VMS Community-

We are so excited to present you with the Spring/Summer 2017 issue of the Careers in Medicine Newsletter!

This issue features content from all four classes within the medical school. Second years share their favorite moments from clerkships, while fourth years tell us their most memorable (or embarrassing) medical school moments. We have included a research profile of the third year class and a faculty profile from Dr. Cathleen Pettepher. Dr. Pettepher was nominated by the first year class!

As always, feel free to check out the Vanderbilt CiM website for more info: https://medschool.vanderbilt.edu/cim

Thanks so much to everyone who contributed to the newsletter! Happy reading!

--Lauren Holroyd, VMS III and the CiM team
Memorable and Mortifying Moments from the Class of 2017

There are moments from medical school which you will certainly never forget (even if you may want to...). The former fourth year class shares the most memorable and most mortifying moments from their time at Vanderbilt.

THE MORTIFYING…:

Scrub Malfunction

“My most embarrassing moment happened during my surgery clerkship. I was assisting with a surgery when all of a sudden, a ton of blood and abdominal irrigation spilled everywhere, drenching my scrubs. After the operation ended, I went to the locker room to obtain a new pair since I had never needed a backup pair in the past. After looking around the locker room to make sure nobody was there, I swiftly undressed and stuck my scrubs in the machine. To my horror, the scrub machine said there was an error and my scrub code would not allow me to access a replacement pair because my ‘limit had been met for the day.’ I frantically tried the other machine with no luck. I sprinted to a bathroom stall and had to hide in my lingerie for 20 minutes until a scrub tech came in. Hearing my cry for help, she saved me with a backup pair!”

“Where are you from!?”

“I was on neurology, stroke service with Dr. Riebau. Dr. Riebau is amazing, an amazing clinician, phenomenal with families and patients, and a fantastic and dedicated educator. So, being the great teacher he is, he decided to run through the coma exam with all the med students on neurology, to review the recent lecture about the coma exam. I, however, was not at the coma lecture. I still to this day do not know when it was, what it was, how I missed it, etc.
So, he gets all the med students on neuro together, and we go into a patient's room in the stroke unit who is in a coma. He calls upon me to do the coma exam and demonstrate to the class. I agree, thinking he is going to walk me through it, and he doesn't but mentions to do what we learned in the coma lecture. I tell him I wasn't there, and then agrees to walk me through it. Dr. Riebau is telling me to examine him, and then try to arouse the patient or get him to follow commands. He tells me, ‘Hey patient X, open your eyes.’ I repeat. He says it again louder, I repeat louder. He says it again even louder, and I repeat louder. Then he says ‘Hey patient X, squeeze my hand!’ I repeat. He yells it louder, I repeat louder. He yells it even louder, and I yell it even louder. Anyone who knows me knows that I'm not timid, so I am straight yelling at this point. Then Dr. Riebau says ‘where you from?’, and I turn to the patient and scream right in his ear, ‘Hey patient X, where you from!?’ Then Dr. Riebau says, ‘no not the patient, you.’ And all of the med students erupt in laughter at me. Dr. Riebau was trying to figure out where I was from, so I could respond ‘Indiana’ and he could respond ‘scream like you are at a Colts game’ or something. It was pretty great. And I can still picture it now completely.”

Welcome to the Wards!
“Had to do a rectal exam on my first patient on the wards - welcome to clinical rotations!”

...AND THE MEMORABLE: Organ Procurements
“My most memorable moment of medical school was going to an organ procurement during my surgery rotation. I will never forget the moment when life support was withdrawn and I watched the heart stop beating with my own eyes. It is an incredible privilege to witness the gravity of a life lost mixed with
the joy of the potential for many lives saved.”

You matched!
“There are sooo many memorable moments in med school, but one of the best feelings was getting a call from your future Program Director letting you know that you matched at their program. It's a sensation of (first) relief, (second) disbelief, (third) excitement, and (fourth) the realization that all of the toils and troubles of med school were worth it and you've just accomplished a major milestone in life. Hard to beat!”

RESEARCH SPOTLIGHT
Class of 2018

It’s no secret that VMS III’s have spent a lot of time on research immersions this year. We wanted to get a better picture of what exactly they are studying! Special thanks to Dr. Finck and the Office of Medical Student Research for getting us these statistics!

Of the 68 3rd years completing research this year, the majority (30) have done Bedside (Clinical/Translational) research.

A total of 8 students are planning on taking a year out to do more research! That’s 12%!
Of the students who have completed their research or are currently in a research year, over 15 have already submitted manuscripts, abstracts or posters to a conference. Additionally, more than 10 students have already presented at a conference. Below is a list of conferences and journals to which students have had work accepted:

- Gold Humanism Honor Society National Conference Translational Science
- American Society of Pediatric Otolaryngology
- American Academy of Otolaryngology
- Latino Medical Student Association Regional Conference
- Southern Neurological Society
- North American Skull Base Society
- American Society for Radiation Oncology
- Congress of Neurological Surgeons
- Association for Clinical and Translational Science
- American Association for Cancer Research
- American College of Surgeons
- Society for Interventional Radiology
- World Congress of Interventional Oncology
- Ichon School of Medicine Student Ethics Conference
- World Congress of Women’s Mental Health
- Multinational Association for Supportive Cancer Care
- American Society of Pediatric Hematologists/Oncologists
- American Medical Informatics Association
- Pediatric Academic Societies Annual Meeting
And the winner is...

Class of 2019

After a full year on the wards, members of the second year class look back to tell us their favorite clinical moments!

