

By Dr Jack Chan



Reflections with Osler's Notes

(WITH APOLOGIES TO SIR WILLIAM OSLER)

A fresh NUS medical graduate muses about the past five years...



*“Learn to love the freedom of the student life, only too quickly to pass away;
the absence of the coarser cares of after days, the joy in comradeship,
the delight in new work, the happiness in knowing that you are making progress.
Once only can you enjoy these pleasures.”¹*

In retrospect (pardon the self-indulgent navel-gazing that ensues), I wish I had come across this quote five years earlier, upon “admission to the medical course of the National University of Singapore” (then named Faculty of Medicine). That way, I would have realised earlier the many truths that this statement underscores, as I appraise this chapter of my life at its finale.

Then again, the Dean did offer my class advice to similar effect at the Welcome Tea, urging us to make friends widely within and outside of the class, and in doing so, it was hoped that some among us might find our potential lifelong partners.

It was also at this Welcome Tea in the CRC (Clinical Research Centre a.k.a. MD11) auditorium where we collectively, led by Wesley, the M1 class rep, recited the students’ pledge which was styled after the professional oath that we would ultimately undertake. With that vow, we engaged and committed ourselves to “not a college course, not a medical course, but a life course”².

One-odd year later in the same venue, we further underwent a symbolic White Coat Ceremony – a coming-of-age rite of sorts – after which we were granted permission to roam free (well, sometimes not so freely) in the hospitals.



“freedom of the student life, only too quickly to pass away...”

It is with some reluctance that I conclude my undergraduate medical education. For one, these five years marked the last – and second longest – phase of our formal schooling lives. The relatively carefree days and sheltered environment which we had the privilege of enjoying will be sorely missed by many, including myself now that

we have started our professional working lives, assumed responsibilities of patient care, faced the music for our mistakes, felt unappreciated (and underpaid?) for our work, and last but not least, in the middle of a night/weekend/public holiday call with no end in sight to the continuous stream of admissions and nurses’ CTSPs.



Jack, like his contemporaries, aspires to emerge unscathed from this year of being the ‘lowest life form’, and also to be a less dull boy now that he has cleared his Finals (thankfully!).



“the absence of the coarser cares of after days...”

I appreciated the opportunity to get a taste of what “coarser cares of after days” as a House Officer would be like during SIP (Student Internship Programme) in M5. This was felt most keenly during the calls which I shadowed: my seniors answering phone calls on loudspeaker mode while drawing blood (the trick lies in pre-emptively laying the phone on the patient’s bed); carrying a “battle plan” (i.e. a conspicuous Blue Letter which he/she would

not misplace or miss) and recording “battles” based on priority/location; sleeping while he/she could but trusting the phone to ring the next minute; having tempers frayed and thrown – unfortunately – at nurses. The experience often made me wonder whether I would be up to the task (and kinder to these Ms Nightingales) come same time this year, although the mental preparation and survival skills gleaned through it should help – fingers crossed.



“the joy in comradeship...”

On a personal level, the friendships I have made, starting from the Anatomy tutorial group, LT seating arrangements (in which certain territorial rules were tacitly and respectfully observed) and PBL (Problem-based Learning) groups in the pre-clinical years, to the CGs, fellow CGs in the same rotations and CHP (Community Health Project) group in the clinical years, were a highlight of the past five. Some of my best pals were made in this class and even though we may have had minor tiffs every now and then, it is reassuring that I can always rely upon them for company, consolation and support.

Class-wise, admittedly, we have not been the most cohesive of all. However events, circumstances, common experiences and grouses had roles in building our camaraderie through the years: Medicamp, Rag and Flag, inter-faculty games, Playhouses, CHP, clinical rotations, social gatherings, parties, as well as recovering from the shell-shocks of O&G OSCEs. And above all, from the final MBBS. For many amongst us, the now-structurally defunct Medical Library in which we bonded through long hours of communal mugging left memories to be cherished (there was even a BBQ session held on its rooftop when it closed!).

Over the few months in the run-up to the final lap, the manner in which we have ‘shared cases’;

helped one another better our clinical skills; and packed ourselves in a room clearly meant for smaller capacities to attend neurological teachings impressed me of our burgeoning solidarity. Surely, the ubiquitous trepidation and ‘horror stories’ at long last must have united us even closer (but the actual examination had only just commenced, being held on a daily basis at that).

