Still Buffering Ep360 "[scrubs]"

Published June 4, 2023 <u>Listen here on themcelroy.family</u>

[Intro, theme music plays]

Rileigh: Hello and welcome to *Still Buffering* a cross-generational guide to the culture that made us. I am Rileigh Smirl.

Sydnee: I'm Sydnee McElroy.

Teylor: And I'm Teylor Smirl.

Sydnee: Uh... It's been real busy lately, everybody.

Rileigh: Yeah.

Sydnee: I know.

Rileigh: Yeah, man.

Sydnee: Life's been wild. I don't... I don't know. I just thought I would throw that out there.

Rileigh: Yeah.

Sydnee: End of the school year. We're doing *SpongeBob: The Musical* over here. That's taking up a ton of time. It's going to be fantastic. I think everybody should make a trip to Huntington, WV this summer. [laughs]

Teylor: [laughs]

Sydnee: Last three weekends in June, come to the Ritter Park Amphitheater, check out our great show. I don't make any money off of it. I don't know if I—But let me clarify, I don't get paid for any of it. It's all volunteer. [laughs]

I just... I do it for the love of the game.

Teylor: Yeah.

Sydnee: The theater game. That's a thing theater people say.

Rileigh: It's not.

Sydnee: Maybe. Maybe it is.

Rileigh: Um, I mean, I work an office job full time now, so there's that too. It's been a busy time over here.

Sydnee: Yeah. We had a weird moment where I—We get, Rileigh and I, get our hair done by the same person.

Teylor: [laughs]

Sydnee: And Rileigh went in and couldn't do...

Rileigh: I used to get rose gold, like a pink, put in my hair.

Sydnee: Yeah.

Rileigh: And I can't do that now.

Sydnee: Couldn't do it, yes, because she is a professional and has to look professional and so can't have like... I don't know, what is your rule? Like, not a naturally occurring hair color?

Teylor: Oh, wow.

Rileigh: Yeah, I think that if I was in the office all the time, it wouldn't be that big of a deal because my boss is pretty cool.

But I think it's the going in a courtroom kind of thing, especially a courtroom in West Virginia. Not a naturally occurring hair is kind of the thing.

I'm also already working with, like multiple visible tattoos, so I'm trying to limit the amount of looks I get from people. [laughs]

Sydnee: Now I, on the other hand, was able to go in and... I was just going to do like my normal, my normal little cut, like my bangs were getting long and sometimes I get some highlights, you know, for the summer.

Rileigh: Mm-hmm.

Sydnee: And then she talked me into pink.

Teylor: Well. You do not have to have a... You're just a doctor. You don't have to look professional. [laughs]

Rileigh: Yeah.

Sydnee: That's what she said. She said, "Are you allowed to do this with your job?"

And I was like, "Yeah." Honestly, hospitals are so understaffed these days, I don't—I mean, there's no way. They're not going to fire me over pink hair.

Rileigh: Mm-hmm.

Sydnee: No way. I don't want to work there if they would. How do you like that?

Rileigh: Oh.

Sydnee: Eat that! [laughs]

Teylor: Well, if you want a career where you can really have as weird a hair and piercings, as tattoos, as you could ever dream of, you could always work in food service. The downside, of course, is you're working in food service.

Rileigh: [laughs]

Sydnee: Well, I don't have that—But then see, that's a skill set, though. Don't... Don't, you know. Don't degrade yourself.

Teylor: No, no, no. I mean I—

Sydnee: That's a skill set you have and I do not have.

Teylor: Oh, no, no, no. I like what I do. It is just... You know it's very not well paid, difficult labor, that people assume you must not be intelligent to be doing with your life.

Sydnee: No-

Teylor: Which is incredibly wrong, but you know, it's part of the gig.

Sydnee: No, I don't... I don't think that's true at all. And I guess I just wanted to find a job where I also could have whatever color hair I wanted or tattoos or whatever.

Teylor: Well, I guess you become good enough at anything and you can do whatever you want, 'cause anyone asking you're like "Well, you need me, so..."

Rileigh: See, that's what I was thinking, is I think that eventually at some point in my career, I could probably go back to having my pink hair. 'Cause I never had, like, vibrant pink hair. It was like yours right now, like highlights that were pink.

I think at some point I could go back to that, but my level of status I have right now is nonexistent.

Teylor: Yeah.

Rileigh: So...

Teylor: You'll get there.

Sydnee: I wouldn't have had pink hair as a med student.

Rileigh: Yeah.

Sydnee: Because I think that would have been a problem.

Rileigh: Yeah.

Sydnee: And I think... I mean, and that's not fair. I'm not saying that's okay. But like, I do think it would have limited some of my options. And it wouldn't have been so easy like... I mean, I was working really hard and doing really well.

Rileigh: Mm-hmm.

Sydnee: I'm not saying like I just skated through. Like I worked really hard. But like, I was able to get the residency I wanted and get the job I wanted afterwards and stuff.

And I don't know if that would have been as easy if I had had pink hair. I will say that. But now, most of the medicine I do is for free, so...

Rileigh: So there you go.

Teylor: It's interesting because I feel like doctors should look like—and probably true for lawyers too, actually—should look like... Like there should be a variety of types of people so that everybody feels comfortable with the service they're getting.

Like, I don't know, if I had a criminal situation and my lawyer rolled in with like sleeves and a septum ring, I'd be like "Alright, this dude's gonna take care of me. [laughs] He's gonna make sure I get out."

Sydnee: I mean, I think you're right and I hope that we're moving in that direction. Because like—And I will say, I know lawyers who have, like different colors in their hair and have tattoos and stuff.

Rileigh: Mm-hmm.

Sydnee: Like I—And I, definitely, I'm not the only doctor that has, you know, different colored hair or whatever. So I do think we're moving in that direction.

I still think there's sort of like an old school attitude on the part of some people that, I don't know, has some sort of idea of what it looks like to be professional that is no longer applicable to society.

Rileigh: I tell people often that the legal profession is about 50 years behind the rest of the world, constantly, just in terms of like, what's acceptable and who's in power and what's okay.

I think in another 50 years, maybe we'll be at a point where it's like, "Oh wait, you don't just have to wear like gray or black or brown suits and no tattoos and natural colored hair and no piercings, and look miserable all the time."

Sydnee: Mm-hmm. Well—

Rileigh: Not that all the lawyers I know are like that. But I just think that that's the society norm—

Sydnee: I'll tell you—

Rileigh: ... societal norm, right now.

Sydnee: I don't know if this happened with other professions, but I feel like that happened a little bit in medicine because of the pandemic. Because we were encouraged, at least at my facility, and I imagine in a lot of facilities, to wear scrubs all the time. As opposed to—Something that you could like, take off and replace quickly.

Rileigh: Sure.

Sydnee: You know, something that's disposable in the worst-case scenarios. But like, not to wear nice clothes from home. Like, at least at our hospital, the white coats, I mean, there are still some people who wear 'em I guess, but like for the most part, you don't see 'em much anymore.

Rileigh: Yeah.

Sydnee: Because they carry germs because you wear them all the time from room to room. A lot of that sort of artifice went away, and we wore what we needed to wear to take care of people.

