LETTERS
TO A
CLERKSHIP STUDENT
FROM THE CLASS OF 2024
SCHOOL OF MEDICINE

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FOREWORD

To Each of You,
Wow. Congratulations. On your journey in medicine, you have arrived at the clinical year. Welcome, we are glad to have you.

As you move from the classroom theory of medicine into the realities of practice, I hope you find wisdom in the following pages. For these letters were written by people just like you. People who, at some point in their own lives, were on the eve of the clinical year too. Take note of their honesty. They offer a realistic window into all the good and bad that the clinical year has to offer. From witnessing a first birth or first death, to learning which attendings and residents to avoid on rounds, this year will shape you. It will be critical in molding who you are for the rest of your lives, how you view our most noble profession, and where you might find your career fit.

So, what advice do I offer? How would I encourage you to not simply survive but rather thrive this year?

Do your best to learn your patients’ stories beyond their illnesses, pathologies, and treatment plans. When taking their histories, be curious about them as people, simply human to human. What did they do in the days, weeks, or years leading up to your seeing them? Who is in their support network? Where are they finding the strength to face whatever they are facing in the hospital or clinic? How are they coping? You will note that these questions are outside of the traditional queries like “what makes pain worse?” or “are you noticing blood in your poop?”. Instead, they focus on the humanity of the individual in front of you. They remind you of why patients have come to you for help in the first place. They elicit the reasons why people behave the way they do and what they find most important. They permit the patient to be more vulnerable in their relationships with medical providers. Knowing this information will keep you grounded and humble. It will keep you in the present moment and serve as fuel for you to have energy not only for today, but also for tomorrow and the next day.

The clinical year is undoubtedly a milestone in your development. Enjoy it.

Maurice Scott, MD
Assistant Professor, Dept of Medicine
Assistant Dean of Student Life
University of Colorado, SOM
INTRODUCTION

From 1903 to 1908, Czechoslovakian poet, Rainer Maria Rilke, wrote a series of letters to a young, would-be writer about surviving as a sensitive observer in a harsh world. Rilke wrote about taking risks not only to succeed but also to fail: “Always trust yourself and your own feeling; if it turns out that you were wrong, then the natural growth of your inner life will eventually guide you to other insights.” He wrote about being impatient to know everything but being comfortable with knowing nothing: “Try to love the questions themselves as if they were locked rooms or books written in a very foreign language.” And he wrote about being aware of yourself in the world but being cautious about taking yourself too seriously: “Don't be too quick to draw conclusions from what happens to you: simply let it happen.”

That book, Letters to a Young Poet, has inspired many subsequent writers and teachers to share their own observations and insights, their own words of wisdom and warning, with other young readers embarking on a life in the arts, in religious and public service, or in the professions of law and medicine. These individual works are now part of a series called The Art of Mentoring and include such titles as Letters to a Young Jazz Musician by Wynton Marsalis, Letters to a Young Conservative by Dinesh D'Souza, Letters to a Young Contrarian by the late Christopher Hitchens, and Letters to a Young Lawyer by Alan Dershowitz.

The first collection of Letters to a Young Doctor was in 1996 by surgeon and writer Richard Selzer and meant to be, in his own words, "pedagogical and comradely--a reaching out to share." The goal of the second, Perri Klass' 2007 volume, Treatment Kind and Fair, was "a combination of maternal and medical wisdom." Her letters are addressed to her son in medical school--the very child born during her own education at Harvard in the 1980s, where she was one of only four women in her medical school class. Writing about and across their respective lifetimes, both Selzer and Klass not only reveal the compelling mysteries of the world of medicine but also represent the tedious challenges of the job of medicine.

Members of the Class of 2024 are now part of this long and respected literary tradition by giving you practical advice, helpful suggestions, and personal reflections on the year ahead of you in this collection, Letters to a Clerkship Student. Since launching this project a number of years ago, I, like all of the readers of all of such letters, have been given the opportunity to learn along with you, to marvel at your courage and creativity, to applaud your stamina and resourcefulness, and to bear witness to your pain and your joy. Just as these letters provide a mirror of your own experiences and emotions in the clinical year, they also provide a window for those of us looking in at you and looking out for you as you make this journey, so please share them with your partners, your family members, your friends, and your teachers.

I will close, appropriately enough, with another passage from one of Rilke's letters in which he encourages that very first reader to experience and express all that is happening around him, to him, and because of him: "Turn to what your everyday life affords; depict your sorrows and desires, your passing thoughts and beliefs in some kind of beauty. Depict all that with heartfelt, quiet, humble sincerity." If you follow such advice, just imagine what letters you yourselves will write . . . same time, next year.

Therese (Tess) Jones, PhD
Arts and Humanities in Healthcare Program
Center for Bioethics and Humanities
FOREWORD FROM THE GOLD HUMANISM HONOR SOCIETY

Hello and congratulations!

Let us be the first to welcome you to an exciting clerkship year. All of your accomplishments in medical school have brought you one step closer to becoming the compassionate and capable physician you have worked so hard to become. We hope you take a moment to celebrate before charging full speed ahead.

We are here to say that we believe in you. We are proud of you, and we are rooting for you. Though we have no doubt that this upcoming year will have its profound, life-changing moments, we are also aware that it may come with some steep learning curves. It is okay to stumble. For every one step backward, you will take two steps forward.

Clerkships are a time of personal and professional growth. You will discover the patient populations with whom you especially bond and are excited to see despite being sleep-deprived and over-caffeinated. You will be surprised by how quickly patients rely on you as a source of support and how comfortable they feel sharing with you their life stories. As you help patients navigate the ups and downs of their healthcare journeys, you will celebrate their victories but also share their moments of sadness and uncertainty. Each patient encounter will teach you something about medicine and yourself.

To help ease you into clerkships, here are some tips and insights:

1. The day before your rotation, drive to the clinic or hospital. Determine your optimal driving route, locate parking, and make sure your badge works.
2. For every embarrassing moment or “failure” to answer a pimp question correctly, there is a funny story to tell several months later.
3. We have all accidentally contaminated the sterile field before. It is okay. The hospital can afford the extra set of gown and gloves.
4. Healthy student, healthy patient. To take good care of your patients, you must take care of yourself first. On your days off, rest and recharge with some craveable snacks and binge-worthy TV shows.
5. You will feel lots of emotions during clerkships. Joy, sadness, hope, fear, clarity, confusion, contentment, disappointment, and joy again. These are all normal emotions, and it means you are doing clerkship year right.

