



The Making of a Surgeon in the 21st Century

Craig Miller M.D.

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The Making of a Surgeon in the 21st Century is a highly personalized description of one individual's experiences during a five-year residency in general surgery at a major university hospital. It describes the personal challenges and rewards, the drama of triumph and tragedy, the agony of indecision and the thrill of success. Residency is the most profoundly life-altering sequence of events in a surgeon's life.

What does it take to make a surgeon?

It takes a college degree and a medical school education, followed by a residency. And it takes a willingness to subordinate one's personal life to acquiring the skills and knowledge which a surgeon must possess. This sacrifice takes its toll - on families, on mental health, on life-style. A surgical trainee may not get out on his own until well in his thirties - living, in the meantime, a meager existence at best.

Post-graduate training in surgery is longer than that of any other medical specialty, five years at least. Tortuous on-call schedules often demand exceedingly long work hours - 100-hour work weeks being the norm. Compounding the problem are very high stress levels, the burdens shouldered by the resident's family in his frequent absence and often an enormous educational debt.

Nevertheless, every year hundreds of fresh medical school graduates compete for the few available positions. They are consistently the very best of their classes.

Why would otherwise intelligent, highly motivated individuals actively seek such a miserable existence?

Surgeons have, of course, been glorified in the mass media as the swaggering, brilliant, fiercely independent cowboys of the medical profession. Their compensation has also been great. But beyond this is a personal quality best defined as decisiveness. They want to make the difference, in no uncertain terms. In surgery, when the patient enters the operating room he is suffering from disease. Thanks to the surgeon, he may be wheeled out cured. It doesn't happen every time, of course, but the possibility is there (in other disciplines of medicine "cure" is, unfortunately, an unusual event). Who wouldn't want to be such a healer, making a palpable, tangible difference?

Endorsements

"Honest, hard-hitting and tremendously entertaining ... an unvarnished look at surgery residency." Louis M. Messina, M.D., Professor of Surgery, University of California, San Francisco

"Terrific stories ... we [surgeons] live through this every day but it hardly ever comes out like this ... [Dr. Miller] got it right." Phillip Caushaj, M.D., Chief of Surgery, The Western Pennsylvania Hospital

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Excerpt

Mr. Colson was in trouble.

Bathed in sweat, he was lurching about on his hospital bed, wracked with waves of nausea and intermittently vomiting up pints of partially-digested blood from what seemed to be an inexhaustible supply. The bloody vomit covered Mr. Colson, his bedclothes and most of the room-including his panicked nurse, whose page had summoned me to the scene. I stood transfixed, alternately trying to gather my wits and dodge the brick-red plumes which spewed from Mr. Colson. What should I do?

It was the evening of July 1, 1994, and my first day of surgical residency was drawing to a close. My first night on call was just beginning....

In the United States--and most industrialized nations--medical school graduates must comp

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