



# UTHealth

## Resident **Wellness** Newsletter

Adriana Dyurich, PhD

### From the Counselor's Desk

I am working on this newsletter as we, individually and collectively, try to make meaning of our experiences these past couple of years. Many are trying, most likely fruitlessly, to go “back to normal”. I am finding myself motivated and moved by what is new and different, by the surprises I have encountered, the strength I have witnessed and the joy I have created under very different circumstances. I have always understood life as a spiral, not a circle. We can never go back to the same place we once were. But we do circle back to revisit past challenges, lessons learned, and experiences lived, only to keep growing and expanding. I think it is precisely that movement that will help us restore a sense of normalcy, which will never mean “going back” to what it was.

It is with that intention - growth, movement, looking forward - that this newsletter was created. Dr. Courand, our Assistant Dean for Wellness, offers us a deep and moving reflection on this pandemic and the perspective that has

helped him make sense of it. Beyond sharing his experiences, Dr. Courand is inviting us to see the world a bit differently, to play with different colored glasses and maybe then find the hue that makes our lives more vivid.

Dr. Christine Moore, DO, PGY-6, bravely shares her grief, and how she was able to process it. Grief and loss have been ubiquitous and pervasive. Let’s not run from it but learn how to get through them.

And lastly, we share good news: the launch of our podcast entitled “Ripples: A Podcast from The Wellness Home”. The first one from the Long School of Medicine, dedicated to all of you. We created this podcast focusing on topics related to personal well-being and wellness practices with the idea that any positive change in ourselves can create ripples that extend far beyond what we imagine. Each podcast includes a “pebble” or well-being tool or perspective to put into practice in your life.

We hope you will listen in and enjoy, and that you will send us your comments and suggestions for topics that are important and relevant to your wellbeing.



## LISTEN

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## A Matter of Perspective

**Jon Courand, M.D., Assistant Dean for Wellbeing for Graduate Medical Education**

There comes a point in one's medical career when you have the luxury of looking back from the time you first started your residency training, across the years of practice to the present. I began my residency training in 1990 before competency-based education, work-hour regulations, monitoring for sleep deprivation or mental health concerns. I clearly remember sitting in the nursing station writing my notes in the paper chart at 6:30 pm on the day after my call night. I remember falling asleep writing those notes only to be gently awakened by one of the nurses at change of shift. We routinely reminded our fellow residents that "the longer you stay, the longer you stay". More than once a nurse brought me a soft drink or handful of candy to give me the energy boost to get my work done and leave for home.

Rounding on the inpatient wards or ICU was always stressful with the attending expecting that you were up to date on every aspect of the patient's clinical history, overnight events, and the most current exam findings. Labs arrived in paper format in a basket below the printer and looking at an imaging study required a visit to the radiology department to check out the daily films which you had up and ready to view on the x-ray light box. All information was expected to be presented from memory, never read from index cards. More than a few times, an attending would berate and belittle me for not having the most recent lab results, consultant recommendations or for not having read up on my patient's disease process the night before. Computers were bulky, slow and contained almost no valuable information.

(Article continued) I routinely saw unprofessional conduct by faculty attendings, overt harassment of female trainees and blatant discrimination of residents of color. I did not train at a time of COVID, but I did care for patients during a major Measles outbreak in Houston, a cluster of multi-drug resistant tuberculosis in Boston, and for many years the HIV epidemic. As a medical student I saw the first HIV patient admitted to a Dallas Area hospital while doctors and nurses in space suits went in to care for him. At that time almost everyone died from that disease, and as medical providers we lived in fear of needlesticks, contact with infected body fluids or god forbid needing a blood transfusion. Identification and effective treatment took many years. We did not know what we did not know. This is not a story however of “back in the day” or “we were tougher back then” or even “patients got so much better care then”. This is a story instead of Resilience and our Improving our Systems of Care.

For many of you, the past two years have been filled with excessive workload, great uncertainty, isolation, and fear. If that were not enough, at times the very people we were there to diagnose and care for seemed to be against us. Things we consider common sense and lifesaving like masks, vaccines, and social distancing was for many anathema. There is no doubt that many of you bear the scars of these last two years inside and out. Our counseling numbers have skyrocketed. But as we move closer to that two-year mark, I believe we are seeing the signs of the light at the end of this dark tunnel.

