What the TV Show ‘House’ Has to Teach about the Importance of Medicine as a Team Effort

By Andrew Holtz

last fall I got an assignment: Separate medical fact from fiction in the hit TV series “House, M.D.” Of course, the show is a drama...and the purpose is to entertain, not teach. But fans would naturally be interested in what kernels of reality, if any, were to be found in the episodes.

If you haven’t “House,” the main character, Dr. Gregory House, is an infectious disease specialist who takes the cases no one else can figure out. In other words, when he hears hoop beats, he always looks for a zebra.

Despite his diagnostic brilliance, Dr. House is far from a paragon. In fact, he’s a jerk. What’s more, chronic pain is not his specialty. Instead, chronic conditions. His patients are improbable in the extreme, almost always found, somewhere in the vast libraries of case reports available in the world. The writers didn’t have to be fluent in the medical literature, I was told, but even when you look past Dr. House’s peculiarities, hospitals are not in the medical minutiae of individual cases. Dr. House lives in a physician’s utopia of unlimited resources devoted to a single patient without distraction. He is never seriously constrained by pesky administrators or laws and regulations. He redefines ethical behavior to suit his needs, including often overruling the decisions patients make about tests and treatments. In Dr. House’s world, patient autonomy is subordinate to his ‘superior’ judgment.

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Another unreal aspect that clinicians immediately notice when watching “House” is that a small team of doctors do everything. Need a lab test? A physician on House’s team personally draws the blood, operates the centrifuge and peers through the microscope. This TV hospital doesn’t seem to have any lab techs or pathologists.

Need a scan? Two or three physicians roll the patient into the imaging room and then sit at the controls. Apparently there are no radiologists, either. Need an injection or overnight monitoring? A physician usually takes care of it. Nurses are nearly invisible.

In the final chapter of “The Medical Science of House, M.D.,” an excerpt of which is reprinted here, I set out to explain to the show’s fans and other readers that medicine is increasingly a team sport, with many players and even more rules.

Excerpt from new book:
The Medical Science of House, M.D.  
By Andrew Holtz

As Edward Vogler began his brief tenure as the Chairman of the Board of Princeton-Plainsboro Teaching Hospital, he had a question for Dr. Lisa Cuddy, Dean of Medicine and hospital administrator: “What is a Department of Diagnostic Medicine?”

“That’s Dr. House’s department,” replied Dr. Cuddy. “They deal with cases that other doctors can’t figure out.”

Vogler is perplexed by Dr. House’s idiosyncrasies and challenged by his resistance to Vogler’s efforts to run the hospital like any other business.

But even when you look past Dr. House’s peculiarities, hospitals are not like any other businesses. The authors of a textbook titled Health Care USA: Understanding its Organization and Delivery highlighted the daunting complexity of modern hospitals. Hundreds or even thousands of people, many of...