

Approach patients with warmth and respect: an interview with Dr. Chung Hur, graduate of the Ewha Womans University College of Medicine

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How have the graduates of Ewha Womans University, who worked as doctors abroad after graduation, lived? Why did they decide to go abroad and work? This interview article was prepared as part of a project where current medical students seek wisdom from seniors through these questions, and I participated as an interviewer. An interview with Dr. Chung Hur(박정옥) was conducted on September 26, 2025, via Zoom (Fig. 1). Dr. Hur graduated from the Ewha Womans University College of Medicine in 1971 and moved to the United States in 1972.

Ewha Medical Journal (EMJ): Hello, Dr. Hur. Thank you for agreeing to this interview. We are truly grateful for your time, and we hope your insights will be of great help to our readers. To begin, could you share what motivated you to start your medical career in the United States?

Chung Hur, M.D. (Dr. Hur): In the decades following the Korean War, Korea remained in a very difficult state, both economically and politically unstable. So I decided to leave Korea while doing my internship after graduation. At that time, almost half of my classmates also went abroad.

EMJ: What made you choose your current specialty?

Dr. Hur: At first, I chose pathology. However, I realized I was quite good at carefully reviewing patients' medical histories. While examining specimens, I often found myself going back to the medical records, and at times even speaking directly with patients to clarify details. Through this process, I became increasingly interested in direct communication and patient care, which eventually led me to switch my specialty to internal medicine.

EMJ: From a medical perspective, what differences did you no-

tice between Korea and the United States?

Dr. Hur: At that time, the United States was undoubtedly more technologically advanced. But what struck me even more was the culture of referral. General practitioners readily referred patients to specialists rather than trying to manage everything themselves. This practice was closely tied to the strong legal liability in the United States—patients could sue very easily, and physicians minimized their risk by referring cases. As an internist, I still tried to treat as many as I could myself, but I recognized this as a significant cultural difference.

I would also like to highlight another important point: the approach to end-of-life care. In the United States, for the past 2 decades, there has been extensive education for both physicians and patients about making decisions in advance. Patients are encouraged to document their wishes while they are still capable of sound judgment, often through living wills, medical powers of attorney, or advance healthcare directives. In my own case, I clearly stated my choices—no cardiopulmonary resuscitation, no tube feeding, no intubation, and no respirator.

Such planning was not part of my medical training in Korea, but I understand that Korean society has recently begun to pay attention to these issues. I view this as a very positive and meaningful development.

EMJ: Working as a physician in the United States, you must have faced many difficulties. Could you share an episode where cultural differences created challenges?

Dr. Hur: One experience in the emergency room remains vivid. A 14-year-old girl presented with vaginal bleeding. At that time, I

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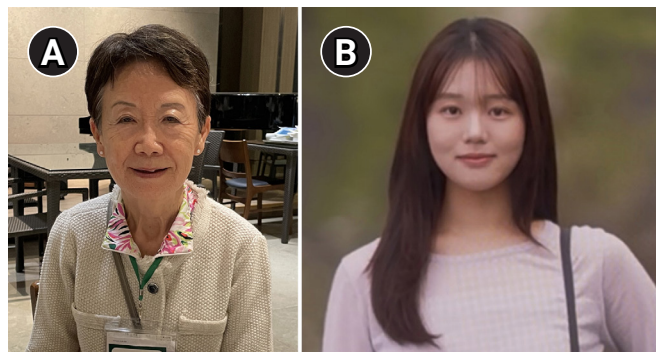


Fig. 1. On September 26, 2025, an online interview was conducted via Zoom with Dr. Chung Hur(박정옥), a graduate of Ewha Womans University College of Medicine, Class of 1971. (A) Dr. Chung Hur(박정옥, Photograph provided by Dr. Hur). (B) Kyungmin Kim, student editor. (Photograph provided by Kim).

could not imagine someone so young being sexually active, and therefore, I failed to consider the possibility of pregnancy and miscarriage as the cause. This mistake taught me an important lesson about cultural differences in clinical practice.

EMJ: How did you overcome cultural and language barriers?

Dr. Hur: Language was my biggest challenge. In Korea, I studied medicine using English textbooks, so academically I was fine, but conversation was very difficult. In particular, when a nurse asked about an order over the phone, I often struggled to understand and had to go to the ward to communicate in person. At that time, international trainees were provided with English lessons. A Polish professor gave me the most valuable advice for learning English: never separate your daily life from it. I immersed myself in reading newspapers, listening to the radio, and repeating what I heard. I have continued this habit to this day.

EMJ: Beyond language, how did you improve communication skills with patients?

Dr. Hur: I always tried to listen carefully and ask thoughtful, appropriate questions. Simple inquiries about family or work often provided me with very important clinical insights.

EMJ: That is admirable. At Ewha, we place a strong emphasis on the humanities, incorporating a 6-year curriculum that includes courses in related fields. I am currently taking a class on communication skills, and your emphasis on listening attentively and asking the right questions resonates strongly with me.

Dr. Hur: I think it's wonderful that communication training is being emphasized.

EMJ: How did your medical education at Ewha help you in the United States?

