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# DUKE MEPF 2019

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**NCKU MED**

PEDIATRIC INFECTIOUS DISEASES  
CONSULTATIVE CARDIOLOGY

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**OCTOBER - DECEMBER 2019**



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CARING FOR OUR PATIENTS, THEIR LOVED ONES AND EACH OTHER.

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CONSULTATIVE CARDIOLOGY

# ACKNOWLEDGEMENT

感謝和信醫院提供如此難得的學習機會與獎學金，至和信醫院學習不僅為我奠定臨床學習的基礎，也感謝和信師長們給予我的指導與肯定，有幸至和信與杜克學習都是醫學生歷程中相當重要的經驗；於 Duke 期間時常回想起在和信的時光，更深刻體會到和信的學習環境其實並不下於Duke，也更能領會和信師長們對醫學教育的用心與投入。

這趟為期兩個月的學習之旅帶給我許多收穫與啟發，在一位醫學生心中留下很重的份量。踏出舒適圈、走進美國醫療體系不免意識到自己的渺小，同時也意識到自己可以做得比想像中更好，更為謙卑地面對自身不足時也更勇於

爭取與探索，舉凡以非母語建立醫病溝通與互動模式、第一線觀摩美國醫療團隊的運作並參與討論，這段期間所遭遇到的人事物帶給我相當多震撼與省思，也讓我重新檢視自己未來的規劃與走向。期勉自己能將這段期間在國外得到的經驗實際應用於往後的醫學生涯中，也希望能夠將這份收穫分享給更多人，並於往後的學習中延續，以求精進的可能。



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## Pediatric Infection Diseases

回過頭檢視這段時光，發現自己相當幸運能以感染科作為實習的開始，學習處置之外，也相當重視鑑別診斷與臨床邏輯的周密思維，醫病溝通的細膩程度更是我意料之外的收穫。感染科對於病史詢問與理學檢查的重視，不僅是表面的詢問，而是需要精準的描述與抽絲剝繭，才不會錯放任何可能的線索。在感染科期間也對於美國的病人族群有了更深入的認知。縝密且相對緩慢的步調也讓我得以更加融入語言與環境，逐漸熟悉並建構起新的溝通模式。

Peds ID 充實而豐富的行程總是有更多值得期待的事物，Attending 與 Fellow 也經常鼓勵我選擇有興趣的會議參與，並約好查房碰面時再交換各自心得。前三週主要與 General Peds ID Team 一起接受 Primary care team 照會，第四週則加入 Transplant Peds ID Team 接觸不同的移植病人族群，Duke 是世界唯三執行胸腺移植的指定醫院，移植的個案數與多樣性也豐富了病人的維度與學習面向。

MON	TUE	WED	THU	FRI
Morning Reports	PEDs Grand Round	Morning Reports	Morning Reports	HIV Conference
Consults/ Pre-Round	Consults/ Pre-Round	Consults/ Pre-Round	Consults/ Pre-Round	Case Report Journal Club ID Conference
Noon Conference	Noon Conference	Micro Rounds	Noon Conference	Noon Conference
Round with Attending				

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## HIV Conference

每週五 HIV conference 遠遠不僅是表面形式，而是旨在了解每一個案例，進而辨識治療環節的助力與阻力、同時記錄每一種 regimen 實際的治療效果與副作用等。Duke 本已相當重視的病人隱私更是彰顯至極致，預先放置於桌面的名單上詳列感染途徑、診斷過程與追蹤資訊，會議結束後務必清點回收。由於美國地處遼闊，病人居住地動輒距離醫院數小時車程，護理師與個管師定期居家訪視，並經常透過電話聯繫關心情況。

Dr. Cunningham 作為總負責人更是事必躬親，對於治療環節毫不馬虎，一次會議中她面色凝重的提醒眾人，先前一例 perinatal HIV infection 病人更換 regimen 治療效果仍不如預期，反覆確認每一個環節後才發現是最後藥局發藥端給錯處方，但抗藥性已然造成；此後居家訪視的重點涵蓋確認處方，並且要求訪視者親眼看見病人調製，以確保劑量與藥品正確。

會議討論的範疇不僅限於醫療面向，也得以藉此一窺美國社會的多元與複雜，有次會議涉及跨國領養議題，我提問為何部分病人檢測項目包含骨齡時，Fellow Jacob 表示 “It’ s really awkward once people get adopted into this country, they get new age and birthday, and it’ s mandatory. The younger their age, the greater chance to get adopted.” 並向我解釋道由於領養人傾向選擇更年輕的小孩，許多跨國領養的個案被迫隱藏真實年齡以提高被領養機率，也凸顯這些個體面對體制的侷限與無奈。Dr. Cunningham 幽默表示 ” Can we all choose our age and birthday, please?” 並舉手說 “24, we got a 24 here sitting at the table!” 令人莞爾的同時也無形中驅散了議題的沉重性。

在 Peds ID 的期間，身為醫學生總是可以感受到強烈的參與感，開會時被邀請坐上會議桌，眾人願意讓我在會議上簡報病人並及時給予我回饋。第一次參與時 Fellow Jacob 抱著一大疊病歷詢問我是否曾在會議上報過病人，我搖了搖頭但表示自己想嘗試，他雀躍地放下了三份病歷表示 “You get 20 minutes to go through these before you present in front of us.” 此後每週的會議時間也就成為最佳的練習與磨練時機。



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## ID Conference

緊接在後的 ID conference 由 general ID/transplant ID 各提出一個值得討論的個案或特別的門診案例，也經常針對長期關注的病人定期更新狀況。聚在一起的 ID people 總有相似特質，無可抵禦的幽默感與求知慾，數位 Attending 與 fellow 並肩坐在長桌旁，消弭階級的差距，並建構出極度鼓勵發言的空間。

“Teach Me Something I Don’ t Know: New journal, new update” 是另一個 ID 相當精彩的環節，本質上類似精簡版的 Journal Club，每個人輪流分享一則自己近期吸收的新知，主任幽默地表示 “It could come from anywhere, but cannot be from Fox News.”

