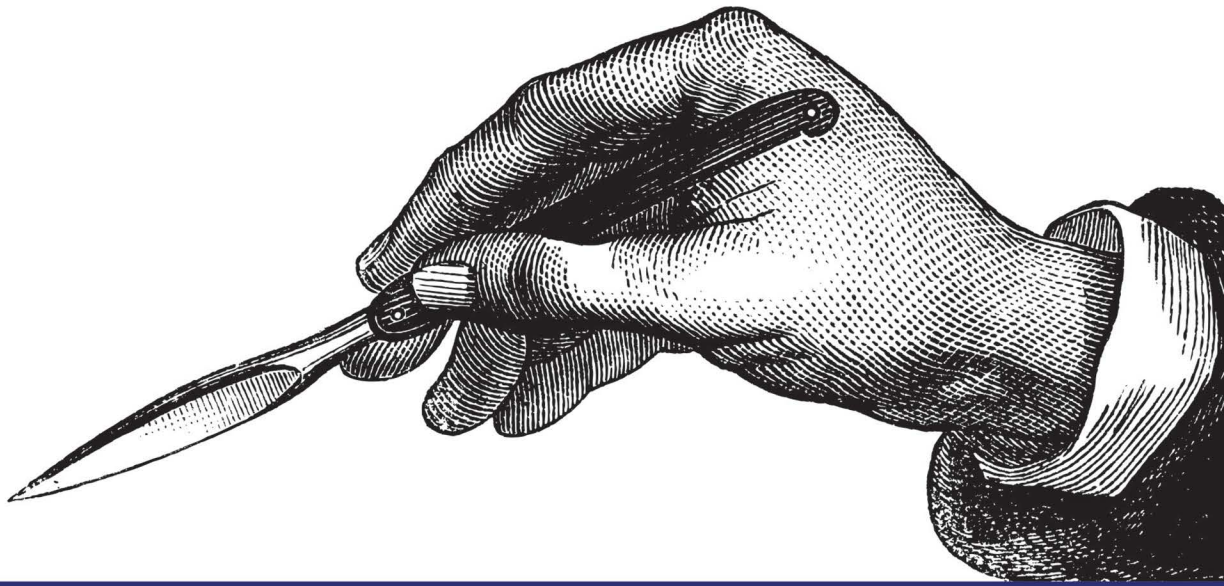
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Lectures on
The ART of Surgery



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CHAPTER 4

Self-doubt, Self-audit, Self-reliance—Optimizing Competence: Confidence Ratio

Harsha Jauhari

INTRODUCTION

This is a subject which is more philosophical than surgical, but it is important for every surgeon to have this in the mind. Self-doubt is important, and even more so for a surgeon. You must have doubt in yourself. It helps you to excel in your field. Self-audit is something you do yourself very intensely personal; it is not done in a group. Nobody can fool you except yourself, so if you are doing something, you must be very honest with yourself. "Am I doing this right, am I good enough, am I prepared?" However, too much of self-doubt can turn you into a nervous wreck, making you are incapable of doing anything. So, it has to be a contained, controlled type of doubt. Never let it become uncontrolled. Moderate doubt will lead you to wisdom.

Self-doubt may take many forms. When you are about to do something, you may be assailed by questions such as: "Can I do it? Am I good enough? Do I know enough? What happens if I fail? What will others say?" These are the thoughts that come to everyone of our mind. "Am I exposing myself, my ignorance in front of other people?" Suppose you are attending a conference where somebody is talking some rubbish and you know that he is talking rubbish, but you do not have the courage to challenge him. "What will people say?" Or you really do not understand what the person is saying, but you do not have the courage to stand up and ask, "I am sorry, I did not follow that" because you doubt yourself. Do not be afraid to doubt yourself.

There is nothing wrong with self-doubt. However, remember that nobody is perfect and that doubt is the first step toward truth. When you doubt something, you test what you are doubting and then come up with some ideas which lead you toward what is probably more correct. So, there is nothing wrong with self-doubt. As surgeons, you must all have it. If we did not have self-doubt, we would be like blocks of wood! To quote Amitabh Bachchan, "If I am happy and contended with my acting, I would stop growing. I need to be ignorant and hungry to be a better actor."

But having doubt in yourself is not enough. You have to take the next step, which is called self-audit. You have to take yourself to task in a very critical manner. Scan whatever you are doing. I feel everybody should audit their own cases. I may feel, I have done X number of cases of a particular disease. Relying on medical records is not a good idea. Making your own audit is important. What you felt, what you thought, what you recorded, how much was correct, how much was wrong,... it is very important to note down all this. It would be helpful for your publications, too. Start today. When you go home, make a note of what you did today. Write the salient features of each case. Periodically evaluate your perceptions of your knowledge.

