Mentor Assessment 6

Name of Mentor: Dr. John Mansour

Profession: Surgical Oncologist

Location: U.T.S.W. Harold C. Simmons Comprehensive Cancer Center

Date of Visit: January 30, 2018

Time: 9:30 a.m. - 12:30 p.m.

Assessment:

Although I have already covered one of the patient interactions from this Tuesday in clinic, the whole day was full of interesting experiences that I wanted to discuss. One of these interactions was with a patient who I had seen before in clinic, an elderly woman with a Klatskin's tumor. She had had the tumor removed several months prior to this particular visit, and it is really quite interesting to follow up with patients like these. I enjoy seeing patients several times in clinic, because often times you really can see a difference in their quality of life, their energy, and just their overall recovery. It becomes much more apparent to the doctor than to the patient or their family, as they just see the sort of slow crawl that the recovery from these major surgeries is. This patient, in particular, is fun to see and visit with because she was actually born and raised in South Korea. She recently migrated over to the United States with her son, but speaks no English. This obviously makes it difficult to communicate with the patient because some important details can be lost in translation, and quite literally as well. With the son functioning as the primary translator, most information is fairly well communicated. It is interesting, however, to see the way that Dr. Mansour adapts with different cultures and the use of hand signals that are almost universal. He has definitely adapted to deal with unique cases, such as this, and it is so interesting to see how different cultures play into the healthcare field.

This patient was several months out from surgery, and had noticed a strange firmness stemming from the scar left by the incision. I went in originally with Lan, and was actually able to palpate the area of discomfort. I was not quite sure what to make of the firmness, although I was originally concerned, as was Lan, that it might have been a tumor, either a metastasis or a recurrent tumor of the original Klatskins. When I went back in with Dr. Mansour about it, he seemed to be less concerned about that possibility. He thought originally that it might simply be scar tissue, as the area that appeared hardened was in close proximity to the area of incision that had now scarred over. After a second round of palpation and some furthering pondering and discussion, Dr. Mansour realized that it was actually bone. I actually did not believe him at first, but he assured me that this was a real medical phenomenon. Essentially what happens is the body reacts to the area of incision and sees the damage that has been inflicted, and responds the same way it would had a patient had broken a bone. This process is called heterotrophic osteophication, and is rare, but does occur after major trauma, such as a car crash or major surgery. I was completely blown away that this actually occurred in the human body. The human body continues to amaze me with what all it does, and sometimes the random things it does on it's own. It can be so efficient and intelligent, and other times not so much. It truly is an incredible thing, the way the entire body works in unison to create bone or heal after something as traumatic as removing the entire right hemisphere of a liver.