“Badge of Honor: Get your vaccine, or get fired.” DUH 強制要求所有醫療人員施打流感疫苗，ID 更是其中最強大的advocate，最初幾週大家溫情呼籲儘快施打，後來直接聲明” That’ s make it clear, why not just quit if you never plan to get vaccinated?” ID 也有諸多針對反疫苗的探討。

“How often the group ask for the consult do exactly what suggest?” 感染科經常收到許多照會，但 primary care team 常在照會後對建議事項置之不理，且此現象有漸趨明顯的趨勢。“That happens a lot, they call the consult, we make it, and they go against it, I am not taking this personal, but this happen multiple times.” 這個問題也被提交到會議上，引起熱烈討論， Dr. Cunningham 甚至舉出了數篇研究統計以提升照會建議的被接受度，也提到 “Primary team may have additional information that consults don’ t.” 互許背後有照會者未能看見的考量；另一位 attending Neil 則表示” Should the leading question change the answer? I would not advocate for that, the answer should always be the answer.”

- ❖ Terminology: How to frame/phrase the rationale?
- ❖ Focus on primary question: Treat or not treat? Pull the line or not?
- ❖ Face-to-face discussion
- ❖ Fully explain/Inform the rationale behind.
- ❖ Recommendations made in check-list manner: Do this, this, and this

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## Morning Report

每一天早晨始於 Harris library，由 General pediatric primary team attending 與 CR 共同主持，以 Senior Resident 精選臨床個案作為主軸，形式相當接近和信的一般醫學營，鼓勵眾人輪流提問，以激盪出各種想法的交流，最後再以簡短的 topic review 作為結尾。過程中數位 Attending 也會輪流提出不同的見解，總能迸發精彩的討論。



## Microbiology Rounds

Micro Rounds 是我在 ID 期間最期待的活動之一，透過實際展演連接基礎與臨床的差異，由 Clinical Microbiology Lab 主持人負責，每週三定期解說 Adult ID / Peds ID Team 提交的臨床案例，檢驗結果再也不是報告上冰冷的文字與說明，而是生動的分析與動態的演進過程。

其中一次是關於檢驗結果的誤差，理論而言 Biofire 試驗順序應於 Gram stain 之後、作為 Gram stain 驗證，但其他實驗室曾發生將兩者同時執行，卻先判讀 Biofire，並以此結果間接導致 Gram stain 判讀產生誤差，並因此給予病人非必要的治療。Micro rounds 以此說明檢驗結果並非絕對，而有其出錯的風險與限制，不能完全脫離臨床脈絡下檢視。



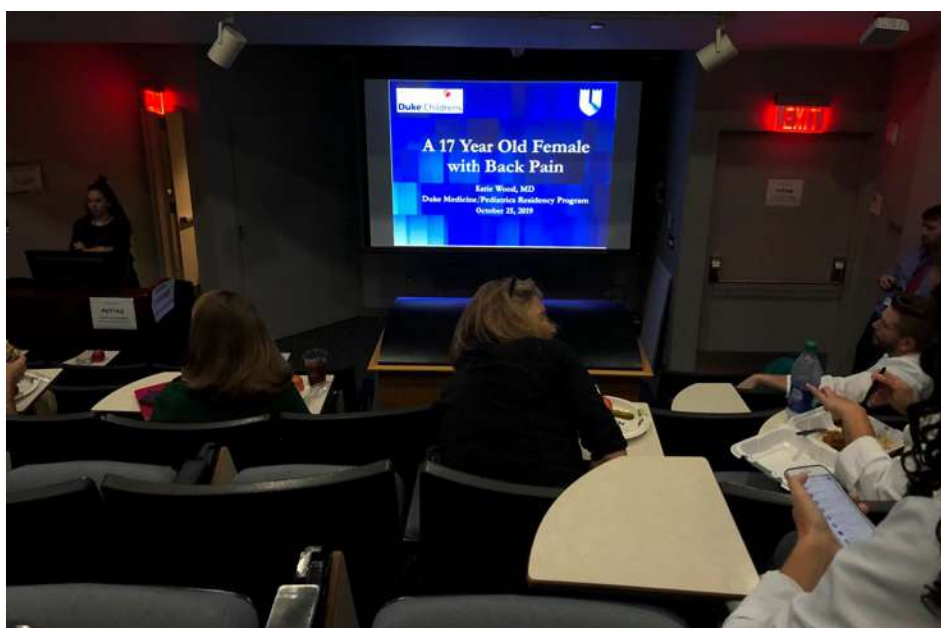
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針對部分出乎意料的結果，Attending也會追問當初是如何選擇檢測某些特定菌種。Micro rounds 更像是雙向的溝通與回饋，立足於雙方不同的觀點同時並肩成長。

## Chair Conference

Chair conference 也是 Peds grand round 的一大亮點，由 senior resident 講述真實案例，再邀請台下的各科 attending 們輪流提出看法，最後才揭曉謎底，不僅可以有機會學習背後的臨床思維，也可以聽見各種精彩的解析。

