

“Tiene sangre in su caca?”

Caralee E. Caplan

6:50 am Radio jingle blaring. So tired. On call last night, admitted 4 oncology and 5 cardiology patients, but managed miraculously to sleep in own bed for 3 hours. Husband asleep. Must snooze. So cozy.

6:57 am “. . . and New York residents choose the First Lady as their senator . . .” Yahoo for the carpetbagger! No more negative campaign ads to sully precious post-call moments. Yawn. Celebratory snooze in order.

7:18 am Must have snoozed unconsciously a couple of times. Am sitting bolt upright in bed, assaulted by Ricky Martin (not literally, of course). Am baffled by version of self that made it to work at 5:30 am last year as an intern. Have exactly 6 minutes to find pair of clean scrubs and be at cross-town bus stop in time to make Morning Report.

7:30 am Sweating. Not so much because of sprint to bus in ridiculous hospital clogs that refuse to stay on feet but because of debate with drugstore cashier regarding my worthiness for change of a dollar.

7:40 am Lost debate. With coins collected from fellow commuters and help of woman who let me squeeze through turnstile with her (hooray for friendly New Yorkers!), have made it across Central Park to C train. Am always amazed by dare-devil types who hang off edge of platform on one foot to look for approaching train. Aren't they concerned about being pushed onto tracks with dog-sized rats? They ought to be plastering themselves to wall and planning escape routes like normal people.

8:00 am Have made it in nick of time. Case of a 35-year-old homeless woman found coughing, confused and nonverbal on street. Workup revealed HIV, central nervous system toxoplasmosis, and *Pneumocystis carinii* pneumonia. Things have changed since the '80s, but the AIDS-TB Service here is still alive and well.

9:00 am Sitting at nursing station with interns Barbara and Lenny, discussing plans for day for patients on Oncology Service. Barb is decidedly postcall, hair sticking up in all directions, vaguely defeated as she describes last night's adventures: 4 neutropenic fevers, a GI bleed, and a respiratory arrest from too many fentanyl patches. As usual, she is taking care of 12 patients, and Lenny, smug and well-rested, has only 4. “Call karma,” he says. Barb, like myself, has none.

10:00 am Checked on sicker patients before Attending Rounds. Only 2 presentations today, because most of Barb's admissions are “privates,” and attendings only need to hear about “ward” cases.



12:00 noon Scrolled labs, called in echos, performed lumbar puncture, contacted a patient's health care proxy regarding DNR status, and still made it to noon conference. Starving. Free greasy Chinese food. No cutlery.

2:00 pm Medicine clinic: 6 exam rooms, 2 clerks, a nurse and every patient in the neighborhood. Time to wield my medical Spanish. “*Tiene sangre in su caca? Ha tenido el dolor antes?* (Is there blood in your stool? Have you had the pain before?)” Saw first of 7 patients — a 65-year-old man with chronic pain since a gunshot wound 16 years ago, determined to make me laugh at every appointment. Hope my next patient shows. Have had difficulty controlling her blood pressure. She is “pharmacologically autonomous” (PC for “non-compliant”).

3:00 pm Where are the interpreters?

4:15 pm Barb paging me because one patient fell out of bed, another has a systolic blood pressure of 70, and another has decided to sign out AMA because “we're torturing her with tests.”

5:15 pm While ordering head CT, found annoying scrap of paper in patient's chart: “The insurance company is monitoring this patient's hospital stay.” Will relish crumpling it up and tossing it in trash.

6:30 pm Hoped to get home before husband left for moonlighting job, but interns despondent, Mrs. C. in desperate need of disimpaction and someone just went into rapid a fib. Will see him at NYC marathon this weekend.

8:45 pm Decided to splurge for cab. Love shooting down East Side Highway watching bridges fly by in dark. Almost home.

Dr. Caplan, a former editorial fellow at *CMAJ*, is a second-year resident in internal medicine at the Columbia Campus, New York Presbyterian Hospital.