Of course, these insights are more helpful hints than a steadfast guidebook to clerkship success. Each student finds their own rhythm as they grow into their clerkship year. Some find their groove sooner than others, but every single person will get there.

The letters enclosed in the following pages each tell a story. They may resemble your story, or they may seem something radically different. Let each letter be a thread that forms the fabric of what it means to be a CUSOM student. As you turn these pages, let yourself find comfort in the warmth of that fabric and know that among us, you are never alone.

As you settle into this new space, please do not forget your peers, your mentors, and those who have come before you. We are excited to see you thrive in this new role and cannot wait to support you in any way we can.

We are your community, and we got you. Welcome to your clerkship year.

Nikolai Harroun
Jin Huang
Brenda La
Linh Nguyen
Lexie Ross

Gold Humanism Honor Society (GHHS)
Class of 2023
On Caterpillars

A quick confession: Letters always struck me as attempts at sage wisdom from strangers who are bold enough to think they have it all figured out. I’m now one of them despite believing that unsolicited advice is equivalent to a thrift shop find: something dusty that has been cleaned up a little and offered at a steep discount in the hope that it might be of use to the next person.

My clerkship experience was my “caterpillar stage.” I was starting to become… well, something. It felt like it was going to be something awesome, but I wasn’t sure what it was going to be. Amidst all the growth, I still felt a little awkward, pretty clueless, and about as useful as any other creature with an ambiguous purpose and too many appendages. And there was so much that I wished someone had told me at the start!

This is still unsolicited advice, but I am motivated by the hope that perhaps some small, dusty piece of my experience might help the someone who needs it most when they need it most.

- At times, it might seem like your friends are already hitting their stride and succeeding at everything they touch. They’re not. Don’t sweat it.
- Stick around after you finish your notes to talk with your patients from time to time. They will teach you things that you can’t learn from question banks.
- Splurge on some pens with a 0.5 or 0.38 point. Your notes may not be any more legible, but you’ll fit more of your frantic rounding scribbles on the page.
- Start doing as soon as you can. It’s daunting to just start trying to do the thing (whatever it is), but the skills will stick faster.
- Don’t use your own stethoscope on a C. diff patient.
- This might hurt a bit. Parts of it might hurt a lot. Parts of it may not hurt at all, even if you think maybe they should’ve; there’s nothing wrong with you, or how you feel.
- Brush your teeth & tongue or do a good mouthwash swish before donning an N95.
- Advocate for yourself. You are worth it.
- Ask if someone has the bandwidth for you to vent before you do so.
- Ask if someone has the bandwidth for you to share your wins before you do so.
- You are not the first person to feel like you’ve forgotten everything you’ve learned so far. You will not be the last.
- Take 5-10 minutes daily to do a core workout, especially during immersions. It will keep you from feeling like your spine is going to drop out of your body when you’re 3 hours deep in rounds or a surgery case.
- Pee and eat a snack between cases.
  Don’t need to pee? Not hungry? I said what I said. Pee and eat a snack between cases.
- Look up. Watch the AIs and interns on your team and strive to do what they do.
- Ask for help. Ask for feedback. Both things will only benefit you, even if it’s not in the way you expect.
- It’s okay if your brain leaves your body when someone asks you a question. Pause, think out loud if you can, and never be afraid to say, “I don’t know…”
- … Though ideally, you’ll follow it with “… but I’m going to look that up.”
- Buying the expensive, 80-ply, ultra-soft, lotion-infused tissues is an act of self-love that no one can take from you. Your big, beautiful brain is worth hundreds of thousands of dollars at this point; you’re worth this investment, too.

And finally,

- Save the quotes, texts, or feedback that make you feel like you did something good – no matter how small it might’ve been.
Even if this year helps you realize that patient care is not for you, there is something worthwhile in it for everyone. I promise that even at your lowest points on your hardest days – no matter what your caterpillar stage has looked like – there is something worthwhile in you, too.

*Nothing about your being here was ever a mistake or an accident.*
*You are worth every borrowed penny, every ounce of effort, and every moment of time that brought you to this point.*

Re-read that as often as you need to. If you need to hear it in person – whether it’s over coffee, a 2 AM text message, voicemail/phone-tag, or with a hug in a random hallway at some random hospital where our paths cross – that’s cool too. You’ve got this and know there is always someone who’s got you too.

Olivia Starich
832.523.5890
Conversations with Myself

I wanted to check in with you.
How are you?

Checking in allows us to be a better
Family Member.
Student Doctor.
Teammate.
Community member.

What helped you feel joy today?
Which sensations, sounds, or smells?
Could you tell me a story about your joy?
Could you show me with your body, in a picture, or in a song?

By accentuating our joy,
Our happiness restores our humanity.

Could you tell me
How you made a difference to someone today?
Just one person.
How you made strides toward your goal today?
Just one thing you learned.

By noticing the impact we make,
Our confidence restores our humanity.

Would you say you are a person
Whose actions align with your values?
In what ways?

By improving our work-life balance,
Our peacefulness restores our humanity.

How did you go out of your way today?
To help someone feel
Heard or included?

By treating others gently,
Our kindness restores our humanity.

Our humanity
Is our pulse.
Our signature of life.
Our impact.
Our advocacy.
Our wellness.

Celina Sarangi

Special Thanks to Sam Rodriguez
Dear Clerkship Student,

“VEAL CHOP” is a mnemonic that we’re taught in our OB clerkship to remember the different types of changes you can see in fetal heart rate during labor and delivery. Variable deceleration = cord compression, early deceleration = head compression, etc. It was a useful mnemonic to use when I was staring at the fetal tracings on the screen in L&D and useful when I was taking my OB shelf exam. It was less useful, however, when I was in labor myself four weeks after my shelf, giving birth to my son. “Is that a decel? Is it early? Variable?” I’d ask myself as I tried to see the tracings on the computer out of the corner of my eye. “Is everything okay?”

The medicine that we see in our books and our patients doesn’t cease to exist when we close the book and leave the wards. The processes we are learning about are happening all the time in our own bodies, the bodies of our family members, the bodies of our friends - whether we think about it or not. When I had a baby in the middle of my clerkship year, I learned the hard way that it is almost impossible to stop thinking about the things we’ve seen. Having half of an MD does very little to reduce your anxiety about these things. We’re trained to look out for red flags: the things we cannot miss and need to rule out to make sure our patients are not in a life-threatening situation. But red flags are not always black and white. When you’re thinking about someone you love, whether a parent or a child or a close friend, sometimes red can be easier to see than shades of gray.

