

The Cadaver as My First Teacher: A Reflection

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The first and only dead body I've ever seen was my mother's. I was 14 when she died of ovarian cancer, and for many years, I had nightmares about the night the doctor called my sister and me to come to the hospital, where she had died suddenly. Burned into my brain is the vision of walking down that hallway and turning the corner into her room to see her. A dead body.

Before this week, the week I started anatomy, I was afraid that those visions would be all I could think about during dissection of our cadaver. I was afraid I would be filled with emotion, cry, not be able to perform. But meeting my cadaver was a very different experience. The bodies were hard and cold. The faces covered. No wedding rings or favorite shirts to look at.

I'm not sure if I had talked myself up enough to compartmentalize the experiences or if it was these stark differences, but I felt nothing. I could recognize the special opportunity of receiving a human body. I felt respect and gratitude for the life that lay before me. But here was my assignment. And in the induced mania of learning every bone, muscle, innervation, and blood flow in the body, I didn't have time to over think it. Maybe that's the harsh first lesson I learned from my cadaver: Don't stop.

In the following three weeks, I've heard too many people to count offer the advice of efficiency. When panicked, we are instructed to "be efficient—it gets easier." We all made it to medical school listening to some utilitarian voice in our heads, and this advice is enticing. But does efficiency mean we cut the time to reflect? Process? Digest the gravity of what we're doing? How is it possible that in the last two weeks I haven't thought once about the night my mom died? For someone, somewhere, my cadaver's death rather, the death of the person who gave his life for my learning—caused the same pain that I experienced.

Working with the cadaver has been incredibly instructional, and I'm grateful for my ability to use my cadaver's body as a tool to learn. But every night, I can't stop myself from wondering if this was really the best way to start medical school.

I've recently thought about oncology as a specialty. I think my experiences could give me a deeper understanding of my patients' and their families' experiences. But if this week has taught me anything, it's that medicine doesn't give you the time to deeply reflect on your experiences. You are there to provide medical knowledge. You are there to be an expert and fight tooth and nail to provide the best care you can. And that is a beautiful and valiant endeavor. But does it fall flat of what drew us all to medicine? Does it fall flat of what medicine could be? I hope my cadaver has more lessons to share.

SGIM