

## Oh, This Place!

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Through the generosity of Charles R. Millikan, DMin, vice president for Spiritual Care and Values Integration, an annual award competition was established at Houston Methodist Hospital among the resident staff. To enter the writing competition, residents must submit a poem or essay of 1,000 words or less on the topic, "On Being a Doctor." A committee of seven was selected from Houston Methodist Hospital Education Institute to establish the judging criteria and select the winning entries. The following is the second-place winning entry for 2019; the third-place entry will be published in the next issue of this journal.

"Ms. Sheila, could you please print me off a history and physical form?" I asked the triage nurse. "I can't do anything for this patient who's been waiting in triage for an hour until..."

"Yes, Dr. Johnson, I'm movin' as fast as I can. I got three other patients waitin' to get checked in. I'll get those to ya here in just a minute—just hang on!"

*Her leisurely Southern accent sure seems to set the pace for everything in this place,* I thought, as I stomped back to triage, left to helplessly await papers before evaluating a new patient with labor pains.

"Robin, do we have prenatal records for Ms. Hernandez?" I asked another triage nurse, hoping I could do something productive as I waited, like reviewing my patient's history and lab work.

"We're still waiting! They haven't been faxed over yet," she quickly replied.

"We have got to be the only hospital in the nation without electronic medical records!! This is insane. Oh, this place!!" I sighed and threw back my head, exasperated.

Impatient as ever, I pushed myself to my feet, punched the door button to exit the triage room, and walked back out to the labor floor to find use for myself.

"Ow, my hand... geez that hurt."

I decided to continue pacing the unit as I waited for my papers. As I rounded the corner to the back nurse's station, Kelly, the charge nurse, flagged me down with a purposeful glance.

"Dr. Johnson, there's a patient here for induction of labor ready to be seen in room 18," she instructed, and handed me a manila

folder with Ms. Gomez's medical information along with a blank history and physical form.

"Okay, I'll get on it!" I replied, finally supplied with papers to review and forms to fill out, which *finally* meant patient care was possible.

I made my way to room 18 with the manila folder grasped in my left hand, tracing its smooth edges with the fingers of my right, while my mind traced its unsettled thoughts.

What an invisible struggle! What a mental and emotional dichotomy during those 15 or so steps! The material thing that I depended on to do my job—here now in my hands—was the very thing enslaving me to this lumbering, archaic process!

*I hate you, but don't leave me!* I thought. My psychotherapist stepmom would call this codependence. *Oh, this place!!!*

*Ok, let's see, Ms. Gomez...* I quickly reviewed the manila chart outside door 18. *Looks like a straightforward induction of labor for gestational hypertension at 37 weeks.*

I knocked on the door. "Hello, Ms. Gomez, how are you?" I asked, as cheerily as I could.

"Oh, eh, hablas Español?" she asked.

"Ah, si por su puesto—of course!" I replied, and continued the conversation in Spanish.

"So Ms. Gomez, do you know why you are having a labor induction today?" I asked.

"Yes, I have high blood pressure and it's best for the baby if I have her now," she replied.

“Yes, exactly.” I continued to ask her the typical labor intake questions. Was she feeling her baby moving regularly? Was she having any contractions? Did her water break?

And then out of curiosity, “Where are you from?”

“I’m from Honduras!” she answered.

“Oh wow, Honduras—that’s awesome,” I replied. “I’ve never been there but I’ve worked in Nicaragua several times. It’s really different there, isn’t it?”

“Yes very, very different!” Ms. Gomez grinned.

I knew firsthand how true that was from my experience shadowing OB/GYN residents at a teaching hospital in Nicaragua.

“I had my first baby there!” she continued.

“Oh my goodness, so you really know the difference! I remember the heat without air conditioning, a big room full of laboring women, all together...was that how it was?” I asked.

“Yes, it was! All of us in one place. And no medicine for pain!” she smiled at the memories. “Is this the room where I will have my baby too?”

“Yes, it is. You don’t have to go to another room for delivery. The baby nurses come here, and this machine here is where the baby goes to get cleaned, warmed, and checked right after she’s born,” I explained, pointing to the baby warmer.

In Nicaragua, when a woman was completely dilated and ready to start pushing, the residents would walk her to another room across the hall—the only room with a bed with lithotomy stirrups—to deliver the baby.

“Wow!” she exclaimed, her beaming smile chasing away my frustrations. “It is so nice here. I have this big room all to myself, I get the medicine for pain, a nurse is here for me, and the doctor comes every 2 hours!!”

And I knew that after delivery she’d continue to have amazing new experiences. In Nicaragua, after delivery, mothers were brought to another large room full of postpartum women to stay for a day to recover. One bathroom for all, which was cleaned once in a blue moon. Their families were responsible for providing sheets and bedding for the plastic mattresses on the metal-framed cots that lined the walls in rows. They would also bring food for the mom if they hoped for her to be nourished by more than a once-daily serving of soup and rice delivered midday on a rolling cart in giant steel pots.

Imagining Ms. Gomez in her private postpartum room—with her own shower, clean bed, three meals a day, residents to check on her daily, nursing staff to help her navigate breastfeeding—made my heart swell with joy. I couldn’t help but smile.

*Oh, this place... I thought to myself. Reminds me why I went into OB/GYN.*

As residents, we can allow systems to control and the mundane to discourage; but if we are willing to seek them out, there are precious treasures hidden in the stories and lives of our patients. May they always be the reason why we continue to serve humbly, love thoroughly, and learn daily.