# Open Discussion of Trainee Involvement in Patient Care: Physician Challenges

In their recent article in the *Journal of Graduate Medical Education* entitled "Trainee Involvement in Patient Care: A Necessity and Reality in Teaching Hospitals," Drolet and colleagues[1] examined patients' reactions to trainees being involved in their care, and recommended that trainee involvement and progressive autonomy be openly disclosed and discussed with patients. Their article referenced a *Boston Globe* article that addressed the perception that the use of trainees is meant to maximize profit and leads to patient harm.[2]

We, as physicians, should always ensure that patient safety and trainee education are balanced. However, an open discussion with patients regarding trainee involvement in their care may be met with unease. I propose 3 ways in which a trainee may be introduced to a patient, and the implications of each in the context of the open discussion suggested by Drolet and colleagues. I focus on medical students, as their trainee introductions are more transparent, and they cannot ask patients to call them "Dr."

Evans et al[3] examined patients' abilities to identify students on inpatient units, and found that only 4 of 101 patients could identify medical students by the way the students described their role. Similarly, Turner et al[4] found that only 58% of medical students in an observational study identified themselves as students to patients. The student role disclosure represents a delicate balance between transparency and omission, which is influenced by the potential of a patient refusing student involvement if there is disclosure, or there is a perception of dishonesty if discussion of the student's role is omitted.

**Introduction 1:** "*This is Jennifer, the medical student on our team.*" This introduction makes clear the student is a trainee on a larger team of providers. However, the patient may refuse or feel he or she is being treated as a "guinea pig" in a teaching hospital.

**Introduction 2:** "*This is Jennifer. She is part of our team that will take care of you.*" While nothing is untrue in this statement, a patient may interpret this as dishonesty through omission. A patient may be unlikely to ask for clarification when a student is presented this way and, instead, assume that the student is a physician.

**Introduction 3:** "*This is Jennifer, a medical student who is part of our team that* ***together*** *is taking care of you.*" This is perhaps the most accurate and palatable of the 3 introductions. It satisfies the disclosure to the patient while emphasizing the importance and necessity of her involvement on the medical team.

These principles could be adapted for use when introducing resident members of the team, particularly junior residents. This disclosure remains an ethical struggle for trainees advocating for learning experiences and for attending preceptors helping to create those experiences for them. I agree with Drolet and colleagues' assertion that patients deserve an open discussion and disclosure. However, enacting this practice may present challenges and concerns among both trainees and their attendings for fear that patients may refuse being cared for by a trainee.

**Flint Y. Wang, MD**
Assistant Professor of Clinical Medicine, Section of Hospital Medicine, University of Pennsylvania

## References

1. Drolet BC, Brower JP, Miller BM. Trainee involvement in patient care: a necessity and reality in teaching hospitals. *J Grad Med Educ*. 2017:9(2):159–161.
2. Vennochi J. With double-booked surgeries, the patient has a right to know. *The Boston Globe*. October 26, 2015. https://www.bostonglobe.com/opinion/2015/10/26/with-double-booked-surgeries-patient-has-right-know/YFOTniVrFDa9pKld1DczMI/story.html. Accessed July 11, 2017.
3. Evans D, Owen S, Green J. Role of a medical student: patient perspectives. *Clin Teach*. October 28, 2016. Epub ahead of print.
4. Turner JS, Pettit KE, Buente BB, et al. Medical student use of communication elements and association with patient satisfaction: a prospective observational pilot. *BMC Med Educ*. 2016;16:150–157.

DOI: http://dx.doi.org/10.4300/JGME-D-17-00319.1