

Melinda and I met as oncology trainees at the University of Chicago. One of the aspects of training with someone is that – because you are on parallel paths – you don't have the opportunity to watch your peers' professional interactions. I was never Melinda's student, I was never her attending. I never witnessed Melinda's care of patients, I can't testify first hand as to what she was like when she led rounds, when she clarified teaching point to a resident or how she dealt with the middle-of-the-night call from a sick patient.

What I can testify to is what Melinda was like as a colleague, and as a peer. As you have heard, and will hear, from other speakers up here, Melinda's character was complex, and sometimes subtle. She managed to be both quiet and feisty. She was amazingly gentle but could be remarkably stubborn and she was both assertive and tolerant. The characteristic of hers that I would like to share with you was her ability to listen and then, with impact and simplicity, help me understand a situation. She had an amazing ability to hear.

I think I noticed this trait early in our relationship. We were having lunch one day, having walked out of one of the grey gothic buildings of U of C to get a sandwich and sit somewhere sunny. I had some research work that was going to take up the next few hours of the afternoon and I ordered a coffee to go along with my sandwich.

"I just know, come three o'clock, I'm going to feel so incredibly tired," I whined. "You know, it's so weird, on my clinic days I never get sleepy or tired in the afternoons. I feel so awake. It's only on the days when I have some endless project in front of me that I feel so sleepy and tired in the afternoon."

Melinda looked at me and she had one of those pauses. You know the ones I mean. Then she was quiet for a second and said: "Maybe that's a discovery that you should pay attention to."

For the next year or so, as I struggled to sort out the kind of career I wanted, to figure out what kind of balance I wanted to strike between patient care and medical research, Melinda's words would come back to me.... Reminding me to pay attention to what I already knew.

The second example is more recent. Even in her illness, Melinda was always a ready and insightful listener. I was in my first year as an attending and there were not a few moments of sheer panic. Panic as I realized some misstep I had made in the care of a patient and would remember that I was the end of the line, and that these decisions were my responsibility, but that other people – the patients – had to live with the consequences of them.

One Sunday afternoon, shortly after the realization of one of these missteps, I was pacing around my apartment, trying to talk myself down. I was being washed over with those waves of nausea and anxiety that punctuate this job at times. I was trying to figure out what I was going to say when I went in the next day to talk to the patient; I was trying to keep things in perspective. As I often did when I needed perspective, I called Melinda.

"I just don't think I'm smart enough to do this job." I said, still pacing around my apartment.

Again she paused. Then she said: “Yeah..... Who is?”

She went on to say “You know Laura, all doctors make mistakes. Good doctors are the ones who know that they make mistakes.”

We then went on to talk through how I was going to approach the patient the next day and what I should be thinking about for the next steps of care. She not only had the medical experience to talk me out of panic but also the common sense to recognize what lay beneath it. Melinda’s words have been words that I’ve used since then – discussing the role of responsibility and the burden of error with trainees and residents; trying to welcome them to the job of being not just a doctor but a good doctor.

I was really blessed to have had a few years in which to know Melinda as a friend, as a peer and as a physician. One of the most precious things that this vicious illness stole from her was her ability to work. And she missed working. In the respites from care that she had, she was excited to see patients, to present her data, to participate in the collegiality and vibrancy of the work life. I asked her a few months ago what it was that she missed and she said she missed contributing on a daily basis. She missed a job where your primary responsibility is to think – with care and sometimes with love – about others.

All of us here have our own memories of Melinda. Of her funny voices, of her ability to giggle even when things seemed particularly dark. I will miss her fierce loyalties, her quiet courage, her attention and care to the details of friendship. And I, like many of you’re here, will miss a peer, a colleague and a friend. Melinda was a woman who walked this earth with grace and with compassion. She is a woman to imitate.