If I can draw any lessons then from my past years of residency and fellowship training, I can assure you that as each of you has reached down and found more strength, endurance, and professional courage than you would have thought possible, you have also been building up your intrinsic resilience and grit. I can promise you that these will serve you well during the many challenges that we all will face in the years ahead. There is always I believe a joy and satisfaction that comes with facing a very hard challenge and overcoming it. I hope you also might have learned that we all did this together! In fact, we could never have accomplished all we have done alone. Resilience is best a characteristic of teams rather than individuals, and we have truly needed to depend on every member of our team: nurses, respiratory therapists, case managers, social workers, pharmacists, dietary, environmental services, and the leadership that helped plot this course through the storm. I also have been heartened by the amazing compassion that I have seen given to all our patients, no matter their opinions.

Finally, while our systems of care are not perfect and we have a great deal of work left to do, I am encouraged by the changes that we have seen in the past 15 years. Significant improvements in hand hygiene, contact precautions, availability of PPE, procedural time outs and standard protocols for most operations. The EHR is not perfect, and it needs to continue to change and evolve, but it provides us a wealth of patient data at our fingertips unimaginable even 10 years ago.

(Article continued) We could never handle this level of acuity and complexity without the EHR and associated technology. Operating in the background are quality improvement and patient safety techniques. Never have healthcare providers been held to a higher standard of professional conduct free of harassment, discrimination, and demeaning treatment of learners. Never has access to mental health services been so easily available and worries about stigma lessening.

Are we where we need to be, of course not, but I am very hopeful in the direction forward. As we reach and pass this 2-year milestone of the COVID pandemic, I hope you each take a moment to show gratitude to those around you on this journey, and self-compassion for all you have been through. I will also invite you in 15 to 20 years to look back on this critical time in your medical career and see if my observations held any merit.



## Resident Spotlight

Christine Moore, DO, PGY-6,  
UTHSCSA Hematology and Medical Oncology

### **Here is a true story about the other Purple Heart.**

When I was a fourth-year medical school, I rotated at the NIH in the Pediatric Hematology/Oncology branch. Every November, they have a “memorial service” for their adolescent and young adult patients who have died in the last 12 months. It touched me to see prominent researchers being vulnerable and grieving the patients who were part of their studies. At the end of the ceremony, there was a ceramic vase lined by baskets containing hollow shapes filled with multicolored sand. The idea was for everyone to take a shape, empty the sand into the vase, and all the colors would blend together, honoring the people who were united through their struggles with Hematology and Oncology disorders.

I choose a heart filled with purple sand. Purple is my favorite color, it makes me feel regal. I did not empty the sand at the end of the ceremony in November 2015.

I wanted to hold on to those sentiments from the ceremony, that you could be a researcher and still care very deeply for the patients who would become numbers on a graph.

I carried that Purple Heart with me through the end of medical school, residency, and fellowship. It hung in my bedroom for me to look back on it as my medical career continued as a source of strength. At some point, I also realized that I wanted to empty its contents and blend with others united through their trials within Hematology and Oncology. I had seen enough cancer patients who had died throughout residency and fellowship, I had connected with some and grieved openly.

I waited for nearly 6 years. Until my mother died of advanced breast cancer after more than a year of Herculean effort. It was time to let go.

(Article continued) Early the next day, in the August morning humidity, I biked to the local cancer center where I was training to become a Hematology and Oncology fellow. I stopped in front of the “Wings of Hope” sculpture, a pair of hands holding a pair of wings with an inscription that read “wings of hope, wings of healing.” Some people with cancer are cured, some are not, all benefit from hope for peace and healing from suffering.

My mother had hoped for strength to endure and was now healed from pain in the finality of death.

With tears streaming down my face, I opened the Purple Heart and watched the sand flow at the base of the statue. She joined the brave souls honored six years ago and many others before and after.

I biked home and looked at the closet where the Purple Heart once hung. And I smiled.

## GME Resident Wellness Services

Residency and fellowship training is one of the most exciting times in life, but it can also present a variety of challenges to personal and professional well-being. Being a physician in training can be challenging. It is difficult to juggle working long work hours, caring for your patients, feeling the pressure to excel within your program, all while trying to maintain a balanced and fulfilling personal life. Stress, if not addressed adequately, can lead to an array of issues such as burnout that can interfere with caring for your patients, family and friends, and yourself.

