

Noticing

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Whoosh—the door opens like theater curtains, revealing a crowd.

A mother rocking a crying infant in her arms, two young siblings chasing each other around a stroller as big as the exam table, and the star of the encounter sitting quietly in the patient chair—ready for her 8-year-old well-child check. I tightly trail my preceptor into the room and squeeze quietly into the most available corner. My preceptor surveys the room, smiles at the crowd, and the show begins.

I follow along in my notebook as we establish rapport while chatting about vegetables, dental habits, and her elementary school’s musical. The show goes as rehearsed, until we reach the final act. Throughout our time with the star of the encounter, I notice my preceptor slowly swiveling her chair to face the star’s mother in the other corner of the room.

She starts asking a few questions to both parties until she addresses the mother directly, “I see in your chart you recently moved, may I ask why?”

I close my notebook and glance at my preceptor inquisitively as the show begins to deviate from the script we established and rehearsed many times before. The mother’s eyes well as she describes struggling alone in a new city after escaping an abusive situation and being safe now.

She sets her now sleeping infant in her exam-table sized stroller, wipes the sweat from her brow, and sighs, “Thank you for being the first to give me space and ask if I am okay.”

Our next appointments that day ranged from twin newborns to grandparents—my notebook becoming increasingly filled with more and more scribbled scripts. Even as my notes became more and more illegible with each visit, one thing became clear: My family medicine preceptor had the art of noticing mastered.

Growing up Chinese American in Minnesota, I have been noticing much longer than I have donned a short white coat. How my *s* sounds in English became jumbled because in Chinese *s*, *sh*, and *x* sounds are distinct. What social norms for food and smells were during lunch. When I watched YouTube videos on eyeshadow application but realized mid-application that the technique didn’t quite work on monolids. How my suburban daycare center assumed a birthmark was the result of a strict mother’s teaching. But noticing is not unique; we have been doing it all our lives. It is human nature to inquisitively notice as we grow, thus allowing us to learn from the experiences of others.

Continuing in my third year of medical school, I now tightly trail preceptors through the halls of my inpatient pediatrics rotation. Here, the sheer number of toddlers who reach for my stethoscope after the physical exam and curiously hold it up to their own heart has become a reminder that noticing, while powerful, is moot without action. We all notice, but applying the art and realizing its strength in providing empathetic patient care takes time and effort. My preceptor who aptly noticed a struggling mother’s situation intervened and ensured access to resources. One of the privileges of being a medical student is that we have the time to join patients down the tangents of their story, to facilitate the magic that makes a difference: relaying these pearls to the health care team to enhance patient-guided care decisions.

This isn’t to say that noticing in medicine will always result in grand and meaningful interactions. My day-to-day noticing as a medical student on clerkship rotations has

mostly sounded like, “Can I grab you the TV remote?” “Do you need help opening that apple juice?” “Warm blanket? You got it.” Though I am now coming to understand, no act resulting from noticing is too small. From my days as a kid, noticing to understand social norms at school, to now, as a medical student noticing as a way to catch glimpses of a patient’s life. All to one day become another provider who knows when to go further than completing a well-child check.

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