vitality of your patients. To disregard their needs is to unwittingly convey a demeanor of callousness and self-absorption, projecting an image of one preoccupied solely with self-interest.

3.1 Types of Neglect:

Patient neglect is a more prevalent issue than one might initially fathom. A meticulous review undertaken by Reader & Gillespie has unveiled two distinct categories of neglect: procedural neglect, arising from the shortfall of clinicians and hospital teams in adhering to established standards of care, and caring neglect, rooted in behavioral lapses that lead patients and their families to question the depth of concern within the caregiving cadre [6].

The genesis of neglect often lies in organizational variables, such as an overwhelming workload compounded by inadequate staffing levels [6]. Regardless of its origins, neglect in any form remains a blight upon the sanctity of care, imperceptible to patients. They gauge your conduct and demeanor, and nothing wounds more profoundly than the sensation of being sidelined or overlooked. When such an aura permeates your interactions with patients, you erode the bedrock of trust and truncate the potential for a meaningful connection.

Thus, it is incumbent upon every healer to abstain from any form of neglect; it unequivocally constitutes a transgression of the highest order. Never underestimate the weight of your patients’ concerns, queries, or affictions. Neglect, in all its guises, undermines the fabric of the doctor-patient covenant, with the gravest consequence being the potential harm to their well-being, and even the specter of fatal ramifications. Should your inattention and neglect culminate in harm to a patient, the toll exacted transcends professional reprimand, stretching into the realm of legal ramifications, potentially heralding the demise of a once-promising career.

Unwavering attentiveness and vigilance form the bedrock of medical practice, coupled with an acute sense of duty to serve patients with superlative dedication, executing one’s duties with the utmost rectitude.

4. Overconfidence and All-Knowing:

Whatever we learn in any field is akin to a drop of water, while the knowledge in that field is comparable to the vast ocean. The gravest mistake one can make in their medical career is assuming they know everything; this manifests as ignorance, arrogance, and overconfidence. Observing successful individuals worldwide, it becomes evident that their achievements stem from a coachable mindset and a commitment to lifelong learning. Yes, it holds true – we remain perpetual students. Graduation from a medical university marks the commencement, signifying a new beginning. Real education, the practical wisdom of your field, commences post-graduation. The sooner you internalize and embrace this reality, the brighter your career and life prospects will be.

Equally, one should be receptive to the suggestions and ideas of fellow doctors, regardless of their seniority or age group. As someone aptly stated, “every person you meet possesses knowledge you do not.” This implies that every individual in your professional environment can impart something valuable. The pivotal question arises – can a nurse impart wisdom? Absolutely. The moment you cultivate the belief that everyone holds the potential to educate you, your evolution as a physician accelerates.
Yagil et al. [7] have outlined potent strategies to mitigate overconfidence. They delineate three pivotal approaches: firstly, awareness of the "perils of overconfidence"; secondly, constructing a humble professional identity; and thirdly, fostering a positive self-image grounded in effort, rather than mere skill. We firmly believe that these three strategies are instrumental in combating overconfidence.

No one can assert absolute knowledge. Thus, delve into books within your field; numerous libraries offer an array of free resources in your vicinity. Consider acquiring second-hand books if finances pose a challenge. Additionally, engage in courses, attend seminars, and participate in webinars to deepen your expertise. Continuing medical education (CME) hours are imperative for upholding your credentials; seize these opportunities for learning. By doing so, you will not only expand your knowledge, but also serve your patients in the most exemplary manner. In the long run, you’ll reap the rewards of boundless success, a destiny reserved for the lifelong learner.

5. Various Modes of Effective Communication:

The conventional education system often falls short in imparting detailed communication skills. Consequently, many presume that communication merely involves polite discourse. Yet, speaking constitutes merely one facet of effective communication. Communication encompasses four primary components: speaking, listening, reading, and writing. Regrettably, emphasis on speaking overshadows the rest. People endeavor to dazzle others with their verbal prowess, often talking excessively. This tendency is mirrored in young doctors during residency interviews, where they aim to impress interviewers through extensive talking. Later, they wonder why they were not selected. While speaking is vital, the other facets of language are equally crucial. With two ears and one mouth, nature subtly advises us to listen twice as much as we speak in conversations. Listening, like speaking, requires practice. However, it is empathic listening that truly makes an impact. We must listen with empathy, engaging our hearts and emotions. Doing so not only enables you to resolve others’ issues, but also fosters deeper understanding, respect, and trust.