在 Peds ID 這一個月以來經歷無數有趣的會議，也經常有針對特定學習議題的討論，一次 Fellow Board Review Conference 中，Dr. Amelia Thompson 以生動的方式舉出個案，過往停留在教科書上的寄生蟲重新回到眼前，曾經遙不可及的地理名詞被重新賦予意義。另一次 Resident Noon Conference 旨在討論 “Medical Errors” 講述醫療上的失誤以及 “Shame and Guilt” 的諸多差異與不同面向的解讀。“Guilt is good. It implies that you do bad things, sometimes. Shame is bad. It implies that you are bad.” 帶給我截然不同的觀點，也對 Duke 針對醫療人員的回饋與心理面向的重視印象深刻。





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## Compassionate Care Conference (3C)

### “Running Out of Time: Cultural Impacts at End of Life”

個案是一位末期肺癌的四十歲中國籍女性，中國籍的先生面對語言隔閡與陌生的環境，加上妻子病情的急劇惡化，多重因素的疊加導致案例更為棘手 “This case is complicated in every way possible, cultural taboo, bringing up the Chinese new year’ s coming, with husband’ s distrust to a Chinese medical system misplacing on this hospital...young dying patient with two children and suffering I can’ t fix. How can I advocate for the patient’ s last wishes?”

病人的先生多次在醫院對醫護人員發怒，個案師點出他最驚訝的是從沒有醫療人員於背後批評該位家屬。” What really surprised me was that no one, not any single one of us, ever badmouthed about the patient’ s husband. That is not who he is, that is a person under stress and anger.” 憤怒作為一種防禦機制，或許是面對突發狀況的不知所措、無所適從，唯有當這個脾氣被接受、被承接，才能看見自己其實有其他的選擇。個案師說著醫療人員的存在是為了幫忙，不是為了站在對立面。” We’ re on the same boat and we’ re here to help.”

會議中也談及個體被迫融入醫療體系的剝奪感 “If you go to hospital, it’ s about you; once you are in the hospital, it’ s about us.” 最後 Amy Lee 學姊發言絕對是一個大亮點，她援引台灣經驗來討論案例背後的文化脈絡 “I had my training in Taiwan, where Chinese culture dominates the medical system, taking death as a taboo. If you bring up death, likely it will come to your family. Superstitions about names haunt the patients, there’ s no four exist in the hospital. I feel so humble on hearing all these.”

許多對我們而言再熟悉不過的事物，脫離了原有的背景敘事，被放入一個截然不同的脈絡與框架之中，卻重新獲得理解與體諒；眼前還有這麼多人特地前來聆聽，試圖開啟對話的可能，這樣的高文化敏感度與重視讓我印象深刻。這不會是最後一個個案，亦不會是最後一樁文化衝突與障礙。

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“After the patient passed away, the nurse offered condolences in church, her husband mentioned that he wanted to come to hospital to express gratitude and apology to the providers.....The big take away from the story is that: Even we lose our patient, we don’ t lose their family.” 台上的個管師輕輕地為這個討論劃下暫時的休止符，唯有紀錄與交流，才有更多開啟後續討論與思考的可能。



Compassionate Care Conference at Duke North 202



Duke North 二樓通往 Grand Round 地點的天橋，每次走過總是令人著迷。

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# Conversation with NC Attorney General

## Tackling with the bleak situation of epidemic opioid and vaping

適逢 E-cigs 健康危害的關注於全美如火如荼的展開，Grand Round 邀請 Attorney General of North Carolina Joshua Stein 前來講述現況與 NC 州政府計劃針對 E-cigs 的一連串法律限縮，其中談及許多現況統計數據時台下的諸位 Pedestrians 不時倒抽一口涼氣或引起全場驚呼，也體現了情況或許比想像中的更加險峻。

### On Opioid

- ❖ 20% get opioid prescription become addicted.
- ❖ 2/3 teenagers addicted get the meds from the pill box of their family.
- ❖ 20% of addiction started the first exposure at age below 18, reshaping the adolescent brain, more likely to become addicted to alcohol, smoking and drugs in the future.
- ❖ The danger of over-treating and under-treating pain: Over-treating ends up with excessive storage of pills while under-treating pushes patients to self-medicate.
- ❖ U.S. prescribed opioid 10 times more than Japan, 45 times more than Europe, but we don't have 10 or 45 times than these countries.

### On Vaping and E-cigs

- ❖ Teenagers addicted to e-cigs have 5 times higher risk of smoking.
- ❖ E-cigs have higher risk of addiction due to the increased amount of nicotine while originally designed to help people quit.
- ❖ Marketing strategy of E-cigs targets at youth from the very beginning, including hiring Instagram influencer and advertising as a cool, fashionable product.

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其中特別提及一款 E-cigs “JUUL” 其中尼古丁含量為其他電子菸的兩倍，更將產品包裝與隨身碟相似，更毫不隱含的將此做為產品賣點，廣告標語大方寫上 “Mom, it’ s not vaping, it’ s a USB drive.” 作為兩個高中生的父親 Attorney General 直言 ” Disguise E-cig as a USB-drive and sell it online to children, you gotta be kidding me!” 即使女兒幽默表示身為 Attorney General 的父親向電子菸宣戰等同宣告 ” Dad, you’ re forcing me to commit social suicide.” 但他也在與女兒的對話過程中 “Almost every boy in my class vape.” 意識到情況其實比統計數據更為嚴重。

“Nowadays kids no longer smoke in the parking lot, they vape in the bathroom and call these “vaping room” instead. Teenagers thought was nicotine-free, they thought themselves are vaping flavor water, but it’ s just not how it goes, they ended up addicted to vaping. It’ s not me trying to make up a bleak picture, indeed the bleak situation is true, is the crisis we are facing, we can not turn off the switch and make it all go away.”

