Bembo
Stephanie Miljkovic, M2

The very font you are reading is named “Bembo,” the same font used in my most recent read, Dear Edward by the talented Ann Napolitano.

This wasn’t something I independently looked up about the book, I can assure you. This peculiar detail was hidden discretely on its own page, revealed only after traversing the Epilogue and Acknowledgements. Like most people, I don’t normally go past the last page of the story. I feel the end approaching quickly, so I hang on to the last few sentences of the last chapter a little bit longer, knowing that I am about to close the book for the last time.

This time, however, I could not accept being done. I did not want to be done reading. I did not want to go back to studying, the Sunday scaries, nor the impending MSI course that was to hijack my days yet again starting Monday morning. I desperately squeezed the last few drops of the book’s captivating narrative and read the Acknowledgements section, a part I typically skip for its dryness and irrelevance to the novel’s ending. It was there that I learned about how “Bembo” typeface was developed by Cardinal Pietro Bembo in 1495 and brought to the United States in the 1930s. Since then, I’ve wondered if every book had a little paragraph about the history behind the font used.

Now, about the book.

Dear Edward recounts the fictional story of a 12-year-old boy who loses his mother, father, and brother to a fatal airplane crash. I spent all of the Endo.-Repro. block tracking his physical and psychological healing. We also experience flashbacks of some of the other passengers before they died: a black U.S. soldier coming to terms with his sexuality, a newly pregnant young woman wrestling with the decision to leave her boyfriend, an over-extended and overly-driven Wall Street business guru consumed by his vices, a retired millionaire CEO filled with regret and dying of metastatic cancer, an eccentric Filipino woman named Florida who believed she was reincarnated hundreds of times, and Edward. Without spoilers (because I encourage you to read the novel), Dear Edward moved me to my core. I cried twice (for reference, I cried three times during the movie Up).

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I smirked and huffed in pure joy for his little wins, and I came out of the novel with a feeling of overwhelming presence I hadn’t felt in weeks. I sat with the book in my lap for what felt like hours. I stared out my window at the golden hour, only to be met by the sun I hadn’t seen all winter. With that, I finally came back to the surroundings of my apartment. I had pressed the restart button for which my mind and body were yearning.

The story of Dear Edward returned to me humility, patience for the journey of struggle, and respect for the process of grieving and loss. Above all, it connected me so deeply to the author’s voice that I actually read the Acknowledgements section of a book for the first time in my life. While I can neither overstate the greatness of this 2019 novel nor the talent of Ann Napolitano, these are not the only reasons I write to you today.

I took up reading for pleasure before bed each night when I came back to Omaha at the start of M2 year. Before, I had only read during holiday breaks. Yet despite entering debatably the most demanding year of medical school, I couldn’t kick the habit. When we theoretically had less time, I pushed back and created more. I tightly held on to the fictional worlds I departed to each night, and suddenly it’s October in the middle of Cardio and I’m already on my fourth book. I discovered that reading was a way to protect myself from the demands of M2 year, which had insidiously and silently picked away at my mental health.

Time is not free anymore, not like it used to be. Likewise, the window for “free time” is only getting smaller as life gets complicated by the hospital schedule, new families formed, and so on. We are forced to fill our finite day with infinite tasks, keep the growing pile of dishes and unfolded clothes at bay, consume a balanced diet, move our bodies, connect with family and friends, and find some sleep along the way. It is when you are busiest that I encourage you to be intentional in finding a moment for yourself, lest you unravel completely and forget the reason you pursued medicine in the first place. Forgive yourself without hesitation despite the little voice guilting you back into studying. For you, this can be going to the gym, dancing, singing, painting, calling your parents daily, running, cooking, snuggling with your pet, cuddling with your significant other, or sharing dumb memes with your best friend. It may be the single most productive thing you do in a day.

