



Reflections of a VA Clerk

The needle goes in easily enough and, after a moment of fiddling, there is the expected flash of blood. Things are going well. I look up at my patient briefly and smile reassuringly, but when I look back, a large hematoma has formed—I have blown this gentleman's vein. Suddenly, the confidence drains from me and a flush rises from my chest up into my throat and a strange metallic taste becomes evident, like I am sucking on an old penny. I quickly apply pressure with a four by four, withdraw the needle, and begin apologizing profusely to the gentleman. I am terribly embarrassed and upset. This elderly veteran has come in with intractable pain and pneumonia and, after subjecting him to my unskilled physical examination, I have now done him bodily harm. Wonderful! First patient on my first clerkship and I already have blown the whole *primum non nocere* thing out of the water. What's next?

I am now so flustered that I can hardly form sentences. I am talking faster and trying to figure out how to get out of the room as quickly as possible. Then I hear a soft, calming voice coming from the vicinity of my mistake. It is my patient. He says, "It's alright, son. Just calm down and try again. You can do it."

I stick him four more times before I get his intravenous line in and he never complains or flinches. In fact, he smiles and congratulates me when I am done.

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CONTINUING THE LEGACY

I am one in a long line of U.S. armed forces veterans in my family. My great uncle, Llewellyn Estes, was awarded the Congressional Medal of Honor for gallantry in the Civil War and my father received the Bronze Star medal for service in the Vietnam War. My years as a submarine officer, which began at the U.S. Naval Academy, were not punctuated by decorations, but they did indelibly imprint upon me a respect for those who have served, for those who have offered, by virtue of their wearing the uniform, to lay down their lives for others.

Because of my family and my personal past, I certainly have an unfair advantage when trying to find common ground with these men and women. It is more natural for me to ask about their service and to share my own experiences with them. An honest curiosity about their service can be fostered in anyone, though, and beginning a patient interview in this manner will allow for a patient-physician connection unlike any other. Further, an expression of gratitude for their sacrifice—no matter your political views—will begin the formation of a therapeutic alliance more quickly and surely than anything else.

The opportunity to serve these brave men and women now as a physician in training has afforded me not only with great satisfaction but also with an education that is second to none. Clinicians who work in the VA health care system are a rare breed. They accept, for the most part, lower pay than their peers and take care of patients who are typically sicker. They are involved heavily in research and education and devote themselves every day to their patients, students, and craft.

All this having been said, it is not the health care professionals at the VA that make the experience what it is—it is the veterans. Their continued desire to be of service sets them apart from many other patients. The combat veterans in particular offer lessons to health care providers that are unavailable anywhere else. They already have faced challenges far greater than any that they will face on the wards of a VA hospital. How can cellulitis compare to heavy small arms fire or pneumonia to exiting an amphibious tractor on to Utah beach? Their experience in the face of death earlier in their lives informs their approach to it later in the hospital.

As our patients' students, we would do well to heed these lessons. One of my patients once told me that he thought his macular degeneration was greatly at fault for his hearing loss. When I explained to him that this was impossible, he quipped, "Doc, you don't know what you're talking about. The blinder I get, the harder it is for me to find my damn hearing aids."

REMEMBERING THE PATIENTS WE SERVE

Rotating at a VA hospital allows us an opportunity not only to serve our nation's heroes, and in turn our nation, but also to peruse a living history book. I once took care of an elderly gentleman admitted for syncope episodes secondary to idiopathic supraventricular tachycardia. This gentleman also had a touch of prostatic hypertrophy and subsequently needed to be catheterized. We chatted about his military service while I prepared the urinary catheter kit. I put on some gloves and took the matter

in hand. Exactly at this moment he began recounting his experience on the Bataan Death March. As the urine flowed out of him, he sighed in relief and continued his story, tears flowing freely down his cheeks.

For many of these men and women, just the act of coming to a VA health care facility is therapeutic. It is in the halls of the VA and in the company of their peers that they feel most at home, best understood, and least judged. They proudly wear their insignia and recognize those of their fellow veterans. And just as you can tell something about your fellow physician by the causes they choose to advertise on their white coats, you can glean a wealth of information about your patients by the insignia they choose to display.

While on the geriatric evaluation and management floor several months ago, I asked my patient, an elderly black veteran, what the “Come Out Fighting” patch on his jacket meant. He told me that it was a Black Panthers slogan and that he was one of the

with some of his friends from the 761st tank battalion. I went home that night and read up on the treatment of community-acquired pneumonia, as well as the 761st tank battalion—a group of black tankers who saw action on November 7, 1944 in France and were later named the “Black Panthers,” due to their insignia.¹ These men fought as fiercely and died as bravely for the allies as any unit in World War II, only to return home to the same bigotry that they had faced before the war.

On another occasion, I visited an elderly patient who had entered the hospital with a posture that said, “Marine,” louder than his “Semper Paratus” t-shirt. What a difference five days can make—now he lay hemiparetic and in an opiate-induced haze. His family of heavy-set folks from central Ohio had taken up residence in his hospital room, leaving only for brief meals and restroom visits. I had watched his grandson standing exactly where I had stood years before: next to a barely recognizable grandfather, surrounded by loved ones and their forced conver-

his paralyzed hand, now cold and heavy, while she held his good one. He mumbled something unintelligible and then we all shared a few moments of silence. I left the two of them like that—peaceful, and yet in the throes of battle. He passed quietly about ten minutes later.

WE STAND UNITED

While not present when these gentlemen experienced their first battles, we need not, as Henry V said in his speech before the battle of Agincourt, “hold our manhoods cheap.” We need only to be willing to strip our sleeves and stand next to them in the trenches now, during their final battles. And one day we will remember, with advantages, the feats that we and our patients did together on the hospital wards of the VA. ●

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REFERENCE

1. The 761st Tank Battalion web site. <http://www.761st.com>. Accessed June 18, 2009.

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original members of the organization. At first, I thought I had just hit upon a symptom of undiagnosed dementia. He was 88 years old and didn't strike me as someone who would belong to a 1960's counterculture activist organization. He continued to tell me how wonderful it was to have served under “good old blood and guts,” which is how he referred to General George S. Patton, and that he still kept in touch

with some of his friends from the 761st tank battalion. The grandson had since returned to Camp Pendleton and his battalion of marines, though, and the patient's granddaughters all had gone outside to smoke. The patient's wife and I were the only ones left in the room with him. The patient's wife told me how proud he was of his grandson and how happy he had been to see him one more time. I briefly held