LETTERS

TO A THIRD YEAR STUDENT

FROM THE CLASS OF 2020 SCHOOL OF MEDICINE



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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; it if 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 2020 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 Third-Year Student*. Since I launched 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 third 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. I can't wait to read them!

Therese (Tess) Jones, PhD
Arts and Humanities in Healthcare Program
Center for Bioethics and Humanities

To Our Third-Year Colleagues:

As you transition from the lecture halls to your clinical rotations, we invite you to take a moment to reflect on your journey thus far. Which values initially drew you to the profession of medicine? Since beginning medical school, how have your aspirations evolved? Which aspects of a physician's career are you currently most interested in or excited about? On the verge of this milestone, consider these factors and how you can cultivate gratitude by contemplating them. We recommend intentionally revisiting these questions throughout the year, for reminding yourself of your motivations will build resilience.

Practicing self-care, checking in with one another, and engaging your support systems of friends and family are vital during third year. Working with your colleagues can feel like a competitive endeavor at times, especially when it feels like your strengths and weaknesses are constantly on display, but we hope you will remember that we are all ultimately part of a network of providers passionate about improving the health of our patients. Developing the courage and integrity to be a selfless team player will help you embrace learning for learning's sake. You will realize how powerful learning can be when rooted in human connection: how much our patients teach us when we speak with them and hear their stories, and how much of a privilege it is that our patients *allow* us to learn from them. It's much easier and more impactful to remember the physical exam findings of cirrhosis when you know the patient behind the jaundice, caput medusa, and palmar erythema.

During your clerkships, you will begin to form an identity as a clinician through the shared and individual journeys on which you embark. Although your short white coat might feel awkward or even undeserved at first, recognize what this coat signifies: that you have joined a group of generations of clinicians who have walked the wards, connected with patients, and spent late nights delving into topics they found fascinating, bettering themselves and expanding their knowledge to provide compassionate and excellent patient care. Medicine will reveal your core beliefs, challenging some and deepening others. Commit to curiosity. Be inquisitive about ways to improve patient care. This curiosity will plant the seeds for personal and professional growth over the course of this year. Finally, we hope to send you on your journey with confidence that you each may become exemplary models of the humanistic values that motivate us all as future physicians.

Sincerely,

Derek George, Kathryn Kalata, Priya Krishnan, Pierce Lewien, Jessica Smith On Behalf of The Gold Humanism Honors Society (GHHS) Dear Newly Minted Third-Year Student, Congratulations!

You have worked hard your entire life to get to this point. You exceled in high school and undergraduate courses, discovered and explored the field of medicine, collaborated in a vast number of extracurriculars, studied hard for the MCAT, and finally you were selected to enter medical school. Now you've completed two years of medical school and finished STEP 1. Finally, you get to do what you've always wanted: your clinical clerkships.

Despite all of our best advice for doing well on your clerkships, you will not be prepared for what third year has in store for you. This year will likely be the most challenging and the most fulfilling year of your life. There will be rotations, days, and even moments when you will experience two seemingly opposite feelings at the same time. This dichotomy will continue throughout your clerkship rotations.

You will be scared to start each new rotation.
You will be excited to begin fresh and explore a new rotation.

You will see the same diagnosis over and over. You will learn and marvel about a previously unknown disease.

You will feel as though you haven't learned anything. You will be amazed at how much you have learned.

You will be exhausted and feel overworked. You will be reenergized and at peace.

You will feel useless and embarrassed after speaking with an attending. You will feel recognition and pride after speaking with an attending.

You will be appalled at the cruelty done to a human being. You will be overjoyed at the miracle of life.

You will hate third year. You will love third year.

What you experience will be is your own, and it will be valid. Even though you and your classmates will be taking the same clerkships, you will have incredibly different experiences. Do not be alarmed at this. Do not compare your experiences. Capitalize on what works well for you and make this year your own.

You have worked hard to get to this point. You will work hard now. Trust yourself.

Sincerely, Laurel Officer



Dear Third-Year Student,

With your shiny white coat, your stethoscope slung around your neck, and your pocket full of pens, a tuning fork, and your smart phone (complete with the latest and greatest apps to calculate MELD scores, FENa, Wells' criteria, etc.), get ready for an adventure! Third year, as I'm sure you have heard, is filled with incredible learning opportunities, connection with patients and professional role models, and, undoubtedly, some challenges too. Your experiences may confirm your long-held belief in pursuing a career in your specialty of choice or may guide you down a completely different path--both of which are completely okay! Your process is your process, and your journey will take you to where you need to be.

When you try on that white coat, try on some open-ended questions, new physical exam skills, and self-reflection. I have found that the most helpful qualities throughout med school, and especially in third year, are genuine curiosity and humility. If you are enthusiastic about learning and humble when considering what you do not know/have made a mistake about, you will improve as a future physician and create some pretty powerful memories while doing so.

Let that white coat of yours get worn, stained with tears and woven with stories of your patients' lives. To me, there is no greater gift than being trusted with the most important, joyous, devastating, and defining moments of a patient's life. As a third-year, I helped welcome newborns into the world, held a patient's hand as I told him the etiology of his blindness, and witnessed a heart stop beating and then restart under the fluorescent operating room lights. You too will have experiences like this. You too will witness the magnitude of human resilience, the devastation of addiction, the greatness that can be accomplished with modern medicine--and its limitations. These experiences are incredible to say the least. I found it helpful to write about these memories to capture the wonder and gratitude that I feel in this profession. When I have had a particularly difficult week or have felt drained spending my little time out of the hospital bonding with my subscription to UWorld in attempt to prepare for a shelf exam, I can take a peek back at these reflections and return to my enthusiasm for learning and my appreciation for my patients.

Lastly, take off that white coat. Leave your credentials at the door. You don't need to drag along that nonverbal symbol of knowledge and power in every patient encounter. Allow your patients to see you as a fellow human in addition to a provider. And, most importantly, see your patient as human too. They are so much more than their diagnosis.

Two final pieces of advice:

- 1. Find a good stairwell to cry in. Whether it is mourning the loss of a patient, grappling with the magnitude of the trauma you have just seen, or shedding tears because you have been awake for over 28 hours and just as you get home you realize you still have the pager from being on-call and have to drive back to the hospital to return it, I have found stairwells to be the ideal location to express these emotions. They are generally private (especially if you are in an obscure/secret stairwell), you can look like you are going somewhere rather than aimlessly wandering, and you may just run into a classmate who is in the same situation as you and then you can get a spontaneous hug and feel a tiny bit better!
- 2. Friendship and ice cream are medicine for the soul.

Have a wonderful adventure, friends!

Best wishes, Kathryn Kalata GHHS



To the thinkers, the planners, the worriers, To the gunners, the knowers, the achievers, To the dreamers, the hopers, the prayers, To all of you, whoever you are, To the belongers,

You are here. After so many years, you have reached *this* moment. You learned natural selection and light spectrums. You combined chemicals in tubes and studied the thinking of groups. You took a test with a CARS section but seemingly no references to automobiles. Then you came to CU, and you studied dissection and infection and anti-rejection. You learned about family trees and X-ray reads and swollen knees. Finally, you took another test, where everything was made-up, but the points *did* matter. All of this led up to you, to right here. You tackled countless obstacles that turned others away. It wasn't just dumb luck; it was the knowledge and skills, the persistence, the hard work along the way. It was YOU that got this far. YOU that earned this.

Now, my biggest piece of advice: REMEMBER THAT.

Remember--when a resident reminds you of a simple, "you-should-know-this," concept or an attending asks a question about a disease that you've never heard of--that you are here because you learned so much, and you'll learn more.

Remember--when a patient is unkind, or worse, very kind and very sick--that you are here because you care about people and can do something to help each and every one of them.

Remember--when the hours are long and you reminisce on memories of having free time-that you are here because you've worked, volunteered, shadowed, and studied all at once, and you made it through.

Remember--when you have moments when you question if this world of Medicine is for you-that you are here because with Medicine, you can do anything and be anything. You can change someone's life, change a flawed system, change the world.

REMEMBER that you deserve to be here. You belong. And you are ready for this.

You'll be incredible, Zach Lubline



In case you are one of the countless sufferers of imposter syndrome, I will first take a moment to say that **you deserve to be here.** If you feel like you don't fit in, it means we need your perspective in medicine (desperately). If you worry that you aren't good enough, know that everyone around you has felt the same thing. If you are afraid, you are not alone.

Now that you are here, I have a few thoughts to share in hopes of helping you have the most soul-filling, perspective-challenging, growth-filled year that you can:

- 1. Show Up. While it is true that literally showing up to your clinical sites will be a fundamental part of success in third year, showing up in every sense of the phrase is the best thing you can do this year. Show up for your patients: take the time to get to know them as human beings and to read their history. Show up for yourself: challenge yourself, let yourself feel joy and sadness and pain and prioritize getting to see your therapist (seriously, and if you don't have one you should). Show up for your colleagues: offer encouragement and a safe place to debrief about the remarkably intense reality that is the daily life of a physician. Every day, no matter how tired you are or how much you dislike the specialty, remind yourself to show up.
- 2. Have Courage. There will be times when you witness (or participate in) an injustice, and it would be easy to let it go. Don't let it go. Have the courage to speak up when you think a patient isn't getting what he needs or when you hear a resident or attending make a demeaning comment about a peer or a patient. And, if you make a mistake, have the courage to own up to it. At the end of the day, you can sleep soundly knowing that you maintained your integrity and that you advocated for what is right. That is worth more than any grade.
- 3. Question Yourself. There were countless times in third year when attendings or residents told me to be more confident. While the concept is certainly important (as a physician you ultimately will have to make decisions and be confident in them), I also really appreciated when one attending said that it is, in fact, good to doubt yourself. It means that you care enough about your patients to want to improve and to avoid mistakes. This is a challenging line to navigate, and I ultimately have landed upon this conclusion: be humble about how much you know (question your knowledge and your biases) and be confident in who you are (don't question your value).
- 4. Care. This one may seem obvious, but you will see that the culture of medicine can sometimes pull physicians away from this fundamental concept. When we run short on sleep, genuinely caring about our patients is often the first thing to go. We get caught up in academic debates and billing and notes and we forget why we became doctors in the first place. Sometimes, we intentionally stop caring to protect ourselves. While emotional boundaries are certainly important (and you will go through a process this year of finding your own way of coping), I encourage you to have the courage to care. As a third-year medical student, you will have the unique power of being able to remind others how to care; that is a role that makes you a

fundamental member of the team. If you genuinely care about your patients, it will shine through in everything you do, and you will succeed.

