Cardiology is a high-acuity, high-intensity, highly stressful discipline, where binary decisions could mean life or death. Such an environment nurtured the work-place bullying many of us encounter. This is especially true for medical residents.

As medical residents, we had to do whatever pleased the attending physician, even though, sometimes, we did not agree or based on past experiences, or thought there might have been a better approach. If we followed the recommendations or were forced to do something overnight by the Cardiology fellow, next day we had to endure the wrath of the attending physician who knew it would not have been the resident's decision, but that did not matter. This is the hierarchical structure of bullying in Medicine where blame and insults roll downhill. I was conscious of this behavior when I started my Cardiology fellowship. I always defended my residents, never asked anyone to do something unreasonable or talk to a consultant when they were not comfortable discussing that case with them. More important, I always tried to own up to my mistakes the next morning, making it clear to the attending physician that it was my decision to take a certain approach, rather than the medical resident. With the high rate of physician burn-out and even physician suicide, it is time to reflect on how we treat each other.

The fact that it takes 11 to 15 years to become an independent physician does not justify being treated poorly, just because someone is still a “trainee”. It is time to treat each other as colleagues with respect and dignity. Otherwise, our profession will keep suffering.

Anonymous.