

Leader’s Guide

Episode 26

Wise As Serpents, Innocent As Doves

Summary

When Jesus sent the disciples out to proclaim the kingdom of heaven, He instructed them to be “wise as serpents and innocent as doves” (Matthew 10:16b, ESV). Like the disciples, we in healthcare also at times face opposition in seeking to communicate spiritually with our patients and colleagues. How can we best apply this admonition from Jesus in our calling as healthcare professionals?

Speaker

Dr. Brick Lantz graduated from Stanford University with a degree in human biology. In 1981, he followed that with medical school at the University of Oklahoma and orthopedic residency at the University of Arkansas for Medical Sciences. After residency, Dr. Lantz pursued two sports medicine fellowships: the first at the Orthopedic & Fracture Clinic with Slocum Center for orthopedics and sports medicine in 1989, and a second at the Australia Institute of Musculoskeletal Research where he trained under one of the world's most foremost experts, Drs. Merv Cross and Leo Pinzceski. Dr. Lantz has been a surgeon at the Slocum Center for Orthopedics and Sports Medicine since 1990 and is currently a senior partner there. He has been the Board President of the Slocum Research & Education Foundation for more than 20 years, whose mission is to advance musculoskeletal care across the lifespan through research, education and collaboration. Dr. Lantz is a dedicated humanitarian, coordinating or participating in trips to disaster zones and impoverished regions internationally to offer free surgical orthopedic care to those most in need on nearly every continent. Dr. Lantz may be reached at BrickLantz@comcast.net.

Discussion Questions

1. **What from this video inspired, edified or challenged you?**
2. **As we seek to represent Christ and communicate His love to our patients and others, is conflict inevitable? Why or why not?**

The gospel, rightly understood, is inherently offensive to the self-righteous human heart (Romans 3:10-18, 1 Corinthians 1:18). Therefore, the Good News of salvation in Jesus Christ will not seem like good news to the person who either denies God or who seeks to earn His favor through their own moral goodness. So, although we are called to speak the truth in love (Ephesians 4:15), the truth of the gospel will not come across as loving until people recognize their need for a Savior. This enmity between unbelievers and God (Genesis 3:15) will, at least to some extent, also show up as enmity between unbelievers and those who belong to God, and the potential for some sort of conflict is almost inevitable.

That having been said, Christians can minimize the potential conflict with unbelievers by seeking to love them in response to the redeeming love of Christ (1 John 4:7,19). Our love for others is not to be based on how “lovely” they are, but on the love God has shown us in Jesus Christ. We are to seek to comply with Paul’s words in Romans 12:18, “If possible, so far as it depends on you, be at peace with all people” (NASB).

1. **Early in this episode, Dr. Lantz confesses, “When opposed, my competitive nature is to win.”**
	1. **What is at the heart of a desire to “win” a discussion with a non-Christian?**

Our desire to see someone come to faith in Christ can tragically turn into a prideful effort to show them that what we believe is intellectually superior to the views of the unbeliever. At times, we can even fool ourselves into thinking we are doing the work of an evangelist by showing where non-Christian thought falls short of God’s truth, when in actuality our motivation might be more self-centered than gospel-centered.

* 1. **How can we present gospel truth without appearing prideful or insensitive?**

It is the gospel itself that shows us how to communicate the gospel to others. Jesus called us to humility, and He also showed the way (Philippians 2:3-11). When our message is saturated with true concern for the other’s well-being, and when we are transparent about our weaknesses, those with whom we interact will be challenged to contemplate the reason for the hope that is in us (1 Peter 3:15).

1. **In Matthew 5:44, Jesus tells us to pray for our enemies. In Romans 12:14, the apostle Paul exhorts us to “…bless those who persecute you…” (NASB). What are some possible results of our prayers for those who are not yet walking with Christ?**

Prayer can, by God’s grace, soften the hearts of those not yet walking with Christ. In addition, the Lord can use our prayers to give us a more Christ-centered view of the situation, enabling us to seek God’s purposes rather than just our own comfort. We have been blessed to be a blessing to others, and we don’t deserve it any more than they do.

1. **Dr. Lantz states his need to “…analyze (my) heart before responding in a negative manner.” Jeremiah describes our hearts as desperate and deceitfully wicked (Jeremiah 17:9), and Solomon calls us to “Guard your heart with all diligence, for from it flows the springs of life” (Proverbs 4:23, BSB). What are some practical ways we can guard our hearts?**

Regular meditation on the Scriptures, as well as Scripture memorization, can hide God’s Word in our hearts, which can help defend us against sin (Psalm 119:11). Also, when we recognize sin in our lives, and its negative consequences, we should be quick to repent (Psalm 32, Psalm 51), and thereby see our joy in Christ restored. In addition, regular interaction with others who walk with Jesus can help to create built-in accountability (Hebrews 10:25).

1. **Dr. Lantz states, “Forgiveness is so important for our relationships and for our testimony.”**
	1. **If we refuse to forgive someone for something they have said or done to us, how might this affect our attitude toward them?**

Failure to forgive can result in bitterness and an air of superiority toward the other person, and it can also create anxiety when we are in their presence.

