

LIFE AND DEATH IN *THE PITT*

How Accurate, Authentic Stories Move
Audiences to Action

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ABOUT THE NORMAN LEAR CENTER:

The Norman Lear Center is a nonpartisan research and public policy center that studies the social, political, economic, and cultural impact of entertainment. The Lear Center helps bridge the gap between the entertainment industry and academia, and between them and the public. Through its scholarship, research and partnerships; its events, publications and outreach to the creative community; and its role in formulating the field of entertainment studies, the Norman Lear Center works to be at the forefront of discussion and practice – and to illuminate and repair the world.

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EXECUTIVE SUMMARY

Entertainment has a profound impact on audiences' knowledge, attitudes, and behaviors. For 25 years, the University of Southern California's **Norman Lear Center** has both studied this impact and shaped it.

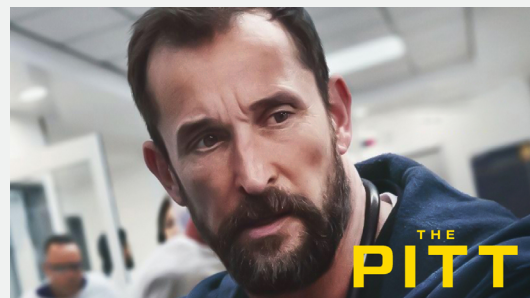
The Center's **HOLLYWOOD, HEALTH & SOCIETY** (HH&S) program serves as a free resource to the entertainment industry, connecting creatives with experts to facilitate more accurate and nuanced storylines.

Our **MEDIA IMPACT PROJECT** (MIP) conducts research on the content, audiences, and impact of media and entertainment, including storylines informed by HH&S and other partners.

We work on a wide range of topics, including health equity, mental health, climate and sustainability, technology, and representations of historically-excluded communities. In late 2023, HH&S began working with a new streaming series from John Wells and Noah Wyle, with an implicit goal of shedding light on the systemic challenges in the US health care system.

Given the hype around *The Pitt*, the Lear Center's MIP team set out to investigate the real-life impact of the show on both **medical professionals** and **broader audiences**.

1. How did medical professionals respond to *The Pitt*? How did they perceive its accuracy and potential impact on health care professionals, patients, and society?
2. Did watching *The Pitt*'s storylines on organ donation and end-of-life decisions affect relevant attitudes, intentions to make plans or discuss preferences with loved ones, or actions, such as seeking or sharing information about these topics?



Premiering in January 2025, *The Pitt* is set in a Pittsburgh emergency room, with each episode representing an hour in a single shift. Noah Wyle stars as senior attending physician Dr. Michael Rabinovitch ("Dr. Robby"), who struggles with trauma and burnout. He leads a team of residents, nurses, and medical students in balancing empathy with the structural pressures of the emergency context.

HH&S provided expert consultation on all 15 episodes of *The Pitt*'s first season, on topics such as racial disparities, caregiver stress, mental health, organ donation, and end-of-life decisions. They continue to consult on season 2, currently in production.

The series, which consistently drew audiences of 10 million US viewers in its first season, has been praised in the press for its realism, authenticity, and potential power to move audiences. It received three 2025 Primetime Emmy Awards for Outstanding Drama Series, Lead Actor (Wyle), and Supporting Actress (Katherine LaNasa), as well as an HH&S Norman Lear Award in October 2025.

3. Did the impact of these storylines differ for Black and Latino viewers, who are underrepresented as donors and recipients?

To address these questions, we conducted:

25 semi-structured interviews with medical professionals, of whom 23 had direct ER experience.

Online survey of 1409 HBO Max viewers, of whom 709 saw at least three episodes of *The Pitt* and 324 saw all fifteen.

Our findings show that accurate, expert-informed health stories built around authentic characters not only validate the lived experiences of medical providers but also have the power to shift attitudes and move audiences to action.

HOW DID MEDICAL PROFESSIONALS RESPOND?

- Healthcare professionals reported *The Pitt* made them **feel validated or “seen.”** Some reported finding it cathartic, giving them a sense of pride in their choice of profession.
- Nearly three in four found *The Pitt*’s emphasis on **systemic healthcare challenges**—like overcrowding, lack of psychiatric beds, chronic underfunding, and pressures from hospital administration—to be especially true to life, often reflecting their own institutional challenges. Some interviewees noted the show’s portrayal of the ER as a “catch-all” for systemic failures, or pointed to instances when it connected health outcomes to race, insurance, or zip code.
- By and large, interviewees found the characters **authentic and relatable**, including Dr. Robby’s emotional breakdown late in the season. They expressed hope that the show would raise awareness of the **“hidden toll” on providers**. Several described parallels between their own professional experiences and storylines, especially **the organ donation storyline**.
- They believe medical shows have a responsibility to avoid misinformation, and several mentioned the show’s value as a teaching tool. Two incorporated scenes into teaching residents about wellness, grief, and resilience. Others hoped the show’s **end-of-life storyline** would spark real-world conversations about these decisions.
- Interviewees were hopeful that *The Pitt* could **influence public opinion**, but somewhat skeptical about its ability to bring about reform in the profit-driven US healthcare system.

HOW DID BROADER AUDIENCES RESPOND?

- **About nine in ten viewers** “somewhat” or “strongly” agreed that the show:
 - ▶ Does a good job of educating people while entertaining them
 - ▶ Makes the stress health care providers face understandable and relatable
 - ▶ Reveals how understaffing of medical professionals can lead to negative patient outcomes

- Viewers were **highly transported into the narrative of the show**, and a majority reported feeling sadness and empathy in response to key storylines. Around a third of viewers said the storylines made them feel hopeful.

IMPACT OF ORGAN DONATION AND END-OF-LIFE STORYLINES

We conducted a separate set of analyses for each storyline, categorizing survey respondents into three groups based on their level of exposure to the storyline, and compared their attitudes, intentions, and actions related to the topic (organ donation or end-of-life planning).

	
Organ Donation (OD) Storyline Episodes 2-8	End-of-Life (EOL) Storyline Episodes 1-4
Nineteen-year-old Nick Bradley is declared brain dead following a fentanyl overdose. His parents are initially resistant, but ultimately decide to donate his organs.	An older man is brought in with pneumonia, sepsis, and a do-not-intubate order. His adult children request medical intervention against his wishes. After watching him suffer, they discontinue life support and let him die peacefully.
OD Storyline Conclusion Viewers (466 saw <i>at least</i> episode 8) OD Storyline Partial Viewers (243 saw <i>any</i> of episodes 2-7, but not 8) OD Storyline Non-Viewers (713 saw <i>none</i> of episodes 2-8)	EOL Storyline Conclusion Viewers (561 saw <i>at least</i> episode 4) EOL Storyline Partial Viewers (120 saw <i>any</i> of episodes 1-3, but not 4) EOL Storyline Non-Viewers (728 saw <i>none</i> of episodes 1-4)

- Compared to non-viewers, those who saw either storyline had **more positive attitudes and greater intentions to make plans or discuss preferences with loved ones**. This was particularly true among non-White (and especially Black) audiences. Viewers who were transported into the narrative of the show had more positive outcomes, particularly attitudes toward organ donation and end-of-life planning.

- **Those who saw either storyline were consistently two to three times more likely to have sought or shared information** about the topics of interest than non-viewers.
 - ▶ 26.9% of OD viewers sought information about organ donation
 - ▶ 17.2% of OD viewers shared about organ donation on social media
 - ▶ 38.8% of EOL viewers sought information about end-of-life planning
 - ▶ 15.3% of EOL viewers shared information about end-of-life planning
- **Surprisingly, viewers who saw the conclusion of either storyline were *less likely* to have taken these actions than those who saw only part.** Identification with key characters and emotional responses to the storylines appear to explain these unanticipated findings.
 - ▶ Viewers who saw the conclusion of either storyline were more likely to feel sadness or empathy, which were in turn associated with *lower* likelihood of seeking or sharing information about organ donation or end-of-life planning.
 - ▶ At the same time, viewers who saw only part of the storyline were more likely to identify with a key character or experience hope, which were both associated with greater action-taking.

RECOMMENDATIONS

For Storytellers & Decision Makers

- **Prioritize** accuracy by engaging expert consultants in the process of developing health stories, in traditional entertainment and beyond.
- **Embrace** authenticity and infuse broken systems into character-driven stories. At the same time, emphasize hope and opportunities for audiences to take action.
- **Attract** and engage audiences by supporting and greenlighting content that addresses systemic challenges.

For Health Providers & Communicators

- **Share** your clinical expertise and lived experience with storytellers to promote more accurate, authentic, and impactful stories.
- **Use** *The Pitt* as an accessible entrypoint for discussions of serious topics with patients, family members, students, and the broader public.

For Advocates & Funders

- **Highlight** *The Pitt* as a case study illustrating a successful approach to entertainment-based narrative change.
- **Support** efforts to promote accuracy in entertainment. A modest investment can infuse dozens of storylines—each reaching millions of viewers—with expert insights.
- **Fund** research to gain a deeper understanding of how audiences engage with media narratives.



LIFE AND DEATH IN THE PITT

INTRODUCTION

Entertainment media informs how audiences see the world. Decades of research show that entertainment can shape audiences' knowledge, attitudes, and behaviors.¹ This impact is particularly well-documented in public health, as audience members can learn about specific diseases, preventative behaviors, and life-saving treatments from popular TV and film.²

In recognition of the immense power of entertainment, the **Norman Lear Center** was established at the University of Southern California in 2000. Our mission is both **studying** and **leveraging** media narratives—particularly in the context of scripted TV and film—to inform audiences, inspire behavior change, and shape culture. We work on a wide range of topics from mental health to climate change to representation of historically-excluded communities.

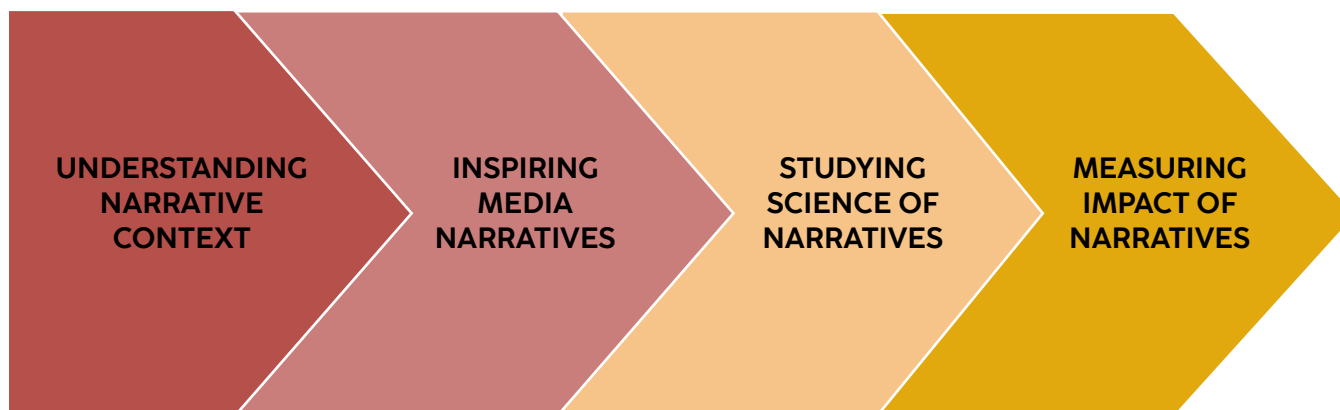
The Lear Center's **Hollywood, Health & Society** (HH&S) program connects entertainment content creators with free resources and access to experts to enable more accurate, authentic, and nuanced storylines addressing health, safety, and security issues. Partnered with the Writers Guild of America, West, HH&S has held nearly 5,000 consultations with hundreds of shows reaching millions across 60 network, cable, and streaming channels.

