





## Discussion Questions for Week 1

A "threaded discussion" is a discussion forum that allows students to respond to questions posted by the professor (original responses), which can then be read by other users who add their own comments in response (secondary postings). Unlike chat rooms and other "real-time" interaction forums, threaded discussions do not require different users to be logged on at the same time.

Discussion questions are assigned each week. **Original responses to these questions must be posted by Thursday at 11:59PM.** Original responses must be at least **250 words** and must incorporate concepts from the lectures and assigned readings.

**Secondary Responses/Postings:** Each student must post **two or more** secondary responses to other students' postings **for each discussion question.** Secondary responses are due by **11:59PM on the Monday following the week in which the questions were assigned.** They must be a minimum of **150 words** and, like original responses, should incorporate concepts from the lectures and assigned readings. Students are encouraged to embark on interactive discussions that go beyond the minimum number of secondary postings.

Although the discussion board is expected to be student-driven, professors will be participating in the discussions as well.

**DQ 1.1:** In a study published in the Journal of the American Medical Association, 70 percent of primary care physicians and 68 percent of subspecialists reported that they participated in at least one informal consult in a week, usually a brief hallway chat or telephone conversation. Consults most often entailed which diagnostic testing should be obtained or treatment initiated for a patient. The subspecialists most often consulted were cardiologists, gastroenterologists and infectious disease specialists. What are the liability risks associated with these "curbside consultations"? What steps would you suggest providers follow in order to minimize those risks?

**DQ 1.2:** Janet suffers from a variety of pain-producing illnesses, including migraines, fibromyalgia, and low back pain. To deal with the pain, she takes several narcotic medications, sometimes in amounts that exceed her physician's recommendation. Recently, she began calling her primary care physician, Dr. Henry, for early refills of her prescriptions. Each time she offered a different explanation: her prescription had been lost or stolen, she dropped her bottle of pills in the toilet, etc. On the last such call, Dr. Henry refused to speak with her and instructed his receptionist to tell her that she needed to find another physician. Janet called several other local providers but was unable to find anyone to see her. A few days later, she was rushed to the emergency room in excruciating pain. After she was stabilized, she brought a lawsuit for abandonment against Dr. Henry. What is the likelihood that she will prevail on her claim? If you had been in a position to advise Dr. Henry before his last phone call with Janet, how would you have suggested he proceed?