# A Matter of the Heart



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I followed my attending physician down the hall. Our shoes clicked sharply against the white tile. The space ahead opened into a crosswalk bridging the hospital towers over the street below. Light streamed in through the large glass panels, painting the ground yellow. White coats littered the corridor, and I glanced beyond them at the cars passing underneath. They felt distant and small.

Inside the room, Mr. Lucas sat on the bed folding his brother's clothes. Several suitcases lay open in the corner. Behind him, the curtains glowed red, pulled tight to keep out the fading sun. Pink balloons floated limply above the bed. A bouquet lay on the desk to his right. Mr. Lucas wasn't my patient, but I knew him well. When his older brother had first come to the clinic with progressive chest pain, Mr. Lucas accompanied him and brought his papers in a large folder. When he'd returned for preop screening, Mr. Lucas took notes and double-checked his brother's medications. On the day of the operation, it was Mr. Lucas who camped out in the waiting room with blankets and a pile of books, ready for the surgeon's periodic updates. It was Mr. Lucas who had told me about my patient's plans for the future. It was Mr. Lucas who was there in the days following the procedure, hunched over the bed until the end of visitation hours,

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watching his brother's tubes rise and fall. And it was Mr. Lucas who was here now—48 years old, with thinning gray hair and tired eyes—gathering his brother's things on his scheduled discharge day, hours after he'd died.

My attending physician told Mr. Lucas how his brother had collapsed while walking the floor, how there'd been alarms, crash carts, and people yelling for paddles as the monitor stopped dancing, and how they wouldn't know anything more definitive until after the autopsy. Mr. Lucas sat on the bed quietly, his hands folded in his lap, eyes searching the ground for something I couldn't see. That morning, there had been life and an expectation of more. But that was gone now, and only words remained, like thin shells left by a receding tide. The room was quiet. There were no deep, heaving sobs, no quivering shoulders or staccato cries. We stayed in the silence carefully, like three people standing over dying embers after a senseless fire, unsure of the moment and afraid.

I spent the rest of the afternoon in the crosswalk watching the street move. The sun was setting, cutting sharp purple streaks into the sky. Staring down past the glass, I thought about what Mr. Lucas had taught me, that medicine's "routine" tests and procedures are never routine for my patients or their families, who carry measures of anxiety and hope into each encounter; that loved ones often need as much attention and care as the patients do. Standing there, I sensed that there would be more like Mr. Lucas and his brother, people whose stories would push me beyond the safety of clinical knowledge and technical skill into the space between medicine's great successes and vast limitations. The possibility felt like the edge of a profoundly powerful secret. My patients would never *just* be diabetics, cancer patients, or asthmatics—they'd be spouses, parents, siblings, and friends. Those were the roles that mattered, the ones they had played before becoming my patients and the ones that would last long after.

The realization seemed so obvious that part of me wanted to laugh. But it was also deeply convicting. As a doctor, I would have the medications and technology, the procedural skill and expert opinion. I would have, for all practical purposes, much of the power. But my

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patients and their families were the ones who would always have the meaningful stories and goals—the linchpins holding the most challenging, frustrating, and fulfilling moments of my work in balance. The mother worried sick about her child's ear infection. The son unsure of how to choose death for the critically ill woman who'd given him life. The drug-seeker and the malingerer. The businessman concerned about a neck growth; the injured athlete who fears his career is over. The woman facing surgery for her genetic predisposition to breast cancer. The concerned families and friends. And the man who collapses on the floor after crucial, life-prolonging surgery, leaving behind a brother who loved him quietly but fiercely. In them, I would find what mattered.

Standing there with the sun against my back, I understood, deeply, for the first time since I donned my white coat and swore that sacred oath as a hopeful, wide-eyed, first-year medical student that the practice of medicine needed to be about more than correct diagnoses and management. At best, it needed to be a long lesson in how to journey with people through crisis and into the joy and grief waiting beyond it. It needed to exercise my heart and not just my brain. It also needed a vision large enough to cover seasons of success and error and modest enough to find its own limitations between certainty and doubt. And perhaps above all, it needed to inspire my own evolving story, to carry me across its long arc and change me, so that as I tried to affirm the highest values in my patients' lives, they would also affirm mine. The thought filled me at once with hope, fear, and an abiding sense of humility. I exhaled and felt a breath fall through my chest.

Below, the light flashed red, and the cars slowed to a stop. Their shapes seemed closer now, blurred softly against the fading light.