

Dean Emeritus Ocie Harris' Graduation Address to Class of 2010
Florida State University College of Medicine
May 15, 2010

It is truly an honor and a pleasure to be able speak with you today, and I thank you for this great privilege. I want to add my congratulation, to those you have already received, for your achievements signified by this ceremony. And I congratulate your families and others here today who have assisted you in successfully completing this important milestone on your life's journey. I know there have been many sacrifices for everyone to make this happen.

In considering this address, I asked myself: What should you say to these young doctors for whom you have warm personal feeling and best wishes for their success and happiness?

As any academic worth his salt, I said to myself. You must first do your research – so I went into my library and googled medical school graduation speech. I guess I should not have been surprised that there are a number of medical school graduation speeches floating out there on the internet. And guess what? The very first speech on the search was delivered to the FSU College of Medicine Class of 2008, by our own Dr. Alma Littles. Being first on the list must mean it was the best, and I would certainly agree it was excellent. After reading a number of these graduation addresses, I concluded I was not going to try to predict the future of medicine for you, give my insight on healthcare reform, or take a poke at HMOs, malpractice lawyers, quackery or the health IQ of the average American.

I did pick up a useful description of a graduation address in my research. Graduation was likened to an Irish wake with everyone celebrating and having a great time except the recently departed. The speaker at graduation is expected to play the role of the recently departed. As at the wake, the corpse is expected to be prominently displayed, but it is sincerely hoped that it will not say much. So in keeping with this tradition, I will attempt to be brief.

But seriously, I asked what would I say to a daughter or son graduating from medical school today? What do I value most about my medical career?

I would say. I hope you have discovered the joy and satisfaction of medicine over the past four years and have fallen in love with this career. From my own experience, I would share that medicine has given me a life fulfilled by opportunities to help others. It has given me challenges that have strengthened my character and made me a better person. It has allowed, actually it has required, me to be a serious student all my life which in itself has been a very rewarding endeavor. My hope for you is that you have a love affair with medicine for the rest of your life.

Unfortunately there is no guarantee that this will be the case for everyone. I have met physicians who do not share my enthusiasm for medicine and who say they would discourage their children from following them in their profession. I would hate to think that any of you would develop such an attitude towards medicine in the future and miss out on the great rewards that medicine offers. Why would this be? How could a physician not love being part of this honored profession they worked so hard to join? Did they never fall in love or did something happen along the way to sour their affection?

This is not a modern problem. Sir William Osler, one of the four founders of Johns Hopkins Hospital and perhaps the most important influence on modern medical education, spoke to his

students and fellow physicians about this on a number of occasions. I believe it is interesting to use Dr. Osler's words regarding a medical career because of his prominence in medical history and because he had implemented a new model of medical education at Johns Hopkins Hospital and we are now in our 10th year of another new medical educational model at Florida State. More than a hundred years ago Osler said.

“Some will tell you that the profession is underrated, unhonoured, underpaid, its members social dregdes – the last profession they would recommend a young man take up.”

On another occasion he said. “For better or worse, there are few occupations of more satisfying character than the practice of medicine,”.....”The discontent and grumblings which one hears have their source in the man more often than in his environment.”

Granted there are numerous frustrations facing practicing physicians today, probably many more than in Osler's time. But I am inclined to agree with Osler that unhappiness with medicine comes from within rather than from external factors.

Is there anything to be done that will lessen the likelihood of becoming disenchanted with medicine? At this time of transition, a time in which you are plotting your future course, it would be good to reflect on the path to a rewarding medical career. For the next few minutes I would like to consider this and offer a few suggestions from my and Dr. Osler's experience to avoid becoming disenchanted and squandering the opportunity to receive all that medicine has to offer.

The most basic requirement for success is of course, “knowing your stuff”. Without adequate medical knowledge a physician is a fraud or as Osler put it, a charlatan. We know at this time you know your stuff and you are ready to enter the next phase of education and training. You will continue to be supervised in your education over the next few years but you will be developing your life long habits of study. What these habits are will be your decision.

Osler said. “ The hardest conviction to get into the mind of a beginner is that the education upon which he is engaged is not a college course, not a medical course, but a life course, ending only with death, for which the work of a few years under teachers is but a preparation.” He cautioned that. “The killing vice of the young doctor is intellectual laziness.” If medicine ceases to be intellectually stimulating it can become a grind, just a business, and much more susceptible to the external pressure and frustrations we have today.