Alongside HH&S' outreach to entertainment content creators, the Center's research team at the **Media Impact Project** (MIP) studies how audiences engage with media and entertainment, including the narratives they consume, the values and motives that drive their media choices, and the impact of these narratives on their knowledge, attitudes, and behavior. Central to our approach is translating findings into clear, accessible insights to inform the strategies of HH&S, as well as our external funders and partners.

1 Korobkova, K., Weinstein, D., Felt, L., Rosenthal, E.L., & Blakley, J. (2023). Lights, camera, impact: 20 Years of Research on the Power of Entertainment to Support Narrative Change. USC Norman Lear Center Media Impact Project. <https://learcenter.s3.us-west-1.amazonaws.com/Norman-LearCenter-Narrative-Change-Research-Review.pdf>

2 Hoffman, B. L., Shensa, A., Wessel, C., Hoffman, R., & Primack, B. A. (2017). Exposure to fictional medical television and health: A systematic review. *Health Education Research*, 32(2), 107–123. <https://doi.org/10.1093/her/cyx034>.
Shen, F., & Han, J. (2014). Effectiveness of entertainment education in communicating health information: a systematic review. *Asian Journal of Communication*, 24(6), 605–616. <https://doi.org/10.1080/01292986.2014.927895>

Figure 1.
Norman Lear Center Theory of Change



Health Equity Narratives

Beginning in 2020, the Lear Center stepped up its research and outreach efforts around health equity, with an emphasis on social determinants of health: the idea that health outcomes are influenced by a web of factors including systemic racism, economic disparities, and stigma.

Research Highlights

During the height of the COVID-19 pandemic, we studied how existing media narratives support or challenge individualistic notions of health, as well as barriers to and opportunities for more systemic stories in entertainment.³

- We found entertainment typically reinforces the notion that health outcomes are mainly attributable to individual choices. There is little attention paid to the social determinants that can create or amplify health disparities.
- Even when these stories highlight structural barriers, such as economic challenges, they tend to center individualistic solutions. This is particularly evident in the trope of the “hero doctor” who risks her career to provide a patient with needed care.
- In a message-testing experiment, we found that narratives were most likely to promote support for equity-based policies when they also described systemic solutions. On the contrary, narratives with individual solutions backfired, reducing support for systemic change compared to no solution at all.⁴

Industry Outreach Highlights

Drawing upon early insights from this research, HH&S increased its outreach to the entertainment industry to facilitate stories highlighting health inequities, including systemic racism.

³ <https://www.mediaimpactproject.org/healthequity.html>

⁴ Rosenthal, E. (2021). Stories Matter: How new entertainment narratives about health can influence mindsets and policy. USC Norman Lear Center Media Impact Project. https://learcenter.s3.us-west-1.amazonaws.com/storiesmatter_healthequity_march2021.pdf

Figure 2.
‘Is Systemic Racism Still a Thing?’



- To highlight and lift up BIPOC creatives, HH&S has held five “Do the Write Thing” mixers.
- HH&S created an original video—“Is Systemic Racism Still a Thing?”—starring actors Jason George (*Grey’s Anatomy*, *Station 19*) and Todd Grinnell (*One Day at a Time*, *With Love*).⁵ The video was featured in *Deadline*, shown at the Sentinel Awards,⁶ and shared online.

ed to health equity or systemic racism (as of October 2025). These consultations have led to storylines on *Grey’s Anatomy*, *Watson*, *Brilliant Minds*, *Fire Country*, *Days of Our Lives*, *Chicago Med*, *Shrinking* and more, each reaching several million US viewers.⁷

- In December 2023, HH&S began working with *The Pitt*, a new medical drama on the streaming platform HBO Max. We provided consultation on every episode and facilitated briefings for the entire writers’ room, including one on racial disparities in health.

The Pitt



Created by R. Scott Gemmill, Noah Wyle, and John Wells, *The Pitt* is set entirely in the emergency department of the fictional University of Pittsburgh Medical Center, known as “the Pitt.” The season’s 15 episodes are structured in “real time,” such that each episode represents one hour of a single shift. Wyle stars as senior attending physician Dr. Michael Rabinovitch (Dr. Robby), who is supported by a vast team of residents, nurses, medical students, and other attendings.

On the four-year anniversary of the COVID death of his friend and mentor, Robby suffers post-traumatic flashbacks, which increasingly interfere with his performance. Still, he leads his team in learning to balance care and empathy for patients and their families with the structural pressures of the emergency context.

The Pitt’s first season ran from January to April 2025 and it was quickly renewed for a second season, premiering in January 2026. The show proved very popular, with the premiere reaching over 16 million US viewers and the first 14 episodes averaging 10 million US viewers each.⁸

5 The Norman Lear Center. (2024, September 12). Is systemic racism still a thing? [Video]. YouTube. https://www.youtube.com/watch?v=OT-veaGv_C_A

6 The Sentinel Awards was renamed The Norman Lear Awards in 2025.

7 Most of these shows are also streamed and shown abroad, thus increasing their viewership by millions.

8 Hailu, S. (2025, April 11). “The Pitt” Hits Season Average of 10 Million Viewers Since Premiere. *Variety*. <https://web.archive.org/web/20250924044734/https://variety.com/2025/tv/news/the-pitt-ratings-viewers-1236367516/>

HH&S Consultation Role

HH&S connected *The Pitt*'s writing team with experts and individuals with lived-experience, prioritizing those with connections to Pittsburgh, since the local context was important to the show. Among others, these included:

- Dr. Sylvia Owusu-Ansah, associate vice chair of diversity, equity, and inclusion at University of Pittsburgh's Department of Pediatrics, to talk about racial disparities in health;
- Dr. Sheila Roth, a licensed clinical social worker and adjunct professor at the University of Pittsburgh, to talk about hospital show work and services available for caregivers;
- Dr. Ira Byock, a leading palliative care physician, to talk about care through the end of life, especially end-of-life directives; and
- A transplant coordinator from *Donate Life* to talk about organ donation.

Table 1.

Episodes with HH&S-informed storylines⁹

STORYLINE/THEME	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Social workers															
Mental health															
End of life/ advance directives															
Overdose/ organ donation															
Sickle cell disease/ medical racism															
Neurodivergence															
Teen medical abortion															
Gender disparities in healthcare															
Caregiving and stress															
Substance use/abuse															
Emergency management/ gun violence															

⁹ Storyline consultations, as reported by HH&S. HH&S also consulted on several characters, which are not reflected here.

While several of these topics appeared in more than one discrete storyline (e.g., mental health, neurodivergence, social workers), others were multiple-episode story arcs, including on end-of-life decisions and organ donation.

Figure 3.
Storyline Synopses

End-of-Life Storyline (Episodes 1-4)



An older man is brought in suffering from pneumonia and sepsis. He has an advance directive with a do-not-intubate order. His adult son, Jereme, wants to honor his wishes, while daughter Helen, experiencing guilt over their relationship, prefers to continue medical intervention to delay his death.

Initially, Jereme and Helen have their father intubated against his wishes, causing him visible suffering. Following an exercise with Dr. Robby on saying goodbye to a loved one, Jereme and Helen jointly decide to discontinue life support and allow their father to die peacefully.

Organ Donation Storyline (Episodes 2-8)



19-year-old Nick Bradley is brought in unconscious and in respiratory distress, having overdosed on fentanyl. A test confirms that no oxygen is reaching Nick's brain stem; he is brain dead and will not wake up.

Nick had registered to donate his organs, but his parents (particularly his mother, Lily) are having difficulty accepting his death. After conferring with their pastor, they ultimately decide to donate his organs. ER personnel and friends line up for a tearful "honor walk," recognizing their selfless and life-saving decision.

Critical Reception

The show has been praised in the press for its realism, authenticity, and accuracy, attributed in large part to the support it has received from medical expert consultants. Media coverage has also highlighted the show's ability to reflect and illuminate persistent systemic issues, from hospital overcrowding to nursing shortages to distrust in the system, told through the lens of a fast-paced ER setting.¹⁰ Medical professionals quoted in these pieces talk about feeling "seen," as they feel their working lives are accurately captured. Supriya Ganesh—who plays Dr.

¹⁰ Kolata, G. (2025, April 10). "The Pitt" Captures the Real Overcrowding Crisis in E.R.s. *The New York Times*. <https://web.archive.org/web/20250618003526/https://www.nytimes.com/2025/04/10/health/the-pitt-max-crowded-emergency-rooms.html>
Jurgensen, J. (2025, February 13). Doctors Agree: Finally, "The Pitt" Is a Medical Drama That Gets It Right. *Wall Street Journal*. <https://web.archive.org/web/20250917102709/https://www.wsj.com/arts-culture/television/the-pitt-max-er-medical-drama-show-noah-wyle-doctors-8bd44c31>

Samira Mohan, and previously considered medical school—told the *New York Times*, “I’m hoping that this allows anyone seeing this to have more empathy for health care workers.”¹¹

In an interview with the *Pittsburgh Post-Gazette*, local doctor Owusa-Ansah—who also consulted on the show through HH&S—noted, “Not only does the realism of the show make for a more engaging premise, but the depiction of real-life situations also has the propensity to save lives.”¹²

In September 2025, *The Pitt* received three Primetime Emmy Awards: Outstanding Drama Series, Lead Actor in a Drama Series (Wyle), and Supporting Actress in a Drama Series (Katherine LaNasa, who plays nurse Dana Evans). A month later, it was honored by HH&S with a Norman Lear Award, in recognition of its commitment to both accuracy and exemplary storytelling throughout the entire first season.

Research Overview

Executive Producer Dr. Joe Sachs relayed a story that a physician viewer had posted online:¹³

“ I was working a night shift in the ER at two in the morning and a 92-year-old woman with a heart attack came in and was not doing well. The family said, You know, doctor, you can stop right there. We’ve been watching *The Pitt* and we’ve seen how much suffering can be caused by resuscitation efforts when there’s no meaningful hope, and we would just like to have comfort care.