Before your clerkship, you knew in theory that these things existed. You studied chronic granulomatous disease and knew the pathway that led to an impaired oxidative burst. You memorized the lab results that are indicative of congestive heart failure. You thought through the coagulation cascade and what conditions can lead to hypercoagulability. Starting now, though, you will be sitting in the room with a family while they decide whether to ask their child’s older brother to donate his healthy bone marrow to cure his brother’s CGD. You’ll be getting to know your patient who has CHF and will learn what their favorite type of music is. And when you get home, someone you love may ask you to help them decide whether they need to be seen for their calf pain. You’ll wonder: “Muscular strain? Compartment syndrome? DVT?” Because you’ve now seen the effects of these diseases, not just their biochemical underpinnings, your emotions might be a bit more intense than they once were. You’ll question your gut, and your mind might be a little more inclined to see a red flag because you know what happens when things go wrong.

I delivered a healthy baby boy in the middle of my clerkship year. No decels on his tracings, no cord compression, just an anxious mom who knew a little too much. That extra knowledge is a gift, one I can share with my patients and my family, but it will be an ongoing process learning how to manage the accompanying worries that come along with it. And while my baby and I have made a few extra trips to the pediatrician to rule out some of my worries, overall, we are doing great, and I wouldn’t trade being a 0.5MD mom for the world.

Paige Romer
Dear Clerkship Student,
As we begin to know and care for our community of patients – sometimes at incredibly difficult moments – and are presented with glimpses into their world, I propose to you the following:

Approach those you meet with compassion…with a sense of care and curiosity. Let your level of puzzlement brew when something does not make sense and continue to wonder why. Similar to the illustration from Le Petit Prince shown below, foster a sense of creativity when considering patient cases, differential diagnoses, and the various ways one’s background, cultural identity, and interpersonal relationships intersect with their medical care.

Translation:
“My photo does not represent a hat. It represents a boa constrictor that is digesting an elephant.”

Like complex medical and psychiatric presentations, at times, things are not immediately apparent. It is with patience, listening, engaging, observing – all accompanied with a careful consideration of multiple perspectives (vitals, labs, collateral, cultural implications) – that one may approach a greater sense of diagnostic clarity. Sometimes a flexibility in thought and adaptability to synthesize new, and at times conflicting, information is helpful. Thus, I propose the practice of openness while considering the evolution of a patient’s case.

And as things get difficult, as they very well may, stay in touch with your community and reach out for support. Perhaps another will evoke a perspective and a sense of consolation that can stand as a reminder of our shared humanity. Perhaps they will remind you of the elephant inside the boa constrictor.

Throughout this journey, I hope you carry compassion for both yourself and those you meet. Take moments to peek at the world and wonder why things are the way they are and that, with reflection, you recognize your growth along the way.

Cheers,
Yasmine Dakhama
GHHS

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Dear Clerkship Student,

The year you are embarking on will be an undertaking unlike any other. This year will push you in many ways, and in return, you’ll find yourself changing in ways you didn’t think you would. You may question your decisions that led you to this point. You may wonder if medicine is right for you. You may think about what your life would look like had you chosen a different career. But you’ll find that you’ll always be drawn back towards your initial motivation that made you press send on your AMCAS application. Use that motivation as your cornerstone. On the hard days. On the easy days. Keep whatever motivations it may be that led you to this point near and dear to your heart and use them as a fuel to help you push onwards and upwards during your journey.

During clerkships you will be tired, and you will be stressed. But that’s okay, there will be numerous moments during your experiences that will make it worth it. The first time you hold a baby whom you personally delivered. The face of a relieved loved one after you tell them their family member’s surgery went well. The laughs you share with patients in clinic. You’ll see hundreds of patients during your clerkship, and each one will have some influence on your journey. See them as your teacher and tell them you’re ready to learn. You’d be surprised by what you come away with just by talking to your patient. Though to be fair, some will be more helpful than others! Keep in mind that what you’ll remember the most is not some UpToDate article you read, but the fond memories you shared with your patients. You’ll feel honored to have been a part of their care and helping them meet their goals, whatever it may be.

Moving forward, my only real concrete advice for the clerkship year is to find an outlet. You will need something outside of medicine and clerkships to keep you grounded. While it’s important to be available and present during clerkships, it’s more important to take care of yourself. You need to find ways to unwind at the end of a long clinical day. Whether it’s a short walk, a phone call with a loved one, or 20 minutes of TV, find an activity that has nothing to do with medicine or whatever rotation you’re doing, and enjoy it. Those 20 minutes you take for yourself will be more beneficial than any studying, reviewing, or research you would have done anyway. You can’t take care of others if you don’t take care of yourself first.

Enjoy this year, it will be fun. It will be hard. It will be confusing. But you’ll come out on the other side one step closer to accomplishing your goals, whatever they may be.

Michael Persinger
Today, Tomorrow

Dear Clerkship Student,
There will be days that you will be so frustrated. Frustrated at your own mistakes, frustrated by patients who no-show, frustrated because you thought you’d have the chance to do this procedure or that interview that went to someone else. But there will be many more days that you will be delighted. Delighted by the progress you’re making, delighted that you made a patient laugh, delighted because today you had the opportunity to try something new.

There will be days that you will be so bogged down. You have so many notes to write and so much to study. You have so few right answers and so little energy. But there will be many more days that you will be uplifted. You have so many babies to deliver! You have improved so much! You have so few knots left to learn! You have so little reason to be scared!

There will be days that you feel weak. Today you couldn’t find the words to comfort a patient. Today you cried after a trauma. Today you were overwhelmed. But there will be many more days that you feel strong. Today you retracted for three whole hours. Today you calmed an anxious toddler. Today you took care of yourself.

There will be days that you will be so tired. You will fall asleep at your desk, then your eyes will snap open with your alarm at 4:30 AM. You will be certain that no time has passed because you can’t possibly still be this tired after a night of sleep. Only the creases your notebook made on your cheek will convince you otherwise. But there will be many more days when you will wake up feeling electric. Your eyes snap open with your alarm at 4:30 AM, and you don’t even notice the creases on your cheek. You grab your stethoscope as you bound out the door.

There will be days that you will be so unsure. Was my differential diagnosis correct? Did I miss something on the x-ray? Were my sutures good enough? Did I make the patient feel heard? But there will be many more days that you are certain. Certain that, though your differential was incomplete today, you’ll be sure not to miss the diagnoses tomorrow. Though you didn’t see the fracture today, you’ll make fewer mistakes tomorrow. Though your sutures were crooked today, tonight’s practice will pay off tomorrow. Though you stumbled with the patient today, his feedback will help you support a patient tomorrow.