We are here to be your safe haven with our services being completely confidential. Counseling records are maintained in files separate from the resident files and cannot be accessed by faculty, staff, administrators, or other residents without the individual's written permission. Additionally, there is no need to diagnose or bill your insurance. All individuals are treated with respect, regardless of age, color, ethnicity, gender, marital/parental status, national origin, race, religion, physical ability, sexual orientation, veteran status, or counseling concern.

Our resident wellness program strives to ensure that residents are both emotionally and academically successful. Our goal is to promote work-life balance and overall wellness by providing tools to reduce burnout, depression, relationship stress and other problems.

Through the GME Wellness Services you can take advantage of:

- Confidential and private counseling in person or via phone
- Wellness presentations and guidance on how to implement wellness curriculum in your program
- Neuro-psychological screening at no cost.

**Online self-screening for depression, burnout, anxiety, and suicidal ideation.**

**The screening is voluntary and completely anonymous.**

**Visit [www.uthealth.caresforyou.org](http://www.uthealth.caresforyou.org) to take the assessment.**

# GME Resident Wellness Services

Contact us if you are experiencing:

- The need to improve your overall emotional wellness
- Symptoms of depression, anxiety, other mental health concerns
- Burnout, imposter syndrome, career doubts, job stress
- Lack of work-life balance
- Love loss and other relationship problems
- Anger / Stress
- Thoughts of self-harm or suicidal ideation
- Substance abuse
- Sleep disturbance
- Perfectionism
- Adverse event (needle stick, traumatic patient outcome, illness in your family, etc.)
- Harassment by a partner or work colleague
- Conflicts with faculty, attendings, hospital staff
- Issues related to test taking, time management, and other academic challenges

To help you function at your very best, we can refer you for free to psychiatric services.

**We'll meet you where you are!**

**To schedule a counseling appointment or find out about our Wellness Services, please contact: [gmewellness@uthscsa.edu](mailto:gmewellness@uthscsa.edu)**

**You can contact Behavioral Health Consultants at:**

**Dr. Dyurich:**

**[dyurich@uthscsa.edu](mailto:dyurich@uthscsa.edu) - 210-450-8734**

**Dr. Prasad:**

**[prasadv@uthscsa.edu](mailto:prasadv@uthscsa.edu) - 210-450-8734**

## Cost & Hours

All services are free to residents and fellows. In an effort to be more responsive to your needs during these difficult times, we have expanded our hours to Monday through Saturday, including some evening times. Knowing you are busy, we will make our best effort to accommodate you and your schedule.

## Location

We are located in the basement of the Academic Learning & Teaching Center (ALTC B109). Our offices are private to preserve confidentiality. Please call or email for directions.



## Tele-Behavioral Health Services

Now offered by GME Wellness Program through the use of Zoom Video Communications technology, we are able to follow up with residents and fellows who can't make it to campus for a wellness appointment.

After downloading Zoom's free app, the process is as simple as clicking a link to open a secure, HIPAA-compliant private online meeting. You can download the app here: <https://zoom.us/download>

# Wellness Activities Around Town

## It's Time to Fiesta, San Antonio!



A little bit of history.

By 1890, San Antonio, Texas, was a thriving trade center with population of 38,000. In 1891 a group of citizens decided to honor the heroes of the Alamo and Battle of San Jacinto with a Battle of Flowers.

The first parade had horse-drawn carriages, bicycles decorated with fresh flowers and floats carrying children dressed as flowers. The Belknap Rifles represented the military. The participants pelted each other with blossoms. The Battle of Flowers Parade is the only one in the country to be planned and directed completely by women. Today it's the largest parade in Fiesta. It's second in size nationally only to the Tournament of Roses Parade.

The Battle of Flowers was an immediate success. Within a few years, more events were taking place on or near April 21—a carnival, balls and coronations of “royalty.” The Fiesta tradition had been born. Other early events included street dancing, children's festivals, a Trades Display Parade and an orphans party. Fiesta has taken place every year except for 1918 during World War I, 1942 through 1945 and, of course, 2020.

Fiesta 2022 will take place March 31 through April 10.

The celebration includes parades, music festivals and a lot of food (chicken on a stick is definitely a local favorite!).

Collecting Fiesta Medals is also a beloved tradition during Fiesta. The goal is to collect as many as possible, acquiring new medals each year and asking to "trade" with people at local events when you see one you like. Be sure to get your 2022 UHealth Fiesta Medal as well as previous years medals March 14-25 for \$12 each.

For a full list of Fiesta events as well as ticket information, visit their page at <https://fiestasanantonio.org/>

