

The Paperweight

Category: Paperwork

written by Cynthia Stock | January 22, 2018

I retired last October. After forty years in a cardiovascular ICU, I left the profession I loved. I left, in part, because of the paperwork.

Contrary to initial predictions, the introduction of computer charting stole time from patient care. The computer became an altar of worship by which regulatory commissions evaluated bedside practice. Documenting care usurped the actual performance of it.

One day, less than five minutes into my shift, my patient, who had been in the hospital for months, asked for the bedpan. With the help of her husband, I positioned her on the pan. The effort sent her into acute respiratory distress. I called her doctor, and he rushed to the bedside.

For the next six hours, I did not leave my patient. Not for lunch. Not to go to the bathroom. During that time, we intubated, started multiple pressors to maintain blood pressure, inserted a central line and called a meeting to discuss the plan of care with the patient's spouse. He decided to make his wife a DNR. All the MDs concurred. I charted an assessment, the events leading to the crisis, the acute interventions, medications, phone calls made, what was said, more interventions and I documented minute-by-minute vital signs. I entered and validated orders. When things finally stabilized, I actually got to leave the room.

As I left, a piece of paper taped to the door confronted me with rows and rows of boxes: boxes for my initials to show I performed hourly rounds on my patient. It was not a legal part of the chart, but a thing mandated by some bureaucrat. All anyone had to do was read my nurses' notes, check the documented times I adjusted drips, and speak to the patient's husband, who was present most of the the time, to know where I spent my workday.

Initialing those boxes at the end of that day diminished my work and demeaned my profession. It convinced me that the Golden Age of Nursing that I, and those my age enjoyed, was gone. And now, sadly, so am I.

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