演說結束後的提問時間，首個問題即是 “What Duke can do?” 並馬上獲得多位在場醫師的附和，眾人輪流分享臨床觀點與近期真實案例觀察，並提及 Duke 也有這方面的相關研究與資料庫， “Duke can help” 經常聽許多 attending/fellow/resident 提及 Duke 身為醫學中心對於提升 Durham 甚至 NC 地區的健康有一定責任，但親眼看見這些被落實還是相當觸動；醫療的範疇不僅僅局限於眼前的病人與醫院等特定場域，更能擴及日常、實踐於預防醫學等多元範疇。

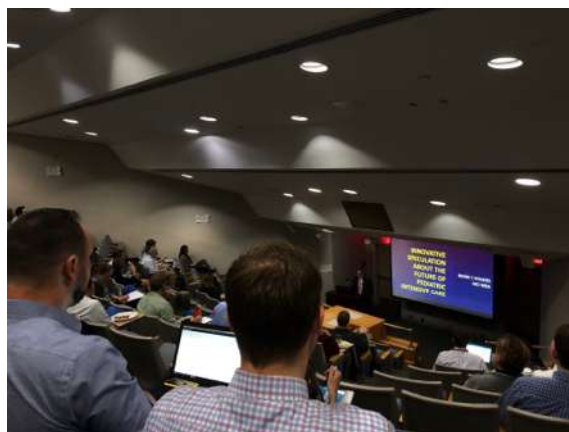
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## Pediatric Medical Alumni Grand Round: Dr. Mark C. Rogers

在 DUH 期間總有許多機會親炙大師風采，Dr. Rogers 擁有許多傲人的經歷：Former CEO of the Duke Hospital and Health Network and Vice Chancellor for Health Affairs at Duke University Medical Center, former Chair and Director of the Department of Anesthesiology and Critical Care Medicine at Johns Hopkins，Peds grand round 邀請他來談論未來趨勢、科技對醫學的衝擊與正面影響，以及對當今劇烈變動的社會看法。Dr. Rogers 也提及醫學本身即是政治，作為醫療人員不可認為政治與自己無涉，醫療體制本身即為政治的體現，更毫不避諱地觸及香港反送中示威議題與性別平權議題、放大斗大的香港示威者照片。

Noon conference 再度邀請 Dr. Rogers 與 Resident/Med student 對談，第一個抵達會議室的我剛在 Dr. Rogers 對面坐下來，他便開口詢問我 “So young lady, tell me about your career plan and how you process a vision for your career?” 他相當有耐心的聽我細細說著，並針對不同面向給出提點與建議，是我會記得許久、至今回想起來仍覺得幸運不已的受用建言。

當被問及醫學生涯中最大的挫折時，Dr. Rogers 引用了 Winston Churchill 的 “Fail upward” 闡述如何將失敗或不如預期的結果化為前進的動力：“Failures are inevitable, the key in it is to fail splendidly, fail upward. Make every failure worthy of the pain, they have to be worth it! You can’t be passive about it by saying I will learn afterwards, you have to be actively engaged and well-prepared.”





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## Resident Noon Conference: Puppy Time

### Meet new puppies from Duke Canine Cognition Center (DCCC)

DCCC 以培育治療犬聞名，數十年的經驗累積結合臨床應用經驗，治療犬的使用範疇並不限於病人，DUH 也鼓勵醫護人員在察覺自身與周遭同事需求時，主動尋求治療犬作為紓解工作壓力的管道，經常看見這些正接受訓練的培訓犬穿梭於病房間，廣受醫護人員歡迎。同時也有多名 Duke 學生投身志工，帶領治療犬融入社會並適應環境。

“Seeing eye dogs are the highest level, they have all the training basically just to ignore their instincts, then we have diabetic dogs, PICU therapy dogs, and service dogs of other kinds. Sometimes puppies do have career changes as well, just like human.”

“We once had a puppy named Zoe, she’ s just way much into snuggling, every time she walked by, she could not resist the instinct to snuggle, so she went on a career shift: becoming a family pet! They will leave us in several months, we are already sad about that, but we know we’ re sending them off into the world to help people.”





平時散佈於各個病房、PICU 之間的 Residents 為了與狗狗們見面齊聚在會議室



Reverse Trick-or-treat: Halloween in Peds



每個病房外必定放置的隔離衣與手套  
 (數星期後我才驚覺自己一天要穿脫至少20件的隔離衣單件要價七美金！)



BMT 病房門上總會張貼為病人與家屬規劃的每週更新行程表 / BMT 一隅



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## “See you and take care.”

日復一日走過令人清醒的冷冽空氣，直到推門走入 CHC 被迎面而來被糖、咖啡與肉桂香氣的暖意包裹，才了解 Waitress 當中的 “Sugar, butter, flour” 再真實不過。

萬聖節前夕收到 attending 的簡訊 “If you don't dress up, others will dress up up! Empty your pocket for candies.” Fellow 為大家準備了一致的斑馬襪子與頭飾，中午再被 Resident 戴上頭飾與紗裙一起打扮成 Unicorn；下午 family meeting 前眾人打算在家屬抵達前拆除萬聖節裝扮回歸人形，卻被提前抵達的家屬制止 “Please keep your custom, don't get many chances to talk to unicorn in my whole life” 氣氛頓時輕鬆許多。

“What customs are you choosing?”

“Gowns, gloves and mask, typical ID stuff.”

“Every time ID people dress up, it always makes others nervous. That means either contact, droplet or isolation or any kind.”