And while some of that I've seen swing back, not completely. And like it is—I have not gotten... Nobody says a word to me for walking the halls in my Chuck Taylors, my scrub pants and a T-shirt.

Rileigh: Mm-hmm.

Sydnee: And that is like my uniform when I'm at work and... I mean, I wear... I don't wear T-shirts that have like, beer on them or something.

Teylor: [giggles]

Rileigh: [laughs]

Teylor: Just a T-shirt with the word "beer" on it.

Rileigh: [laughing] I'm going to get you that.

Sydnee: You know, you're both laughing, but I could take you upstairs and show you, like, 10 different T-shirts in my closet that have something to do with beer or drinking.

Rileigh: I just like that that's—

Sydnee: I have like a—

Rileigh: ... your go-to. Not like butts or like a bad word. Like, "beer."

Sydnee: I have a lot of brewery T-shirts. Like if we visit somewhere.

Rileigh: Yeah.

Sydnee: So I have a lot of shirts that talk about breweries and so they might have like a picture of a beer or like a little beer slogan. Or like I have, that show *Three Sheets* that used to be on.

Rileigh: Mm-hmm.

Teylor: Oh yeah.

Sydnee: I have a shirt that I love that says "*Three Sheets"* but you can't wear that to the hospital! You can't wear a shirt that says "*Three Sheets"* to the hospital. [laughs]

So I also do not wear those when I'm providing free medical care. I don't wear those. I have like, solid color T-shirts.

Rileigh: Mm-hmm.

Sydnee: The professional T-shirt. [laughs]

Rileigh: The professional solid-colored T-shirt.

Sydnee: You know, professional, solid color T-shirts.

Teylor: Yeah.

Rileigh: Of course.

Sydnee: [laughs]

Teylor: A business tee.

Sydnee: You know, you got your business tees and your...

Rileigh: Party—

Sydnee: Party tees.

Rileigh: Party tees.

Teylor: Party tees.

Sydnee: And your party tees.

Teylor: Your par-tees.

Rileigh: Par-tees.

Sydnee: Hey!

Teylor: Hey.

Sydnee: I don't wear tank tops. I feel like that would be too far.

Rileigh: Yeah.

Sydnee: Do you know who also always wore scrub pants and a T-shirt?

Rileigh: Oh, okay. [laughs]

Teylor: Here we go.

Sydnee: There you go. Dr. Cox on *Scrubs*.

Rileigh: Oh, Scrubs.

Sydnee: That actually... like, we're going to talk about *Scrubs* this week, but that—He actually like very much inspired the way that I dress [laughing] in the hospital.

I had a moment where I had the thought, "I mean, if Dr. Cox does it...Why can't... Why can't... Why am I wearing...?" Can we talk a second about scrubs, the clothing, not *Scrubs*, the TV show?

Rileigh: What about... what about them?

Sydnee: Can I tell you something about scrubs, the clothing?

Rileigh: Mm-hmm.

Teylor: Yeah.

Sydnee: Okay. So scrubs that you get, like at your medical facility, so the ones that they have tons of that they have on shelves and you're supposed to just go get the ones that fit you.

And then you're supposed to leave them there by the way, you're not supposed to take them home. Although that... People don't always stick to that. I, it is my belief, that they are cut, all of them, for a very specific body type. And it is a body type that is broad-shouldered and narrow-hipped.

Teylor: Oh, so, masculine.

Sydnee: Yes.

Rileigh: Mm-hmm.

Sydnee: I... But I don't want to sound like I'm accusing every medical facility of like, sexism.

Teylor: [laughs]

Sydnee: But I guess I kind of am.

Teylor: Yeah.

Sydnee: I mean, I have never had a pair of scrubs that I've gotten at a hospital fit me in a way that was the slightest bit comfortable.

They always, if I find one that doesn't like, squeeze me in the middle on my hips, then it's so big and baggy up top I look like I'm wearing my parents' clothes or some—like I look like a little kid walking around pretending to be a doctor.

Rileigh: Mm-hmm.

Sydnee: So I was always wearing ones that like, squeezed really tight around my hips and midsection, so then they would start to ride up.

The pants were always the wrong length, so I always had them, like, rolled up three times at the waist. So I had like this big bunch of material right at my waist with this super tight... It was a weird look.

Rileigh: Mm-hmm.

Sydnee: And I imagine I'm not the only person who had this issue. The scrubs that people wear on television, they're—I don't know where, what hospitals, they're working at, but those don't exist.

Like if you watch *Scrubs* or *Grey's Anatomy* or whatever, they look so nice in their scrubs. Those aren't real.

Teylor: Well don't—I mean, but they have like, brands that have come out specifically to cater to different body types now, right?

Sydnee: They have.

Teylor: I feel like I see those advertised?

Sydnee: Yes. Yes, there are... There are multiple brands that you can get. And that is what I, especially since I spent so much time working down at Harmony House, and I wanted something to wear there that would be really comfortable.

But also like, I mean, I get... I get pretty... I get pretty dirty [laughs] in my day-to-day job. I'm down like, on my hands and knees, taking care of people a lot now.

So, like the clothes I wear need to be something that is durable and I can immediately throw in the washer when I get home and wash over and over again.

So like, yes, there are many more brands of scrubs now, for all body types that feel comfortable and like, look kind of cute. Like I get compliments on my scrub pants sometimes.

Teylor: Ooh!

Sydnee: Because they look like joggers and they come in a bunch of fun colors.

Rileigh: Mm-hmm.

Sydnee: So it just looks like I have joggers in fun colors with like an incredible number of pockets on them.

Teylor: [laughs]

Rileigh: Sounds nice.

Sydnee: I just thought I'd throw that out there. That like, if you watch people in a medical TV show, the scrubs that they're wearing, I coveted those so much when I was a resident.

Because I never had scrubs that fit and looked like that, and they always felt weird. And were like riding up and rolling up and moving in weird places while I'm trying to, like, take care of people.

And I'm thinking, "Why am I having to think about my scrubs right now?

Which is part of why I resorted to wearing T-shirts or long-sleeved shirts with scrub pants to get away from the terror of the scrub top, which was always so miserable to wear.

Rileigh: Now this is... I gotta ask while we're on the subject of literal scrubs. It's kind of true, I was looking back at pictures from the show to make sure I wasn't misstating.

It's kind of true in *Scrubs*. I know exactly how it works in *Grey's Anatomy*, because that's a show I've seen like every episode of.

In *Grey's Anatomy*, they have like, different colored scrubs, depending on your level of seniority, basically. Like med students are one thing, then residents are another, and then attendings are another.

In this one it's like, dependent on department? Is that right, in *Scrubs*?

Sydnee: Yeah.

Rileigh: Or, like, where you're working? Is that... real?

Sydnee: [inhales]

Rileigh: Or does everyone just wear the same thing? Because I feel like every time I've been to a hospital, pretty much all doctors are wearing like the same color.

Sydnee: So I—Maybe that's true at other hospitals.

Rileigh: Mm-hmm.

Sydnee: Certainly that's possible. Not at any of the ones I've worked at, the ones I've worked at like the only... The only thing that like—

So there's like a general hospital scrub that everybody has access to. At our hospital, they're like, green.

Rileigh: Green. Yeah, I've seen those.

