

My First and Last Adrenalectomy

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Commentary

I promised myself never to abuse medical students. Somehow, everyone believes this as they complete their residency. Eventually however, students natural stupidity overwhelms artificial intelligence. We must strike it down definitively.

Which brings me to my first day in the operating room as a medical student. A place where I am shuttled out of harm's way repeatedly, like a game show contestant confused by all the bright lights. I heard the scrub nurse compliment my skills, saying, "This guy's like a bull in a china closet."

A medical student's primary task in the surgical theater is being a modified retractor, holding things out of the way so the surgeon can ask us, while doing the surgery, what bit of anatomic arcana they are sewing. Meanwhile, confounded by the blood and horror, our answer is inevitably wrong. Then there is the exciting moment when we get to cut the suture which is either too short or too long.

So several hours into that surgery, I am handed a goblet of flesh on a forcep. I am told to hold it so the surgeon can scoop out an encapsulated mass on the surface of the kidney. Between boredom and lack of sleep, I separated the goblet from its mooring, the anesthesiologist noted this, by gasping, "The patient's blood pressure just spiked! Everything okay there?"

The surgeon lifted his eyes to look at the anesthesiologist over the curtain drape, and then turned to me with venom.

He noted the forceps and the goblet of flesh in my hand separated from the patient and in characteristic fashion complimented me, "Congratulations young Schlesinger, you just completed your first adrenalectomy! Now take your organ and leave my OR."

Years later, when my time came to explain the difference between affect and mood to an eager young mind, I was about to ejaculate some nasty put down, when I hesitated. I remembered my first and last adrenalectomy and compared mood and affect to weather and climate.

The wide-eyed young woman with a previous degree in ecology, smiled with enlightenment, rather than suffering sullen disdain. Clearly, leading the next generation of physicians does not have to resemble the way we followed the previous one.

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