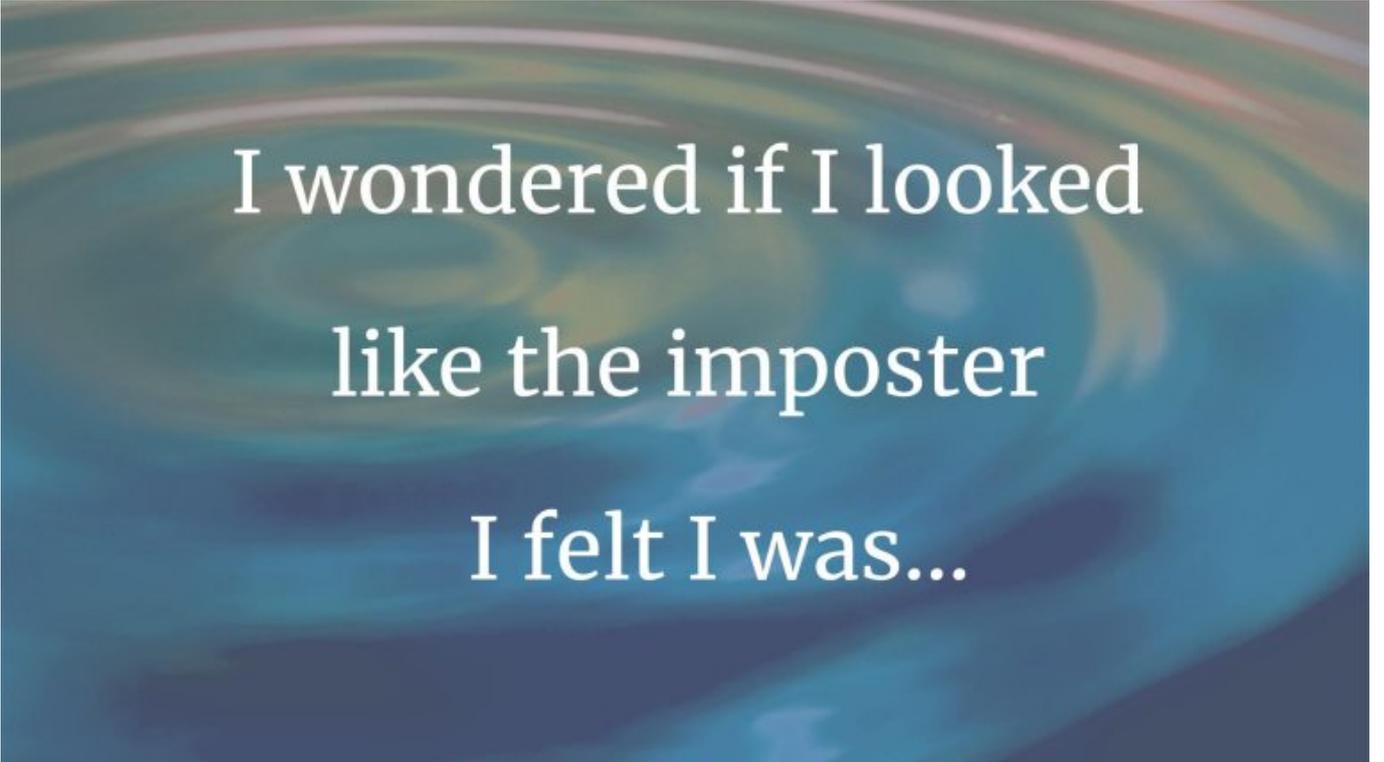


The Role of a Lifetime

Category: Stories

written by Arya Parhar | August 5, 2022



I wondered if I looked
like the imposter
I felt I was...

In our first week of neonatology, my third-year classmates Jay, Em and I donned PPE and filed like ducklings into an operating room on the birthing unit.

A young woman sat slouched on the operating table, her unbuttoned hospital gown revealing the S-curve in her spine. Her name, we learned, was Elise.

Beside her stood the anesthesiologist, Dr. Lane. He put a hand on her shoulder.

“I’m sorry, but the curvature in your spine means that an epidural won’t work,” he said gently. “You’ll need to have general anesthesia.”

Elise nodded, then looked towards the hallway as if searching for someone.

Moments earlier in that hallway, Jay, Em and I had been rehearsing our “walks” and “stands”—striving, through our body language, to project the calm competence we were desperate to possess.

Ever since an early growth spurt left me taller than my peers—at a time when I was not eager to stand out—I had assumed a slouch as my natural state. Throughout my premed years, I’d been at peace with this hard-earned posture, rationalizing that it was best to blend into the background while I shadowed physicians. But now, after two years of committing physiology and pathology to memory, I was a third-year medical student for whom slouching would no longer suffice. If I was to be a member of the healthcare team, I had to look

the part.

