

Patient Encounters

Career advice, of sorts.

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Not everyone can point to the exact moment when their career became crystal clear, and they knew exactly what they were going to do with their life. But I can.

I was an intern. Just a couple of months into my first rotation on Internal Medicine. I was on call and paged to the ER. A frail, unconscious woman lay on a gurney. She was so tiny I could barely see her under the mound of blankets. Her daughters flanked the bed. Their mother was in her eighties and had lived a long and productive life. Her last several years had been plagued with Parkinson's disease and today she'd had the third major stroke. She was unconscious and waiting for the end. Her daughters wished a peaceful death.

It sounded reasonable to me. I wrote orders for comfort and arranged a quiet room upstairs, and without another thought headed to the next clinical situation.

The next morning on rounds I presented the case to my Attending Physician. He thumbed through the chart as I spoke, not meeting my eyes. When I finished and had summarized my plan of care, he looked up at me and spoke. "She has an elevated potassium."

Well, yes, I'd noted her abnormal bloodwork in the ER but there was nothing there I thought worth treating. The woman was dying. How would further tests and treatments help? So, I explained my rationale.

"No patient dies with an elevated potassium on my service." His words were final. He pulled rank.

Those were the words that changed my life.

Because, it meant, after a frustrating argument, that I had to change the orders for my patient. That I had to assault her with medicated enemas and frequent stabs for blood until her potassium came down to normal levels. Then, and only then, could I let her die.

I felt bitter and angry and impotent. I felt that I had betrayed that woman and her daughters. And I swore I would never do that again.

As I went through medical school and my residency, I loved every rotation (except for NICU) and could picture myself working happily in almost every field I tried. But it wasn't until that moment on rounds when the fire inside started burning. I had cared for dying patients before and while I felt comfortable doing it, it hadn't inflamed me. But the sheer indignity and brutality and stupidity of that comment, did.

It's been my life's work to prevent that scenario from happening again. My work to learn enough so that I had facts and science behind my decisions. My work to teach everyone how to care for the dying.

My work to advocate for those who have no voice.

All medical students enter medicine to help people. Some end up doing that by working clinically, day to day, in a variety of fields. Whether it's surgery or medicine, lab based or imbedded in conversation, it's taking care of those who need us. Most of us will never receive public recognition for the hard work we do. There won't be awards or media attention; we will quietly go about our daily work, making a difference in people's lives, sometimes without ever knowing just how much we affected someone. Some of you will divert to research and discover treatments that change lives in a myriad of ways. Others will mentor the next generation, either officially through teaching and supervision or informally, by coaching and supporting. It's all important and it's all valuable. Each is a small part of a much greater whole.

I encourage every student to find the flame that burns inside you. Let it be your guide to choosing what field you go into, what type of practice you have, and the mission of your medical life. Money, lifestyle, prestige are all nice, and naturally we all want them, but they cannot replace the sense of true accomplishment and satisfaction when you follow your heart. When all is said and done, remember the reason you fought so hard to get into medicine. To help people. Find the flame that lets you truly do that in the way that is right for you.