



Voices in our Heads: Results of the AUA Residents and Fellows Committee Essay Contest

INTRODUCTION

“Stick around. You might learn something.”
— Dr. Gerald Sufrin

When it is the middle of the night and a decision needs to be made, what voice do you hear in your head? When you are deep in a complex surgery and the planes are unclear, who directs your next move? Throughout urological training, we spend hours meticulously reading chapters, analyzing videos and progressing our skills; this allows us to grow into safe, competent practitioners. Beyond what is found in a formal text, however, it is often a pithy phrase or casually shared advice that directs us when we need guidance in the void.

The AUA Residents and Fellows Committee Essay Contest was launched in 2017 to promote narrative medicine and encourage humanistic practice. This year’s theme, “Guidance in the Void: Exploring Urologic Proverbs,” was chosen to explore the classic expressions that endure as wisdom within urological training. Passed down over years, these phrases become part of our vernacular and serve as reminders of lessons learned and guidance moving forward. These are the words and voices we hear in our heads as we progress out of training and into independent practice. These proverbs give voice to that “gut feeling” that we all must learn to trust. They can comfort us in times of stress and direct us in times of chaos.

We asked urological trainees (medical students, residents and fellows) to reflect on one of the proverbs that has become a part of their internal dialogue and its impact on their training. We received over 40 submissions from trainees in the U.S. and internationally. Some of the proverbs were ubiquitous and common between specialties (eg “Treat the person, not the disease”), while others were clearly urological (eg “What is the greatest danger to the male urethra? A urologist”). As our committee members reviewed the essays, a common theme emerged. While the proverbs were initially encountered and perceived as external direction, they would inevitably transform to become internalized. The stories of urological proverbs were

often light-hearted; however, at their core, they were deeply personal and spoke to the slow but profound process of learning and growing. From among the many wonderful entries, we selected one winning essay for publication, which follows here, and 3 honorable mentions, which will be published on the AUA website.

Dr. Courtney Yong, from the University of Iowa, wrote this year’s winning essay. In her essay she recalls hearing the phrase, “Do the right thing,” and how the meaning of this proverb has changed over her training. This is the simplest advice, and yet often the most challenging to embody. “Do the right thing” serves as an instruction and an aspiration. I encourage all AUA members to read Dr. Yong’s essay and reflect on a purpose that unites all of us: to “do the right thing.”

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“Do the right thing.”

Hearing this for the first time as an intern, fresh with enthusiasm and naïveté, this statement seemed like a no-brainer. I’m a *doctor* now! Of *course* I’ll do the right thing! Since then, I’ve learned that doing the “right thing” isn’t always so easy, for many reasons. Sometimes the situation isn’t black and white, right or wrong. Sometimes doing the right thing means doing the difficult thing. Or sometimes doing the right thing means sacrificing your self-interests. During my second year of residency, I experienced firsthand the conflict between doing the right thing and preserving self-interest. Primary call is, among other things, an ethical test.

During one of my call shifts, I saw an elderly patient in the ER with an obstructing ureteral stone, high fevers and a urinalysis consistent with infection. She was hemodynamically stable. I called my attending and presented the patient. It was around midnight; my call had clearly woken him. His sleep-muddled voice was familiar: I knew the heart-pounding disorientation of waking up to a

pager, the deep dread of dragging my body out of bed, the calculations of how many minutes—hours, if I'm lucky—of sleep I'll be able to steal before the next day starts, and the fear of disappointing a world that expects excellence during the day despite a sleepless night. With these thoughts in my mind, I said, "I think she needs a stent. We can either do it tonight or first thing tomorrow morning."

My attending's silence on the phone yawned for a few seconds. Then he said, "Does she need the stent?"

"Yes," I replied.

"Then why would we do it in the morning?"

He was right. Why *would* we do it in the morning? It was indicated. Although the patient was not horribly ill, she could easily become unstable. A stent would help to prevent her from getting to that point. Instead, I was thinking about whether it was convenient for me and my attending. I was on primary call for 24 hours, but I had a post-call day ahead of me. My attending, on the other hand, would be on call for many more hours after I was. Yet when I gave him the choice, he chose to do the right thing.

When I was an intern, I understood "do the right thing" as an instruction, an externally imposed expectation of me as a physician. It was something someone else said to me. Thanks to the wisdom of my mentors and experiences like this one, the proverb's meaning has changed. As a senior resident, I see it as an internal answer to a question. When I question my clinical judgement—what should I do? How can I help this patient?—this

proverb has the answer: do the right thing. The proverb now comes from within and has become my personal standard. And I've found throughout the years that doing the right thing helps me sleep a little better, too.



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Bio: Dr. Yong graduated from the Ohio State University College of Medicine and is currently a 5th-year urology resident at the University of Iowa. She is applying for Endourology fellowships this year and intends to pursue a career in academics. The essay prompt this year, "Guidance in the Void: Exploring Urologic Proverbs," encouraged her to reflect more deeply on her entire residency experience and how much she has grown. This essay is one aspect of that reflection.

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