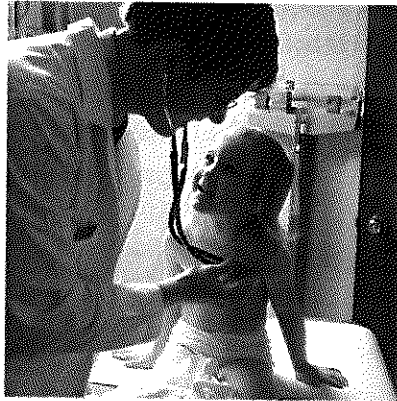


# Becoming a Doctor

By Samantha Gross



At age 29, Marla Shu had spent 19 years of her life in school, from kindergarten to the day she received her graduate degree in Epidemiology, the study of the spread and control of disease. Some people would have been sick of being a student, but she signed up for at least seven more years of study.

Becoming a doctor meant more years in the classroom, countless sleepless nights studying for grueling exams, and time spent learning procedures by patients' hospital beds. But for Dr. Shu, who graduated from medical school in May 2013, the process was worth it.

"It feels really good to know enough to actually feel like you're helping someone," she said. "It's an overwhelming sense of responsibility, but also you feel like you're doing something really great."

Like all aspiring doctors, Dr. Shu had to meet certain prerequisites in order to gain admission to medical school; she had to take classes in Biology, Organic Chemistry, Physics, Statistics, and English, to name a few. As of 2013, there was a limited number of training programs for physicians in the United States, and many more people applied than could be admitted. All applicants were required to take a standardized test that covered topics in the sciences and tested problem solving and critical thinking.

It was a lengthy process to get into medical school, but once she got there, her instructors at the New York Institute of Technology College of Osteopathic Medicine wasted no time in introducing her to the gritty realities of being a doctor. Within a few days, she was assigned a cadaver—a dead person's body—that had been donated to the medical school. Over the course of many months, Dr. Shu returned again and again to a large, cold laboratory where she dissected the corpse with a handful of her classmates.

“Some students had a particularly hard time in the anatomy lab,” Dr. Shu said. “Some were overwhelmed with feelings of sympathy or sadness for the person whose body was on the table. Others were nauseated by the smells and textures of the tissues and organs inside the cadavers. It was sobering to see the internal damage that some people had suffered due to smoking cigarettes or eating poorly. At first, the medical students were told nothing of the person whose body they were examining, but on the day that they were scheduled to dissect the cadaver’s face, they were each handed a card with the person’s first name, age, and cause of death.”

“Seeing what goes on inside of all of us was a shock,” Dr. Shu said. As a student, she had studied the theory of how the human body worked—right down to the molecular level—but she hadn’t expected the reality to look so different from her textbooks. “What struck me was how much variation there is in tissue color and other internal features,” she said. “Everyone looks different on the inside as well as the outside.”

For the first two years of medical school, Dr. Shu and her peers stayed mostly in the classroom, studying each system of the human body one by one. They spent several months on the musculoskeletal system, examining its physiology (how it functions when it’s healthy), its pathology (how it’s impacted by illness), its microbiology (how it’s affected by the microorganisms that cause illness), and its pharmacology (what drugs are used to treat illnesses and how they work). They applied a similar approach to the circulatory system, the digestive system, the nervous system, and other areas.

Beginning in their third year of medical school, Dr. Shu and her classmates began rotating once every several weeks between departments at various hospitals. These clinical rotations, as they’re called, are meant to help medical students gain experience in a number of disciplines and ultimately choose a specialty. All doctors-in-training do these rotating apprenticeships in core areas such as General Surgery, Pediatrics, Psychiatry, and Internal Medicine. In addition, each medical student picks some rotations in non-core areas; Dr. Shu chose to study Rheumatology to learn more about treating autoimmune diseases that affect joints and muscles.

By the fourth year of medical school, students must choose a specialty. “One of the wonderful things about becoming a doctor is that there’s something for everyone,” Dr. Shu said.

