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### *My Sister, My Mentor*

Unlike most physicians who offered their mentees words of encouragement to spur them towards the goal of becoming a doctor, mine did quite the opposite. “Once you undertake the path of becoming a physician, you can never turn back. This career goal requires a tremendous investment of time and money. Think long and hard. If I could turn back time, I would not choose medicine,” my sister, an anesthesiology resident, warned me when I first contemplated applying to medical school as a college senior.

With little clinical experience other than 1,100 hours of volunteering at a regional hospital, I felt discouraged by those words. But they also did something else. They told me that the path to becoming a physician was long and arduous. To traverse it successfully and remain whole, I must be determined. Moreover, I must be sure that the pursuit of a career as a physician would make me happy.

In my remaining years as a post-bac pre-med student, my sister acted as a cautioning mentor to test my commitment to becoming a physician. She constantly forced me to ask myself, “would I be happy working as a doctor?” Below, I detail these cautionary tales, along with their impacts on my conception of the type of doctor that I would like to be in the future.

“I really liked your response to the following question on this medical school’s secondary application: ‘What do you think you’d like least about working as a physician?’” my sister commented.

“You talked about the difficulty of meeting patients’ and your own needs as a human being on a daily basis. I struggle with this balance every day on my job,” she added. Although I was happy to receive a compliment from a sister who could be harsh and disapproving, I also became increasingly aware of the lifestyle that I had chosen for myself as a prospective medical student.

As an office employee, I could lay claim to the company’s emphasis on employee work-life balance, and determine the lifestyle that I wanted. But as a physician – whether as a student, resident, or attending physician – that convenience no longer existed. My patients’ needs came first. Mine would always be placed second. I came upon this realization while preparing my AMCAS application and helping my sister run errands to which she could not attend due to her work schedule. But my sister’s feedback forced me to ask myself, “Knowing the demands of the practice of medicine, would I be happy working as a physician?”

“Would the inability to achieve this balance make the practice of medicine too taxing for me?”

I found the answer to this question from my volunteer experiences as a Care Extender at the Cardiothoracic ICU of Ronald Reagan UCLA Medical Center from 2013 to 2014. It made me accustomed

to working as part of a fast-paced team, caring for patients who could not even ambulate by themselves. The sense of camaraderie and satisfaction that I derived from this type of work allowed me to answer the aforementioned question in the affirmative. Most importantly, the exchange between my sister and me instilled the mentality of prioritizing my patients' needs above my own as a physician.

In addition to this lesson, I also realized the importance of keeping my emotions and opinions at bay when faced with patients' circumstances. During a family gathering, my sister mentioned a patient who was undergoing anesthesia and then surgery from physical abuse in his own home. She brought up her constant struggle to keep herself emotionally detached from her patients, even as she enters her sixth year as an attending physician. The task becomes even more arduous, particularly when weekends are forsaken to care for her patients. From this experience, I had to ask myself, "would I enjoy being held largely accountable for a patient's care but also emotionally neutral at the same time?"

Would the inability to achieve this balance make the practice of medicine too taxing for me?" Though uncertain if I could answer "yes" to the first question and "no" to the second one, I am certain that I could draw upon my training in conflict mediation, a skill that I acquired from my studies of policymaking at the graduate level from 2005 to 2007. The mentality and skills that I acquired from this background would help me be engaged in patient outcomes, not in parties or circumstances that brought my patient to the hospital. Moreover, my passion for clinical sciences and thinking, which I developed in the classroom and later, as a scribe throughout 2012 to 2014, would serve to balance the taxing aspects of the practice of medicine.

My sister's role as a cautioning mentor presented various unpleasant aspects associated with the practice of medicine as a physician. Throughout

my post-bac pre-med career, her warnings forced me to ask myself repeatedly, "would I be happy working as a doctor?" In addition to helping me answer this question in the affirmative, my sister's admonitions helped me solidify my conception of the type of physician I would like to be in the future. They have also identified demands from the practice of medicine with which I would have to work to reconcile with my own tendencies throughout my training and practice as a physician. Without my sister's mentorship throughout my post-bac pre-med career, I would not have been as well informed and yet, still committed to the career path of becoming a doctor.