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When I was very young, my teacher told me, "there is no surgical examination which you can fail as long as you know Bailey and Love." This still holds true. A simple book like "Short Practice" and he never had the courage to call himself a textbook. That book contains virtually every bit of information the world needs today. You can expand on it, you can consult other books. As a super specialist, you can even dispute what the author wrote, but you cannot deny that what the book says is generally correct and generally safe and accepted in practice. No matter how well you know that book, you will always find something new which will surprise you. So test your knowledge and your perceptions of your knowledge. You think you know something. Go back to the book and read it. You may find something new. Keep testing and evaluating yourself.

A surgeon is always judged by his peers. It is good to pay heed to what your peers have to say. But at some point, you have to work differently from the others. The foundations may be the same, but you have to stand on your feet. You must also evaluate your judgments, which is where your records come in handy. "Why was I wrong repeatedly? Why am I right? If I am right, good. If I am wrong, why?" Compare your performance with that of your peers. Observe how other people operate. See whether you are doing it better, see whether you doing it worse. If they are doing something well, try to pick it up. Compare yourself with your seniors. Your seniors are not necessarily better. Be brutally honest, are you better than them? If yes, wonderful. If you are not as good as them, then learn.

Analyze your strengths. Whether you are a very good physician, or a very good technical surgeon, whatever it is, reinforce your skills. If you have certain weaknesses, be aware of them. For example, "I can never understand ECGs, I just cannot. If I can see an MI there, the patient is probably lying down in chest pain, either you accept your weakness as something which is not important in your field and get somebody else to do it, or keep trying to correct yourself. Cross-check discreetly. Analyze the impressions you receive from others. You may think you are wonderful, your colleagues may think you are not. You may think you are useless, while they may think that you are very good. So, discreetly cross check, you get the impressions. You never make a bit sure and be receptive to criticism in your work. Not all criticism is aimed at making you feel small. There are a lot of people who will offer genuine and positive criticism.

From self-audit, you must move to self-reliance. Always make sure that you are right and then go ahead. Self-reliance does not depend on anyone but yourself. If you want the job done well, do it yourself. Nobody will do it as well as you think it needs to be done.

A realistic self-assessment accompanied by inputs from your colleagues is the best foundation on which to build self-reliance. Listen to your friends, listen to your peers, and listen to your seniors. Remember that you are usually better than you think you are. A doctor is in the top 1% of the intelligence bracket. A person who has a postgraduate degree is in the top 0.1%. If you go beyond that, you are among the top 0.01%. So, you are much more intelligent than you think you are. You are not so stupid as you think you are and do not keep pulling yourselves down. We people are in the habit of pulling others down because we do not compare ourselves with people who have been in the same line of work for 10, 20, or 30 years or more than us. When you get to that stage, you may be as good or better than them, but you cannot grow before your time. Do not feel negative, think positively. Do not be afraid to stretch your abilities. If you are content with what you have, you will never progress. You will

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never progress. You have to stretch your abilities a little bit more anytime. Have you ever tried to lift a small cow? You will never be able to do it. But there are people who can lift a small cow because they have been lifting that cow since it was a calf. As the calf grew, their strength grew, so they are able to lift the cow. That is the way to grow stronger gradually with time. They can do what you cannot because they think they can. You have to think that you can do it, only then you will be able to do it. But if you give up in advance, you never will. You have to believe that there is nobody in the world who is better than you when you are doing a job. God above and me below, that is it. At the back of your mind, you may feel a lot of other things; but while you are doing something, the thought in the foreground must always be that you are the best, and then you will do it.