Anecdotes such as this one, combined with *The Pitt*’s reach of more than 10 million viewers, hint at its power to raise awareness and even inspire action on a cultural level. We set out to rigorously measure the show’s impact on audiences—both medical professionals and viewers more broadly—with a focus on the **end-of-life** and **organ donation** story arcs. To do so, we used qualitative and quantitative approaches:

- **25 semi-structured interviews** with medical professionals, including 23 with direct emergency room experience; and
- An **online survey of 1409 HBO Max viewers**, of whom **709 saw at least three episodes of *The Pitt***. This included an oversample of Black and Latino participants.

11 Roy, J. (2025, April 11). What’s So Great About ‘The Pitt’? *The New York Times*. <https://web.archive.org/web/20250915043717/https://www.nytimes.com/2025/04/11/style/the-pitt-fandom-social-media.html>

12 Long, S. (2025, February 20). “It’s very real,” says the Pittsburgh ER doctor who consulted on “The Pitt” TV show. *Pittsburgh Post-Gazette*. <https://web.archive.org/web/20250510033503/https://www.post-gazette.com/ae/tv-radio/2025/02/20/the-pitt-hbo-max-emergency-room-medical-drama/stories/202502030076>

13 Schmidt, I. (2025, September 8). How “The Pitt” Gets Death Right. *The Hollywood Reporter*. <https://web.archive.org/web/20251013044631/https://www.hollywoodreporter.com/tv/tv-features/how-the-pitt-death-accuracy-1236365261/>

End-of-Life

In collaboration with the nonprofit organization End Well, our research team recently conducted a study of the impact of end-of-life storylines on *A Million Little Things* and *The Gentle Art of Swedish Death Cleaning*, finding that viewers of either storyline were more likely to talk with loved ones about their care preferences.¹⁴ This study was an experiment, meaning we randomly assigned non-viewers of the shows to watch brief clips from either an end-of-life or a control storyline. *The Pitt* allowed us to build on this research by exploring how *actual* viewers would respond to a multi-episode end-of-life story arc, given time to become invested in the narrative of the show and develop bonds with the key characters.

Organ Donation

Black and Latino communities face a greater need for organ donation but remain underrepresented as donors. Black Americans make up nearly 28% of those on a transplant waiting list, nearly double their proportion in the national population,¹⁵ but only 13% of organ donors.¹⁶ Latinos account for nearly 23% of those waiting for a transplant, closer to their proportion in the national population,¹⁷ but are underrepresented among donors at 15%.¹⁸ While race itself is not a criterion for matching with a donor in organ transplantation, lack of diversity among organ donors contributes to longer wait times and a higher risk of failure in minority populations.¹⁹ Although *The Pitt*'s organ donation storyline focused on a White family, it nonetheless presented an opportunity to measure its impact on diverse audiences.

14 Ungerleider, S. & Wheeler, T. (2025). Changing the Channel on Death: How Television Can Lead the End-of-Life Revolution. *End Well*. <https://endwellproject.org/research/>

15 Those who self-identify as Black make up 14.4% of the country's population. Passel, G. M. & J. S. (2025, January 23). Facts About the U.S. Black Population. *Pew Research Center*. <https://www.pewresearch.org/race-and-ethnicity/fact-sheet/facts-about-the-us-black-population/>

16 U.S. Department of Health & Human Services | Office of Minority Health. (2025, February). Organ Transplants and Black/African Americans. *Organ Transplants*. Retrieved September 24, 2025, from <https://web.archive.org/web/20250328213059/https://minorityhealth.hhs.gov/organ-transplants-and-blackafrican-americans>

17 Hispanic/Latinos account for 19.5% of the U.S. population. United States Census Bureau. (2024, April). Hispanic Heritage Month: 2024. *Census.gov*. Retrieved September 24, 2025, from <https://web.archive.org/web/20250915132659/https://www.census.gov/newsroom/facts-for-features/2024/hispanic-heritage-month.html>

18 U.S. Department of Human Services | Office of Minority Health. (2025, February). Retrieved September 24, 2025, from <https://web.archive.org/web/20250901054010/https://minorityhealth.hhs.gov/organ-transplants-and-hispaniclatino-americans>

19 Luckstein, K. (2025, August 21). Expert alert: 5 reasons more diverse organ donors are needed. *Mayo Clinic News Network*. <https://web.archive.org/web/20250824015644/https://newsnetwork.mayoclinic.org/discussion/expert-alert-5-reasons-more-diverse-organ-donors-are-needed/>

HOW DID MEDICAL PROFESSIONALS RESPOND TO *THE PITT*?



To understand medical professionals' perceptions of *The Pitt*, including its potential impact, we conducted a series of interviews geared toward the following questions:

1. What are medical professionals' perceptions of the TV show *The Pitt*? What aspects of the show (plotlines, characters, setting) were perceived as relevant, accurate, realistic, and resonant – or not?
2. How do medical professionals perceive the impact of *The Pitt* on themselves, the medical profession, and their patients?

What We Did

We recruited 25 medical and healthcare professionals who watched *The Pitt* to participate in 45-minute interviews. Participants were recruited using the snowball sampling method. An initial list included a set of potential participants from HH&S' database of expert resources, including those HH&S has reached out to and those that reached out to HH&S to serve as expert consultants. As we conducted initial interviews, we asked participants to spread the word about the interviews to other medical professionals who watched the show. Interviews were semi-structured, meaning the interviewers could add prompts and follow-ups to predetermined questions. They took place over Zoom, and were recorded and transcribed.

What We Found

The vast majority of our interviewees were doctors (40%) or residents (36%).

- Non-physician medical professionals included two nurse practitioners, one nurse, one physician assistant, and one medical student.
- Most of our interviewees (92%) had direct ER experience.

Key themes and topics surfaced in the interviews included the following:

- Emotional resonance of *The Pitt*;
- A sense of accuracy, realism, and authenticity;
- Hopeful takeaways for healthcare professionals; and
- Hopeful takeaways for the general audience.

Some perceived impacts reported by the healthcare professionals included:

- Feeling validated in their choice of profession and workplace;
- Having conversations with family members and co-workers about topics depicted on the show, from overcrowding to end-of-life care; and
- Writing to the show's leads and writing about the show – two of our interviewees were drafting thought pieces about the TV show.

Emotional Resonance

The majority of participants (approximately 64%) expressed strong emotional reactions, including feelings of validation, exhaustion, and being 'seen.'

- The show triggered memories of difficult shifts, burnout, and moral injury, especially among ER doctors and residents, and some said it was too intense to watch before a shift.
- Others found the series cathartic, prompting a sense of pride and solidarity.
- The most frequently mentioned emotional responses included validation, anxiety, and hope.

"I was grateful for finally feeling seen. I felt like the pediatric cases are just...they're accurate. They're not too dramatic, it was just my life."

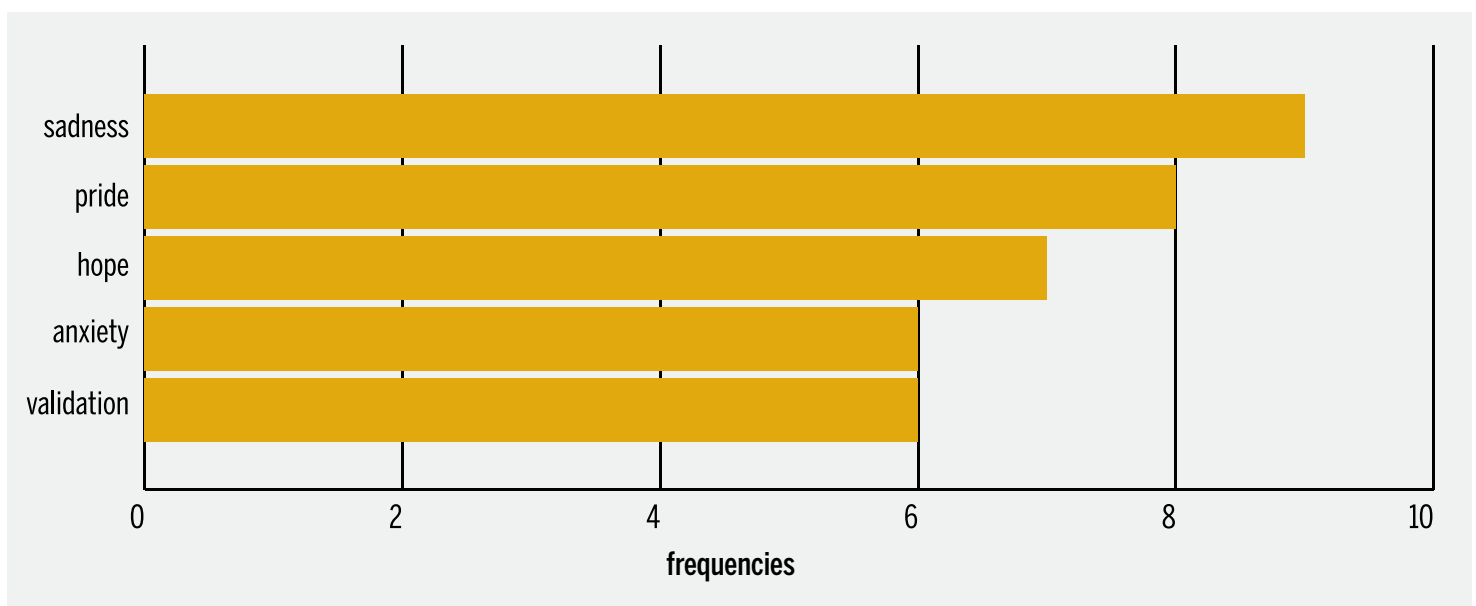
—Pediatric ER Doctor

"[I mostly felt] hope — people showing up and doing the work... if you are focused on the system, it feels hopeless. 'There's hope in the long defeat'"

—ER Resident

Figure 4.

Most Frequently Reported Emotions



Accuracy, Realism, and Authenticity

While many interviewees acknowledged the need for dramatic pacing, they also emphasized the responsibility of medical shows to avoid misinformation.

- Nearly all agreed on the importance of accuracy in medical TV shows, especially when depicting diagnoses, procedures, and hospital operations. They described how inaccuracy can lead to patient mistrust or distorted expectations about healthcare.

“Everything in *The Pitt* looked exactly like it is in real life.”

—Retired Nurse

- Several described scenes from *The Pitt* as being lifted from their own life. One physician’s assistant spoke about the organ donation storyline mirroring his own experience. He had to counsel and support a reluctant, grieving mother in the process of organ donation. The mother is now an outspoken advocate for the issue.
- Medical professionals noted that the show portrayed hospital environments, team dynamics, and clinical decision-making with unusual realism. They especially appreciated depictions of high-pressure triage, resource constraints, and emotional aftermath of clinical events.
- Nurses were more likely to raise the issue that documentation, charting, and the presence of nurses was underrepresented in the show.

Nearly 3 in 4 participants identified the show’s portrayal of systemic healthcare issues as highly accurate.

