

# Ethics After Hours



## Dr. Death

### A Wondery podcast

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#### Summary<sup>1</sup>

This is the story about Dr. Duntsch, a neurosurgeon who claimed to be the best of their kind in Dallas. Patients with back pain would seek Dr. Duntsch when they had tried everything else, and he confidently claimed that he could give them the spine surgery that would take their pain away. This is also the story about 33 patients who experienced severe complications following spine surgery from Dr. Duntsch, and how they were let down by a system that proved to be ill equipped to stop the harm.

10 part investigative miniseries

Duration of each episode: Approx 40 mins

Host/Reporter: Laura Beil

Produced by: Wondery

Air date: August 22, 2018 - December 12, 2018,

Episodes and more information available here: <https://wondery.com/shows/dr-death/>

#### Questions for discussion:

- What were your thoughts after listening to the first three episodes of *Dr. Death*?
- The Canadian Medical Association's (CMA) code of ethics includes the ethical obligation to report any unprofessional conduct to the relevant authorities. What concerns would you have around reporting a colleague's suspected substance abuse?<sup>2</sup>
  - Would you feel different around reporting it if the drug or alcohol abuse does not take place during work hours?
  - Why do you think Dr. Duntsch's colleagues acted as they did?
- During Duntsch's residency, the hospital where Duntsch worked received an anonymous phone call from a woman reporting that he was doing drugs before surgery. What is so worrisome about substance use by health care providers? What is the difference between what Duntsch did and an ED physician using modafinil before a shift?
- Duntsch was sent to an impaired physicians program, and was then allowed to return to his residency program. In your opinion, what steps should be taken if a learner is found to be impaired due to use of drugs or alcohol? Why?
  - Should there be a difference between how we treat learners with substance use disorders as opposed to professionals already in practice?

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<sup>1</sup> Adapted from summary posted Wondery's website: <https://wondery.com/shows/dr-death/>

<sup>2</sup> Canadian Medical Association: CMA CODE OF ETHICS AND PROFESSIONALISM  
<https://policybase.cma.ca/documents/policypdf/PD19-03.pdf>

- Before Duntsch was hired at Baylor Plano in Dallas, the employers ran a background reference check. Duntsch's supervisors did not mention anything about Duntsch having attended the impaired physicians program in their reference.
  - Why do you think this information was withheld?
  - Do you think information like this should be withheld from a potential employer? Why or why not?
- Did it surprise you that the institute where Duntsch was hired in 2011, and from which he was later let go, did not seem to have a policy on reporting potential alcohol or substance abuse?
- In 2012, Duntsch did not have privileges to perform surgery at any hospital, yet he doesn't refer his patients to other providers. B.J. Ellison, Duntsch's office manager, feels uncomfortable working for Duntsch due to his unethical behaviour. She decides to quit her job, and upon leaving she contacts as many patients and hospitals she can to warn them against Duntsch.
  - What was your reaction to her choice?
  - Could she have handled things in a different way? What else could she have done?
- Duntsch went through residency and practiced as a neurosurgeon for several years before his license was revoked, but the story of Duntsch is also a story about how the system fails to stop him from practicing. Do you think this case could have unfolded in Canada? Why/why not?
- Discuss the impact that cases like Duntsch's have on public trust in the medical profession and in the health care systems ability to protect patients from medical malpractice.
- What does this case reveal about the role and function of codes of ethics and professionalism?