5. Pack a Snack. Always carry a granola bar or something else you can eat quickly in your scrubs or white coat pocket (especially on surgery or in the ED). Sometimes you don't get a lunch break, and you have to eat a snack in the bathroom. No shame.

I hope these small pieces of advice are in some way useful to you and that the year ahead is full of growth. It is truly a privilege to become a physician and to have the opportunity to get to bear witness to the full range of the human experience. I hope you soak up every moment. Wishing you all the best.

With Gratitude, Mackenzie Whitesell Garcia **GHHS**



Mount Eolus

Dear Third-Year Student,

Welcome to the year of living many lives: over the next 52 weeks, you will be ushered into the wonderful, exhausting, stimulating world of clinical medicine. You will reflect on how much time has gone by during this next academic year and feel simultaneously that it has dragged on and passed by unnaturally quickly. Each rotation will come and go. You will take a shelf exam and move on to studying for the next one, and each time you will think that you can't get any more tired. That's not exactly true. You will reach a new level of exhaustion as each rotation progresses, and you will be surprised by how well you still learn and function at this new normal of fatigue. However, my hope is that even through this exhaustion you will see the beauty of training to become a physician: the beauty of being in a hospital overnight or having the privilege to participate in a code or scrub into a surgery or hold a patient's hand as they open up to you about domestic violence during a clinic visit.

During this year you will have the absolute privilege to witness humanity in times of profound joy and deep sorrow. You will be mystified by the amazing feat of childbirth one day and then admit a patient with a catastrophic stroke the next week. You will have the privilege of truly knowing your patients, their families, and their stories. At the risk of telling you something I am sure has been emphasized to you many times already, I behoove you to spend any time that you can simply visiting with your patients. There's a reason everyone harps on this topic! While I have learned an incomprehensible amount of medical knowledge this year, I feel that I have learned far more about what it means to be human and how crucial human connection is, particularly in those times of joy and sorrow. This year will prepare you, yes, to be a smarter and more evidence-based physician. But if you let it, it will also prepare you to become a physician who is a thorough listener with the ability to key into the patient's true concerns (here's a hint: their true concerns are usually not the cough or headache that appears as their chief complaint).

This year of medical school will tone your muscles of compassion and will provide you with the opportunities to flex those muscles. Dig into those opportunities. You will spend a lot of time this year feeling the expectation to always say "yes" to your residents and your attendings. I want you to say "yes" as much as you can because that is how you will learn, but know that if something makes you fear for a patient's safety, it is okay to say "no." Your residents and attendings will give you constant oversight, so use this time to grow as a clinician and take the risk to try a procedure or tackle a difficult conversation with a patient. You are here to learn. What an amazing life we lead that we get to spend so much of our time just learning.

Grab this year by the horns! I hope that it will be the best year yet and I can't wait to hear about your experiences on the other side.

All my best, Jessica Smith GHHS



Dear 3rd Year,

Welcome to the next phase of your training! It is here that you will begin to grow by fully immersing yourself in the care of patients. Remember their humanity. If you ever find yourself not knowing what to do on the wards, go find a patient to see. I had four patients die whom I knew well during my 3rd year, and there were many more whom I knew less well who ultimately succumbed to their injuries or illnesses. Those were profound experiences, and I know that you will rise to the occasion.

I would like to leave with some short and practical advice as you may be feeling like there is no blueprint for success in this core clinical year. I used three guiding principles to help me figure out how to navigate the system, and I hope that they resonate with you.

- 1. Patient care always comes first.
- 2. Come in every day and learn as much as possible.
- 3. Add value to the team.

The rest will take care of itself. Remember that you have more to offer than you may think. There are a lot of ways to help as a med student whether it's checking on a patient or on a diagnostic result, coordinating with other members of the team, or speaking with the family. Best of luck and enjoy.

Nick Arlas GHHS



I am going to tell you about a time during 3rd year when I made a mistake.

I spent an hour preparing a beautiful presentation about my patient on the medicine ward. I knew every lab value and vital sign and had a plan for each item on the problem list. I knew my stuff and was excited to demonstrate that. We filed into the room: attending, residents, interns, nurses. I delivered my presentation seamlessly, from chief complaint to HPI to physical exam, to recent imaging findings, to assessment and plan. After months of practice, I was a well-oiled machine and zipped along unassumingly until I looked up after problem #2 and noticed that my patient was *crying*.

It took me a few minutes to realize what had happened. A quick glance back over my notes reminded me of where I had gone wrong. All of the effort I had put into sounding effortless had backfired. I reported the liver mass visualized on the patient's CT from the day before and brushed by it so quickly that I forgot to mention that it was stable from prior scans. All my patient heard was "liver mass," and the rest was a blur. Without meaning to, I had completely terrified my patient who had undergone treatment for a prior liver cancer and was now committed to his sobriety.

In my morning rush and my ambition to look like the best 3rd year student of all time, I had completely neglected to discuss the crucial findings of the CT scan with the patient during pre-rounds. Even though it was good news--a stable scan--I had delivered it carelessly, and my mistake was felt acutely by this vulnerable patient and witnessed by a room full of people I had hoped to impress.

I tell this story partially for you to learn from its direct message: always think about what you're saying from the patient's perspective, and never let your patient be the last to know. But beyond this, I think there is a larger lesson to be learned from this experience. Sometimes the things that earn you the grade aren't the same things that make you a good person and a good doctor to your patients. Both are important. Try to be intentional about how and when you prioritize one versus the other. Don't get so bogged down in the details and the pursuit of perfection that you forget about the human being in front of you whose experience you can drastically influence through your words and actions. You may not feel like it yet, but you are powerful and will impact your patients' lives. That is a tremendous responsibility and honor.

I guess my story boils down to this most crucial point that can be hard to remember through the long hours and the anxieties of 3rd year:

Be a good med student, and more importantly, be a good person, too.

Abigail Cher



Congratulations on making it to third year! Take a moment to celebrate this milestone and *yourself*. Go out for ice cream, have dinner with your friends, recognize all that you have accomplished leading up to this. Even if it didn't go flawlessly, that doesn't matter because you are just as amazing as the classmate next to you.

This next year will be filled with unique experiences, mostly good but some...well...less good. You will learn what it feels like to be a productive member of your medical team, to take ownership of your patients and to know them like no one else on the team. During this time, you will be exhausted - but remember to reflect on what a gift it is to be a part of these experiences.

Some general tips I can offer to you:

- 1. There will be times when you don't know the answer to the questions you are asked. That's okay! Always acknowledge that you don't know. Don't make up an answer especially if it relates to a lab value or physical exam maneuver you didn't perform.
- 2. Have a strong support system to help you when you're feel down, overwhelmed, stressed, or any combination of the above
- 3. Be sure to take care of yourself. Whether that means you make time to work out once in a while, make healthy eating choices, or go to your dentist appointment. Your stress only seems worse if you're worried about things along these lines as well.
- 4. Remember that your classmates can be an invaluable resource. They can sympathize with you, know great resources, and can just help you survive in general. Sometimes it can be lonely in third year, especially if you don't have any peers in your assigned clinic with you. Don't let it isolate you!
- 5. Make time to study. In my experience, it is so much easier to start at the beginning of each rotation and do 10 questions each day than to wait until the last few days before the shelf.
- 6. Lastly, try not to compare yourself to others! We all have moments where we perform lower than we would like, or we don't know the answer to something our peers do. The layout of third year means we all have a unique learning experience and may learn the same information on different timelines.

Above all else remember that it is just one year. You can do this, and before you know it, you'll be on the other side. Try to remember to enjoy yourself, recognize the unique experiences that you are a part: delivering a baby, holding someone's intestine, helping patients process what their new diagnosis means. These are experiences to be grateful for, and memories you will cherish in the years to come.

Daniele Marcy



When I was in your shoes, I hated the clichés about third year. Whenever someone mentioned that the next year would be "the most rewarding" or "the most valuable" or "a totally life changing" year of medical school, I cringed. I didn't truly believe that I was prepared for the challenge ahead. I wasn't confident that I could survive the year, much less blossom into a *changed* medical student.

And yet, I silently waited in anticipation for the sudden, startling moment when I would transform into a smarter, more confident, more competent, "grown-up" medical student equipped to handle any challenge thrown at me. I couldn't help but feel discouraged when I woke up each morning feeling the same as the day before.

In the meantime, I tried journaling. As best as I could, I tried to write down three good things that happened each day. Some days, this was easy, and some days, it was not.

Looking back over the year,

I see small wins like:

- I got out early today!
- <u>Two</u>-day weekend!

And some life things too:

- My husband's grandpa survived a heart attack today.
- Amazing Thanksgiving dinner with my family.
- Got to go on a long walk with my dog in Lowry.

But I also see the aforementioned "transformation" throughout the year:

- Saw my first birth!
- I feel like I have a purpose when I walk around Children's Hospital.
- I'm not freaking out when someone asks me to write a note anymore!!!
- I was able to create a good differential for pelvic pain.
- An attending said he was impressed with my MSK knowledge.
- I <u>actually</u> heard an S4!
- I diagnosed a melanoma after performing a thorough review of systems, and the patient wasn't going to seek care for it.
- I feel comfortable interpreting chest x-rays.
- I got compliments today on handling a complex patient.
- I performed my first lumbar puncture--and it was a champagne tap!
- Someone asked me if I was a Sub-I!
- I said goodbye to my favorite patient, Mrs. R, and she gave me a hug.

Ultimately, the year really was life-changing.

I know. The irony.

The change in me was much more subtle, less dramatic than I would have thought. No switch clicked overnight, no new encyclopedia of knowledge at my disposal.

With the power of hindsight, I can see now that third year is only the beginning of our transformation into clinicians. It's a big first step, but luckily, it was one we were ready for. The experiences I had this past year were incredible, and I somehow managed to stand tall.

If you are thinking about the future with confidence and excitement, I'm impressed. If you are scared, or anxious, or hesitant, or worried that you aren't in any way *enough* to complete this year--you are. You can do it. You are prepared.

You are enough.

