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*Roxborough Memorial Hospital*

# *The Intern – Taking the First Steps – Jamie Zwanch, DO*

Written by Justin Guthrie, OMS-III

I first started thinking about becoming a surgeon when I was in grade school. It seems fairytale-ish, but it is the truth. For many years I worked towards my goal of becoming a physician and now I have begun my graduate medical training in Surgery in Dr Sesso's General Surgery Residency program. The path to where I am today was long and arduous but I have learned a great deal along the way.

Medical school attempts to expose you to all the different residencies and specialties in medicine, but as I look back on my third and fourth years of school, there is no one event that made me positive a career in surgery was for me. There was not a specific case or a certain night on call. I just looked at my own attitudes when I was on rotation for that specialty. Then based upon those, I chose the specialty I felt most comfortable with. I loved my nephrology rotation. I seriously considered doing an internal medicine residency and going for nephrology. Besides surgery, it was one of my favorite rotations. I did the rotation at Frankford Hospital with Dr. Levin and his group. Nephrology is a great rotation – one that I would consider high yield. You touch upon nearly every organ system and deal with the sickest of patients. You will definitely learn a lot. One piece of advice I have for students in their third and fourth year would be to branch out to programs outside of the Philadelphia area. Medicine is not the same everywhere. It is important to go out and see how it is practiced in different cities and different areas of the country.

As the months past and I got closer to making my decision, the more seriously I considered doing internal medicine. My decision was purely based on lifestyle. The residency training for internal medicine is quite different from that for surgery; the hours and the years are both longer to become a surgeon. I was married, and I did not know how conducive a surgical residency would be for a future father. Looking back at that period of my life, it was a really difficult time, but by far the factor that finally swayed my decision was simple – I enjoyed surgery the best and that is why I chose it for my career.

Internship is difficult. It is your first transition to true responsibilities for patients. You cannot be prepared for how busy you are going to be, you just have to experience it for yourself. There are bad and good call nights – there are great days when you feel like you are making a difference and other days where you feel like a cog in the wheel. Nothing prepares you for having your name on the order sheet. I have written orders as a student but it is not the same – there was

always someone else looking over your shoulder. The first night on call – I thought really hard, “Does this patient really need a BMP in the morning?” very aware that my name was going to be on this order. I would like to think I was ready for it, but writing orders as the person in charge is a position and experience that no amount of reading and shadowing can prepare you for; it must be experienced firsthand. The most difficult part about being an intern is how frequently you lose track of time, and how many family activities you miss-it is just part of the territory. It is a case of putting in your time now so you can have a great life later on.

I recently became a father and started my internship – two incredibly monumental life experiences. Balancing a personal life and professional career can be trying at times, and I do not sleep as much as I should. To be honest, having kids really does change you, even after going through Pediatrics and OB/GYN I was not prepared. Every day, before I leave, and the first thing I do when I come home is to tell my son how much I love him. It is difficult, but I have a great, supportive wife and we are getting through this intern year together.

The tough cases, the recent cases are the patients that I remember most over the course of this intern year. There was one patient a couple months back – a 24 year old with mesenteric ischemia. I am going to remember him for a while because the surgical team was not sure of what was going on. His diagnosis hit us out of the blue. Until we got the CT back, we were thinking it was gallbladder. The CT scan instead showed thickening of the terminal ileum. We took care of him but it was a difficult diagnosis to make. This is one patient I will never forget.

Medical students also may have a few moments where they can stand out for good reasons and make a real difference for a patient without someone looking over their shoulder. The most vivid memory I have as a student was a case of acromegaly that I diagnosed. The residents were chasing blood sugars on this patient that we had just admitted. We walked into the room and it was textbook acromegaly. I turned to the residents and said, “This guy has acromegaly”. They insisted he did not but I retorted, “Just look at him”. Turned out in the end he did have it. As a third year medical student, I diagnosed this disease by just looking at the patient. It is one of those things that just makes you feel good and gives you confidence that you made the correct career choice.

As you begin to take on more patient care respon-

sibilities, you notice which patients are going to make your day and which ones are going to make you wish you did not get out of bed. Patients who do not care, patients who do not participate in their own well-being are the most difficult to deal with. You see it a thousand times; the same patients coming back into the hospital time and time again and no matter what you do, they will be back. You just get tired of seeing them. By far, the most rewarding patients are those with critical illnesses, I enjoy the challenge of saving a critical patient. In addition, the critical patients are monitored more closely, and you can get instant feedback on whether or not you made the right call. Patients and their families who appreciate what you are doing can also make you enjoy being a physician. It is nice to know that you are doing something for someone who feels touched by your actions. I have been in situations where patients and their families brought in chocolate and gifts. That really makes you feel special.

As an intern, it is your responsibility to teach the medical students and I try to do my best. I try not to put them on the spot. When I was a student I hated being put in that position so I try to avoid doing the same to them. My goal is to make the students feel relaxed and comfortable and to make the day interactive. I try not to force feed students facts, as it seems to make them less receptive...and interns do not always have the answer, as I am ready to admit when I do not know stuff. I remind them that's why there is always someone above you to help- a good third or fourth year medical student always makes the effort, and attempts to display basic knowledge. You need to know some pathology, microbiology and physiology. If you do get into higher level thinking, that is phenomenal. However, I am not looking for you to know everything. Just pick up on the basics and I will be happy, and so will your attendings. If you show that you are not interested, people will be less willing to work with you, and remember to always go into every rotation with an open mind.

After internship and residency, another thing I am looking forward to is that paycheck. When you get that first loan repayment bill - be ready. Four years of medical school adds up fast. When you see that number, the only thing you can do is laugh. Paying off your education is like paying the mortgage for a home that does not physically exist. What I am really looking forward to in the future is not having to cut corners financially with my wife anymore. That salary will provide a sense of security. It will be nice not having to worry about the little things. The other big reward for completing residency will be the responsibilities and freedom of being the attending physician. As a resident or intern, you may not always agree with the care plan. I am looking forward to

being "The Guy."

If you are a student in your third and fourth year, it is never too early to be thinking about what you want to do with the rest of your life. Applying for residency is a complicated process. When you are applying, make sure that you know about the programs to which you are applying. You do not want to walk into a program on the day of your interview and not know anything about the program. It makes you look bad and makes you look unprepared. It is good to have some thoughtful questions on the day of the interview. The questions are indicative that you care about the program - not just anything that you can look up on the website. I know that it is not possible to get to rotate on every program that you are interested in, but for the ones that are your top choices, make sure that they at least know your face before the day of the interview. It makes them more comfortable with you. You in turn will know your way around the hospital and be more comfortable in the interview. In your interview, be honest. Going in and flat out lying to people is never a good idea. Be judicious about the information you provide and indicate your interest.

Obviously if you are interested in surgery or other very competitive residencies, you want to get yourself out there so the residents and most importantly the program director knows you. The upper level residents typically have a lot of input so make sure they know you. You want to come across as a hard worker, a person with whom they want to work. Despite your brilliance, if you come across as a jerk no one will want to work with you, and they are not going to let you into the program. Mistakes are going to happen, you are not going to know the answers to every question, but you should show some progression. You must show that you can learn from mistakes.

I know it is trite to say but - try not to get overwhelmed by the process. Do not always look too far ahead. Take some time for yourself, whether its 5 or 10 minutes a day or you will get burned out. If you want to become a surgeon, be sure you know the road is really long. But if you love surgery, no matter how long the road is you will know you made the right choice.

