Serving the Patient and Not the Collective—
Protect Your Patients First, and Your Moral Future

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The following is from a letter sent to members of a hospital medical staff by Dr. McKalip as he was concluding his term on the staff’s Medical Executive Committee.

Recently I was engaged in a conversation with two prominent members of our medical staff in the doctors’ dining room. The main points we were arguing were whether physicians had an ethical duty to preserve social resources and to ration care for the collective good, or to serve the patient and consider financial issues in a secondary way.

I was alarmed that two trusted colleagues of mine vociferously defended the position that physicians had a positive duty to defend the financial resources of the state or the insurance company and must be part of a rationing scheme to do it. They went as far to agree that it is acceptable to deny care—such as Avastatin for advanced breast cancer—if it only added a “few months” to the life of a patient.

I pointed out that many younger women had dutifully paid their insurance premiums expecting that maximum effective treatment would be provided, even if it had a known rate of failure. I asserted that our duty is to the patient. If we become mere rationing agents for the state, we are no longer professionals. In fact, if we ration for the state I would suggest that we are not doctors at all, but merely cogs in some nebulous system that serves itself at the expense of individual patients.

As my term of service on the Medical Council concludes, I ask you to consider what you will do when your practice causes you to be sucked into an amoral system. You will be asked to sacrifice patients, withhold care, and terminate care early when a reasonable or even small chance of success remains. You will be asked to not tell patients of effective treatments or not to offer them surgery. You will be told that you may get a bonus or avoid a penalty if you do so. You may “gain share” with hospital monetary savings or be rewarded in less tangible ways through marketing, referrals, benefits, or prestige. You will be putting yourself and the system before the patient. You will—in short—be asked to violate your conscience to benefit a larger system and sacrifice your patient on the altar of collectivism.

Don’t sacrifice your primary duty to the patient. Don’t ration care for the government. Your patients will suffer. Patients will die who could have been saved. You will regret it. You will pay the price later. These moments will come to haunt you and you will live in tortured regret. I also believe that we will be held to account for our actions by a higher authority.

I ask you to read this brief story written by a past president of the Association of American Physicians and Surgeons (AAPS). Dr. Lee Hieb tells the story of Dr. Karl Brandt, who was once a heroic trauma and spinal surgeon but became Hitler’s Reich Commissioner of Health and Sanitation and personal physician. As you read, pay particular attention to the incremental nature of change that leads to unthinkable evil. While war-torn Germany may seem an extreme example that is not applicable to your situation, think again. The same sort of rationale to manage limited resources is created in “ObamaCare” through Accountable Care Organizations, Pay for Performance, the Complete Lives System, compliance with government and insurance company guidelines, Comparative Effectiveness Research, control of medical practice through health information technology and the rationing decisions of the Food and Drug Administration (FDA) and the Independent Payment Advisory Board (IPAB). Pressures to ration will be intense as the system grinds you farther under through denial of just payment for services and added regulatory expenses. Resist the temptation to engage in this immoral behavior. Dr. Brandt was executed for his euthanasia program, which was instituted to save resources for the state. He regretted his move later, and Hitler ordered his execution.

Finally it was the Nuremberg Trials that put him to death. I hope he was able to repent to the point at which he found some peace and redemption with God.

May God have mercy on our souls if we choose this path. Serve your patient first and you will serve yourself, society, and God best.

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REFERENCE