I would suggest you take the time to reflect on the many good things that happen along the way (and there are many). You might be surprised with what you notice. I certainly was.

Prepare to be transformed.

Sincerely, Deanna Claus GHHS



You will have that first morning: walking into a new hospital to work with a new team. Your nerves are running high to the point that you have trouble falling asleep and then wake up before your 3:30 AM alarm goes off. You are eager to do whatever task is thrown your way, "Yes! I've got it!" just to realize that you have no idea what was asked of you. The first patient presentation you give, the first surgery you scrub in for, the first thoracentesis, the first baby you deliver, the first patient you lose. So many firsts.

These are exciting, challenging and exhausting months. At some point, you may wake up and realize that you haven't had a first experience in a while. Perhaps you hit snooze and drag your feet a bit on your way in to another shift, in another hospital with yet another team. You may even be counting down the days to the end of the rotation or even third year. That won't be me, you say--but it may. The hours, evaluations and questions may wear you down. You may even feel burned out. That is okay. You are okay.

It is at those times that I have to remind myself of those exciting first experiences, that I have to look back on my "favorite" patients and revisit our conversations. This year will be an amazing adventure of ups and downs, and your patients will carry you through. Their stories will stay with you and remind you of why you started this journey.

The first time your patient looks to you for reassurance and answers while the attending is talking, you may have a flash of utter terror. Your patients know you care. They trust you and see you as their guide and partner through their medical crisis. The time you hold your patient's hand during a tough procedure or sit next to her bed or perhaps share tears with family members as they grieve, you are part of their stories, and their stories will forever be part of who you are as a physician.

So, on those days when you hit snooze and drag your feet a bit, try to think of these moments. Remember why you are here, know that you are shaping each patient's story and, in turn, their stories will carry you through the long shifts.

Abigail Barnes



Mount Bierstadt

Dear Third-Year Student,

You made it! Past the monotony of lectures, past the days of <2,000 steps Fitbit shame because car to library is a short walk. Past the meticulous memorizing of details that can't possibly be forever relevant to your life and practice. Now is the time to learn to be a doctor. Third year is amazing. Third year is empowering. Third year is why you came to medical school.

You have no doubt heard these statements, and I do agree with them. But know that they are not true 100% of the time. There will be many difficult moments during third year, and the challenges are a new flavor. You will make dumb mistakes: forget to listen to a patient's lungs with pneumonia. You will be so prepared for a presentation only to be cut off by a hurried team. You will not always feel that your performance represents your skills and knowledge. You will sometimes get lost or not given clear instructions about where to show up, and then blamed for not knowing. Sometimes the attendings will not focus on your learning. You will, some days, wonder why you are sacrificing your sleep, peace of mind, hobbies, relationships, to be there.

And the point of all this is to say that all of this is okay. Feeling these hardships does not mean that you are doing third year wrong or that you are in the wrong place. When there is room to come up for air and you see your classmates, you will hear about their highs, their triumphs, their positivity. Don't compare your experience; it is much easier to share optimism than struggle. Inwardly focus on the high points that you have experienced. Focus on the patients you saw who were grateful for your time and energy. Think about how you made their experience better and value that within yourself. Focus on the teams you worked with that made you feel appreciated, enriched, excited to learn. Think about the procedures or surgery that you saw and thought, "Wow, it would be so cool if I could do that one day." You might have whole rotations full of these moments. You may find them sporadically throughout your days. It is okay not to love every second of every day that you spend on site. You don't have to because you are not going to be a professional third-year internist/family physician/orthopedist/surgeon/etc. You are going to be a doctor. No matter how much we think that our rotations will show us exactly what that will be like, it is not quite the same.

Above all, listen to your thoughts, feelings, moods as you are flung with surprising speed from one setting to the next. Note the mornings that pass quickly vs the ones that drag. Consider what rotation you are on, but also the other aspects of the day. Were you making complex plans for many problems? Were you having long conversations with patients? Were you running around the hospital? Clinic? Were you in surgery? Which days do you go home and surprise yourself by being excited to go back the next day, and why? Which days did you wish for nothing but a long weekend? Your rotations will exhaust you to different degrees but pay attention. I was surprised to find that the number of duty hours did not always correlate with my drive to show up, to study, to look up something at home. Pay attention. Reflecting on your reactions this year may just lead you to that fulfilling attending role that we all hope is somewhere in the hazy future.

Third year is empowering, amazing--what you came here for. You have the power to make it that way by using it as a tool to shape your path through medicine, to learn what kind of doctor you want to be.

I'll end with some general tips:

 Do something for yourself: exercise, 9 hours of sleep, breweries with friends, meditation, cooking, being alone. Don't sacrifice everything that makes you YOU in order to succeed at this year. Find something that is you and protect it fiercely. It is always worth it.

- Carry snacks. Know where to get caffeine.
- *Embrace ambiguity*. You are constantly at new and unfamiliar places; it is okay that you are lost and not sure where to go.
- Nurses are your friends. Social workers and case managers are invaluable. Get to know these teammates as well as your residents. You will be more engaged and involved with patient care.
- Reframe your mind to see your classmates as your colleagues, not your competition.
- *Do not beat yourself up* when you don't know something. Be positive about learning, about searching out the answer and discussing it with the attending later.
- When you have free time, prioritize it how you want. If you are introverted, don't drain all your energy at the social events because you feel like you should. Do what you need to recharge.
- Stay hydrated during surgery. Don't pass out, but don't have to scrub out for your bladder all the time either. It's a careful balance.
- Don't let your grades rule your goals or opinions. You will probably receive a grade
 that you don't feel represents your effort. You still learned. You will still be a doctor.
 You won't even remember that Pass in 18 months when you're an intern. Focus on
 learning. Focus on the patients.
- Have comfortable shoes for rounds.
- Brush off harsh criticism and feedback. Some residents and attendings will have bad days or communicate differently than you. You can still learn from that feedback, and its harsh delivery is not indicative that you are a bad medical student.

Angela Shimoda



Dear Rising MSIII,

If you are reading this letter, then it means you have conquered the worst part of medical school: Step 1. I want to start off by saying that you are NOT defined by your score. You are a whole person who has a ton to offer. If you're like most people, you probably did not do as well as you were hoping. That is okay. I promise you that it is not the end of the world.

Besides being done with Step 1, the reason third year is so great is because you finally get to apply all the knowledge and skills that you have been working so hard to obtain for the past two years. You will meet some of the most amazing people you've ever met, experience some of the happiest days of your life and some of the worst days of your life. You will be there when someone is told positive news about her condition, and you will also get to be there when a family is being told that their loved one has died. You will inevitably have huge impacts on your patients' days and potentially huge impacts on the rest of their lives. No pressure, right?

Here are some ways to keep your head above water and stay humble throughout third year:

- 1. You've heard it before, and I will say it again: remember why you started.
- 2. Treat all your patients as if they were a loved one or someone you know.
- 3. Remember you have people who care about you and who you can talk with about anything. You are not alone in this process.
- 4. You will mess up. Apologize if needed. Correct it. Learn from it. Move on--and do better next time.
- 5. Get to know who your patients are *as people*. I promise you that if you take the time to ask, you will learn some really cool things about the humans you are treating.
- 6. Think about something you are grateful for every single day. This will help you get through those long, exhausting days and helps you keep things in perspective.
- 7. Ask for help sooner rather than later.
- 8. Treat yourself and the people around you with kindness.
- 9. This year will fly by, take advantage of every opportunity, and be engaged.

Best of luck and congratulations on making it to this next phase!

Best, Megan Perez



Dear Third-Year Medical Student,

This letter will find you in good spirits. You're full of exciting uncertainty as dawn is breaking over your clinical landscape. Close your eyes. Let your heart beat anxiously out of your chest as you imagine yourself swimming through the newness of your first day of the wards, clinics and operating rooms. Those nerves are normal. They signify the dedication and hope you have. They're a testament to how much you care. They mean you'll be a great doctor. Let them course through you. Breathe.

By virtue of where you are, you care greatly about grades and evaluations. You'll get plenty of both this year. Heed this advice: look around. Remember who you're being compared against, after all. You're among a group of world shakers, change agents, brilliant humanists. To be the last in your class means you're among the best. To be the last in your class means you'll be a strong physician who will improve countless lives, entire communities.

Don't study to do well on the shelf exams. Study because you want to learn about hepatorenal syndrome so that you can better treat your patient in the ICU.

Don't change your behavior because an evaluation says you should. Change it to improve your communication, so that maybe the patient down the hall will confide in you about his abusive relationship.

Don't stay later in the day to look good to your team. Stay late because you want to learn the life story of your patient getting emergency dialysis upstairs.

View every rotation as a whetstone with which to sharpen your understanding of the human body and the human condition.

Stay curious and kind, for those two traits will carry you.

Seek always to help – never to compete with – your fellow learners and residents. Remember that a rising tide lifts all boats.

If you don't understand a concept or you don't see or hear something on physical exam, say so. It's okay to learn. Your team wants to teach you.

Set goals for the year, not just for the rotation. Improvement typically takes longer than weeks.

Practice forgiveness when you don't live up to your own expectations. Practice gratitude for those who impact you. Practice self-reflection to learn about what truly makes you happy.

Keep moving. Your scenery and coworkers will change frequently.

Remind your loved ones frequently how you feel about them. You may not see them as often as you'd like. This is a time-limited condition, and the fog will eventually lift.

You are not an imposter. You have a pivotal role to play in the care of your patients. You have more training and knowledge than most of the planet. You are a third-year medical student.

Embrace yourself-and brace yourself for a wild ride.

Yours, Graham Custar (a former third-year medical student) GHHS



Uncompahgre

Dear Rising MS3,

You will receive lots of advice about 3rd year and beyond, a lot of which might be unsolicited just like so much other "advice" you may have received throughout medical school. If this is unsolicited, just skip over my comments. But if not, I hope you can find some of what I say to be helpful. Just take it with a grain and/or mound of salt.

