

Reflection's Bounty

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REFLECTION'S BOUNTY

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*Knowledge is proud that he has learned so much;
Wisdom is humble that he knows no more.*

William Cowper

A number of years ago, a new primary care patient's visit transformed the way I think about doctoring and the pursuit of clinical excellence.

A retired attorney in his mid-seventies, my patient had come in for a get-acquainted appointment at the advice of a good friend who was also a patient of our practice. He sat down next to me and clung tightly to a large, white envelope which I had been conditioned to fear might contain a merciless ream of health records to review. Maybe because of the way he held it next to him like something precious, I offered an inquiry that was distinctly outside of my usual repertoire so early in an interview.

"Is that something you would like me to see?"

As it turned out, the envelope did not contain medical records. Rather, it was a collection of remembrances of his son who had recently died from advanced cancer. I looked over the contents carefully and expressed my sympathy, and then we went on with the visit. He has since told me that it was my display of true interest in these papers that earned his trust, and he has since become one of my most grateful patients. A few weeks later, I began drafting a reflective essay about our first encounter.[1]

Around the same time, I was also studying for my internal medicine board re-certification exam, devoting an hour or so every evening to filling in gaps of forgotten facts and reinforcing new knowledge gained since the last exam. Afterwards, a few days a week, I spent fifteen or twenty minutes thinking and writing about my patient.

When the board examination date arrived around six months later, my brain was stuffed with refreshed facts and updated treatment strategies. Studying involved a careful review of prevention and treatment of disease. I reacquainted myself with things that were familiar, occasionally feeling surprised by how much some clinical strategies had changed over the years. Getting through this gave me a nice sense of accomplishment and reassurance that I was “up to date”.

In contrast, thinking and writing about my newest patient was revelatory. I considered how I was trained to extract a patient's history, and how different it felt to just receive information from him the way he preferred to share it. How much richness had I missed over the years while trying so hard to control the flow and content of my patient visits?

After completing my essay and a few subsequent efforts, it felt like I was able to notice things during clinical encounters more clearly. Doing less talking often led people to share more thorough and interesting stories, which struck me as both illuminating and paradoxical. I began to enjoy taking note of how using certain phrases and gestures would put patients more at ease, and certain types of questions and phrasing brought out the most diagnostically revealing responses. It was as if, after years working in a room with lights dimmed, I had finally found a switch to adjust the brightness.

Whereas exam preparation gave me renewed knowledge, reflective writing improved how I applied it by helping to synthesize something complementary but altogether different: wisdom. And here is the most wondrous part – like a robust plant that keeps bearing fruit with proper nurturing, ongoing reflection has kept wisdom growing unrestrained.

There are innumerable medical facts to know – more than anyone can master. Electronic databases and artificial intelligence chat bots can supplement cognitive limitations here. Wisdom though, is entirely human, only constrained by experience accrued with mindful attention. Uncultivated experience alone, I have learned, does not automatically confer expertise. Wisdom, which combines knowledge and ethical judgement acquired through self-examination, along with consideration of many perspectives, is the true road to mastery.

Reflection, whether written, conversational, or in private thoughts, has become a standard part of my clinical life, and I think of it as similar to a regular workout routine. It is energizing, inspiring, and has made me a wiser, more fulfilled, and healthier doctor. I only wish it did not take me until mid-career to come to this understanding. But, as with physical exercise, better late than never. ■

REFERENCE

1. Millstein JH. The envelope. JAMA. 2018;319(1):23. doi:10.1001/jama.2017.19273

Biographical note

Jeffrey Millstein is a primary care physician, writer, educator, and serves as a Regional Medical Director for Penn Primary and Specialty Care. He is a Clinical Assistant Professor of Medicine at the Perelman School of Medicine at the University of Pennsylvania.