As a Type 1 diabetic myself, my position as a camp counselor for **redacted** has been particularly rewarding. From inspiring teenagers who are "too cool" to start checking their blood sugar levels regularly to helping a newly diagnosed diabetic feel accepted and understood, I have loved every minute of it. I will always remember one camper in particular, **redacted**. **redacted** was dependent on her sister to perform her pump infusion set changes. Each change was an ordeal; **redacted** had a stuffed animal to accompany her, counted down from 10, and yelled at her sister if she went too soon. I could see that this was not a *healthy situation*, and I suspected that **redacted** was trying to gain control over her disease, much like I had at a young age, by controlling the manner in which her set was changed. One night at dinner, I mentioned to **redacted** that I thought it might be a good idea for her to try changing her own infusion set. At first, she was resistant, even angry. But I was persistent in encouraging her, and finally **redacted** attempted it. She first watched me change mine, then practiced on her stuffed animal, and finally performed her own. I will never forget the smile on her face. She had finally gained control over her disease.

Another camper I remember well is **redacted**. **Jetuated**'s mother beat her when she was an infant, and eventually gave her up to foster care when she was young. In addition to having Type 1 diabetes, **redacted** had bipolar disorder. Most of the other counselors let me deal with the "problem campers," as they did not feel like dealing with them. As such, **redacted** and I soon formed a special connection, and she proceeded to talk almost exclusively to me. As the session went on, I noticed that **redacted** started to complain that she wasn't sleeping well and began to talk much more quickly, blinking rapidly. This reminded me instantly of my psychology education at **redacted**, and in particular, my time as research assistant for **redacted** studying patients with bipolar. This was classic mania. I brought this to the attention of the medical director, and together we discovered that **redacted** was not receiving her medications properly. The director instructed the nurse on the proper medication administration, and **redacted** quickly returned to a more calm state and was able to sleep better. **redacted** and I still have a relationship to this day.

Turning to another aspect of my medical-related experience, when I first began as a caseworker for **redacted**, I thought, "How could I, a white girl from an affluent family, possibly understand what it's like to battle a life-long crystal meth addiction?" Or, "How can I relate to an African American child who is failing his classes and whose parents are in jail?" But I soon realized that the empathy I had developed toward my diabetic campers, even though we shared a common chronic disease, was universal. Everyone has experienced a life-long struggle.

In my current position, I have found true affirmation in my desire to become a physician. Every time I open the door to a new examination room, it's a new face, a new story, a new opportunity to teach and to connect, a new set of facts to piece together in the hopes of forming a diagnosis and treating. I feel incredibly fortunate to have found a career in which I can derive such fulfillment and have the potential to impact the lives of others. While I am now unwavering in my resolve to become a physician, I have not always had such intentions.

What brought them about was numerous experiences such as the time during my shadowing when, engrossed in learning about the different layers of fascia, I absentmindedly rested an arm on the operating table as I peered into the patient's abdominal cavity. I could feel the warmth of his body and the hardness of his knee. Instantly, I was transported from a world of nerves and blood vessels to an image of his mother's concerned face from just the day before at his pre-operative appointment in clinic. It was then that I realized the importance of both scientific curiosity and empathy. This is the dual role of the physician. While a certain element of detachment is necessary for focusing on the job at hand, it is essential to never forget the person inside the body.

Through my work with patients/clients in various settings, I have realized that empathy is universal. Everyone has a life-long struggle. In addition to my commitment to empathy and compassion, my love of science also fuels my deep desire to become a physician.

As a back office clinical assistant for Dr. **redacted**, I have been fortunate that he has become my mentor. Dr. **redacted** has taught me what it takes to be an excellent physician. I have learned that in addition to compassion, medicine entails devoting oneself to life-long learning, collaborating with other healthcare professionals, and working actively toward the creation of novel treatments. Dr. **redacted**'s tenacity to follow what he thought would be the future of surgery has inspired me to do the same in my career. I want to be practicing the cutting-edge of medicine, and I am determined to be an active participant in its progress.