The brevity of the GMC’s first rule of medical practice obscures the complexity of the job

The first rule of Good Medical Practice, issued by the General Medical Council, is: “Make the care of your patient your first concern.” With its strong Hippocratic flavour, the statement captures a fundamental truth about the practice of medicine, pointing to the sacred and timeless nature of the encounter between the healer and the sick person.

Yet, however noble in spirit, the rule should be no more than a rule of thumb. Although “patient” is in the singular, few doctors have only one patient. Doctors must therefore choose how to allocate their “concern” among their many patients. It is neither possible nor desirable to treat each patient as a first concern, as some patients, usually the sickest, merit more concern than others. The principle of justice requires the doctor to determine which patient deserves the greatest attention.

In a field hospital in a conflict zone, four polytrauma patients are admitted after an explosion. One has multiple traumatic limb amputations. The others have less severe injuries but require blood transfusions. Treatment of the first victim will activate the massive transfusion protocol. Should the hospital’s entire stock of blood and plasma be used on that one patient? In such a situation triage priority shifts from “treat those in greatest medical need” to “save the most number of lives.” The care of your multiple amputee is, regrettably, no longer your first concern.

At times, making the care of your patient your first concern, bearing in mind your other patients and their particular needs, as well as any protective obligations to the broader community, may lead you to flout other rules, including legal ones. So the final version of the rule is: “Make the care of your patient your first concern, bearing in mind your other patients, including at times future patients, and their particular needs as well as any protective obligations to the broader community, your own obligations to develop your skills and knowledge as a clinician, and obligations you may have towards others for whom you are responsible.”

Finally the rule can be misused. I have heard doctors invoke the rule to justify their exaggerations to radiologists to expedite their patient’s scans. Doctors in the United States have been known to deceive insurance companies to obtain treatments for their patients (JAMA 2000;283:1858-65). If the care of your patient is your first concern, this may lead you to flout other rules, including legal ones.

The first rule of the GMC is a profoundly important statement, but its brevity necessarily obscures the complexity of modern medical practice. Ironically, too literal a reading of the rule could lead to unethical conduct. It should be seen as a starting point, not a commandment.

Daniel K Sokol is honorary senior lecturer in medical ethics, Imperial College London
daniel.sokol@talk21.com
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