

Patient Identification

Category: Diversity

written by Colleen T. Fogarty | May 13, 2025

As a family doc myself, I sought care with a family physician for my family and myself. We'd moved to a major metropolitan area, and I chose a family medicine group affiliated with a small hospital in the city, the same group and hospital who'd attended me for my first childbirth. The hospital's historic mission was to care for poor patients, many of whom were recent immigrants.

In my new, more affluent urban neighborhood, I joined a support group of new mothers. We were all white and all but me were planning to give birth at "name brand" tertiary medical centers. But having done my residency in a community hospital, I felt comfortable getting my care at one and had every confidence in the staff; the truth was, they'd saved my life when my first son was born.

My second childbirth was easier. After my next son was born, my experience in the hospital was very quiet. My husband was home with our toddler, and we didn't have any family in the area, so I had no visitors. I spent my time resting and gazing at my beautiful newborn. Aside from the baby, I interacted only with the technicians, nurses, and other staff—many of whom represented the community the hospital served.

On my first post-partum day, a phlebotomist came in to draw my blood. She spoke with an accent that suggested English may not have been her first language. As she asked my name and date of birth, then looked at my ID band, she repeated my name, looked at me, and did a double take. "You American?" she asked.

I nodded my assent, and she went on, "Oh, wow. We don't get a lot of Americans here."

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