Amanda:
So my guest today is Megan Bryden. Welcome, Megan. I'm really excited to chat with you. Megan's going to talk to us about her impactful narrative, which was called *Lying for a Living*.

Megan:
It's funny because I've been chewing on this for a while—honestly, probably since my second year as an MRT. I had a situation where I did imaging on a child who had been coming to the department for quite some time. The usual techs were on vacation, so I ended up doing the case. The parents were lovely, the child was wonderful, and the images were clearly terminal.

I had a nice chat with the parents, and then they went off to the oncology department. When they came back, they said, "You knew. You knew, and you didn't tell us." I can't even fathom what it's like to get that kind of news about your child. After they left, I just collapsed on the floor, sobbing. It really hit me—this isn't just a job. These are people's lives. That moment stuck with me. Over time, it built up, and I could never quite shake the feeling.

I tried writing about it—pieces called *Poker Face*, *Janice*—but I never quite captured the residue that lingers because you care so much. Eventually, it all came out in this poem, *Lying for a Living*.

Amanda:
It's about that sense of knowing something before the patient does—especially bad news—and having to carry that. It's powerful, and not something we talk about enough. That's why this piece has had such an impact. MRTs and radiation therapists all have patients they remember. It's our job to do the work, but we're still human. Especially when you're just starting out, you haven't learned how to protect yourself emotionally.

Megan:
Exactly. When I was a student, I always got decent evaluations—not the best, but solid. I often got feedback that I talked too much to patients. I grew up in a small town, so I'd chat about local things—houses selling, festivals, fireworks. That's just how I communicate. I never really had strong emotional walls, and I think that's actually a good thing. We talk about "therapeutic relationships" and being "professional," but at the end of the day, we're carers.

If we don't learn how to feel and then release those feelings, we end up pretending we don't have them. I've absolutely loved some of my patients. In pediatrics, you go to more funerals than is probably healthy. But that's part of the process. We need to teach MRTs—students and professionals—how to navigate these emotions instead of just putting up walls.

Amanda:
Yes, and I think that's why your piece resonated so much. Everyone knows that struggle, but no one talks about it. What kind of feedback have you received?

Megan:
Honestly, I didn't expect much. I just wanted to get it off my chest. But the feedback was overwhelming. People reached out from all over—thanks to LinkedIn, Twitter, Facebook. It was shared so broadly I couldn't even keep up. It clearly struck a nerve.

There's a line in the poem about "buying a little bit longer of your life before…" I can't even quote myself exactly, but people really connected with that. It's not about pretending things are okay—it's about giving people a few more moments before their world changes.

Amanda:
That's so powerful. And I love what you said about small talk. It's those little conversations—about Taylor Swift or the weather—that build real connections.

Megan:
Exactly. I remember singing Justin Bieber's "Baby" over and over for a child during a long scan. Or making up silly ABCs about beach snacks. Those little things matter. They're what you remember. And when you leave the front line, it's those relationships you miss.

But it's a double-edged sword. You care deeply, and that means you also carry the hurt. I've always valued authenticity, so it was hard to feel like I wasn't being fully honest with patients. That's what resonated with people—the emotional complexity.

Amanda:
At the recent CAMRT conference in Jasper, someone told me they shared your poem with their students. That's the kind of impact we hoped for when we started the narratives format.

Megan:
That's amazing. There's so much to learn as a student, and it's okay if it's hard. I don't have all the answers for how to deal with these feelings—sometimes I just write them out and let the world handle it. But now others are saying, "Me too," and thinking about how to support the next generation of MRTs.

Amanda:
Your poem was our most downloaded article last year. That's incredible—not just because it was a narrative, but because it was a poem. It shows how much people needed this.

Megan:
Thank you. My mom actually went for imaging recently and mentioned me to the MRT. At

first, they didn't recognize my name, but when she said I wrote *Lying for a Living*, they lit up. That meant so much to her—and to me. It reminded me that what really matters is how you make people feel.

We talk a lot about patient experience, but not enough about how we feel as carers. This poem was just me being vulnerable, and it resonated. That's the power of narrative. It's not about impact factors or citations—it's about connection.

Amanda:
Absolutely. MRTs have incredible stories, and we need more spaces to share them. These aren't "soft skills"—they're brave, warrior-level skills. Being emotionally present during someone's worst moments is powerful.

Megan:
Exactly. I'd love to see more people write about their feelings. Whether it's a poem, a photo essay, or something else, we need to share these experiences. They're the deeply special moments that define our profession. It's a privilege to be part of them.

Amanda:
I agree 100%. We need more creativity, more narratives, more sharing. Your poem was groundbreaking, and I hope it inspires others to follow your lead.

Megan:
Thank you. I hope so too.

Amanda:
Thank you for being on today, Megan. And to everyone listening—send us your narratives, photo essays, poems, prose. We'd love to have them.

Megan:
Thanks, Amanda. Thanks for having me.