

“Moments”

Christine East, MD*

Life changes in a moment.

I'm still learning how mine changed when I first opened the email accepting me to medical school. I used to don a white coat like the mantle of “doctor,” putting on and taking off the weighty title like a child playing dress up. I'm not certain when the mantle became me, or exactly how I changed in the process.

“Why would you want to be an emergency doctor?” A friend questions me, jovially, while we sit around the kitchen table during the holidays. “All they do is make you wait and give out drugs.” The conversation spins into anecdotes of family members' recent visits to the emergency department and unsatisfying searches for solutions to chronic conditions. The unspoken implication is that emergency doctors lack compassion. No harm is meant; this is a gregarious group, and good-natured barbs fly freely around the table. Regardless, I shrink into myself, my life's ambition reduced to a prescription pad and a waiting room.

Did she hit a nerve? Is there a kernel of truth, of doubt, an inward fear of something human lost in the course of training, this act of becoming a doctor?

I turn my eyes to the window. Snow shimmers as it falls through the beam of a streetlight. I'm post-call and due to return for another ICU shift in a few short hours. I'm five-and-a-half years into my medical training, five-and-a-half months from the end of residency. I'm exhausted. I'm about to spend my third Christmas Day in a row on call. I haven't spent the holidays with my family in years, and my husband and I have not yet spent Christmas together during our young marriage. I ponder a lifetime of sleepless nights, spousal sacrifice, and missed children's milestones. This, surely, is burnout: battling twin demons of uncertainty and ego, and a sliver of resentment for the years of youth lost to books and pagers. The lives I've changed and seen change seem

distant in this moment. Births, deaths, pronouncements of consequence and reassurance, they drift away and blend into something homogeneous and unrecognizable if I don't pick them out and hold on.

Hours before, I told a mother that her twenty-six-year-old daughter was unlikely ever to wake up after being found, cold and lifeless, another casualty of the mounting opioid crisis. She was resuscitated on scene and arrived at our hospital to be hooked up to machines, examined, scanned, prodded and poked, delivered to the ICU only to be resuscitated again in the early morning hours, near the end of my twenty-six-hour shift. As monitors rang out a faltering rhythm, I held the mother's hand, negotiating her fluctuating grief, anger, shame and hope, leading her down a path to a destination she couldn't quite yet see. A place no parent should ever have to go.

These are the moments we train for.

On shift in a rural hospital, I see a dagger of purest black running between the shimmering sonographic kidney and liver of a seventeen-year-old girl: internal bleeding. She crashed on the ski hill during a school trip, hours away from the comfort of her parents. As tears of fear and pain pour down her face, her neck locked in the strangling grip of a cervical collar, I hold her hand and explain the process of a transfer to the city for a trauma surgery evaluation. I tell her mother over the phone about the datapoints that form my assessment; the concerning ultrasound is counterbalanced by her stable vital signs and labs. No, I can't tell you she'll be fine, but, yes, I can tell you that I'll do my best.

Back in the city, I cajole and coax a skeptical, grandfatherly man with shoulder pain, convincing him to stay and be assessed for what I later confirm to be a heart attack.

I hug a mother whom I find crying in the hallway, reassuring her that her nine-year-old daughter, who has meningitis, is in good hands.

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I sit with a middle-aged patient and her husband, explaining that the cause of her progressive headaches is a large brain tumor. A horrible lump rises in my throat as I watch the weight of my carefully chosen words settle over the room.

These are the moments we can never prepare for.

Boxing Day. At the end of twenty-six whirlwind hours, I emerge from the hospital, shielding my eyes from the unfamiliar sight of the sun. Four ICU admissions, numerous code calls but, thankfully, no deaths on my watch overnight. I move against the flow of people arriving at the hospital, families with their children, flowers and gifts in hand, and envelopes, no doubt containing messages of hope and sympathy. Expressions of mingled concern and optimism cross the faces of the adults entering this temple of healing, of suffering and of pain, here to visit family members confined to the hospital over the holiday season. Inwardly, I feel a rush of gratitude for my health and that of my loved ones.

These are the moments that stay with us.

I work at the intersection of life and death, of hope and fear, and sometimes I feel overwhelmed by the

sheer pathos of it all. I worry often about how a wrong decision, a hesitation, or a momentary lapse could be the difference between life and death. I reflect often upon how an offhand remark or a poorly chosen word could forever colour a family's recollection of their loved one's last days. I think often about how I can better balance caring for my patients and my job with caring for myself and my family. This is the privilege that we have – guiding our patients and their families through the most crucial events of their lives.

I kiss my husband and crawl into bed. I am exhausted, emotionally depleted, but charged with the knowledge that I've made a difference. Somehow, these experiences that drain me also fill me up.

These are the moments I live for.

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