Sydnee: Yeah. So they're green at our hospital, at the other hospital in town they're blue.

Rileigh: Mm-hmm.

Sydnee: And those are the ones everybody has access to. The ones at the VA were this like powder blue, those were the best.

Teylor: [snorts]

Rileigh: [snorts]

Sydnee: Those were so soft and they'd been there a million years. Those were the best scrubs.

But [laughs] there are colored scrubs, like different colored scrubs for different positions in the hospital. Like everybody who wears a purple scrub—purple scrubs—in our hospital is a PCA.

Rileigh: Okay.

Sydnee: So, like that, kind of.

Rileigh: Okay.

Sydnee: But then—And then there's some loose... Like a lot of our respiratory therapists wear blue. But these are not rules.

Rileigh: Okay.

Sydnee: These are not hard and fast rules. And then like our nursing staff wears all kinds of different scrubs.

Rileigh: Yeah.

Sydnee: So... and they're—And that's also floor dependent because like, if you go to pediatrics, they wear some of the fun scrubs that have, like, cartoon characters on them and stuff.

Rileigh: I like those.

Sydnee: And like, you don't see that in the ICU, you know.

Rileigh: Yeah.

Teylor: Interesting.

Rileigh: It'd be nice if you did though. I'm sure if someone you know was having a rough time in the ICU, maybe they'd want to see someone helping them out, who you know, is wearing like Bugs Bunny.

Teylor: Yeah.

Sydnee: [laughs]

Rileigh: You never know.

Sydnee: There was one scrub brand this year that came out with a new

"ombre" scrub.

Rileigh: Mm-hmm.

Sydnee: But it's the colors of the bi flag.

Rileigh: [laughs]

Teylor: [laughs]

Sydnee: But they're not... They're not billing it as bi scrubs.

Rileigh: Mm-hmm.

Sydnee: Like it in no way says "these are bi scrubs," but they are like an ombre that starts like blue on each, on the top and bottom, and then goes to purple and then pink in the middle.

Rileigh: Uh-huh.

Sydnee: [laughs] So I don't know. Everybody's like, "Are these bi scrubs or are they ombre scrubs?"

Teylor: Now see that is, it's Pride month and I know I've got... The bisexuals are in the room with me right now, but I feel like if somebody that was going to like remove an organ came in and they were repping the bi flag... And this

is no hate to bisexuals, but the entire reputation of bisexuals is chaos. I might be like, "I don't know, I don't know, bud." [laughs]

Rileigh: [laughs]

Sydnee: I... I look at them—

Teylor: You don't know where your iced coffee and your car keys are. I don't know if I want you to put your hands on my spleen. [laughs]

Rileigh: Oh no.

Sydnee: And I—

Teylor: I support your rights.

Rileigh: Looking at my little—

Teylor: I don't support you touching my organs when my chest cavity is open.

Sydnee: And I was—

Rileigh: I'm looking at my little iced coffee sitting here with my fob disconnected from the rest of my keys, and I don't know where the rest of them are.

Teylor: [laughs]

Rileigh: I just have the fob now. I don't know where the rest of my keys are, so...

Teylor: I'm just saying.

Sydnee: And also you were definitely late. You were definitely late for this.

Teylor: Yeah.

Sydnee: Yeah.

Rileigh: I was... I wasn't. I wasn't...

Sydnee: No.

Rileigh: Oh. Okay. This fictional doctor.

Sydnee: This, this fictional bisexual surgeon.

Rileigh: Yes.

Teylor: The epitome of bisexual surgeon.

Rileigh: I thought you meant I was. I was going to say I usually am, but not today.

Sydnee: I'm always late. Listen, I'm not... I am talking—I am always late, always late.

Teylor: Just, you know, just like a scalpel in one hand, the iced coffee, doing the swirling of the ice—

Sydnee: The swirl?

Teylor: ... mating call, on the other hand, [as fictional bisexual surgeon] "We got you."

Rileigh: Yeah.

Teylor: [as fictional bisexual surgeon] "Don't worry. Finger guns."

"Oh no. I'm gonna die."

Rileigh: Oh no.

Sydnee: I just... I want something simple. It was a lot, like the ombre thing. And you had to wear the top and bottom together. So I was more concerned about—And also like the pink is the lightest part and it was in the middle.

Rileigh: Mm-hmm.

Teylor: Mm.

Sydnee: And I feel like that's a weird visual. I don't know. It was like, right over the crotch.

Rileigh: Oh.

Teylor: [laughs]

Sydnee: It felt like it was drawing a lot of atten-[dissolved into laughter]

Rileigh: Well...

Sydnee: I was looking at them and I—

Rileigh: That is not how I was envisioning it in my head, now that you say that.

Teylor: That's... That's not good.

Sydnee: My eyes were drawn immediately to the crotch because that's where the brightest color is. And so it looks highlighted. And I looked at them and thought, "I'm staring at the crotch. I don't want..."

And so I didn't want to get 'em. You know? 'Cause like I don't... I don't want people staring at my—And maybe it's just me. Maybe I'm the only weirdo out here, I don't know.

But the brightest color was right in the middle. And so my eyes were immediately drawn to the crotch. Are you looking for these scrubs?

Teylor: I-

Rileigh: I looked up bi flag scrubs and there's nothing there—

Teylor: [giggles]

Rileigh: —that you don't get anything for that.

Sydnee: If you look up "ombre scrubs" you'll find them.

Rileigh: Now, okay, wait—

Sydnee: I don't want to tell you the name of the brand.

Rileigh: Oh-

Sydnee: Don't... don't say the name.

Rileigh: I won't.

Sydnee: Because like, this is a controversial brand of scrubs that I

personally don't purchase.

Teylor: Ah.

Sydnee: [laughs]

Rileigh: I would like to point out that this one I just found is the only one that fits the description at all. I don't think it's from the brand you're talking about, because I think I know what you're talking about.

Sydnee: Mm-hmm.

Rileigh: It's... The product is titled "Neon Tarot Four-Pocket Bi Pride Scrub Top" and it is a black scrub top that is covered in little images of tarot cards that are all in blue, pink and purple. [laughs]

Teylor: Now that, I don't know, that person's operating on another level. That person, I'd be like, "Just like... Do what you gotta do. I trust you." [laughs]

Sydnee: I would wear—

Rileigh: I don't know—

Sydnee: I would wear those to, like, when I do my volunteer medical services. I think a lot of my patients would get a kick out of that, I think they'd dig that.

Rileigh: The model in this picture also was wearing jeans and has kind of like a middle swoop bang kind of thing going on. And I just am trying to picture this person walking in to like, provide me with medical care. [laughs]

Sydnee: I would love it. I'd be on board.

Teylor: Also, if they made that like just in like a button-up top, it would probably sell really well. That's a good—

Rileigh: Ohh, I'd wear that.

Teylor: That's a good print.

Rileigh: If that was just like a shirt, I'd wear it.

Teylor: Yeah.

Sydnee: Well-

Rileigh: I don't know if you can get away with just wearing a scrub top in public though. I feel like you can tell when something's a scrub top.

Sydnee: I don't know why you can't.

Rileigh: It's got like the structure and like little sleeves that kind of stick out, you know?