將自己漸趨安靜的個性折疊，逐漸找到從容的步調以自己的方式與病人、家屬互動；隨時空出雙手幫忙、握手自我介紹，音量提高、音調開朗、合宜微笑，語尾的U不再需要被收納回拉，而是揣摩南方的語氣，順著句尾漸強推了出去。許多時候嘗試一次有點失敗，於是又一次，直到自己滿意為止，為自己每日的進步而雀躍；反覆將自己往前推，直到自覺一定做不到的邊界，然後發現自己其實可以做得比想像中還好上許多。

查房前與 attending, fellow 一起躺在 ID office 地上的 “meditation moment” 還是很衝擊。帶鳳梨酥分給大家吃照會量暴增的一日，默默留下來多幫 fellow 完成六份 notes。當堅持領帶與襪子必須配成一套的 fellow 說 “Mind we take a little step up?” 事實是從 T floor 直接走到八樓。

幾次近乎快要演變成衝突的場面中，Dr. Thompsons 與病人的溝通模式一貫的優雅與果決令人懾服。 “This is not who he is, this is him under grief and stress. It's hard for the family, all these are difficult, but we still try to

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understand.” 我們的存在是為了幫忙，而非站在對立面。當憤怒作為一種防禦機制，唯有當情緒被接納了，才能看見其他的選擇，以及後續對話與理解的可能。

道別前病人家屬的 ” He’ s lucky to have you!” 讓坐在床緣，一手還牽著病人的我就這樣紅了眼眶。說再見時 Dr. Thompson 給了我長長的擁抱，” Don’ t be modest, you did a great great job. Embrace your vulnerability, this vulnerability draws us closer. Allow it to touch you and become your strength.” 在這段每天至少收到兩個照會、三個 review topics 與兩份 papers 卻甘之如飴的日子裡，看見自己嚮往的模樣與溫暖，還有更多的學習、細節與故事尚未被書寫；倘若再重新選擇一次，還是會選擇回到這個地方。

hl373, officially signed off.

Finger crossed, smooth sailing into Consultative Cardiology.

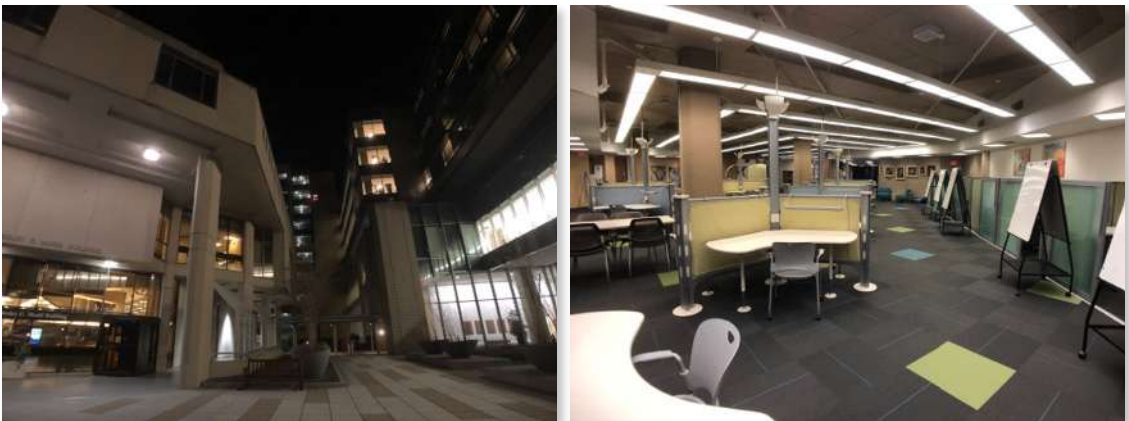


with Dr. Amelia Thompson and Dr. Rohan Vilms on Peds ID consults Team





Pediatric General Ward 5100-5300



DUH / Duke Medical Library

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## Consultative Cardiology

Duke Cardiology 享譽盛名，大師雲集且向來以良好的學習環境聞名，General Cardiology Consults 主要接受其他科 primary care team 的病人照會，每週更換不同的輪值 attending 與主責住院醫師，主治醫師除了病房照會，亦須兼顧急診會診，時常於 7200 與一樓急診室之間穿梭。

每日的晨會由不同 Attending 主持，講述具有學習價值的個案或主題 “We take consults from ED, 2nd to 9th floor, across Duke North, South and DMP. Buckle up, you’ re not able to see the sun this week.” 充實的每日行程證實最常看到太陽是每日照會與查房時走過 DMP 的時刻，每日在醫院時間最少平均是七點到七點，晚上回家累到在餐桌上睡著數次，是一段需要些許沈澱書寫，充實忙碌而幸福的時光。

MON	TUE	WED	THU	FRI
Morning Report	Cards Grand Round	Morning Report	Morning Report	Medicine Grand Round
New Consults/Round with Attending/Teaching Topics				
Noon Conference	Noon Conference	Noon Conference	Noon Conference	Chair Conference
New Consults/Round with Attending/Teaching Topics				

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## Dr. Bashore

作為 Duke Cardiology 的知名教授，同時身為 Infective endocarditis Duke Criteria 的提出者之一，Dr. Bashore 總是能在各個空檔開啟教學的契機，每逢心電圖或 telemetry 出現他一定會毫不猶豫地請我當眾判讀。

身為 Duke basketball 頭號粉絲，Dr. Bashore 經常出席支持 Duke 籃球賽事，某次從他口袋中掉出週五晚上的 Duke basketball 門票，是他精心買了最好的位子要分送 fellow 們。Dr. Bashore 也會在查房空檔帶著我們參觀他的辦公室，裡頭珍藏上世紀的 EKG 檢測儀與各式儀器，更有滿滿一面牆數不清的獎牌，他拿起一面寫著華佗再世的感謝牌請我為他閱讀，並細細說著那是曾經的病人致贈他的禮物。

