Loss is an integral but deeply painful part of life. In addition to the loss of family members, friends and colleagues, those of us who pursue careers in medicine also grieve the loss of patients.

No single approach can adequately capture the diverse ways we experience loss and grief, and the range of healthy strategies fellow human beings have developed for coping. However, collated below are some of the common themes culled from the experiences of individuals who have coped with the sudden, unexpected loss of loved ones.

1. **Be aware of your feelings but try not to judge them:** There is no “right way” to feel, and there are no invariant stages of grief. People describe emotions after loss ranging from detachment to overwhelming sadness, emptiness to yearning, worry about oneself to worry about others, numbness to anguish, guilt to anger. It is not unusual to experience different emotions at different times nor is it uncommon to feel guilty about somehow not feeling “sad enough” or not being “strong enough.” Be connected with how you are feeling but in a compassionate way free of criticism.

2. **Prioritize the basics:** Sudden loss is inherently destabilizing. Reinstating your usual routines, to the extent possible, is a healthy response. Getting back to your normal sleeping, eating and exercise habits is grounding. Avoid self-medication with alcohol or other substances.

3. **Stay connected:** You may need some time alone, but protracted isolation tends to perpetuate and magnify grief. Reach out to friends, family members, or trusted others on a regular basis. Let them know how you are doing, ask them how they are doing, or simply talk about the things you would usually talk about. It is natural for loved ones to try to “fix” your feelings. It is OK to let them know you need them simply to listen. Give yourself permission to limit time with people who bring you down or tell you how you should feel.

4. **Take a break from reminiscing and deep thoughts:** One of the ways we process loss is by returning to reminders (emails, photographs, social media posts) and by contemplating mortality and the meaning of life. This is not necessarily problematic. Some people find it
helpful to express their memories, ideas and feelings creatively in writing or artwork or spiritually in meditation and prayer. However, as with most things, if you find yourself consumed by these activities put some limits on them. After 20 or 30 minutes, take a break and change your focus. Actively remind your brain of the full range of human experiences of which loss is fortunately only one part. Go to the gym, watch a video, cook a meal, get a snack with a friend.

5. **Allow yourself to have fun:** Grieving is a process; still, it is important to experience joy again. Loss reminds us that life is a gift. Begin to allow yourself to savor happy life experiences again. Returning to life is not forgetting.

6. **Be prepared for reminders:** Even after the pain of loss gradually becomes less acute, the memories and emotions of a loss may return to you at times you didn’t expect. These may be provoked by a song, a place, an event, or an experience on a clinical rotation. These occurrences remind us that a significant loss becomes integral to who we are and contributes to the depth we possess as human beings.

7. **Respond to loss with growth:** Painful life experiences are often beyond our control, but we can harness the power to grow from them. Some people find loss helped them become more empathic, more aware of the preciousness of life and relationships, more mindful of personal and professional priorities, or more connected with meaningful pursuits that replenish them. One of the resilient responses to loss and other traumatic life experiences is finding in them opportunities to grow.
Resources for Additional Support

As medical students and future physicians, it is a sign of self-awareness and strength, not weakness, to get the help you need.

Einstein resources include:

• **Office of Academic Support and Counseling** (Mary S. Kelly PhD, Director) – 718-430-3154

• **Department of Psychiatry and Behavioral Sciences** (Jonathan E. Alpert MD PhD, Chair) – 718-430-2730

• **Caregiver Support Program** (Weiler and Moses campuses, near cafeteria, Randi Kaplan LMSW, Director) – drop in 8:30-5 PM

• The Office of Student Affairs, Office of Medical Education, Clerkship Directors and other faculty are here to support you. **If you are having a hard time, let people know.**

• As always, in the event that you need immediate help or feel unsafe, please contact 911 or go directly to the Emergency Department.

Other resources:

**American Foundation for Suicide Prevention** [https://afsp.org/find-support/](https://afsp.org/find-support/) - information and support resources for survivors of suicide loss

Suicide Hotline 1-800-273-8255