Sydnee: There is no—There are no shirts that are like that. [laughs]

Rileigh: Yeah.

Teylor: Yeah, that's not—

Rileigh: No.

Teylor: Can you cut the sleeves off? Can you... can you... can you?

Sydnee: There are people who do that. Like The Todd, for instance.

Rileigh: Mm-hmm.

Teylor: Oh yeah, that's right.

Rileigh: Mm-hmm.

Sydnee: Yeah.

Rileigh: Yes, we should stop talking about literal scrubs.

Teylor: Yeah, yeah.

Sydnee: The word scrubs.

Teylor: That's what this episode is about, actual scrubs.

Rileigh: Ah, Scrubs.

Sydnee: So *Scrubs* is a TV show that was on... When did that show start

again?

Rileigh: 2001, I believe.

Sydnee: 2001, is that right?

Sydnee: You can't just Google *Scrubs* to double check that?

Rileigh: I know I had to—

Sydnee: 2001 to 2010. [laughs]

Rileigh: I did the same thing.

Sydnee: Scrubs was about the life and... The lives and loves of hospital staff following at Sacred Heart Hospital, following primarily like an intern class. So like people just entering their residency, fresh out of medical school.

And like sort of their progression and then all the staff around them, the attendings, the nursing staff, the chief of medicine and then eventually like they added more characters like new residents. They brought medical students in. Like things progressed.

Which is where a lot of people feel like in later years the show sort of lost its appeal. I definitely think the earlier seasons are better.

I have often said, and I know many physicians feel this way too, it is the most accurate in terms of the experience of residency.

Rileigh: Mm-hmm. Mm-hmm.

Sydnee: I'm not saying all the medicine is always accurate, but in terms of what it's like to go through medical training, there's a lot there that's very realistic.

Like someone was doing their homework and talking to people who had really been there.

Rileigh: Mm-hmm.

Sydnee: To inform that vibe of the show. So for me it meant a lot because I watched it before medical school, and then I went back and watched it after medical school, because it all clicked a lot more.

Rileigh: Mm-hmm.

Teylor: Mm.

Sydnee: You know? Like, yes, this is what it feels like to kind of throw your life into this thing that's supposed to be a job, but then becomes very much who you are and what you are and how you think and feel all the time.

And it becomes very hard to be anything other than that.

Rileigh: Mm-hmm.

Sydnee: I mean it's something I'm still working out now at this point in my life is like, "How can I also be other things and not be a doctor all the time?"

Rileigh: Mm-hmm.

Sydnee: Like, "If I'm not a doctor in this moment, am I anything?" I know that sounds really sad. I don't mean that to be a bummer or anything.

Rileigh: That sounded a little depressing.

Sydnee: It's hard for me. I don't—

Rileigh: I get it. I get it.

Sydnee: My identity is so tied up with being a doctor and what that entails, helping people, taking care of others, putting others needs before my own, to my own like physical detriment.

Because like when you're a resident, you don't sleep, you don't eat, you don't pee.

If you're too busy and you're taking care, like, especially if you're in a surgical residency or something, and you're running traumas and you gotta pee? You hold it until the patient's stabilized and you can go pee.

Like you put everything above your own physical needs. And that bleeds into your life in so many ways, it becomes really hard to like function.

And I think you see that in the characters, who have trouble with relationships and friendships and just like normal functioning as adults. Because so much of who you are has become this thing you do.

Rileigh: Mm-hmm.

Sydnee: I don't know.

Rileigh: Do... Do people ever wear diapers?

Teylor: Ugh.

Rileigh: In an episode of Grey's Anatomy that's a plot point, is like they want to be in on a really long surgery, so they wear diapers so they don't have to leave.

Sydnee: You know—

Rileigh: Is that real?

Sydnee: I have never seen that. I would not... It would not shock me at all if people have done that. Surgeons are hardcore. I—

Rileigh: That kind of disrupts the whole surg—Like, sterile field—

Teylor: I was gonna... Yeah.

Sydnee: If you have to go pee?

Rileigh: ... business, right?

Teylor: That's not sanitary.

Rileigh: If you—

Sydnee: Well, I mean, I know people restrict their fluid intake—

Rileigh: ... pee, during the surgery.

Sydnee: ... so they won't have to pee.

But see, you've got to also eat lunch though, or else you'll lock your knees and pass out. I almost did that once. I almost plunged headfirst into an open abdomen.

Teylor: Ugh!

Rileigh: Okay. [laughs nervously]

Sydnee: Yeah. I felt what was happening and said something so that I could step back from the table and sit down and drop scrub.

Teylor: Is there... Is there coming back from that? If that happened, if you just faceplanted into somebody's...

Rileigh: [laughs]

Sydnee: Stuff?

Teylor: ... stuff.

Rileigh: Body cavity?

Teylor: I feel like that's like, "Okay, give us your license, you're done." Or does that happen and you're like, "What... Everybody gets one."

Rileigh: [laughing] "Everybody gets one!"

Sydnee: I'll be honest, I don't—Because passing out or almost passing out in the OR is... I don't want to say it's common, that—'Cause that's scary.

For everybody out there, for all people who may ever need surgery in your life, that's a really scary thing to say is like, "Yeah, people pass out in the OR all the time."

But it is not uncommon for people to get lightheaded or woozy. And certainly people have passed out. It's super hot. You're under these really bright lights.

If you're the surgeon, you're doing something, but for a lot of the other people in the room, it's a lot of holding something very still, especially as a medical student, you're often in charge of, like, holding a retractor or something.

Rileigh: Mm-hmm.

Sydnee: Which means, "Grip this tightly and then use all of your tension and energy and focus and everything to hold this exactly where it is. Do not move a fraction of an inch and stay that way for the next 20 minutes or something."

And so you tense up your whole body, so you can see where passing out is a frequent thing.

Rileigh: Yeah.

Sydnee: And then also these are people who aren't eating and drinking like they should.

Rileigh: Sure.

Sydnee: So it is... I am certain someone has fallen onto a patient. I'm certain that has happened. I mean, I don't know about it. I'm not saying I've seen it.

Rileigh: Mm-hmm.

Sydnee: But like it just statistically, it had to have happened at some point.

Teylor: Yikes.

Sydnee: The OR staff, especially like the people who aren't in scrubs, so like—Or aren't scrubbed in. "Scrubbed in means you're sterile." Like...

Rileigh: And you walk around with your hands like, out in front of you?

Sydnee: Yes.

Rileigh: You're sterile. And you've scrubbed.

Sydnee: You go—You wash your hands and arms up to the elbow, very intensely. You scrub under all your nails. Like it's this very long process to do a proper surgical scrub.

Rileigh: Mm-hmm.

Sydnee: And then when you walk in, you just hold your hands out and they slide your gown on you and slide the gloves on your hand.

And at that point, you can't touch anything. You can't touch your body, you can't touch your face. All you're touching is the patient.

So to drop scrub means you've...

Rileigh: Done something? Yeah.

Sydnee: You've touched something or you've taken the scrubs—whatever. There are people in the room who aren't scrubbed in, circulators and stuff to go run and get things as needed.

Rileigh: Mm-hmm.

Sydnee: And they're pretty good at spotting when, like, a med student's about to go down.

Rileigh: Yeah.

