

3 July 2007, 1230-1730

Today was the first day of my preceptorship. Looking back, one thought looms large in my mind: the ER is a depressing place to spend time. Within minutes of arriving at the hospital, I was in an examination room with Dr. X, talking to a patient who had come from his family practitioner's office and was complaining of shooting pains in his chest and arm. Nurses were drawing blood and giving him nitroglycerine pills as he very calmly told the doctor that he had high cholesterol (diagnosed five years ago; doesn't take his medication), that he smoked a pack of cigarettes every day, that he never exercises, and that he never goes to the doctor (except in "emergencies"). It made me so sad to sit across from this guy who had clearly given up on life that I almost cried. It is impossible for me to imagine a time in my life where I wouldn't care if I lived or died. This guy had made no effort to stay alive, and that is a hard thing to see in another human being. Even in Iraq, when things were really rotten, people still had hope for the future. I did not feel anything like that from this guy.

As we walked out of the room, Dr. X very calmly explained that the man would probably die very soon (within a year or so), based on his current medical condition and his very unhealthy lifestyle. He then went on to talk about the enormous number of patients that he sees every day who are effectively killing themselves by overeating, smoking, abusing drugs, or partaking in other self-destructive activities. I knew that everything he was saying was true, but it had never really sunk in before. When I pictured the ER, I was thinking of broken bones, accidental wounds, and strep throat- things that can be fixed. What I actually saw today was people at the end of long, slow declines. What I saw were people who have led extremely hard and unhealthy lives, who are coming to the doctor with problems that have progressed well past the point where medical intervention will help.

12 July 2007, 1300-1600

In my last entry, I talked about how depressing the ER could be. Today I'd like to talk about what that environment can do to people who spend their lives working inside of it.

Dr. X (my ER doctor) is a very smart, funny, and interesting man. I just found out today that he once spent six months in Pakistan training Afghan medical personnel during the Soviet invasion of Afghanistan in the 1980's! However, Dr G also has a calloused, disconnected bedside manner that I think can be attributed to his medical specialty.

I don't want to delve into specific incidents or patients, but I get a strong sense that Dr. X is immune to the suffering and ailments his patients are exhibiting. And who can blame him? How many overweight smokers can you treat for heart attacks until you run out of compassion? I think that Dr. X is a sensitive man who has turned his emotional side off as a defense against the seemingly endless parade of self-destructive patients that he has to work with as an ER doctor. The meth addicts, the drunken brawlers, the "avoidable" heart attacks- they have to take their toll. Especially when you're a doctor and you feel like you have to help people, even when they've shown no inclination toward helping themselves.

One solid thing that I have learned today is that I *never* want to become as calloused as Dr. X. There has to be some way to maintain your enthusiasm for helping people, even when you may feel that they should really be helping themselves. It seems to me that doctors have a responsibility to fight for their patients' health, even in those circumstances where the patient doesn't appreciate your concern. Every time a doctor sees a patient that smokes, even if he's only going to see him one time (like in the ER), he should encourage him to quit. Even if the patient rolls their eyes when he says it, it is better said and ignored than never said at all. That's how I would like to approach these situations if I were a doctor.

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17 July 2007, 0100-0500

Sometimes I worry about how interesting being an ER doctor will be in the long run (over the course of a career in medicine). Each time I go into the ER, I see very similar cases- older patients needing end-of-life care, drug-related injuries and overdoses, etc. I worry that after several years of seeing the same types of injuries/ailments, the job could start to get a little monotonous. I asked Dr. X what he thought about the issue, and he gave me an interesting answer. He started by admitting that some ER jobs can be extremely tedious- Corvallis, OR, is not the most interesting place to be an emergency medicine specialist. That being said, he still felt that his job was engaging, and that he was willing to accept a job that had fewer professional highlights in exchange for living in a small, safe town where he could raise his family.

