



## Query

**A**m I old? I think so.

I have a medical student following me around. The good part of this process is that students are keen, much keener than I remember myself being. After every patient they research the case, looking up the diagnosis on the Internet. They hit their bedside books; they bone up. It's really heartening to watch, observing a student so interested and active in her own education. The bad part of this process, though, is that I feel old.

But more on that later. Teaching a medical student has its entertaining moments: on occasion, we disagree about what to do with a patient, what test to order or what drug to prescribe, even what referral to make. At these moments I feel my confidence gets tweaked; I ask myself, am I sure of what I'm doing, is it reasonable? All of which is to say I guess the student is teaching me a little humility. Without her around, I'm operating in a critical vacuum: there is no sober second thought. What's interesting about this is that I often *agree* with her dissent. I see her point; what she thinks, even though she's just a medical student, is reasonable too, and I often leave the point by saying, if I'm wrong, if when the patient comes back and he's no better, we'll follow your line of inquiry.

I'm more than a little amazed by this student. I never had the wherewithal to question a staff physician at such a tender age, twenty years or more their junior; I think the education system in my time was such that such questions were discouraged, were impertinent, were simply not asked. I get the

sense that this medical student's questions are for the sake of knowledge, nothing more, and so I only feel a little threatened, not a lot.

Just to keep *her* humble, though, I allow her to interview patients. I witness the fumbling diffuse interview that's the curse of the beginner, and I offer tips as to how to make it tighter. I have her present to me and witness the fumbling diffuse presentation that's also the province of the medical student, and I interject at appropriate points to streamline, not to undermine. Pertinent negatives, I intone. Pertinent negatives.

She's just such a sponge; I must admit I'm a little jealous of her enthusiasm. Some of my days are mere grunt work, just trudging through the psychosomatic trenches. She's jazzed by every case. She's reading during our lunch hour. She's *begging* me to ask her questions. I never did this; the theme of my medical education was the bare minimum, which I gather is human nature. Not her; she wants every last drop.

Which brings me back to the bad part of being a teacher. I'm making less money, because I'm seeing fewer patients, because I'm tending to the medical student. I have a dual interest now: to that of the patient, and to the student. Also, I'm exhausted at the end of the day. It's enough to worry about my flock, but now I have to worry about my student too and, thanks to that student, also worry about whether I'm doing the right thing.

This feels like age.

—Dr. Ursus