Sydnee: Anyway, that's the whole OR proc—I don't know if anybody was curious what it's like in there.

Rileigh: Well, see, Sydnee, I've watched a lot of medical TV, so really, I'm just... I'm well versed. [laughs]

Sydnee: If you ever see a surgeon in a medical show touching their face, and you'll see this sometimes—

Rileigh: I have seen that! Or like touching their glasses or their goggles or something. Yeah, I've seen that.

Sydnee: Immediately somebody will tell you to walk away.

Rileigh: Yeah.

Sydnee: Like you have broken scrub and you're contaminated. Immediately somebody will tell you to walk away from the table and you have to rescrub.

Rileigh: Yeah.

Sydnee: You have to start over.

Rileigh: That's pretty intense. I bet it's nice to have someone help you get dressed though.

Sydnee: Yeah.

Rileigh: That'd be nice.

Sydnee: And you do a little spin so they can tie your gown around you.

Rileigh: Oh, see that sounds lovely.

Sydnee: Yeah, you—They slide the gown on you and they tell you to spin. "Hold this tag and spin" and then you spin around—

Rileigh: It reminds me of like a-

Sydnee: ... and then you spin around and they tie you in.

Rileigh: Like a quick change in the theater except—

Sydnee: It is.

Rileigh: ... in the surgical theater.

Sydnee: There's an art to it.

Rileigh: It's pretty cute.

Sydnee: Medical students out there, let me give you a tip. Go in and introduce yourself to all of the OR staff before. Ask them about these things and your... it'll all be smoother for you when you go in to scrub in. [laughs]

Rileigh: We should talk more about the—

Sydnee: About the actual show *Scrubs*?

Rileigh: The show *Scrubs*, sure.

Sydnee: Yeah.

Rileigh: Um-

Sydnee: But first...

Rileigh: Let's check the group message.

[group message starts]

Sydnee: So, Father's Day is coming up. And also like our dad specifically, just had a birthday.

Teylor: Yep.

Sydnee: Although, Teylor, you stole him for his birthday.

Teylor: Hahahaha, I did.

Sydnee: You stole him away to New York.

Teylor: Hey, you all got like all of the last—I don't know—decade of his

birthdays.

Sydnee: 64.

Teylor: I got one.

Sydnee: [laughs]

Rileigh: We gotta... We gotta wait 'til next year to celebrate his birthday

now.

Teylor: No.

Rileigh: Can't do it this year. [laughs]

Sydnee: I have a present—No joke, I do have a present for Dad and I don't know when to give it to him now. I've just been keeping it in the house, wondering what do I do?

Rileigh: Yeah. I got a card and then I realized like, "Well, now it's a whole other month" and I've just been card sitting here.

Sydnee: I figured I would this weekend.

Rileigh: Mm.

Sydnee: Anyway, that's a side not.

Rileigh: Anyways...

Sydnee: You may be wondering like, what is a great present to give for any occasion? Not just like a Father's Day/Mother's Day, but like a birthday. Whatever.

When it's somebody you care about but you want to give them something personal, something meaningful. StoryWorth is a great idea if you're looking for something that would help you like, connect more or show somebody that you want to know more about them. StoryWorth is the perfect thing for that.

So basically it's an online service that helps you—and it can be your dad or anybody that you care about—connect more by sharing stories and memories. There's probably a lot of stories you've heard, especially from some of your loved ones, that you've known a long time like your parents.

But maybe, like our dad, they kind of tell you the same stories over and over again. [laughs] And maybe those stories change. But still, you want to know more. You want to know about other things.

And you don't always know exactly what to ask. Well, every week, StoryWorth will email your dad or whoever you choose to send it to, a thought-provoking question of your choice from a vast pool of possible options. So there's all kinds of unique prompts and you get to pick the one that you think would be the most interesting for you to learn about your loved ones.

So "What is one of your fondest childhood memories?" Or, "Have you ever feared for your life?" That's intense. Anything like that StoryWorth will send this prompt. They answer it. And then after a year, StoryWorth will compile all of these questions and stories -they can even put photos in there if they want—into a beautiful keepsake book that the whole family can keep and share for generations.

So it's a really great thing 'cause like I know, our dad has lots of great stories and he loves to tell stories.

Rileigh: Mm-hmm.

Sydnee: But you know, we're all busy. We're all adults now, and we don't always have time to hear all those stories. This is a great way where he could type those up quickly once a week and then we have those to share, to read, to talk about. It's nice.

That's something that I think would be nice for my kids as well to like know more about their Pop. So it's a really great present to give somebody that you care about, to learn things you had never even thought to ask 'em. So Teylor, if our listeners want to check out StoryWorth what should they do?

Teylor: Give all the fathers in your life a meaningful gift you can both cherish for years to come. StoryWorth. Right now for a limited time you can save ten dollars on your first purchase when you go to storyworth.com/stillbuffering, that's S-T-O-R-Y-W-O-R-T-H.com/stillbuffering to save ten dollars on your first purchase.

[group message ends]

Sydnee: Okay. We should actually talk about the show *Scrubs*.

Teylor: Yeah.

Rileigh: Yeah.

Sydnee: [laughs] So what did you—Had you ever seen it before, Rileigh?

Rileigh: Um, yes, in passing. I'm pretty sure probably at your house.

Sydnee: Yeah.

Rileigh: Before, it's like been on. So I knew the characters. Like I knew Zach Braff was up in there.

Sydnee: He's J.D., the main character.

Rileigh: Yes, but I was not familiar with the plots or things. So, not really.

Sydnee: There's basically J.D., who's a medical intern. Elliot Reed, who's a medical intern. And then Chris Turk, who's a surgical intern.

And those are sort of your three entering doctors, young doctors starting on their journey. You've got Dr. Cox, who is the attending physician who's training J.D. and Elliot.

You've got Kelso, Bob Kelso, the chief of medicine who's, like... He's the stand-in for the administration that's like destroying healthcare. That's him.

And then you've got Carla who's our nurse. Who is like teaching the young interns all the all the, you know, getting them used to everything, showing them the ropes, and then eventually becomes Turk's wife and the two of them get married and have a kid.

Rileigh: [sarcastic] Spoilers!

Sydnee: Well, I mean.

Teylor: [laughs]

Sydnee: And that... That's early on though.

Rileigh: Yeah, yeah.

Sydnee: They hook up early on. And then there's like ancillary characters that hang around a lot that are pretty funny.

Like The Todd, who's like your kind of stereotypical meathead surgeon who says terribly offensive things, who makes inappropriate sexual comments 24/7.

Rileigh: Mm-hmm.

Sydnee: And Ted the like beleaguered hospital lawyer who is under the thumb of administration. Sorry about your lawyer representation there.

Rileigh: That's okay. I'm pretty... It's pretty standard in the TV world. Not in real life. Don't take anything I say as speaking for legal experience. Just in TV.

I was going to ask if you... I feel like this is probably true, but I'm just assuming. Did you like feel like, in Elliot did you watch and feel a... like you related to her?

Sydnee: Yeah...

Rileigh: I felt like that was probably something that when you were, you know going through med school and watching the show you probably...

Sydnee: I did. Definitely more so than J.D.

Rileigh: Mm-hmm.

