

*Written from my hospital bed (Hospital Day 3)...*

It can be easy to think we're invincible, until we're not—until we have that humbling experience that reminds us we are human.

Over the past several years, I've invested in my growth and worked to build the mental toughness I admire in my role model, retired U.S. Navy SEAL David Goggins. I've lost nearly 100 pounds, completed Ironman triathlons, pushed myself to succeed in medical and law school, and set my sights on future personal and professional goals. In his YouTube videos, Goggins repeats a simple, motivational mantra—"Stay hard." I try to carry that mindset with me to stay disciplined and push forward, especially when life is challenging or uncomfortable.

However, I now realize that we can take lessons from Goggins while still showing ourselves compassion and respect. Before medical school, I read *Being Mortal* by Atul Gawande, which highlights how illness can rob us of our physical autonomy—a theme I've come to intimately recognize over the past year.

It started with witnessing this loss of bodily autonomy in my patients. I remember on my internal medicine rotation when I discovered that my patient had Progressive Multifocal Leukoencephalopathy, a rare AIDS-defining, terminal illness. For over twenty days, I followed this patient, witnessing his neurologic exam and his autonomy progressively decline—first it was his vision, then muscle bulk and strength, then mentation. Eventually, he passed away. No Goggins mindset would have saved this patient.

Recently, I entrusted my own care to a surgeon. I expected the experience to be uncomfortable yet smooth enough to maintain a somewhat normal schedule with some minor adjustments. However, on post-operative day twelve, things changed. I began developing chills, lightheadedness, night sweats, and occasional moments of confusion. My body began to swell and increasing pain ensued.

With the swelling ballooning and the pain spiking, I let my Goggins mindset take over: *I can handle it. It's just a little pain...I'm fine. This will resolve.* I kept attending my clinical rotation as if I were not struggling or experiencing pain—I had patients to help care for and a graduation timeline to maintain.

As my symptoms escalated, I continued to reach out to my surgeon, even following up multiple times in person. Unfortunately, he repeatedly downplayed my concerns, attributing everything to a common cold without any sinus symptoms to support that conclusion.

Despite knowing the “red flag” symptoms of post-operative infection, it was challenging for me to rebut my surgeon’s judgement. Moreover, while I considered going to the Emergency Department (ED) on a few occasions, I decided instead to push my body, trusting his clinical judgement. After all, he was the attending physician, and I was the medical student.

In hindsight, my reliance on his overly reassuring assessments delayed recognition of a serious complication. Within a few days, my pain was no longer controlled with over-the-counter and prescribed medications. I felt powerless, and I dreaded the idea of needing to rely on anyone other than my surgeon to figure out next steps. Though I felt like a burden, I soon decided to call my friend—my triathlon coach—who rushed me to the ED.

I’m so thankful I called her, because by the time the emergency physician assessed me at the bedside, I had signs of a surgical abdomen—guarding, rigidity, severe tenderness to light palpation, and moderate abdominal distention. A CT scan showed several fluid collections concerning for abscesses. Drains were placed by interventional radiology, I was started on broad-spectrum intravenous antibiotics, and my cultures soon grew *Staphylococcus aureus*.

Four days ago, I was in unbearable pain, I couldn’t move in bed nor get out of bed, and I certainly could not take care of myself. I pushed my call button more times than I could count requesting additional pain medication. It forced me to truly think about the subjectivity of pain and how my “nine out of ten” was neither me jumping off the bed nor rolling around—it was me lying completely still and quiet, intermittently holding my breath. Though I always tried to be cognizant of it, I reflected on how many times over the past year I could have underestimated my patients’ pain levels based off the way they appeared to me during a snapshot in time.

Reflexively, I wondered if the medical team thought I was simply seeking more pain medications than I truly needed.

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*One day later...*

It is now hospital day four, and I’m finally starting to feel better. I can finally get up on my own and walk a lap or two around the unit. However, talking and walking (awkwardly, might I add) leaves me short of breath. I am exhausted and fatigued, and I’ve been dozing off near constantly, even in front of visitors. I should be discharged today, but I have been told that discharge does not necessarily preclude a wash-out procedure later this week.

My triathlon coach told me that my “one-hundred percent” just looks different right now, and I have had to reconcile that this new, uncomfortable reality is okay. It is a weird feeling to make your goal pacing the hospital unit one or two times in a day when you are used to your body being able to carry you 140.6 miles in the same amount of time.

Amidst all of this, I feel immense guilt as the patient, a perspective with which I have never had to grapple. As a result of my hospitalization, my mother had to make the impossibly difficult choice to leave my aunt—her sister—in Florida who recently suffered a spinal injury to be at my side. All the while, my mind keeps drifting to my grandmother, my nana, who was moved to inpatient hospice yesterday.

Today, on my discharge day, my nana called me on FaceTime to say goodbye, to tell me she loves me, and to let me know that she will always be with me in my heart. Lying in my hospital bed, I feel deeply selfish that my mom is here with me in North Carolina and that I am not there in Florida by my nana's bedside.

It feels like *déjà vu*: I've lost count of how many patients have told me about how their illness kept them from being with a loved one who was also hospitalized.

For the past year, I have been the one at the bedside tending to my patients, I have been in the operating room assisting on (or at least witnessing) their surgeries, and I have been the one lending a helping hand. Now, I know the feelings of being on the other side—the occasional thoughts of helplessness, the vulnerability, the intermittent feelings of lost dignity, and the lack of physical autonomy that can accompany illness.

At the same time, this week I have been reminded of gratitude and blessings. I think about the fact that I'm alive, that I made it to the hospital before becoming septic, and that I've received excellent care from the surgeons and residents here at the hospital. I also think about the nurses, nursing assistants, and additional medical staff who have cared for me while I cannot fully care for myself. Finally, I have reflected on the blessings in my life—the family and friends who have rallied by my side, who have sent messages of love and support, who have brought me food and sent me flowers, and who have spent time with me throughout this traumatic experience.

Although my concerns were met with reassurance that left me feeling dismissed by my surgeon, the experience has reminded me to never become void of compassion, because it can obscure the chance to step up for a patient in their time of need. Moreover, even in the hardest and darkest times, it's gratitude that keeps you attuned to the blessings that constantly surround us.

Ultimately, I have come to understand that neither Gawande nor Goggins were incorrect in their assessments of humankind. We need not repudiate toughness nor grit, but we should recalibrate our perceptions of them and should trust signals from our body before they become a form of self-erasure. While our will can be limitless, our body is not forever. We may not be invincible, but we are immensely strong despite also being immensely fragile all at once. We can do hard things, but we can also learn to trust our gut and seek help when we are hurting. We are surely mortal, but we are also resilient and remarkable, especially when we look after one another.

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