Clerkship is the business end of the medical school curriculum. All that case-based learning in first year, those clinical methods sessions in second year and that endless pile of material in anatomy, physiology, biochemistry and pathology serve to prepare you for clerkship. Clerkship is when you get that clinical exposure that guides you in your ultimate career path, and when you get close contact with residents and faculty. Thus, it is prudent to try to do as good a job as possible, since if for no other reason the vast majority of clinical clerks want to become good clinicians. These Ten Commandments are a guide to doing well during Clerkship.

1. Care: Care about your patients, care about your colleagues, care about yourself. Nothing is more pathetic than a clinical clerk who doesn’t give a rat’s forepaw for what they are doing, and if you think that the residents and nurses can’t figure this out, you could not be more mistaken. Enjoy what you are doing. In medicine, we work too hard not to enjoy what we’re doing.

2. Be Prepared: Review your patients before rounds. Know what happened the night before, what the last labs are, what the current issues are. It is pretty pathetic to see a clerk fumbling with the chart on rounds trying to determine if the patient with the febrile neutropenia is still febrile. On the other hand, nothing impresses better than a crisp, clean and correct presentation, if for no other reason that you probably have all the key patient care issues in hand.

3. Be Organized: Recognize what you need to do and lay out a plan for how you are going to do it. Prioritize what needs to be done first. Use organizational aids; the Palm Pilot is the clipboard of the 21st century. When you present, do so in an organized fashion. As my mentor, Dr. Sanford Cohen, noted “no patient is so old and no patient is so sick that you cannot make an organized, focused presentation of their problems in five to ten minutes”.

4. Be Honest: Nothing is worse than a doctor who lies. If you don’t know the results, you don’t know the results. False information is worse than no information. Dishonesty is one of those cardinal sins that earns you immediate, harsh and long-lasting consequences.

5. Understand the Lay of the Land: No matter what the consulting faculty think, the nurses on the ward and the secretaries run the program. Treat all team members like people, not like bipedal answering machines. Know how the team or the service runs. If there is a manual or procedures sheet, read it – the people you ask will assume that you have to know how to read to get into medical school.
Don’t rely on urban myth – find out what the facts are. Remember, being a “brown-noser” on a clinical service does not impress.

6. **Know What You Know**: Despite the overwhelming sense of ignorance, be reassured that the first two years of medical school were not in vain – you actually do know a few things and need not be shy about sharing them. As you move through clerkship, you will learn more. Apply this knowledge to new rotations. What works for a twenty-four year old in Family Practice might work well for a sixteen year old on Paediatrics.

7. **Know What You Don’t Know**: Clerkship is that blissful time when no question is too basic. If you don’t know something, ask. Don’t do things “because that’s the way they are done”. Understand why one thing is done and another is not. Don’t become the clerk who is “often wrong, but never in doubt”.

8. **Be Respectful of Others**: The feelings and time of other people are of equal value to your own. Don’t forget that your personal emergency is exactly that – your personal issue, and one that the person who you are trying to get to do something might not care much about. Other people have issues of equal or maybe even greater importance. Raise important issues, but don’t complain all the time or you may run the risk of being labeled a whiner, and the important things you are trying to say will be diluted with things that don’t really matter all that much. Never, never, never complain around the secretarial and nursing staff! The fact that you are paying a mountain of money for tuition is a major issue for yourself and your family, but is not really a big personal issue for people whose take-home earnings may be less than your tuition. When there are cut-backs, doctors lose income; nurses lose their jobs and technicians lose their homes. Other people have problems too!

9. **Be Respectful of Yourself**: At the end of the day, the most important person you have to face is the one looking back at you when you brush your teeth. Be true to that person. Take time to relax, to eat well, and to exercise. Take time to spend with the people who are important in your life. Remember, the true test comes from within. Aim for a high moral code and stick to it. Another of my mentors, Dr. Morrison Hurley, noted that in medicine you can rise by your political savvy or by your integrity. At the end of the day, no one can ever take away your integrity.

10. **Don’t Forget What is Really Important**: … and it’s not money! Family and friends are the only things of real value. I have always been struck that people on their deathbeds have never regretted not spending more time at work. Spend time with the people who matter to you and cherish that time.