Sydnee: J.D. is a very specific type of guy character from that era, I feel

like.

Teylor: Zach Braff.

Sydnee: [laughs]

Rileigh: Is Zach Braff, yes.

Teylor: A Zach Braff character.

Rileigh: Who has continued to only play Zach Braff characters. [laughs]

Sydnee: But he's... He's the evolution of a—I feel like yes, it is Zach Braff. Yes, absolutely. But it's also the evolution of, like, a John Cusack character.

Teylor: Yeah.

Sydnee: Do you know what I mean?

Teylor: No, no, I mean that's all the same... It's the same guy.

Sydnee: What is that? I mean, like what I'm saying is, like, what would we call that guy? I'm trying not to be mean about it or like, diminutive, but like... That guy. We know who that guy is.

Rileigh: Mm-hmm.

Sydnee: Like he's smart. He's generally pretty nice. He's funny-ish, but not nearly as funny as he thinks he is.

Rileigh: Mm-hmm.

Sydnee: He's in touch with his emotions, definitely. So, like progressive in that way, like he'll cry. Um... [laughs]

Teylor: But he assumes his emotions are the most important ones in his relationships.

Sydnee: Yes...

Rileigh: He's like a... He's a Ted Mosby!

Sydnee: Yes, it's a—

Rileigh: It's a Ted Mosby.

Sydnee: Ted Mosby is in this same model of guy. Ted has a little more like structure to him. [laughs]

Rileigh: Yeah.

Sydnee: He's not quite so Jell-O, but like... But also like—

Rileigh: I feel like it's just the white male character who like, is doing just enough to be above, like the stereotypical "Ew" kinda guy. That like, you know in the movies, like you tell the girls, "Stay away from" or whatever.

Like ends up being the bad guy. He's a step above that. But he's aware of that.

Teylor: He—

Rileigh: So he's pretty confident that like, "Yeah, I'm... I'm a good one."

Sydnee: Yes.

Teylor: He is the protagonist.

Sydnee: [laughs]

Teylor: That is...

Sydnee: [laughing] He's the protag.

Rileigh: [laughs]

Teylor: That, that's... It's... I don't know. I mean, in anime it's just like

"protag."

Rileigh: Yeah.

Teylor: It's. "Oh, that's the guy" that you can... Other men can insert themselves into, because it's kind of how they'd like to see themselves.

Rileigh: Mm-hmm.

Teylor: And that's the character.

Rileigh: Yeah.

Sydnee: I do feel like though, that at the time—He's the guy who is... He's not going to stare at your chest as soon as you meet him, but also he's going to want credit for not staring at your chest as soon you meet him.

Rileigh: Yeah.

Sydnee: Right?

Teylor: But then he's also... There's going to be an entire fantasy sequence

about your chest in another cut.

Sydnee: Yes.

Rileigh: Yes.

Teylor: Which is fine, because we know deep down he's a good guy because we've gone out of our way to establish that deep down, he's a good guy. So it's fine.

Rileigh: Mm-hmm.

Sydnee: And it's... There's something—

Teylor: It's not a bad character, it's just... it's the same character over and

over again. [laughs]

Rileigh: It's a very specific character.

Sydnee: It is. It's a very specific character. It's also like... He constantly

gets a pass for being kind of immature.

Rileigh: Mm-hmm.

Teylor: Mm-hmm.

Sydnee: Kind of like a little boy. And like, that's part of the appeal of this

character is like you've got to take care of him.

Rileigh: Mm-hmm.

Sydnee: Which I guess is something that some people are attracted to.

[laughs] Not... not this person speaking. But I guess that is like—

Teylor: It's the quintessential nice guy.

Sydnee: ... some people... Yes.

Rileigh: Mm-hmm.

Sydnee: But I don't know. I always felt like there was an edge to J.D. where, like he is the nice guy, but also he's the guy who will say, "I don't know why you won't just see that I'm the nice guy.

"Why do you keep dating these bad guys when you won't just see like I'm the nice guy?"

Teylor: Oh no, but that is absolutely part of the Nice Guy persona.

Rileigh: Yeah.

Sydnee: Oh, okay.

Teylor: Yeah.

Sydnee: Well, yeah, that. Elliot—

Teylor: Yeah, it's, "I deserve credit for being nice" where the rest of us just

have to be nice.

Sydnee: [laughs]

Teylor: That's just part of society, buddy.

Sydnee: I like Elliot because she is such a mess in the beginning.

Rileigh: Mm-hmm.

Sydnee: And I always felt like it was refreshing. She's a female character who definitely like... I mean, a lot of the time, women would fall into two categories, right?

Like they're either, like, super cool, super hot girl who has everything together and like, but also just wants to kick back and eat a pizza with you.

Rileigh: Mm-hmm.

Sydnee: 'Cause she's just like that, right? I think a "pick me girl"?

Rileigh: She's just one of the guys.

Sydnee: A "pick me girl" is what that is?

Rileigh: Yeah.

Teylor: Mm-hmm.

Sydnee: Either that or like there's the super mean, intense, hardcore B-

word.

Rileigh: Mm-hmm.

Sydnee: And like Elliot starts to fall into that mold a little but then I really feel like they pull her back from that by making her kind of a mess. Like she's working really hard. She wants to be really good at this. Her main concern isn't relationships. Her main concern—eventually, that changes.

Rileigh: Mm-hmm

Sydnee: But in the beginning it's very much like, "I want to be good at this and this is really hard and I'm struggling." Obviously part of that gets tied into like her dad's a doctor and she's trying to make her dad proud of her and all that stuff.

Rileigh: Mm-hmm.

Sydnee: But I feel like they give her a little bit more room to be a whole person than, especially like in the early 2000s, women would get in a TV show.

Rileigh: Mm-hmm.

Sydnee: It kind of changes... There's a part where they talk about the way that—They talk about doctors' hair, and he talked specifically about women doctors and the way their hair looks.

Rileigh: Mm-hmm.

Sydnee: And it's funny because I've said it too, and I don't know if, like, I had osmosed it from the show. But there were a lot of times where I'd go to work and my hair was clean. And I did brush it. And that is it. And I can't say anything else for whatever was going on up there. I know I showered that morning. I know I brushed it after the shower.

And then it was just sort of this like, fried, frizzy thing on my head that eventually I would sort of slick back into a ponytail because I had work to do, and that was it. And they talk about that, and it was so relatable to me as like young doctor like, "Oh man, yeah." Because we all put our looks second.

And then that's when Elliot starts departing from somebody I can relate to. 'Cause like her thing is she gets up at three AM every morning so that she can do a full face of makeup and do her hair and put together her whole look and all that kind of stuff. And I was like, "Oh my gosh, I don't... I didn't know anybody like that in residency."

Teylor: Mm-hmm.

Rileigh: Mm-hmm. That has to be pretty rare.

Sydnee: I would think so.

Rileigh: Yeah.

Sydnee: There are attendings who do that for sure. Not me, but there are attendings who do that. But I—And on both sides. Like I—This is not—I'm not saying this is just a woman thing.

Rileigh: Sure. Yeah.

Sydnee: There's some guys who show up at work and you know, they put the time in. But Elliot, I started to lose track of her when she became really cool, and then it became about, like, looking for love. And then it became

about marriage. And then I was like, "Well, I can't really relate to all this stuff."