There will be days that you will be so unsure. Will I be a good doctor? But hopefully, there will be many more days – more and more and more – that you are certain. Yes. I will.

Laura Meimari
Dear Student,

The things I carried into clerkships:
- The patient list I printed at 6:30 AM, folded like the residents do
- 2 pens (an attending might borrow one and never return it)
- My stethoscope
- “I don’t know.”

The things I carried away:
- An apple pie recipe from a patient that called for pears and plums, but no apples, with neatly drawn Pyrex cups and baking equipment in the margins
- 1 good pen (I ask for my pens back now)
- “I don’t know, but I’ll find out.”
- My stethoscope with a metal name tag on it after I nearly lost it once
- That evening in the OR, as an MS2 on my first rotation, I wondered in a haze why they were counting the instruments when the patient would die that night, if not on the table. His bowels were ischemic. Blood was hanging in bags. There was snow falling outside; I couldn’t see it, but I knew from the weather report earlier, and I would brush inches of white from my windshield after leaving the hospital.
- Mr. A, almost a centenarian and sharp as a hawk, who would talk to me before 7 AM if I brought him a hot coffee (black) and 2 cheese sticks from the patient fridge. His goal the first day? “To meet the Grim Reaper.” He didn’t meet the Grim Reaper that day and I got to know him over a week. He laughed about how he figured out a solution to a mechanical problem, saving his family thousands of dollars, saying he’d never had much of a formal education, but he did have common sense. He told me about the first time his wife didn’t recognize him. I charged his hearing aids each day. He said I was going to be a good doctor, and it meant more to me than when any attendings said that to me. When he was discharged, I was on my day off, but the resident contacted me. I returned for his send-off, with 2 cheese sticks.
- The woman my age, 10/10 pain, lying in the dark all day with the light of her phone illuminating her face, no visitors. Flowers appeared one day on her table; I was relieved that someone cared.
- The man to whom I wished happy birthday, who could not say anything besides his own name, and who had nobody in this world left. His nurse wrote ‘Happy Birthday!!!’ and drew 3 huge balloons on his whiteboard. They erased his whiteboard the next day when he died, but I can still see the balloons in bright blue marker and him gazing into space.

What I carried away means nothing to anyone except me, but these things will be in my pockets forever, in a wooden box in my brain, inside my core. I know you will find your own things to carry away. Some incredible, some unimaginably sad, some you will never speak of to anyone, and some you may want to share with everyone you can.

Best,
Vivian Lu
Dear Clerkship Student,
It will be wonderful. It will be different than what you expect. You might have certain ideas, and you might be reading through these letters in hopes that you’ll find the answers or the best advice. Regardless of what you learn, and regardless of your expectations, your clerkship experience will be unique and full of unknowns. This is not at all a bad thing; in fact, it’s closer to reality than the other parts of medical school.

You will quickly learn about the interplay between yourself and your environment, both professionally and personally. Your clinical sites and team members have a major impact on what your experience will be like. Take this as an opportunity to realize who you want to be (or don’t want to be) as a future resident and attending. Be mindful about the hierarchy of medicine, show gratitude for teaching and learning, and exercise compassion and humility in all your interactions.

Most importantly, strive to care for your patients as if you are fully responsible. If you are or have ever been a parent or caregiver, you understand the burden of accountability for another human life. During this year, learn the balance between upholding patient autonomy and counseling patients, and how both come together in shared decision-making. Endeavor to put the patient in charge of their own care. Respect what gives others a sense of purpose and strive to find your own.

All my best,
Setareh Ekhteraei
Dear Clerkship Student,

Congratulations on finishing your 1st year of medical school! It’s an exciting time as you embark on your clinical year.

Recognizing the value of your time, I want to share some “high-yield” tips that I wish I had known when starting my clerkships.

1) Advocate for yourself.

Entering a new medical environment can be intimidating. While everyone in the clinic plays an essential role, remember that your primary goal is to learn. Take charge of your learning process!

One approach is to request the grading criteria that preceptors use to evaluate students from your course directors. This will allow you to establish specific long-term goals with the direct input of your preceptors. Setting goals together with your preceptors is an effective way to advocate for yourself to take on more responsibilities in the clinic. Don’t be afraid to push yourself to see patients independently and present comprehensive H&Ps early on. You can also ask to focus on specific patients within your preceptor’s schedule, which will allow you to tailor your learning experiences and deliver high-quality presentations on a smaller number of patients.

2) Create user-friendly references.

As part of your goals, consider presenting a learning topic to your preceptors every week or every other week. Personally, I found it helpful to compile key information, including differentials, next steps, and orders, into a PowerPoint presentation on my computer. I would present this to my preceptors. Later, it became a handy reference that saved me from repeatedly searching for the same information on UpToDate or other resources.

3) Practice, practice, practice.

Throughout my clerkship year, I adopted the motto of “quantity over quality.” While it’s important to strike a balance, this motto can be helpful if you tend to be perfectionistic. Remember that making mistakes and saying things that may seem less than brilliant are part of the learning process as a student. Try not to dwell on your mistakes and keep taking on opportunities to learn.

This principle also applies to exams. The best way to prepare for your shelf exams is by tackling a large number of practice questions. Avoid getting too caught up in specific percentages or incorrect answers. Focus on learning what you need to learn and keep moving forward.

That’s it! I hope you find these tips helpful. I have no doubt that you will excel in your clerkships!

Melody Jan

GHHS
Dear Incoming Clerkship Student,

You are about to undergo one of the greatest transitions in medical school. My thoughts about the clinical year changed during every stage of the past year. I’d like to share with you what I was feeling during these different stages. Before starting though, I want to validate whatever feeling you have about this upcoming year. Excited, nervous, feeling like you don’t know enough (I promise you, it’s more than you give yourself credit for), uncertain, whatever it may be, just know that what you’re feeling is okay, normal, and temporary.

**Before Clinicals:** I was nervous. Jumping into an unknown environment with these new expectations is so different than the didactic year. For many of us, the didactic period was familiar. We have all sat in a classroom before, listened to lectures, taken tests. And we have probably been good at this. So, it’s comfortable. Being in unfamiliar environments can be uncomfortable. I was going to a place where not only did I not know where to go, I didn’t even know what my day would look like. I hadn’t nailed my presentation style or figured out how to generate a differential diagnosis. What I would tell myself at this point is just to take it one day at a time. The learning you will experience over the first few weeks will be gradual, but you will learn. Be gracious with yourself and understand that your expectations for yourself are probably greater than those around you at this point.