Dr. Bashore 總會在查房空檔帶大家到星巴克，前提是不能用自己的本名點餐 “The rule is simple: order anything you want, but you can’t use your name.” 有趣點在於取餐時店員呼喚的瞬間，總能吸引眾人目光。一週以來，經過主題 Favorite rock legend, Harry Potter, Game of Thrones, Lord of Rings，一一化身成為 Freddie Mucurry, Jimmy Hendrix, Santano，又在隔日成為 Aragorn, Gandalf, Sam, Frodo，無形中為查房過程中增添不少樂趣與話題。



Coffee time with Dr. Bashore and Cards Consults team

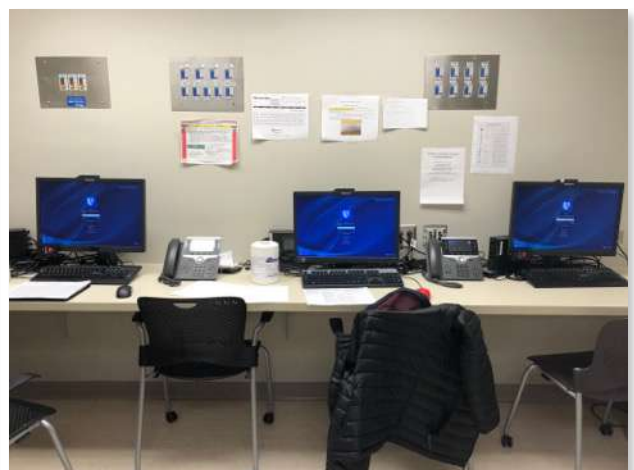


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一次談及病人在處方藥上難以負擔，Dr. Bashore 向我展示 app Good Rx 顯示價錢與各個不同藥局之間的比價 “Even with coupon!” 上方查到藥物價錢即使有折價券還是驚人的自費高價，更有許多病人無法持續服藥，因為在藥局免費供應 30 天結束後，病人無法自行負擔高昂的藥費，Dr. Bashore 也不平的表示 “How ridiculous that we’ re the only country in the world that allows the pharmaceutical companies ads on TV. Patients end up coming to their docs asking for this and that.” 看似魔幻脫節，卻是許多病人不得不面對的日常。



Week 1 on Cards consults with Dr. Bashore, Resident Dr. Christopher Isuzu



Workplace for Cards Consult Team at CDU/7200

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## Dr. Igor Klem

with Fellow Dr. Amanda Coniglio, Resident Dr. Alexander Sullivan, Intern Dr. Nate Erksine

From notoriously black-clouded to unprecedentedly white-clouded. 繼上週的忙亂，第二週開始找到合適的步調，Fellow 與 resident 加入，聽到病人說 “My Heart doctor” 的時候，還是會不由自主地微笑，“Morning, I’ m med student Hsuan-Wei, Lee from Cardiology. Nice to meet you.”

“We take consults from ED, 2nd to 9th floor, across Duke North, South and DMP. Buckle up, you’ re not able to see the sun this week.” 結果證實最常看到太陽是每日照會與查房時走過 DMP 的時刻，每日在醫院時間最少平均是七點到七點，晚上回家累到在餐桌上睡著數次（還被坐在一旁的景立發現），是一段需要些許沈澱書寫，充實忙碌而幸福的時光。

以團隊相稱，相對平等而緊密的連結，沒有過於明顯而無法逾越的階級，fellow 將我推到 Attending 面前，被眾人圍繞著報病人 “You’ re on the hot chair now!” 第一次見面的 Dr. Klem 報以非常暖的微笑。眼前理解的維度與過去截然不同，每一位病人身上永遠都有無法預期之處，例如第一次面對病人 BMI > 80 的手足無措；還是會犯下愚蠢的錯誤，例如搞不清楚 VA 是對面的 Veterans Affairs 還是 Virginia。

“We make recommendations based on evidence, fortified by guideline and trials.” 穿梭於各個 guideline, update, trial, score system 之間，回答照會提問的同時，試著說服自己、提問方與病人。最後一日收到一名極其複雜的病人，病歷裡面引用了五篇 paper 還打電話到 Virginia 諮詢病人放置支架的心臟科醫師，終於成功與 Neurosurgery 達成共識，當 Dr. Starks 說出 “That’ s the so-called med student material! I really love how you phrase it and articulate your thoughts.” 時感動到不行，大概是本週最有成就感的一件事，希望這份習慣可以一直延續。



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學習欣賞日常裡處處可及，不經意卻又恰到好處的幽默，查房、拜訪病人時總是充滿了笑聲

Attending: We can sign-off.

Resident: That' s my second favorite word in English!

Fellow: Which one is your favorite?

Resident: Discharge, faithfully. Btw, the third is transfer.

當不書寫的遺憾大過書寫的恐懼，終究會提起筆，將這些感動與再美好不過的人事物一一記錄下來，將會很想念這一段有 Amanda 坐在左側讀 paper、Alex 在右側用 Dragon 語音輸入病歷，總是願意撥空幫助我的 Nate 則在不遠處。

“Hsuan-Wei, you get to enjoy all the sweet little nuggets in the consults, you did great. I can' t imagine how difficult to be in a different country, present in a different language, but you did it well. I really admire you for what you do.”



