Physician and educator shares his love of the art and science of surgery.
AT PRECISELY 7:30 A.M. ON A RECENT SATURDAY MORNING, DR. ROBERT ESTERL, DIRECTOR OF MEDICAL STUDENT EDUCATION IN THE SCHOOL OF MEDICINE’S DEPARTMENT OF SURGERY, WALKS INTO UNIVERSITY HOSPITAL’S J. KENT TRINKLE TRANSPLANT UNIT. A GROUP OF RESIDENTS AND ONE MEDICAL STUDENT AWAIT HIM IN THE HALLWAY, AND, WITH FEW INTRODUCTIONS, THEY BEGIN TO ROUND.

Over the next two-and-a-half hours, the veteran transplant surgeon will listen attentively as the residents present their patients—roughly a half dozen gravely ill men and women who have recently undergone kidney and liver transplant procedures. His manner is interested and low key—even light, as they review stats and formulate treatment plans.

It is the third-year medical student’s first day rounding with Esterl, the attending physician with whom she will spend the next two of her six-week transplant rotation. After attending to two of the patients, he turns his gaze to her and a round of Socratic questioning—one of Esterl’s favorite teaching methods—begins.

“What is Beck’s triad?” Silence. Then, the student nails two out of three of the characteristics. The residents jump in with the third. The surgeon lobs another question.

“What’s the difference between an acute and chronic tamponade situation?” She gives part of an answer, and Esterl fills in the rest.

“What’s the treatment for a stab wound? What’s the first step in the ER?” The student answers, “You stabilize the airway.” “Yes. Absolutely,” replies Esterl. The questioning persists for up to 10 minutes after each patient.

“At this stage of training, it’s first observing at the bedside, then doing some procedures at the bedside; then gaining experience; then a capable intern and resident; then a competent physician; then an expert, after about 20 years, because you’ve seen so much at the bedside.

“You don’t have to remember all those little rules and regulations, you don’t have to remember every single fact! It’s more experience talking,” Esterl says.

For students, rounding with Esterl reveals a string of teachable moments—questioning, correcting, encouraging.

“His questions revealed that I had a lot to learn, but his kind manner made me feel at ease to learn,” said the third-year student. “I gained a lot of medical and surgical knowledge from that time.”

Since 1994, Esterl has been sharing his experience and skill as a transplant surgeon and keen interest in medical education at The UT Health Science Center at San Antonio School of Medicine. The recipient of numerous teaching honors, Esterl is a tireless and disciplined advocate for medical students; he makes himself available as a role model through long days spent in the classroom, lab, office and operating room.

His weekly schedule, which he can tick off for a visitor with ease, is a labyrinth of complexity comprising both clinical work for the transplant center (he specializes in kidney and pancreas transplants) and education.

Though Esterl supervises the School of Medicine’s education for all surgery students, he is directly in charge of the third-year surgical clerkship, one of the longest and toughest clerkships of the medical school experience. Esterl goes out of his way to make the experience a humane one for the perennially stressed-out third-years. When rounding, especially on weekends when organ procurements or operations are less likely, he particularly enjoys this give-and-take with students.

“I don’t intimidate the students, but I want them to be able to answer harder and harder questions, because it’s important to challenge them. Those are the opportunities they’ll remember,” he says.

“He’s one of the most approachable physicians that I’ve ever met in medical school,” says Jason Jundt, a fourth-year student who plans to pursue general surgery. “He makes you feel like it’s OK to talk to him. He’s never condescending.”

Getting the maximum learning out of the 12-week surgical clerkship is foremost in the minds of all the surgery faculty, as students who do not pursue the surgical route will have little exposure to the topic during the remainder of their education.

“There’s a push in medical schools to pursue primary care. So it’s my duty to provide students with well-rounded, basic fundamentals of general surgery and surgical subspecialties, so they know the classic presentation of the surgical illness and the diagnosis and treatment of common surgical problems,” Esterl says.

It’s a duty Esterl takes very seriously. But it’s also one he revels in—and lets students know just how much he enjoys what he does.

“He thinks it’s fun,” says Patrick Nguyen, a fourth-year who recently completed a five-week elective general surgery rotation in Austin.

“Lots of times, students going through surgery don’t expect to like it, and then they fall in love with it and say, ‘This is awesome!’” Nguyen says.
Getting exposure to surgery in the OR is one way Esterl stokes students’ enthusiasm and, as with rounds, he expects students to interact.

“I want them to participate in the OR. It can be an intimidating setting, but I try to make it as safe for medical students and residents as possible. I love it when I can supervise a young medical student to be able to close a wound correctly, and you see the joy on their face,” Esterl says.

Allison Daum, a fourth-year who observed Esterl in the OR during her clerkship, remembers a specific experience when he moved the intestines medially. “He told us ‘this is called the Kocher Maneuver, so you can see other organs better,’” said Daum, who plans to pursue a career in reconstructive surgery.

“In the operating room, he is a skilled surgeon and, being so, is comfortable teaching the residents,” says Tiffany Anthony, currently a Transplant Surgery Fellow at the University of Chicago (whose email is “want2opr8”). “When I am rounding with him or operating with him, he makes me feel as if there isn’t a problem I cannot solve or a technical challenge that I cannot accomplish,” Anthony says.

In 2005, Esterl and Dr. Stephen Cohn, chair of the department of surgery and the Witten B. Russ Chair in Surgery, implemented a “boot camp” to review and prepare fourth-years who will match into surgical residencies.

Resident Amita Shah, an inaugural boot camp participant, greatly enjoyed the experience. “We were in a group with everyone who wanted to be a surgeon. I thought, this is going to be my life, and their lives. We’re excited about it together.”

During the Surgery Boot Camp, Esterl invented a “top ten” list of how to survive as a surgery resident, recalls Nguyen. One of the items that Nguyen takes to heart is “Spend time with significant others.”

Although students appreciate Esterl’s calm and focused demeanor, he’s not all that shy about displaying a more relaxed side to students. Especially in one of the places he’s most at home—the operating room.

“I like background music in the operating room after the patients are under anesthesia,” says Esterl, who prefers music with “a catchy melody and beat.”

“The really fun part about being in the operating room with him,” says intern Joy Phannstiel, “is he can tell you how old he was or what grade he was in with every song. You haven’t lived until you’ve heard Dr. Esterl sing Queen’s “We are the Champions” while dissecting a kidney!”

A by-product of Esterl’s easy-going relationship with students and his enthusiasm for the field itself is that he’s able to motivate students to pursue surgery as a career. This is quite a feat, since surgery requires extensive postgraduate training, beginning with a five- to seven-year residency and followed by grueling fellowships.

Candace Dubose, a fourth-year student, is one example of a convert. “I decided while on rotation with Dr. Esterl to go into a surgical subspecialty. I made an appointment to talk to him a little bit about myself, and he was real encouraging and positive about a future in surgery for me.”

In 2005, Esterl helped found The University of Texas Academy of Health Science Education, an organization that recognizes and rewards outstanding faculty in all the health sciences, encouraging the promotion of faculty who possess the gift of teaching. Esterl is one of six UT Health Science Center at San Antonio members of the academy, the only one of its kind in the country that is statewide.

Esterl considers the combination of being a practicing surgeon and an educator a “dream occupation” and one that came about because he had “incredible role models in surgery” during his education at St Louis University.

“The best mentors inspire others to be like them,” says Anthony.

By Lynn Gosnell