

# dear residents

Getting into the Flow of Things

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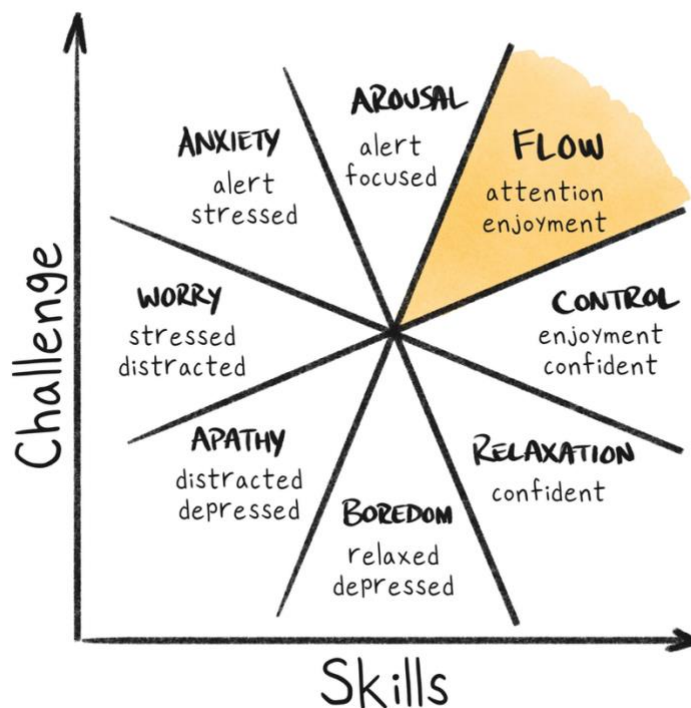
Dear Residents,

I remember times in my training when I felt completely overwhelmed, and other times when I was frankly a little bored. The ICU was overwhelming for sure. But there were also slow days in clinic when the no-show rate meant sitting around watching the clock.

And then there were times when neither happened. The work was challenging, but the challenge seemed to match my skills. I was completely absorbed in what I was doing. Time passed without my noticing it, and difficult work somehow felt almost effortless.

I did not know then that this particular pairing of challenge and skill had a name: **flow**.

The psychologist [Mihaly Csikszentmihalyi](#) described flow as the state in which we become so absorbed in an activity that our sense of time and even of ourselves recedes. Too little challenge and we become bored. Too much challenge and we become anxious. Somewhere between the two is that wonderful zone where the task stretches us just enough.



It will soon be September, and I remember that September of my intern year was when I first began to experience moments like that. I could admit and work up most patients without having to run every decision by my senior resident. I wasn't an expert. Far from it. But for the first time, my skills were beginning to catch up with the challenges being placed before me. It felt good.

Of course, there were plenty of opportunities to regress. The following month, at MD Anderson, I was overwhelmed all over again by patients on the bone marrow transplant service. But by the end of that month, I once again felt that I could handle most situations. The challenge had not disappeared. I had changed.

Perhaps my most challenging (and equally rewarding) rotation came during my second year, when I worked in the emergency department. We did not have an Emergency Medicine residency at the time. The ED was essentially "run" by four residents: one each from Internal Medicine, Pediatrics, Ob/Gyn, and Surgery. We became quite a team.

A crashing patient arriving fresh from an ambulance is about as far from a low-anxiety experience as one can imagine. But we supported one another remarkably well. I was good at putting in lines. The surgery resident was an expert at intubation. The Ob/Gyn resident kept us all calm and was often the quickest thinker among us. I discovered that I was good at gently holding frightened children while IVs were started and blood was drawn. The surgery resident was built like the Hulk, and I still remember watching him quietly and safely restrain a violent patient. We learned from one another because none of us could do everything, and together we could do a great deal.

I hope you remember that your team extends far beyond the Internal Medicine residency program. Nurses, pharmacists, therapists, technicians, consultants, and residents from other specialties know things you don't know and can do things you cannot do. Learn from them. Support them. And allow them to support you.

But also pay attention to those moments when the challenge in front of you and the skills you have developed suddenly seem to meet. They may last an hour, a day, or occasionally an entire rotation. You are working hard, but you are not watching the clock. You are stretched, but not overwhelmed. You are deeply engaged in the work in front of you. You are in flow.

Those moments won't happen all the time. Training is designed, in part, to keep moving the challenge just beyond your current abilities. But when you find yourself in that flow zone, notice it and enjoy it.

There are few things in medicine more rewarding.

Best wishes,

Dino Kazi