**During:** Getting halfway through the year feels like such an accomplishment. Those nervous feelings are gone and have now been replaced by a more positive feeling: a feeling of familiarity. If you are anything like me, there will be a point when the newness of the year has worn off, and things begin to feel more routine. It was at this point when I felt like all of my energy was devoted to learning and not adjusting to my surroundings. And boy did I learn a lot. What I would tell myself at this point is to really embrace what you are doing. This point in your education is a sweet spot. It is also difficult, stressful, and challenging, but also a sweet spot. You have one job while in clinics and hospitals, and that is to learn. What I will say is that you will never have less responsibility than this when it comes to patient care. I do not mean to sound inconsiderate as I know that at this point you have so much happening, but it is true in a way. There is so much protection around your choices for patient care that now is the time to really embrace your learning and make as many suggestions as you feel are appropriate for patient care. I know it won’t always feel like a sweet spot, but when you’re feeling down (which you probably will at some point) try reminding yourself of this. A year from now you will look back on this time, and hopefully it will be fondly.

To talk about the hard times, I do want to acknowledge that there are tough times and situations at this point. You will hear patient stories and situations like you have never seen before. Some will make you happy, others sad. I have cried multiple times this year. I’ve cried tears of joy during a labor and delivery shift. I’ve cried from sadness for patients whom you just can’t help. Make sure you debrief after these sessions. Find your support group. I recommend a support group with your classmates. Do not be afraid to take care of yourself. You will see things that break your heart. And you should talk about this with others.

**After:** Four months after the end of clinical year. At this point I feel like I have an objective view of the clinical year. I don’t have to contend with the stressors of being in clinic and can discuss how I felt about this past year. What I can tell you is that I know I was stressed, but that is not what I remember the most. I remember the stories I heard and the patients I met along the way. And what I remember most about these stories are the emotions I had. It is crazy to think just how much you can grow in a year. I know this past year was difficult, but I do look back on this time with great appreciation. I am reminded of just how special this opportunity was.

What I want to say to you at this point is that this clinical year will come to an end, and I want you to be so proud of yourself when you get there. As you are going through the year, you might forget what an accomplishment you are achieving on a daily basis. The learning you will have this year comes in small consistent daily doses, and some days can be grueling. Don’t forget how important you and your learning are; this can be hard to do sometimes. Take care of yourself and embrace this amazing and crazy journey you are about to embark on.

With all the confidence in you,
Whitney Kelly
Dear Student,
Your view of medicine will no doubt change during this next training phase. Simply seeing medicine applied to real, living, breathing human beings causes a profound shift in perspective. It turns medicine from the black-and-white clinical science you've learned into a more nebulous art form, the answers more complex than your textbooks might suggest. I want to share with you one experience from my clerkship, when I began to see the art of medicine as well as medicine's limitations.

On my first day in clerkship, an elderly patient mentioned having chronic back pain. I immediately started scanning my head for back pain differentials I had learned. Was it a disc herniation, a compression fracture, an infection, or spondylolisthesis? Honestly, I'm not even sure what that last one is. I was overwhelmed. It was one of the most common complaints, yet I felt lost trying to figure out what to do next. I knew how to name back pain causes, but much less about how to manage an affected patient. Did she need an MRI? An x-ray? Did she need narcotics? I tried to drill down deeper into her complaint: When did this start? What does it feel like? Where exactly is this pain? Was there any trauma? I tried to dig through her chart for a past workup: Had she had any imaging done? What was she prescribed for pain control now? Ultimately, I did the sensible thing any good medical student would do. I told the patient I would see what my supervising doctor thought, and we would devise a plan together.

After discussing the case for a couple of minutes with my preceptor, endearingly known to her patients as "Dr. Julie," we went back to see the patient together. To my surprise, she didn't immediately start talking about the different treatment options or what workup was needed. She started looking at the bigger picture of the human being before us. This patient had had this pain for a long time and was nearly 80 years old. Very few of us make it to our eighth decade without chronic pain somewhere. Instead, she talked to her about how this pain was affecting her. Was she still able to go for walks with her dog, cook and care for her aging husband, and babysit her grandchildren? When we viewed the pain within the framework of her life, she shared that the back pain wasn't limiting her too much, and she didn't want anything to treat it. She simply wanted her doctor to know about it.

I left that room with my head spinning. The science of medicine had taught me to characterize, diagnose, and recommend evidence-based treatment for a patient's complaints. I thought my role was to cure patients and save lives. In that visit, I learned something about the art of medicine. I learned some patients want you to acknowledge their suffering, not fix it. And it was also the first of a series of experiences that taught me an even more valuable lesson: sometimes, the only thing we can do is to acknowledge a patient's suffering. Medicine is young and growing. We are limited in what we can treat and even more limited in what we can cure. Many conditions we might not even be able to name. I learned that day and continue to learn every day that one of my most important roles as a doctor is to walk with my patients and support them in their health and disease. I don't mean to say that I don't try to cure my patients or throw science out the door. I will always work to characterize, diagnose, and treat my patients, but in the meantime, I will also be there to walk alongside them through their journey of health, sickness, and eventually death.

I share this story with you while I am still in the infancy of becoming a doctor. Like you, I have endless amounts to learn, and I know my vision of medicine will continue to evolve as my practice grows. My ultimate objective for my future career is simple: keep an open, flexible mind and always continue learning, both for my patients and from my patients. I hope you can take this open mind with you too as you start this next phase of your training. To leave you with one piece of advice: if you ever feel lost in the medicine, take a minute to get to know the person in front of you. They might hold all the answers you need.

Marie Stewart
Dear Student Doctor _____,
Welcome to clerkship year. It’s here! You can finally spend your days outside of the classroom using all the communication skills and knowledge you’ve tirelessly gained throughout pre-clinical. Clerkship is quite the experience. It is the best of times; it is the worst of times.

