Conference one-upmanship

How an average guy can appear brilliant

BY HARRISON H. FARLEY, MD

During my 60-some years in medicine, I have witnessed enormous changes in the way we physicians and surgeons diagnose and treat illness and injury. In spite of all the advances, a few areas of teaching and practice remain remarkably unchanged. First and foremost is the need for doctors and nurses to be patient and kind to their patients. This is the sine qua non, and it remains the major part of good medical practice. Others are less important and seldom discussed. One of these is the fine art of “conference one-upmanship.”

I discovered this quite by accident during one of my first lectures on diagnosis at Cornell University’s medical school (now Weill Cornell Medical College) in New York City. It was 1950—before the advent of cardiac surgery as we know it.

We students were nervous and apprehensive as we sat in the auditorium and listened as our gray-haired professor presented a young patient, dusky in color, short in stature and with markedly clubbed fingers. The professor politely greeted the young man, then turned to us and asked if anyone would care to guess as to the young man’s medical condition. No one raised a hand—except me. I was from a small Midwestern college and sitting among mostly Ivy League graduates, many of whom had advanced degrees, but my hand was the only one that went up.

“It appears to me that he may have a condition known as Tetralogy of Fallot,” I said.

The professor was obviously shocked but acknowledged that I was correct. He went on to ask whether I had any knowledge as to
the exact nature of this condition. My fellow students could barely hide the smirks on their faces. But their expressions changed to looks of admiration when I was able to describe the four major cardiac defects that comprise the condition.

Afterward, in the hallway outside the lecture room, many of the other students complimented me, exhibiting a respect bordering on awe that bolstered my self-confidence. Rather than confess how I happened to know those facts, I decided that silence was the way to go. The truth of the matter was that during the previous year, I had done an extensive review for my college biology class on Helen Tausig’s groundbreaking description of the condition and Henry Blalock’s surgical solution. It was the only congenital cardiac condition that I knew of. Nevertheless, outspoken and unafraid of making a mistake, I had taken a big leap and hit the diagnosis head on.

I do not say that this was the correct, nor the most forthright, way for me to present myself (in fact, it could be considered deceitful), but it was an enormously effective way for me to gain my peers’ respect. And it bore out the value of the master poker player’s well-known adage: “Never show a winning hand if you don’t have to!” I didn’t realize it at the time, but I had made a running start in developing the fine art of conference one-upmanship.

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