- Noted systemic issues included ER overcrowding, lack of psych beds and mental health resources, insurance denials, pressures from administration, and hospital underfunding.
- The show captured the participants’ sense of the ER as the “catch-all” for failures in the US healthcare system.
- Many described the experience of seeing their own institutional challenges onscreen while watching *The Pitt*.

“The general kind of feel—the busy emergency department and a lot of the systemic pressures like there’s no beds on the inpatient unit. That part feels really real.”

—Chief of Emergency Psychiatry

“That’s—seeing how some of the residents are being told, hey, you need to be seeing this many patients per hour, you need to keep it moving, but you also need to balance that with being empathetic toward your patients and being thorough—but not too thorough, where you’re staying in a room for 30 minutes. It’s very relatable.”

—Emergency Medicine resident

By and large, medical professionals found the characters and medical situations highly relatable.

- They saw reflections of themselves in interns, staff conflict, and emotional labor. Several participants said they identified closely with specific plotlines or character arcs.
- Some interviewees highlighted Dr. Robby’s emotional breakdown as being especially authentic, capturing the hidden toll of the work.

“I think the one that I identify with the most is Dr. Robby who’s a little crusty around the edges and has been doing this so long that it’s almost like doing it in your sleep.”

—Assistant Professor, Nocturnist, former navy flight surgeon

“The resident, who just like, had the miscarriage during her shift, just continued on—I totally can resonate with her.”

—ER Physician

Some interviewees noted that the show acknowledged racial and class disparities in healthcare delivery.

- Though a minority, these participants valued moments when the show linked health outcomes to race, insurance, or zip code.
- For example, one participant lauded the show for having a female Black doctor, intimating that leadership in many medical shows is not very diverse.

“Grateful that the casting was done to reflect some diversity. Good that they cast a Black woman as a physician”

—ICU doctor and professor

Takeaways for Healthcare Professionals and the Public

Interviewees hoped *The Pitt* would validate other providers, raise awareness of burnout, and foster discussion about system reform.

- Several mentioned its value as a teaching tool or a conversation starter among colleagues and trainees. One interviewee showed residents a scene before morning rounds to start a conversation about handling the weight of repeated loss. Another shared a scene—in which a resident breaks down after multiple traumas—to illustrate the risks of burnout and the importance of wellness check-ins.

- Interviewees also described watching the show with spouses or children, which fostered greater empathy and understanding of their work.

“A medical drama creates empathy for patients to understand doctors; validates feelings of patients”

—Medical student

Most participants expressed a hope that general audiences would better understand healthcare realities, including long ER wait times and staff burnout.

- Several expected the show to prompt conversations about end-of-life issues. One participant highlighted end-of-life management as the most important issue the show brought up and the most important issue we as a society fail to think about.
- Participants hoped that the show would build empathy and possibly influence public opinion or policy. Several noted the value of actor Noah Wyle’s real-world activism bringing attention to systemic issues within the ER.
- However, many were cautious, saying that while TV can spark awareness, large-scale policy reform is a challenge. Specifically, some saw the profit-oriented medical system as reluctant to change as long as it is profitable.

“[I hope the show] helps to think about politics and how we apportion resources, that cutting Medicaid is probably not the right thing to be doing”

—Fourth year ER resident

HOW DID GENERAL AUDIENCES RESPOND TO *THE PITT*?



While healthcare professionals were clearly moved by seeing their lives reflected onscreen, we were also interested in how general viewing audiences responded to *The Pitt*.

What We Did

We conducted an online survey of 1409 US-based adults with access to HBO Max between June and July 2025. We oversampled for Black (N = 290) and Latino (N = 375) respondents to allow for analyses within these key communities. The sample included:

- 709 **viewers** who saw at least three episodes of *The Pitt*,²⁰ including 324 who saw all fifteen.
- 700 **non-viewers** (no episodes)

What We Found

Nearly nine in ten viewers of *The Pitt* “somewhat” or “strongly” agreed that the show:

- Does a good job of educating people while entertaining them (89.9%)
- Makes the stress health care providers face understandable and relatable (89.9%)
- Reveals how understaffing of medical professionals can lead to negative patient outcomes (86.7%)

Viewers were highly transported into the narrative, with more than 75% “somewhat” or “strongly” agreeing with the following:

- I was mentally involved in *The Pitt* while watching it (87.2%)
- I wanted to learn how *The Pitt* storylines ended (87.0%)
- *The Pitt* affected me emotionally (76.0%)

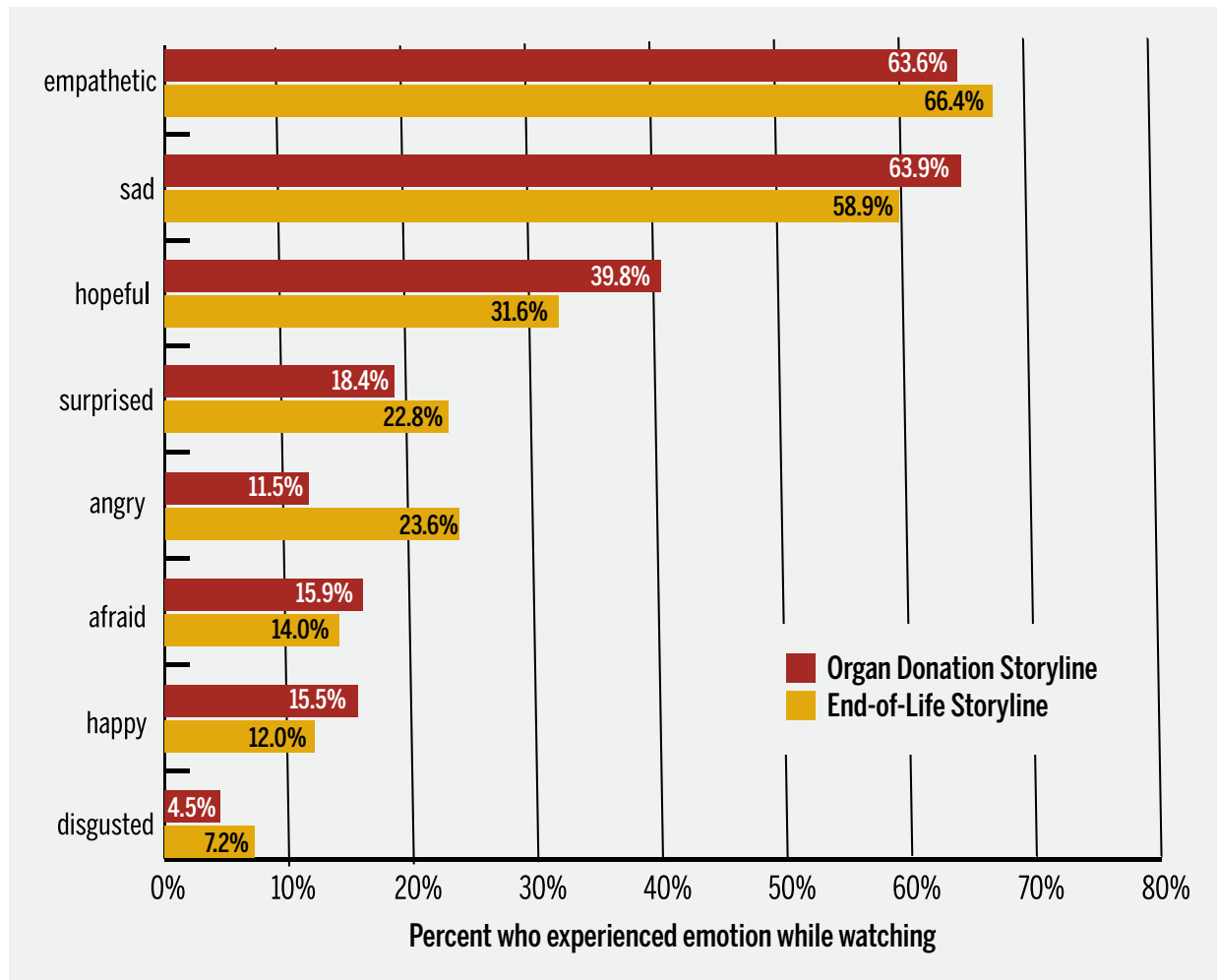
²⁰ Respondents who saw just one or two episodes were considered to have inadequate exposure and were excluded from the survey. Those who reported watching *The Pitt* were required to correctly answer at least 2 out of 4 recall questions in order to continue. We also terminated those whose screener responses placed them in the “viewer” group but who selected only 1-2 specific episodes later in the survey.

Viewers most often reported feeling empathetic, sad, or hopeful in response to the organ donation (OD) and end-of-life (EOL) storylines.

- Empathy (OD: 63.6%, EOL: 66.4%)
- Sadness (OD: 63.9%; EOL: 58.9%)
- Hope (OD: 39.8%; EOL: 31.6%).

Figure 5.

Emotions Experienced by Storyline



IMPACT OF ORGAN DONATION AND END-OF-LIFE STORYLINES

In addition to the overall audience responses to *The Pitt*, we analyzed the impact of the storylines addressing organ donation (OD) and end-of-life decisions (EOL). We examined the following research questions for each storyline:

- 1. Was watching the OD/EOL storyline associated with more positive attitudes, greater intentions around planning for oneself or conversations with loved ones, or greater likelihood of having sought or shared relevant information in 2025?
- 2. Did it matter whether viewers saw the conclusion of the OD/EOL storyline or just part of the storyline?
- 3. Did the impact of the OD/EOL storyline differ for Black and Latino vs. White audiences? This is especially relevant given that both communities face a greater need for organ donation but remain under-represented as donors.

What We Did

We conducted a separate set of analyses for each storyline, categorizing survey respondents into three groups based on their level of exposure to the storyline (non-viewer, partial viewer, conclusion viewer). We then compared the three groups on each outcome relevant to that storyline: OD or EOL attitudes, intentions for themselves and their loved ones,²¹ and actions taken.

Table 2.
Organ Donation (OD) Storyline Analysis

	2	3	4	5	6	7	8
Nineteen-year-old Nick Bradley is declared brain dead following a fentanyl overdose. His parents are initially resistant, but after conferring with their pastor, they decide to donate his organs.							
Non-viewer (713 saw none of episodes 2-8)	X	X	X	X	X	X	X
Partial viewer (243 saw any of episodes 2-7, not 8)	Saw at least one						X
Conclusion viewer (466 saw at least episode 8)	May have seen						Saw

21 When analyzing intentions, we excluded respondents who indicated they had previously taken that particular action.

ATTITUDES:

- Toward organ donation
- Number of reasons not registered to be a donor (for non-donors only)

INTENTIONS TO:

- Register as a donor or verify registration
- Donate a family member's organs
- Discuss loved one's preferences for their body after death
- Discuss one's own preferences for body after death
- Donate blood

ACTIONS TAKEN IN 2025:

- Sought more information about organ donation, blood donation
- Posted on social media about organ donation, blood donation

Table 3.