For me, pleasure reading has maintained my well-being. I urge you to keep doing what it is that moves you. Stimulate the creative mind. Take respite and reflect in your journey. Prioritize those things that deeply engross you such that you unwittingly stumble upon the origin story of “Bembo.”
Having a Plan for Success

Jeffrey Lang
Academic Success Consultant

Planning for success in medical school requires students to address time management, learning activities, and motivation. If any of the three components are lacking, students will commonly find themselves talking with Dr. Madhavan or myself. Through a consultation, we will make apparent the areas of concern and provide opportunities for each student to reach his/her potential.

Time Management

Time management is the least interesting topic for me to discuss with students, but it is vital. Managing time requires prioritization and sacrifice, but it is worth it. When you are on top of your schedule, you’ll feel that sense of ‘balance.’ The feeling of balance in your life allows you to plan for tests and stay on top of your daily learning requirements. If this is off, the learning suffers and you’re more likely to engage in avoidant behaviors or experience burnout.

Learning Activities

Your goal is to become an active learner, and this requires capturing the course content with accompanying resources. Active learning is note-taking and reorganizing the material into graphic representations (matrices, hierarchies, diagrams, etc). To promote distributed learning, we recommend questions to drive your schema development. Question banks such as Robbins, Amboss, Kaplan, or USMLERx are all good resources to use for supplement your coursework. Spaced reviews are good to keep information active in memory; Firecracker or Anki are useful for this. The last learning activity is reviewing. This is often done in study groups or with tutors. Reviewing gives students a chance to know what they know and what they don’t. Reviewing also serves to evaluate the effectiveness of your strategies and develop metacognition. As much as questions drive learning, they also serve to regulate understanding (Weinstein et al., 2018).

Motivation

I have no doubt that all of our students are motivated, but there’s a component of motivation that is particularly important to me. That component is implicit theory, which is one’s theory of their own ability. Dweck and Leggett (1998, 2015) built upon the implicit theory research and created a unitive model combining cognitive, social, and behavioral psychology. They found that implicit theories were typically entity (fixed trait) or malleable (growth mindset) and that goals and behaviors corresponded. The malleable implicit theory student is less likely to experience test anxiety because he/she sees the outcome as feedback. The goal orientation is to master course content and behaviors are positive. For instance, such a student is more likely to use strategies, value effort, be persistent, and seek challenges. If you don’t have a growth mindset, we need to talk!

All three of the above components are critical to your success as a medical student. Lack of balance undermines your learning activities. An entity implicit theory leads to severe test anxiety and external attributions (blame the professor, course, etc). You’re also less likely to value effective learning strategies. Having a plan, effective strategies, and a growth mindset will lead you to success and enjoyment in medical school.


This weekend, I had the chance to get out and enjoy the outside world. It was more refreshing than I expected. We all know what we should do: stay active and balanced, eat healthy, and hit the gym. I’ll be the first to admit that I’m not the best at keeping up with these tasks. Over the past two months, I fell behind due to eight weeks of Internal Medicine and the time of year when the sun never seems to be up when I’m off work. Add that to planning a fourth-year schedule, deciding on a career, and a couple other stressors. Things quickly seemed to feel out of hand. I felt so busy keeping up with flashcards, UWorld questions, and the wards that I let some of these basic wellness principles fall to the wayside. I am always surprised at what a little sunshine and a walk outside can do. Yesterday, I drove up to Hitchcock Nature Center, just northeast of Omaha. It was my first time there, and I thought it would be nice to get outside, go for a hike, and have a picnic. For an admission price of $3 per car, you can breathe the fresh air of the Loess Hills (which is an upgrade from hospital air). Between the sunshine, relaxing hike, and beautiful scenery, I could feel the stressors fading away behind me. It was a great reminder of the power a little nature can do. Now that spring is coming around and the days are getting warmer, it’s a great time to get outside and go for a walk in the woods. Yes, the UWorld questions will still be there when you get back. For me, a walk outside does more for my score than an extra question block.

