

The Story of Dr. Redshoes

Paul R. Lewis, DO

“So, I have to ask: What’s with the shoes?” This was a question I frequently got from patients and colleagues alike throughout my surgical residency. I always found it peculiar that, as a surgeon, one of the most common questions I was asked tended not to be about procedural concerns, but rather about my choice of footwear. While the standard uniform for one in my profession is a set of scrubs, a white coat, and some version of clogs, I have always chosen Converse All Stars as my footwear of choice. Typically, I divert these questions with a quip about their usefulness or “classic style.” However, the true reasons I wear them date back to the beginning of my medical training.

During one of my first inpatient clerkships as a third-year medical student, I was instructed to wear business casual clothes to work. For men, this usually meant slacks, dress shoes, and a button-down shirt. As is typical for medical students, I would show up at the hospital daily before trainees and attendings, diligently collect information on my patients, then proceed to sweat through my uncomfortable business casual attire as I was grilled during morning rounds. One day, walking to the train for my daily commute through a cold Chicago winter, I soaked the only pair of dress shoes I owned wading through snow drifts. At the time, I could afford only the one pair of dress shoes, so while they dried out at home the next day, I showed up to work with some nearly new, clean black Converse All Stars in addition to my typical medical student attire. That afternoon, my attending asked to speak to me privately. I was berated for my choice in footwear and told, “If you want to be a doctor and have people respect you as such, you need to take yourself more seriously and dress like a professional. No one will take you seriously wearing those.” While I didn’t understand the reason why my shoes inspired such vitriol, such a stern lecture had me seriously worried about failing the rotation. My “Chuck Taylors” never saw the fluorescent light of the hospital for the remainder of medical school.

The rest of my clinical rotations passed by uneventfully, and I soon found myself preparing for a surgical internship. I still vividly recalled that day as a medical student and the feelings of embarrassment

and confusion as I was lectured about how my shoes would undercut my legitimacy as a professional. Reflecting on this memory, I decided it was time to go shopping: I drove straight to a local shoe store where I bought a brand-new pair of bright red Converse and promised myself that would be my only footwear throughout residency.

Beginning almost immediately, the strangest thing happened. Hospital staff, my colleagues, and my patients began to identify me by my shoes. My attendings would chuckle when they saw them, often asking how I kept them clean, or how I was able to stand for long hours in the operating room with their flat soles. “Dr. Redshoes” became the moniker given me by the ward nurses almost overnight. Some colleagues would tell me they found me much more approachable because of my shoes, which they found amusing. My patients, starting an encounter tense and nervous, would often relax slightly after seeing my footwear. One apprehensive patient with appendicitis in the emergency department looked down, laughed, and said, “Any doc that wears Chucks is alright with



FIGURE

The Red Shoes Worn During Residency

DOI: <http://dx.doi.org/10.4300/JGME-D-21-00043.1>

me.” Later when working in pediatric surgery, the children I operated on would be calmer preoperatively because I wore shoes like they did—a tiny reminder of the real world in their scary confines of a hospital bed.

Reflecting on these experiences during my training, I often go back to that day in medical school, with my former attending pointing to my shoes as a lack of professionalism. I am grateful to many other mentors who taught me what it means to be a professional and to uphold standards of professional appearance and conduct. At the same time, holding onto my own unique style wound up helping me connect with many of those I served, even if the starting point was something as innocuous as a conversation about a pair of shoes.

Buying those red shoes started out as an act of defiance, but over my years in residency they became

a symbol of something else entirely—a kind of silent nod to the fact that, although I am the physician and you are the patient, we are in this together. The day I graduated, I looked down at my worn-out Chucks and decided it felt appropriate to finally hang them up. It was the end of an era, but I will never forget the lessons I learned while walking many miles in those red shoes.



Paul R. Lewis, DO, is a General Surgeon, 3rd Medical Battalion, Okinawa, Japan.

The views expressed in this article reflect the results of research conducted by the author and do not necessarily reflect the official policy or position of the Department of the Navy, the Department of Defense, or the US Government.

Corresponding author: Paul R. Lewis, DO, 3rd Medical Battalion, lewisp0827@gmail.com