Teylor: Well, no, I don't—

Rileigh: You say as a... as a married... as a married woman? [laughs]

Sydnee: Well, it just—They made it more central to what she cared about.

Rileigh: No, I know. I know. I always thought that was— [crosstalk]

Sydnee: You know what I mean? It was a big motivator for her.

Rileigh: No, I know what you mean.

Teylor: Do her and... I know, like I remember watching it when it was on and I watched a bunch of it, the first couple of seasons, for this, but I didn't make it all the way to the end.

Do her and J.D. end up together or no?

Rileigh: I was going to ask that.

Sydnee: Do you want me to tell you?

Rileigh: Yeah.

Teylor: Yeah.

Sydnee: They do.

Teylor: Okay.

Sydnee: It's a long, windy road. Like she almost gets married to a

Dudemeister that she's dating.

Rileigh: Oh.

Sydnee: That's his last name.

Teylor: Oh.

Rileigh: Yeah.

Sydnee: Kurt? Is that it? What's his first name?

Rileigh: That sounds right. Right? Kurt?

Sydnee: I'm forgetting his first—Anyway...

Rileigh: Almost said "Turk," that's not right.

Sydnee: Dudemeister is his last name. I remember that. She is like... Like she cancels the wedding the day of. Like she is that close to getting married to him. And at the same time, J.D. has a one night stand. Well, no, he had just started dating the urologist there. And then she becomes pregnant.

And so they decide to, like, move in together and try to make it work, even though they weren't necessarily at that point, you know? They try to like stay together and you think he's going to do that. And then at the last minute, he's like, "I can't... I can't do this. This isn't..." Kim is her name.

And then they sort of drift apart for a bit and they end up back together.

Rileigh: So they're like a... They're the Ross and Rachel or the Nick and Jess or...

Sydnee: Yes, yes.

Rileigh: ... Ted and Robin.

Sydnee: They are the "will they/won't they" couple of the entire show.

Teylor: Okay.

Sydnee: Which is rough because they don't give a lot of motivation for, like the times that they fall apart and get back together.

Rileigh: Mm-hmm.

Sydnee: It's always hard to understand why, other than like sometimes it's just like J.D. changes his mind. Like at one point he steals her away from her boyfriend. And then just decides on a whim he doesn't want her anymore.

Teylor: Yeah, well, they have such a structure to the episodes where there's always a point... Like there's a lesson to every episode, sort of a setup that the introduction feeds into the end.

Rileigh: Mm-hmm.

Sydnee: Mm-hmm.

Teylor: So it's like the first time they got together, and it's kind of like it's built into the structure that they're not together by the end of the episode. It felt very strange.

Like they just got... annoyed with each other over the course of the day, and then that's it. And like it fit in a narrative structure, but it also just felt very against what the characters had done up to that point.

Rileigh: Yeah.

Sydnee: I feel like... That's one of one of the things that always irked me a little as I watched it, is like the idea that two medical interns would have trouble making it work is not shocking. Like their schedules are going to be opposite if they're on the same team, like they're going to be constantly passing ships. You know?

I mean they're never going to get to see each other. They're both going to be super stressed. They're both trying to figure things out. There's going to be a lot of intensity there.

But I don't know that they explain it that way, right? Like, I don't know that they tie it to, "It is almost impossible to have a relationship. Like, to be a good partner in those early years."

I know, like throughout residency, I was a really bad partner.

Rileigh: Mm-hmm.

Sydnee: I know I must—I mean, Justin hasn't said this, but I know I was!

Rileigh: [laughs]

Teylor: [laughs]

Sydnee: Because I was... Not only was I physically unavailable because I was not here, I was at the hospital all the time. But emotionally, the stuff that I was having to go through was so huge for me, I didn't have room for anything else.

And it was hard. And I would really get resentful if anything else was laid on me because I'm like, "I saw someone die today, how do you expect me to deal with anything else? Like, do you know what I went through? Do you know how hard I worked?

"And my brain and my heart and my soul are all completely empty now, and I've got nothing for you."

Rileigh: Mm-hmm.

Sydnee: So the idea that in that three-year, four-year, however long you're a resident period, you can't really maintain a successful relationship, that's not surprising.

Teylor: Mm.

Rileigh: Yeah, I will say that... I mean... I could imagine that based on things you have said and conversations we have had about your experience.

And then a show like *Grey's Anatomy* is like all about how hard it is and emotionally taxing, because it's much more of a drama.

And I feel like you're right. This one... Scrubs doesn't really show that like, "Well, maybe the reason that things don't work is because this is like a really hard point in people's lives." [laughs]

It's not like, you know, this isn't a show about relationships or like just a group of friends that hangs out and like, "Oh well, didn't work out."

Sydnee: Yeah.

Rileigh: Like, "Well, no, this is like, probably the hardest thing these people are ever going to do."

Sydnee: And I don't think they always lean into that as a... Sometimes they have like montages where like J.D. doesn't sleep for a couple of days or something.

Rileigh: Yeah.

Sydnee: Or like he's going in and out of the hospital a lot and it's just all the same. It doesn't feel... I mean some days feel... It doesn't feel like that. It's all... It's like moments of panic with stretches of yes, boredom. But then, like so many moments of intense panic and fear that you're going to screw up that... I don't know, your cortisol levels are through the roof the entire time.

Teylor: Well, that's what I found that the episodes I enjoyed the most were the ones that focused less on the inner relationships with the characters and more on just trying to say something about what it is to be in medicine.

Rileigh: Yeah.

Sydnee: Yes.

Teylor: Like I don't... I think it's an... And I think it's in the first season, right? The one where it's about how one in three patients die.

Rileigh: Mm-hmm.

Sydnee: Yes.

Teylor: And they each—Each of the three main characters have a patient and I think the setup is you think that one of them is going to die. One of them is going to have to face the death of a patient. And the end is that all of their patients die.

Sydnee: Mm-hmm.

Teylor: And that was just such a... Like you know, for a show that you might not like... "Is this a happy, like a goofy show? Is this a serious show?" It's like it's such a heavy episode to just kind of be thrown in there, but it's also poignant because it's, you know, addressing something that you all face directly.

Rileigh: Yeah.

Sydnee: I think they do a good job—When they do that, I think you're right. I think they do a really good job of it and that's when the show's at its best.

If you all didn't get to the part where... So Dr. Cox is with Jordan, his exwife, then wife, then ex-wife again. Like they're together the entire time, it's just they work better when they're divorced, they decide.

Rileigh: Mm-hmm.

Sydnee: So they get divorced and stay together. And she's a great character too. But they—her brother is played by Brendan Fraser. I don't know if you got to that.

Rileigh: I don't think so.

Sydnee: So he was like a guest star for a few episodes. And he shows up and he... Dr. Cox has to be the one to—And they're like best friends.

Dr. Cox diagnoses him with cancer. And the episode where he dies is one of the like... It made me cry when I—made me cry this time when I rewatched it. Because it's just... Like, it's so intense with Dr. Cox not being able to accept it. Like becoming delusional because he can't accept it.

Rileigh: Mm-hmm.

