

Pleas and praises from a former premed

The indignities of premed stand in stark contrast to the warm welcome extended by the School of Medicine.

Gavin Tansley

Every year, as the summer comes to a close, the UBC Life Sciences Centre buzzes to life in a frenzy of excitement. The same halls that were only periodically traversed in the months prior are filled to capacity with over 250 new medical students scrambling to find their places in lines, their names on lists, and the confidence they swore they had only minutes before they walked through those large glass doors. They are told to relax, given warm smiles from the faculty, and they try awkwardly to introduce themselves to anyone who will accept their outstretched hand. Recently I had the privilege of being one of these new students, and it is with enthusiasm and gratitude that I offer my reflections.

An earlier “first day of school” experience wasn’t very positive. I’ll never forget sitting in Chemistry 121 with 250 other students. The professor surveyed the class for their interest in medical school and nearly everyone put up a hand. I think some people might have excitedly raised two. He concluded his study with the demoralizing comment that 90% of us should come up with a different profession and continued with his lecture. That *one* statement was all it took to change my perception of premedical education. I realized then that I wasn’t a student; I wasn’t even a human being. I was a premed. I was an unwilling member of the most stigmatized population on campus, where peers were

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competitors and all others were critics. Finding exciting volunteer opportunities became a problem because no one could believe premedical students could ever be interested in anything besides resume-building. I felt begrudged by some professors because, apparently, a “lack of interest in curiosity-based research” is synonymous with “impure motivations” in many academic circles. Relationships with similarly motivated colleagues were complicated by the analytic, competitive undertones that existed in all medical school-related conversations. And, perhaps worst of all, I grew embarrassed of my career choice. I even stopped mentioning my medical interests to anyone but my closest friends.

I realize that everyone’s premedical experience would be different, but given mine I hope it isn’t difficult to imagine the intensity of elation I felt when I stood on my front steps and, with trembling hands, opened what turned out to be my acceptance letter. I had no understanding of what I was walking into, but I was well aware of the anguish I was leaving behind.

Sitting and waiting for my inaugural medical school lectures to start, I found myself thinking about that chemistry class from years prior. I expected to walk out of the lecture theatre feeling as uninspired as I had then, but that was the first mistake of my medical career. Speaker after speaker nonchalantly extinguished all of my negative feelings about post-secondary education. We were taught lessons that will be with us through medical school and beyond as we were shown, for the first time, the quality of health care professionals in this province. I sat awestruck as I listened

to the most educated and talented people I had ever met talk to us with sincere respect. We were told to collaborate instead of compete, we were told that the professors actually cared about our success, and we were unified, not as students, but as members of the BC health care community. At the end of the day I felt like I had taken my first breaths of fresh air.

I felt humbled that every person I met that week, physicians and students alike, I could call my colleague. The generosity and the warmth with which we were welcomed into this community spoke volumes to its quality. A community that supports its veterans, applauds its students, and still aims to improve itself is a community that I can see myself excited to learn from and work in for years to come.

Clearly, this is a strange narrative to submit to a scholarly journal, but I believe untrained eyes have a unique ability to uncover things that have been submerged in academic discourse. Although I still can’t see a heartbeat in a sonogram or a pleural effusion in a radiograph, I *can* see things of even greater importance.

First, I can see that the admissions process works. The individuals that fill the classes are, without exception, intelligent, motivated, and truly committed to their career choice. The only thing separating the students of today from the amazing doctors of tomorrow is mentorship. We all know that high-quality mentorship is taxing to provide, but it is equally important for our mentors to know that efforts to obtain teaching excellence will never go unnoticed or unappreciated. We will praise it today, and our patients will praise it tomorrow. It is not to say that we won’t make mistakes, howev-

er, because we will. But having teachers who guide us through our mistakes and are there to help celebrate our successes will ensure that four years from now our love of medicine will have only grown. Nearly everyone in the health care profession shares a common love of challenge, and this particular challenge is our gift to our mentors. Complementary to a student's lack of knowledge is a childlike excitement. Please continue to help us nurture that excitement because, from what I have experienced, it only takes one statement to extinguish it.

Second, I can see that countless individuals have invested vast amounts of effort into making this class feel welcome and comfortable. The same students who were nervously walking the halls at the end of August are now armed with the self-esteem that comes only with the feeling of belonging. For that, we all thank you.

And finally, I can see a medical community truly worthy of congratulations. Every day I am proud to step confidently through those large glass doors as an emerging BC health care professional. I am as proud as every member of the health care sector should be for helping to create an incredible community. You are all responsible for constructing the environment conducive to the production of phenomenal doctors and, on behalf of the UBC MD class of 2012, I thank you for it.

As a final note: To the generous physician who donated over 100 new stethoscopes to the class of 2012, a very sincere thank you. We are anxious to find ourselves in a position to perpetuate your act of kindness.

BCMA AGM: 13 June 2009

The BCMA's 2009 Annual General Meeting and Convention will be held in Vancouver on Saturday, 13 June 2009, at the Sheraton Vancouver Wall Centre Hotel. Please contact Ms Lorie Janzen with any related questions at ljanzen@bcma.bc.ca or go to the BCMA web site at www.bcma.org for updates.

Children's product safety

Injuries from the use of consumer products are common, frequently serious, and sometimes fatal, and there appears to be a disconnection between product safety realities and consumer expectations.

Most Canadians believe that if a product is available for sale on the market, it is safe or has been tested for safety. This is not necessarily the case in Canada, particularly for children's products. Under the current Hazardous Product Act there are a variety of consumer products, including many children's products, which do not have any standards or regulations. The result is an increasing risk of product-related injuries to children and youth due to age, cognitive abilities, and developmental stage.

There is a need to renew and modernize Canadian federal product safety legislation. To address this growing need, Safe Kids Canada's national public awareness campaign, Safe Kids Week, held 25–31 May 2009, will focus on home product safety. Find out how to show your support for the renewal of consumer product safety legislation in Canada by visiting www.safekidscanada.ca and clicking on the Safe Kids Week link, or call 888 SAFE-TIP.

Verchere joins BCMJ Board



Dr Cindy Verchere

The BCMJ Editorial Board is pleased to welcome Dr Cindy Verchere as its newest member. Dr Verchere is a pediatric plastic surgeon at BC Children's Hospital. She is a 1988 graduate of UBC medical school and was a rotating intern at Dalhousie. Her residency in plastic surgery in Vancouver was followed by a fellowship in pediatric plastic surgery at the Hospital for Sick Children in Toronto. She has been in practice at BCCH since early 1996 and counts among her professional interests care of cleft lip and palate, congenital hand surgery, burn care and reconstruction, brachial plexus injury management, ear reconstruction, and the general birthmarks, lumps, and bumps of childhood.

She is the mother of three boys aged 7 to 11 and happily married to Professor Bruce Verchere, a scientist involved in diabetes research at UBC. She loves gardening, sewing, building things, and probably reads too many books. She has also been known to perform on stilts several times a year.

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