The acquisition of medical knowledge is only one half of the educational quest. The other half is to “know yourself”. Osler considered pursuit of medical knowledge and knowledge of self to be equally important and a good practitioner needed a due portion of each.

We are not distinguished by our knowledge but by the skill with which it is applied. Patients do not know how much we know but they are keenly aware of how we apply what we know. It is critical that we know our strengths and our weaknesses, our biases, how we meet challenges and frustrations, and how we best acquire medical knowledge. Application is essentially linked to how well we know ourselves.

These insights are also important for us to be able to take care of ourselves. Osler advised his students and other physicians to find interest outside of medicine and cautioned them to not become consumed by the pursuit of medicine. He emphasized the importance of a proper balance between vocation and avocation. Knowledge of self helps us to better understand our limits and

strike a proper balance. This makes us better practitioners, better colleagues, better friends and better family members. With a balanced life you can better face and deal with the problems you will surely have, in both your professional and private lives.

To really get the most out of medicine you must “know your patients”. Knowing your patients means much more than knowing their medical record. Knowing about a patient’s situation in life is essential for doing the best you can for them as their physician. This knowledge is instructive and helps the practitioner become a better physician and improve their clinical skills. It helps us to better understand ourselves. Osler said. “Every patient you see is a lesson in much more than the malady from which he suffers”.

I saw a movie not long ago in which one of the main characters was a physician. This prominent surgeon had performed an elective operation to remove a birth mark from the face of a middle aged woman. She died during surgery. The cause of death was apparently one of those rare unpredictable anesthesia deaths. The physician had not spent much time with the patient or the family before surgery and after her death did not adequately express his regret for this tragedy. The family sued. The physician was truly sorry and it bothered him that the husband thought he made a mistake. Against his lawyer’s advice he sought out the husband to explain that a mistake had not been made and her death was unavoidable. He was more focused on his reputation rather than the grief and anger of the family. After a brief dialogue with the husband telling the physician some things about his wife the physician should have known but did not, and hearing no apology from the physician, the husband asked. “What color were her eyes”. The question seemed to stun the physician because he could not answer. He just turned and walked away. He had focused on the lesion on her face but really did not see the patient. He did not know his patient and did not know how the husband felt about her having the operation.

Many good things happen when we take the time to really get to know our patients and often bad things are avoided. Frequently quoted wisdom from Osler is, “It is more important to know what sort of patient has a disease than what sort of a disease a patient has” and “The good physician treats the disease; the great physician treats the patient with the disease”.

The relationship formed with a patient and often with their family is one of the most rewarding aspects of a medical career. I have heard this sentiment repeated many times by physicians whom I admire and view as role models. It has been my personal experience that these relationships are not one way affairs. The trust, confidence, respect and friendship received from patients is sustaining in difficult times.

The fourth and last thing I would ask you to consider is the legacy you will leave when you finish your medical career. I ask you to consider how you might add to the wonderful legacy that the practice of medicine automatically provides; a legacy of improving peoples’ lives, even saving lives and being a positive influence in your community. This legacy does not take additional effort. It is part of the package when you practice medicine. Not many other careers offer such a great opportunity. But you can add to the legacy in a number of ways – community service, medical missions, youth activities and so forth. The legacy I would ask you to consider today is to teach. Doctor comes from the Latin, *docere*, which means teacher. In our daily routine we educate our patients and frequently each other. This medical school has given practicing physicians the opportunity to teach medical students and you have been the beneficiaries of their outstanding efforts. Where would you and this medical school be today if hundreds of practicing physicians had not stepped forward to join our faculty. As you enter your residencies you will become more formal

teachers and have the opportunity to develop these skills. Take advantage of this opportunity and after entering practice, seek out opportunities to share your knowledge and experience with students coming after you. Osler said physicians should be as willing to teach as to be taught. With the success of FSU's model of medical education, I believe there will be many more chances to teach medical students in community practices in the future. To teach is an intellectually stimulating experience and a real bonus that is available to the medical doctor.

Osler viewed teaching as his greatest legacy. He said; "I desire no other epitaph than the statement that I taught medical students in the wards, as I regard this as by far the most important work I have been called to do." I hope that each of you will find an opportunity to experience the gratification that teaching provides.

Medicine is a wonderful career and offers many exciting and stimulating challenges. It offers personal satisfaction and sense of accomplishment in great measure and will sustain your interest and enthusiasm throughout your life time if you let it. I hope at the end of your medical career you will highly recommend your profession to anyone seeking your advice. I hope you have a love affair with medicine for the rest of your life.

Thank you again for this opportunity and best wishes as you continue your journey.