It is one of the first times in your training that you feel you are actually becoming a doctor - a wonderful, fulfilling, and scary feeling. It is the beginning of figuring out what kind of physician you’ll be. It is also tiring, filled with self-doubt and uncertainty. Clerkship is a bit like the puberty phase of medical training, so here are some tips and thoughts to help along the way:

1. **Take breaks.** I know the first tip shouldn’t be something completely unrelated to clerkship, but breaks are important! Make sure to find time to do something that isn’t medicine even if it’s 10 minutes.
2. **Learn from your peers.** There are great physicians among you. Some of the best patient care and compassion I witnessed during clerkship were from fellow student doctors.
3. **Take the time to do the things others cannot.** Improve the care of your patients by taking the extra time to talk to them and their families. Clinics and hospitals are busy, and time can be a commodity that you have.
4. **Remember that patients are more scared of you than you are of them.** Just kidding. But patients are people too; they want to be treated like human beings rather than sick bodies.
5. **You’ll imagine yourself living different lives in different specialties.** Flirting with the possibility of a million diverging paths. You have plenty of time to decide; enjoy your time with each.
6. **Advocate for yourself.** It’s hard to be a learner. You can feel like you don’t know what to do a lot of the time. Advocate for yourself to do things you are comfortable with like giving a presentation, calling a consult, seeing a consult.
7. **You will never be the one with the most medical knowledge in the room.** Try to be the most compassionate and empathetic instead. Be the one who knows the patient the best, and the one the patient trusts the most.
8. **Cut yourself some slack.** At some point you will feel as though there is too much to learn, and it will all seem very daunting. Like you couldn’t possibly learn all there is to know. It will come. Give it time.
9. **It’s okay to feel like you did a good job.** We are often taught to strive for the best and constantly look for ways we can improve and push ourselves. Sit in the feeling of a job well done, a patient’s gratitude, a pleasant interaction.
10. **It can feel like a lonely process, but you are not alone!** Your peers and countless others before you also experienced the beast of clerkship year. Talk to them about your experiences. Complain, grieve, worry, together.

Clerkship year is something that is hard to describe unless you’ve been through it, so see you on the other side. You’ll do great.

Good luck and have fun!

Best,
Nikita Deng
Dear Clerkship Student,

For centuries, medicine has been taught through experiential learning at the bedside, where those with the humility to open their ears, minds, and hearts stand to gain priceless knowledge and wisdom with which they can care for and heal those around them. Waxing poetics aside, clinical year truly is a transformative experience. Although there are lots of great experiences to be had, I think it’s equally important to acknowledge and validate that this journey is a difficult one that can present challenges along the way. There were times when I felt like the work that I was doing was insignificant, that no matter how hard I tried, I was constantly making mistakes, that the sheer amount of knowledge expected of me was just impossible to learn, that I was just an outsider trying and failing to fit in, that I would never find certainty within myself, and that maybe I didn’t actually have what it takes. Seeing so many talented people around me made it easy to feel like I was alone in feeling this way. It wasn’t until I confided in others and spoke about some of my failures and challenges openly that I came to realize how commonplace they can be. By being vulnerable about the difficulties I experienced, finding camaraderie among friends and classmates, and building the perseverance to push through, I achieved more during my clinical year than I ever could have hoped for. I met and worked alongside some amazing people. I learned how to navigate a new workplace and speak its unique language. I proved what I am capable of and came to have others trust my word and rely on my skills. I formed memorable connections with patients at the bedside. Ultimately, I developed a deep sense of pride in my work and in being able to call myself a colleague of the many people who do life-changing work in the hospital every single day. Low moments during clinical year are difficult. They are common, they are valid, and they are expected. Just know that our moments of greatest growth and triumph always lie just on the other side. Don’t stop pushing forward!

Abstract wisdom out of the way, here are some actionable tips:

- Find out where the best snack foods are. CHCO has the best-stocked nourishment rooms by far, with the VA a close second; dipping animal crackers into Jif peanut butter cups is an A+ snack idea that a fellow once taught me.
- For wards/surgery rotations with early morning starts, I found it valuable to skip breakfast at home and bring a protein shake to drink a few hours into the morning. Pushing back breakfast until right before 8 AM rounds kept me fueled through the afternoon a lot better than if I had eaten at 4:30 AM.
- Once you’re done with your tasks for the day, don’t be afraid to assert control over the rest of your day’s schedule. “Hey, I’m gonna take off and get some studying done. Is there anything I can help you with before I go?” Be fully focused and present while there, and once your work is done, advocate for how the rest of your time is utilized.
- A corollary to the above: always have things on hand to stay productive during downtime. UWorld, Anki, and Amboss on mobile are all common favorites. Side note: I can’t recommend an Amboss library subscription enough; it’s amazingly helpful as a quick reference guide and a lot friendlier to parse through than UpToDate for simple topics.
- Always take up the offer to learn how to do something new, and don’t be ashamed to mention that you’ve never done it before. There’s a first time for everything, and the team always appreciates those who are willing and able to learn and help shoulder responsibility.
- On surgical rotations, be nice to your scrub nurses! The OR is their domain, and they spend more time in it than anyone else in the hospital. If you ask nicely, they’re happy to give you extra suture passes which you can tie to your badge keyring and use to practice one- and two-handed knot tying during downtime. Building the muscle memory takes time, but time spent practicing will show in your handiwork in the OR.
- Get your attendings’ help with setting goals. If you want to see or do something during the span of the rotation, say so! They have the power to make things happen if they know what your objectives are, and goal setting is something they love to see and write about in evals.
- Collaborate with your peers. Everyone knows more about something than you. Stay humble and be receptive to opportunities to learn from those around you. You’ll make great friends during the clinical year, and together you’ll go farther.
- Be sure to carve out time for your hobbies. They are what make you you. UWorld questions are an indefinite entity that will take up as much time as is available unless you protect dedicated time for other things in your personal life. Studying is important, but so is having something to look forward to at the end of a long week. Burnout is real!
- Organization is key. Spending time and energy to help keep yourself organized will pay dividends multifold in time saved later on. Pro tip: learn how best to set up your tabs in Epic to efficiently pre-round and utilize things like fishbone diagrams and other shorthand on rounds. Pay the toll of the learning curve now and reap the benefits for the rest of your career.

You’re doing great, and you will continue to grow into someone who is looked up to by many. Acknowledge that challenges are inevitable, but equally, that there are many victories that await you. Most importantly, don’t sleep on peanut butter and animal crackers!

Vijay Shimoga
GHHS
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Medicine is Just a Job

An important one, for sure, but still just a job. In medical school and in the stages beyond, a significant portion of us want to believe otherwise; many think that medicine is a calling, and being a physician becomes our identity. This conversation about whether medicine is a calling or just a means to a paycheck is nothing new. It has been a topic of conversation among medical students since before the first posts were ever made on the Student Doctor Network or the medical school subreddit. There are the classic arguments on each side, but they usually can fit into the general categories of either “I am more fulfilled by my life outside of work,” or on the contrary, “I am most fulfilled by my job as a physician.” I have spoken with many students about this topic. While there are convincing arguments brought by both sides, there is one question that made me start to think that medicine isn’t a calling or an identity or a lifestyle, and that it really is just a job. That question is: Would I still do this for free?

