It was done with a minimum of ceremony. Boxes filled with plastic, each bag encasing an all-too-bright white coat. Names yelled out, each of us awkwardly clinging to our new possession. It fit — or at least outwardly it did.

The coat didn’t appear outside of the confines of my closet much for the first year. Maybe an appearance or two to take a history and do a physical. The preceptor knew full well you knew little and, mercifully, were patient with you when you reported every slight skin discoloration or the patient’s entire family tree.

But the patients. They called me doctor. I’d gently correct them, as I had been taught to do. But shocked — couldn’t you tell how inept I am? Each fumble of my hands as I reach for my stethoscope betrays me; each lie I tell as I listen to your heart and pronounce it as “sounding fine” must be written on my face. Because the truth is — I don’t know that. I know what I’m to look and listen and feel for, but only if you stepped fully formed from the pages of the textbook. Why do you trust me? Please don’t trust me. I’m nothing like the person I’ll report to in just a moment, who somehow knows that that small area on your back is okay, and your heart sounds just fine and that you’re healthy.

This coat is a lie. But I still wear it.

Months passed, and we began the clinical year. The coat saw daily use now, smilingly reassuring people that, yes, the enveloped person is for real. Liar. I blunder left and right, asking questions, palpating, percussing. That time the harried resident told you to go “work up a fever” on the 14th floor. It was my first night on call — ever. The coat and I walked into the patient’s room with an air of confidence. Yes, she looked ill. Yes, she felt warm. But why was she even in the hospital? You didn’t even look at the chart. Idiot.

The coat should have lept off me and found someone more worthy.

Three months more. A “skin infection”, my preceptor called it. Huh. Got it while gardening, stuck herself with a rose thorn.
“Sporothrix infection.”

Was that my voice? A piece of trivia had floated to the surface, some vague association from hours of lecture.

We looked it up. It was a possibility. We changed her treatment.

“Good job. I wouldn’t have remembered that.”

Right. One trivial piece of information is all it was.

The coat smiled to itself.

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A few months later. Pediatrics, my first love. Time to see D____, a 15 month old child with multiple congenital problems. I introduced myself to the parents; ah, a questioning look. They’ve seen through my disguise, haven’t they?

“It’s okay, but you should be warned — he doesn’t really like doctors, he’s been through so much.”

A brave smile, some reassuring words. The coat comes off, hung on the door. You’re too powerful an association for a little kid. Sit on the floor, talk to the parents while he builds fanciful stories out of blocks. Play with him a little. Then try to listen to his chest.

I hear the delicate rise and fall of healthy lungs — and a muffled gasp from the parents. I guess they didn’t expect him to cooperate. Then again, I’m not sure I expected that either. But I’m having too much fun, sitting on the floor — so much fun that my hands forgot to shake while his parents watch me gently handle their child.

At the very end, he takes my hand as we go down the hall for a sticker — but we only get about six feet before he realizes and runs back to his parents. His parents, who are telling my preceptor that I must have worked some magic, because he hasn’t had an exam where he hasn’t cried in months.

I don’t have any magic, ma’am. I was just lucky. Magic are all these real health care providers.

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So I graduated. Now I was working in peds. I had gotten used to the idea of being a student, just in time to stop. The short coat wasn’t so bad, because it at least let those “in the know” see that you really didn’t know much. No license to do anything — except a license to mess up.

But now, somehow, the state seemed to think that I was qualified to practice medicine. How
could they? Sure, I graduated. And passed exams. But didn’t they know that I had been pretending? How could I wear this long coat now?

Two months in — K_____, a seven-year old with behavioural concerns. Not quite — her mother had the concerns. This child didn’t take too kindly to me. I was used to crying and struggling. I was not used to her grabbing a stool and attempting to charge me with it. Or throwing a heavy otoscope handle at me. (She missed both times, if you must know.)

My supervising physician didn’t really care for behavioural problems — and he wasn’t in today anyhow. We didn’t have any child psychiatrists or developmental/behavioural specialists in town, either. The other pediatricians knew even less about these things. I didn’t know what to do.

I ended up on the floor, holding K______ in a bear hug, telling her that I didn’t know why she was acting this way, but we’d find some way to help her. And somehow we did, after some time. A psychologist agreed to see her, and I hoped it would help, because I had no idea what other resources we had.

I don’t know if I had done the right thing — did I make things worse by holding her like that? I only could wish that I hadn’t.

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I didn’t see her much for the two years after that — an occasional sniffle or the like was all she came in for. I never mentioned that episode again as it was. Looking back, there were resources we found for her that came in useful for so many other kids. I guess there was some good to being attacked by her.

She was actually turning out to be a well-behaved, sweet child. A good thing, too — her mother had another baby, one who turned out to have an uncommon metabolic disorder. A frantic morning of trying to track down mom and baby had ensued after the call from the state labs. She came in, we changed the infant’s diet. I spent a good deal of time explaining the disorder in layperson’s terms. It felt good when I asked her, a month later, how the visit with the metabolic disease specialist had gone — “They didn’t tell me anything that you hadn’t already covered!”

K_____ came in once to her little sister’s well-child exam. This was a good two and a half years later — I was sure she had forgotten all about that day. The student I was precepting reported to me and we finished the visit up together. All fairly routine, thank goodness. As we walked out of the room into the hallway, K_____ pulled on my sleeve.

“Mister D?”

“Yes?”

Hesitantly at first, but then with more confidence, “I’m…I’m sorry about that day when I
threw something at you.”

A quick look at mom — her expression confirmed this was uncoached.

“It’s okay, sweetie. I’m just glad we could help you.”

Upstairs, in a closet, my white coat chuckled to itself. It knew all along.