To Study What is Hidden
Laura Tarantino, M2

All that is hidden,
I call into the light:
The percolating molecules –
The very stuff of life.
All that is hidden,
I try to learn your names,
Arrange you by some attribute
And group you with the same.
All that is hidden,
All the quiet underneath:
The marginating neutrophil, the vessels of the spleen,
And all that remains hidden,
This warm and pulsatile dance –
God knows the paths we’ve yet to travel in this grand expanse.
I hope everyone’s New Year is going well! As we quickly transition from the winter months to spring, I thought it may be a good time to focus on exam-taking. Although we have addressed these issues at various times throughout your medical school careers, I wanted to provide everyone with a quick refresher on how to maintain good mental health and good sleep habits as you all progress and take these important exams.

As student workloads increase, you may notice that stress increases concomitantly (or in some cases – exponentially). In an attempt to deal with increasing stress, we often have a tendency to develop some inappropriate ways to cope. More studying, less exercise, poorer nutrition, withdrawal from social support, and less (or at least more fitful) sleep. How might you get a better handle on effective studying strategies, stress management, and improved sleep habits?

First, let’s talk about how best to prepare yourselves for upcoming exams by looking at the P.A.S.S. mnemonic. Proper academic preparation and strategies can reduce anxiety and enhance success. The key to proper academic success is – P.A.S.S.

• Preparation – A major key to doing well on any exam is proper preparation, which allows for more confidence and (usually) less anxiety as you go into an exam. Don’t hesitate to use our Academic Success Consultants to assist you with any academic-related issue. Jeff Lang and Dr. Kiely Madhavan in Omaha and Rachel Jones in Phoenix are excellent resources for assisting in your studying and exam preparation. Know that they are always willing to help in any way.

• Assessment – Our Academic Success Consultants can also assist you in better understanding your learning style, study habits, and test-taking strategies by applying your MBTI, Clifton Strengths, LASSI, and other assessment results from the M1 year or by conducting other assessments that can provide better insight into potential barriers to success.

• Strategies - There are a host of strategies that students may use to enhance their abilities to excel on exams. Our Academic Success Consultants have great ideas based on their expertise and experiences with past students’ successes that they will share with you.

• Stress Management – Keep in mind that everyone gets a little stressed prior to (and during) exams. This is natural. Do your best to reframe it as anticipation/excitement that allows you to be focused and sharp. If anxiety gets a little too overwhelming, there are a variety of stress management strategies available for your use prior to, during, and immediately following an exam. These include:

  • Exercise – A proven stress reliever! If you currently exercise regularly, make sure to continue to do this through the spring. Schedule it like you do your studying and make sure you follow through.

  • Deep breathing and relaxation – You can practice slow breathing anywhere and anytime. Do this throughout the day, especially as you are doing practice questions, and this will come around naturally during the actual exam. At home, get into a comfy chair and allow your whole body to relax. Add a little imagery (possibly a nice ocean beach or mountain scene) and recite some positive self-statements.

  • Positive Self-Talk – As you know, self-talk can often induce anxiety. When this occurs, ask yourself if what you are saying is accurate, and then if it is useful. Usually, the answer is “no” to both of these. Then, say something positive about yourself and move on. For example, something like “I don’t think I can pass this exam” can be dealt with by saying “Is that really accurate? Well, probably not since I did study hard and I do feel prepared. And that type of thinking does me no good anyway. Alright, let’s go into the exam and crush that sucker!” How you think certainly influences how you feel, so stay positive! Remember, say it until you believe it!

• Post-Exam Strategies – Following the exam, allow yourself some time to decompress and to relax. You may want to review what worked and what didn’t work in terms of strategies and learn accordingly.

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Again, keep in mind that we have excellent Academic Success Consultants (Jeff Lang and Dr. Kiely Madhavan in Omaha and Rachel Jones in Phoenix) who can support you with study skills, exam-taking skills, USMLE Step 1 and 2 CK preparation, and so forth. Please take advantage of these outstanding services.

