

Three Essential Skills for a Doctor That I Learned From an After-School Job as a Youth

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The most unlikely of past experiences can shape who we are as physicians.

Somewhere out there, an old blue Toyota hatchback sports a faded bumper sticker that reads “No Matter Where You Go, There You Are,” and its carpet contains little bits of sand from the Jersey shore, remnants of long, carefree summer days. That car holds some of the best memories of my teenage years growing up in New Jersey. The wonder years tend to look better from the rear-view mirror of middle age, but some things we take from those youthful years shape who we are now, even as physicians.

For me, it was my first job. My older sister worked at the local Friendly’s restaurant and was able to get me a job there too. As it turns out, I was a terrible waitress (at first), so bad that I once received a 25-cent tip with a note suggesting I buy the newspaper and start looking for a different job. My skill set at the time did not match “waitress” at all. I would have done well in, say, a library reshelving books. I was (and still am) an introvert and had little experience talking with adults. The

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environment was closer to fast food than fine dining, so speedy delivery was preferred, but I was kind of slow as I struggled to juggle it all. Had I remembered to bring ketchup to table 10? Did table 12 need more coffee? Was it decaf or regular? It was overwhelming and humbling to be so terrible at something that did not seem like it should be so hard. I quickly realized I had a decision to make: I could figure it out, or I could quit. Driven by the dread of failure and the desire for spending money, I decided to figure it out, little by little.

Sticking with that job was probably one of the best decisions of my life. I didn’t realize I was learning several skills that would one day be an integral part of what makes me a good doctor:

Relational skills. Above all, I learned how to read people — how to assess body language, tone, and other nonverbal cues to pick up on what the guest was trying to tell me. I became adept at making angry people calmer and soothing an unhappy customer. I learned to see things from others’ points of view. For example, although I did not have a personal vendetta to ruin my customers’ day, they just might see it that way if I mixed up their orders. And I real-



ized some things can be fixed just by showing that you care.

Time management skills.

During my residency training I became loosely aware I was deploying the time management skills I had learned as a waitress. Where I used to think about getting the drinks to table two then checking to see if table five’s meal came out OK, now I was thinking about seeing the person with the sore throat in room two while the medical assistant prepped the patient for me in room five.

Communication skills. I also found I could make small talk easily with patients, which made them feel more comfortable, which in turn made the office visits easier.

How did a shy, reserved person like me become so at ease discussing medical concerns with young mothers, retirees, young professionals, or someone just released to a halfway house? I credit my years of talking with people from all walks of life who simply sat down at a table in my section to get a meal.

Family medicine really is about human interactions and helping people. And sometimes we can draw on the most unlikely of past experiences to do that. **FPM**



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