In our first days on the wards, I'd studied how my classmates held themselves during patient encounters. Jay, tall and lean, had a way of cupping one elbow in his opposite hand, cradling both arms against his body. To my eyes, it looked thoughtful and professional, yet comfortable. But when I'd tried it myself, out in the hallway, my classmates' unconvinced headshakes told me that I'd need to go for something different.

Now, keenly aware of my lack of any definite role amid the swirl of activity in the operating room, I decided to be at one with the hospital equipment, finding a place behind the baby warmer.

At the epicenter, the soon-to-be mother was laid on her back with a nurse on each side. I watched as swaths of bright antiseptic were applied to her abdomen. A curtain was draped between her neck and the rest of her body, suspending her rounded belly in surreal orange animation.

Like moths to a flame, the obstetrical surgeons converged on the operating table, sterile gloved hands clasped between breastbone and navel, backs rigid and straight, heads bowed over the patient as if in prayer.

Silence settled over the room. All eyes snapped to the circulating nurse.

"Time out!" she called, then stated: "This surgery will be a transverse C-section."

I reflected on her ability to command attention. Her perfectly upright posture was matched by powerful, effortless voice projection.

One by one, the room's inhabitants identified themselves.

"Say your full name," prodded my attending, Dr. Griffen, a pediatrician.

I'd missed my cue.

Dismayed, I tried to compensate for my lapse by clasping my hands behind my back as I spoke, hoping to project calm and capability. But my voice cracked. *Betrayal.*

As the other caregivers spoke, I took note of how many of them stood more confidently than I did. I wondered if I looked like the imposter I felt I was.

"It's normal for this medicine to feel spicy," the anesthesiologist reassured Elise.

At that moment, the room's double doors swung open. A man walked in, clad in a puffy white clean-room suit (aka "bunny suit").

Elise's husband Dan had arrived.

While Elise succumbed to the siren song of IV sedation, Dan slid into a chair

placed close by her head. He looked at his wife, now quickly intubated for the procedure. He brushed a lock of hair away from her forehead, his other hand flitting back and forth over the zipper of his bunny suit as if in search of reassurance. Watching him, I stopped my thumb from absently working over a hangnail.

I tore my eyes away from his hunched form as the first incision was made. The surgical team began to slice through skin and connective tissue, and I blinked hard as blood came spilling from between the muscles and organs I'd committed to memory. I saw Dan's jaw drop behind his mask as a rivulet of red emerged from beneath the operating table and trickled across the floor towards his feet.

Dr. Griffen, the pediatrician, left his post and strolled over, casually putting a hand on the back of Dan's chair. "Things look to be going well," he said. "Do you have a name picked out?"

Dan's eyes remained fixed on the bright red streak making a beeline for his shoes, but he turned his head towards Dr. Griffen, frowning anxiously.

"What was that?"

"A name. For your baby?"

The crease between Dan's eyebrows softened. "Oh. Yes. Yes, his name is going to be Liam."

Dr. Griffen smiled. "I'll be looking after Liam in the first few minutes to make sure he's breathing okay. Until then, just focus on *your* breathing, all right?"

The tension in Dan's face eased.

"Thanks," he said, finally looking him in the eye. Dr. Griffen stood quietly as the obstetricians wrenched baby Liam free of the amniotic sac. Then he leaped into action as Liam was hustled towards the warmer.

After a few assisted puffs of air, Liam let out a wail. The small room erupted in cheers. As first breaths were taken and deep collective breaths were let out, I realized that although I'd kept my posture "professional," my fingers stung from being clenched together behind my back.

Meanwhile, the obstetricians threw practiced stitches to repair Elise's incision, hands darting through the air as if in animated conversation. Shifting their weight and rolling their shoulders, they projected an ease belied by their eyes' ceaseless combing of the surgical field.

Dr. Lane sat behind Elise's head, eyes trained on the reassuring rise and fall of her chest. Jay and Em peered over the warmer as Dr. Griffen collected Liam's vital signs with a stethoscope sized for a tiny heart. At the shock of cool metal against his skin, Liam used the power of his newly compliant lungs to unleash a cry of protest.

Not wanting to crowd the warmer with idle hands, I turned towards Dan. He was glancing back and forth between his stirring wife and his new son, thumb and forefinger still fumbling with the zipper of his bunny suit.

For the first time in that long hour, I sensed a way that I might be able to contribute to the care of this family.

I walked over to Dan's chair, taking the post that my attending had vacated.

Letting my body and spine relax out of their professional posture and into a more natural stance, I moved into my new role as provider of comfort and finally allowed myself to bend-towards my patient.