Physicians have financial incentives to improve the quality or efficiency of care that might lead some to avoid patients who are older, are chronically ill, or have more complicated problems, or to focus on benchmarked outcomes even when not in the best interests of individual patients. In contrast, fee-for-service payments might encourage physicians to order more interventions than necessary or to refer patients to laboratory, imaging, or surgical facilities in which they have a financial stake. Regardless of financial incentives, physicians should recommend available care that is in the patient's best interests—no more and no less.

■ RELATIONSHIPS WITH PHARMACEUTICAL COMPANIES

Financial relationships between physicians and industry are increasingly scrutinized. Many academic medical centers have banned drug-company gifts, including branded pens and notepads and meals to physicians, to reduce inappropriate risk of undue influence or subconscious feelings of reciprocity and to decrease possible influences on public trust or the costs of health care.

The federal Open Payments website provides public information on the payments and amounts that drug and device companies give to individual physicians by name. The challenge is to distinguish payments for scientific consulting and research contracts—which should be encouraged as consistent with professional and academic missions—from those for promotional speaking and consulting whose goal is to increase sales of company products.

■ LEARNING CLINICAL SKILLS

Medical students', residents', and physicians' interests in learning, which fosters the long-term goal of benefiting future patients, may sometimes conflict with the short-term goal of providing optimal care to current patients. When trainees are learning procedures on patients, they lack the proficiency of experienced physicians, and patients may experience inconvenience, discomfort, longer procedures, or increased risk. Increasingly, institutions are developing clinical skills laboratories for simulation-based medical education and requiring students to demonstrate proficiency before