Who is Responsible?

Mohammad Esmaeil Akbari¹,*

¹Cancer Research Center, Shohada Hospital, Shahid Beheshti University of Medical Sciences, Tehran, IR Iran
*Corresponding author: Mohammad Esmaeil Akbari, Cancer Research Center, Shohada Hospital, Shahid Beheshti University of Medical Sciences, Tehran, IR Iran. Tel: +98-9122993809, E-mail: ijcpjournal@yahoo.com

Received: January 7, 2015; Revised: April 29, 2015; Accepted: May 31, 2015

Since the dawn of human civilization here on Earth, health has always been a major evolutional concern. For as long as people realized that every human need calls for a profession to fulfill, there has been a constant requirement for health care providers. Throughout the history of medicine, it was usually the physician as a case given alone held responsible for the patient’s health. With time as man made progress, the knowledge has changed but this view did not change: the physician is still the single source of responsibility.

However, today it seems far-fetched to assume that a physician has to be able to single-handedly carry the burden of patient’s health. While he/she must contribute to (in other words, lead) a collective set of measures each carried out by professionals including laboratory and imaging specialists, pathologists, geneticists and other clinicians. For example, a surgeon who is dealing a case with breast cancer is fed some evidence, provided by other specialist who are not directly and comprehensively involved with the patient that enables him/her to pass judgments on issues like primary tumor size, the sign and symptom in the skin, axilla, age and family history of the patient. All of these specialists are responsible for their job, but in reality their responsibility is not clear clinically. The patient will be treated by the result of lab tests and images that may be standardized by some authoritarian organization but for individual cases the test results are not verified.

The central role of a clinician, which is also the patients’ traditional view of a physician, has turned the clinician to a leader to manage the team to obtain the best possible results. In such case, the burden of responsibility is shared by the team under administration of a clinician as the team leader. In conclusion the position of clinician is changed from management to stewardship and he/she is fully responsible for patient care even for the other works provided by responsible person(s).