As you go through the clerkship phase of your training, I think it is an important question to consider. Why are you really doing this? Why go through all of this, sacrificing over a decade of your life in school and in training? If you truly love waking up at 4 a.m. to go work in the operating room all day, why do you require $400,000 to do it? Shouldn’t the fulfilling feeling of helping people be enough? You see, even those who believe that they are in medicine because it is their life’s purpose wouldn’t go through all of this for free. They would quite easily find a different life’s purpose. But if you can so easily find a different calling, was it truly a “calling” to begin with? Or were you called to the big paycheck? If medicine really is your life’s mission and your primary purpose for existing, you would do it for free. Or, at least, do it for far less than most physicians ask for in their contracts. I think that a true calling is pursuing a higher purpose that you would sacrifice much of your life for regardless of the external rewards.

Some obvious examples are missionaries and volunteers at crisis call centers. Missionaries travel throughout the world spreading their faith, many risking imprisonment or death, not seeing a single cent in profit. Crisis hotline volunteers work stressful and difficult hours without compensation, but they sacrifice their time and energy to help others, nonetheless. I am more inclined to believe that these are true callings rather being a physician, which essentially guarantees you will be in the top percentages of income earners in the entire world. Because, ultimately, very few of us would pursue this field were it not for the paycheck.

I believe you should spend some time thinking about this question, especially during the clerkship phase of your training. You may not come to the same conclusion as I did, but we need to be honest with ourselves about why we put in the long hours of grinding through practice questions and working overnights at the hospital. Even if medicine is just a job, that doesn’t necessarily mean that the money must be our primary motivator. Maybe for a lot of us, that feeling of fulfillment from helping someone in need really is why we do it, and maybe that part of the job will become more real as we become residents and attendings. This was one of the biggest questions I wrestled with during the clerkship phase, and I hope you will give it some thought, too. After all, if I have to write an entire essay to convince myself that medicine really is just a job, maybe there’s more to it.

Jayden Peacock
Dear Clerkship Student,
Welcome to another step closer to your dream career. It doesn’t get easier, but it does get more fun. I hope at least one of these random bullet points will help you along your journey.

- Your attitude and character will greatly influence your experience and results.
- Embrace kindness towards everyone, not just those you deem important.
- You are the only person paying $$$$$ to be there. Seize every opportunity. That experience has the potential to alter your future.
- At the end of the day, you have earned your place here by demonstrating the intelligence required to begin medical school clerkship.
- Don’t bring down your colleagues for your benefit; the losses will outweigh any gains.
- Don’t try so hard to look better than your teammates, including interns and residents.
- Be kind to yourself. You are your harshest critic. People don’t have enough time to judge you as much as you think they do.
- Find a few friends you can really enjoy your time with.
- Your words and actions will have consequences. Be cautious.
- You might not vibe with your preceptors or residents. Find ways to control that situation rather than sulking in it.
- During your inpatient rotations, utilize any free time to engage more with patients. Being a medical student grants you unique opportunities for meaningful patient interactions.
- No matter how difficult it gets this year, this too will pass. Take things one step at a time and before you know it, you’ll be looking back on your remarkable accomplishments.
- Lastly, don’t forget to take pictures of special moments.

Enjoy your clerkship. It’ll be challenging but rewarding.

Jun Kim
GHHS
Dear Student Doctor,

Firstly, congratulations on getting this far in your Medical School Training! What a wonderful accomplishment that you should be proud of! You spent countless hours understanding the pathophysiology of this beautiful thing that we call the human body. Now you will have the chance to solidify and practice this knowledge. I am here to tell you that, yes, you will use this knowledge, but you will also further develop into the type of doctor that you want to be.

I am sure you have heard the common phrase, “the eyes are the window to the soul.” It is said that the eyes allow you a glimpse into the wealth of emotions that another may be experiencing. I agree with this statement. As a Medical Student, you will be told to assess the eyes in your physical exam. While some eyes may be more telling than others, it is important to always look at our patient’s eyes.

During my Internal Medicine rotation, one of my first patients was diagnosed with alcoholic liver cirrhosis. He admitted to feeling fine prior to coming to the hospital but being alarmed by his reflection in the mirror. After not looking at himself for many months, he finally saw that his eyes were bright yellow. He immediately knew something was wrong. Meeting him for the first time, I was taken aback by his yellow eyes. I visited him early every morning and every afternoon to answer his questions and deliver difficult news and updates during this hospital stay. I explained the role of bilirubin and why his eyes and skin were so yellow. He clung onto “Bilirubin.” He wanted to know if his bilirubin was going up or down and wanted to know when he would be able to go back home. Over the days, I saw a change in his eyes. There was not a change in the yellow color, but a clear change in his emotions and his ability to cope with his new diagnosis. Speaking with him every day, I learned that he believed that he was already on the transplant list, waiting for a new, life-saving liver. That day, I visited him in the afternoon, looked him in the eye, and clarified his poor prognosis, and that he was not yet on the transplant list due to his active drinking. This news was not easy to hear. His eyes stared blankly forward and back to me indicating that he was wrestling with this information. But I also saw determination, a will to live, and a resolve to make hard changes to his life.

This patient and I had a strong relationship of trust, respect, and shared hopes that he could one day be placed on the transplant list. I encourage you as you begin your clinical year to embrace these moments. Look patients in the eye and don’t be afraid to connect. So many times, I have noticed myself looking down or off to the side while giving difficult news. Do your best not to do this. While these situations are difficult to manage as a future physician, they are more difficult for your patients. A patient’s eyes offer physicians the opportunity to perceive emotions, but also provide patients the space to feel heard, connected with, and respected by their healthcare provider. While the eyes are the “window to the soul,” they are also the gateway to practicing compassion.

The last tidbit of information that I will leave you with is: YOU will be great. Just breathe and care about the truly amazing work that you are doing.

Sincerely,
Sarah Seiwald
Dear Student Doctor,

The most important thing for you to remember over the course of the next year is this: you are extraordinary. It can be easy to forget or ignore how far you have come when you are in a constant state of improvement, surrounded by extraordinary people. But it’s important to never forget that fact: you are excellent. That is why you are here.

I’ll be honest with you. Clinical year changed me.