End-of-Life (EOL) Storyline Analysis

	1	2	3	4
An older man is brought in with pneumonia, sepsis, and a do-not-intubate order. His adult children request medical intervention against his wishes. After watching him suffer, they discontinue life support and let him die peacefully.				
Non-viewer (728 saw none of episodes 1-4)	X	X	X	X
Partial viewer (120 saw any of episodes 1-3, not 4)	Saw at least one			X
Conclusion viewer (561 saw at least episode 4)	May have seen			Saw

ATTITUDES:

- Toward EOL planning

INTENTIONS TO:

- Create a living will
- Designate health care power of attorney
- Discuss loved one's EOL medical preferences
- Discuss one's own EOL medical preferences

ACTIONS TAKEN IN 2025:

- Sought more information about EOL planning
- Posted on social media about EOL planning

In all analyses, we controlled for eleven variables that differed between the three groups and were also associated with outcomes, and examined whether the impacts of storyline exposure differed between White and POC audiences.

For viewers of each storyline, we examined the role of intervening psychological mechanisms—such as viewers' transportation (or immersion), identification with key characters, and emotional responses to the storyline.

What We Found

The findings were largely consistent between the OD and EOL storylines.

Attitudes

Those who saw the conclusion of either storyline had the most positive attitudes. This was particularly true for Black audiences.

- Audience members who saw the OD storyline conclusion had more positive organ donation attitudes than non-viewers, but partial viewers did not differ from non-viewers. Viewers of the EOL storyline—conclusion or partial—had more positive attitudes toward end-of-life planning than non-viewers.
- Overall, POC respondents had less positive attitudes toward organ donation and end-of-life planning than White respondents. However, Black viewers who saw the conclusion of either storyline had more positive attitudes than Black non-viewers.

Intentions

Primarily for Black and Latino audiences, storyline viewers had greater intentions related to organ donation/end-of-life planning than non-viewers.

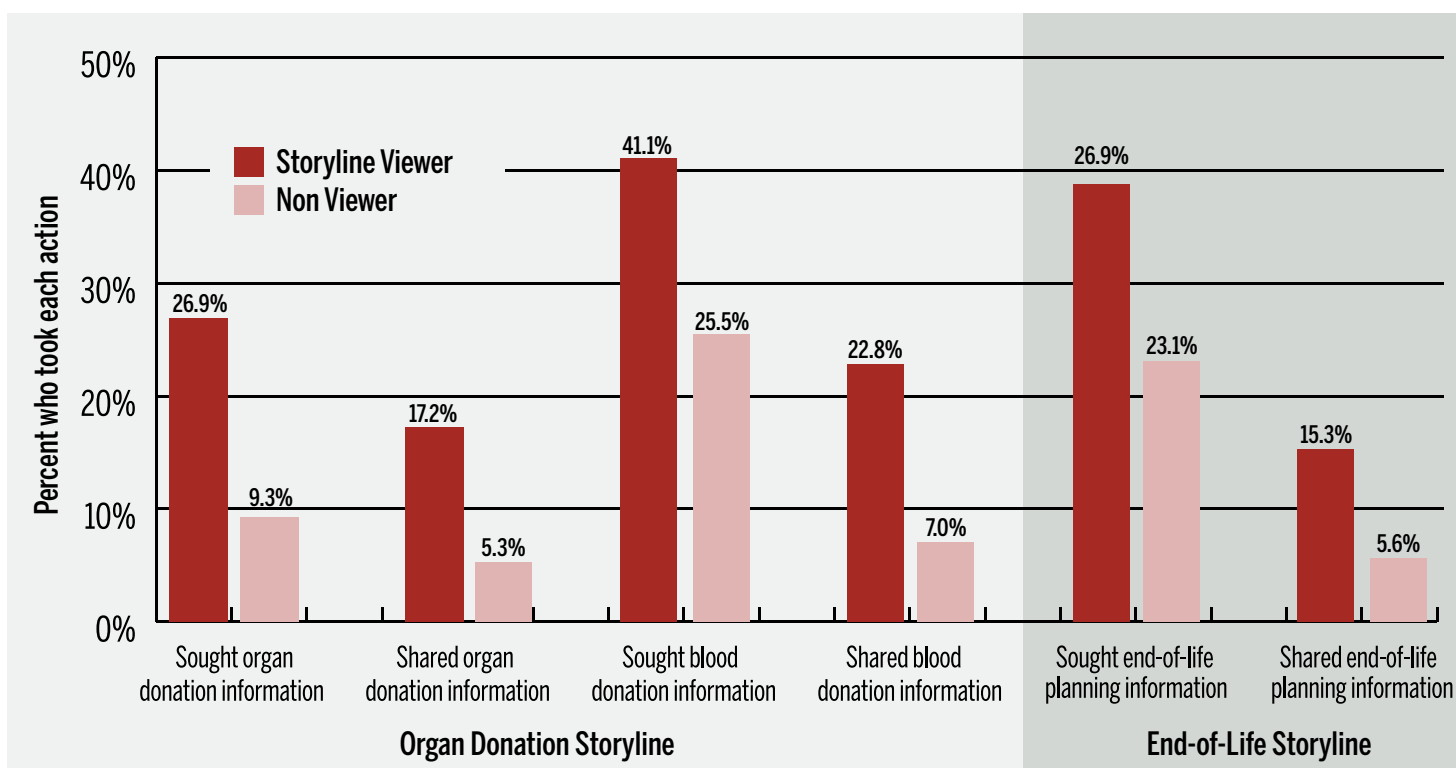
- Compared to those who did not see the relevant storyline, viewers (conclusion or partial) indicated they were more likely to:
 - ▶ OD storyline: Register or verify their registration to be an organ donor, donate blood, donate a family member's organs upon their death, or speak with a loved one about their own or the loved ones organ donation wishes;
 - ▶ EOL storyline: Create a living will or designate a power of attorney.
- The impact of exposure to the storylines was especially pronounced among Black respondents, and to a slightly lesser degree among Latino respondents.
 - ▶ The impact of the EOL storyline on living will and power of attorney was entirely limited to POC respondents (both outcomes for Black respondents, power of attorney only for Latinos). Exposure to the storyline had no significant effect on White respondents.
- Viewers of the complete EOL storyline indicated a greater likelihood of discussing their own or a loved one's medical preferences, compared to non-viewers.

Actions

Viewers were more likely to have sought or shared relevant information than non-viewers.

- Compared to non-viewers, viewers of the OD and EOL storylines were consistently two to three times more likely to take relevant actions:
 - 26.9% of OD viewers sought information about organ donation
 - 17.2% of OD viewers shared about organ donation on social media
 - 38.8% of EOL viewers sought information about end-of-life planning
 - 15.3% of EOL viewers shared information about end-of-life planning

Figure 6.
Action-Taking by Storyline Exposure



Counterintuitively, viewers who saw only *part* of the storyline were most likely to have sought or shared relevant information.

- For the OD storyline:
 - Black and Latino viewers were more likely to have sought information about organ donation than non-viewers, regardless of what portion of the storyline they saw. Among White respondents, the difference was between partial viewers and non-viewers.
 - Viewers—whether or not they saw the conclusion—were more likely to have posted about organ donation on social media, but the difference was more pronounced for partial storyline viewers.
- For the EOL storyline:
 - Overall, White respondents were more likely than POC to have posted about end-of-life planning on social media.
 - For Black and Latino respondents, those who saw the storyline conclusion were more likely to have

shared information than non-viewers, with partial viewers falling in between. For White respondents, the reverse was true; partial storyline viewers were most likely to have shared information.

- ▶ Those who saw part of the storyline were more likely than non-viewers to have shared information about end-of-life planning. There was no difference between those who saw the conclusion and non-viewers.

Mechanisms

We were surprised to find that viewers who saw only part of the storyline were more likely to have taken action—and in some cases had stronger intentions—than those who saw the conclusion. We explored whether psychological mechanisms such as transportation into the narrative, identification with key characters, or emotional responses to the storylines might explain these unexpected findings.

Identification with the character who has a change of heart and ultimately follows her loved one's wishes contributed to partial viewers outperforming those who saw the conclusion. Transportation into the narrative did not.

- Viewers who saw the conclusion of either storyline were *less likely* to identify with Lily Bradley (OD storyline) or Helen Spencer (EOL storyline). Identification, which was greater among partial storyline viewers, was positively associated with all organ donation and end-of-life outcomes: attitudes, intentions, and actions taken.
- Transportation, on the other hand, operated consistently with what would be expected. Those who saw the conclusion of either storyline experienced greater transportation, which was in turn associated with more positive outcomes, especially attitudes.
 - ▶ For the EOL storyline, transportation played a role only for POC viewers; seeing the conclusion had no effect on transportation among White viewers. This may explain why the impact of this storyline on attitudes was so pronounced for POC respondents.

Emotional responses to the storylines—particularly hope, empathy, and sadness—likewise contributed to this effect.

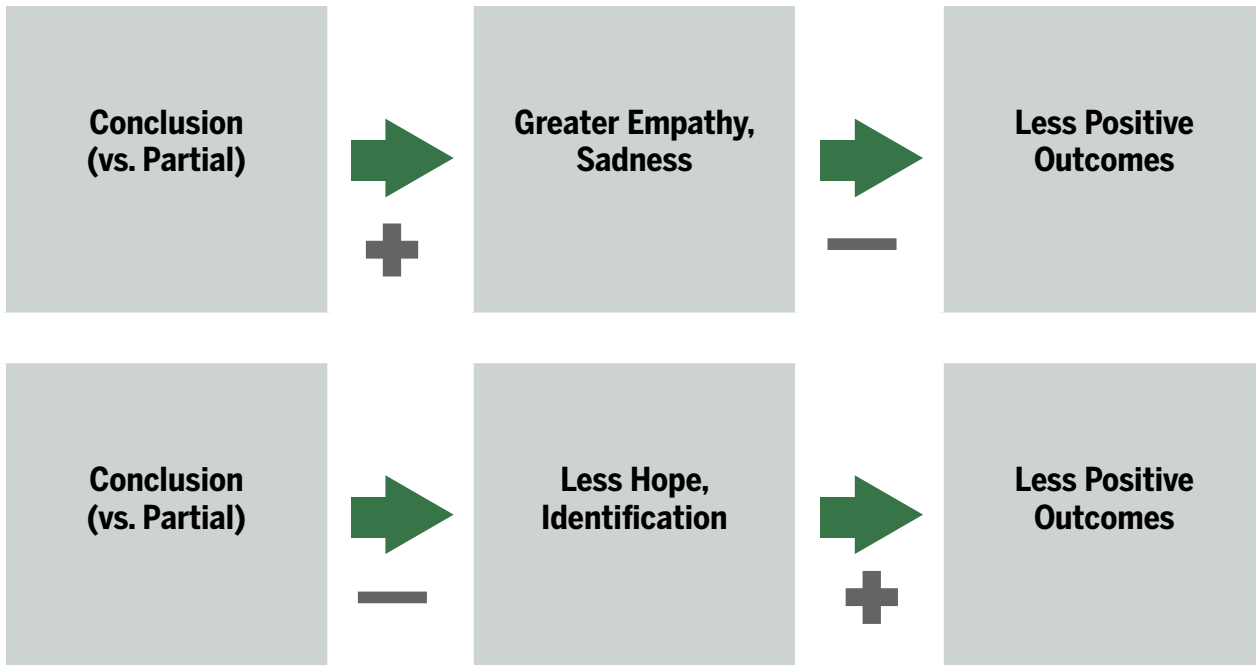
- Viewers who saw the conclusion of either storyline were *more likely* to experience sadness or empathy in response.
 - ▶ OD storyline: Those who felt sad or empathetic were less likely to have sought or shared information about organ donation. They were also less likely to say they would register to be an organ donor or discuss a loved one's organ donation preferences.
 - ▶ EOL storyline: Those who felt sad or empathetic were less likely to have shared information about end-of-life planning. Sadness and empathy were not associated with seeking information or end-of-life planning intentions.
- At the same time, those who saw the conclusion were *less likely* to feel hopeful than partial viewers. Those who experienced hope had *more positive* outcomes across the board for both storylines, with the exception of attitudes.