謝謝這些無條件接納與幫助我的人們，希望我在不久的未來也有能力將這份善意延續下去。



Week 2 on cardiology consults with Dr. Stark, Fellow Amanda, Resident Alex

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## 所謂政治正確 Politically correct

在 Cardiology 期間經歷了差點被病人攻擊、被言語上種族歧視，幸虧有身邊 attending, resident, intern 的幫助，雖然不是過於正向的經驗，仍想記錄下來以做為自我提醒。

尋常一日出發前往拜訪新照會病人，中年白人男性在我簡單自我介紹說明來意後，開口問我 “Have we met before?” 我有些許困惑地否認 “Pardon, Sir. I don’ t think so.” 於是他開口，說出 “You look like my oriental doctor.” 我有一點愣住，心想我有沒有聽錯，一旁的 Resident 就即時出言制止 “Sir, we don't use that word here in hospital. She’ s a medical student from Taiwan, please have some respect for her.” 我鬆了一口氣，但病人加強語氣表示 “Oh, that’ s the perfect fit for oriental, that definitely meets the definition of oriental.” 最後甚至還對非裔 resident 出言不遜 “Just like you, I know you prefer black than African American. Where’ re you from, REALLY? You remind me of those Nigeria scammers.”

離開病房當下我並沒有過於挫折，一旁的 resident 對我充滿歉意 “We have zero tolerance of that in hospital. I’ m really really sorry, for what happened was extremely offensive.” 再度與 Attending 重返探視病人，病人直指 Resident 表示 “I don't like him, I like her.” Intern Nate 直接起身擋住我，與 Attending 一起承接了話語，提醒他注意自己的言詞。

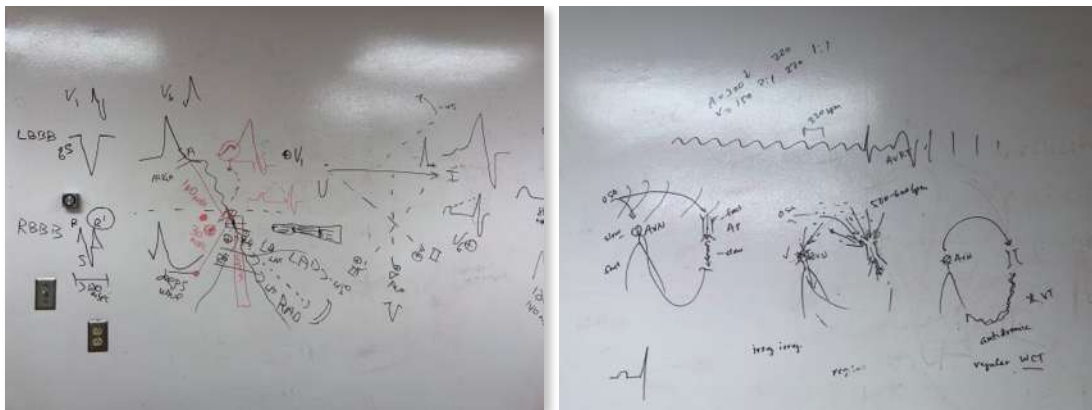
想起數天前才在 Ackland Museum of Art 看見關於 Oriental 的論述，陳舊且帶有特殊含義的凝視令人不安，也一併抹去了女性的主體性。Attending 沈默了片刻，相當委婉的說 “Sometimes people lose their perspectives. I feel sorry for what you’ ve been through.” 這個事件也成為一個轉變的契機，開啟後續對於許多議題的討論與理解。

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## Dr. Rockman

with Resident Dr. Christopher Asuzu, Intern Dr. Nathaniel Erskine, Med Student JT

喜歡於天剛亮之際，一邊吐著白霧一邊走至醫院，7200 的早晨始於 Morning reports 談論有趣 case/topic，週一主持人即是當週 Attending on service，第一次與 Dr. Rockman 見面他便直接寫了一整面牆的 EKG，行雲流水的解說連在座 Residents 都忍不住讚嘆。作為 Duke medicine EKG 課程負責人，Dr. Rockman 笑稱自己是 “Most hated prof in med school, notorious for the difficult exam which seems unable to pass.” 並表示 “JT was so scared on hearing I’ m on consult service that he asked to change his week.”



Dr. Rockman 信手捻來的 EKG 教學

Dr. Rockman 經常將 “If you can think all these through, you don't have to remember a thing.” 掛在嘴邊，充分將基礎知識深入淺出地應用在臨床，信手捻來便可於紙上寫下滿滿的解說，最後不忘揮筆簽名遞給我 “You just received a priceless treasure, you can frame it and hang it on the wall, seems like today is your lucky day.” 有次他不經意發現自己的 EKG 解說被其他 Attending 擦掉，佯裝氣惱表示 “He erased my EKG for this? How dare is he! Shame on him! My drawing of EKG is pure art.”

善喻的特質充分體現在 Dr. Rockman 身上，即使他的比喻總是令旁人莞爾，舉凡有次向病人詢問 Cardiac MRI，他比劃著雙手 “The thing is, we’ ll order you a doughnut, then gently slide you into that giant magic doughnut.”

