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Graduation address, May 2017

Distinguished Colleagues, Ladies and Gentlemen, our newest graduates.

Thank you for the honour of allowing me to speak on this important occasion.

Ten years ago, on a crisp and beautiful winter morning, I discovered that the twins I was pregnant with were dying.

I was young, fit and healthy with not a worry to my name. For over 20 weeks the pregnancy had gone smoothly and I was poised to have healthy twins.

Then, in a sudden reversal of fate, I had a routine ultrasound and discovered that they were dying.

The obstetrician, as astonished as me, led me into a cramped space and told me the news.

It helped that, from what he had seen, he was able to say that the situation was dire. He could have asked me to wait for more tests and more doctors, allowing him to sidestep the truth, if only for a short time, but courageously he told me the truth and allowed me to prepare for what lay ahead.

As you can imagine, the ensuing days were busy, turbulent and enormously heartbreaking but here is what I remember most and why it mattered.

The doctor cried. An older man and a father himself, he was stunned by the unexpected finding and didn't have the words to express his regret.

In all my years of medical education and training, I had never once seen a doctor cry in front of a patient. I had seen regret, remorse, expressions of sigh but never someone cry.

This veteran doctor told me he was lost for words and actions. Instead of offering brainy solutions and tired platitudes, he simply sat quietly and allowed me to do the same.

And while it may have seemed to him like a thousand years, those few moments gave me the greatest gift, the gift of composure.

Medicine can be so doctor-centric that it's easy to downplay how other health professionals helped me but of course, they were there to pick up the pieces when the doctor left.

I had two nurses who were calm, kind and thoughtful. Instead of asking me how I felt, they looked at my face and saw how I felt.

I was not inclined to speak much, preferring quiet reflection and physical recovery. I was quite happy to spend the entire day with a book to avoid conversation.

So they worked quietly and efficiently, always calm and kind. They made sure I was comfortable, that the water jug was close, and that the bathroom light was on. They didn't ask my husband if he was hungry, just brought him a plate of food.

When I was ready to leave, the nurse did all my paperwork and then decided to take me out in a wheelchair through a back door to the hospital to where my car was parked. She said that she didn't even want the remotest possibility of me running into someone I knew.

It was the last thing I cared about but my heart soared at her thoughtfulness. I have never forgotten that trip to my car.

I remember the social worker at my bedside, a young man, recently out of training like many of you. I could sense that he was tense as he waded through question after question about me, my life and my circumstances.

He was only doing his job but I was exhausted and to be honest, slightly irritated at being treated by a novice who was sticking to the rule book. The doctor in me wanted to help him but the patient in me didn't have the energy. So I told him I didn't need him and there was nothing he could do for me.

All these years later, I realise how difficult it must have been for him too and I hope that he knew I wasn't discounting his skills as much as I was speaking through my bewilderment.

At home, I remember the kindness of strangers, the food and the flowers. But two things again stick out.

One was a letter from my doctor – essentially a rumination on the grief that my husband and I had endured. A cynic might say there was no point to it but that would actually be missing the point.

The letter moved us because he had taken the time to handwrite it. It was thoughtful, genuine and a real expression of solidarity through misfortune. With humility and warmth, it helped us remember that our sorrow was personal but shared; our own but communal.

Then, one day, the phone rang. It was the nurse who had wheeled me to my car.

'How are you?', she asked.

'Better,' I replied cautiously. What did she want now?

'I just wanted to check in on you because I was worried when you left.'

'Why were you worried?'

The doctor in me couldn't help asking.

'I just was.'

What she was saying without saying it was that she was worried about post-natal depression and the risk it posed to me. There had been no red flags during my admission and I was well supported.

She wasn't following a protocol but her gut instinct. She was reaching out to let me know that there was help, counselling and care waiting for me if and when I needed it. No amount of papers and pamphlets shoved into your hands at discharge could make up for that one phone call.

You can be sure that that nurse deals with plenty of troubled patients all the time and this phone call wasn't on her roster. But she put it on her to-do list because she took her job seriously and she genuinely cared.

And while things turned out okay for me, that phone call could have saved another woman's sanity and life. To my delight, I have since gone back to that nurse and told her just how much her gesture meant.

In the coming days you will encounter no end of advice and you are intelligent enough to know what to use and what to discard. I came up with a list of five, then a list of three and finally, I felt so conscious that I didn't want to drone on, that I decided my list is really a list of one. So here is what I'd like you to remember.

No matter what aspect of healthcare you are poised to undertake – no matter if you are a doctor, nurse, allied health or social worker, good medicine is about one thing – advocacy.

Advocacy – the act or process of supporting a cause. Our cause is our patients. Our act is coming to work.

In my mind there is only one reason why we choose to be in the profession – we want to be the best possible advocate for our patients. So what does that mean?

It means thinking broadly – beyond the diagnosis and the drug, beyond the Centrelink forms and the walking aids – and considering the whole patient.

It means being kind, being understanding and departing from what other people think about a patient to make up your own mind.

Sometimes it means staying back late and honouring a story. Or looking beyond the obvious and asking how you might want a similar health professional to help your mother, your spouse, your grandfather.

It means having and honing your own moral compass. Above all, it means having personal integrity. My favourite definition of integrity is how you behave when no one else is watching.

In ending, I would like to wish you my heartiest congratulations, my warmest wishes and the best of luck. In the words of Hippocrates, may you cure sometimes, treat often, comfort always.