Sleep Management Strategies — A significant number of students report developing sleep problems while preparing for major exams. If you do start to have problems with sleep, you might consider the following:

- **Stimulus Control Strategies**: The idea behind these is that for most persons with insomnia, the bed has become associated with not sleeping through studying in bed, using phones/computers in bed, worrying and problem solving in bed, and so forth. We want the bed and bedroom to become a discriminative stimulus for sleep, not being alert and awake. So, lie down to sleep only when sleepy, do not use your bed for anything except sleep (so no watching TV, studying, eating, and so forth in bed; and for gosh sakes, no computer or phone use while in bed; and for gosh sakes, no computer or phone use while in bed – the blue light is impacting you negatively by delaying the release of sleep-inducing melatonin). If you are unable to sleep after 20 minutes, get up and do something sedative until you are sleepy and then return to bed. If you’re still unable to sleep, do it again and again. It may take a few days, but eventually this will work. Also, set your alarm to wake up at the same time every morning, irrespective of how much sleep you get. And do not nap during the day; napping affects your deep sleep that night.

- **Sleep Hygiene**: No alcohol within four hours of bedtime, no caffeine and nicotine after 4:00 p.m., no vigorous exercise within two hours of bedtime, wind down before going to bed, don’t go to bed hungry or thirsty (but at the same time do not load up either), sleep in a comfortable environment, and point your clock away from your bed (since many people with insomnia keep looking over at the clock throughout the night and get frustrated by the time).

- **Relaxation**: Although relaxation in and of itself is not extremely effective for insomnia, it can reduce physiologic and cognitive hyperarousal. It is usually used in combination with other strategies and includes deep breathing, imagery, and loosening/relaxing various muscle groups.

Other thoughts –

1) **Balance**: Just as you set aside time to study, make sure you do the same for other activities that provide proper balance. Yes, study hard, but also find time to reinforce your efforts by scheduling time to exercise and/or socialize. And just like study time, remember: if you do not schedule time for exercise and socializing, chances are that you won’t do them. So, as artificial as it may appear, make sure to schedule time to have some fun. As you know, it will recharge your batteries. In addition, exercise does result in neurogenesis, so you will actually get smarter by doing it!

2) **Diet**: Diet is another lifestyle aspect that seems to lose its priority as we get stressed out and crunched for time. Not only do we find less time to eat healthy food, but we tend to pump in the caffeine (and possibly nicotine) to keep us awake. Some make the mistake of using alcohol as a reward for time spent studying or to help them get to sleep. A fairly recent study in the *Annals of Behavioral Medicine* (April 2014) found that weekly caffeine use predicted longer sleep latency (i.e. the time from when we go to bed until actual sleep). Weekly alcohol and cigarette use also were related to poorer sleep; specifically, they were both related to lower sleep efficiency (i.e. the ratio of total sleep time to the total rest period).

**Summary**

Although exam time can be stressful and cause us to lose sleep and drift into bad habits, there are a variety of things we can do improve stress levels, sleep, and overall health. First, remember that anxiety is normal. Spend your time living life according to your values versus paying attention to (and fighting) the “anxiety monster.” Stay active with exercise and keep involved in hobbies and with others. Minimize the use of bad habits such as poor diet, caffeine/nicotine use, and alcohol consumption while making sure to use good sleep strategies. Keep in mind the importance of proper academic preparation, and do not hesitate to ask for help! Better to be proactive! Best wishes!
Surviving the OR during your Surgery Clerkship
Brad Graefe, M3

While STEP 1 is on the forefront of everyone’s minds right now (especially now that it is changing to pass/fail), I want to give a run-down of what I learned in the M3 surgery clerkship.

