NARRATIVE ESSAY



Paying Respect

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HOW TO CITE: Millstein JH. Paying Respect. *Fam Med.* 2024;56(7):455-456. doi: 10.22454/FamMed.2024.703521

PUBLISHED: 2 July 2024

KEYWORDS: interpersonal skills, medical humanities, narrative/reflective writing, patient-centered care

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The line of visitors wraps around the church perimeter, leaving about a dozen of us outside on the stone walkway inhaling the evening's frigid air and shielding our faces from the wind. No one complains. Callers range from teens to seniors, as you might expect for a beloved mother, grandmother, high school secretary, and religious school teacher. I take in the scene as a quiet surveyor and mourner, unknown to the others in attendance except her two surviving daughters who are also my patients.

When I finally get inside the door, I scan the room looking for familiar faces while my body thaws. The spacious church sanctuary is dimly lit with a high vaulted ceiling and intricate stained glass depicting Biblical stories. The soundtrack is not sacred though; rather, it is a playlist of her favorite pop songs she used to dance to. Finally, I see the family; they are up front holding hands next to the open casket. I try to make eye contact but am too far away.

Memory transports me to a busy November afternoon, 22 years ago, and I am new in practice. My patient's eldest daughter has just died in a single car accident on highway 295, just weeks before her wedding date. She comes to the office distraught and desperate for help. When I enter the room, she stands, embraces me, and sobs uncontrollably. I feel overwhelmed but hold onto her, hoping she keeps breathing and cannot sense my own angst and uncertainty.

Conversations are upbeat, people find their friends in the line and laugh, hug, catch up on what their kids are doing. Montages of photos are positioned every few feet. She is smiling in nearly all of them. Seeing old pictures of all three of her daughters together is heartrending. A person's life has ended, but joy is in the room. That must say something about her spirit and influence.

I am nervous seeing her for another visit in the office a few weeks after the accident. Am I helpful in her time of unimaginable despair? To my surprise, she greets me with warmth and ease. I have no great wisdom to share, but simply listen and learn about her life, sit in awe of her strength in the wake of losing her child, and offer to see her as frequently as she feels the need.

The line moves slowly around the room. Now I have a clear view of her daughters, their partners, and children embracing each visitor with a mixture of tears and smiles. There are hundreds of callers, and the family seems to recognize them all, bringing each one in close and quickly picking up conversation.

She returns for follow-up months later and then yearly. We review her health issues, and I am able to ask about her emotional state with curiosity and concern. I learn from her that her grief is a journey, something ever present that she is learning to cope with. Tears still come, and I hold her hand in both of mine. Her visit also nourishes me; the experience of mutual connection and trust exceeds any prior level of professional satisfaction. The challenge of developing a relationship feels as meaningful as searching for a diagnosis. Now I see clearly how the former guides the latter.

As I get closer to the front of the line, I wonder what to say when it is my turn to offer sympathy. A school-aged child in front of me buries her face in the younger daughter's sweater and cries freely—her teacher has died. The daughter pauses her own grieving to comfort her. I am moved by the child's unshielded emotion and how she is received with such warmth and generosity.

I am so sorry for their loss and hope her daughters and their children find peace in their time of mourning. Unlike 22 years ago, this time I can give comfortable, warm embraces with full appreciation of the meaning and impact of my presence. I will offer a few fond

memories and recount what a privilege caring for all of them has been. Most of all, I will make sure they know how their family has helped a doctor improve his craft.