

Doctors And Death

To begin, I want to say right up front that I have nothing but the highest respect for our men and women who get to put a 'DR' in front of their names. Many of us think of doctors as people who live in a tax bracket much higher than ours, play golf every Wednesday and are frequently seen at social events that require a tux.

What we don't see are the many hours spent at their jobs trying to make people well. They live a life that is committed to that dreaded 'beeper' that interrupts their family outings, social events and intimate moments with their spouse.

Working at the morgue, I have learned that there is one subject that most doctors know very little about... dying.

I guess they are taught to save lives and make people well, so the subject of dying is not a topic that comes up very often.

It really is unfortunate, though. There have been many evenings when I have had to drag doctors out of dinner parties, out of bed and many other situations because they were unaware of the normal routine when a patient dies.

It's really quite simple. Let me briefly give you a lesson.

When a patient dies in a hospital or at home of natural causes, (a death that is not entirely unexpected), all we need here at the Medical Examiner's Office is some of the basic information. This information includes knowing who the doctor is that will sign the death certificate and what that doctor will be putting down as the cause of death. This information is filed with insurance companies and is vital to our department. Often times when the death is an expected one, this information can be obtained from a qualified nurse, so as not to have to disturb the doctor at their dinner parties or their sleep.

All a doctor has to do is leave word with the charge nurse that, should the patient die before they return, that he/she would sign the death certificate and put such and such as the cause of death. That being said, the doctor quite often can go ahead with their dinner plans without any interruptions.

It amazes me how seldom this process works this way. Too often, I'll get a call from a nurse and, after getting all the information, I'll ask who the doctor is who will be signing the death certificate and what they will be putting down as the cause of death. The response frequently is, "Well, Doctor so-and-so will probably sign the death certificate, but I'm not sure what he'll put as the cause of death."

Now the fun begins. I've got to do whatever I can to flag down this doctor and find out the specifics before I can release the body to the funeral home. This is even more difficult and irritating when the body is at their home with a wife, family and friends sitting in the living room and some police anxious to get on with their duties. Hospitals, too become very impatient as they are anxious to release the body and free up the bed space.

So here I am trying very hard to find this doctor so I can release the body to the funeral home. I have a great deal of pressure from the location of the body from people who don't understand what the delay is all about. The rule of thumb is that I have about one half hour to get this all taken care of before things begin to get rough.

After threatening answering services, I finally get a return call from a doctor who is usually very upset that I should be bothering them at such an hour.

After I explain to them that their patient has passed away, and that I need to know if they would be signing the death certificate, I more often than not, get a very unfriendly response... "Well, of course I'm going to sign the death certificate. I'm her doctor, aren't I?!"... "You mean you took me away from my evening to ask me that?!?"... and many other comments, some which cannot be repeated.

I bite my words, but inside I am saying..."Hey buster, if you had left word with the nurse before you left, I wouldn't have to be bugging you, so back off! !"... politely, I take down the information, knowing that what I don't need is to get into a drawn out discussion with this doctor... remembering that there are people waiting on me to get this body released.

Then I get to the really challenging question... "What will you be putting as the cause of death?"

Doctors are a funny lot. They just hate to have their intelligence challenged, especially by some five-dollar-an-hour morgue attendant. Too many times, a doctor will tell me that they will put 'Cardiac Arrest' or 'Respiratory failure' as the cause of death. I feel bad, but a job is a job, so I give them a little lesson in medicine.

"Well, doctor, Cardiac arrest is not a cause of death... everybody's heart stops beating when they die... there has to be a reason that the heart stopped beating?" Or, "Well, doctor, I'm afraid that everybody stops breathing when they die... there has to be a reason why this person stopped breathing?"

Well doctors really get upset with me at this point. In their anger, they usually run off a five thousand word medical history of the patient that I not only have no clue as to what he is saying, but almost every word of those five thousand are at least twelve letters long and I am not about to ask the upset doctor to spell this essay out for me.

After a few months on the job, I found a way to nip this sucker in the bud. I had the secretary type up the list of all the acceptable causes of death for me to use as a reference when I am talking to the doctors. The list was a collection of foreign words and letters to me, but boy howdy, did they ever get the job done in those times when I really needed to get the body released to the funeral home as quickly as possible.

When a doctor would start giving me a bad time about the cause of death, I would politely, trying ever so much to sound intelligent, cut in with, "Well, doctor, would you say that the patient had an ASCVD?" (Whatever that was). The doctor, refusing to be shown up by a mere morgue attendant, would clear his voice and say, "Well no. I would say that it was probably an acute MI."

Bingo!! Acute MI is on my list! I tell the doctor that this would be just fine and that I appreciate his cooperation. I got back to the location of the body and tell the people who have been waiting so patiently to go ahead and release the body to the appropriate funeral home... my job done.

All this wrestling could be avoided if the doctors would just let people know what they will do should the patient die soon.

Now for the record, I am talking about some of the doctors that I had to deal with over the phone. I am quite sure that there are many doctors who are much better at handling a patient's death, and certainly, there were a number of occasions when I called a doctor and found them to be very cooperative and friendly.

But in over a year of working at the morgue, I found it extremely interesting how many doctors do not know what to do when one of their patients die.

Well I kept my list of causes of death even after I left the job. Who knows, someday I just might be a big shot writer and be invited to one of those social gatherings that require a tux. Maybe I'll run into a few doctors and we can talk 'shop'

Maybe I'll even be able to find out what the hell an ASCVD is.