

**MICROSCOPES, WHITE COATS, AND STETHOSCOPES: LANDMARKS ON THE
ROAD TO PHYSICIANHOOD**

By

MARJORIE S. SIRRIDGE, M.D.
Professor, Medicine and Medical Humanities
University of Missouri-Kansas City School of Medicine

WHITE COAT CEREMONY
THE UNIVERSITY OF KANSAS SCHOOL OF MEDICINE

AUGUST 5, 2005

WHITE COAT CEREMONY AT KANSAS
UNIVERSITY

AUGUST 5, 2005

When Dean Atkinson asked me to address you today at this important initiating ceremony I felt very honored for many reasons. One reason is a very personal one as it allowed me to return to my earliest memories of my entry into this School of Medicine. Another is because I am a firm believer that our lives are greatly enhanced by ceremonial experiences such as this one. A third reason is that it gives me the opportunity to share with you some of my satisfactions and hopefully some wisdom from my sixty-one years of physicianhood.

When I received my acceptance for the KU School of Medicine I was informed that I would have to have my own microscope. Funds were limited and the cost of a new microscope seemed astronomical. Fortunately I was able to purchase a second hand one from one of the doctors in my hometown for \$56.00. It was a monocular scope with no mechanical stage and only a mirror for focusing light--one that had already had several years of experience in medical school. After sending it to Kansas City to be cleaned and inspected I felt ready to carry it to school on the first day of classes, assuming it would identify me as a medical

student. I still have the microscope in the same case it came in and it has remained with me since that day. Microscopes were the Landmarks that identified us as medical students as we carried them regularly up the hill in Lawrence where we spent the first one and one-half years of our basic science education. We used them initially in Histology and I managed well without a mechanical stage for a time, carrying the microscope back and forth regularly so I could study my box of slides at home. Later when we needed to do blood counts in Clinical Pathology I longed for a mechanical stage which, unfortunately, was not available for my scope model. My father was an engineer and he made one for me and I have brought the scope with its homemade stage with me today. It was my No. 1 Landmark and also a tribute to my father's ingenuity in helping to make my use of the scope more efficient.

The scope went with me to New Orleans, Louisiana, where I served my internship. As interns we did our own Blood Counts and Urinalyses so needed to have our own scopes. I still used it occasionally during my Residency years and it graced my first office. I later added a more sophisticated scope but never felt I could give up my old friend. A picture of it appeared in an article I wrote about the History of Hematology. Its next owner will be my son, who is also a Hematologist and I hope it will stay with him until there is another responsible owner.

I tell you this story to illustrate how important it is to have landmarks that mark our experiences. They allow us to think about and remember what is meant by the various new experiences which we have as we learn to become physicians. A microscope introduced me to a life of science and, in retrospect, I believe it introduced me to an understanding that as a physician I would need many kinds of instruments to learn about disease and health. I have often wondered whether or not it influenced me in my choice of Hematology as a specialty. That choice was the right one for me even though it occurred more by happenstance than by serious consideration and planning. The field has provided me the opportunity to interact with patients, many of whom who have very serious diseases which influence their lives in diverse ways; but also the field has provided an ever expanding challenge to a scientific understanding of the "hows" and "whys" of the blood and the circulatory system. Many of the so-called facts which I learned during my training and practice now have been scientifically explained or in some instances have been found to be untrue--a common pattern in science.

The White Coat, as a Landmark, comes early for you though it came much later for me and my classmates when we moved on from Lawrence to Kansas City for our Clinical Years. We did have to procure some white gowns to wear in the Anatomy laboratory where we did our

dissection. I must confess that they were initially white and not very attractive and that they became less and less white as the year wore on. Needless to say we discarded them at the end of the year. I mention this because I hope you will save your first White Coats, even if they show wear. They represent your designation as a Student Doctor who has the privilege of interacting with patients, their families and hospital personal. And with this privilege comes a tremendous responsibility of behaving in ways that are deemed appropriate for those of us who seek or have been awarded the degree of Doctor of Medicine.

There has been a great deal of concern in recent years about just what the responsibility of a physician is, particularly as many people have become critical of the behavior of physicians. The meaning of the word professionalism has been widely debated and in a recent article in the journal, The Pharos, Dr. Charles Bryan has raised the question of whether professionalism for doctors is different. He suggests that physicians set uncommonly high standards for themselves, honor an oath, and acknowledge the moral obligations that flow from power imbalances between physicians and their patients. He further suggests that there are two levels of professionalism--Basic Professionalism which can be defined as "doing the right thing well" and a Higher Professionalism which transcends self-interest when a

physician renders service that is not in the his own best interest. Your White Coat sets you apart as a person who is willing to accept both levels of responsibility in your behavior. Honor it and the Profession of Medicine that it represents

The last Landmark that I would like to include is the stethoscope. When I was a student only physicians were seen with their stethoscopes, usually in their White Coat pockets when they were not being used. Now many health care providers also use stethoscopes and frequently wear them slung around their necks. We were warned about this practice as students and told that it did not look professional. I took that warning very seriously and have never done so. Maybe as a woman I felt I had to work especially hard at looking professional. I do not have my first stethoscope, which was not a very efficient instrument and was used enough to make it ready for the trash. I have used several more models and found the last one to be very satisfactory. I have brought it with me today along with the last white coat I wore. I know many physicians who feel very attached to their stethoscopes and have had them mounted in frames or displayed in other ways. I read an article recently, also in The Pharos, in which the author said that he felt stripped when he stopped wearing his stethoscope. He said it was his identity, status symbol, shield, strength and badge of authority. For him the drama

of that final moment of separation was matched only by the moment the instrument was worn for the first time. He displayed his stethoscope draped around the neck of a statue of Hippocrates in his office. My hope for you is that the moment you don your Landmark White Coat today it will produce the magical transformation which this physician describes and that you will always remember the responsibility not only for Basic but also for Higher Professionalism which is carries with it. Bon voyage on your Path to Physicianhood.