For me, med school is like learning to swim and 3rd year is when things get real. The first two years of foundational sciences are like teaching you how to kick and stroke to stay afloat. Third year is when you get the chance to put it all together. It's like jumping off of a diving board into the deep end and having to swim to a wall in order to not drown. This is scary and new, and the stakes are higher since you see patients and the evaluations matter. If you're like me, then part of the fear is that it feels like everyone is watching you and analyzing what you do. There is a sense of constantly being evaluated and having your actions judged or scrutinized. This is like having the line of other divers behind you wondering, "Are they going to jump? Are they going to do something cool like a cannonball? Or completely fail with a belly

There is a lot of pressure on you in 3rd year when you feel like you need to perform exceptionally. It is OK to not be perfect and nail a backflip; this is why you are here. The truth is that nobody expects you to be perfect even though it does feel that way sometimes. If you were, you wouldn't need the education. Try not to stress too much about the outcomes and focus on journey. Yes, the end point does matter, and anyone telling you otherwise is lying, but these experiences are fruitful learning opportunities and will stay with you for much longer than a letter grade by helping you to become a better doctor. If you are still stressing about outcomes, my advice is to seek feedback often so you can identify areas for improvement and learn to adapt and grow.

Probably the thing I disliked most about 3rd year is that your time isn't your own and can feel devalued depending on your team. The days are long, sometimes longer than they need to be, and it feels like the time invested is not proportional to the education received. It feels awful to be twiddling your thumbs in the afternoon waiting to be sent home. That being said, you do make a difference to the patients for whom you care, and it's an amazing experience to be thought of as your patient's provider. If you ever feel like you aren't contributing to the team, visit your patients and get to know them better. They may be able to teach you something more than your busy team. Just don't disappear. Let your team know where you will be and how to reach you. Also, along the same lines as twiddling thumbs, it's OK to be bored or disinterested in your current rotation. You don't have to enjoy everything, but you do need to remain professional and not hinder your patients care, as well as your education since there is a possibility that you may see something you don't expect in your careers.

I don't mean for this advice to scare you or to sound jaded, I just want to be honest with you and prepare you. Now for some generic advise you may have received plenty of times before:

- Bring snacks.
- Wear comfy shoes.
- Drink plenty of water.
- Make time for yourself on your days off.
- Try to study consistently. Make a plan.
- Discuss expectations early.
- Remind yourself why you are here.

Now, back to my swimming analogy. It is difficult exercise that is really tiring, especially when it can feel like you are swimming upstream, but the only way to learn it is to practice. So, "Just keep swimming."

Theodore Black



Conundrum

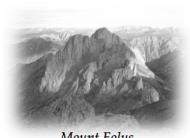
"You have the opportunity to impact the lives of your patients with your knowledge and compassion. You have the privilege of partaking in the happiest, saddest or most intimate part of someone's life, and you will be a part of his or her life story forever." These are the parting words my PBL facilitator gave me as I embarked on this exciting but frightful journey into third year. It's a wonderful year of experiences and life lessons that will transform you into the physician whom you aspire to become. There is no amount of advice that I can give you that will fully prepare you since everyone will have their own special journey. But here are some of the lessons I have learned, and the tips that my mentors and fellow classmates gave me. I hope that these can help you, especially when things are tough, and you feel alone in this whole crazy process...

- 1. Cherish the time you have in each rotation. You may have wanted to become an orthopedic surgeon since the first day of medical school, or you may have no idea and are hoping to discover your ultimate passion this year. Regardless of your future goals, embrace all the learning opportunities and experiences that are provided to you. Even if the thought of cutting someone open and blood makes you queasy, you may find that you are an expert suturer and love working with your hands. Even if rounding for five hours gets tiring, developing the ability to think through differentials and plans is crucial in any specialty. If you keep an open mind, it may be surprising which specialty catches your eye.
- 2. **Step out of your comfort zone**. Going through these rotations and interacting with physicians who have mastered their crafts and have expansive amounts of knowledge will constantly remind you of how little you know. No one expects you to know how to interpret EKGs, manage liver failure, or suture from the get-go. There is a huge learning curve when starting each rotation; it feels uncomfortable every time, and this is completely normal. Push through the uneasiness of being wrong and appearing "dumb," and continue showing the limitless curiosity you have by asking questions, taking guesses, and learning about your patients. Set one goal every day that pushes the boundaries of your comfort. Over time, you'll find yourself gaining confidence in not only you as a person but also as a budding physician.
- 3. Remember that you are not alone. During third year, rotating through new teams and new specialties can often feel isolating. When you have days where you broke the sterile field, gave disorganized presentations, or received subpar evaluations in your desired specialty, remember that all of us have been through similar hardships. In this emotional roller coaster of third year, take the time to share and celebrate the accomplishments that you are proud of, as well as the difficulties, uneasiness, and doubts. If you look around, there are always people who care about you and all the human emotions you have along the way.
- 4. **Find your role models**. As you enter your clinical rotations, you will work with various healthcare professionals. Among these people, you will love some but others not so much. You'll start seeing certain characteristics in your role models that you hope to develop and incorporate into your practice. Whether it's their incredible knowledge base, the way they promote critical thinking in students, or their ability to form meaningful relationships with patients, take note and try to emulate that.

5. Get to know your patients. Amidst all the chaos, remember why you came into medical school and wanted to be a doctor. It all comes down to how you can impact the lives of your patients with your knowledge, compassion, communication, and teamwork. Be the person who can take the extra five minutes to discover what makes your patients special beyond their diagnosis each day. When you see your patients as unique individuals, the journey you share with them is so much more rewarding.

I hope that all of you will have an amazing and fruitful year in your own unique way. Congratulations on all of your accomplishments to date and enjoy this new journey!

Katie Yamamura



Mount Eolus

Your third year of medical school will be simultaneously the most wonderful and the most stressful year of your medical career thus far.

Here are some tips I have compiled to help reduce your stress about this year:

OR etiquette

Before the case, write your name on the board in the OR. Go get your gown and gloves, but **DON'T** open them onto the sterile field <u>unless you have permission</u> from the scrub nurse (usually they prefer to open them for you).

Keeping sterile field: let the scrub nurses know that you are on their team. If you break sterile field, just own it and go rescrub if needed.

OR nurses and anesthesia need to record the time of incision. If the surgeons you are with say "incision" with the vibrato of a mouse, feel free to repeat it and announce "Incision!" to the room.

Sneezing: whatever you do, **DON'T** turn your head to sneeze into your sleeve. I was told the germs "fly backwards" out of the mask towards your ears, so turning your head will spray germs all over the sterile field. Instead, look straight ahead at the sterile field and sneeze into your mask.

Feeling limited by your role as student

The best way to combat this is to show them what you know! The role of a third-year student is often incredibly variable. Some attendings may learn that it's your first time doing a joint injection and walk you through it right then. Others may be uncomfortable with that and opt to have you watch the first time--as the mantra goes, "See one, do one, teach one".

I was frustrated by feeling left out of communication/patient updates, especially on inpatient rotations where things change quickly. You might be in the middle of a presentation when your intern steps out to return a page from a consulting team that changes the plan for one of your other patients. Just go with the flow, but if you get the chance to be first call for your patients and get all those updates firsthand, DO IT.

Instead of asking, "Is there anything I can do?" ask your resident, "What can I do to help you right now?" Sometimes interns are so overwhelmed that they truly cannot think of a task that you can help with in that moment. Another trick is to pay attention to their to-do list (many interns write this on the back of their patient list in a checkbox fashion). Pick an item from their checklist and ask if you can do that specific task.

Changing expectations

Trying to remember and execute the preferences of multiple residents and attendings on a rotation is exhausting. At one point, I started to put the names of the attendings and resident at the top of my paper **before** writing down the patient name and date. I color-coded what each one said to me about the encounter so that I could remember what feedback I received and who it was from. That did help me keep track of their preferences and do well on the rotation, but the best thing to do here is to be flexible. Make note of the feedback you receive and incorporate it even if it contradicts what you were told last week.

General

One of the best pieces of advice I heard was that while you are on a rotation, you should attempt to think like providers in that specialty.

Sometimes what you say is less important than **how** you say it, or **when and where** you say it. What I mean is, I never intended to truly question the plan, but by asking the attending questions about why this medication or why that imaging study while still in the patient room, I placed doubt in the patient's mind about the quality of care being received. That was definitely not what I meant to do, as I was just asking out of curiosity. Remember: your white coat may be short, but you do have authority.

Pimping

One of the most long-standing traditions in medicine. Surely third year won't be your first exposure to it, but it will be the year that it happens the most. What I didn't know about pimping was that many attendings do not view it as a random surprise pop-quiz; they view it as a tool to find gaps in your knowledge in order to teach you. Indeed, many attendings do not expect that you answer all their questions right. This was a surprise to me. Another thing I didn't know about pimping: don't guess, ever. It generally irritates those trying to teach you. Just say you don't know. If you think you **might** know the answer you can always say, "I'm not sure, but I'm thinking _ because _." Always state your reasoning. The reasoning to how you got to that answer is just as important as the answer itself.

Feedback

Receiving feedback may be a relatively new experience for you this year. It is natural to feel challenged by constructive feedback. I challenge you to receive all feedback with an open mind and to think of how the person who is giving it to you is trying to help you. When I was younger, my ballet teacher would correct me and the other dancers multiple times during an hour-long dance class (point your feet more, adjust your arm, etc.). It was a normal part of our routine. But I remember her saying multiple times, "A correction is a compliment." "A correction is a compliment because it means that the teacher is paying attention to you." Whenever I struggle with feedback, I think about what she said, and I realize that it is a gift that a more experienced clinician is telling me how I can improve. This is not a criticism, but an opportunity for growth.

Remember to breathe. You got this.

Diana Clabots



Dear Third-Year Friend:

The last two years have come and gone as quickly as you blink your eyes. You are now ready to step into third year. Congratulations for a job well done so far! It seems like you were just applying to medical school, all the applications and essays and finally the interview. Phew! So much work. Since stepping into the doors of medical school, you have had so much material to learn in such a short time. You have had to sit through lecture after lecture, test after test, nonstop studying, all culminating up to taking that grueling Step 1 exam. Now it is time to apply that knowledge to where it matters the most: taking care of patients.

During your third-year rotations in the hospital and clinic-based settings, you will be working with fourth-year students, residents, attendings, and of course, the patients. You will have so many mixed feelings that it feels like your head is spinning and that you cannot keep up. No doubt you will be excited, anxious, worried that you will not measure up to expectations. You will have that sense that you need to prove your worthiness of being a third-year medical student. I say to this, sit back, take a breath, collect your thoughts and know that all the students in your class are in the same boat. Don't let these fears keep you from obtaining your lifelong dream of becoming a physician. If you were not good enough, you wouldn't be where you are today: a third-year medical student.