Figure 7.
Role of Psychological Mechanisms

Transportation contributes to more positive outcomes among conclusion viewers



Empathy, sadness, hope, and identification contribute to less positive outcomes among conclusion viewers



The negative impact of sadness and empathy (which were more common among those who saw the conclusion), combined with the positive impact of hope and identification (which were more common among partial viewers), appears to explain why those who saw the conclusion of the either storyline were less likely to take have sought or shared relevant information.



LIFE AND DEATH IN *THE PITT*

CONCLUSION

Healthcare professionals reported feeling validated and seen by *The Pitt*'s realistic portrayals of emergency medicine. They found the stories and characters authentic and appreciated the show's focus on the "hidden toll" providers face. They highlighted the show's emphasis on systemic challenges in health care as particularly accurate, including chronic underfunding, overcrowding, lack of psychiatric beds, and pressures from hospital administration. Some noted the show's attention to health equity, including storylines addressing systemic racism and other factors beyond individuals' control that contribute to poor health outcomes.

Likewise, **general audiences** felt the show illustrated how institutional challenges like understaffing can lead to negative outcomes for patients, as well as making the stress health care providers face more relatable. The majority of viewers of the organ donation and end-of-life storylines felt sad or empathetic, though more than a third reported the storylines made them feel hopeful.

LIFE AND DEATH IN *THE PITT*

End Well founder Dr. Shoshana Ungerleider told *The Hollywood Reporter*:

“More accurate portrayals of serious illness and end-of-life on TV prepare audiences of all ages with a clearer idea of what really happens and what options exist beyond aggressive intervention...Trying to go up against the miraculous saves on every medical show was really hard. The Pitt provides kind of a master class in communication that viewers and health care workers can draw upon in their own lives.”²²

Nearly across the board, viewers of the organ donation or end-of-life storylines had more positive attitudes than non-viewers, indicated they were more likely to take relevant actions (e.g., register to become an organ donor, create a living will, discuss preferences with loved ones), and were more likely to have sought or shared information about these topics. This was particularly evident in the case of organ donation, where viewers of the storyline were approximately three times more likely to have sought information and posted on social media than non-viewers.

22 Schmidt, I. (2025, September 8). How “The Pitt” Gets Death Right. *The Hollywood Reporter*. <https://web.archive.org/web/20251013044631/https://www.hollywoodreporter.com/tv/tv-features/how-the-pitt-death-accuracy-1236365261/>

While the organ donation storyline focused on a White donor, its impact on attitudes and intentions was more pronounced on POC—and especially Black—audiences. Further, seeing the conclusion of the storyline did not backfire for Black or Latino viewers. This is significant, as it suggests entertainment storylines have the potential to reduce racial disparities in organ donation, thereby reducing wait times and increasing the likelihood of success for Black and Latino transplant recipients. A storyline featuring a donor or recipient of color that explicitly attends to these disparities could be even more powerful, especially if paired with opportunities for viewers to take action.

EMOTIONAL RESPONSES

We expected that viewers who saw the conclusion of either storyline would have the most positive attitudes, greater intentions, and be most likely to take relevant actions. By definition, partial viewers did not see the resolution of the storylines in which family members ultimately decide to follow the wishes of their loved ones. In many cases, however, partial storyline viewers had more positive outcomes than conclusion viewers, particularly in terms of actions taken.

A complex interplay between different emotional responses explains this unanticipated finding, at least to some extent:

- Viewers who saw the conclusion of either storyline were more likely to feel sad or empathetic, and those who experienced sadness or empathy were less likely to have sought or shared information.
- At the same time, those who saw the conclusion felt less hopeful and were less likely to identify with the key character who undergoes this change of heart, and in turn, less likely to take action.

Notably, the same was not true for attitudes toward organ donation or end-of-life planning; in both cases, storyline conclusion viewers had the most positive attitudes. The fact that emotional responses were mainly associated with actions (and to a lesser extent, intentions to act) suggests the importance of self-efficacy, the belief in one's ability to carry out a particular task or action. While we did not measure self-efficacy, the results are consistent with extensive research in health communication and narrative persuasion showing hope is associated with greater self-efficacy and action-taking²³ while sadness tends to have the opposite effect.²⁴ Research on the role of empathy—a complex emotion—is still emerging, but suggests it tends to be associated with more positive outcomes.²⁵ However, survey participants self-reported their emotions and may have conflated sadness and empathy (only 30% reported experiencing one without the other).

SO WHAT?

The implications of this research go far beyond the specific storylines we analyzed. The first season of *The Pitt* included dozens of storylines of varying length and prominence addressing health, equity, and health care-re-

23 Chadwick, A. (2017, April). Hope and Health and Risk Messaging. *Oxford Research Encyclopedia of Communication*. <https://doi.org/10.1093/acrefore/9780190228613.013.269>

24 Nabi, R. L. (2014). Emotional flow in persuasive health messages. *Health Communication*, 30(2), 114-124. <https://doi.org/10.1080/10410236.2014.974129>

25 Kloss, A., & Bartsch, A. (2017, July). Simultaneous and Successive Emotion Experiences and Health and Risk Messaging. *Oxford Research Encyclopedia of Communication*. <https://doi.org/10.1093/acrefore/9780190228613.013.539>

lated topics, each of which has reached millions of viewers. A separate study of a brief storyline involving Freedom House—a historically-Black ambulance service in Pittsburgh that pioneered emergency care—saw Google searches more than double immediately following the episode and remain elevated for weeks.²⁶ This finding underscores that even a relatively minor storyline has the ability to motivate audiences to search for more information and expand their awareness.

At the time of this writing, *The Pitt* is in production for its second season, which will begin airing in January 2026. HH&S continues to consult with the show, with upcoming storylines including challenges faced by the deaf community in communicating their medical needs and the impact of real-world cuts to Medicaid.²⁷ Co-creator Gemmill notes:

“When people have less finances from the government to help them with their healthcare, they’re going to get less healthcare, and that means they’re going to end up in the only place where they can get free healthcare, which is the ER.”

RECOMMENDATIONS

For Storytellers & Decision Makers

- **Prioritize accuracy by engaging expert consultants in the process of developing health stories, in traditional entertainment and beyond.** Whether in traditional scripted TV or social-first content, creators benefit from turning to organizations like HH&S, which provides free access to experts on a wide range of topics. This is true not just for medical shows like *The Pitt*, but any content that addresses health issues, even in passing.
- **Embrace authenticity and infuse broken systems into character-driven stories. At the same time, emphasize hope and opportunities for audiences to take action.** Consider illustrating how characters’ choices are influenced and constrained by the systems in which they operate, figuratively or literally. At the same time, leave room for hope; stories that are too much of a downer can leave viewers less motivated to act.
- **Attract and engage audiences by supporting and greenlighting content that addresses systemic challenges.** Writing about flawed institutions does not necessitate heavy-handed stories. The incredible viewership and critical success of *The Pitt* suggests well-executed stories that highlight structural barriers and inequities—far from alienating audiences—actually draw them in.

26 Fawole, O., Leshniosky, K., Lee, T., Manning, T., & Hoffman, B. (2025). From screen to search: Examining public awareness of Freedom House ambulance service after viewing *The Pitt* [Manuscript submitted for publication].

27 Gao, M. (2025, August 7). “The Pitt” Season 2 Will Filter Trump’s “Big Beautiful Bill” and Medicaid Changes Into Storylines: “We Take Our Platform Seriously.” <https://web.archive.org/web/20250916145728/https://variety.com/2025/awards/awards/the-pitt-season-2-trump-big-beautiful-bill-medicaid-1236481221/>

For Health Providers & Communicators

- **Share your clinical expertise and lived experience with storytellers to promote more accurate, authentic, and impactful stories.** With the proliferation of health misinformation and uncertainty around what sources are credible, TV continues to play an important role as a trusted source of health information. Consider joining the HH&S expert database to serve as a consultant on entertainment content with massive reach.
- **Use *The Pitt* as an accessible entrypoint for discussions of serious topics with patients, family members, students, and the broader public.** Clinicians might point to examples from *The Pitt* as a reference point for patients and family members, while educators and communicators could use clips from the show to highlight complex themes for students and broader audiences.

For Advocates & Funders

- **Highlight *The Pitt* as a case study illustrating a successful approach to entertainment-based narrative change.** This study adds to the existing-base demonstrating the power of accurate, expert-informed entertainment narratives to drive attitude and behavior change.
- **Support efforts to promote accuracy in entertainment. A modest investment can infuse dozens of storylines—each reaching millions of viewers—with expert insights.** An analysis of HH&S outcomes over a ten-year period found each \$100,000 investment was associated with an average return of 19 consultations between creators and experts, and 13 aired storylines.²⁸
- **Fund research to gain a deeper understanding of how audiences engage with media narratives.** Future research directions might include further exploration of the role of trusted messengers within underserved communities, the conditions under which empathy promotes or hinders action-taking, or the audience impact of entertainment narratives that explicitly address structural inequities in health care.

