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## Need advice?

Marc S. Levine, MD

I'd been a GI radiologist at a major academic medical center in Philadelphia during a career that spanned ten winter Olympics, seven *Harry Potter* novels, six New York Yankees championships, three Meryl Streep Academy Awards, two Bush presidencies, and a partridge in a pear tree. Despite a productive career, something was missing. That all changed 13 years ago, when I became an Advisory Dean (AD) in my medical school. Bear with me while I explain.

For as long as I can remember, I've had this thing about giving advice. More of an obsession, really. Like Yoda from *Star Wars*. It was my idea for Michael Jordan to go out for minor league baseball, since his basketball career clearly was going nowhere. When Tom Cruise lost his sense of direction, who do you think suggested he check out Scientology? And, yes, I was the one who encouraged Donald Trump to take up politics as a break from all those tedious bankruptcy proceedings.

My passion for dispensing advice eventually culminated in my appointment as Secretary of Education. Just kidding. Make that one of four ADs in the Raymond and Ruth

Perelman School of Medicine at the University of Pennsylvania (for a few hundred million dollars you, too, can have your own medical school). I accepted this appointment against the advice of my therapist, who thought my multiple personality disorder could affect my relationship with advisees in need of an authority figure with a single dominant personality. Clearly, I was better at giving advice than taking it.

As AD, I meet with more than 30 medical students each month, showering them with my wit and wisdom, whether they want it or not. Given the sheer number of meetings, you might think I'd need to schedule one every 90 seconds to get home before midnight. Turns out you'd be wrong. Most of my meetings last a full two minutes. Kidding again. The honest truth is I spend at least 30 intensely uncomfortable minutes (not for me) with each and every student. That's right. Thirty. Minutes.

Three. Zero.

I see the wheels spinning as you try to process all this. How can I lock a student in my office for thirty whole minutes without being arrested for false imprisonment? First of all,

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my door isn't locked. It's closed. That's because of the confidential nature of our meetings. If a student tells me he's single-handedly responsible for global warming, his secret is safe with me. I'm morally bound to keep that information to myself, regardless of the consequences (in this case, an extinction-level planetary event). So whatever's said in my office stays in my office. Literally. The walls are lined with six inches of solid lead. Even Superman, with his X-ray vision and super hearing, can't eavesdrop on our conversations. But I digress.

Where were we? 30 minutes. Why 30 minutes? Whether I like the sound of my own voice (I do) is irrelevant. The truth is I have an agenda—a laser-focused approach for all of my AD meetings. I don't just dispense advice willy-nilly. I have a coherent plan (known only to myself) in which every piece of advice is strategically linked to the student's ability to tolerate me in large doses (ie, 30-minute doses). Ever hear of 30-minute abs? Same principle.

Here are some of the nuts and bolts. The rookies want to know how to study for all those multiple choice tests in their preclinical classes. I tell them not to worry about learning the Krebs cycle (whatever that is), but instead to look at old exam questions that might be reused by a tester too burnt out or demented to write new ones. If that doesn't work, my advice is to do what I did: GUESS. There are only four choices. That gives you a 33% chance of getting the answer right without even reading the question. Or something in that vicinity. Let's not squabble over details. I'm a radiologist, not a mathematician.

Meanwhile, my second-year advisees are all clamoring to know the ideal order for taking their clinical clerkships—the one ordained in heaven and expressly approved by the Surgeon General to best prepare them for a life in medicine. Unfortunately, I can't tell you here, because I don't want to give out such incredibly valuable information to anyone I'm not advising. Nice try.

By the third year, my advisees are finally ready to start asking serious questions like how to format their CVs or write prescriptions that are completely illegible. Then there

are the snivelers who become apoplectic about their test scores, having just missed the cut-off for honors by a single measly point. When this happens, I try to alleviate their intense anxiety and recurrent emesis by reminding them how other students just made the cut-off for honors by one point, so it all evens out in the end. You can imagine how reassuring it is to hear that someone else had all the luck. Am I good at my job or what?

This brings me to the granddaddy of all questions, the one that keeps my advisees lying awake at night for months on end—the career-defining, life-altering, transformative decision every student ultimately faces: Should I wear a white coat? Sorry. That's not it. Here's the real million-dollar question: What do I want to be when I grow up? Whatever specialty they choose, my role is to be an informed, knowledgeable, and patient advisor who gently guides my students to their one true calling like a shepherd leading his flock from a vast desert of confusion to a sparkling oasis of intellectual fulfillment. It only works because of my total and absolute objectivity, even if by some odd statistical fluke, every single one of my 437 advisees over the past 13 years has chosen radiology. There I go again. It's nowhere near that. Maybe half of my students—three-quarters at most—have gone into radiology, but who's counting? The main thing is that their choices must not be prejudiced by the opinions of friends, teachers, colleagues, parents, and loved ones. I alone am the facilitator of their dreams.

In the end, the best part of being an AD is the opportunity to interact with students less than half my age. I don't mean that in a weird way. It's not as if I'm stalking them. I don't lock anybody in the trunk of my car or show up when they're dissecting cadavers alone at night in anatomy lab. They come to my office of their own free will, so, in effect, my students are stalking me. Sometimes they even make me feel like a student myself. Minus the \$300,000 debt.

I suppose that's a good thing.

Until next time.