多読教材【エッセイ】

【患者に対する医者の心情】

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Choosing to Be Vulnerable With My Patients

Doctors don't like to let their guard down. But sometimes good things happen when they do.

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- 2 intravenous drug user. Thin and unkempt, an orange Orioles cap shadowing his heavily-tattooed face,
- 3 he had a serious infection and needed to stay in the hospital for several days. It was not his first time
- 4 being hospitalized.

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- He'll just walk out and not finish his treatment, the senior resident said. She had good reason for her prediction: According to his medical record, (1)that's what he did all the other times.
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(2)He won't leave, we told the resident. He promised us.

afternoon slid into evening.

- The next morning, during rounds, the patient swiftly ducked past us. We called after him, reminding him of all that we had discussed, how important it was for him to get the full course of antibiotics.
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9 My classmates and I felt like fools. (3)The resident shrugged and made a comment about how she compared as much. The attending doctor hustled us on to the next patient.

22 I've toughened up since then. Working in emergency rooms, I've learned to identify drug seekers from 23 (4)down the hall and sniff out lies. (5)You're not going to get this one past me, I think. You will not 24 make me feel like a fool.

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He told me how _{(7)a} series of bad decisions landed him in the E.R. that day. Stealing had put him in jail. He lost a delivery job after he got out. He got bored and lonely. He turned to drugs.

Then, the night before I met him, he shared needles with a person with untreated AIDS. I almost never inject drugs, he said. And, he made sure to tell me several times, I'm never doing it again.

He was earnest, his eyes seemingly brimming with honesty. I asked the social worker to (8) see if

Medicaid would cover his medications for exposure to H.I.V. I gave him my cellphone number in case
he needed help — something I had done only once before.

In trusting him, I felt vulnerable. His story meandered, and not everything added up neatly. Was I naïve to give him my number? What I had learned in Baltimore — and from many more patients since then — was that being an astute clinician sometimes meant not fully trusting everything that I was told.

We often associate being vulnerable with our personal relationships. Who says "I love you" first? Do
you say that only when you know the sentiment will be returned? As C.S. Lewis wrote, "(9)To love at
all is to be vulnerable."

Brené Brown, a research professor of social work at the University of Houston, espouses the power and necessity of vulnerability. What makes vulnerability so hard, she writes, is the "uncertainty, risk and emotional exposure." But she adds, "staying vulnerable is a risk we have to take, if we want to experience connection." Doctors don't often want to let their guard down. What happens when we do?

An hour after that conversation with my patient, a nurse came up to me, holding a used syringe between her purple-gloved fingers. (10)Look what he left in the bathroom, she said, gesturing toward my patient.

55	Should security kick him out?
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57	I was furious as I marched over to him. It's not mine, he said. I looked into his eyes. Did I believe
58	him? I did. Or, rather, I decided I would. I'll take care of it, I reassured the staff.
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60	A few minutes later, the patient beckoned to me.
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69	mattered was that he get his medications from the pharmacy.
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71	The next day, while I was at home, (11)my phone vibrated relentlessly with a string of texts and calls
72	from him. He cursed doctors, then cursed "the system," rambling on about $_{(12)}$ why he couldn't get his
73	prescription filled. I instantly regretted sharing my number with him. But I stayed on the phone, and
74	as I listened, I was able to figure out what had gone wrong. It was the fault of the system, it turned
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77	(a) They like any personal relationship, the one between doctors and patients is a complicated dance,
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79	knew I had not made myself vulnerable to my patient that day, (d)offering him my number and yet
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82	Within an hour, he sent me one more text: "Thank you. People don't know how I feel."
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The New York Times, 2019

設問

問1	that の指す内容を答えよ。
問2	下線部(2)を訳せ。
問3	下線部(3)"The resident shrugged"とあるが、この時の研修医の心情は何か、30~40 字の日本語で説明せよ。
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問7	下線部(7)を訳せ。
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問9	下線部(9)To love at all is to be vulnerable とあるが、どういうことか、40 字~60 字の日本語で説明せよ。
問10	下線部(10)を訳せ。
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問12	下線部(12)を訳せ。
問13	下線部(a)~(d)において、文法的、内容的に余分な語が一つある。その語とその直前の語を答えよ。文頭の語を答える場合、直前の語の欄には×を記せ。
問14	本文中の be vulnerable と同じ意味で使われている表現を抜き出せ。

解答欄

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