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Self-reflection supports the most important personal relationship I have access to—the one with myself. The machinations of this relationship continually shape my perspective and clinical practice. Self-doubt and self-reflection are critical components. In the era of burn out, I hope to provide a lens into my personal interplay of these topics to highlight the importance of self-preservation. For me, this starts with a look in the mirror.

A man stares back at me in silence, judging as light reflects from the mirror and illuminates my tired eyes each morning. The man sizes me up and I recognize that he often finds me lacking. Not one to give in to a challenge, I meet his gaze with all of the confidence I can muster. Goals for the day—exceed his expectations. Keep growing.

The man in the mirror accompanies me each morning, night, and moment on call—adding silently to his laundry list of lessons to clean up. As I tend to tasks, he minimizes my successes and points the microscope to the minutiae of my mistakes. He sews doubt at the operating table, one stitch at a time. I spot him in the eyes of patients and their families, contorting his face as I ask questions and attempt to answer their questions. Worse yet, he thoughtfully intrudes when I set about to read. He is the manifestation of self-doubt and his efforts are aimed at derailing even the simplest of my goals.

We have a malleable but inseparable relationship. The man in the mirror changes with time, experience, and training. These facets of residency chisel away at self-doubt. Newfound abilities, goals, and motivation to improve reshape my bracing inner monologue into gentle reminders, broader perspectives, healthy respect for work-personal boundaries, and a clinical practice that I can be proud of. Pretty soon the man in the mirror cannot resemble the man originally gazing back at me. Self-reflection enhances self-preservation and empowers me to shape him into the physician I aspire to be. Incorporated in revisions are the inputs and experiences of patients, peers, and teachers. In this way, we advance urology together.

I find self-doubt to be ubiquitous amongst my colleagues. Many urology residents and fellows, like myself, attempt to reshape their inner monologue into confidence and skill. I would be remiss if I left the gravity of my relationship with myself unmentioned in the era of physician burnout. How can I care for others in the absence of self-care? Perhaps the most critical personal relationship in Urology toward broadening my perspective on the world and enhancing my clinical practice belongs to myself.