ABSTRACT. In terms of Aristotle’s intellectual virtues, the process of clinical reasoning and the discipline of clinical medicine are often construed as techne (art), as episteme (science), or as an amalgam or composite of techne and episteme. Although dimensions of process and discipline are appropriately described in these terms, I argue that phronesis (practical reasoning) provides the most compelling paradigm, particularly of the rationality of the physician’s knowing and doing in the clinical encounter with the patient. I anchor this argument, moreover, in Pellegrino’s philosophy of medicine as a healing relationship, oriented to the end of a right and good healing action for the individual patient.

KEY WORDS: clinical reasoning, clinical medicine, rationality, phronesis, practical reasoning, epistemology, ontology, teleology

1. INTRODUCTION

How are we to understand the rationality of clinical reasoning, that process of knowing and doing, experiencing and acting, undertaken by the physician on behalf of the patient? Moreover, how are we to conceive the nature and the ends of the discipline of clinical medicine? In response to these fundamental questions, some argue that process and discipline are appropriately construed as art.1,2 Others define the discipline as a science and clinical reasoning as scientific reasoning.3,4,5,6 And still others conceive process and discipline as an amalgam of art and science.7

My aim is to address these fundamental questions about the rationality of clinical reasoning and the nature of clinical medicine by offering a philosophically compelling account, particularly of the physician’s process of knowing and doing in the clinical encounter with the patient. Working within the framework of Aristotle’s intellectual virtues,8 I argue that phronesis (practical reasoning) – rather than episteme (science), or techne (art, craft), or some putative amalgam of episteme and techne – offers a paradigm of clinical rationality. With the exception of a few thinkers,9,10 contemporary discourse has neglected the broad significance of phronesis for clinical rationality. In this essay, I argue that this intellectual virtue is not only relevant to reasoning in response to the ethical challenges inherent in the practice of clinical medicine: phronesis presents a paradigm of the rationality of the physician’s effort to resolve the epistemological and onto-
logical problem inherent in every clinical encounter, the problem of how to apply general, abstract knowledge to the needs of this individual patient.

Moreover, convinced that it is critical to secure this argument about the process in an understanding of the discipline, I contend that Pellegrino’s philosophy of medicine as a healing relationship offers the most cogent definition of this professional discipline, an essential definition responsive to the Socratic ti esti question. His abiding concern for this question about medicine’s nature and ends – about what medicine is – reveals the roots of his thinking in the classical tradition inaugurated by Socrates and Plato and brought to its most complete expression, for Pellegrino, in the works of Aristotle and St. Thomas. In articulating his philosophy of medicine, Pellegrino illuminates the conditions, the problems, and the imperatives of process and discipline in ways that are profoundly resonant with the themes of the classical tradition, but more importantly, with Aristotle’s description of the epistemology, ontology, and teleology of the moral situation, the situation demanding the exercise of phronesis by the agent who wishes to achieve the humanly possible good in that situation.

I have alluded to the meaning, herein, of a “philosophically compelling account” of clinical rationality: I mean an account positioned at the “intersection,” so to speak, of the epistemology, ontology, and teleology of process (and discipline). Pellegrino’s philosophy of medicine explicitly addresses the teleology of clinical reasoning and clinical medicine; it is responsive, that is, to that previously cited fundamental question about the nature and ends of process and discipline. By addressing the epistemology of clinical reasoning, I intend to delineate the roles of knowledge, reason, and experience in the process; by addressing the ontology of the process, I intend to describe the “objects” of the physician’s knowing and doing in terms of several, interrelated phenomena of human embodiment.

I will develop my account by, first, explicating Pellegrino’s philosophy of medicine. My principal references will be to several of his essays, \(^\text{11,12,13,14,15,16}\) although I will also refer to A Philosophical Basis of Medical Practice: Toward a Philosophy and Ethic of the Healing Professions \(^\text{17}\) (hereinafter, A Philosophical Basis) and The Virtues in Medical Practice \(^\text{18}\), two works co-authored by Pellegrino and Thomasma. With Pellegrino’s essential, teleological definition of process and discipline in mind, I will then turn to the ontology and to the epistemology of clinical reasoning. Finally, I will establish the centrality of phronesis to a philosophically compelling account of clinical rationality.