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## Worn

Sunita Puri

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# Worn

NEVER THOUGHT THIS DAY WOULD COME.

The meaning of the day struck me at the oddest of moments. I was rushing around my apartment, picking up bedsheets, pillowcases, towels, jeans, gym clothes, all badly in need of a whirl in the washing machine. Oddly, it was always an afterthought to add my short white coat to my pile of laundry. And today, as I placed it at the top of the pile, I suddenly remembered that I never needed to wash it again. I had just returned from my last day of my last clinical rotation as a medical student. The last day I ever had to wear this short, awkward coat.

I began my usual prelaundry ritual of examining my white coat. I emptied its pockets, the reservoir of receipts, change, and quick glucose in the form of candy or Larabars. I looked for the latest damage in the form of coffee stains, pen marks, the smudge of softened gum left too long in the warmth of the pocket overlying my heart. I had always admonished myself for being seemingly unable to keep my coat perfectly white, crisp, meticulously ironed. While its blemishes were probably more visible to me than to others, they embarrassed me nonetheless. Yet in surveying the coat now, I was moved by the memories that each imperfection indexed. This unexpected patchwork, equal parts mess and memory, accident and adventure, reminded me of the interactions and encounters that comprised my clinical years.

Mrs J gave me the pen that later leaked, bruising my right lower pocket with a black splotch. She was dying of colon cancer, but we talked about this only obliquely. When I forgot my pen one morning while prerounding, she noticed and offered me one of the pens she was using to journal. "That's from the Marriott," she said, "from the last time I visited my brother." A blink and a reconsideration. "Well, hopefully not the last time." After she passed away days later, I couldn't bring myself to bleach the coat, instead strategically covering the stain with my ID badge. That stain was all I had left to remind me of this wonderful woman with whom I spoke about our mutual love of Richard Wright and an emerging rapper named Drake.

Ms A's mother gave me the turquoise necklace that I kept in my lower left coat pocket. Ms A had a beautiful smile and high cheekbones like her mother and siblings. They frantically drove to San Francisco overnight shortly after Ms A arrived at the hospital for the second time in a month, predictably breathless again, but this time with an unpredictable prognosis. I sat with her mother one afternoon outside the hospital. She needed a cigarette as badly as I needed a cup of coffee. "You know what would look really nice on you?" she said suddenly, her voice raspy, her breath thick

with tobacco. She reached into her bag, which housed a handmade jewelry collection that she hoped to sell to help finance her family's trip to see Ms A. She draped a turquoise necklace across my neck, pulling back my long hair and holding up her compact mirror to show me how the cool stone sat against my skin. She pressed the necklace into my hand. "Please keep this, and remember us. And remember her for what a fighter she is, not for how she looks right now with all those tubes and those beeping things all over her." She looked toward the parking lot, her long exhale chased by ribbons of smoke. Weeks later, I watched from the distance of a new rotation as Ms A was transferred in and out of the ICU, eventually gaining back enough strength to realize her dream of returning home with her family, playing with her nieces and eating fattening foods. Her mother wrote to tell me that one week after returning, she passed away in her bed, surrounded by her family, her belly comfortably full of fry bread. I kept the necklace in my left coat pocket throughout fourth year, reaching in and running my fingers across its intricate design. During the more difficult and discouraging moments on my subinternship, the crumpled necklace helped me to remember why I was there, and for whom.

I had to retire the coat with the spray of coffee on its entire left side. Mr D was my patient only briefly, in his shuffle between the surgery, medicine, and ICU services, but I had been the one to call and tell his wife that she should drive to the hospital soon. We did not know how long he might survive in the ICU after a complicated elective surgical procedure. I listened to Mrs D's voice falter and crack over the phone as she said repeatedly, "I should never have told him to have that surgery, I should never have pushed him." After our medicine rounds every day, I would stop by the ICU, checking on Mr and Mrs D, offering her the only things I could: water, tea, my coupons for breakfast at the cafeteria. I will never forget the way that she held her unconscious husband's hand, telling me that he was her first love, that they broke up in their late teens when he left for military duty, that they reconnected after the death of their respective spouses, that he proposed to her in the same church where they had first met as Sunday School students. She followed the tortuous path of his bulging hand veins with her fingers, blinking back tears as she said, "I have known these hands for 80 years. What will I do without them?" Days later, I raced to the ICU, coffee in hand, after Mrs D requested that a nurse page me. "He's waking up!" she cried, grab-

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bing me by both arms and shaking me with the force and glee of a teenaged girl, my coffee splashing onto my coat. I watched as the ICU resident extubated Mr D, as he coughed and spit his way back to independent breathing. I didn't notice the extent of the coffee stains until an hour later, when I escaped to the bathroom to absorb the unexpected miracle I had just witnessed.

Over the course of this two-year introduction to clinical medicine, my white coats served as time capsules and canvases. Their physical appearance changed as an intoxicated patient's blood splattered during my first attempt at an arterial blood draw in the emergency department, as the highlighter with a missing cap left its permanent fluorescence in my right lower pocket during pediatrics, as the Hershey's Kiss I swiped from the psychiatry department's secretary melted in the heat of Fresno's summer. My coat pockets swelled to accommodate endless printed records of patient rosters, notepads filled with my own unintelligible scrawl documenting their newest labs and CT results, and multicolored reference books. When things got particularly busy, I cleared my pockets of accumulated receipts only weeks after I had completed purchases. I uncrumpled them and retraced my footsteps with amusement and, occasionally, shock: *Three* espresso shots in the span of 6 hours during call? Turkey and mustard on whole wheat day after day during a rotation where my working hours made trips to the grocery store difficult. Packs of gum from the drug store right next to the family medicine clinic. On each rotation, I went through my daily motions almost mindlessly as they became new rituals and routines. Only afterward, with the help of my white coat, did I actually recollect the details of these rituals and those with whom I had shared them.

These coats were often my sole companions during this lonely stretch of clinical training. The reference books in

my pocket changed throughout the course of my clerkships, as did the lists of patients and their problems. Amidst the constant shuffling of nurses and residents and attendings, amidst the passage of months and seasons and holidays, my coat was the odd constant and the constant witness. It grew on me as I grew into my role as a student of my patients. To outside observers, its length reflected my inexperience and newness to the world of clinical medicine; to me, poring over its imperfections on this very last day of its companionship, it captured two years' worth of memories and growth.

That evening, I washed and ironed my coats, hanging them in off-white succession in my closet. I dismissed my embarrassment that they weren't sparkling clean, that their blotches, patches, and spills were still visible. There was something about their worn appearance that made sense, that captured the literal and figurative messiness of medicine and of life.

I thought about how I would feel in a few months, wearing a resident's long white coat for the first time. Would I observe my reflection in the mirror just as I had two years ago, peering curiously at the long-haired girl in front of me who seemed to be playing dress-up? How would I avoid the pen marks, the coffee stains, the stamp of the uncapped highlighter? Would I be able to maintain order in its pockets, or continue my pattern of cramming receipts, patient notes, and jewelry in one place? I paused. I had traded the supposed necessity of a pristine coat for memories that often kept me committed to my goals within medicine. I saw order and meaning in what, to others, would simply have looked like a mess.

Maybe, I thought to myself, clean coats are overrated.

Sunita Puri, MD, MS  
San Francisco, California  
sunita.puri@ucsf.edu