Another vital aspect is writing. Clear, straightforward prose is the linchpin of effective communication. Some erroneously believe that complex vocabulary impresses, but in truth, it often obscures the intended message. The primary objective of any writing is to convey the message so that the recipient understands it clearly. Simplicity in writing, coupled with lucid language, is the essence of great communication. While simplicity may belie the effort invested, practice is essential. Write, revise, and refine until you are confident your message is effectively conveyed.

Reading is akin to listening, where you absorb another's message. Neglecting to improve your reading skills can lead to missing vital details in patient emails or misinterpreting crucial communications from colleagues, senior doctors, or hospital management. This not only impacts your professional reputation, but can also jeopardize patient well-being.

Inadequate communication not only tarnishes a doctor's professional standing, but also erodes the doctor-patient relationship [8]. It is imperative to hone communication skills to avert miscommunication and misunderstanding in medical practice. There exist numerous avenues for doctors to enhance their communication prowess. For instance, to refine speaking skills, they can partake in public speaking courses or join organizations like Toastmasters. Toastmasters also aids in refining listening skills. A plethora of resources, from courses to books and videos, are available to enhance listening, speaking, reading, and writing skills. Committing an hour each day to reading will markedly enhance your reading abilities. Online courses and videos, accessible on platforms like YouTube, elucidate how to become a proficient and swift reader. Abundant literature exists on these subjects and can be procured. Astonishingly, there exists a book titled "How to Read a Book?" This underlines the wealth of high-quality resources available, although awareness of them remains limited. The onus is now on you to embrace lifelong learning, seize these books, enroll in courses, and watch videos to elevate all aspects of communication.

6. Unethical Behavior:

In society, a doctor holds a revered status as a noble individual, respected and acknowledged for saving lives and alleviating suffering. People view doctors as saviors who come to their aid. Hence, a doctor must uphold ethics unwaveringly. Every action of a doctor should be guided by ethical considerations. Regrettably, this is not universally observed. Many doctors worldwide have been implicated in unethical conduct, such as allowing commissions from pharmaceutical companies and laboratories. Such behavior has sullied the reputation of doctors in various corners of the globe. Patients have begun to perceive doctors as callous figures driven solely by financial gain. Consequently, doctors must adhere to ethical principles at all costs.

7. The Pillars of Ethical Practice in Medicine

To be ethical means doing what is right, even when no one is watching. Young doctors, in particular, must recognize that their primary duty is to serve their patients. Naturally, this commitment leads to financial rewards, but pressuring patients to procure medications or undergo tests from entities offering commissions positions a doctor as an exploiter, taking advantage of others.

Furthermore, physicians must abstain from unethical practices such as breaching patient confidentiality, dishonesty, or conflicts of interest. Upholding ethical standards is paramount for preserving trust and
integrity within the medical community. An extensive body of literature addresses the ethics of physicians [9-10]. In this section, we aim to spotlight certain facets of ethics.

Doctors should cultivate a habit of perpetual learning, especially in the domain of medical ethics. Continuous self-improvement is imperative to steer clear of any form of unethical behavior.

CONCLUSION:

Mistakes are inherent to human nature; the true failing lies in failing to learn and grow from them. This article endeavors to enlighten doctors about common pitfalls they may encounter throughout their careers. We’ve addressed prevalent errors like arrogance, negligence, overconfidence, deficient communication, and ethical lapses, along with proposing remedies to avoid them. Of course, a litany of other mistakes pervades the medical profession, not confined to young doctors alone. We have chosen what we deem to be the most ubiquitous missteps in physicians' careers. It is our hope that this article will guide many doctors in sidestepping these pitfalls, which not only imperil their careers but also jeopardize the well-being of their patients.

REFERENCES:


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