

# Good critical thinking about social problems in the article

[Business](#), [Decision Making](#)



## **Application Paper**

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### **Introduction**

The article entitled “ The Unexpected Influence of Physician Attributes in Clinical Decisions” was transcribed by John B. McKinlay along with others. Their main purpose for conducting the research under Health and Social Behavior was intended at determining various aspects. For instance, it was aimed at determining if patient’s features were taking a central role in clinical-decision making. In addition, the experiment was meant to indicate if it was only the medical doctor’s individualities or it was mishmash with the patient’s physical characteristics that predisposed medical assessment making. The patient’s features that were under consideration included but not limited to age, gender, economic status, and race. On the other hand, the medical practitioner’s attributes that were under considerations included gender, age, race, and medical specialty (McKinlay, John, Lin, Ting, Freund, Karen, & Moskowitz. 2002). Of importance to mention as well as the fact that the socio economic status of the patient was denoted whether or not they were covered by insurance along with the dressing codes of the patients.

Various social glitches were deliberated on within the article. For instance, the article expounded on whether the physician attributes mentioned exceeding played a role in their medical decision making. Secondly, the patient’s features were as well studied. The intention was to pondering if

their attributes influenced the medical practitioner's decision-making process (McKinlay, John, Lin, Ting, Freund, Karen, & Moskowitz. 2002).

### **Research Methodologies used in the article**

As it was deduced from the article, experimental research technique was selected. It was formulated based on 16 videotapes portraying patient-physician encounters for two medical conditions namely; depression and Polymyalgia rheumatica (PMR). Each video presented an amalgamation of four patient characteristics. They were age (between 65 and 80 years), gender (male or female), occupation (white or blue collar profession) and race (black or white) (McKinlay, John, Lin, Ting, Freund, Karen, & Moskowitz. 2002). In the experiment also, the total number of over 120 physicians were selected for the experiment and most specifically, they were from the United States. For the physicians to be appropriate for consideration for the tryout, they were supposed to be internal medicine or family practice. In addition, it was mandatory for them to have completed a medical internship in the United States. They were as well required to have actively participated in offering medical care to patients not forgetting to mention that they were supposed to have dealt with older patients in their career (McKinlay, John, Lin, Ting, Freund, Karen, & Moskowitz. 2002). In addition to the experiment, various questionnaires were used in the experiment as deduced from the article. That was specifically carried out on the collection of data from the physicians. It was achieved through the answering of the various multiple choices and open-ended questions all geared up at testing the validity and reliability of the responses collected (Roter & Hall, 2006).

## **Personal views on better solutions to the social problem**

Significant patient's features epidemiologically would not deduce any effect on medical decision-making of either of the two conditions that were placed under study. On the contrary, the clinically extraneous physician attributes mentioned herein were found statistically to have an effect on the medical decision-making process although it was initially thought not to be the case. That concept would as well be deduced from the Bayesian decision theorist who holds a contrary opinion to the exceeding mentioned conclusion (Peterson, 2008). According to prescriptive theorists, the patient attributes were thought to have an influence did not portray any of them during the study. Rather, it was the physician's attributes that were thought by the theorists not to have any impact of the medical decision-making that were playing a critical factor as well as having a major effect.

Conclusion

## **References**

McKinlay, John B., Lin, Ting, Freund, Karen, & Moskowitz, Mark. (2002). The Unexpected influence of physician attributes on clinical decisions: Results of an experiment. *Journal of Health and Social Behavior*, 43(1), p. 92-106.

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Roter, D., & Hall, J. A. (2006). *Doctors talking with patients/patients talking*

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