# The Very **Stret** Diary of Dr Buay Song

# Month 1 Day 1:

First day of housemanship. Traumatic day; ward round started at 7am and was a mad, mad rush

I don't know all the members of my team, and so many of them all ordering things at the same time. Cannot find the files. Nurses were passing reports, so refused to give me the case sheets, IMR and temperature chart. Got scolded by the team. So I went to take it by force. Got scolded by ward sister. Got confused and wrote on wrong casesheet. Got scolded by Reg. Didn't know how to replace IV KCl. Got scolded by MO.

Walau. How come these things are not taught in med school? Nevermind, I'm young and hardworking. I'm sure it will get better.

# Month 1 Day 8:

Today a bit better. Finally got the knack of carrying 3 patients' case sheets, IMR and charts all at one time, and write correctly. Though got scolded again today because got one urgent blue letter not replied. Problem was, I wrote and got the nurse to fax it off, but apparently the fax was sent wrongly. My MO told me next time should call. Fine – noted.

# Month 1 Day 21:

It has been a hellish 3 weeks. Getting scolded everyday. Some Reg I referred to told me no need to call, can just fax, I am so confused. Arranging urgent CT scans was a pain as well. My MO told me to use the form, but the Con asked me to call. Spoke to on-call Reg and got scolded for my trouble. The fax didn't go through, until late afternoon when the nurses changed shift and noted the lapse. The appointment given for 9pm that night, my team not happy. My MO called and managed to bring the appointment forward to 4pm. I don't know what the rush is though. Turns out the scan didn't change their management. Whatever.

One underlying lesson to learn is – just do, don't think. Because the more I think, the more things do not make sense.

I hate rounding with the MO, then the first Reg, then the second Reg, and the Con, then the senior Con. What's the point? Giving the patient his money's worth?

#### Month 2 Day 5:

Feeling better after one week of leave.

I'm sure it was just mild adjustment disorder. The chaos and madness of the past month cannot possibly be there all the time, otherwise no one would want to stay in public practice.



Dr Tan has resolved her quarter-life crisis. No need for sportscars or branded handbags. A perfect day is one spent enjoying the sunset on a beach, in the company of that special someone. Having a martini and/ or a margarita as well would be heavenly.

# Month 2 Day 19:

I shouldn't have taken leave so early in the posting.

This second month is just as bad. I thought it was just me being incompetent and blur, but it seems like all my classmates are just as flurried at work! Housemanship is really as bad as I heard. If this is an improvement from "old times", how the heck could doctors have functioned safely in the past?

#### Month 3 Day 4:

Get me out of here!!!!!!

#### Month 2 Day 28:

Can't wait till end of posting. Getting scolded everyday is my baseline existence. Should have become a lawyer like my dad told me to, but no... I wanted to "heal the world". Hah.

#### Month 3 Day 12:

Met my cousin, Zai See for dinner. I can't believe he actually walked away from the best surgical training post to some other place! There's like, a million people out there who would die to have what he had. I must persevere, I must strive on.

Things cannot be so bad, things cannot be so bad... things cannot be so bad...

# Month 3 Day 15 — later:

Post-op review for that woman – she *kena* conversion to open. From the op notes, sounds like very difficult case, with lots of adhesions. She kept scolding me, say very painful. I told her she's already on PCA morphine, what more does she want?

Her daughter was visiting and wanted to ask so many questions — "How come such a big wound? Why op delayed for so long? How come Mother is in high dependency now? Is it cancer?"

I told her we need to wait for final histology, which will be ready at the outpatient visit, but she wanted me to find out NOW. I was on call, and simply couldn't stay for that long. She actually told me that it's alright to work throughout the night since I'm "only" on night shift.

I couldn't take it. It was either laugh or cry. Not manly to cry, so I laughed and went off to clerk the new admissions. Sigh.

# Month 3 Day 15:

Got SDA patient, this fat old woman coming in for lap chole, kiv open. Damn hard to set the bloody plug. She kept scolding me. Then the stupid woman went to eat! Stole the food of the stroked-out patient next to her!

Kena scolded by team; how is that my problem??? I already wrote there NBM, and informed the patient!

Got scolded by the woman's daughter, kept telling her the team is coming but she couldn't wait – what's the big rush?

# Month 3 Day 17:

The patient's daughter fed her Mum, I cannot believe it! Despite specific instructions for small clear feeds only! Then turned around and scolded me when she vomited and needed drip and suck. I cannot believe it, I just cannot believe it. Are all patients like this???

# Month 3 Day 25:

Finally discharged that woman. She wanted to leave, though her daughter asked for her to stay until "Mother is completely well". Lucky my MO talked to them both and they left happy.

Reaching end of first posting. Got two more houseman posting to go, how can I survive??? Wonder if I can break bond... will ask around. No more night calls! No more undeserved scolding from everyone! Or at least I get well paid for it!