Everyone knows the most fundamental part of emergency medicine residency is learning how to determine “sick versus not sick,” which is often easier said than done. One night, at the end of my shift, a nurse grabbed me, saying the patient in room six needed a doctor now. The patient was a young asthmatic who had apparently walked into the emergency department minutes earlier, but was now unresponsive, gray, and with an oxygen saturation in the 50s. I had no trouble determining she was sick; as a relatively new intern, the bigger problem was figuring out what to do next. To quote Michael Scott from The Office episode “Stress Relief,” in that moment, “I knew exactly what to do, but in a much more real sense I had no idea what to do.” I knew I needed to focus on the ABCs and I knew what medications the patient needed in terms of asthma management, but in the acuity of that moment, it all jumbled together. I quickly grabbed an attending and we worked through the ABCs together as the proper medications were administered and the patient stabilized.

That patient taught me several important lessons about intern year and residency as a whole:

- **You know more than you think you do, but you’re not expected to know everything.** Looking back on that case, the first thing that struck me was that the nurses had enough faith in me to see this critically ill patient. Perhaps it was simply because I was the closest physician in proximity, but it still serves as an important reminder that even as an intern, people may look to you to make critical decisions. At the same time, no one expects that you have all the answers—after all, that is the point of residency. Someone should always be available to have your back and you should not be afraid to ask for help when you feel stuck.

- **Slow down, even when you feel there is no time to do so.** Inevitably, as you start to see critical patients as a beginner, just knowing that the patient needs quick interventions will tempt you to rush. However, the best decisions are usually made when you take a step back and look at the big picture. While taking a moment to think may feel like you are wasting precious time, making the right decision for the patient is usually more important than saving a few seconds.

- **Your demeanor can have real impact on patient outcomes.** Similar to the above, the way you handle yourself in critical moments is almost as important as the actual decisions you make. While it is natural to be flustered in unfamiliar situations as a new learner, being able to remain calm and compassionate in such scenarios is part of what makes an emergency medicine physician. Medicine, and perhaps emergency medicine especially, is unique in that our day-to-day decisions, even seemingly small ones, have direct impact on people’s lives. Mastering the way you carry yourself as you make such decisions is just important as learning the medicine itself.

- **Emergency medicine is a team sport.** I have known this for a while, and it is part of why I chose to practice emergency medicine specifically, but cases like this are always a good reminder. When I was asked to see the patient with asthma, I was far from alone. I was surrounded by nurses, medics, respiratory therapists, and multiple attendings who came to assist. Everyone had his or her own role, but at the end of the day, we were all there to save our dying patient. While being a resident can feel isolating and challenging at times, remembering that you are part of a team with a shared goal can go a long way.

While taking a moment to think may feel like you are wasting precious time, making the right decision for the patient is usually more important than saving a few seconds.