* 1. **How does our willingness to forgive others affect our gospel testimony?**

When non-believers see that we are not vengeful or bitter toward those who wrong us, this can be a sign to them that the gospel is real and that Jesus Christ really has brought about our forgiveness, thereby freeing us to extend forgiveness to others. If they comment on our lack of bitterness toward others, this can be a wonderful opportunity to share our experience of forgiveness.

* 1. **What is the most compelling reason why we should seek to extend forgiveness towards others? (See Matthew 6:12.)**

Contrary to what is claimed in many so-called “Christian” self-help books, the primary reason to forgive others is NOT for personally therapeutic reasons. While it is true that there are great blessings in obeying God’s call to forgive others, our willingness to forgive others should not come from a self-serving motive. Rather, the purest reason to forgive others is because this is what God has done for us in Jesus Christ (2 Corinthians 5:14).

1. **“Our mission field is our medical practice. Our medical practice is our mission field.”**

**Agree or disagree? Why?**

If Jesus Christ has reconciled us to our Creator, then the overwhelming glory of belonging to God for all eternity should motivate us to share the Good News with others (2 Corinthians 5:17-18). Since a large portion of our earthly lives will be spent interacting with patients, it would seem appropriate for the love of Christ to inspire us toward seeking opportunities to share this love within our chosen profession. As emphasized in numerous episodes of *Faith Prescription*s, we are to do this with sensitivity, respect and permission. However, a failure to recognize the tremendous gospel opportunity the Lord has given us in healthcare is the equivalent of hiding our lamp under a bushel basket (Matthew 5:14-16).

1. **Dr. Cathie Scarbrough believes that most of us “tend to be more doves than serpents.” (See Matthew 10:16.)**
	1. **What do you think she means by this?**

Our calling to be gentle as doves is, among other things, a charge to show compassion to those we hope to influence for Christ. The calling to be wise as serpents infers some sort of interaction with others who hold a different perspective. With respect to communicating the Good News to others, wisdom is necessary as we cite the unique elements of the Christian faith and challenge them to consider its veracity. So, perhaps Dr. Scarbrough is saying we are better at “being nice” than we are at engaging non-Christians in a meaningful way.

* 1. **If this is true in your approach to spiritual care, why might this be, and what can be done to attain better balance between the two?**

It is much easier to adopt an agenda of merely treating others kindly and respectfully, thinking we will wait for just the right moment to challenge them with some of the hard truths of the Christian faith. Although we don’t want to steamroll them with Bible verses they might not yet be in a position to fully appreciate, we should also not be afraid to communicate the beauty of the gospel in terms that won’t fully resonate with them until the Holy Spirit gives them understanding. We are called to be salt and light (Matthew 5:13-14), not merely “nice.”

1. **Bob Mason compares how a healthcare professional might address their patient’s physiological needs with how they might approach a patient’s spiritual needs. What are some ways you could address a patient’s spiritual state regarding:**
2. **Diagnosis –** All of our interaction with patients can be a useful tool in determining where they are in their relationship with the Lord, but a particularly helpful opportunity occurs during the health history portion of an exam. In addition to addressing physiologic issues, the healthcare professionals can also ask questions that relate to the patient’s spiritual state (see *Faith Prescriptions* episode 4 by Dr. Andrew Wai).
3. **Informed consent –** Before praying with or for a patient, it is good for the healthcare professional to ask permission. In addition, seeking permission is a good idea for any spiritual reference that goes beyond a simple faith flag.
4. **Proposed “treatment” –** The ultimate “treatment” we desire for our patients is for them to find wholeness and fulfillment in a relationship with Jesus Christ. We may not be able to get there on the first or second appointment, but when the Holy Spirit blesses our faithful efforts, we will have an opportunity to see hearts changed.
5. **Dr. George Gonzalez, when asked to comply with a patient request for treatment outside of biblical norms, might initially refer to empirical studies demonstrating the potential harm of the requested treatment.**
	1. **Dr. Gonzalez refers to himself as a “professional healthcare advocate.” What does this phrase communicate above and beyond being a “healthcare provider?”**

A healthcare professional’s calling is far more than to merely “provide” whatever their patient might desire. Rather, their knowledge and conscience are to work together in a way that treats the patient the way they would like to be treated. This does not preclude the patient’s right to seek a desired course of treatment, but it recognizes the fact that the healthcare professional is in a unique position to advocate for whatever is in the patient’s best interests, as well as to advocate against treatment that will likely do harm to the patient.

* 1. **How could this approach open the way for future discussions that move from empirical truth to sharing biblical truth with the patient?**

If a patient perceives compassion in their healthcare professional’s care for them, even in the midst of a specific request being denied, this can soften the blow and cause the patient to rethink the basis for their desires. As this relationship develops and the patient’s trust grows, the love of Christ can be communicated in areas of life in which no empirical studies are possible. We cannot empirically answer the deepest questions of the human heart—why we are here, where we come from, what makes life meaningful, what happens after death, etc. Therefore, we seek to treat the whole person (physical and spiritual) with the whole counsel of God (general and special revelation).

1. **What is one take-home item from today’s session that you hope to implement?**

Additional Resources

1. *Gray Matter* by David Levy, MD
2. *God in the ICU: The Inspirational Biography of a Praying Doctor* by Dave Walker, MD
3. *Medicine, Religion and Health: Where Science and Spirituality Meet* by Harold Koenig, MD