2019 Hope Babette Tang Humanism in Healthcare Essay Contest
Second Place Medical Student Essay
Neha Verma, MD

"Ms. Scott? Could you tell me what season it is?" I asked, gently placing my hand on her forehead and shaking her gently. She appeared confused, and the neighbor decided to bring her to the hospital. Upon admission, Ms. Scott was found to have a urinary tract infection. She was treated with antibiotics, but now five days later, she remained—more often than not—lost, restless, and scared.

As I walked out of Ms. Scott’s room, I encountered the causes of delirium in my head for what felt like the hundredth time, trying to visualize the PowerPoint slide I had so diligently memorized during my first year of medical school. Ms. Scott’s electrolytes were within normal limits. Her medication list didn’t seem to have any potential culprits. Her urinary tract infection had been treated, and she had no other signs of infection. Why wasn’t she getting any better?

On rounds later that morning, our team—attending, resident, nurse, pharmacist, social worker, and me—gathered outside of Ms. Scott’s room, and I launched into my presentation. As I attempted to outline a plan for the day, I felt my voice becoming more and more unsteady.

“I guess we could do brain imaging to rule out a stroke, although I don’t know if that really makes sense since she doesn’t have any focal neurologist deficits, but maybe as a last resort . . . .” I mumbled before trailing off.

The attending nodded slowly, looking to the rest of the team for other ideas.

“I was just thinking,” the nurse chimed in. “It sounds like Ms. Scott is fairly social when she’s at home. But she’s been all alone in that room ever since she got here. I wonder if that could be playing a role, causing her to remain delirious even after treatment of her urinary tract infection.”

“Yes, I’ve been calling her neighbor with updates, but I think it’s just a tough time of year for people to come visit—with the holidays coming up, they’re so busy with

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The Arnold P. Gold Foundation holds an annual essay contest to encourage medical and nursing students to reflect on their experiences and engage in narrative writing. The contest began in 1999 focused on medical students and expanded to include nursing students in 2018. Students are asked to respond to a specific prompt in a 1,000-word essay.

For the 2019 contest, students were asked to reflect on the following quote and share an experience in which they or their health care team engaged compassionately and respectfully with a patient to help them feel accepted and seen.

I long, as does every human being, to be at home wherever I find myself. —Maya Angelou

More than 300 essays were submitted. A distinguished panel of judges, ranging from esteemed medical professionals to notable authors, reviewed the submissions. Three winning essays from medical students and three winning essays from nursing students were selected, along with 10 honorable mentions. The winning essays will be published in consecutive issues of Academic Medicine and the Journal of Professional Nursing in the fall/winter of 2019.

The contest is named for Hope Babette Tang-Goodwin, MD, who was an assistant professor of pediatrics. Her approach to medicine combined a boundless enthusiasm for her work, intellectual rigor, and deep compassion for her patients. She was an exemplar of humanism in medicine.

The Arnold P. Gold Foundation infuses the human connection into health care. The nonprofit organization engages schools, health systems, companies, and individual clinicians in the joy and meaning of humanistic health care, so that they have the strength and knowledge to ensure that patients and families are partners in collaborative, compassionate, and scientifically excellent care.
their own families,” the attending said. “I agree that her being all alone certainly isn’t helping things, but I’m not sure if there’s too much we can do about it.”

“Well . . .” the nurse continued. “What if we rolled her bedside chair out to the nurses’ station?”

The team looked on, a bit puzzled, as she explained.

“We could have her sit there for a few hours each day. The nurses could talk with her, and she would be right near a window, getting some sunlight. As of right now, it’s not a very busy week on the floor. I can check with the other nurses and make sure it’s okay with them, but I think it should be fine.”

The attending thought for a moment, shrugged, and then smiled. “Sure. Let’s give it a try.”

After rounds, Ms. Scott’s bedside chair was rolled out of her room and over to the nurses station, and it stayed there throughout the afternoon. It was a bit of a strange sight—a tiny eighty-nine-year-old woman in a giant chair, sitting at the nurses’ station with her hands folded across her lap. But, the nurses tried to make it feel as normal as possible. They found time to sit with her despite their long to-do lists. Given her intermittent confusion, it wasn’t always easy to carry on a conversation. However, they remained patient and calm, telling her jokes and stories and simply listening to what she had to say.

By the end of the day, Ms. Scott’s delirium had improved. She was conversing more easily, smiling and laughing with only slight lapses in attention. We had made no additional medical interventions, and yet, it seemed that she was finally getting better.

“Good morning, Ms. Scott! I’m sorry, but I have to ask you those silly questions again,” I said, sitting down beside her hospital bed. She had now spent the past two afternoons at the nurses’ station and would likely be ready for discharge today or tomorrow.

“Ask away, honey,” she answered, sitting up a bit straighter.

“Can you tell me what season it is?”

“It’s winter,” she replied, calm and confident.

I nodded. “And can you tell me where you are right now?”

Ms. Scott paused. She looked around the hospital room, her eyes lingering on the cracked door leading out to the hallway. “Well, my dear, I suppose I’m at the hospital. But wouldn’t you know—it’s begun to feel like a second home.”

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