

Clinical Flashback

By Osman Bhatti

It was another cold New York day in the middle of winter and I was one of several eager third-year medical students assigned to the general medicine floor. The days would go by steadily as we spent them doing what medical students do best: taking histories, following residents around like baby ducks, and trying to make our moments of bafflement come across as engaged intellectual curiosity.

So far it had been a thorough, albeit slightly uneventful rotation. I was thankful to have been a part of cases I would undoubtedly see again down the line (asthma, cellulitis, COPD, diverticulitis, pneumonia, etc.), but also couldn't shake the feeling there was something *more* I needed to be taking away from all this. Regardless, I kept doing my best to show up on time, help the residents out when they needed it, and learn as much as I could. By now I knew my imagination was something that would often get carried away and I had made the habit of dragging myself back down to reality when that time would come. Even still, images of Sir William Osler lost in thought over an elusive diagnosis well into the night flickered through my head as I watched the hands of the clock casually tick tock their way into the late afternoon. Finally. The day had come to an end and I was getting ready to leave when my resident caught me right as I was reaching for the door. "Hey, will you do this ABG on the patient in room 307A for me? I'm kind of swamped right now," she asked looking drained.

I smiled back and nodded; not only did I not mind helping out the perpetually overworked residents but this would be a great opportunity to practice my blood drawing. I put down my bag and coat, grabbed the nearest floor chart (full of patient info) and started walking to the supply closet while I read over the patient's story.

A 76-year-old female who came in with shortness of breath a couple days ago. She had been treated for a pulmonary embolus and the powers that be wanted to do a last minute ABG to make sure she wasn't retaining any CO₂. She had multiple comorbidities as well, including a recent hip surgery, which may have explained her condition. Standard fair, I thought, nothing to get excited over.

After stuffing some alcohol wipes into my pockets and grabbing a couple needles (hoping I would only need one), I walked over to room 307 and made my way to the bedside. There was nothing about the patient that really distinguished her from many of the others I had seen. In a lot of ways I guess you could say she was "normal." I flicked on the lights knowing I would need them to find the radial artery, especially in an older patient whose vasculature could hide behind skin that had been at the mercy of many years.

An elderly Caucasian lady lay in front of me. There was a tray of uneaten lunch sitting next to her and she had long silver hair that had been tied up into a tight bun that kept it from covering her face. I didn't think she had heard me enter so I cleared my throat and began to introduce myself. "Hi Ms. XXX, my name is XXX, I'm a medical student and I'm just here to draw some bl...."

"HELLO?!" she turned in my direction. A few moments of silence passed by as I recovered from her abrupt interruption. Slowly, after swallowing the saliva that had collected in the back of my throat I began again. "Yes hello there, my name is XXX and I'm a med...."

"Are you here to take more blood from me?!" she bellowed out as her eyes finally began to focus on the person standing in front of her.

"Um yes, I know you must have been pricked a couple times, but I promi..."

"NO! No, no, no. I will not be pricked anymore! I've been pricked all day, and my hands haven't even healed!" At this point she gingerly lifted her left hand and let it waver in the air. I saw the bluish red hematomas that had formed as a result of all the needles the poor lady must have had administered to her.

I sighed to myself. I thought back to all the hours of studying, the endless reviewing, the tiresome probing of my knowledge to uncover any deficiencies that could one day lead me astray. Out of that gigantic wealth of knowledge, there wasn't a single moment I could draw on to guide me on how to appropriately explain to this woman that even though she had been prodded all day, she would have to go through it again, and I was going to be the one to do it to her.

I took a deep breath and decided it was time to explain the unfortunate severity of the situation; she would understand afterwards it was something that was in her benefit.

"Ms. XXX, I'm sorry you've had your blood drawn so many times today. The thing is, you're finally going home today, and before we send you off we want to make sure you're as healthy as possible, because it would be a shame if you had to come back so soon."

She looked at me with a determined stare. "Is this going to help me see again? My vision has been blurry for weeks!" I was taken aback by her question. This was an ABG, surely she knew it couldn't do that, but before I could even think of something to say she continued. "Is it going to help me walk again? I was walking you know, just a couple months ago. Is this blood going to help me do that?"

I stared at her, now with my mouth slightly agape. The results of this test wouldn't do any of those things.

By now it had dawned on me what was really going on here. This 76-year-old woman, bedridden with IVs piercing her skin, hadn't always been like this. Just a few short months ago she was walking, probably to see her friends. She was living her life with hopes and dreams for tomorrow, real plans she was trying to get underway. They had all come crashing down swiftly the day she fell and broke her hip. After weeks of invasive procedures, being encouraged to do things she didn't really have the time to understand, telling me that she didn't want this ABG was one of the last ways left for her to have any control over her own fate.

This ran through my head as I stood glued to my spot watching this lady silently cry. I had reduced the humanity of this patient to a single test. 1 ABG STAT. I couldn't even begin to comprehend the layers of emotions she must have been feeling.

"Um, excuse me, what's going on?" I turned around and saw a tall girl with brown hair tied up in a bun; she must have been in her 30s. "I'm the daughter, I'm here to pick up my mother, I hear she has been discharged."

I thought about what I wanted to say, still holding the syringe in my hand. She caught a glance of it before I could speak a word, and then looked at me with understanding eyes. "That won't be necessary, I've gone through this before, we're taking her to hospice. She's already suffered so much." And with that she rushed by me and began packing up her mother's belongings.

I walked out of room 307A and back to where my resident was. She heard what I had to say and agreed to let things progress the way they were.

I packed my bags, put on my thick coat and walked out the hospital, reeling from what had just taken place. The bus stop was close by and I stood there watching my breath float away in the cold weather. I clicked open my iPhone and looked at my calendar. I had a shelf exam in 2 weeks, had to start studying today if I wanted to do well.

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