

MIND TO MIND

*Creative writing that explores the abstract side
of our profession and our lives*

Carol Wiley Cassella, M.D., Editor

It Just Doesn't Make Good Business Sense

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The automated reception-bot jerked to life without warning. “Dr. Morton, Dr. Lister will see you now.”

The illuminated, acrylic seat retreated back into the wall as he stood up.

“Please follow the lighted video-floor to his office. Have a pleasant day.”

He didn't need the floor prompting. There was one office on the entire 17th floor. Everyone employed at the hospital came through here to be hired. Those that saw it twice were no longer here.

“Bill! Come on in! Have a seat! Can I get you an antioxidant water or maybe an endorphin nasal spray?” he said with a wink that reminded Bill of a used hover-car salesman.

Bill slunk down into the leather recliner. He couldn't resist sliding his hands down the armrests. He'd only touched actual leather a handful of times in his life. “How can I help you?”

With a flick of a switch on his desk, the walls of Dr. Lister's office became transparent showing off a spectacular view of the metropolis. “Bill,” he said after a pause, “why should patients come to us here at O.H.?[†] What separates us from the six other hospital-corps in the Phila-Newark Metro confluence?”

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[†] Adamoppe. “Outside Hospital.” *YouTube*. Web. October 4, 2007.

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Bill wasn't sure where this was going, but the pit in his stomach seemed to be getting deeper. The hospital slogan came to his lips sarcastically, "Care, quality and commitment. That's what we do."†

Joe spun away from the scenic view to give William a blank stare before he laughed, "Oh! Those PR guys are geniuses! At first I thought you were being serious! That's a good one!"

He turned back around to look at the city. "The answer is... nothing. We are no different from them or any other health care corporation. We use the same NIH mandated protocols as they do. I mean, we participate in some unique outcome studies, but so do they. You're high enough in the organization to know that."

Bill nodded in agreement.

"Public image and advertising are what separates us. When you and I first started, the Millennial Generation was pushing seventy. They made up the majority of our patient population. They still believed in the power and purity of the 'physician's healing hands,'" Joe said, making air quotes around the words. "Those days are gone. The PR department wanted to brag that we had a human anesthesiologist, radiologist and pathologist on staff, but that was too shortsighted. We would have lost the younger patient population to the other corps. It's a good thing I convinced them otherwise. The masses are finally starting to realize that humans are a liability. They're too fallible... and dirty. Computers and machines are way better than we ever were at coming up with a diagnosis. Treatment is all based on the NIH protocols. It would be financial suicide to ignore them and rely on physicians' independent thought processes and evaluations... not to mention illegal."

He spun back around to look at Bill with a stern expression on his furrowed face. "You haven't started an IV in seventeen years. The IV Assist robot has done them all. It has yet to miss. The EEG and vital signs are coupled with the blood level measurements of propo-ester and remi-morphone by our Dream-eze control computer to continuously adjust anesthetic levels for optimized surgical exposure and wake up."

He leaned towards Bill and placed the palms of his hand on the glass desk. "You have, on almost a daily basis, adjusted levels of anesthetics without documenting reasons, which have done nothing to speed wake-up or lower post operative pain scores," Joe said, his voice getting louder and louder. "In fact, on fifteen occasions this quarter, your interference has prolonged discharges by an average of 12.3 minutes. No independent decision that you have made in the past twenty years has had a positive impact on a patient!"

"I saved that man from a drope-esetron overdose not too long ago!" Bill blurted indignantly.

"That was nine years ago!" Joe yelled back. "The overdose would have been picked up on pre-emergence blood sampling and would never have been noticed clinically! In fact, the reason it happened was that we had a human pharmacist stocking

the Dream-eze. That mistake was corrected. What, I ask you, are we going to do about the mistake sitting in front of me right now!”

Joe was up out of his seat, leaning on his hands staring at Bill, who was paralyzed. The setting sun coming in through the office window made Joe a black silhouette on a city backdrop. The audible silence finally broke when Joe dropped back into his seat.

“I’m sorry. I didn’t mean for it to come out that way, Bill. I hope you understand that it just doesn’t make good business sense to have you on staff. Other corps are advertising the number of departments that are human *free*. We have to keep up or we’ll perish.”

Bill shook his head in disbelief. “I’ve... I’ve got kids in college. And a mortgage...” he stammered.

“I know. That’s why I’ve had our financial guys analyze your retirement fund, savings and expenses to come up with a plan. You’ll have to make some sacrifices, but they’ve worked out something that I think you’ll find... comfortable. I mean, there will be an adjustment period, but you’ll get through it.”

Somehow Bill found the energy to stand up. He turned his back to the black shadow of a man and made his way to the automated office door.

“We can’t have it get out that one of O.H.’s newly retired physicians is having financial trouble. It wouldn’t be good PR! Bill, you’re going to be fine. It will...”

The door swooshed closed behind him, cutting him off from Joe and the life he once knew.