The first time you scrub in on a case is going to be the most memorable and terrifying experience during the clerkship. Someone is actually trusting you with his/her life! Despite this heavy burden, what you will be thinking about in that moment is what to do with your hands and how to avoid making the most common mistakes. Here are some tips:

- Look up the case beforehand and know what they are doing. Look up relevant anatomy, and why the patient is having surgery. These are the most commonly questioned topics.
- Always do a pre-scrub when you arrive in the morning so that the attending and/or resident don’t have to wait for you. If you are not first, you will be the last to be scrubbed in.
- Introduce yourself to the scrub tech and ask them what you can grab. The tech will likely ask you to grab your gloves and gown. He/she won’t trust you with much else, but it never hurts to ask!
- Help with transferring the patient from the bed to the surgery table, as well as positioning the patient on the table. This shows that you are involved and is the best way to introduce yourself to the team.
- As soon as the patient is intubated, go scrub, (preferably with Avagard, since you have already pre-scrubbed). Head into the OR without touching anything with your hands or arms to get gowned and gloved. Thank the scrub tech by name, as he/she can make or break the case for you!
- Stand to the side when the surgeon and resident are draping. Do NOT try to drape the patient without asking. This seems like a no brainer, but an overly eager med student might contaminate something and delay the case.
- Don’t touch anything that isn’t covered in blue drapes and always have your hands above your waist, but not above your head.
- Once the draping is completed, place your hands on the blue drapes, watch how they set up, and hold the suction tubing, which is the most commonly dropped item.
- Congrats! You just survived scrubbing in and draping, hands down the most difficult part.
- During the case, you will hold retractors, hold the camera, and suction! Suction smoke and any fluids obscuring the surgeon’s view, but try not to obscure the view at the same time (it’s a challenging balance)! You’ll you did well if the surgeon lets you help close.
- Don’t touch anything that someone doesn’t ask you to touch (great lesson in surgery and life in general)!
- During the case, resist any urge to scratch your nose or back! If you do give in to your impulses, the surgeon/scrub tech will probably stare you down until you get rescubbed. The best thing to do is admit your mistake and scrub again willingly. Do not argue if someone calls you out for potential contamination, just apologize and go scrub again.
- Know how to close. Specifically, know how to tie two-handed and one-handed knots, instrument tie, subcuticular suture, and close port sites.
- Very important: don’t ask questions if a patient’s vitals are tanking, the surgeon comments that the most difficult part of the case is occurring, or if anything is going wrong. This is one way to be memorable, but for all the wrong reasons.
- In my experience, most surgeons prefer to have questions when they’re closing up, but others like you to ask at any time. Get a feel for your surgeon and what he/she prefers.
- Finally, keep your mind open. Even if you begin your surgery clerkship thinking you don’t want to do it, you might change your mind. It happened to me!
Stress is Unavoidable. Burnout is Preventable.

Kiely Madhavan, Ph.D.

Burnout is a syndrome of emotional exhaustion, feelings of detachment, and a low sense of personal accomplishment. It results from exposure to excessive and prolonged stress (ahem... medical school). Although burnout is not a specific medical or psychological disorder, the effects of stress on mental and physical functioning are well established. Burnout is not a new concept. The term was first used in 1974 by the psychologist Herbert Freudenberger. It has received more attention in recent years, particularly in the medical field where burnout is increasing among physicians, residents, and medical students.

If you have experienced burnout, you are not alone. In a large national study, burnout was reported by 56% of U.S. medical students. Burnout was also shown to be more prevalent among medical students than among similarly aged U.S. college graduates (Dyrbye et al., 2014). Unfortunately, many medical students rely on the belief that stress will decrease when training is complete rather than engage in effective coping strategies to prevent burnout. This is worrisome because if symptoms of burnout are not addressed, the consequences are potentially serious. Burnout can lead to poor health, depression, suicidal ideation, relationship difficulties, physical exhaustion, sleep disturbance, and increased use of alcohol and drugs. In fact, the rate of alcohol abuse/dependence among medical students is strongly associated with burnout (Jackson et al., 2016).