Learn More:

Hollywood, Health & Society
(Norman Lear Center Outreach)

hhs@usc.edu
hollywoodhealthandsociety.org

Media Impact Project
(Norman Lear Center Research)

media.impact@usc.edu
www.mediaimpactproject.org

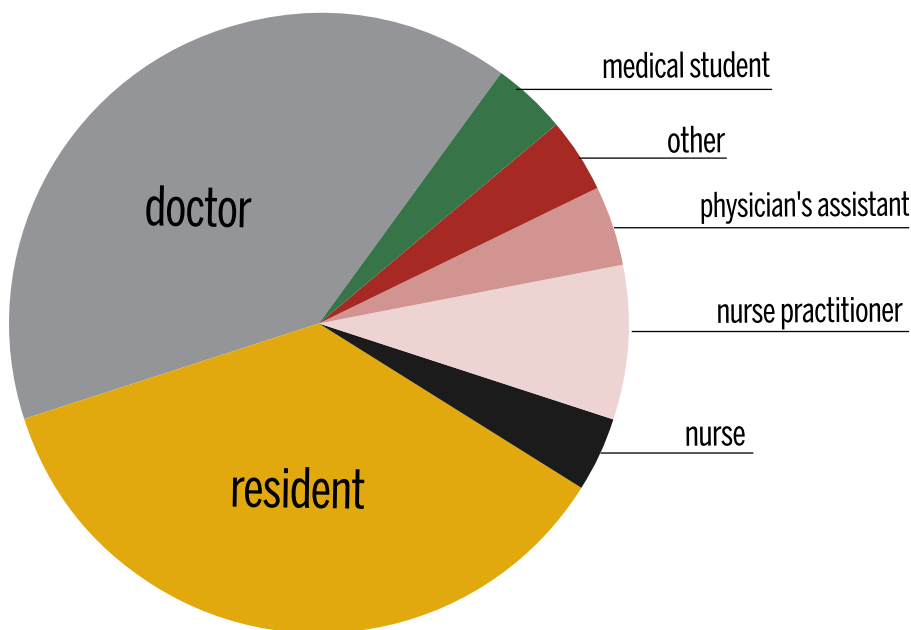
28 USC Norman Lear Center, Media Impact Project (2023). Exploring factors associated with impact in entertainment-driven narrative change: A case study of Hollywood, Health & Society Projects, 2012-2021. <https://learcenter.s3.us-west-1.amazonaws.com/Norman+Lear+Center+Case+-Study+of+HH%26S.pdf>

APPENDIX A: INTERVIEW METHODOLOGY

RECRUITMENT & INTERVIEWEE CHARACTERISTICS

We recruited 25 medical professionals who watched *The Pitt* to participate in 45-minute interviews. Participants were recruited using the snowball sampling method. An initial list included a set of potential participants from HH&S' database of expert resources, including those HH&S has reached out to and those that reached out to HH&S to serve as expert consultants. As we conducted initial interviews, we asked participants to spread the word about the interviews to other medical professionals who watched the show.

Figure 8.
Roles of Interview Participants



ANALYSIS PROCEDURE

The interview transcripts were analyzed topically and thematically, using the constant comparative method (Glaser & Strauss, 1967) where new data excerpts are systematically compared to existing data excerpts in the same interview and in all the other interviews to identify patterns and themes.

INTERVIEW PROTOCOLS

Interview questions for medical professionals

Background

- Briefly describe your current job.

Medical Dramas

- How often do you watch medical dramas? What is your general opinion on medical dramas?
- Why do you watch them/don't watch them?
- Do you feel that it's important for medical dramas to be accurate? Why/why not?
- Do you feel that it's important for medical dramas to be realistic or to reflect the experience of medical professionals and patients? Why/why not?

The Pitt

- Why did you decide to watch *The Pitt*? How did you hear about it?
 - ▶ If you stopped watching, why did you stop watching?
- What were your expectations when starting the show? Were the expectations met?
- How does *The Pitt* compare to other medical shows you have watched?
 - ▶ Probes: In terms of accuracy, realism, issues portrayed?
- What are your general feelings about the show? What did you like best and least about it?
- What emotions did you find yourself experiencing while watching?
- Do you think that the show inspires more hope or more hopelessness—and why?
- What elements of the show (plot, characters, settings), if any, felt realistic and why?
- What did you think of the show's depiction of American healthcare today?
- What did you think of the show's depiction of American social issues today?
- Did you find the show to be accurate? In terms of the medicine, experiences of medical professionals, financial issues, social issues portrayed?
- Did you feel represented in the show (either personally or professionally)?
- Did any moments feel unrealistic? Which ones?
- What elements of the show (plot, characters, settings), if any, felt relatable and why?
- What elements of the show (plot, characters, settings), if any, felt thought provoking and why?
- Were there any scenes or episodes that you felt were especially moving? Why those ones?
- Were there any scenes or episodes that you felt inspired reflection? Why those ones?
- Did any scenes or episodes spark real-life conversations—in person or online? With your friends/family? Colleagues? Patients? What was the content of these conversations?
- Have any patients brought up the show? In what context?
 - ▶ Prompt: the show covers the importance of the language medical professionals use. What were your thoughts on this?

- Do you/did you recommend the show to anyone? Why/why not?
- What do you hope viewers get out of the show?
- Do you think the show benefits providers/patients in any way? In what ways?
- Do you hope that the show will inspire any real-world change? If so, what changes?
 - ▶ Prompt: in terms of what patients, medical professionals do? In terms of what groups/governments/society do?

Interview questions for Hollywood, Health & Society

- How did the relationship with *The Pitt* start?
- Which episodes did you work on?
- What storylines did you consult on?
- What did the consultations consist of?
- With what objectives did *The Pitt* come to you?
- Was it just script review or more active consultation?
- Any examples of the initial requests and what happened after the consultation?
- What were the unique opportunities and challenges with this particular show?
- What future opportunities do you foresee when working with the show?

APPENDIX B: SURVEY METHODOLOGY

Recruitment & Design

We conducted an online survey of 1409 US-based adults with access to HBO Max between June and July 2025. We oversampled for Black (N = 290) and Latino (N = 375) respondents to allow for analyses within these key communities.

We recruited for balance between *Pitt* viewers (defined as having seen at least 3 episodes) and non-viewers (who had seen no episodes). We additionally attempted to achieve balance between viewers and non-viewers on demographic and other key variables, but this proved challenging, as the majority of these variables differed between the two groups.

Respondents who saw just one or two episodes were considered to have inadequate exposure and were excluded from the survey. Those who reported watching at least three episodes of *The Pitt* were required to correctly answer at least 2 out of 4 recall questions in order to continue. We also terminated those whose screener responses placed them in the “viewer” group but who selected only 1-2 specific episodes later in the survey. The final sample consisted of 709 viewers of *The Pitt* and 700 non-viewers.

- **Overall viewer analyses:** For self-reported outcomes, we analyzed all 709 viewers.
- **Storyline exposure analyses:** To examine the impacts of exposure to the organ donation (OD) and end-of-life (EOL) storylines, we categorized survey respondents into three groups based on their level of storyline exposure and compared their attitudes, intentions, and actions related to the topic.
 - ▶ We controlled for 11 variables that differed between the three groups and were also associated with outcomes (see participant characteristics tables).
 - ▶ Rather than controlling for race/ethnicity, we examined whether the impacts of storyline exposure differed between White and POC respondents, and analyzed these impacts separately within the subgroups of Black and Latino respondents.
 - ▶ For viewers of each storyline, we explored the role of intervening psychological mechanisms—such as viewers’ transportation (or immersion), identification with key characters, and emotional responses to the storyline—in contributing to relevant outcomes.

Table 4.

Participant Characteristics by OD Storyline Exposure

	OD Conclusion Viewers (N = 466)	OD Partial Viewers (N = 230)	OD Non-Viewers (N = 713)
Gender** Woman	56.2% ▲	42.2% ▼	54.1%
Age*** Mean	51.1 ▲	38.7 ▼	46.4
OD/EOL Actions*** 1 or more of 4	57.3% ▲	43.5%	41.0% ▼
OD/EOL Discussions** 1 or more of 4	44.8% ▲	34.8%	32.1% ▼
Ideology*** Liberal or very liberal	47.9% ▲	42.2%	34.2% ▼
Education*** Bachelor's or higher	52.4%	56.1% ▲	36.5% ▼
HH Income*** \$100k or higher	35.4%	38.7% ▲	23.1% ▼
Interest in TV*** Mean (1-5)	3.86	4.01 ▲	3.19 ▼
Race*** POC	37.3% ▼	58.3%	59.6% ▲
Black***	15.0% ▼	27.0% ▲	22.2%
Latino***	18.0% ▼	27.0%	32.1% ▲
Religiosity** Mean (0-10)	4.92 ▼	5.83 ▲	4.95
Geography* Large or small city	47.7% ▼	57.4% ▲	53.4%
Disability/Chronic Condition***	26.2%	19.1% ▼	31.4% ▲
Work in Health Care (n.s.)	9.0%	13.5%	10.9%

* $p < .05$; ** $p < .01$; *** $p < .001$

Table 5.**Participant Characteristics by EOL Storyline Exposure**

	EOL Conclusion Viewers (N = 561)	EOL Partial Viewers (N = 120)	EOL Non-Viewers (N = 728)
Gender*** Woman	54.5% ▲	36.7% ▼	54.3%
Age*** Mean	49.0 ▲	38.7 ▼	46.2
OD/EOL Discussions*** 1 or more of 4	44.4% ▲	30.0% ▼	32.0%
OD/EOL Actions*** 1 or more of 4	55.6% ▲	43.3%	40.5% ▼
Ideology** Liberal or very liberal	46.9% ▲	40.0%	34.8% ▼
Education*** Bachelor's or higher	52.2%	60.0% ▲	36.8% ▼
HH Income*** \$100k or higher	34.8%	45.8% ▲	23.2% ▼
Interest in TV*** Mean	3.88	4.02 ▲	3.21 ▼
Race*** POC	41.4% ▼	59.2% ▲	59.1%
Black	17.6%	23.3%	22.4%
Latino***	19.3% ▼	29.2%	31.9% ▲
Religiosity*** Mean	4.95 ▼	6.36 ▲	4.98
Disability/Chronic Condition**	24.4%	19.2% ▼	31.6% ▲
Geography (n.s.) Large or small city	49.0%	55.8%	54.0%
Work in Health Care (n.s.)	10.2%	13.3%	10.7%

* $p < .05$; ** $p < .01$; *** $p < .001$

Analysis Procedure

To measure the impact of exposure to each storyline on **continuous** outcome variables (attitudes, intentions) and potential mechanisms (transportation, identification), we conducted general linear model analysis of covariance (GLM ANCOVA) in SPSS version 29.

The design for each storyline was a 3 x 2 factorial model to test for the main effects of storyline exposure and race, as well as the interactions between the two:

- OD or EOL storyline exposure—3 levels: non-viewer, partial storyline viewer, complete storyline viewer
- Race/ethnicity—2 levels: White, non-White/POC

For outcomes with significant main effects of exposure or interactions with race/ethnicity, we conducted follow-up GLM ANCOVAs within the subsamples of Black and Latino respondents, excluding race from the model.

All models included 11 covariates that were associated with both storyline exposure and outcomes:

1. Age
2. Gender
3. Education level
4. Household income
5. Religiosity
6. Political ideology
7. Geography
8. Disability/chronic disease
9. Interest in TV
10. Number of OD/EOL actions previously taken
11. Number of OD/EOL topics previously discussed

To measure the impact of exposure on **dichotomous** outcomes (actions taken in 2025) and mechanisms (emotions experienced), we conducted binary logistic regression using the same specifications above.