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“They have a name for excuses to spend money.” Nate 趁著查房空檔向我解釋感恩節前後的購物季 “First comes Thanksgiving, Black Friday, Small Business Saturday, Cyber Monday, and now is Giving Tuesday.” 一旁的 Dr. Rockman 一臉正經地說 “I’ m gonna start a new holiday called “No Rounding Wednesday” . How does that sound? We will disable all the pagers and won’ t round on Wednesday. “ 我一時才領會 Dr. Rockman 獨有的幽默，希望我當時的表情不要看起來過於雀躍。

Dr. Rockman 總會鼓勵我們不要因為最後處置與我們的建議不符而沮喪 “There’ s no right or wrong answer, it’ s about you being thoughtful and careful, it’ s all about your rationale and thinking process, cause it just a matter of style, totally attending-dependent.” 後來照會的過程羅列各種可能處置其實不會感到挫折，反而更期待 Dr. Rockman 的論述與說明。

一早 Dr. Rockman 一臉欣喜地直朝我走來，輕輕地抓住我的肩膀，“Your note yesterday was perfect. I just love it! Such a note of minimalist, I love the bullet points, not even a piece of BS. I really appreciate that simplicity.” 感覺到自己臉紅了起來，每天趁著五點後照會數量較少的空檔有餘裕央求 Resident/Intern 教學幫我修改 note果然還是有些進步，喜歡看著他們的表達方式，從中磨練學習闡述與釐清自己的想法。每天 4-5 個 learning topics, review Harrison 不同章節，期間感覺自己不斷地茁壯與成長，才能無愧他們花在我身上的時光。

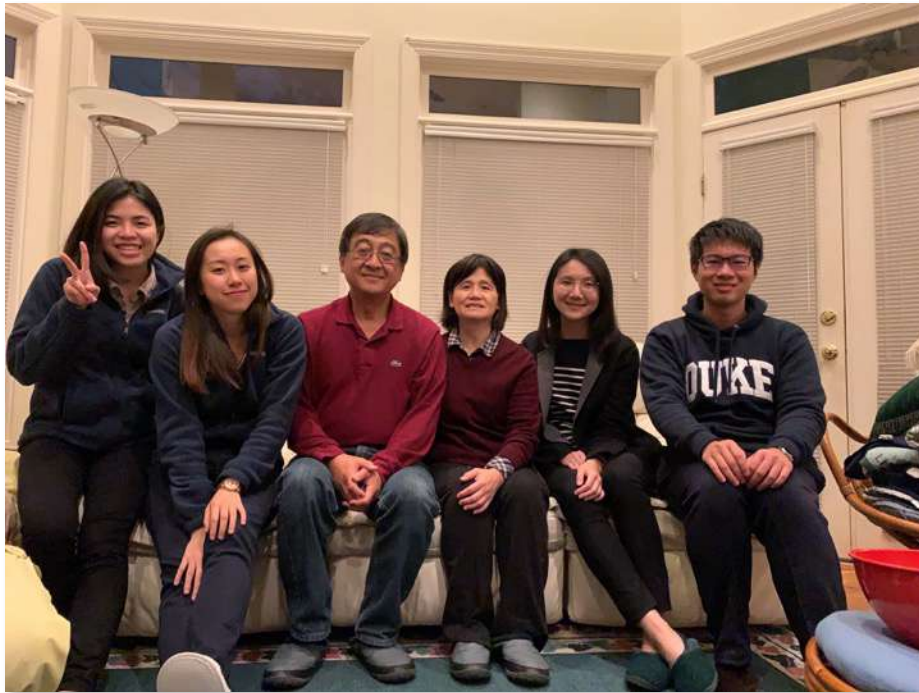


4th Week On Cards Consults with Dr. Howard Rockman, Resident Dr. Christopher Asuzu, Intern Dr. Nathaniel Erskine, Med Student John Taneka



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**Encounter that will be genuinely missed.**



與 Tony Huang 教授及師母共度感恩節



與 Amy Lee 學姊與 Howard Lee 學長一同晚餐



與黃教授及師母於 NC State Fair



Hanging Rock



Folly Beach with 李秉樂學長



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## And...there were four of us.

一邊撰寫心得一邊回想起最後一日下午走到 WholeFoods 前，四人笑著又回到了第一天抵達的起點，當時先抵達的三人討論著住宿，而我還被困在 JFK。 “My flight got cancelled when I was sitting there reading nicely and comfy, thinking nothing would happen to me.” 記得當下是這麼告訴 E 的，記得接近深夜抵達 Durham 的忐忑以及眾人開門迎接我的那一刻。

很多時候幸福是看似再小不過的事，是在醫院留到很晚時會有人關心你還好嗎、需不需要接你下班，是回家發現有人幫你準備熱騰騰的晚餐，是願意相處一起聚在圓桌分享醫院瑣事，是大家願意陪我嘗試一個個冰淇淋口味 (Talenti' s Pistachio) 、一起喝熱紅酒，是一邊準備晚餐一邊漫談。後來甚至取消前往波士頓共度感恩節，只為了換取更多與這些人相處的時間。

這些日子以來謝謝你們的幫助、照顧、陪伴與包容，直到走進 RDU 才認真意識到這次真的是一個人了。Never thought I would be nostalgia of coming home to people, glad you three made me so.



**On Arrival: First day at Duke.**



**Departure:  
Last day at Duke Garden.**

這段時間裡看見自己嚮往的模樣與溫暖，一路上遇見許多人待我以熱情、理解與信任，讓我得以期待每日的學習時光，已經許久沒有如此期待到醫院，在面對不同的挑戰之際感受到自己並非孤立無援，而是被包容且接納著，並於其中一點一滴勾勒出自己渴望成為的模樣與特質。

感謝 Dr. Tony Huang 與師母、Amy Lee 學姊、Howard Lee 學長、李秉燦學長照顧我們在美國的生活；謝謝同行的景立、迪涓、修誼，這段時光因為你們的陪伴而更加精彩與豐富，這些日子以來謝謝你們的幫助、陪伴與包容。

這是一段無疑會非常想念的日子，總是努力地書寫希望能留下沿途的點點浮光，期待有一日自己能力足夠成熟之際，也能將這一份感動延續；Duke University Hospital 的旅程暫告一段落，願這些時光以來的省思與收穫長伴左右，在搖晃的日子裡，成為穩靠的繩索。

