

## Chapter 24

# You're a Med Student, so Now What?

Briana Christophers

 <https://orcid.org/0000-0001-5248-069X>

Weill Cornell Medicine, USA

### ABSTRACT

*This reflection chapter is from the perspective of the first-year medical student: teetering the line between the naïveté of embarking into an ambiguous future and the wisdom developing in the midst of self-discovery. From the early moments of dissecting in the anatomy lab to making decisions about which content to study further during spare time, the first year of medical school sets the stage for collecting signs and symptoms into a diagnosis and a plan. This lens extends into steps for self-reflection: outline values and current needs (akin to taking your own history); reflect on interests and skills (identifying signs); consider the roles of a physician in society (coming up with a differential for who you might become); identify opportunities for the future (crafting an action plan); seek out connections with other students, trainees, and physicians (assembling a team). In this way, students can be encouraged to take a moment to center themselves in the way they will for the patients under their care to make sense of it all.*

The cadaver donors for medical school anatomy courses are often described as the medical student's "first patient," since, as students, we spend countless hours learning deeply (both figuratively and literally) from them about the human body. It is a rite of passage to go through dissecting the body while in turn assembling a personal mental map from these parts, appreciating commonalities and recognizing variations.

Medical school teaches you to start thinking in pieces: it is necessary to break complex physiologic processes and diseases into the details to understand fully, as we do during anatomy dissection. As a first-year student I found it inevitable to start applying this way of thinking to the rest of my life; each experience seems like a symptom of the bigger picture of what comes next. Starting medical school is a point of transition where we are opened up to a range of possibilities as physicians-in-training, which is different than other decisions we have had to make before. Students are thrust into an environment of innumerable opportunities and constantly changing information where there is no set roadmap for

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the future. Applying the skills that we learn within the first few months of medical school to our own experiences can be used as a coping strategy where we dissect ourselves down while remaining whole through and after the process.

It can be tempting as a first-year student to get swept up in the novelty of the experience, the anxious energy of classmates, and the internal pressure to perform well. Amongst the endless content with which we are presented—flashcards, lecture slides, reference values, gene names, drug names and mechanisms—students may forget to take a step back, reflect and self-direct their learning. Preserving one's sense of authenticity can be challenging when faced with the uncertainty of which path to choose while in the current context of many curricular demands. In these first few months I have found myself coming back numerous times to my own personal mission, both as a future physician and a person. This reflective process has become crucial when I find myself getting lost in the minutiae, wondering how gene names and staging criteria fits into a future that is in so many ways uncertain. It has been comforting to recognize that the skills that we are gaining to serve our future patients—question, examine, and make a plan—are not separate from how we can approach our own lives.

It is critical for first year students to be encouraged to find time to reflect (and be given dedicated time for reflection) because it allows us to actively integrate being future physicians into our definition of self as we are getting more clarity about what this path entails. By having time to create a framework against which to compare and adapt, students are building a personal process of self-reflection that will mature throughout their training. Considering practicalities, first year of medical school is when students have the most unstructured time and are not constantly undergoing the emotionally- and physically-taxing work that is expected of them during clerkship training and beyond. It has been empowering to spend time this year to take a moment and center myself in the way that we are taught to methodically examine our patients.

My own strategy for self-reflection during this year has gone as follows:

Step 1: Taking your own history

When we interview our patients, we start with the chief complaint or reason for visit. What do you want to consider at this moment? What matters right now? This reason is short and specific to what you are trying to figure out at this point in your life. Perhaps it is figuring out a research direction or project, narrowing down a list of specialties of interest, identifying new mentors for the direction on which you have settled. The information gathered during a history comes directly from the patient, and so, in this way, the information you gather during your own “history” will be very personal and may be things only you know about yourself.

Then we move onto the history of the present illness: symptoms of the current or recent moment. Notice what you have been feeling lately about your “chief complaint.” Have you had any experiences that change how you have been feeling about your future? Write out your thoughts by starting a mind-map or journaling about a recent encounter.

The social history is an opportunity to think about how your lifestyle impacts what you do today and tomorrow. What are the things, moments or people you need around you in order to remain not only happy but also satisfied with how you spend your time? Consider where you hope to be, what continuing your education looks like, and how you will be spending the hours in the day.

The review of systems reminds us to take inventory of component parts to get a broader picture. Identify your own “systems:” the various roles you have in your life that fulfill you. How do you fit these into the present moment and the future? Do some of them relate to what you hope to do in your career? Some of my roles are scientist, advocate, photographer, mentor, which helps me choose opportunities

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