Finally, for mechanism variables that differed between complete and partial storyline viewers, we measured the associations between the mechanism and significant outcomes (using bivariate correlation, t-tests, or chi-square analysis depending on the nature of the variables).

Table 6.

Measures

SCREENER VARIABLES

Age: Q1. How old are you? (*must be 18+*)

Access to HBO Max: Q2. Do you have access to any of the following streaming platforms

Select all that apply

- HBO Max (*must be selected*)
- Distractors: Amazon Prime; Apple TV+; Disney+; Hulu; Netflix; YouTubeTV

Pitt Exposure: Q4. In their most recent season (2024-2025), how many episodes of each of the following TV shows did you watch?

1 = None, 2 = Only 1 or 2, 3 = Fewer than half, 4 = About half of the episodes, 5 = Most, 6 = All, 7 = Watched episodes multiple times

- The Pitt (if “1=none”: categorize as non-viewer; if “2=only 1 or 2”: exclude from survey; if “3=fewer than half” or higher: categorize as viewer)
- Distractors: Grey’s Anatomy; Severance; The Studio; Tracker; Your Friends & Neighbors

FACTORS (INDEPENDENT VARIABLES)

Storyline exposure: Q15. Which of the following episodes from “The Pitt” do you recall seeing?

Select all that apply; episodes 1-15

Exclude if respondent previously said 3 or more but indicated 2 or fewer here

Exclude if respondent answered 3 or more recall questions incorrectly

- OD storyline: 3 levels
 - None of episodes 2-8: categorize as OD non-viewer
 - Any of episodes 2-7, not 8: categorize as OD partial storyline viewer
 - Episode 8: categorize as OD storyline conclusion viewer
- EOL storyline : 3 levels
 - None of episodes 1-4: categorize as EOL non-viewer
 - Any of episodes 1-3, not 4: categorize as EOL partial storyline viewer
 - Episode 4: categorize as EOL storyline conclusion viewer

Race/Ethnicity: Q30. Which of the following best represents your race/ethnicity?

Select all that apply

- American Indian or Alaskan Native; Asian; Black or African American; Hispanic or Latino; Middle Eastern or North African; Native Hawaiian or Pacific Islander; White or Caucasian; Other

For overall analysis: White/Caucasian only coded as “White;” any selection beyond White/Caucasian coded as “POC”

For subgroup analyses: Black/African American and Hispanic/Latino selected individually

OVERALL OUTCOMES AND MECHANISMS

Perceived impact: Q21. Please indicate the extent to which you agree or disagree with each of the following statements regarding the show *"The Pitt."*

1=Strongly disagree, 2=Somewhat disagree, 3=Neither agree nor disagree, 4=Somewhat agree, 5=Strongly agree (3 individual items)

- Does a good job of educating people while entertaining them.
- Makes the stress healthcare providers face understandable and relatable.
- Reveals how understaffing of medical professionals can lead to negative patient outcomes.

Transportation: Q20. Indicate the extent to which you agree or disagree with each of the following statements:

1= Strongly disagree, 2=Somewhat disagree, 3= Neither agree nor disagree, 4=Somewhat agree, 5= Strongly agree (7-item scale)

- I could picture myself in the scene of the events shown in *The Pitt*.
- I was mentally involved in *The Pitt* while watching it.
- After finishing episodes of *The Pitt*, I found it easy to put it out of my mind. (Reversed)
- I wanted to learn how *The Pitt* storylines ended.
- *The Pitt* affected me emotionally.
- I found myself thinking of ways storylines from *The Pitt* could have turned out differently.
- I found my mind wandering while watching *The Pitt*. (Reversed)

STORYLINE-SPECIFIC MECHANISMS

Emotional responses: Q22/Q25. Which of the following emotions did you experience while watching the [EOL/OD] storyline?

Select all that apply (9 individual items)

- Angry; Hopeful; Afraid; Disgusted; Empathetic; Sad; Surprised; Happy; None of these

Identification: Q24/27. Please indicate the extent to which you agree or disagree with the following statements [Helen Spencer/Lily Bradley]:

1=Strongly disagree, 2=Somewhat disagree, 3=Neither agree nor disagree, 4=Somewhat agree, 5=Strongly agree (4-item scale)

- I felt I could really understand what this character was going through
- I felt I could really get inside this character's head
- I could really imagine myself in the same situation as this character
- I felt I was experiencing the same emotions as this character

ORGAN DONATION OUTCOMES (DEPENDENT VARIABLES)

Attitudes: Q14. Please indicate how much you agree or disagree with each of the following statements:

1=Strongly disagree, 2=Somewhat disagree, 3=Neither agree nor disagree, 4=Somewhat agree, 5=Strongly agree (6-item scale)

- It is important for people to discuss with their families whether or not they would want to be an organ donor upon death.
- Organ donation allows something positive to come out of a person's death.
- A deceased person's next of kin should be able to override the deceased person's wish to donate his or her organs. (Reversed)
- Organ donation can help families cope with their grief.
- If you are a registered organ donor, doctors will be more likely to let you die. (Reversed)
- A person's wish to donate his or her organs should be honored under all circumstances, even over the objections of surviving family members.

Intentions: Q8a. How likely are you to take any of the following actions?

1=Not at all likely, 2=Slightly likely, 3=Somewhat likely, 4=Moderately likely, 5=Extremely likely, 6=Have already done this (4 individual items; exclude those who selected "6=have already done this")

- Registered or verified my registration to be an organ donor
- Donated blood
- Spoke with a loved one about what they would like to be done with their body and organs after death
- Spoke with a loved one about what I would like to be done with my body and organs after death

Reasons not registered: [If "6=have already done this" not selected for "Registered or verified my registration" in 8a] Q8b. Which of the following are reasons why you have not registered to be an organ donor?

Select all that apply (Scale: number of reasons selected)

- Haven't thought about it; Don't know how; It's against my religion; I don't want my body cut up or disfigured; I'm afraid doctors will let me die if I'm an organ donor; Other (please specify)

Family intentions: Q13. If it were up to you, how likely would you be to donate a family member's organs upon his or her death?

1=Not at all likely, 2=Slightly likely, 3=Somewhat likely, 4=Moderately likely, 5=Extremely likely

Actions: Q7. Which of the following actions have you taken in 2025?

Select all that apply (4 individual items)

- Sought more information about how to become an organ donor
- Written or shared a social media post about organ donation
- Sought more information about blood donation
- Written or shared a social media post about blood donation

END-OF-LIFE OUTCOMES (DEPENDENT VARIABLES)

Attitudes: Q12. Please indicate to what extent you agree or disagree with the following statements:

1=Strongly disagree, 2=Somewhat disagree, 3=Neither agree nor disagree, 4=Somewhat agree, 5=Strongly agree (5-item scale)

- I would be emotionally capable of supporting a loved one who is facing a terminal illness/end-of-life issues
- I would support a loved one's end-of-life decisions, including refusing life-extending measures (e.g., intubation/breathing tube, CPR/Defibrillation).
- I would like to fill out an advanced care directive or revisit my existing advanced care directive to indicate my wishes if I become seriously ill.
- I think it would be beneficial to have a conversation with loved ones about my own end-of-life wishes.
- I would like to learn more about how to be better prepared for end-of-life decisions.

Intentions: Q8a. How likely are you to take any of the following actions?

1=Not at all likely, 2=Slightly likely, 3=Somewhat likely, 4=Moderately likely, 5=Extremely likely, 6=Have already done this (4 individual items; exclude those who selected "6=have already done this")

- Created a living will that specifies advanced care directives
- Designated a health care power of attorney
- Spoke with a loved one about their medical preferences if they become incapacitated (e.g., life support)
- Spoke with a loved one about my own medical preferences if I become incapacitated (e.g., life support)

Actions: Q7. Which of the following actions have you taken in 2025:

Select all that apply (2 individual items)

- Sought more information about advanced directives (legal documents stating your medical care or end-of-life preferences)
- Written or shared a social media post about advanced directives (for medical care or end-of-life)

COVARIATES (CONTROL VARIABLES)

Age: Q1. How old are you?

Gender: Q28. Please select your gender identity:

Dichotomized: woman, trans woman, genderqueer/non-binary coded as “woman”; all else coded as “other”

- Woman; Trans Woman; Man; Trans Man; Genderqueer; Non-binary; Other; Decline to answer

Disability: Q29. Do you identify as a person with a disability or other chronic condition?

Dichotomized: yes/other

- No; Yes; Decline to answer

Education level: Q31. Which is the highest level of school you have completed or the highest degree you have received?

Select one

- Less than high school degree; High school graduate (high school diploma or equivalent including GED); Some college but no degree; Associate's degree in college (2-year); Bachelor's degree in college (4-year); Master's degree; Doctoral degree/Professional degree (JD, MD, PhD)

Household income: Q32. What is your household income? Please indicate the answer that includes your entire household income before taxes.

Select one

- \$0 to 9,999; \$10,000 to 14,999; \$15,000 to 19,999; \$20,000 to 34,999; \$35,000 to 49,999; \$50,000 to 74,999; \$75,000 to 99,999; \$100,000 to 199,999; \$200,000 or more

Religiosity: Q33. How religious do you consider yourself?

0-10 scale (0 = Not at all religious; 10 = Very religious)

Political ideology: Q34. Overall, which description best represents your political ideology?

Select one

- Very liberal; Liberal; Moderate; Conservative; Very conservative

Geography: Q36. Which of the following best represents where you live?

Select one

- Large city (100,00 or more); Small city (less than 100,000); Suburbs; Rural area

Interest in TV: Q3. How interested are you in watching each of the following types of TV shows?

1=Not at all interested, 2=Slightly interested, 3=Somewhat interested, 4=Moderately interested, 5=Extremely interested (5-item scale)

- Crime, Police, or Legal Dramas (e.g., Law & Order, Chicago PD, Equalizer)
- Medical Dramas (e.g., Grey's Anatomy, Doc, The Pitt, Chicago Med)
- Comedies (e.g., Hacks, Georgie & Mandy's First Marriage, Ghosts)
- Competitions (e.g., The Voice, Survivor, Dancing with the Stars, Amazing Race)
- First Responder (e.g., 9-1-1, Chicago Fire, Fire Country)

Prior OD/EOL actions: Q8a. How likely are you to take any of the following actions?

Scale: number of items (0-4) for which "6=Have already done this" was selected

- Created a living will that specifies advanced care directives
- Designated a health care power of attorney
- Registered or verified my registration to be an organ donor
- Donated blood

Prior OD/EOL discussions: Q8a. How likely are you to take any of the following actions?

Scale: number of items (0-4) for which "6=Have already done this" was selected

- Spoke with a loved one about what they would like to be done with their body and organs after death
- Spoke with a loved one about what I would like to be done with my body and organs after death
- Spoke with a loved one about their medical preferences if they become incapacitated (e.g., life support)
- Spoke with a loved one about my own medical preferences if I become incapacitated (e.g., life support)

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