Sydnee: Because it's like... What he does is save people and here's somebody who means this much to him and he couldn't save him. There's another one... The Dr. Cox episodes speak to me more now that I'm old. There's another one where he has three patients in the ICU who all need transplants.

And they get... Like somebody comes in who's a donor, and they all get transplants. And then you find out that she had rabies. And so they've just given organs that are infected with rabies to these other three patients.

Rileigh: No no!

Teylor: Jesus...

Sydnee: And so then he has—you have to watch Dr. Cox try to save each one of them and each of them die one at a time. And at the end, he quits. I mean, he comes back eventually.

Rileigh: Yeah.

Sydnee: But like, he quits because he just can't do it. And that feeling watching him do that... Is like so... It's very intense. It's like, "God, I know... Oh, I know exactly..." that moment when he realizes, "I just killed three people," you know?

Rileigh: Yeah.

Sydnee: They do that really well. They just don't do it enough.

Rileigh: Well, it's that tough balance of it's a comedy show and you want to make people laugh...

Sydnee: That's true. [laughs]

Teylor: Well—

Rileigh: Also, when it takes place in a setting like a hospital where people do die and horrible things happen, you have to include some of that or else it's unrealistic if it's like "Oh every episode in this hospital is just a fun, goofy time."

Sydnee: It's a great hospital.

Teylor: Yeah.

Sydnee: They save everybody.

Rileigh: No one dies here. [laughs]

Teylor: And it's like, are you making a show for people like you, Syd, who will understand all of that stuff and like, that's something you can relate to. Or is it just, "We're trying to appeal to the everyman, so sometimes it just gotta be some goofy hijinks about relationships."

Rileigh: Yeah.

Sydnee: Well, I always thought one of the things they did that was so smart on a show like this is one of the nurses, Laverne, dies halfway through the series. The character dies. They bring this same actress back as her twin sister—

Rileigh: Oh my gosh.

Sydnee: ... Shirley.

Teylor: [laughs]

Sydnee: And she's... So this exact same character, essentially. And like, she's got the same, like, sort of mannerisms and... Like, it's the same character.

Rileigh: Yeah.

Sydnee: They've just renamed her Shirley and she continues to be in the show.

Rileigh: God, that's good.

Sydnee: And everything. So I felt like that was good for a comedy 'cause you have this moment where you're like, "Oh my god, like, they're killing off Laverne. How could they do that? Like, this is a funny show."

And then kind of undercut it.

Rileigh: Yeah. That's very good.

Sydnee: Yeah. I don't know. Did you like it?

Rileigh: Yeah, yeah.

Sydnee: Tey, do you like *Scrubs*?

Teylor: Oh yeah, yeah. I enjoyed... I enjoyed rewatching it. I know I watched it back when it was on, like, not consistently enough to know all the plot points, but it's a good thing to have on.

Sydnee: It's... Like it's funny enough, it's got enough interesting, like medical stuff. It's got some good... some okay relationship stuff.

I will say that, just as a caveat, if anybody has never seen it, it was made in the early 2000s and some of the early humor is so homophobic. Just, just so like... I don't know. Like The Todd who is the like, alpha male surgeon guy. They have a running joke that's basically like, "Well, he's probably gay and closeted." And it—Which is just such a, like, bad stereotype of the time. And like that he obviously is like sexually harassing people.

Rileigh: Yeah.

Sydnee: Like he smacks butts and stuff. You know? Like and all of it is played for laughs.

Rileigh: It's very much the same as a lot of other shows from that time.

Sydnee: Yeah, they have questionable, like racial comments that they make, sexist comments that they make. There's lots of that. It got better over time, I will say. And they went back and tried to like fix things.

Rileigh: Really?

Sydnee: Well, there's—So Dr. Cox, one of the running jokes is that he calls J.D. by girls' names all the time to make him feel bad about himself. And later on, he like clarifies, like "I just want to make it clear to you, I'm not calling you by girls' names because I have a problem with gay people."

And then he goes on to talk about how much he loves gay people. And then he's like, "No, I'm calling you by girls' names because you're a little girl because you're like a child. And I have to teach you because you're like a little child."

Rileigh: So that was his message to the audience?

Sydnee: That was to the audience.

Rileigh: Yeah.

Sydnee: To say, like, "We realized this was homophobic and now a couple of years have passed. And we're trying to fix it." [laughs]

Rileigh: [laughs]

Sydnee: [laughing] It's very clear that that's what they're doing.

Rileigh: That is better than nothing I guess.

Teylor: [skeptically] Yeah...

Sydnee: Which is... It's still sexist, but...

Rileigh: Yeah.

Teylor: Yeah, that's... That's the bigger problem there. But all right.

Sydnee: There you go. But all of that is in there. It does get somewhat better with time. But the show... I don't know. Anyway. I think it's....

I think it's worth watching occasionally, especially if you're anybody in medical training, you'll find a lot of it very relatable. They cribbed a lot of it from the book, *The House of God*, you can tell. Which is like about medical residency.

Rileigh: Hm.

Sydnee: And very resonant for those of us who have gone through it.

Teylor: Hm.

Rileigh: Well, thank you for having us watch this.

Teylor: Yeah.

Rileigh: It'd been a very long time since I'd watched any of it. So...

Sydnee: Well, thank you all.

Rileigh: It was good to go back and actually watch it.

Sydnee: I appreciate it.

Rileigh: Yeah.

Teylor: Nice discussion about scrubs and *Scrubs*.

Rileigh: And scrubs.

Sydnee: Scrubs and *Scrubs*. Uh, Tey, what's next?

Teylor: I thought we could talk about Paramore next.

Rileigh: Yeah!

Teylor: Early, early 2000s band.

Sydnee: Nice!

Teylor: Still... They just had an album release, so they're still, they're still

out there still playing out, but...

Rileigh: Mm-hmm.

Teylor: ... you know.

Sydnee: Awesome. Well, let's do that.

Rileigh: Yeah.

Sydnee: All right. So next week we'll check out Paramore. Thank you both for watching *Scrubs*. Thank you listeners. You should go to maximumfun.org for lots of other great podcasts that you would enjoy.

You can tweet at us @stillbuff. You can email us at stillbuffering@maximumfun.org.

And thank you to the Nouvellas for our theme song, Baby You Change Your Mind."

Rileigh: This has been your cross-generational guide to the culture that

made us. I'm Rileigh Smirl.

Sydnee: I'm Sydnee McElroy.

Teylor: I'm Teylor Smirl.

Rileigh: I am still buffering.

Sydnee and Teylor: [sort of in unison] And I... am... too.

[outro, theme music plays]

Rileigh: Should I... Should I make you all watch Suits? It's a real show.

Sydnee: Is that about lawyers?

Rileigh: It's about lawyers. [laughs]

Sydnee: Really?

Rileigh: Yes.

Sydnee: It's a real show?

Rileigh: Yes.

Sydnee: Oh my gosh. Okay.

Rileigh: Megan Markle was on it.

Sydnee: Is it as funny as *Scrubs*?

Rileigh: No.

Sydnee: Oh. Well... If you wanna make us watch it, we will.

Rileigh: [laughs]

[ad break]

Maximumfun.org.
Comedy and culture.
Artist owned.
Audience supported.