While we were hardly one of the most proactive, vocal or outstanding cohorts in recent years, lacking in the pioneering spirit of the preceding batch (which spearheaded the first faculty-level production), or the spontaneity and exuberance of the succeeding one, we were no less remarkable and interesting as a class. Remember that we have had our fair share of personalities, ranging from MedSoc committee members (Kimberly, George, Anin, Cheesie, Belle), artistes (dancers like Amy and Felicia; musicians such as Wenyuan and Mingwei, trusty dark-humour playwright Jon Chia, Best Actress Lingzhi; sportsmen like Jen Ming, Rags, Min Wei, Guohao, Daniel, *RUMH Enough’s* Francis etc), volunteers (Ek Khoon in ReliefAsia following the wake of the tsunami crisis), high-achieving individuals (Tun Tan, Furene, Shimin, Diana, Esther Ng et al.), to class ‘jokers’ and other colourful characters (they-who-shall-not-be-named).



“the delight in new work...”

Yes, although we have suffered “ischial bursitis” from the occasional “superfluity of lecturing”³ (recall the mind-boggling biochemical/neuroanatomic pathways, yet-to-make-sense-in-M2 pharmacology of antibiotics, and excruciating pathologies of glomerulonephritides), counterbalances of satisfaction were also in ready supply: when entering the Anatomy Hall (notwithstanding that we missed our chance

at hands-on dissection by a year), clerking and examining our first patient, performing the first venesection/intubation/CPR/delivery, watching or assisting in the first operation, wrapping up the CHP for final presentation, exploring one’s field of interest during electives, and so on.

Having said that, we were time and again, humbled by our ignorance, our patients’ plights, and our often-limited means to alleviate their suffering.



“the happiness in knowing that you are making progress...”

Most of us might have been happy that we were improving in terms of clinical skills and judgement, making gains in book knowledge or progressing to the next stage of our medical careers.

However, the personal development and character-building – or the so-called “education of the heart”⁴ – I have undergone as an individual during my medical school days hearten me and matter much more.





“Once only can you enjoy these pleasures.”

In conclusion, while we might have had to “study until twenty-five” to earn our MCR numbers (albeit provisional for the time being), let us remain steadfast to the course of “investigation until forty” and “profession until sixty”⁵ (or beyond); pray we do not lose – through the vicissitudes and trying times in our careers –

our initial youthful idealism (Save, Heal, Cure! Service, World Peace!), interest for Medicine, appetite for learning, and zest for life; and treasure the friends and memories we have gained in our five years together.

Class of 2003-2008, I am proud of us and wish us all the very best! ■

References (a.k.a. Osler's Notes)

- 1 Osler W. *The Master-Word in Medicine*. In: *Aequanimitas, With Other Addresses to Medical Students, Nurses and Practitioners of Medicine*, 3rd ed. New York: McGraw-Hill Book Company, 1932: 362.
- 2 “The hardest conviction to get into the mind of a beginner is that the education upon which he is engaged is not a college course, not a medical course, but a life course, for which the work of a few years under teachers is but a preparation.” Osler W. *The Student Life*. In: *Aequanimitas, With Other Addresses to Medical Students, Nurses and Practitioners of Medicine*, 3rd ed. New York: McGraw-Hill Book Company, 1932: 400.
- 3 “Superfluity of lecturing causes ischial bursitis.” Bean WB, ed. *Sir William Osler: Aphorisms from His Bedside Teachings and Writings*. New York: Henry Schuman, 1950: 46.
- 4 “As the practice of medicine is not a business and can never be one, the education of the heart – the moral side of the man – must keep pace with the education of the head. Our fellow creatures can not be dealt with as man deals in corn and coal; ‘the human heart by which we live’ must control our professional relations.” Osler W. *On The Educational Value of the Medical Society*. In: *Aequanimitas, With Other Addresses to Medical Students, Nurses and Practitioners of Medicine*, 3rd ed. New York: McGraw-Hill Book Company, 1932: 333.
- 5 “The teacher's life should have three periods, study until twenty five, investigation until forty, profession until sixty, at which age I would have him retired on a double allowance.” Osler W. *The Fixed Period*. In: *Aequanimitas, With Other Addresses to Medical Students, Nurses and Practitioners of Medicine*, 3rd ed. New York: McGraw-Hill Book Company, 1932: 383.