Needless to say, this resonated with me on a personal level. Unlike many prospective medical students, I'm older and I do have to take my family's well-being into account when I decide what I want to do and where I want to do it. Being an ER doctor in New York may be really cool on the professional front, but what about the personal? Would my wife want to live in New York? Do I want my kids to grow-up in New York? How far do I want to commute to work? In the end, it really boils down to trying to find a balance between the career that I want and the family life I want.

I think what I need to do is sit down and really plot out what it is I want from a career in medicine, and then compare that with what I want my life as a whole to look like. There is definitely more to write about this, but I need a little time to mull things over.

26-27 July 2007, 1130-0200

It was another quiet night in the ER, so I spent a little time talking to Dr. X about his time in Pakistan. During the Soviet invasion of Afghanistan, Dr. X trained Afghan civilians in basic

medical care (apparently, part of the Soviet invasion plan was to kill all the health care providers they could find). He really enjoyed that time in his life, and I loved hearing about it.

Since my return from Iraq, programs like the one Dr. X was involved with, and organizations like Doctor's Without Borders, have really drawn my attention. The fact is, the world is an awful place, and I feel a very powerful need to get out there and do what I can to make things better. I don't need to travel to far away lands, and I don't necessarily need to be a doctor, but whatever I end up in, I need to feel like I'm making the world a better place. When I hear stories about doctors helping people, it really makes me want to be in the field. Few professions are of such direct benefit to mankind as medicine.

Becoming a doctor is an awful lot of work, but the more time I spend in the ER, and the more I think about the potential good that I could do as a doctor, the more I want to do that work. I came into this program knowing that I wanted to help people; now I'm almost certain that I want to accomplish that goal as a doctor. I'm not at all certain what kind of doctor I want to be, and I'm not tied to any one school or future home, but I'm definitely ready to start finding solid answers to these questions.

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28-29 August 2007, 1100-0300

Today was the last visit of my preceptorship, and I'm not certain of anything anymore. In my last journal entry, I said I knew that I wanted to be a doctor. Is that enough? Wanting something is the start, but can wanting something get you through three more years of undergraduate work, four years of medical school, and a minimum of three years of internship and residency? Sometimes it feels so far away that I'm not sure that I have the energy for the journey. I worry about the sacrifices that my family and I will have to make. I'm staring down years of late nights, time away from my loved ones, and lots of hard work. These are all reasons

that I left the military- does it make sense to start a new career that has so many of the drawbacks of my old career? I hate to keep repeating the same thing over and over again, but this really is the crux of my problem! I know that I'm smart enough and tough enough to be a doctor- the only real question remaining is "is this what I really want?", and I just can't answer that yet!

Life as a doctor would be an unparalleled opportunity to help people and challenge myself. It would create almost unlimited opportunities for travel and other adventures- things which are very important to me. Life is so short, you have to make the very most of it! I don't want to end up as an old man regretting that I didn't take a chance and try medical school. I know there are other opportunities out there, but none of them speak to me the way that medicine does, especially after this program. I'm in a position where I can see the goal, and I know that I want it, I'm just not sure if it's worth the work/risk to get from here to there.

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Notes on the Preceptorship Program:

This has been an outstanding experience for me. The main problem I had in the program was finding time to meet with my doctor. ER doctors have very unusual schedules, and it was a challenge at times to get together. My recommendation would be to extend the program a few more weeks, both to allow for the unusual schedules of some doctors, and to allow the students in the program more time to spend in the hospital. I did well over 30 hours, and I still want more. An extra week or two would be great!

One other problem I had was the reflective journal. I do a great deal of introspection as a normal part of each day. I spent several hours after each session in the hospital talking to my wife or pondering what it all meant to me. It was very difficult for me to then go to the computer and try and summarize all of the millions of things I was thinking about into a page or less of typed journal. I think in long sentences and lots of words, so my journal entries often felt forced

and limited. Given my own way, this journal would be 10-15 pages long. I realize that is more than most people would care to read, but I think that it's worth noting that some people think and reflect differently than others. Over all, I was very unsatisfied with my journal entries, and I'm a little embarrassed to submit them.

Thank you again for the opportunity to participate in this program. It has been *extremely* helpful to my thinking!