You will find that rotations consist of long hours and an enormous amount of material to keep track of. You will feel tired, frustrated, and you will no doubt have the imposter syndrome. Please know that you are not expected to know everything or to be perfect. Mistakes are ok, and actually mistakes are sometimes the best way to learn. Whatever you do in third year, learn as much as you can and go with the flow. Take time out with family and friends for relaxation, and most importantly, revel in the relationships you will make with other students, doctors, and your patients.

Enjoy Your Time!

Sincerely, Sami Hourieh



Mount Bierstadt

Dear Newly Minted Third-Year,

Congratulations!!! You should feel incredibly proud of completing the first half of medical school. It is no small feat, and you deserve recognition for this remarkable accomplishment.

If you are like me, you may be feeling more than a little nervous about starting the next phase of your training. Maybe you are wondering if your test taking skills will translate to successful patient care, if the dreaded pimping is as terrible as it sounds, or how you will prepare for these "shelf" exams. So, what advice can I give you?

- **Be curious**. I think that curiosity is the greatest asset of students and physicians alike. Be curious about medicine, and be curious about your patients. If you are curious, you may discover that your patient is depressed and that you are the first person he has told. You may discover that your brother went to high school with your patient's grandson. Or through hand signals, a letter board, and random guessing, you'll discover that your newly aphasic patient is dying for her mouth to be swabbed with a bit of coffee (and two sugars, if you please). Be curious about how an ERCP is performed and accompany your patient. If curiosity guides you, knowledge and fulfillment will follow; your enthusiasm to work with your team and take care of your patients will be evident but, more importantly, genuine.
- Learn to accept positive feedback. You have learned so much over the last two years. Yet in the realm of clinical medicine, it will feel like a drop in the ocean. You will spend much of your time wondering how you will learn everything your attending knows, and if your internal dialogue is like mine, will constantly repeat a list of everything you need to learn or work on. So, when your patient, resident or attending commends you for something—take a moment and let it sink in. You are worthy.
- **Put yourself in your patients' shoes**. The more different their lives are from yours, the more important it is to do so. Speak well of them, *always*. You are here to care for them, and they are trusting you with the most intimate and fragile moments of their lives. Do everything you can to never betray this trust.
- **Don't be afraid to answer questions.** You will learn more if you attempt to answer a question and get it wrong than if you stay silent out of fear of sounding stupid. You will suggest things that are nowhere near best practice; I once suggested starting an 89-year-old on a statin. And that's okay because it's part of the process. You will learn to love the questions. They are a crucial element of learning, and you'll miss them if you hit a rotation where they don't ask you anything.
- Know that everyone's got your back. Who is everyone? The entirety of CU SOM. Your classmates, Hidden Curriculum facilitators, ACP faculty advisors, all our Deans, me—we all know you will be an amazing physician and want you to have the best year possible. If you need support, whether academic or emotional, everyone above sought out a position to help see you through this journey. If someone mistreats you or makes you feel unsafe, we want to know, so we can help change the culture in which you learn. And if you rock a rotation you thought would be your undoing, we want to know, so we can celebrate your success!

I think that these are the most important things to carry into third year. Other random advice: drink sparingly but eat well before surgeries. Always carry more than one pen, and if you lend it, make sure it's one you won't miss. Try to help your team as much as you can but leave when dismissed. UWorld has varying applicability for each rotation, so you have to find your studying groove and take all shelf preparation advice with a grain of salt.

So, go celebrate! Spend time with friends and family, and sleep in this weekend. Come Monday, put on your white coat and throw yourself wholeheartedly into this next year. You'll be great out theres.

Best Wishes, Catherine Waymel GHHS



Congratulations! You have already come so far, even if it may not yet seem that way. Here are a few tips and experiences that you may find useful:

Things are going to get easier. You're going to get more competent, and you're going to have more of an impact as time goes on.

There are going to be difficult times, and there will be things that will affect your grades that you have no control over. However, one variable that you can always control is how hard you work and how enthusiastic you are. Remember that everything starts over with each new rotation, and you need to learn from your mistakes. Don't expect anyone to tell you how to improve; you have to figure it out yourself.

If you're going through hell, keep going.

On one of my rotations, an elderly patient with dementia was hospitalized for a mild myocardial infarction. As the patient was doing well and his wife/caretaker was scheduled to have surgery soon, the wife agreed with my attending that the patient could stay at the hospital until she recovered. Unfortunately, one night the patient was agitated, and a different attending made the decision to give the patient inappropriate sedating medications, and he subsequently lost the ability to swallow. The patient had previously made it clear that he did not want artificial nutrition, and his wife agreed to place the patient in hospice. Immediately after this conversation, I had to deliver a baby.

Sometimes you have to just let things go. There are bad things that will happen to people that you can't control. You should do your best and you should learn from your mistakes, but you can't focus your energy on negative experiences that were out of your control.

Medicine is not one uniform thing. Variations in different hospitals, clinical settings, and patients have clear effects on patient care. Having more than one approach to a problem is an important aspect of providing the best care for patients. You will be surprised how differently patients will react to the same diagnosis. Be flexible.

Sam Carpentier



Don't freak out if you haven't figured out what specialty you're going into yet. I realize that this is much easier said than done, especially given that your third year will be a time when you will lose count of how many times someone asks you what you're going into. Just try to remind yourself that you are not the only one still figuring it out. It is okay not to be certain of how you want the rest of your medical career to go. It's okay to change your mind a million times along the way. I've been there, and it can feel like there's a lot of pressure to make up your mind early on this year, but you do have time to let yourself explore. The journey that is your medical career is a marathon, not a sprint. Despite being halfway through medical school, you are still barely past the starting line that is your medical career. Let yourself find things to love and hate about every role you step into. Allow yourself the freedom to explore before committing to one field because what you enjoy the most may surprise you. Find the one that feels the most like you. Find the one that lets you surround yourself with the kind of people who inspire you and who show you every day what kind of physician you want to be. Use third year to find your identity as a physician, not just what specialty that means for you but how you want to interact with your patients and your team. If you focus on the kind of person you want to be as a physician, then you'll find that the path to the right specialty for you will become clearer over time. So just try to relax and enjoy the ride because it's a good one.

Best wishes, Jessica Demes, MS4 (still figuring it out as I go)



Practical Tips for Third Year

- Always have a pen. Go ahead and buy a giant pack on Amazon now because your attendings/residents will borrow them and forget to return them.
- Always have a snack. You don't know when you will next have time for a full meal.
- Wear comfortable shoes. Don't underestimate the pain of standing in uncomfortable shoes for four hours on rounds or eight hours scrubbed into a surgery.
- Look up patients/cases the night before and read a little bit about the disease/surgery.
- **Be yourself.** Some people will love you, and some will dislike you, just like in real life. It's not worth the time and energy to try to be who you think your team wants you to be.
- If you aren't doing anything, find something to do. Read about something, go chat with a patient, find tasks you can help with.
- Be friendly and willing to help out and learn. This is really what you are evaluated most on.
- It's okay to make mistakes. I bombed presentations, totally missed diagnoses, forgot to do things on physical exams, didn't know the answer to every pimp question, accidentally tripped my attending, and still did well third year.
- Evaluations do not define your worth.
- Evaluations do not define you.
- **Support each other.** On rotations, do NOT throw your fellow medical students under the bus or be rude to them. It's a bad look. Instead, help each other out and be kind.
- Talk about the things that you are struggling with. You will see birth, death, mistakes, apologies, new diagnoses, remission, anger, joy, addiction, and recovery. Watching all of this is a lot to handle on top of trying to learn medicine and is also a privilege. That being said, it can be hard to witness. Find a way to talk it out: talk to someone, journal, whatever works for you.
- **Reach out to your peers.** Everyone is struggling this year. Something as simple as, "I hope all is well, if you want to talk/vent I'm here for you," can go a long way.
- Talk to your patients. Talk to them about their lives as well as their disease. On some rotations, you have lots of time to get to know your patients as people. You will be amazed by the stories you hear.
- **Do things that aren't medicine.** This is a marathon, not a sprint. Don't spend all your free time studying; you will burn out fast. Go hike, run, do yoga, grab a drink with your friends. It will keep you sane.

"Isn't it splendid to think of all the things there are to find out about? It just makes me feel glad to be alive—it's such an interesting world." --L.M. Montgomery

Talia Scott



Mount Bierstadt

Dear MS3,

As a third-year medical student, you will be asked questions every day. Some of them only have one right answer. When a surgeon asks you, "What is that?" answering, "Bowel," usually isn't good enough. These questions will help you learn what kind of content gets you excited. Maybe bowel is really your thing. This year you'll figure out what types of things you like answering questions about. Maybe you would rather answer questions from pediatricians about when kids know their colors, or maybe you would rather answer questions from gynecologists about the colors of vaginal discharge.

Subconsciously, you'll also be asking yourself a separate type of question with a number of right answers. Who do you want to be? Maybe you'll find your people. You might love the psychiatrists asking you about Rorschach blots, or you might love the neurologists asking you about MRIs that look like Rorschach blots. It could be that shared passions bring you to your new home. Internists love hyponatremia, and family med docs love vaccines. Maybe you'll love one those things as much as the people around you. Or maybe you'll find your place responding to a rush of adrenaline from a power drill in ortho or a pair of defibrillation pads in the ED.

Every doctor you meet this year is a role model. That doesn't mean you have to want to be them, but it does mean that they are modeling a way of being to you. I recommend you look to their examples and see what you admire. Ask yourself a couple of questions every day. What did you see that you want to keep for yourself? What do you want to remember not to do? A year from now, you're going to know so much more than you do right now. You are going to be so much closer to becoming a doctor and so much closer to knowing what kind of doctor you want to be.

Good luck to you. Remember to study for the questions you'll be asked and the ones you'll need to ask yourself.

Kate Jankousky



You did it. Step 1 might have been as gross as you expected it to be, but that's behind you now. Prepare to embark on the best year of med school yet (I hear 4th year is even better, but I currently have no experience to verify that for you). You probably have no idea what you want to do as far as specialties go, and that's okay. Even if you think you know, you probably don't. Anyway, it's time to dust off the short white coat and put on a brave face. But first, some honest words of advice:

Find your people in every rotation. You won't love every resident or attending you meet, but there is someone in every specialty willing to invest in you, even if it's not your chosen career path. Stick with them; the others won't miss you.

