

This is a resident case log of a patient encounter in which an "Aware Medicine topic" was central.

The Inadequacy of Words

By May of my intern year, I had become pretty accustomed to death and dying. I had completed 2 shifts in the MICU which usually meant 1-2 people died or were close to dying per week. During med-peds call, since we are in house, we are usually called for cross-cover to perform death pronouncements on other physician's patients. It is a strange feeling to be awakened in the middle of the night to come and pronounce a person that you had never even met. The frequency of these situations made me somewhat numb to all of the suffering and dying. Of course, early on in the year I was deeply affected by each case, regardless of whether I was involved but by the time May rolled around, I found myself feeling somewhat removed and without much of an emotional response. Part of me was startled by this sudden regression in empathy. The other part of me justified these feelings as necessary parts of being confronted with agonizing deaths and undue suffering. I would tell myself, "if I let this affect me too much, I won't be able to make clear and sound medical decisions." I felt that I had appropriately adapted as long as I never became indifferent. I still wondered if during my intern year my emotional response to these situations had been permanently suppressed or worse, had vanished.

Most unfortunately, a 4 year old boy extinguished that doubt about my emotional response. I never really got to meet him. I only learned about him afterwards through his parents, pictures, aunts and grandparents who came to visit in the intensive care unit. Whenever I think of the word "tragedy" from now on, this case will be my reference point. Bobby (changed for this essay) was as normal a 4 year old boy as you can be. He apparently loved to listen to music and was learning how to play baseball with his father and loved cars and trucks. So when he began to choke on a piece of carrot that he was snacking on, nobody could have predicted or anticipated the heartbreak that would follow. By the time Bobby arrived in the ER, his heart had stopped beating for nearly 30 minutes. Eventually a rhythm was returned and blood pressure was restored but the prognosis already looked poor.

Afraid to make the father relive the horrible experience, I fought an internal battle about what I should say, how long I should wait to talk to him and whether it was even appropriate for me to ask about where Bobby goes to school while he lay in bed, unresponsive and intubated. I cannot remember what I said but went through the standard questions as I listened to the unbelievable course of events that lead us to this point, late at night, standing outside an ICU room because of a carrot. The intensivisit was busy adjusting ventilator settings, following up on laboratory results and monitoring other patients as I just stood around, helpless. The father, pacing back and forth from the ICU, to Bobby's room then back into the hallway was asking lots of questions. He was very engaged but at the same time removed. He was gathering facts and would then leave the room to go talk to Bobby's mother, who did not want to come anywhere near the room. Occasionally she would peer into the room and a look of agony and shock would wash over her face before she had to turn away in tears.

Details of labs are blurred but the intensivist was able to re-orient me and stated matter-of-factly the way to move forward that we had 48 hours to evaluate Bobby's brain function and until then, we are to correct the laboratory abnormalities. My sense of the situation was grim though the intensivist did report seeing similar cases where neurologic function did start to return and children would walk out of the ICU. A sliver of hope.

Over the next 2 days I met various family members. They would take shifts and relieve Bobby's parents who could not or would not sleep. Aunts and uncles and grandparents. They were all extremely



This is a resident case log of a patient encounter in which an "Aware Medicine topic" was central.

friendly and were genuinely interested in me. I was taken aback as I found myself talking about my training, where I'm from and other aspects of my life as their loved one lay in a bed, motionless. I felt somewhat ashamed that the focus had shifted off the boy in need and onto me. Upon further reflection, however, I realized that I was serving as a distraction and suddenly felt much more comfortable. As the countdown got closer to 48 hours, the reality and severity of the situation was weighing on everyone. Nurses, residents and family alike felt a lump in their throat and few people would leave Bobby's room without wiping a tear away.

Eventually, the assessment that everyone expected but most had tried to ignore was confirmed: brain death. Those two simple words that could not be disputed. The family began the official grieving process. I tried to collect myself and entered the room, observing both parents lovingly arm in arm and holding the hand of their little boy who, 48 hours earlier, was laughing and playing. As I began to speak, I only managed "I'm so so..." before I became overcome with emotion. The weight of this tragedy had penetrated my shield and I stood their, in tears, unable to think of anything that could possibly make the situation better than saying "I'm sorry." It was at this point that the family turned to me and started to console me, recognizing "this is the hard part of your job" and "you don't really see this every day, do you?" This of course made me feel worse because I was not the person needing to be consoled. The reality is that I had confronted death fairly frequently. I had witnessed the tragic death of loved ones on multiple occasions in the hospital. This just seemed more unjust. A 4 year old, perfectly healthy boy should not die from aspirating a carrot. I felt angry, confused and deeply saddened. I tried not to put myself in the position of Bobby's parents because I just could not imagine their pain.

Several days passed and though the sorrow lingered, I came to a realization. This tragedy illustrated the impressive fragility of life. In a country that is fortunate to not have dehydration as a leading cause of death, in a system with all of the most advanced medical equipment and in a country that attracts some of the most bright-minded individuals, a piece of carrot can take it all away. I was troubled by the unfairness and attempted to ask "why?" but soon realized this was an unproductive and incorrect approach. How can you explain something like this? You can't. It is the mystery and confounding nature of life itself where some people make terrible decisions, do not care about themselves or others and live long lives while others, with all of the opportunity and love in the world ahead of them, die way too early. I am convinced that while this tragedy affected me on a very emotional level it has awakened something spiritual within me. It has made me appreciate how delicate and fleeting our time is on this Earth. I have come away from the heartbreak of Bobby's situation, a boy that I never even met, with renewed conviction to not waste time hating others, being insincere or hurtful. I must approach this life with love for myself and those around me and accept that ultimately, I have very little control when it comes to life and death.