



Query

It shouldn't matter. I should be used to it by now. But whenever it happens, I always think: what did I do? What didn't I do?

Yesterday, via letter, a patient of mine requested that his records be transferred to another doctor. Normally, that doctor is in another city, sometimes another province. These instances don't hurt; I assume these patients are changing doctors because they're moving and simply need a physician closer to their new home. No, the ones that hurt are the ones requesting record transfers just down the road to doctors that I know.

There can only be one reason for the switch: they are dissatisfied with my care. And the torture of it is, except in the obvious cases where there has been a mutual falling-out, I never find out why: with the request for records transfer there usually is no comments section outlining why the patient is changing allegiances. So I wrack my brain, trying to figure out what I might have said to have offended them or to have lost their confidence.

I feel like I should call up my nearby colleague and ask why their new patient left me. I never do this, of course; it's a kind of masochism. But on some level I do want to know if I did anything wrong, or if it was just a difference of personalities.

In one way it's not fair; I can count the number of times I've fired a patient on one hand, but the number of defections I've seen over the years is probably above thirty. (I pride myself on not getting rid of people who are difficult, people who have often been turfed by other doctors. Somebody has to do something really outrageous to be fired by me.) And it's probably also not important: not every patient gets along with every doctor, and better the patient find a doctor they can work with rather than be wedded to the same old physician

who cannot meet their needs. It's probably even a good thing for the doctor, too: better to be rid of someone you can't reach, someone demanding — for in every defection is a demand for better treatment — and someone dissatisfied. Good riddance, right?

But it's hard, in this case, for me to be glad to be rid of a burden I never knew I carried. In this case, the reasons for leaving were not obvious. I saw him a handful of times, once after he came out of hospital from a heart attack; perhaps he felt I didn't pay enough attention to him on that post-hospital visit. I don't really know; I've looked at my notes, and I did all the usual things. For my part, I neither disliked nor particularly liked him. I didn't throw him a party when he got out of hospital, but I didn't lock the doors of my office when he entered the parking lot either.

It's a mystery. And I'll have to restrain myself when I inevitably see his new doctor at the next CME function. Better to think about the patients I've picked up from this doctor, and from other doctors, who all say the same thing in some way: that they felt they weren't listened to by their old doctor, that they felt she didn't really care, that she didn't spend enough time with their problem. And tell myself too that a patient who complains about another doctor is likely to do the same thing about me, given the chance.

What else is there to do? Call the patient and beg him to come back? Defend oneself to the new physician?

No. Even though my practice is closed to new patients, I told my secretary to accept the next one that calls in looking for a doctor. And I think that that's the only thing I can do.

— *Dr. Ursus*