“You find out what is better for you . . . . Some people are really technically skilled and really, really love being in the operating room,” she said. “People who really like to talk to their patients go into Psychiatry; they go into Family Medicine, or they go into Pediatrics.”

Dr. Shu's love of interacting with her patients helped her decide to become a psychiatrist. After graduating from medical school, she expected to spend four years as a resident at Beth Israel Medical Center in Manhattan; other doctors spend even longer in residency and then in fellowships.

In her first months as a resident, Dr. Shu managed the care of a number of patients, collaborating with social workers and psychologists to develop a treatment plan for people with severe mental illness. She ran adult psychotherapy groups, in which patients discussed their common experiences, and she spoke one-on-one to her patients every day to evaluate how they were doing and determine whether their medications needed to be adjusted.

Some of Dr. Shu's patients arrived at the hospital in a psychotic state, unable to judge what was real. "It was often a terrifying experience for them," she said, "and it was deeply satisfying to help figure out the right treatment and hopefully see them become stable enough to return home."

Still, there were challenges. Psychiatry is one of the only fields in which doctors can force patients to accept treatment by having them involuntarily committed. That power comes with great responsibility, and Dr. Shu said that she grappled with ethical and legal issues every day.

After all those years of training, Dr. Shu came to realize that when she signed on to medical school, she was signing up to become a student forever.

"It's really great to find something that you're interested in, that you can continue learning about for the rest of your life," she said. "No matter how much I study, I'm never going to know everything about this subject . . . It's an evolving field."

Name: \_\_\_\_\_ Date: \_\_\_\_\_

1. What is Marla Shu's job?

- A teacher
- B scientist
- C doctor
- D lawyer

2. What does this passage describe?

- A It describes Marla Shu's clinical rotation in Pediatrics and the impact it had on her life.
- B It describes the legal issues that Marla Shu must grapple with every day.
- C It describes what Marla Shu learned in her classes on Physics, Statistics, and English.
- D It describes the process Marla Shu went through to become a doctor.

3. Read this sentence: "Becoming a doctor meant more years in the classroom, countless sleepless nights studying for grueling exams, and time spent learning procedures by patients' hospital beds."

What can the reader conclude from this information?

- A Becoming a doctor is something a lot of people want to do.
- B Becoming a doctor takes a lot of time and effort.
- C Becoming a doctor is easier than becoming a policeman.
- D Becoming a doctor makes people unhappy for the rest of their lives.

4. Based on information in the passage, how can Marla Shu's job be described?

- A boring but easy
- B challenging but satisfying
- C unusual and extremely dangerous
- D confusing and upsetting

5. What is this passage mainly about?

- A how Marla Shu became a doctor and the work she does as a psychiatrist
- B what Marla Shu learned about autoimmune diseases in her Rheumatology rotation
- C the sympathy and sadness that Marla Shu's classmates felt for the bodies they dissected
- D the grueling exams that Marla Shu had to take in order to become a doctor

6. Read the following sentences: "By the fourth year of medical school, students must choose a **specialty**. 'One of the wonderful things about becoming a doctor is that there's something for everyone,' Dr. Shu said."

What does the word "**specialty**" mean in the sentence above?

- A an unusual ability that someone is born with
- B a back-up plan for a person who cannot find a job as a doctor
- C a place to live and work for many years
- D an area of study that a person focuses on

7. Choose the answer that best completes the sentence below.

Marla Shu loves interacting with her patients, \_\_\_\_\_, going into Psychiatry was a good choice for her.

- A therefore
- B however
- C previously
- D instead

8. What areas of medicine did Marla Shu study during her clinical rotations?

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**9.** As a resident and psychiatrist, what are some of the things Marla Shu did for her patients?

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**10.** How did studying to become a doctor prepare Marla Shu for her work as a resident and psychiatrist? Give an example of something she learned before graduating from medical school that could help her as a resident and psychiatrist.

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