

□ The Defensive Medic

Treats risk, not disease. Manages liability, not patients.

This neurosurgeon's scalpel is guided not by anatomy, but by anxiety. Every move is calculated for courtroom defensibility. Every order, every scan, every unnecessary test — all carefully documented to survive the audit, not to serve the outcome.

He doesn't think in terms of what's best. He thinks in terms of what no one can blame him for.

Even the patient feels it: a consultation that sounds like legalese, a consent form that reads like a waiver of trust, a tone of caution that borders on paralysis.

He doesn't operate from confidence. He operates from fear.

Where does it come from? A system that punishes risk, a culture that rewards self-protection, and a personal philosophy that confuses caution with care. Somewhere along the line, he stopped trusting his judgment — and outsourced it to defensive protocol.

He sleeps better knowing he over-tested than knowing he made a call.

What are the consequences? Care becomes bloated, expensive, and often meaningless. Aggressive cases are passed off. Decisions are delayed until they become someone else's problem. Junior doctors learn to fear — not to think. And in the end, the patient suffers from too much of what doesn't matter and too little of what does.

Dishonesty type: △ Systemically dishonest

Appears safe, but avoids responsibility. Hides indecision behind legal protocols.

Bottom line:

He won't be sued. But neither will he save.

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