

A First-Year Medical Student's First Patient

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HOW TO CITE: Peplinski F. A First-Year
Medical Student's First Patient. *Fam Med.*
2024;56(1):54-55.
doi: [10.22454/FamMed.2023.205032](https://doi.org/10.22454/FamMed.2023.205032)

PUBLISHED: 13 November 2023

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Hunched over my paper-littered desk, clacking my space bar to advance to the next slide, and sipping from a ludicrously large mug of room temperature coffee, I study. Halfway through my first year of medical school, the routine is set in stone.

Attend lectures and take notes, rewatch the lectures at two times the speed with my notes in front of me, use outside resources to solidify concepts, and answer each lecture's learning objectives.

Rinse, repeat.

With an exam at least every other week, the ritual of review has become my life.

Why did I do this to myself?

The trees are massive, making it impossible to appreciate the forest.

This was not the dream. In striving to withstand the fast-paced educational fire hose that is medical school, I've lost sight of medicine.

My mission changed from becoming an excellent doctor who helps her patients to surviving my next exam to live to see another exam, to live to see another exam, to live to see another exam.

"Bzzt, bzzt," my phone vibrates.

I flip it over to see my friend from home calling.

Should I answer it? I'm studying.

I haven't talked to him in ages.

I really should keep studying.

Me: "Hey! What's up?"

Him: "You're in medical school, right?"

Here we go.

Me: "Yeah, but I'm only in my first year; I don't know much."

Him: "I need to know if my girlfriend needs to go to the emergency department."

Oh no. Please ask me about the Krebs cycle instead.

Me: "What's going on with her?"

He shares that his girlfriend has been having terrible abdominal pain.

I freeze. What is that mnemonic we learned to take a history? OPQRSTA? What are all the causes of abdominal pain? I wish he had asked about pharyngeal arches instead of putting me on the spot like this.

I run through the HPI, faltering and stumbling my way to the information I need.

Her pain began last night and is in the right lower quadrant, but it started around her umbilicus. It's severe, stabbing, and has been worsening the last few hours. She feels a little hot but hasn't taken a temperature. Over-the-counter acetaminophen did not help her pain, and she's now feeling nauseated. She isn't on her menses. She still has her appendix.

She doesn't want an emergency department bill unless she "truly needs it."

I'm probably an overly anxious medical student. So many things can cause abdominal pain! I don't have any lab values. I don't even have a temperature. Sending her to the emergency department for this to be mittelschmerz or abdominal pain secondary to the typical college kid diet would be humiliating.

Me: "I learned some physical exam techniques that may help us figure out if she needs to go to the emergency department. Can you have her lie down? Push on her right lower portion of her belly, partway between her belly button and hip bone."

I hear a yelp through the phone.

Him: "I hurt her!"

Me: "There are a lot of things that can cause pain there. Can you place your hand on her right thigh and ask her to try to lift her thigh up off the ground against your resistance?"

Him: "That hurts her a lot too."

Me: "I'm sorry. Can you hold up her right leg under the knee and under the heel and twist her thigh inward? This is hard to describe over the phone."

Him: "That hurts her too."

Yikes.

Please don't hate me.

Me: "Again, I'm just a first-year medical student, but I think she needs to go to the ED. If it's unnecessary, I'm so sorry; but based on this call, I think she needs to be seen."

Him: "Alright, we'll keep you updated."

I hang up. This was nothing like my standardized patient encounters. I didn't have a chance to rehearse a scripted series of questions and prepare for every possible patient response. I didn't have time to formulate my thoughts before presenting my plan. Using my raw clinical skills from afar felt foreign. It was clunky. Did I do well? Did I just stick her with a massive ED bill unnecessarily? Was my description of the physical exam maneuvers adequate for him to perform them correctly? I'm just a first-year medical student; he shouldn't be calling me for real advice! What do I know?

Returning to my studies is impossible.

I sit, dreading the inevitable text, questioning how an idiot like me got into medical school because I just sent someone with gas pain to the ED.

I finally hear from him.

"Thank you! She had appendicitis. She just got out from surgery—you might have saved her life!"

NO WAY. There is no way. I don't know enough to save lives. I'm just a first-year medical student.

With a massive beaming grin, I plop back at my desk to return to my reading—the thrill of my first glimpse of the forest being enough to empower me to continue to tolerate the tedious study of trees.