

MIND TO MIND

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

James M. Berry, M.D., Editor

Numbers and Data

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A 3 PM steaming cup of French vanilla coffee with cream: my beloved routine. I sit sheltered by the screen, amid incessant unit alarms begging to be silenced as they sear through the afternoon lull. I review charts, run vitals, peruse electroencephalograms, read transcranial Dopplers, and scroll through angiograms. All is well. The critically ill are stable, my notes are done, and my coffee goes down hot.

Visiting hours: a lingering post-pandemic restriction limits family presence to the afternoon. Room 60's daughter arrives to find her achy, fatigued, hard of hearing, constipated, confused, and uncomfortable. Previously the social butterfly of her entourage, she is now confined to the hospital bed after a subarachnoid hemorrhage. Imprisonment for 10 to 14 days on vasospasm watch.

Nurse notifies me: daughter wants an update. I am happy to. She is actually doing so well. The scans, numbers, data are all reassuring. In fact, she is the healthiest patient in the unit. I scrutinize my screen once more to make sure I know everything about her before going in. Indeed, she is a star patient.

I say hello and casually proceed to ask, "How does she look to you today?"

Outburst of tears. Oh. That's not what I expected. Clearly, I am missing something?

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The chair in the room calls my name. Sitting is often reserved for serious family meetings or delivering difficult news. For casual routine updates, the chair is often neglected in favor of a stance by the doorway, or an elbow leaning against the wall. When I delivered in this same hospital, I recall the obstetrics resident sitting down eye-to-eye with me in my room. Yes, she rounded on me for five minutes; but those five minutes felt like fifteen. Sitting means undivided attention. Humans thrive off of undivided attention. Better pull up a chair and listen.

I explore a little. “Tell me, what’s on your mind?”

The daughter sees a shell of her mother, who is worried, scared, trapped, losing her sense of self, poked ten times a day, awoken to neuro exams every two hours. Hard of hearing but not immune to the beeping unit alarms that lack any circadian humanity. Night and day are lost; the window in the room, a cruel reminder of the sunrise and sunset. She cares nothing for electroencephalograms, transcranial Dopplers, labs, vitals. To her they equate to an itchy scalp, ultrasound gel hair tangles, 5 AM needlesticks, and a cuff suffocating her arm hourly.

The medical record deceived me, as no score or sign captured her at that moment. The positive quick update I had prepared to present would undoubtedly feel like sprinkling salt in a wound. I can, and should, do nothing but listen, support, and agree. If they want numbers and data, I can give them numbers and data. But, at this moment, they need a human physician to sit and listen. And that’s exactly what I’ll do instead.