Trusting the Process

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Early in my residency training, I cared for Ms Ruth. She was a 76-year-old who exercised regularly and lived independently, and until a few days prior, her only medical issue had been high blood pressure. She had started feeling short of breath, progressing to the point of being unable to walk or barely talk. Scared, she called her primary care provider, who directed her to the emergency room. As a new intern on the admitting team, I nervously started taking a history from her. She was a petite, grey-haired woman with a big smile, and despite everything going on, she made me feel at ease. After completing my physical examination, I explained the workup, slowly coming together in my mind. At the end of the encounter, she said, "I will do as you say, darling." I remember thinking, "for a lady that can barely talk, she is quite pleasant."

Ms Ruth's X-ray and echocardiogram showed that her lungs and heart were surrounded by fluid: large pleural and pericardial effusions. No wonder she was so short of breath. In the following days, she got 2 chest tubes placed and developed cardiac tamponade, requiring an emergent pericardial window in the cardiac critical care unit to relieve the pressure. When she was transferred back to my ward team, she said, "I am glad I got the fluid removed in time. God is kind." I was again amazed to see this woman, 2 tubes hanging from her chest and back from a near-death experience, with no complaints, expressing gratitude instead.

On one occasion, she introduced me to her children. They diligently took notes and politely asked their queries. After every meeting, they thanked us for taking great care of their mother. On another visit, I learned that she was German. Her husband was in the US military and had been deployed in Germany. It was love at first sight, and she had "no other choice" but to leave her home to settle in a new continent. Each day, walking into the hospital at the crack of dawn, I looked forward to seeing her and listening to another of her inspiring stories.

She had a tumultuous course lasting 45 days. I saw her body getting thinner and weaker. Despite that, she continued to be kind and radiated positivity. When I finished my rotation, I asked her the secret of being calm under such challenging circumstances. She said, "I believe in trusting the process."

After 3 long years of training, I was ready to be a "real doctor." During my first month as an attending physician, I encountered a patient who was unhappy with my care. He and his family requested another physician. I thought, what else can I do to gain their trust? Will they complain about me? My career just started! I reran my conversation with them several times to understand what I did to make them angry. I desperately tried to improve my relationship with the patient and his family. I increased my frequency of communication with them. I was highly conscious of every word I spoke in front of them. During shift change, I told the incoming hospitalist to let me know if that patient had any questions, and I would call them even late at night. As the patient's underlying condition improved, his symptoms resolved. His attitude toward me changed. He and his family were incredibly pleased with my care when he was discharged.

In reflecting on what caused them to change their attitude toward me, I could not find a definite answer. Was it being exceedingly cautious, always available, or visiting the patient multiple times daily? Did he get more familiar with me as the days passed and accept me as his physician? Or was it just that he was feeling better, and his family could finally breathe a sigh of relief? I continued to feel disheartened by this encounter and frantically scrutinized every aspect of the relationship and my responses. Then, I remembered, Ms Ruth's words about "trusting the process."

One day on rounds, a second-year resident who was leading a team for the first time asked me, "What is the plan, Dr Sharma?" As any attending would reply, I said, "What is *your* plan, Dr A?" After a brief pause, she nervously explained her thought process and the plan. When we discussed this during feedback, she told me she did not know if she was ready to lead the team. At that point, I told her to remember her first day as a medical student. She went on to complete medical school, match in her chosen specialty, and then finish the most challenging year of residency, the intern year. Trusting her training and the growth that came with it is easier said than done. I could see myself in her.

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Ms Ruth trusted that we would help her, which gave her strength. I borrow her courage to trust my training. Some seemingly routine conversations can have an everlasting impact. These precious moments become the building blocks of our identity—if we can learn to lean in and "trust the 'process.'"

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