

Art of Doctoring
Group 1 Assignment

Hi, everybody. Great group! Thank you for being so participatory and open. I think we are going to work very well together.

Our next meeting is not until Nov 11 (sorry for the gap, blame it on scheduling). So it's important that you remain focused on your *intention* for participating in this elective, which is to keep compassionate and empathic attitudes and behaviors toward patients, and toward others generally, in the forefront. One way you can do that is by *acting* like a group, even when we are not all physically together. In fact, we are a kind of "intentional community," coming together for the purpose of trying to become (just a tiny bit!) better people. So don't hesitate to remind each other that you are "part of a community," when you are on the same rotation, or pass each other in the corridors. Also consider using email to share an inspirational quote, ask a question, or make a suggestion. We can all learn from each other – really!

The second way you can keep focused is by *actually completing the writing assignments below*. Unless your initials are AB, you do not have to complete every aspect of the assignments with total precision and absolute comprehensiveness (just kidding, A!). But please do make a whole-hearted effort. If there is one part of the assignment that you don't find helpful (e.g., you don't like jotting down the numbers), discontinue it. If you really want to concentrate on one part, and deemphasize others, feel free to do so. The main point is that we've learned over the years that people usually get a lot more out of something when they put sustained, systematic, and focused effort into it, rather than simply "thinking about it" on the fly. As Dr. X observed, doing the writing is less a matter of time than of intention (ahh, any parallels between this and patients whom we "don't have time" to interact with empathically?!). Make a commitment, as an experiment, to write for 5 minutes every day – or 7 minutes twice a week – or whatever you want. Even if this doesn't make sense to you, do it as a kind of discipline, and then in November you can tell us how much you hated it ☺. To encourage this effort, we hope/expect that you will all bring your journals to our next session. We won't be collecting them (!), but we hope you will have identified an interesting passage or two that you will be willing to share.

Now as to the specific assignments:

- 1) Same old, same old: Particularly for those of you who did not write anything down this time, or who were confused about what you were supposed to write down, or who loved writing this stuff down so much that you want to continue...
 - a) Daily numerical rating (1-10) on "how good a job did you do at work today" from the perspective of acting in a kind, compassionate, empathic, and caring way toward your patients.
 - b) Daily numerical rating (1-10) on "how you felt about yourself today."
 - c) Example of one "good" thing you did (professional OR personal) that made a positive difference in someone's life in the sense of that person feeling cared about, valued, understood, respected etc.

- d) Example of one situation which, looking back, you wish you had handled differently, in the sense of being more understanding, patient, kindly, compassionate, etc.

2) Emotional equilibrium scale and commentary:

Make a scale that looks something like this, or one of your own devising:

+	+	+
Complete emotional detachment/objectivity (patient could be a slug or a paramecium for all you care)	Emotional equilibrium Osler's <i>aequanimitas</i> combination of steadiness/tenderness	Complete emotional "overwhelm," meltdown (patient needs to put <i>you</i> back together)

Write down each day where you think you fell (either overall, or based on a single clinical interaction); then comment how you felt about that (pleased or disappointed), and why you think you acted as you did. Jack Coulehan, a professor of internal medicine at SUNY and an accomplished poet, has written a wonderful essay on emotional steadiness and tenderness. He defines steadiness (which he prefers to the more emotionally vacant terms of distance or detachment) as the ability to keep a calm and even emotional keel when all around you is emotional chaos and turbulence (an attitude that says, "Ah, this too" and that communicates "Don't worry. I can handle this situation emotionally. I can contain this grief, this fury, this helplessness." Tenderness, on the other hand, is the ability to care about the people/patients lost in all this emotional turmoil, to be moved by their suffering.

- 3) Below is a partial summary of some of the ideas/concepts that emerged from our group discussion. Choose one that you will commit to as a "practice," and then write each day briefly about how you did, how you felt, and what you noticed.
- a) Relax/center physically, emotionally, and spiritually as part of each transition (before interviewing patient, presenting to attending, eating lunch, going home)
 - b) Set a daily intention ("I'm going to focus on being compassionate, grateful joyful, kind, loving, attentive, alert etc. etc. in all situations today")
 - c) Be "present" (attentive, aware, focused) in each moment
 - d) Be aware of and labeling your emotional state ("I'm feeling... annoyed, panicked, angry, guilty, fearful, anxious, worried, exhausted, incompetent, idiotic, disgusted/ joyful, grateful, happy, proud, enthusiastic, etc.)
 - e) Try to understand how every person/situation you encounter is your teacher
 - f) Pay attention to how you can bring your most important values into your daily life
 - g) Practice compassionate curiosity toward patients (and others)
 - h) Practice "deep listening" toward patients (and others)
 - i) Share more of yourself with patients (and others)*
 - j) Spend five minutes thinking creatively and compassionately about patients (and others) when you don't have to

- “Sharing more of yourself” does not necessarily mean telling people your life story but learning to be more “authentic” with them, filtering the unique essence of who you are through the shell of professionalism.

Remember, we want you to take this assignment seriously and *write about stuff!* But don’t hesitate to tailor the assignment to your needs and interests. Maybe you would like to stick with #1 for the next 6 weeks. Maybe you’d like to spend a week on each, and see which one you like best. Maybe you want to modify the assignment to make it more “your own.” Be creative, be bold, but be committed.

The sloppy, angry, inconvenient, hurried, and difficult Buddhas around us can teach us steadiness, equanimity, and compassion.

- *Jack Kornfield*