

The Health Care Team - Overview



In the United States, medicine is practiced in a team environment. Although in most cases the physician is the head of the team, he or she needs to understand, respect, and effectively utilize the skills offered by other team members. These team members include nursing staff, social workers, physical therapists, chaplains, and other professionals. A team approach is particularly important in the care of very ill patients in the hospital. Diagnostic and treatment plans should incorporate input from all team members, each of whom should be comfortable questioning decisions and suggesting alternatives. The effective physician actively solicits input from team members and encourages an integrated team approach. Suggestions for alternative treatment plans are not a threat to the physician's authority, but rather a normal function of each member of the medical team.

The Health Care Team - Scenario Script

A doctor is standing in an examination room facing a patient, who is sitting on exam table. A nurse stands off to the side.

Doctor: So Mr. Wallace, we are going to add a beta blocker medication to try to get better control of your blood pressure.

Patient: A beta blocker? [Looks anxiously at the nurse]

Nurse: Dr. Keeler, uh, Mr. Wallace mentioned to me before you came into the room that he was on a beta blocker in the past and had a lot of problems with fatigue, lightheadedness and some other problems. ... Uh, do you think uh, there is something else that could be added? I know Dr. Sterling has been using some newer ACE inhibitors. Would that be worth considering?

Doctor: [to patient] Will you excuse us for a moment? [to nurse] Miss Baker, can I see you out in the hall for a minute please?

Two different scenarios take place in hallway outside of examination room with door closed.

Scenario A

Doctor: Carla, I am not gonna to tell you again, do not question my medical judgment, especially in front of the patients!

Nurse: [icily] Sorry, Doctor!

Scenario B

Doctor: OK, Carla what's really going on with this guy? He seemed upset about starting a beta blocker. Do you have any idea what that's about?

Nurse: He's just one of those patients who has trouble talking to doctors. I did manage to get him to open up to me, though. It seems he has more problems than just fatigue and lightheadedness. He's had trouble with erectile dysfunction when he was on a beta blocker a couple of years ago...

Doctor: [nods her head and makes notes in the patient's file] Alright. Gotcha.

The Health Care Team - Discussion Questions

1. The scenarios demonstrate contrasting responses on the part of the doctor. Briefly summarize the two different reactions.
2. In the first scenario, the doctor is obviously uncomfortable being challenged in front of the patient. How could she have better communicated this to the nurse?
3. How would you interpret the nurse's response to the doctor's comments in the first scenario?
4. What key information does the doctor not receive in the first scenario? How might this impact this patient's management?
5. How do you think the interaction in the first scenario might impact the working relationship of this doctor and this nurse in the future?
6. In the second scenario, how is the doctor relating to the nurse?
7. What key information does the doctor receive in the second scenario that she did not receive in the first scenario? How might this impact patient management?
8. How do you think the interaction in the second scenario might impact the working relationship of this doctor and this nurse in the future?
9. Was it appropriate for the nurse to question the drug management in front of the patient? How else could she have addressed this issue?
10. The nurse in the second scenario states that the patient "has trouble talking to doctors." Which members of the health care team might be helpful with this kind of patient, and how can the doctor best work with them?

The Health Care Team - Scenario Analysis

This scenario addresses the reality that in the U.S. health care system, patient care is a team effort. In addition to the physician, a variety of health care professionals, including nursing staff, social workers, physical therapists, and chaplains, play an active role in patient management.

In this scenario, the doctor proposes adding a beta blocker to the patient's treatment regimen to get better control of his blood pressure. The patient reacts quite negatively. The nurse interjects that she had gotten some information from the patient regarding side effects from prior treatment with this class of drugs. She suggests that another class of drugs, ACE inhibitors, should be considered instead. The physician excuses herself and asks the nurse to step out of the examination room to confer with her.

At this point, the scenario branches. In the first scenario, the physician is obviously very challenged by the nurse's suggestion and reacts defensively. She berates the nurse for questioning her in front of a patient and makes it clear that she considers this behavior unacceptable and inappropriate. The nurse's reacts with deference but not with a great deal of respect.

In the second scenario, the physician realizes that the nurse has obtained information from the patient that may be of value but may have been uncomfortable for him to discuss directly with the physician. So, she very directly asked the nurse "What's going on?" The nurse, appreciating that the physician is genuinely soliciting her input and assistance, replies with the information that the patient was uncomfortable sharing with the physician directly, namely that he had experienced erectile dysfunction when taking beta-blockers in the past.

The two scenarios present very different ways that physicians can react to input from other members of the health care team. In the first scenario, the physician cuts off the nurse, disregards the value of any information she may have, and conveys a message that she is not interested in the nurse's professional input. Based on the nurse's tone at the end of that scenario, it is likely that the physician will get neither her input nor her respect in the future. Hopefully, the nurse will never let that compromise patient care, but this physician has certainly destroyed what could have been a fruitful health care team relationship.

The Health Care Team - Scenario Analysis (continued)

In the second scenario, the physician treats the nurse as a professional colleague, recognizing that she may have obtained important information about this patient that may be of help. She does not see the nurse's suggestion as a threat to her role as a physician, but rather as a source of additional input to help her make the best decision about this particular patient's care. It can be expected that after this encounter the nurse will continue to provide valuable information and suggestions to this physician to the benefit of all involved.

It could be argued that it would have been better if the nurse had not questioned the physician's drug choice in the patient's presence. This raises the issue of how the members of the health care team can best interact. There are elements of personal preference, tact, and style that will only come with experience, both the experience of dealing with the health care team conceptually as well as dealing with individuals and their own personalities and preferences. But as these contrasting scenarios and their outcomes demonstrate, the effort to include professional colleagues and the information and expertise that they can provide is certainly a skill worth developing.