

Robert Potter, MD, PhD

Some people never really retire. They just keep moving to the next challenge.



Such is the case with Dr. Robert Potter. He spent ten years at the Center for Practical Bioethics advancing ethics in the medical profession. That was after receiving a doctorate in religion and psychology with an emphasis in ethics from the University of Chicago Divinity School. And that was after retiring from a 30-year internal medicine and geriatrics practice in Kansas City, Kansas.

Today, Dr. Potter is Director of the Project on Professionalism at the Center for Ethics in Healthcare at Oregon Health Sciences University. “This position allows me to continue what I always wanted to do---raise the ethical excellence of physicians,” Dr. Potter says. “I am now remembering so much of what the Center for Practical Bioethics taught me in the formative past.”

A modest statement, to be sure, considering Dr. Potter’s significant contributions to the Center for Practical Bioethics. Those contributions began in the early 1990’s as Dr. Potter observed the growing influence of the Center through the work of Myra Christopher and Dr. Bill Bartholome. “The Center was starting the discussion on medical ethics in a very important way, certainly raising the bar on ethics and professionalism,” Dr. Potter says.

Dr. Potter believes the Center practices “bipolar bioethics,” allowing for individuals and organizations with disparate viewpoints to find a safe place to identify common ground. That capacity, Dr. Potter says, created a national presence for the Center and its work.

“Our project with the Robert Wood Johnson Foundation (Community State Partnerships to Improve End-of-Life Care) really placed the Center in the national spotlight,” he says. “Kansas City became a practical lab to try things before going national. Bioethics was not just an abstract concept any more.”

As for his future as a Fellow of the Center for Practical Bioethics, Dr. Potter sees much work to be done on the social justice issue of the day – providing medical care for all at an affordable price. “It’s a compelling call that I sense is being heard by my medical students in Oregon,” he says. “If we can’t deal with that, then bioethics ability to guide medicine is greatly diminished.”