

EMERGENCY MEDICINE

## Training helps doctors give families heart-breaking news

The new resident didn't expect his day to go this way. For the better part of the month, he had been coming to work nearly every day, seeing patients, stabilizing medical conditions and treating illness and injury.

He was used to making people better. So his first loss in the emergency department hit him hard.

He had done all the right things for this patient. He recognized the likelihood of a blood clot to the lungs, had managed the patient's respiratory distress and circulatory problems, had given the patient blood thinners and had treated abnormal heart rhythms.

The patient was a young man, otherwise healthy and doing well at home after a hospital stay for a broken leg. But he was now dead, and the resident was crushed.

Yet his personal grief had to be put aside. As I walked with him to the "family room," a private area where families and loved ones can talk with health-care providers, I reminded him of his training.

We talked about the lectures on death notification. We talked about the exercises he'd been through with the pretend families in our skills lab.

I was hopeful that his training would

carry him through, and it did.

He did beautifully.

The patient had come to the emergency department with an extended family of six brothers and sisters, parents, grandparents and a few aunts and uncles. Although the family knew he was very sick by the time medics arrived at the house, the family's grief was sudden and profound.

The resident comforted, reassured, answered questions and offered condolences. He let the family know that the patient felt no pain and was surrounded by those he loved when he died, and that there was nothing that they or anyone else could have done.

My resident was strong, sensitive, supportive and empathetic.

As we left the room, one of the aunts followed me out the door, hugged me and whispered, "Thank you. He's going to be a great doctor someday."

I whispered back, "He already is."

The resident and I walked the 21 steps back to the emergency department's treatment area in silence. I know those 21 steps well.

They're all I have for my own thoughts, for my own grief and for my own composure. And the resident was about to learn how to make each of those 21 steps count so he could get back to his job of trying to save lives.



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