

# Diary of a Family Physician



**Seiji Hayashi, MD, MPH, FFAFP**, is the lead medical director of CareFirst BlueCross BlueShield, Washington, DC. Send correspondence to [aseijihayashi@gmail.com](mailto:aseijihayashi@gmail.com).

## 1:00 a.m.

I arrived in Osaka, Japan a few hours ago. Jet-lagged, I lie in my hotel bed unable to sleep. I have new email messages from colleagues telling me about their midday routines 13 time zones away. Although I had delegated my clinical responsibilities, my stomach tightens thinking about my patient who is waiting for a biopsy of a breast lump.

## 1:55 a.m.

David's memorial service is about to start back in the United States. David was a family physician and dear friend who passed away a week ago.

It was a sunny afternoon when he called me five years ago and said, "I have a case I want to run by you. What do you think about a 50-year-old male with a new-onset left foot drop?" After listening to the details, I asked him, "Is this you?" Later that week, an MRI found a brain tumor suspicious for glioblastoma, which was his eventual diagnosis.

## 2:30 a.m.

I remember David discussing a patient with a resident. David asked, "Your patient with cardiovascular disease, diabetes mellitus, and gout tells you that there's nothing he can eat. He was told by the cardiologist that he shouldn't eat fat. The endocrinologist said don't eat carbs. The rheumatologist said don't eat meat. How do you help this patient?" This was a classic scenario that David would use for an excellent teaching moment.

## 3:30 a.m.

I put in my earbuds and listen to David's NPR interview with Chion Wolf. The interview focuses on David's thoughts and experiences living with a terminal illness. I wanted to hear David's voice and be reminded of the person who embodied honesty, love, and kindness. Every time I listen to the

interview, I lament that I did not bring him more dark chocolate, his favorite snack.

## 6:00 a.m.

I doze off listening to the soothing voices of David and Chion Wolf. David asked me to accompany him and his family as he died and sign his death certificate. David donated his body to the local medical school and the death certificate was facilitated by a contracted funeral service. Glioblastoma was not sufficient for the cause of death, and it took several phone calls to figure out that I needed to specify that the glioblastoma was in the brain for the vital records system to accept it. Any edits to the death certificate require the process to start over, and receiving the death certificate was already delayed by a week. I wanted to make sure it did not cause any problems for David's family.

## 10:00 a.m.

As I get ready for the day, I remember one of the last conversations I had with David. He worried if he had done enough in his life. After I reminded him of the depth and breadth of his personal and professional achievements, as well as his ability to spread love and kindness, he seemed more at ease.

David served as chief physician, deputy director, and acting director for the Agency for Healthcare Research and Quality. His work on clinical safety, quality, and equity continues to affect every person living in the United States. One example of his impact was helping to create various guidelines that physicians use every day while he was scientific director for the U.S. Preventive Services Task Force.

David's influence is far-reaching, but his absence leaves gaping holes in the hearts of everyone who knew him. He was a role model to many. A mutual friend remarked, "David is who we all aspire to be."

In memory of Dr. David Meyers. ■

Send Diary of a Family Physician submissions to [afpjournla@aafp.org](mailto:afpjournla@aafp.org).

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