

FIELD NOTES | FALL 2014 A Student's Moment in NYC's Most Famous Hospital By Brian Sou

Walking across Team 2 of Bellevue's Adult Emergency Services, my confidence soaring as I had just conducted my fifth completed survey for the dreaded PANAS research in under two hours, I did a double-take as I recognized a familiar face in bed 4, side B. Anyone who has worked at Bellevue knows that seeing a patient more than once is not uncommon, but rather routine. However, this patient, we'll call her Jane, was different. Just days earlier, on my Clinical Aide shift, I had the opportunity to assist Dr. X, the resident I was shadowing, as he performed a finger aspiration on Jane. What I remembered about Jane was her well-mannered demeanor, her politeness, and her "hospital etiquette" that, despite her pain, was always present. What I also remembered was her intense fear of needles, how on sight of one, she would start trembling uncontrollably while tears streamed down her cheeks slowly, then quickly. I remember our first encounter, as I assisted Dr. X in the procedure, how scared and helpless she looked as Dr. X prodded her left ring finger again and again. Even with Lidocaine, her psychological fear of needles prevailed over any relief the numbing agent provided. I also remember how helpless I felt, that even though I contributed to the actual procedure, running about getting Dr. X the equipment he needed and holding Jane's hand firmly in place, I did not manage to comfort Jane in her moment of vulnerability, when she needed someone to do so the most. I was so interested in the medical aspect of curing that I completely neglected the compassionate side of healing.

Just as I was approaching Jane this second time, a nurse appeared, blue gloves on and ready to insert an IV into her left arm. As he unwrapped the needle, I could see the fear in Jane's eyes. The trembling began, almost on cue, and the tears followed shortly. Seeing this brought a flood of regret. I was not about to let this kind lady go through her biggest fear alone again. I walked towards her stretcher with a smile. Her eyes met mine, and for a brief moment, a look of relief flashed across her eyes as she recognized a familiar face. As the nurse tightened the blue rubber strap and prepared to insert the needle, I clutched Jane's hand firmly. Her hands shook uncontrollably, and her breathing was heavy as she tried to fight back her sobs. I stood by her bedside, offering her words of reassurance, telling her that she was a brave woman, that she's done this before and she can do it again, and once the needle was inside, that the worst part was over and everything was all right. When the IV was inserted, I stood by her bedside until her sobs died down and the only things in the ED were her, me and the warm silence that enveloped us. When she was composed, she looked up at me with her amber eyes and smiled, her expression changing from a look of anguish and pain to one of gratitude and relief. In that small moment, I realized just how strong of an impact one individual can have on another.

As a physician, it is easy to forget patients are human beings and not just diseases to be broken down and conquered. In the modern world, physicians are becoming increasingly impartial in their treatments, focusing more on the technical practice of medicine rather than on understanding the suffering of their patients. My experience with Jane really revealed to me that no matter what the situation, empathy and compassion are a must when treating patients. In our first encounter, I was so focused on the medical procedure that I neglected the other needs of the patient. Although it was definitely not my proudest moment, I will always remember this experience in my future endeavors as I treat patients with the utmost compassion and never become jaded or so engulfed in my work that I forget about the little things that count.

However, compassion is an emotion that needs to be systemically prevalent throughout Bellevue and hospitals across the nation. This includes not only doctors, but everyone involved in patient interaction, from nurses to clerks. All these members of the health care profession play essential roles in the illness experience of patients. The moment a patient walks into a hospital setting is the moment he or she should be met with warmth and kindness, setting the table for the all- important meeting with the physician. In this sense, all health care professionals should be aware of their actions and the consequences that may arise, making sure not to discriminate or prematurely judge anyone that walks through the hospital doors.

My time at Bellevue has introduced to me many unique individuals, each with their own stories to tell. There was the homeless male who squatted and released his bowels right next to his stretcher in Team 1. There was the founder of Biocybertronics, a multimillion dollar tech startup, laying in isolation room A. There was the tatted guy in Team 3 with a nose ring and piercings where there should definitely not have been any piercings, thanking me again and again and telling me, in the kindest voice, just how much he appreciated the volunteers for what they did. And then there was the patient from Team 2, passed out in a Starbucks in Times Square, hospital bag still in hand when just the night before, I had shared a compelling two hour conversation with him, in which he told me he once wrote lyrics and made beats for the rapper Juelz Santana. All these individuals from every corner of the world, with differing ethnicities, religions, and socioeconomic backgrounds, all with nothing in common besides the fact they are unique in their own way, ended up in Bellevue Hospital Center at one point or another. Because at Bellevue, you can be somebody or nobody, but no matter whom you are or what you did, you will be treated with the same doctors and receive the same quality healthcare as the billionaire who came right before you.

Brian Sou is a student at the Sophie Davis School of Biomedical Education. He strives to become a compassionate primary care physician working with underserved communities both clinically and through health policy changes.

^{©2015} Intima: A Journal of Narrative Medicine