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Interview: Firsthand Experience in a Required 'Professionalism' Course

Jane M. Orient, M.D.

Physicians subjected to medical licensure board discipline may be required to enroll in a medical "professionalism" course. They dare not speak openly about these courses because of fear of board retaliation. This physician spoke to me about this experience on condition of anonymity. It may be useful for physicians being referred to such courses to know what to expect.

Q: Why were you referred to this course?

A: I was cited for "unprofessional behavior" by the medical board. This behavior had nothing to do with any patient-doctor relationship. I posted a warning video on a website for a pain clinic that simply wanted to ward off anyone who intended to come to the clinic solely in order to obtain pain medications and divert them. The clinic did its utmost to avoid such individuals. Efforts included required referrals and background checks. The posted video was obtained from YouTube and displayed a warning that required acknowledgment before proceeding. I was not involved in making this video and knew none of the persons involved in it. It was determined that this video may have offended someone. Of all the examples

of "unprofessional behavior" that are presented on medical board websites, none resembled what I was cited for.

Q: How was the "professionalism" course selected?

A: I searched for such courses and found one, approved by the AMA, which cost several hundred dollars. But this far less expensive AMA course was deemed "not acceptable" by the medical board that sanctioned me. Instead, I had to go far away to a very expensive course. It was difficult for me since I did not have much money, especially after not being able to find work when my license was sanctioned. (To this day, I have not been able to find any medical paying job.) My distant family had to help me out, as my own family had been financially devastated by this action.

Q: How was the course structured?

A: I have been to many continuing medical education conferences in the past, but I soon learned that this "CME" course was very different. The course took place over several days. The first day was an introduction. Daily attendance was

required, which I found to be a reasonable requirement. There were more than 20 attendees. The “instructors” told attendees that we would be encouraged to participate, and also that we would be graded on participation. This introductory statement was similar to entrapment because it was later discovered that if you stated an opinion or observation that the “instructors” did not like, it could impact whether or not you “passed” the course, even though no examination was ever given.

Q: Why were the attendees there?

A: All of the attendees were required to publicly explain why they were being required to attend. I listened intently, but I could not understand why most were there. Two attendees had recurrent drug or alcohol issues, and another attendee had a habit of signing other physicians’ names to forms without their permission. Other stories shocked me, not because of what the doctors had done, but because it made no sense to even consider punishing these individuals by sending them to this course.

Dr. A was a medical director of a facility that took care of disabled individuals. Dr. A’s great “crime” was suspecting that patients were suffering fractures due to vitamin D deficiency. Blood levels showed that many were deficient in vitamin D. Dr. A ordered supplements and corrected their levels. Dr. A observed that fracture rates decreased, and was therefore cited for doing research without informed consent. It was as though Dr. A was doing research like Josef Mengele, rather than making a diagnosis and prescribing appropriate treatment for the purpose of benefiting patients.

Dr. B lived in a region devastated by a hurricane. Family members living nearby lost their home, and came to live with Dr. B temporarily. Dr. B’s sister was having insomnia due to the stress of their loss and the disruption in their lives. Dr. B prescribed a sleeping pill. Apparently, the sister and her husband later divorced, as is not uncommon in individuals who have undergone much loss. The divorce became a bitter one. And in the midst of that battle, the husband decided to report Dr. B to the board for prescribing a sleeping pill to someone who was a relative during this stressful time.

After I told my story, one of the “instructors” tried to challenge me, although I was giving the reason clearly stated in the board action to which the “instructor” had access. I suspected that this “instructor” was trying to broaden the scope of why I was required to take this specific course—a suspicion that later proved to be correct.

Q: What topics did the course cover?

A: A few hours after the introduction, one “instructor” started to talk about “social justice.” I wondered whether this was simply veering off topic, but the discussion continued. I did not understand what this speech about “social justice” had to do with “professionalism.” Furthermore, after being keenly and personally aware of the impact of communism in Eastern Europe and Russia, I felt the need to participate in this discussion. I raised my hand, and waited politely to be called on. In response to my comment that Stalin had said much the same thing as had just been presented, the “instructor” then appeared to get quite flushed and annoyed. The first day of the course then soon ended.

Q: What was the real goal of the course?

A: I went back to my hotel room and ate the cans of food I brought with me in order to keep my expenses down. I awoke

early the next day and arrived at the conference room a bit before the course was scheduled to start. The attendees were standing outside the room, and some were talking about the course. One attendee mentioned that we should all be careful about what we said even outside the course because it “may be used against us.”

The day began with a brief outline of how this day would proceed. The same “instructor” who had preached about “social justice” mentioned that there would be more “discussion” about “social fairness.” At this point, I thought of a well-respected colleague of my acquaintance who had been put in “re-education camps” in a communist country for simply voicing concern about corruption at a government-run hospital.

As the day proceeded, we were told to “discuss,” but I knew that what we said could and probably would be used against us. After several days of this course, the “instructors” told us that we “had to write an essay.” There would be no final exam, but the essay had to be written in a certain manner as specified by the “instructors.” At first, I thought that meant proper format and grammar, but they were telling us what we had to write if we wanted to pass this “course” in “professionalism.” Furthermore, if the content of what we wrote was not “deemed acceptable,” we would fail, and our respective boards would be notified that we “failed the course.”

At this point, not only did I feel that I was in a communist type re-education camp but that my fate was in the hands of characters who reminded me of those who actively participated in the Inquisition of the Middle Ages. We were told that we had to “confess” our wrongdoings (even if we did nothing wrong) and basically had to thank and show respect to our tormentors. I did the best I could under these circumstances of duress.

Q: What did you learn from the experience?

A: I have learned that evil is upon us. Tyrants have taken control. And those who dare question will be punished. I never thought that the “modern” U.S. would allow such abuse of power to legally exist in a government institution, specifically the medical boards. I mistakenly assumed that medical boards are run by physicians and that physicians are mostly reasonable people. However, more and more medical boards are not run by physicians, but rather by attorneys who have been appointed to these positions (and receive very good salaries and benefits).

As physicians, we have lost much control of our profession. Some have sought to open solo/concierge practice in order to maintain their independence. But know this much: even if you did nothing wrong, you are not protected. If the state in which you live decides to use the medical board to target and harass independent private physicians or any particular specialty it will use the medical boards to do so, and with immunity. If an individual has an ax to grind with you but cannot do so in a direct manner, then that individual can anonymously use the medical board to disrupt your career and livelihood.

Furthermore, there are physicians who are not independent-minded, who profit by giving these “courses,” who profit by their position of power on these boards, and who can and do abuse their power. These physicians are not the colleagues of independent-minded physicians. They are the enemy. And the enemy has all the power, and is beholden to no one. I would have never believed that such a thing could happen in the United States. Now, I know it does happen, and it is getting worse.

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