The first racist comment stung. I sat silently, my mind searching for a response until I clumsily stammered out an unrelated question. But because of that, I was prepared for the second and third racist comments that happened later in the year.

A patient was wheeled into the room in cardiac arrest, and I immediately started chest compressions. I desperately pushed into her chest, focusing on doing it exactly right. It was the only thing in the world that mattered in that moment. She was declared dead 12 minutes later.

The preceptors and the residents gave me feedback. I missed a possible differential diagnosis. My H&P needed more detail. I forgot to ask the patient that question. Feedback, feedback, feedback. My head nodded and nodded.

The great “honor” of being in medicine gets overshadowed by the long days. The “resilience” that we have as medical students gets tiring when it’s rest that’s truly needed.

But the next year will pass, inevitably. And along the way, good things will happen.

I will never forget the time I connected with a seven-year-old girl and her family the day after she was diagnosed with leukemia. She and I loved the same movie and would quote it to each other throughout the day. After she went to sleep, her mother and I would sit with for hours as she scrolled through her phone camera to reminisce on the beautiful images of her daughter’s vibrant pre-diagnosis life.

Or the kind man with alcoholic cirrhosis. I could never quite figure out how I could best support him until I discovered that sitting by his side while he provided his comedic commentary on whatever was on TV was all he really needed.

I found joy in connection with my patients. And I also dealt with hardship. Clinical year is a nuanced time when you will find both. It’s impossible to predict what will happen, or where you will be at the end of it. The most important thing that you can do throughout the year is to be kind to yourself. Prioritize the things that bring you joy. Depend on the people around you to validate your struggle, process your thoughts, and be there for support. And always remember you are excellent. You are extraordinary.

Sincerely,
Jane S. Manalo
Dear Clerkship Student,
I was recently listening to a podcast episode called “The Cataclysm Sentence.” In it, they asked people to consider a famous Richard Feynman prompt: What knowledge would you pass on if you had one sentence, with the fewest words possible? So, here’s mine:

**Don’t let the negative stop you from exploring every curiosity.**

Over the course of the next year, you will experience every emotion. Some days will be the most exhilarating days of your life. And some days will be awful, very bad, no-good days: when you’re so exhausted you hit snooze six times, when you get unfairly called out for something not in your control, when you get 10% on a UWorld block, when the imposter syndrome hits so hard you think you can’t make it.

In those moments, I want you to remember that medicine is also a wonder. Ask every question that comes to your mind (especially if it sounds “dumb” – let go of the idea of “bad” questions). Push to find the answers yourself. Learn not only about the underlying causes of disease, but also how your attendings think through diagnoses and treatments. Truly take the time to be curious about your patients’ lives and values: ask them what their hobbies are, what their home life is like, how they understand and cope with chronic illness. Embrace lifelong learning from every person you meet. It will make you a better physician. It will open more doors than you can imagine. That spark of awe will keep you going when everything else seems like it’s crashing around you.

Congratulations for all you have done so far and have fun this year.

Best,
Zoe Lee-Chiong
Dear Clerkship Student,
You must let go, allow yourself to be imperfect, and make mistakes. It’s contrary to everything that has gotten us here, but you won’t learn in clerkships if you’re not open to mistakes. Accept that mistakes are inevitable and that you will fail at things (miserably at times), but failure is never final. In that spirit, TRY EVERYTHING. The more unfamiliar and scarier, the better. Just TRY. Challenge yourself every day to the uncomfortable. Eventually, you’ll find yourself in a truce with uncomfortable, and the idea of failure won’t be so crippling. Although you may not see it immediately, I promise you, you’ll grow in ways you never thought possible.

Woro George
Dear Clerkship Student,
I wish I could tell you that this year will be easy, but that would be lying. What I can tell you though is, in the end, you will be alright and for the most part, things will work out. If you are anything like me, you probably were not looking forward to starting clerkships. While the thought of being able to interact with patients was exciting, my overall feeling at the beginning of clerkships was fear and anxiety rather than excitement and fresh-faced enthusiasm. I was terrified of doing everything in the hospital/clinic for the first time and had no idea how any of it would work out. I wondered if I would click with my preceptors, if the patients would be patient, if the nurses and techs would be understanding and if I would truly enjoy this time. These anxieties consumed me for a good part of clerkship orientation until, after talking with friends and family, I was able to calm down enough to focus on each day as it came.

Now looking back, I would tell myself to take a deep breath and relax. This is obviously way easier said than done so this is not necessarily the advice I want to leave with you in this letter. What advice I do want to leave is this: even if you forget or are not able to follow any of the advice you get in all our letters, things will still work out in the end as long as you are doing your best to focus on patient care and learning as much as you can this year. I want to provide reassurance that it will in fact be alright in the end. Even if you don’t start off great and feel that you don’t click with your preceptor, even if the patient is not so patient, and even if the nurses and techs aren’t understanding, even if you end up giving a presentation on thrombocytopenia instead of thrombocytosis, and even if you almost pass out in the OR your first day (speaking from personal experience). I also want to say, if you do mess up, remember many students before you have made mistakes and it ended up alright. The expectations we have of ourselves as learners in the clinical space, a lot of the times, outweigh what our preceptors expect from us; so there will always be grace. Ultimately the advice I would give you would be to have grace with yourself, do your best for your patient, eat while you can, sleep while you can, and sit while you can.

Folake Adegboye
GHHS
AFTERWORD
We are deeply grateful for the thoughtful and creative letters we received this year! The letters are a blend of practical advice, poetry and prose. Some are humorous and encouraging; others are cautionary and contemplative. These letters serve as an invaluable gift for our new clinical students. We would like to thank all the students who were willing to share their thoughts and experiences to help their younger peers navigate this challenging phase in becoming a physician. Thank you so much and best of luck in your careers!

Anjali Dhurandhar, MD
Associate Professor of Medicine
Arts and Humanities in Healthcare Program
Center for Bioethics and Humanities

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SUBMISSION GUIDELINES
We welcome submissions to the future edition of Letters to a Clerkship Student. Though there is no word limit, we prefer submissions less than 750 words or about one page. Submissions may not include identifiable patient information. We accept both poetry and prose and encourage you to be creative as you dare. If you choose to submit your letter anonymously, stricter criteria for publication will be applied. Please submit your letter to Dr. Anjali Dhurandhar, anjali.dhurandhar@cuanschutz.edu, for consideration for publication. If accepted, your letter can be included on your curriculum vitae as a publication. We look forward to your letters!