Dr. Hur: The knowledge I gained at Ewha Medical School was more than sufficient for working in the United States. Additionally, since I had completed an internship in Korea, I was already

proficient in basic clinical procedures such as IV sampling. That proved helpful whenever such tasks were needed.

EMJ: How did the values you learned at Ewha blend with your experience in the United States?

Dr. Hur: Over the years, I came to believe that our bodies are created according to the design of the creator, and there are aspects science cannot fully explain. Medicine and technology are vital, but I emphasized to patients that their bodies also possess the intrinsic ability to heal, and that they must actively participate in the process.

EMJ: Did you work alongside your classmates abroad?

Dr. Hur: Not with my exact classmates, but I did work with other Korean doctors. We supported each other a great deal, whether by sharing meals, exchanging food, or helping with daily practical matters. Since I had no car at first, others gave me rides to church or shopping.

EMJ: Did you experience prejudice as a Korean or as a woman?

Dr. Hur: I am sure discrimination existed, but I did not dwell on it. During the internship, I was under such tension I hardly noticed. As a resident, I did hear insulting remarks from patients, and sometimes people assumed I was a hospital worker rather than a physician because of my petite frame as an Asian woman. To make my role clear, I wore my white coat wherever I go.

EMJ: How did you cope with such situations?

Dr. Hur: I reminded myself of my clear goal, which is to be a competent physician. "You work towards the goal. You don't waste time or energy worrying about discrimination." That mindset carried me through.

EMJ: Your strong mindset is truly inspiring. What do you think was the most important effort behind your recognition as a physician?

Dr. Hur: Integrity is crucial. But above all, physicians must continually update their knowledge. Medicine evolves rapidly, and staying current is essential.

EMJ: Then, do you feel the qualities expected of physicians have changed over time?

Dr. Hur: Yes, physicians today must be fast. In the past, test results might have taken a week, but now results and communication are expected almost immediately. Therefore, physicians must adapt to these changes.

EMJ: Were there particular figures or events that shaped your convictions?

Dr. Hur: Reading Albert Einstein's autobiography inspired me to pursue medicine. Influenced by that inspiration, I went to Africa and treated indigenous patients in the mountains. Throughout my career, I also sought to live faithfully according to the teachings of Jesus.

EMJ: Those stories are truly fascinating. In one of my classes, we

discuss ethical dilemmas in medical settings, but we often conclude that you can only truly understand them through real-life experience. Could you share how you handled conflicts in practice?

Dr. Hur: Conflicts occurred often. For instance, patients with mild colds sometimes demanded antibiotics, which I considered inappropriate, or some might angrily request a different doctor. In those cases, I treated them kindly but followed my medical standards. Even if emotions ran high, a physician should never argue with patients.

EMJ: Could you tell us about your personal life in the United States?

Dr. Hur: I first went alone, but later I married and started a family. On weekends and holidays, I spent as much time as I could with my children.

EMJ: You also served as President of the Ewha Womans University Alumnae Association of North America. How did alumni activities influence you?

Dr. Hur: Interacting with diverse people helped shape my character, just like an artist sculpting. I added positive traits and tried to carve away the deficient ones.

EMJ: Over the years, what has being a physician meant to you?

Dr. Hur: I have always felt deep pride and gratitude for being a physician. To alleviate suffering and care for the beautifully designed human body has been profoundly meaningful to me. I retired from full-time practice in 2016, continued part-time until 2020, and worked as locum tenens until October 2024, when I fully retired. I wanted to keep working, but I realized my physical limits so decided to stop for the sake of patients.

EMJ: I've been most eager to ask this question. What principles do you emphasize when mentoring young doctors?

Dr. Hur: Patients come to us in distress. Approach them with warmth and respect. Listen carefully, make a plan, and treat them with dignity. Always honor their autonomy and allow them to choose.

EMJ: So, a good physician ensures that patients retain decision-making power over their own bodies. Looking back on your career, what advice would you give your younger self as a medical student?

Dr. Hur: Study hard, of course, but also cultivate the soft side—music, literature, and social relationships. I engaged in spiritual education that helped me appreciate how much I had been given. It is important to develop eyes and ears that recognize those blessings.

EMJ: Then, what should Korean students preparing for international careers keep in mind?

Dr. Hur: They must become comfortable with artificial intelligence and languages, and expose themselves to diverse cultures.

Korea has improved since, but the United States, as a multicultural society with more diversity and greater recognition of women's rights, requires adaptability. Those who embrace diversity will succeed.

EMJ: Finally, could you share one piece of wisdom for future generations?

Dr. Hur: One must have a clear life goal. For me, it was my faith. My guiding principle was to always give my best in every moment.

EMJ: Thank you, Dr. Hur, for your generosity in sharing your experiences. We have learned an incredible amount from you.

Dr. Hur's life illustrates what it means to be a "complete physician." She is a communicator who deeply empathizes with patients' suffering, a principled professional grounded in the most current knowledge, and a pioneer whose resilience turns every hardship into an opportunity for growth. She is also a leader marked by humanistic depth and a vocation to serve humanity, guided by a steadfast life purpose that integrates these commitments. I, too, resolve to embrace the wisdom her life imparts and to grow into a physician who heals those suffering from disease.

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Authors' contribution

All the work was done by Kyung Min Kim.

Conflict of interest

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