

**PEDIATRICS HUMANITIES PROJECTS – COMMENTS 5/15/05**

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Hi, -- and --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. "Dr. Monster" was a really well-executed little booklet. I don't know who did what, but the drawings were both cute and technically skilled; while the rhyming stanzas told an endearing and readable story that kept me turning the pages. Also, the take-home message is a good one: hospitals and doctors can seem both alien and scary, and not just to kids. A simple act of kindness both humanizes the physician and alleviates the fear of the patient. You both did a terrific job! Thank you, Dr. Shapiro

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Hello. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. I understand you are exchange students from Norway. I don't know what you made of this unusual exercise as part of medical education, but I'm glad to see you participated with such good grace. Your idea of a chart note as a method for describing your situation was both creative and clever. I hope your experience in this country is improving, and that your chief complaint is resolving successfully ☺. Regards, Dr. Shapiro (Director, Program in Medical Humanities & Arts)

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Hi --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. You came up with an ingenious visual method for getting little kids to more accurately assess their pain level. What I particularly like about this project is that you thought creatively about a common problem affecting your ability to care effectively for your patients; then came up with a novel solution. It is this kind of original thinking that will make you an excellent and caring physician. Dr. Shapiro

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Hi --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. How nice to find some trace of you again! You've written another lovely poem that speaks so truly in the voice of a tired, devoted, fearful, but hopeful mom. This is the plight of the parent, the long hours, the lonely drives, the emotional ups and downs, the hyper-vigilance. I especially liked the line, "But the hands of healing do not always bring gifts." This is a sad but true reality of medicine that patients and physicians both must learn to accept. Take care and much good luck finishing up this year. Regards, Dr. Shapiro

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Hey --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. Thank you for this very simple, very moving haiku. I like seeing you explore other artistic forms. The situation you describe sounds so tragic. It reminded me that parents of severely ill children often post "before" pictures on the kids' beds, to show medical staff of the person of the patient. It also reminded me that this young man apparently does not have parents who will post his "before" picture; in fact, for him there is no before picture. This led to the rumination that far too many people, even those not as severely disabled as your boy, lose their voice once they become patients. Your poem does not fix what happened to CD, but it helps find a voice for him. Thank you. Dr. Shapiro

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Hi --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. I wish I had been there to hear your explanation, but it looks like Pediatrics A to Z, the happy times, the sad times, the craziness, the awfulness, the miracles. I hope the peds clerkship was a good experience for you. Nice to catch a trace of you again! Hope this year is going well for you. Regards, Dr. Shapiro

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Hi --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. This was a particularly lovely poem. The dominant image of intertwined lives is very powerful. It actually reminded me of a poem you wrote last year, I believe. You have a keen awareness of how the physician both understands and cannot ever fully grasp the life of the patient as s/he interprets it through the chart note. Yet despite the incompleteness of the connection, in some way patient and physician do come together. Thanks for such good writing. Dr. Shapiro

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Hi, --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. This is another poignant piece of writing. I wish I'd been able to learn the back story, but the image the poem creates is the grief of a mother who misunderstood and misinterpreted many of her daughter's early symptoms and behaviors. The poem seems to me a terrible lament of regret. It is the emotion of a mother who cannot save her child. I especially liked the third stanza, which is so uncompromising about the nature of pain. No iambic pentameters here. Great work, --. Dr. Shapiro

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Hi --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. I thought your approach to the humanities project was interesting and original. Not too many people are able to admit the vulnerability and even regressiveness that can easily occur during third year. Clinical training still relies on punitive approaches designed to "teach" through humiliation. Clinicians should take a page from child development studies, which conclude that learning is most effective when children are encouraged, supported, and allowed to make mistakes without blame and shame. In any case, I appreciated your thoughts on this topic, and hope you will "grow up" with your self-esteem intact. It's nice to find this "trace" of you again, and I hope third year is going well for you, despite third grade. Regards, Dr. Shapiro

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Hi --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. I'm glad you found the time to write up this humanities project, and just hope it wasn't too onerous. This was a really touching essay. You do a great job of contrasting the stresses, pressures, and preoccupations of what faced you starting your day with the innocent, sweet smile and gurgle of SC, who had already endured so much in her young life. These "human" moments, the connections you establish with your patients, are, I think, often the "best part" of many physicians' days. Thanks for reminding everyone of this basic, but essential, truth. Dr. Shapiro

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Hi --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. As usual, you told an discerning and poignant story. I thought your insight into the emotional response of the parents was outstanding. Physicians are often surprised (or annoyed) when patients or family members seem clueless about a diagnosis, despite the physician having provided a thorough explanation. What is too easily forgotten is how difficult it is to incorporate information that represents uncertainty, suffering, and perhaps death for themselves or a loved one. There is a place for transitory denial to help patients and family cope. When denial becomes intransigent, it is cause for concern. But physicians also need to be patient, to give patients and family time and strength to come to terms with what lies ahead. Thank you, --, for sharing this awareness so literately and so well. Dr. Shapiro

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Hi --. I'm sorry I couldn't attend your peds humanities session, but Dr. X passed along some of the projects, including yours. You know how much I love this essay, which I've already read in draft form. But just so Dr. X will know how impressed I am with this story, I'll just reiterate a few points. One is how much I liked your admission of unpreparedness. There's a lot in medicine – in people – that you just can't prepare for – there are always going to be surprises. But I think the sign of a really good doctor is the willingness to remain present with the unexpected, to do your best to enter into whatever situation presents itself. Another point is how much I admire your readiness to simply make a personal connection with a patient whom medicine had failed – precisely the kind of patient doctors tend to turn away from. Finally, I am both moved and proud of your commitment to sew your own “quilt” of patient gifts that will enrich you as a person and as a physician. Beautiful work, --. Regards, Dr. Shapiro