

Sometimes I Need a Reminder

When I picked up the chart from the rack, the patient's name looked familiar. I flipped to the triage notes on Mary Jane's chart: "15 y/o female c/o abdominal pain. Seen here last week for same." Last week, I learned that she was in a sexual relationship with a 20-year-old man and had been frustrated that her mother wouldn't talk to the police. I had warned Mary Jane about the dangers of unprotected sex, suggested that she stop smoking, treated her urinary tract infection, and sent her home.

Annoyed at this recollection, I went in to the examination room to see her. Mary Jane, a petite young lady sporting a "15-going-on-30" look, was lying on the stretcher, while her mother sat in the chair beside her. Mary Jane explained that she had finished all of her antibiotics but that the pain was worse than last week and had moved into her pelvis. I performed the requisite pelvic examination and found the textbook gonorrheal discharge along with characteristic cervical motion tenderness. "Wonderful," I thought, "only 15 and already has her first STD!"

I reviewed the results of her urinalysis and wet prep and wrote a prescription for pain medicine and an antibiotic cocktail before returning to share my findings with Mary Jane and her mother. I then gave them the name of the on-call gynecologist, hoping that Mary Jane would get adequate outpatient follow-up. I was not, however, prepared for Mary Jane's response. "You probably don't remember me, but you've taken care of me the last 3 times that I've been here. You put staples

in my head 6 months ago. I trust *you*, because *you're* my doctor."

My face flushed and my annoyance turned to guilt as I realized that she considered me her doctor. "Thank you," I said, "I'm glad to see you here anytime."

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When I entered medical school a few years before, I could easily recite the memorized answer to the question of why I wanted to become a physician when asked. My answer included phrases like "helping people," "intellectually challenging," and "to make a difference." Now, I was an intern wrapped up in the day-to-day activities of residency: scut work on the floor, the incessant beeping of the pager, and the difficulty of trying to explain to my young daughter why I had to be at the hospital instead of reading her a bedtime story.

That night in the emergency department, I had forgotten that beyond the late night shifts and frustration with patients that there was a chance to be part of a proud profession, earn the trust of my patients, and make a difference in the lives of the Mary Janes of the world. These were the real reasons I had worked hard to become a physician. Mary Jane unknowingly reminded me of this with her simple, kind words. Her visit to the emergency department was, perhaps, more therapeutic for me than it was for her.

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