You don't deserve the Honors if you can't manage to look good without making a colleague look worse. You're in this together, don't be that guy.

If you see something, speak up. This actually matters.

At times it might feel like your team doesn't care where you are or what you're doing, but this means you have more autonomy than you realize. Advocate for yourself and mold your rotation to align with your interests.

Find the free food.

If you find yourself needing a break, take one. It's a long, hard year, and people will understand. Take a day to do something else.

Most importantly, enter each rotation with an open mind. You might surprise vourself.

Best of luck, Jaclyn Derieux



The Melody

Dear Rising Third-Year Student, First of all, take a deep breath. Congratulations! You made it.

My advice to you is never to forget to listen to the music of the moment. By listening to the music of medicine, I was able to better understand clinical scenarios by expanding my awareness of a situation beyond the core aspects of medicine. It pulled me into the reality of the moment. Understanding the cultural, emotional, and relational aspects of care are just as important as understanding the pathophysiology of medicine while striving to optimize patient care.

During one poignant event in my third year, I experienced one of the most powerful "music of medicine" moments I have ever had. This memory is described below.

"It's time. Let's roll back." The squeaky bed, as it was being wheeled quickly back to the OR, began to make its own tune along with the clatter of the Dansko clogs of the humans who followed. Barely audible, a prayer in Spanish, repeated over and over accompanied the bed as its lyrics. My heart beat – only audible to myself – seemed out of place with a melody that played often in this hospital and reflected my feeling out of place in the moment.

"Since it's your first time, why don't you stand at her side? We will let you know what else you can do." Things were moving fast. I stood awkwardly, trying to comprehend how to help but not knowing what was even happening, thus making this task impossible. Then the moment we had all been waiting for was arriving: the finale of the squeaky bed's song.

The baby's head crowned. Mom reached out for a hand. I took hers in mine. I stood, one hand holding hers, my other supporting her leg as she pushed, she pushed, she pushed. A baby girl, born in the early hours of a Monday morning, was perfect. After she took her first breath and let out a little but mighty cry, the OR sighed in relief. I could see anxiety leaving the physicians, relief flooding mom's face, joy filling dad's heart.

But the squeaky bed's melody was not over yet. We had an encore.

Baby B's head crowned minutes after Baby A entered the world. Because Baby B was originally breach, the plan involved delivery in the OR in case the doctors needed to convert to a C-section. However, somehow through the delivery of Baby A, Baby B decided to follow in suit and flip at the last moment to head down.

We resumed our position, mom's hand in mine, her leg in my arm, and she pushed, she pushed, she pushed. Another baby girl, as perfect as the one who came minutes before her, let out another mighty cry. I looked back at Mom who asked in Spanish, "Ella está bien?" I responded "Pienso que sí," and she proceeded to cry. Her husband embraced her, and they celebrated their first moment as a family of four.

"It's time. Let's roll back." The squeaky bed, as it was being wheeled lazily back to room 428, was finishing its song: the Dansko clunking reflecting fewer humans following than before, the Spanish prayer continuing quietly. The out of place heartbeat from before had

disappeared as the feelings of not belonging were left in the OR on that early Monday morning.

This moment was one of my best memories of third year-- one that brought me to tears. The experience I believe was expanded by listening to the music of the moment. In doing so, I was able to understand the parties involved, the fears and beliefs heading into the event, and how the moment was progressing.

Third year is many things: scary, wonderful, tiring, exciting. But most of all, it is a privilege; it is a privilege to be involved in patient care. It is a privilege for patients to share their most vulnerable thoughts and feelings with you. It is a privilege to be part of the best or worst day of their lives.

Thus, to honor this privilege, please listen to the music of the moment. It will help guide you in providing wholesome, thoughtful, and empathetic care.

Good Luck!

Kelsey Repine **GHHS**



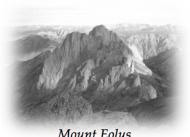
Mount Bierstadt

Congratulations, you're about to start the best part of medical school! You've made it through two years of Monday-through-Friday classes. After countless small groups, CAPE sessions, role-playing exercises, and UWorld questions, you get to play with the big kids! Third year is what you've been working towards; you get to finally take care of patients every day, practice your physical exam skills and flex your clinical judgement.

Here's a few lessons learned throughout my third year of medical school:

- **Don't over-accessorize**. In the beginning you'll be tempted to buy clinical gizmos and gadgets to somehow make your day more organized. I can promise you that you don't need any of it. By the end of the year, you'll realize all you need is your stethoscope (plus or minus a reflex hammer), a couple of pens, and your phone.
- Plan your meals. How you'll spend your lunch time will vary across rotations. Sometimes you won't have a time set aside for lunch. Grand Rounds is a great place to find a free meal.
- Ask for help. You're there to learn. Ask your resident for help with your patient presentation before rounds. Ask for help when you're learning new procedures. Ask your attending for help when you're unsure how to help your patient. Ask your nurse where to find things on the floor when you're totally lost.
- 4. Take care of yourself. You may feel like you only have time for clinic duties and studying, but that is not true. You are your best self when you make time for cooking actual meals, exercising, spending time with important people in your life, and sleep!!
- 5. Do your best to be helpful. Ask your team about their expectations and ways you can meaningfully contribute. You will find that when your team enjoys working with you and can rely on you to get tasks done, you'll have a higher-quality learning experience.
- 6. **Remember why you're here**. There will be some days that are tougher than others. There will be long hours. You'll work with people you may not get along with. You'll take care of patients that may be difficult. You'll participate in aspects of patient care that might not be your favorite. You might be present for the worst day of someone's life. It can be easy to forget the good and focus on the bad. I would submit to you that there are more good days than bad, more happy stories than sad, more ways to make a positive impact than none.
- 7. **Take care of each other**. When you're having a hard time on a rotation or need help processing significant patient experiences, talk to your peers! And likewise, reach out when you notice your peers struggling. We are all in this together!

Eric Viquez



Mount Eolus

Dear Third-Year Medical Student,

Congratulations on getting through the first two years of medical school! You are about to start the most difficult, emotional, and exhausting year of your academic career. The best advice I can give you is to let go.

Let go of the obsession with grades. Grading in third year is weird, unfair, complicated. You will drive yourself crazy thinking about it.

Let go of your insecurities and need to be right. Take chances, speak out, don't afraid to be wrong.

Let go of any notion that you must love everything or always be positive. You will most likely hate certain rotations during 3rd year. That's okay. Don't feel like you're a bad med student for not loving everything. You just need get through it; you don't have to do it forever.

Lastly, be nice to everyone and be on time. Make your interns and residents look good because then they will make sure that you look good. Sleep when you need to, leave early when they tell you to. And don't forget to have Fun!

Cheers, Warren Keyser



So, if you're reading this, I think it's safe to assume you're starting your 3rd year. You've probably heard it already, but I think congratulations are in order! Huzzah! But seriously though, medical school is hard. ALL of medical school is hard. Every bit of it. Maybe you've been told that it all gets easier after (insert random thing here, like Anatomy or CVPR). Yeah, I'm still waiting for it to get easier... Anyway, time for some knowledge bombs to hopefully help you have a more enjoyable 3rd year that, to be clear, is also hard but also AMAZING. I should preface this by noting that my clinical experience is obviously different from my classmates and will be different from yours.

Without further ado, and in no particular order:

- One of the most helpful bits of advice I got: enter each rotation as if it might be what
 you're going to do for the rest of your life. I'm not endorsing lying to your residents
 or attendings when asked about it but genuinely be open to the unique experiences
 you will have in every rotation. You'll get MUCH more out of a rotation if you stay
 inquisitive and engaged.
- You will be there at the start of someone's life. It's gross. It's also really cool. It can be super scary, too. There can also be lots of blood and other body fluids. Don't wear nice shoes on your OB rotation...
- You might also be there at the end of someone's life. I was privileged enough to be present with one of my patients and her family when she took her last breath. I helped treat her for three weeks before she died, so I knew her and her family well. We had talked about death and prepared as much as we could. I thought I was prepared, but I wasn't. I definitely cried--we all did. We grieved together before I had to get my resident to pronounce death. Afterward, I had to see my other patients and then go home to celebrate my anniversary.
- We are super privileged in our place as medical students. We can take time to talk with families and patients about anything. We get to be involved in some of the most intimate parts of people's lives. Be thankful and be respectful of our privileged status.
- There are resources if you need help. Don't be afraid to talk with a resident, or attending, or classmate when you need help. We have resources on campus that they'll tell you all about during your ICC before 3rd year. Don't hesitate to use them.
- Learn as much as you can. You're probably going to go into each rotation feeling like you don't know anything (because in comparison to your residents and attendings, you probably don't), but you'll learn a TON in a short amount of time. Just about the time you think you're getting into the groove of a rotation, it'll be time to switch and go to another one.
- Be comfortable being uncomfortable. It'll happen all the time.

- If you don't know an answer to something, that's okay, but go find out. Whether it's about a patient's labs or what nerve innervates the lateral aspect of the calf, find out and report back if you don't already know the answer.
- Always try to become more efficient. You'll see certain interns and residents using their own systems for rounding or checklists. Ask them about it. Ask them how to get better. Use bits and pieces from whatever you find out to develop your own system. Part of 3rd year is finding out what works for you so that you can do well in whatever field you choose so now is the time to test it out.
- Specific to surgery: when scrubbing in, it should take you longer than anyone else. Just because the attending can do it well in 20 seconds doesn't mean that you should. Also, introduce yourself to every single person in the OR. It might even help to leave an index card or something for the nurse, so they have your name written down. Don't take things off the scrub nurse's table. Just ask for things if you need them. You can never be too nice with the OR staff. Don't wear your white coat in the OR...
- Do lots of questions when studying for the SHELF exams. Most rotations have certain nuances in studying that they'll go over during orientation. Listen to them and see what works best for you. Start early, and stuff won't pile up.
- Same goes for evaluations. I never had any trouble getting useful feedback/direction from residents or attendings, but you also probably need to do irritating things called Direct Observation Forms (DOFs). No one likes them. They can be useful if you're not good at asking for tips or feedback, but they're usually required so just get it done. Don't leave other assignments like case reports or training until the end of a rotation because that's when you're going to be freaking out about your shelf studying that you haven't done enough of yet, so don't make it worse.
- Be nice and friendly to everyone, even if they're not to you. Seriously. Just be nice. It goes a long way and is generally good life advice, at least I think so.
- Have fun! Try to see your friends when you can. It'll be hard but try to make the time. Try to work out or go for a hike or even a walk around the block.

