MIND TO MIND

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

Carol Wiley Cassella, M.D., Editor

A Critical Care Holiday Poem

Lance M. Retherford, M.D.*

Twas a cold winter's evening in Washington Heights, I was on-call and sure to be up through the night: The unit was crowded, the patients were ill, my one empty bed, I knew would soon fill.

The patients were resting all snug in their beds, While RASS scores were carefully titrated with meds. Yet there were fluids to bolus, effusions to tap, and the PAs and nurses were off taking naps!

And then down the hall there arose such a clatter: apparently a BiVAD was starting to chatter! So to the bedside, I flew like a flash, and gave some albumin before the patient could crash.

The fluorescent lighting on the freshly-waxed floor gave a strange, eerie glow I had come to abhor. When what to my now-weary eyes should appear, but a cardiac surgeon with a phone to his ear.

His tone was unkind as he started to yell, He was in a foul mood, for his patients weren't well: "They're on ECMO, on LVADs, on Nitric, on pressors! Balloon pumps! Impellas!" roared the irate professor.

Copyright © 2013, the American Society of Anesthesiologists, Inc. Lippincott Williams & Wilkins. Anesthesiology 2013; 119:1493-4

^{*} Columbia University, New York, New York. lance.retherford@gmail.com Accepted for publication August 16, 2013.

"They have too much volume, and high CVPs, You must use more Lasix, and get them to pee" His message was clear. In a word: diurese. Perhaps he might then leave my unit in peace.

And then in a twinkling to the OR he fled, for a CABG awaited (There goes my last bed!). The patient was pale, having had an MI, He was fearful and scared and afraid he may die.

They toiled for hours repairing his heart, but coming off bypass the thing wouldn't start. With pacing, some epi and one shock (or two), this time was much better and off pump they flew!

He arrived to my unit on minimal drips, With a fresh rosy hue to his cheeks and his lips. He began to awake, extubation was nigh! So I pulled out that tube in the blink of an eye.

And then off I scurried, for I had much to do: There were lines to be placed and new labs to review. My census had survived without unplanned deletions, (even Bed 22 with tenacious secretions!).

Before long it was morning, I was tired, no doubt, But there was bedflow to update and lists to print out. So I completed my tasks with a small bit of cheer, knowing amazing things are happening here!