

The University of Michigan Department of Urology

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What's New December 23, 2016

Dr. J. Quentin Clemens

Urology Department Faculty and Staff

8 Items, 10 Minutes

Happy Holidays, everyone! Today's edition of What's New comes from Dr. J Quentin Clemens, who shares some personal updates as well as his thoughts on a wide range of other topics. I hope everyone enjoys it and has a safe and happy Holiday season!

-Eric Anderson

Dr. J. Quentin Clemens, Reflections on Middle Age

In Urology we now have 29 full-time clinical faculty. I am older than all but six, which places me in the top quartile for age. According to Wikipedia, 'middle age' starts around the age of 40-45, and ends at 60-65. Either way, at age 49 I am solidly within the middle age demographic. My kids have all been through puberty, my son wears the same size shoes as me, and my wife is having hot flashes (but she is still super sexy). So I suppose this all means that some reflection is in order. If this seems disjointed, it's because apparently I'm getting old.

I remember life before cable TV. My household now has numerous TVs and DVRs, with hundreds of channels, all kinds of on-demand entertainment and recorded shows. I grew up with one TV, but that one TV was important! Channel 3 was NBC, 6 was ABC, 10 was CBS, 12 was PBS, 17 was the local channel that showed Phillies games, 29 showed Flyers games, and 48 showed Sixers games. I can remember when one of my high school friends got a 12-foot satellite dish, which opened the world up to MTV, HBO, ESPN etc.

I remember life before computers. In high school I did all my homework in free-hand. I lived with a perpetual ink stain on the lateral part of my left hand, from dragging it across the paper. My penmanship was terrible, like my typing is now. I eventually paid people to type my college homework (on a typewriter) and by my junior year there was a computer center with word processors, so I became a bit more self-sufficient. When I was in college, laptops did not exist.

I remember life before the internet. I delivered the local newspaper in high school, and over 80% of households in my area had subscriptions. In my house, we had subscriptions to the local newspaper, the Philadelphia Inquirer (on Sundays), Newsweek, the Wall Street Journal, Sports Illustrated, and the Christian Science Monitor. We had a set of encyclopedias, and if we had an important question that was not answered by them, we would call someone who we thought could provide the answer. In med school, lectures were not posted to the internet, because the internet did not exist. Many of my classmates attended the lectures, and others paid people to take notes and/or record the lecture for them to review later.

I remember life before cell phones. When I took home call during residency, I would go for a run along Lake Michigan in the summers. I had a route which ended at a pay phone, so I could return any pages after completing half my run. I memorized the code for my AT&T calling card - it was 508 045 3198 4340. Don't worry - that number has been discontinued.

I remember life before the 80-hour workweek. I was on call every other night for about a third of my rotations during my PGY-1 and PGY-2 years. I distinctly recall not seeing the sun at all for one 3-week period. One of the other residents fell asleep driving home and ran into some parked cars. But some of the rotations were pretty easy and the nurses protected me - there were some times that I got more sleep when I was on call than when I was at home. I think the work hour restrictions have prevented the overt fatigue-related problems that were very common. But are they reducing the 'quality' of surgical training? Is 80 hours too restrictive? The work hour restrictions have coincided with a reduction in open surgery (due to robot domination), and the system seems to require residents to do more during the 80 hours they are working each week.

I remember life before electronic medical records. During medical school (in 1992), I manually went through the paper charts of all of Pat Walsh's radical prostatectomy patients. As you might expect, his charts were meticulously organized. My job was to find the drawing of the prostate exam for each patient, and to assign a clinical stage based on the 'new' TNM staging system for prostate cancer. For this, I received a signed version of Campbells, 6th edition. During residency, I would walk through the stacks of urology office charts to find info about patients who were in the ER or who had called with a clinical question. Many of these charts were in complete disarray, with notes that were difficult to read. As a new faculty member in 2000 and beyond, I frequently found that my desk

was covered with hand-written slips from the nurses, with patient-care questions. Usually, the patient chart was also provided. Our "system" was to jot down a reply and then the small slips of paper were added to the paper chart after the patient had been notified. I remember watching an 80-year-old Jack Grayhack struggle with the new EMR when it finally was adopted at Northwestern - he tried his best but it was painful to watch him type with one finger of each hand while squinting at the computer monitor.

I remember people who worked harder and longer, or who were more "dedicated" than me. I know a urologist who had one child, because having more would have been too disruptive to his career (he volunteered this during conversation). I know other urologists who only require 3 hours of sleep each night, and who consequently have written more papers than I would in three lifetimes. But I also know many people who were not around enough when their kids were growing up. To me, 'work-life' balance means that everyone is just a little bit annoyed with me. At any rate, I am only aware of one 'important' family activity that I have missed due to work. My youngest daughter Evelyn recently won the sixth grade spelling bee at her school (not a 'big' event in my opinion, plus it was held during regular school hours and no parents attended). She then went to the regional spelling bee for all of the Washtenaw County school districts (Dexter, Ann Arbor, Saline, Lincoln, Chelsea, Whitmore Lake, Ypsilanti, Milan, Manchester), and she won that! I was out of the country at the time, but in my defense I had no idea that this event would occur. The words she spelled were 'graduate', 'bribery', 'warp', 'fatality', 'ultrasound', 'skewer', 'tributary', 'percussion', 'flourish', 'porous', and 'abrasive'. There is no national spelling bee for sixth grade, so she is done with spelling bees for this year. I have attached a photo of her after she won.



Summary. I guess the point is that during my (relatively brief) adult life there have been developments that have fundamentally altered our society and also how we practice medicine. There is no reason to expect anything different in the future. So we need to be receptive to change while simultaneously understanding and prioritizing the values and morals that we care about the most. Dr. Bloom has helped us to develop our Mission Statement. Within this, the Essential Transaction is stated as "*Kind and excellent patient-centered care thoroughly integrated with innovation & education at all levels.*" I particularly like the inclusion of the word 'kind' in this statement.