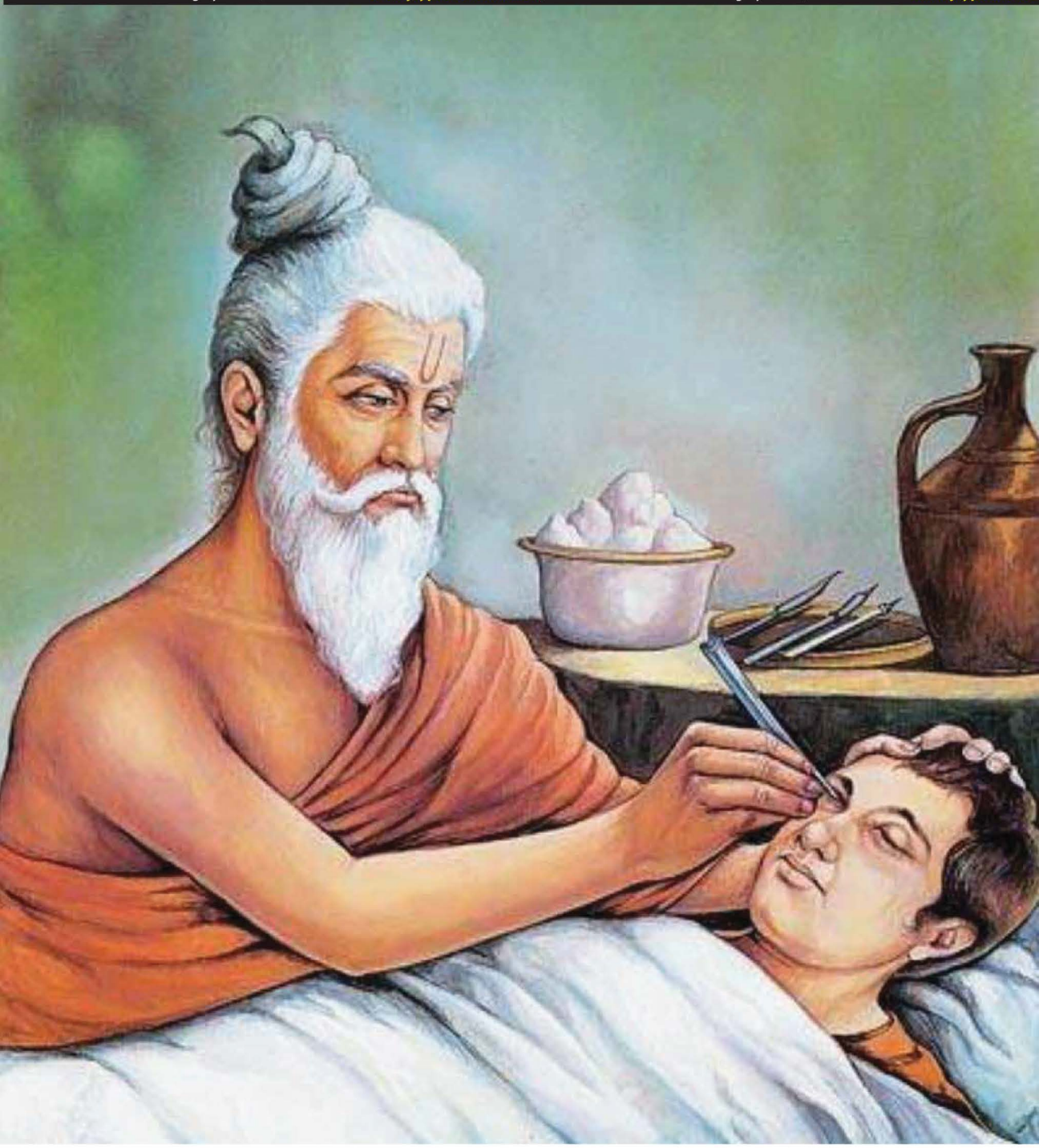
Now, this example perfectly conveys exactly what I am trying to say. If you want a thing done well, do it yourself. If you do not believe that you can do it yourself and always ask for help, you will probably never be able to do it. On the other hand, if you believe you can do it, but you do not have the required competence, you can get yourself into a mess. Now, the competence–confidence ratio is something very important. Your competence and your confidence must grow simultaneously. We do not want over competent surgeons who are underconfident; nor do we want overconfident people blundering around without competence. By and large, the ratio of competence and confidence should be 1. In other words, they should be matched. However, self-confidence is of utmost importance. As I have said very often, a surgeon should not be a follower. At the operating table, there is no democracy. You are the one and only surgeon. So, you have to lead and that requires self-confidence.

Competence is not static. You may be competent today, but you may be incompetent tomorrow. Keep in mind what the world is doing or you may be left behind. Confidence is not static either. You may be very confident at one point and you may not be confident at another. With certain operations, you feel very confident. With others, you may not be quite so confident. The stage of development also matters. From a student, you become a senior, then more senior, and then you become very senior. But with age, your agility starts declining. You have to accept that. It is a natural curve. Your confidence grows with experience, but then a stage comes when it starts going down. At every stage, you must self-audit. Keep rechecking, take help whenever required and be honest with yourself.

As surgeons we have to perform. We cannot theorize. I wonder if you have heard of General George Patton, one of the most famous surgeons general during World War II. He said "Take calculated risks but do not gamble. Let us try it, if he survives." We take calculated risks as surgeons. Physicians can theorize, surgeons have to perform and that is what is different from being rash. When you are aware of the risk, evaluate it and the chance of its working. Do it if you believe it will work. Whatever it is, do not be rash, never.

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