

---

FIELD NOTES | SPRING 2017

## Toenail Chronicles

By Hugh Silk

“You know my last doctor was so nice. One time when I was in her office and I was very sick, she immediately called the taxi and sent me to the emergency room and paid for the taxi including the tip.”

How was I to compete with such a doctor?

“My last doctor also would give me an antibiotic to keep at home in case I got sick. I get sick a lot you know. I need a doctor like that, you know.”

I explained that I was not inclined to offer the same antibiotic policy.

She was wearing sandals and her toes caught my eyes.

“Your toenails are quite thick and long” I noted.

“Yes, I have old lady toenails now; the kind that need to be cut by the doctor.”

She looked at me inquisitively.

A test no doubt but one that I had passed many times over the years.

I left her quickly and returned with my trusty toenail cutting kit.

Toenail trimming is something I have always prided myself on. When I first assembled my little black bag as a medical student I asked my mother-in-law for a pair of toenail clippers. I had read Richard Selzer's short story entitled *Toenails*. I was enamored with the story of this Yale surgeon spending his Wednesday afternoons off at the local public library. By happenstance, he soon found himself trimming toenails in the basement bathroom. You have to read the story to understand how this came about.

The point for me as a young medical student was this was a way to serve our patients and show them that we were not the highfalutin doctors that we all knew about.

A mentor of mine at the time had noted that Jesus, with all of his abilities and power, would wash the feet of the sick and the poor to show them how much he cared but to also show

them his humbleness.

As a six foot three white male mostly from upper-middle-class privilege I saw this as a way to level the playing field even as a young student.

On home visits I would clip toenails and patients would rave about the service they were getting. When I served as a preceptor with residents I would teach them the importance of this act and other immediately gratifying services such as flushing out ear wax. It was one of the few things we could do as primary care doctors that allowed patients to leave with acute satisfaction, a rarity for us in the trenches. You don't often get someone saying 'doc I'm so thankful that 26 years ago you helped me to quit smoking and I avoided my lung cancer this year.'

But when you clip someone's toenails they leave happy that day and they feel they have been sincerely cared for.

Now I have an unfair advantage for cutting toenails. Superman has x-ray vision, the bionic woman had incredible hearing and I have a nose that does not smell malodors well. Nurses have asked me after trimming someone's nails 'how could you survive that stench?!

So while every healthcare provider has things they don't like; for some it's puss, for others blood, and still others it's phlegm; we also have things that we can overcome. The surgeon who can remove a gangrenous limb, the pathologist who deals with decayed bodies, and for me the odors of the body are things that I naturally can put up with.

And so I kneeled before this woman and worked toe by toe until her thickened elongated nails were trimmed as best they could be. A manicure this was not. But they looked much better than when she arrived.

Like most family doctors who do procedures in their office it was a time to talk and get to know my patient better. She told me about the time she had stubbed her toes, and about her former podiatrist who was a miracle worker. She talked about her cat's feet, her dog's feet, and on and on the stories went as I trimmed away at her toenails.

As I stood trying to straighten out my aching back and hearing my knees creak as they straightened, a sense of pride warmed my soul.

I had always been impressed with my mentors when I went into family medicine; they could put up with all sorts of insults, complexities and incredible dilemmas with grace and patience. Sure I could take it as an insult that this woman thought I should cut her toenails. Such an act might be beneath a physician. I knew plenty of PCPs who sent their patients to the podiatrist to have their nails cut.

"Not bad," she offered. "My old doc never cut my nails."

Ah ha. I had her there.

“But she did give me those antibiotics.”

The victory was so close, and then snatched away at the goal line. But she would be back. I would chip away at her resolve.

And she would keep my ego in check.

---

**Hugh Silk, MD, MPH, FAAFP, is a family physician and Professor in the Department of Family Medicine and Community Health at the University of Massachusetts Medical School. He graduated from McMaster Medical School in Hamilton, Ontario, Canada and did his residency at University of Massachusetts Family Medicine Residency in Worcester. Hugh moderates a weekly list serve of clinical success stories written by family doctors and learners called “the Thursday Morning Memo.” He teaches humanities in medicine workshops for family medicine residents and has used film in his teaching of medical students. Silk is a member of the medical school’s humanities in medicine committee.**

---

© 2017 *Intima: A Journal of Narrative Medicine*