Chapter 9

Medical Student Perspectives: Journey through Different Worlds

Binod Dhakal
Medical College of Wisconsin, USA

Susan D. Ross
Consultant Internal Medicine, USA

ABSTRACT

This chapter traces the learning experiences of a medical student through his career journey in medical training from two different world settings of Nepal and US. The chapter sketches the author’s interactive learning with his patients through his case notes right from his medical student days in Nepal to residency in the US. The juxtaposed commentary from a senior physician provides a longer view lens through which these learning points may be considered. These case notes and narrative insights from the health professional’s perspective thus aim to demonstrate and stimulate experiential learning in medicine, a valuable means of obtaining expertise.

INTRODUCTION

Illness is deeply embedded in the social world, and consequently it is inseparable from the structures and processes that constitute that world. For the practitioner, as for the anthropologist, an enquiry into the meanings of illness is a journey into relationships (Kleinman 1988).

My aim during this process of learning has been to document the journey where I came across a few issues of human life beyond the scope of modern medicine as it is often taught. These were not only stories of human suffering from disease per se but stories of social, economical and psychological pressures. These narratives have been published earlier in a different platform. (Biswas, Dhakal 2003)

Learning Journey from Pokhara, Nepal to Evanston, a City North Of Chicago, USA...Binod Dhakal

In my early medical student life in Pokhara, I found child labor, alcoholism and cultural practices to be an important determinant in the genesis and
evolution of certain so-called disease problems that I came across. The narrative below is about a common and important social problem in that part of the world where I began my journey.

“You must have seen a lot of deliveries by now, you are in third year, aren’t you?” my mother asked me with extreme sense of pride in front of my relatives.” Yeah mom but we will see all of them in final year of medical school.” Whenever I was on vacation my mother always used to show an interest in my subject and I tried to change the subject.

My mother always had the greatest dream to see me become a doctor. Maybe it is a matter of pride for her in front of her peers. When she found me being interested in medicine more than physics, she was happy to realize that her dreams would be fulfilled.

It seemed to me as if I was what Einstein would label a lone ostrich trying to bury its head in the sand of physics (the subject of my interest) to protect myself from the evil quanta of medicine! In fact I never wanted to become a doctor but as bad luck would have it there was no way to escape...

Initially I didn’t want to go to medicine because I hated biology. I thought it is just memorizing the facts that others have developed, with no use of concepts and imagination like mathematics. The beauty of equations and mathematical concepts were for me the main attraction of physics.

**Commentary: Susan Ross**

It is interesting to see the roads we travel to arrive at this field of medicine. I also took a somewhat circuitous route before arriving here. In high school, advanced mathematics came easily to me, but I hated it. In undergraduate university, my first love was literature, but Shakespeare and poetry seemed an impractical major. So instead, I majored in Experimental Psychology because I loved the idea of bringing more objective science to the study of behavior and the mind. It seemed ‘cool’. And somehow it seemed more practical too (i.e., conducive to getting a job after graduation). However, I soon learned that it was not conducive to anything other than more post-graduate study of the same thing. So I eventually came to consider medicine. The science was fascinating, and with a medical degree I knew I could choose from many different career paths. I was the first in my family ever to attend medical school, and my mother was thrilled, although worried about how a woman would be able to manage in this arduous calling. In any event, although Binod and I hail from very different backgrounds, I see these similarities in our roundabout journeys to medicine.

**Binod Dhakal’s Narrative Continued**

Time passed on. Eventually I managed to reach the final year of medical school and the much awaited day (of course not mine) arrived, that is the day of labor room posting. My spirits had already sunk. Nonetheless I had to attend the thing at least to tell my mother about the process of giving birth and the role of much glamorized human interventions. We were made into groups of two and posted in one of the regional hospitals of the country.

My other friend was a brilliant chap with tremendous interest in the subject; I was feeling ashamed of myself to protect the unnecessary ego that has crept into me over the years.

On the way I was engrossed in Steven Weinberg’s “The First Three Minutes” that tried to lessen my frustrations to some extent. We reached the hospital at 8:00 clock and the whole night we had to stay there seeing and conducting deliveries if lucky enough. We entered the first stage room which welcomed us with unfashionable furnishings and a peculiar odor. I was feeling happy to see the empty beds but the sleepy intern instructed us to wait as somebody may show up soon. We came back to the examination room and waited.

On the wall I found something written in nice handwriting:
Related Content

The UTAUT Questionnaire Items
Ton A.M. Spil and Roel W. Schuring (2006). *E-Health Systems Diffusion and Use: The Innovation, the User and the Use IT Model* (pp. 93-98).
[www.igi-global.com/chapter/utaut-questionnaire-items/9038?camid=4v1](www.igi-global.com/chapter/utaut-questionnaire-items/9038?camid=4v1)

Factors Affecting Business and Information Technology Alignment at the Lower Levels of a Public Organisation

Node and Hub Data Gathering Architectures for Healthcare Applications based on IEEE 802.15.6 Standard

Reforming Medical Curriculum in India in Recent Years: Conflicts of Political, Regulator, Educationist and Professional Natures and Strategies for their Resolution
[www.igi-global.com/article/reforming-medical-curriculum-india-recent/64324?camid=4v1](www.igi-global.com/article/reforming-medical-curriculum-india-recent/64324?camid=4v1)