3rd year is a wonderful time--it really is! It'll challenge you in ways you didn't expect, and it'll help develop you into a better adult and almost-physician. You got this; we all believe in you!

Travis Driscoll



Mount Bierstadt

I hope this letter finds you well, although this is unlikely as you recently completed Step 1 and are neck deep in anxiety. In this letter, I will outline the ultimate and only advice you will ever need for third year. This advice, should you choose to accept it, is the only advice you should ever listen to. This advice will work for every single person, as medical students are all a monolith with no unique differences among them. You will not need to figure out what works for you as this is the only thing that will work. The only other resource that might be of help is Student Doctor Network and Reddit as people on those forums are the most honest, morally upright, and encouraging individuals you will ever come across.

First of all, it's time to address some lifestyle issues because things are about to change. There are a couple of key things here. You can completely forget about taking care of yourself (as if you did this anyway during the first two years of medical school). Third year is a wake-up call for the life you are about to endure in medicine. And by wake-up call I mean it literally. It is time to get as little sleep as humanly possible. All studies show doctors who sleep less tend to have an easier time learning information, better clinical judgement and fewer errors on the job, especially in the operating room. Looking as sleep deprived as possible will demonstrate to your residents and attendings your utter commitment to your profession. On top of this, it is key to constantly remind everyone of how little sleep you received the previous night, and how well you function as a result. Plan to wake up at some ridiculous hour of the night, say 2-3 am, to begin reading Harrison's Principles of Internal Medicine.

You can completely forget about working out or going to the gym. That free gym membership they gave you--yeah, that's a trap, set up by the Dean's Office to identify slackers who go there too frequently (> 1 a week). I mean, it's not like any research has shown benefits to exercise. In fact, the only conclusive data (p< .00000005) shows that people who exercise more have higher rates of depression and anxiety. Your personal well-being isn't that important anymore anyway. It's time to focus on being a doctor.

Thinking about what you should eat if you're not going to the gym? You will find the hospital littered with free food at various venues. Demonstrate to your team how resilient you are by refusing free food at every venture. You're already several hundreds of thousands of dollars in debt; you can go further in debt to buy food. If you must, only snack on the junk food that is provided, in secret. Get as much sugar and processed food as you can. Healthy food won't help you focus or feel good.

Secondly, it's time to address the wards and clinics. Only show interest in the specialty you want to go into, neglecting in the process any other types of medicine. Being open minded is so outdated and not evidence-based. In fact, emphatically announce to your team on day one that you hate let's say pediatrics and are planning to do orthopedic surgery (everyone should do orthopedic surgery). If you must, only see the patients who are relevant to your chosen specialty.

When it comes to day to day things, plan to show up as late as possible. Your residents are there early so what's the point of also coming in early? Since you woke up at 2am and have been reading Harrison's, just keep doing that. Learning from patients is OVERRATED. It's unlikely that these transformative and essential interactions will be retained in your memory. The worst thing you can do is check up on your patients later in the day; this is what attendings and residents are getting paid to do. If asked to do a procedure, emphatically

decline, as this will just eat up your valuable reading time. Once you start to miss reading Harrison's, ask your residents at about noon to go home and do more reading. They will marvel at your commitment to learning and will be delighted to get a medical student out of their hair. If they refuse, just leave anyway. You're paying to be here!

Oh, and remember all those UWorld problems you did to prep for Step 1? Yeah, don't do anymore of those. Everyone will tell you that's the best resource to learn and prepare for shelves and Step 2, but really, all that matters is reading those giant medical textbooks, like the aforementioned Harrison's. I was told to do a nice pace of 10 questions per night, but I found this to just get in the way. UWorld is a scam anyways.

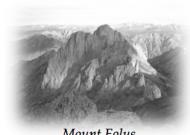
Now you may have noticed that I didn't mention social relationships like family and friends, and this was by design as I intended not to mention it (editor insisted I mention this even though this point is very intuitive). This is because you no longer have any social relationships. It's over. Family and friends? Don't plan on checking in on anyone, making any phone calls or getting lunch on your only day off. Your commitment is now to medicine. Heck, for the best use of time, delete their numbers (but go on Amion and put down the numbers of all consultants to call directly at midnight with questions while you read Harrison's). A proper doctor should have no support system, and in reality, shouldn't need one. You are now entering the world of resilient robot physicians, so it's time to start acting like one. You might only have one day off a week, but don't get behind on your reading to call your mom/dad/brother/sister/significant other/friend.

They will understand as you have undertaken the journey of becoming the noblest person: a doctor.

Sincerely, Gunner MS4

PS: Please don't listen to a single thing in this letter, and plan to do the opposite. In case it wasn't abundantly clear, this was a complete parody of what to do in 3rd year. Please, please, please take care of yourself. The world needs doctors, yes, but it needs healthy, happy, and sane doctors more than anything!

Abdel Albakri



Mount Eolus

To My MS3 Friend,

In my first year of medical school, I learned about the translocation that gives rise to Burkitt lymphoma. In my second year of medical school, I re-learned (and subsequently re-forgot) the Krebs cycle. My third year marked a departure from that simplicity. Its greatest lessons no longer formulaic but messy, rich, personal. Allow me to enumerate a few of them.

I learned about the ugly things we do in medicine as I crushed the chest of a fully heparinized post-arrest patient, the wails of his family admixed with my piston-like compressions, the dispassionate commands of the code team leader, and the gurgle of crimson slime gumming the Ambu bag. I learned about the futile things, too, like when I performed an emergent thoracotomy and massaged a heart back to life, only to watch it die later, alone, in what to its owner would have been an unforgiving night in a foreign town.

I learned about despair in the ICU, fear in the ED, and anger in the OR, but also courage, justice, and precision. After all, where there was barbarism and tragedy, there was also light and beauty. I learned about levity from dozens of patients, such as the professor with an impeccable de Gaulle mustache and untiring wit, who, sensing my MS3 asceticism, advised with a wink, "everything in moderation, Mr. Fox, even moderation itself." I obliged. I learned about peace when I joined a family in song to see off their loved one, who died with grace and dignity after a 20-year toil with a rare cancer. I learned about fallibility when I made mistakes, about humility when I owned them, and about forgiveness when I made amends.

Not all of third year transpires inside the hospital. Elsewhere, I learned about cynicism as our lawmakers attempted to strip insurance coverage from our patients, and, at the same time, about civics as we endeavored to stop them. At home, friendships and family dynamics evolved. As they did, I learned about relationships, about why some fracture while others strengthen under strain. I learned about love as I fell into it; I learned even more as I fell back out.

I share all of these learning experiences in part to prelude what lies ahead, and also to illustrate the one bit of advice I have to give. It resides in a line from one of Rilke's "Letters to a Young Poet", whose title and spirit have influenced those of this collection. "The point is, to live everything." I think that is the point of third year as well: live everything, and thereby learn it. In medicine we have a remarkable privilege to witness (and indeed, experience) the entire spectrum of human triumph and tragedy, replete with its ugliness and beauty, its cruelty and heroisms. What a gift.

In my third year I learned what it is to be human. I hope you do, too. Don't shy away.

Jake Fox GHHS



Congratulations on your start of clinical rotations! By now, you have likely been given countless survival tips by dozens of people, but I would like to provide a few more.

Three fourths into third year, my eldest brother was killed in avalanche. Ben was my best friend, role model, and the best teacher I ever had. Several years ago, he shared a few tips for "real life." As you began your real clinical career, I would like to share these tips with you:

- First, and most importantly, don't ever be afraid to engage risk and take chances. I
 continue to be amazed by how many incredibly smart, capable people there are in
 this world, and how few of them are willing to take a chance. This above all else will
 separate you from nearly everyone else.
- Don't be afraid to engage in shameless self-promotion. I know, it's cliché. There are
 lots of self-promoters out there. There are relatively few who do it with a sense of
 dignity and class.
- Spend the first couple years of your career, both in [medical school] and thereafter, working harder than everyone else to find yourself in a place where you can start having more fun than everyone else.
- When it seems like life sucks, remember that this is just the start of the journey.
 Periods of difficulty can seem like they will last forever, but they won't. If you stick with finding solutions, instead of falling apart, subsequent challenges will become easier and easier to manage.
- Don't measure yourself in terms of traditional bars of success. Measure yourself in terms of how much a given experience makes you grow.
- Find something to do that can act as a release valve, something that turns your mind blank for a period of time and lets you escape from all the anxieties of life. Don't always have the release valve be happy hour.
- Use your network, not the one that helps get jobs but the one that loves and supports you.
- Go after what you think you want with all requisite passion.
- Be flexible enough to allow what you want to evolve as you chase it.
- Realize that you are not wholly in control of your life. Trust that the world will help guide you to greatness in whatever form it appears.

I wish all of you the best of luck in the year to come.

Sincerely, Carson Walker



Mount Bierstadt

Stay Human

What I will tell you is that everyone's experience is different. That time stretches and bends. That some minutes--in the operating room, or in a resuscitation, or on rounds when you're getting asked questions about the latest set of septic shock criteria--will feel like hours. And that hours spent talking to a patient--about her dogs named Raisin Bran and French Fry, and how she wasn't worried about the cancer invading her belly and keeping her in the hospital, but about whether her tomatoes would grow this year--will fly by.

So many patients will touch your heart in ways you may not have thought possible. Pay attention to the fabric of your emotions. I took care of a man with chronic pancreatitis whose life was crumbling as he languished in the hospital for three weeks. But despite losing his job and his health and slipping into alcoholism, despite his tendency to lash out at providers who refused him pain medication, we shared a love of the mountains, of exploring trails flanked with golden aspens leading to vast vistas that made you revel in things larger than yourself. And when he was discharged, we both celebrated his ability to return to what he loved. You too will make memories like this: bright and true.

