

Peds Humanities/Reflection Projects April 2011

Thank you for your clever skit, “Ways to Approach an Uncooperative Pediatric Patient.” --, you make an excellent difficult kid! :-). In addition to giving us something to laugh about (in recognition), you gave excellent “management” techniques that are relevant not only to kids but adult patients as well; namely, distraction, reward/reinforcement, teamwork, and choices. These skills really do work well at any stage of life (there is interesting research showing that if you give nursing home pts choices about what to eat, or where to put their belongings, they do better physically and mentally). I also appreciated the impressive “doctor” demeanor, --: the friendly good humor with which you approached your patient, and your careful listening skills and probes with mom. You were a true role model for your classmates! Great work both of you. Dr. Shapiro

Hi team “Don’t Let Your Child Drown.” A good team to be on. Your presentation was clever, and also fact-filled. It showed good insight into how to “sell” an idea (in this case, pool/water safety). You caught our attention and engaged us by developing a novel approach that was not boring and contained new information. Most parents think they are “good” parents, so their kid won’t drown. Your presentation highlighted how easy it is to become distracted “just for a minute,” and also that doctors are not always miracle-workers. This is such an important topic. If any of you cared for a near-drowning victim, you know how devastating this can be. It changes families forever. Thanks for bringing it to our attention, and for helping all of us remember that a life-threatening water accident can happen to anyone. Best, Dr. Shapiro

Hi --, thanks for addressing the crucial topic of internet safety. I suspect this is something pediatricians can easily overlook. The statistics you cited were sobering, although encouraging in the sense that adolescents can change their own risky behavior based on appropriate education. As we discussed in class, we cannot turn back the clock (and probably don’t want to). The internet is here to stay, and it can be a wonderful source of connection for chronically ill or socially inept kids. But it has to be monitored carefully and guidelines, such as the ones you included in your info sheet, need to be in place. An excellent and thought-provoking presentation. Dr. Shapiro

--, thank you for choosing to focus on the important topic of foster care. It is a less than optimal situation in the best of circumstances. Nothing can replace two loving,

responsible parents. Unfortunately, for kids removed from their homes because of abuse or neglect, it is the only option available. Foster parents often struggle under difficult socioeconomic circumstances. Many are good people sincerely motivated to help kids. But for some, it's more complex. As a pediatrician on an inpatient service, there is little you can do to help such kids, other than making sure they are not being mistreated, and giving them excellent care and as much lovingkindness as a busy doc has time for. Thanks for bringing this topic to our attention. Best, Dr. Shapiro

Hi Bob Barker act-alikes. Very clever and fun idea. You definitely proved that a) medical students will compete about *anything* and b) it costs a lot to have a kid. I found the didactic portion of your presentation illuminating, especially in terms of the relative proportion of income that must go to raising a child based on socioeconomic status. This game would be a great way to teach sexually active teens to use birth control! Thanks for coming up with such a creative project. Dr. Shapiro

Dear --, thank you so much for having the courage to use this project to act the really difficult questions. The helplessness and despair of the refrain, "But what can you do?" was incredibly poignant. Medicine can be an inspiring and remarkable profession. Truly, physicians do amazing things. However, there is much that the physician cannot control. This is true both in terms of necessary suffering (suffering that can't be avoided due to disease, accident, or forces of nature) and, even worse, unnecessary suffering – what you talk about in your essay, the cruelties, demands, and neglect that parents inflict on their own kids. Your examples were excellent, ones we could all relate to.

There is clearly no simple answer to the question you pose over and over. But, in my view at least, it is essential that it be asked. Often our efforts seem discouragingly limited or irrelevant. But there is always some action to be taken; and from an ethical perspective, I like to believe this is the preferable course of action, no matter how paltry, to turning away and pretending that the problem does not exist or is none of your business. As Dr. X noted, on an individual level, you can reassure a kid that it's okay to not get straight A's; encourage a kid from a difficult family background to aspire to more; pick up a visitorless infant. Extending the system by making use of community and healthcare system resources is another way not to feel overwhelmed. On a larger canvas, you can in some way address the larger social problems that contribute to such behaviors. I don't pretend that any of these "solve" the problem, but they allow us to go forward and perhaps do some good. Thanks again for such a deep project. Best, Dr. Shapiro