Signs of burnout include fatigue, isolation, irritability, sleep difficulties, impaired concentration and attention, and apathy. The symptoms do not hit all at once, and some individuals do not see it coming until it is too late. To better understand the progression, Freudenberger and his colleague, Gail North, divided the burnout process into phases. Here’s the CliffsNotes version: Excessive ambition pushes us to work harder. Due to the amount of work we take on, we begin to neglect our own needs (sleep, exercise, and eating well). Rather than acknowledge that we are pushing ourselves too hard, we blame the demands of work or school. We no longer feel like we have any time for non-work/school related activities and begin to withdraw from family and friends. Social invitations feel like a burden in the face of our other demands. At this point, depersonalization may occur, leaving us feeling detached from our lives. This may progress to anxiety or depression. Increased feelings of meaninglessness and lack of interest can ultimately lead to physical and mental exhaustion if not addressed.

As you can see, burnout is a gradual process. The signs are subtle at first, but worrisome behaviors can quickly develop as time goes on. Paying attention to the early warning signs is critical to preventing the more severe symptoms of burnout. Think of the early symptoms as red flags rather than dismissing them as unavoidable parts of medical school. If you pay attention and actively reduce your stress, you can prevent things from getting out of control. Here is how:

**Exercise:** Exercise habits can reduce the risk of burnout. Aerobic activity and strength training were both independently associated with a lower risk of burnout and higher quality of life in U.S. medical students (Dyrbye, Satele, & Shanafelt, 2017). Even though it may be the last thing you want to do when experiencing burnout, it is the quickest way to feel better.

**Watch your diet:** Good nutrition is an important stress management tool. Eat regularly to keep your blood glucose stable. Fruits and vegetables, healthy fats, and high-fiber foods have all been shown to positively impact our cognitive and emotional functioning.

**Get enough sleep:** Practice better sleep habits. Insufficient sleep may be the biggest risk factor for burnout development. Feeling tired can lead to irrational thinking, making us more vulnerable to stress.

**Learn how to say “no”:** Set boundaries and do not overextend yourself. Take on only the things you know you can do well.

**Abandon ideas of perfection:** The pursuit of perfection results in harsh self-criticism, and ultimately holds you back from being successful. We all have personal limitations. Be accepting and accommodating of your strengths and weaknesses. Strive for flexibility and perseverance rather than perfection.

**Spend time with family and friends:** When we feel stressed, our natural reaction is to withdraw from others. There will be time for socializing when the stress is gone, right? In fact, maintaining positive relationships is vital to preventing and overcoming burnout. Reach out to those closest to you. Schedule time to meet in-person or talk over the phone.

**Connect with a mentor:** Identify a faculty member or physician that you trust. He/she will understand the challenges of medical school, making him/her uniquely able to provide emotional support and guidance. Explore strategies for achieving balance with your mentor.

**Set realistic goals:** As noted above, burnout leaves us with a low sense of personal accomplishment. An overly ambitious to-do list will put you on the fast track to feeling ineffective. When it comes to a study schedule, factor in time for breaks and exercise. Be realistic about what you can get done in one day. You want to feel a sense of accomplishment at the end of the day, not be faced with a list of unfinished tasks you “should” have completed. Jeff Lang (Jeffrey.Lang@creighton.edu) and I (KielyMadhavan@creighton.edu) are happy to help you devise a study schedule that is sustainable – get in touch with us at any time.

**Practicing gratitude:** When under stress, it is common for us to focus on negative aspects of our lives. It takes effort to change this way of thinking, but taking the time to identify the positive events that are happening every day goes a long way. The power of gratitude (the topic of this recent article: [https://www.aamc.org/news-insights/thanks-lot](https://www.aamc.org/news-insights/thanks-lot)) is spreading among medical schools and hospitals. Try setting aside time each night to identify three good things that happened during the day.

*For resources and more information about strategies to address burnout, check out The National Academy of Medicine’s Clinician Well-Being Knowledge Hub ([https://nam.edu/clinicianwellbeing/solutions/](https://nam.edu/clinicianwellbeing/solutions)).

