JOURNAL OF WELLNESS

HUMANITIES

Letters That Will Not Be Read

Kaila Pomeranz, DO1*

DOI: 10.18297/jwellness/vol2/iss2/7

Website: https://ir.library.louisville.edu/iwellness/ Affiliations: ¹US Acute Care Solutions South, Tampa, Florida

Recommended Citation: Pomeranz, Kaila (2020) "Letters That Will Not Be Read," Journal of Wellness: Vol. 2 : Iss. 2, Article 7.

Received Date: Aug 21, 2020 Accepted Date: Sept 1, 2020 Publication Date: Sept 25, 2020



Johnny,

I keep coming back to this. I haven't figured out how to start it, let alone finish it. I remember the first time I saw you. Room 27. My heart sunk as I walked in the room. Your cheeks were hollowed, and your eyes looked tired. You paused every few words to catch your breath. I knew you were dying. Not the dying we can fix, but the kind that we can't. The air felt thick as I introduced myself. As I talked to you, all I could see was your death and it permeated the room. You knew what was happening. Your daughter couldn't sit still, tears already covering her cheeks. She was so scared.

I felt her fear as she danced around you like you were a fragile piece of glass she had always been told not to touch. As if merely touching you would kill you. I wanted to wait to talk to your whole family all at once, but I was worried we wouldn't have enough time. Your daughter had so many questions and I answered them honestly. I sat next to her, watering down the medical jargon. She understood all of it and she heard me. She listened intently as the words stumbled from my mouth. She never took her eyes off you as I spoke.

Goals. Death. Dying. Comfort. Morphine. Pain. Anxiety. She felt every word I said. I felt every word I said. We talked about you and not just your cancer. Your daughter told me that you like cars. For a brief second, her face lit up as she talked about the car you were working on. The cancer had taken so much of your energy that it had been hard. The light left her face quickly and her voice trailed off in an incomplete thought. She hugged me and thanked me for being honest with her and not sugar coating it. The truth is, I didn't even know how I could sugar coat it. Tears fell from both of our eyes. She cried that she wasn't ready to lose you yet.

Things changed when the rest of your family got there. Their pain and suffering overshadowed yours. Even still, their presence seemed calming for you. You became less responsive. Your son hugged your frail body and your wife kissed your forehead, telling you that it was okay to go. Your son told you he would finish the car you were working on. He told you it would drive fast, just like you wanted. He promised that he would be the man you taught him to be and that he would make you proud. I hope you heard him. I didn't need to tell them that you were dying. They knew. It was hard to be in the room. I watched my attending closely, his voice less shaky than mine. I listened to his carefully chosen words, thinking the next time I have this conversation it might be easier. I stood quietly at your bedside as the palliative care physician explained the next steps and what to expect as you moved through the dying stages. Your family, comforted by his words. Your breathing finally started to settle. You died a few hours later.

Johnny, I mourned you. I know it is not fair of me to say, but your death was hard. I can't imagine the pain your family felt. I kept replaying the time I spent with you on a loop in my mind. Sleep escaped me as if even closing my eyes took too much energy. I left everything I had with you. We have a tough job. We did what was right for you. You had a peaceful death. Comfortable and with family and, relatively speaking, on your own terms. The weight of that day still lays heavy on me. Some nights I stare at the ceiling fan spinning rhythmically and think of you and your family. In emergency medicine, we carry pieces of our patients with us. Patients dying are like wounds. Some bleed and some scars fade quicker than others. Sometimes, it is the paper cuts that hurt the worst. I expected your death. I knew from the moment I met you that it was approaching. It was the sting that took me by surprise. Sometimes we have a patient that is so medically complex that the challenges are based in science. What medication do I give next? What if that doesn't work? What are my A, B, and C plans? My mentor taught me to think of the what if's and the worst-case scenarios. We grapple over these questions and make quick decisions. We see how a patient responds to our management. We feel the wins and the losses of how our patients do. The hard part is that sometimes there are outcomes worse than death.

The challenges with you were so much deeper than that. The easy thing to do would have been to admit you to our intensive care unit, but that wasn't what was right for you. You were dying. Aside from teaching me the what if's, my mentor prepared me for these conversations. Sometimes, he would ask me about a patient's prognosis before I even presented. This wasn't in an attempt to be morbid, but a way to approach care in order to best serve the patient and to start a conversation about what their wishes may be. This thinking helped me with you, because I was confident that you only had hours. It





seems backwards to what we are taught. That the answer isn't always more medicine or machines to help us breathe. That emergency medicine isn't always procedures and high energy. Occasionally, our job is to slow down and focus on helping patients suffer less rather than helping them live. The true art of medicine is rooted in compassion. Maybe one day it will be easier, but I felt as if I were balancing on a piece of dental floss strung across the Grand Canyon. How do I offer you the best death? How do I explain what is happening to your family? Am I being too blunt? Am I giving too much hope? Your kids are so young. How do I walk out of your room and see the next patient?

I haven't figured out why you hurt more than the others. Maybe it was your family or your kids or that you went from talking to dead in a matter of hours. Maybe it was because I felt so helpless that I couldn't give you a different outcome. Maybe it was that pit in my stomach when I first walked in your room. Maybe it was the cumulative summation of the

deaths that had preceded you.

A few days after I met you, I wrote a letter to each of my patients that had died in the weeks preceding.

One to the 13-year-old, whose family watched as we did compressions on the damp sidewalk in the rain.

One to the man who died by himself, his family giving their goodbyes on the phone.

One to the 31-year-old who committed suicide. She was

the same age as me.

One to the man I never met, but his death rattled my colleague. Much like you, he came into the ER dying. I told my friend about you and how I cried as your family said goodbye. I told him how I hugged your daughter and I told him what my mentor told me, that patients like this are the most emotionally taxing but most rewarding parts of our job.

The exercise of writing a letter to someone who could never read it was therapeutic, but I got stuck on yours. As the days and weeks have passed, I have remembered you less. I have forgotten your last name and the sound of your voice. Even your face and your long beard have blurred. But your family, especially your daughter, still remain. The look on your daughter's face and the hesitation and fear in her voice as she grappled with your mortality will forever be inscribed in my mind. I will continue to carry pieces of you with me, Johnny. I promise to remember you and your family. I promise to remember that sometimes the easy thing to do isn't the right thing. And I promise to remember my patients as people, not as a disease or a room number. You will never be just "the guy in room 27", but you will be Johnny, the guy who liked to build fast cars and loved his family. You will forever be the patient who continues to teach me, even after your death. Most importantly, you reminded me that the very best part of our job is to care.

Wherever you are, I hope you're driving fast. Thank you for teaching me.

Kaila

Acknowledgments: I would like to thank my faculty from residency (University of Iowa) who demonstrated how to truly care for patients through leading by example. Particularly, Dr. Van Heukelom who took care of this patient with me and Dr. Thomsen, who taught me how to slow down, connect with patients, and think about the what if's.



