Commentators regularly mobilize deontological or consequentialist arguments within a framework of liberal norms to evaluate the moral permissibility or impermissibility of physician assistance in dying (PAD). In bioethics more broadly, some worry that this approach reduces ethical issues in healthcare to calculations of how to meet the moral minimum of obligations, ignoring the role of moral ideals, moral excellence, and supererogatory conduct. Perspectives endorsing virtue ethics in bioethics, medical professionalism, and healthcare are not new. However, virtue ethics in the context of end-of-life care has yet to make a significant impact on the debates over PAD. This paper contributes a virtue-based approach to PAD through examining recent work on narrative ethics in healthcare. By developing a dialogical virtue ethics, it takes into account concerns about how end-of-life decision-making impacts the disability-rights community and seeks to respond to the call for developing a disability moral psychology in bioethics. It suggests a new role for virtue in medical professionalism, where one prominent tendency has been to focus on reviving professionalism through addressing wider social injustices in healthcare rather than on end-of-life support and counseling.