One of my favorite moments was during my neurology rotation, when Dr. Riebau was our attending on stroke. We proceeded with morning rounds and after I delivered my patient presentation and assessment & plan, he said "Ok, that sounds good. Now, go in and tell the patient and family what you just told me, except in plain language." That was the first time I really felt like I was making a difference.

Getting to deliver a baby was definitely the coolest thing I've done in medical school so far!

On Peds Pulm (my very first rotation), I met a kid with CF who was wasting away in bed with little appetite, mostly sleeping and watching videos. He had little physical activity, and his family couldn't visit much in the 1st week of his stay. Long story short, I eventually tricked him out of bed by drawing him into a pillow fight and a few games of hide-and-seek with his stuffed animal. After that, he was a little more willing to be up and about. When I switched rotations, he gave me those puppy eyes and asked "Do you have to go?"

During a liver transplant, it was amazing to see the donor liver re-perfuse and turn bright, healthy pink, after anastamosing and unclamping the portal artery.

[When my Cardiothoracic Surgery Attending yelled] "WE'RE DOIN' SURGERY!"
Faculty Spotlight: Dr. Cathleen Pettepher
Class of 2020

We asked the first year class nominate their favorite first year faculty member- Dr. Pettepher took the prize! See her answers to our questions below!

You were nominated by the first-year students as a favorite faculty member during the FMK phase. What is your favorite aspect of teaching students during their first year of medical school and of working with medical students?

My favorite aspect of teaching first year medical students is being able to interact with so many individuals from vastly different backgrounds but yet you all have a similar goal in mind – to learn all that you can (knowledge and skills) to become the best physician that you can be. Each and every one of you brings something different to the table making us a very diverse and interesting group. Your unique personalities and characteristics shape the learning process in extraordinary ways and this challenges both your peers as well as the faculty to grow, making each of us better people and in my case, a better educator, along the way. I also enjoy being a part of your journey, helping to mold and shape you into becoming the professional that you want to be.

Your PhD is in Cellular and Molecular Biology. When did you realize that you wanted to be involved in medical student education and how did this progress?

Actually, the opportunity to teach medical students somewhat fell into my lap! I was completing my post-doctoral fellowship in Diabetes and thinking
about next steps when the opportunity to join the Gross Anatomy team here at Vanderbilt presented itself. [...] I was interested in changing career directions so with no awareness of this position being available, presented myself to the Director of the course as an individual “willing to do anything” if they allowed me to help them teach in the Anatomy laboratory. Dr. Paula Hoos and Dr. Lillian Nanney were “desperate” for additional help to carry the teaching load that they were willing to take a chance on me. So, here I am, 24 years later, a Sr. Anatomist, teaching Gross Anatomy to VMS students! So a “new door” opened for me as another one closed and for that, and for them, I am eternally grateful!

In regards to teaching histology, as part of the requirements to obtain my Ph.D. degree in Basic Medical Sciences, I needed to be a teaching assistant in two medical school courses. The research laboratory that I was a member of was housed in the Department of Structural and Cellular Biology (just a fancy name for “Anatomy”!), so it made perfect sense for me to choose Anatomy and Embryology as one of those courses. [...] So my undergraduate background positioned me nicely to participate as a teaching faculty member in these same two courses here at Vanderbilt. While working as a junior faculty member in the Cell and Developmental Biology Department, I quickly became involved in teaching Gross Anatomy to first year medical students during the August to December timeframe. And due to my research interests, I was also asked to teach the Endocrine section of the Histology course and help in all sections of the lab between January and May. I took over as Director of the Histology Course a couple of years later, when a dear colleague who ran the course, suffered and ultimately died from complications of double dissecting carotid aneurysms. Though a very sad way to become Director of a medical school course, I took forth all that Dr. Hoffman taught me and hopefully some of these elements are still evident based on the way I teach the course today.

**Often, histology and embryology are intimidating subjects to tackle and comprehend. What is your strategy for taking on difficult material and making it easily understandable?**
There is no doubt that these two subjects are a challenge to learn! Like any other subject matter, it takes motivation, focus and persistence or practice. Like Anatomy, Histology is a visual science, so the key is really repetition. Spending time in the lab, reviewing images, identifying pertinent structures and connecting them to/placing them in some clinical context, is really the best way to solidify learning of both anatomy and histology. Now embryology is a different story! Many individuals struggle with making sense of the weird terms and pulling the picture together since everything happens simultaneously and occurs in 3D. So, I believe it is important to come up with tangible examples that demonstrate the development process so that the concepts are easier to understand. If you can visualize the process, you can learn it. That is how the idea of using a rope to demonstrate the development of the GI tract came into being.

During HBA, you help many first years with the adjustment to medical school. As your students continue to move forward, do you have any advice on navigating the transition to becoming a clinical medical student or resident?

The most important attribute needed for transitioning to a clinical medical student, an intern or residency, is having confidence in your abilities and to not be afraid of the challenges facing you. You are all very bright individuals and have the ability to succeed in any career path that you choose. However, in order to be successful moving forward, you need to:

- Have “Strength of purpose”: This gives you the capacity for exertion and endurance. It also allows you stand firm in your morals so that you can always choose to do the right thing.
- Be “Observant and Listen”: You should carefully watch everything happening around you, paying attention to details or behaviors of others, for the purpose of learning and for arriving at a judgement or swift decision that will help you provide the best care for your patients.
- Have “Compassion for your patients”: Touch them both physically and emotionally, so that you can learn who they really are. This will help you take care of them in the best way possible. It will also help you
stretch beyond your comfort zone and grow as a person and as a professional.

- Display “Grit and determination”: You want to display both mental and moral strength to persevere despite the situations that you find yourself in.
- Have Courage: So that you can persevere and withstand fear or difficulty.