

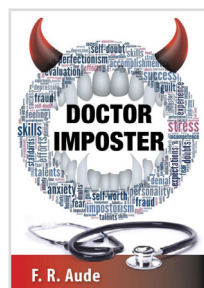
Book review

Doctor Imposter

Author: FR Aude

Publisher: FR Aude, 2024

ISBN 978-0-6486241-0-3



Most medical graduates will have powerful memories of their first postgraduate year – the period when, almost overnight, they had formal responsibilities and accountability for

their actions, and were paid. The latter is easy to celebrate, but what about the former? Many find this a stressful time as so much happens so fast.

Healthcare cannot slow down to match the pace of novices and then speed up as ability and confidence grow. Instead, the first postgraduate year is like jumping onto a moving conveyor belt and hanging on for a ride through a combination of heavy workloads, a series of formative ‘first’ experiences, missed meals, disrupted family and social lives, attempts to ‘fit in’ and, sometimes, worrying de-stressing behaviours.

The imposter phenomenon is a common topic of conversation among junior doctors. This book is unusual in that it is a kind of autobiography about an unusual graduate.

I say ‘a kind of autobiography’ because the book is a written commentary by the imaginary ‘imposter monster’ dwelling in the recesses of the author’s mind. I say ‘unusual graduate’ because the author did not cope well with internship, withdrew from medicine and did other things for several years before returning to medicine.

This book contains about 30 brief vignettes, many of which will be familiar to most medical graduates. There are the usual eye-opening moments, colleagues who are bullies or heroes, patient encounters that are beautiful or horrible, which in combination provide informal but powerful professional development.

We commence clinical placements with a lot of knowledge and skills but might not be sure about how to apply them. We learn through experience, and sometimes the lessons are tough. A summary might be that ‘naivety meets reality’ but we must take care to avoid coping through becoming cynical and resisting normal human emotions that, if managed, help us develop both personally and professionally. Not all the lessons in this book are ‘ordinary’. In most aspects, the author sounds just like many other doctors with respect to background and motivation but the author also appears to have suffered more personal and family tragedies than most, complicating responses, both emotional and practical. In this case, the outcome is positive; the author not only

survives but thrives, successfully completing the internship over a longer-than-usual timeframe to commence rural generalist specialty training.

This triumph shows that the imposter monster can be beaten and that the author is no fraud. As we travel along the journey, we can laugh or cry as we wonder if there might be a better way to prepare graduates and/or adjust workplaces and support.

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