You are more useful and more helpful than you feel. Someone told me this at the beginning of my third year, and I didn't believe them. So, I want to tell you a story. The second day of third year, I obviously knew next to nothing. My brain's folder of Step 1 facts had been scattered to the wind over the course of a weeklong vacation. But that day, I learned from an anesthesiologist that in the OR, people fall asleep to a lot of different things; we had asked them to pick out a good dream or a favorite memory. Sometimes people would say what you might expect. They'd mumble about the time a few months ago their feet skimmed the gritty smooth sand of Martha's Vineyard past candy cane lighthouses as they watched their grandchildren build sandcastles past the breaking point of the surf, or the time decades ago they had wandered the vineyards of Tuscany on their honeymoon, all olive skin and purple tongues. But once, another patient, a middle-aged woman with hair dyed green, practically yelled into the mask, "Avocados." And it was my job to describe the creamiest, most luscious forest-green avocado ever with a leathery crunchy shell that peeled away easily, an avocado that did just fine being eaten on its own with a spoon and needed no tacos or seasoning or lemon juice or toast to shine. By the end of my description, she had a gently upturned smile on her face, asleep and ready for intubation. You too will find pockets of opportunity where you will hold a patient's hand, take time to reach out to a struggling family member or peer, and use your unique gifts to help those around you.

During third year, you will find what makes you tick. This takes time, but be on the lookout. For me, after driving along roads studded by free-range cows and windstorms stirring up tumbleweeds in the shadow of the San Juan mountains, it was the atavistic wonderment of seeing the luminescent organs of the abdomen for the first time. For you, perhaps, it'll be holding a minutes-old baby, or pushing with a mother in labor, or counseling someone about their chronic health problems so they can return to what they love or helping comfort someone in their final moments of life.

Third year can run you down, and that's why my biggest piece of advice to you is to stay human. Whatever it is that makes you whole, you will need more than ever: your support system of family and friends, the activities you find meaning in, maybe just three mindful breaths in your car before heading to the hospital to pre-round in the early hours before dawn.

Taking time for yourself will not only make you into the healer you want to be, but your patients too will be better for it.

Priya Krishnan GHHS



It is hard to say what third year will be like for you. It will depend a lot on who you are as a person: how introverted or extroverted, how well you do with early mornings and late nights, your preference for uncertainty or routine, your career goals and interests, and probably many other things. It will also depend on some seemingly random factors: which location you are at for a rotation, the resident on your team, the patients you happen to be assigned.

Talking with my classmates over the past year, I was struck by how varied each person's experience was for any given rotation, and even more so their perspectives on the year as a whole. I know what third year was like for me; it will probably be very different for you.

My advice for you, then, is this: Do your best to figure out what you want from the year, and then try to make it happen. Do you want to know what specialty(ies) fits you best? Are you interested in gaining specific kinds of medical knowledge? Or specific skills? Do you want to get better at talking with patients? Or presenting to attendings?

At some point, you will set goals for your clerkships. This is good, and your teachers will tell you it is the secret to adult learning. It probably will help you to learn. But I think goals are helpful for a different reason. If you know what you truly care about in third year, you will be able to go after it. You will be less likely to get distracted or overwhelmed by other people's expectations of you. You will be able to sort through the sometimes chaotic, unpredictable or dull days to find something meaningful to you. You will know what to pay attention to and what to let go of. It will make the year easier. At the end, you will know what you got from it.

Third year has many requirements, and you will need to complete them all. But as you move through the year, try to keep in mind what matters to you.

Best, Zoë Panchal



Congrats on making it to an important milestone of your career! You made it through all those hours of sitting through lectures (or on PanoptoNation or neither of those avenues) and small groups learning about topics from muscle actions to reproductive physiology. You also got a small quiz done as well at the end of your second year!

Now you will finally find out what your upper classmates mean when they say that this upcoming year will be the hardest year that you will work in medical school, but it'll also be the most fun you'll have as well. It's definitely a time when you will learn a ton and will fill your brain with more knowledge than you thought possible. It'll be a time when you figure out what kind of doctor you will be. It's going to be a time of exploration. Are you gonna be the conductor running a tight ship as you repair an aortic dissection? Or are you gonna be the steward for all patients and their chronic illnesses? Or somewhere in-between? You'll get to see things that many people on Earth will never see in their entire lives, from open heart surgeries to treating hepatic encephalopathy.

At the same time, you'll see the dark side of medicine. There will be days when you feel left out, quite alone and beside yourself. You'll see patients trapped in endless cycles of repeated hospitalizations or patients too sick to leave the hospital. In those moments you'll find yourself not knowing what to do as you're reminded about the voices from your peers to advocate for yourself. But you will make it through those days. And it will only serve to remind you of the precious position that we have as health care professionals to be there not only for ourselves but also for the patients and our colleagues around us through these tough times.

In addition, the interactions that you have from here on out will serve you well. You will see behaviors of physicians whom you don't want to emulate and those whose behaviors that you want to absorb and incorporate into your practice. You will meet that perfect resident or attending whom you admire, and in the future, hope to be even a little bit as skilled.

And maybe some or all of the above will not happen to you. And that's okay. Because at the end of it all, our different experiences are what will build us into the future physicians who will be that resident or attending whom the future third year will look up to in awe. We will get there someday. Third year is the just the beginning of a ripe and rippling rite of passage to get there: to the promise land.

Finally, a few things... Believe in yourself. Stay with it and always stay true to yourself.

Pierce Lewien GHHS



Dear Rising Third-Year Student,

First off, congratulations! Congrats on getting through your final year of classic, didactic learning. And welcome to a whole new environment of self-directed, experiential, emotionally- and physically-taxing, inspiring, and profound learning. For me, this entirely new chapter of education frequently reminded me of middle school:

You remember back in middle school when you first walked in: no clue how to work a combination locker, shell-shocked that summer had ended, and you had to wake up before 8am, excited to be in a bigger and better school, but also petrified of just how new, different, and occasionally friendless everything was? You remember that feeling? This is third year of medical school.

The stakes have just changed. The new scary environment still has lockers; they're just outside of ORs now instead of gym rooms. You still have no idea how to work them. You're still shell-shocked that you have to wake up so early. Rounds, for some folks, start at 6am. You're still excited to be in a bigger and better school; you're excited to be learning the real deal. But you're also petrified, and occasionally you'll feel friendless.

For me, the most striking part of being back in middle school was my desire to be liked – my desire to attain a new kind of popularity. I'm not talking about the meangirls wear pink on Wednesdays kind of popularity. It's more of a please let me interview that patient on my own, I'd like to try that procedure, and it's okay to be vulnerable with me kind of popularity. Deep down, there's still that please write me a good evaluation – or even please write me any evaluation popularity.

So, my advice to you, rising third year medical student, is to embrace the uncomfortableness, awkwardness, acne-ridden and people-pleasing part of medical school.

Embrace the uneasiness knowing that:

1) You're not alone.

You may feel like it because your support systems are all across the state; they're similarly struggling with their own version of third year middle school medical school. But you're not alone. It's okay to reach out. It's okay to ask for help.

2) It's not you. It's them.

It's an unfortunate truth that this is a part of medical education: the pimping, belittling, and constant feeling of inadequacy. "I don't know, but I can look it up," gets really old. Remind yourself of just how brilliant you are to be here, to be trusted by your patients when they tell you about their illnesses, struggles, concerns, and fears.

3) Time for the big movie cliché: You can still be true to yourself.

Even though third year feels like a never-ending battle of friendship building attempts, you are still the compassionate, smart, and kind medical student who entered medical school. You will be challenged in ways that you didn't

expect to be challenged this year, and that's okay. Remind yourself of who you are and embrace that person.

My hope for you is that third year will feel less like middle school for you than it did for me. In the event that it does, however, know that you'll be a better person at the end of it. You'll be a smarter, more understanding, more empathetic, and more driven person at the end of it. You'll be all of these things because your patients have changed you for the better. And you've, hopefully, changed them for the better, too.

Sincerely, Maggie Teets (New High Schooler)



Dear third year.

I went into third year thinking it would be one of the most intense years of my life. I expected long hours, maybe a little bit of verbal abuse. I expected to be routinely made to feel like I knew nothing and that I would probably prove them right.

The reality was far different.

I had whole weekends off during most rotations. I was never on the other side of what I would judge to be anything close to verbal abuse. Even though I felt like a phony for the first month or two and the first two days of most rotations after that, I realized I had actually learned guite a bit. That's the beauty of low expectations.

The harm of low expectations is the insidious way that they can creep into your perception of living.

Because of my low expectations, I often would not expect to be home on time in order to make plans with friends or keep up contact with my family. I would push off the idea of going on dates, of working out until I was about to break--until the times when I had to go on a run now or else.

In effect, I had inadvertently deferred living for a year. I had fallen into the trap of telling myself it will be better when... X happens. When X is over, then I'll do X thing that I've been meaning to get around to.

When I've told attendings about this, they've nodded knowingly and shared with me that they've done the same, that they wished they had prioritized living as much as they do now.

So, what I'd like to urge you to do is to prepare for the worst but expect the best. Seek to be your best. Make time for living.

Live with authenticity. Devote yourself intellectually. Stay personally curious. Embrace spontaneity. Live with kindness.

Those are my newly-minted five principles. Write your own. Remind yourself of them. Live by them. You won't regret that.

All of my best, Halea Meese



Mount Bierstadt

AFTERWORD

We are deeply grateful for all of the students who contributed their thoughtful and insightful letters. These letters were written while the students were completing their third year. Much has occurred since that time. However, the advice in these letters is meaningful, not only to the upcoming phase of your education, but also for life in general. The themes of kindness, camaraderie, and authenticity recur in these letters and are good principles to follow. We would like to thank all of the students who were willing to share their thoughts and experiences to support their younger peers navigate this challenging phase in becoming a physician. Thank you so much for your generosity, stay healthy, and continue to support each other in this next phase of your training!

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 Third-Year Student*. There is no word limit, but we prefer submissions to be fewer than 1000 words and should not include identifiable patient information. We accept both poetry and prose, and you are strongly encouraged to be as creative as you dare. Please identify your Advisory College when you submit your letter. If you choose to submit your letter anonymously, stricter criteria for publication will be applied.

Please submit your letter to Dr. Therese Jones (therese.jones@cuanschutz.edu) and Dr. Anjali Dhurandhar (anjali.dhurandhar@cuanschutz.edu) for consideration for publication. The submission deadline is August 15, 2020. If accepted, your letter can be included on your curriculum vitae as a publication. We look forward to your letters!







