Family Medicine Moments
November 17, 2022

Introduction: This week we are continuing the Veterans theme (Veterans Day just does not seem long enough to honour those who serve and have served in our military). Tony Valdini is Research Director at the Greater Lawrence Family Health Center Residency Program. He shares with us his experiences from the distant past as a student working in a Veterans hospital and how the lessons learned still serve him well. See how it resonates with your experiences with patient educators.

Together
By Tony Valdini

“You’re going to call your commanding officer, just because you missed twice?”

Hal, my patient was surprisingly exasperated.

I was flustered and embarrassed, while fumbling to wrap up the spent blood gas kit and a cup of ice. Disappearing was what I had in mind.

“Yeah, I don’t want to stick you again, it’ll only hurt you more and we’re just not getting it.” Meanwhile, his brachial artery – probably the width of a pencil – pulsed shamelessly beneath my fingers. If only I could have gotten the tip of the needle in it.

The tattoos on his arms – I had chosen the one with “USMC” and left the hula girl alone – added to the gravitas of this grizzled vet, my dad’s age, who had fought in the Pacific.
“You’ve got to get serious about this, son.” Hal paused and turned his gaze directly on me, trying to measure my resolve.

“What is the mission?” he asked in a tone that was only slightly impatient.

“We’re supposed to get a blood gas on you to try and figure out your breathing problems,” I responded, noting the pack of Pall Malls stuffed into his johnnie.

“So, two tries and you quit? That’s it? Just like that? Call for mommy?” OK, a lot more impatient.

“Hal, I don’t want to hurt you anymore, especially….”

“A little stick is not the issue, doing your job is the issue.” He looked down, sighed, then right back up and continued, his tone not asking but telling.

“Son, go get another kit and come back. You keep sticking me until we both see blood. Accomplish the mission, simple.”

I went back to the supply room thinking a third try was a bad idea. But I guess if he’s up for it, we can keep trying. Accomplish the mission. Hal appeared relaxed as he held out his arm for another stab by this third-year medical student. I lined up the pulse beneath betadine-stained gloved fingers.

“Big stick Hal,”

“Yeah, don’t worry about me.”

Jackpot! The needle hit home right between my two fingers that were straddling the pulse, where the artery sat the entire time. The syringe plunger pulsed up the barrel, a brighter red than I had imagined, bit by bit until there was plenty. Both of us were grinning like we had just won something big. I pulled the needle out and put pressure on the stick.

“I knew you could do it, son. And you didn’t have to call your commanding officer.”

The VA hospital in Syracuse in the 70’s was an unusual spot by today’s standards. First, it had 16 bed wards where several men would answer questions asked of just one. The curtains did not block sound, nor provide any privacy. Odors, conversations, and interactions of any kind were shared. Next, no women were admitted while I worked there. Last, and most interesting to me, was a mixing of two age clusters: World War two vets in their 60s, and guys who served in Vietnam, roughly in their 20s. The demographic difference didn’t end with age, the older group was mostly white, while the younger men were mostly African American. Outside of the hospital, at that time, in that part of the country, there wasn’t much mixing or opportunity to get to know each other.

But that was the surprise. There was constant, seemingly merciless teasing from the younger guys directed at the older ones, who loved it, and returned it with glee. Old men being told by younger ones, “Bob you look like 15 miles of bad road, let’s get you a shave before your family comes,” and then gently lathering and scraping off their stubble. All the while loving profanities were passed back and forth. Onlookers joined
with their favorite insults. It was obvious to me that these men cared deeply about each other. If you just listened to the words, you would have missed it. But if you watched their faces and their actions you would have understood their regard for each other. Old guys asking about the younger men’s families and what kind of work they had planned for themselves. The younger men loaded up WWII vets in wheelchair trains and pushed them outside the hospital on a sunny day, all the while being harangued with a litany of profanities and false criticism about being “worthless goldbricks” who were just in the hospital to shop at the PX, eat government food, and watch free movies.

One day I mentioned to Hal that I was really surprised to see that all the guys got along so well. He appeared puzzled at my ignorance and let me know why.

“We’re all in this shit together,” he summarized in a sentence, his serious tone and look made it clear – he meant it.

The thought has never left me.

Yesterday, I was the patient, waiting for a chemo treatment. Despite the fact that I have bulging veins like an 80-year-old stone worker, my youngish infusion nurse at the cancer hospital blew an IV stick and wanted to go get her supervisor for help. I insisted that she give it another try.

We talked about some IV starting tips and found a new spot to place it. She got it this time, no problem, and thanked me profusely. Then she asked why I’d let her try again. I told her that I was happy to help "build her confidence," but Hal and I knew the real answer.

We’re all in this together.

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