

Hot Start: Emergency Medicine Residency

Category: Watching the Clock

written by Tucker J. Brady | January 7, 2026

"If I had known it would be like this, I never would have come here," said my 90-year-old patient with chest pain, sitting in the EMS gurney awaiting triage. All around are beds, lining the wall, with elderly, demented patients moaning.

A younger man in handcuffs flanked by sheriff's deputies stares me down, and the officers give me an inquisitive look, as if to say, "Is anyone going to help us?" I tell them that a doctor will see him when we get a chance. One of the officers rolls his eyes.

I turn back to the elderly man in front of me, voice my shared frustration, and tell him that we will start his evaluation but that he will be transferred to the already full waiting room to wait for his results.

Meanwhile, I call to admit a woman in the waiting room with an intra-abdominal abscess discovered on a CT scan, ordered well before my shift started. The surgeon tells me to call interventional radiology to place a drain. The interventional radiologist says the abscess is in an area they cannot reach and that I need to speak with the surgeon. The surgeon tells me to admit the patient to the hospitalist for IV antibiotics. I call the hospitalist, and he asks which bed the patient is in. "She's still in the waiting room," I say. He tells me to call back when the patient has a bed in the ED. I explain that this may take several hours. He knows. I explain this to the patient. She understands but asks politely for something for pain as she holds her abdomen. "It's been nearly five hours, and I haven't gotten anything." I look at the medical record—she's right. I apologize and order morphine for pain.

A triage nurse walks up to me, grabs my badge, and looks at my name. "Yeah, it's you. Your patient in the waiting room, the old guy with chest pain, wants to speak with you. He wants to leave." I see him staring at me from across the waiting room. I'm about to go speak with him when another triage nurse tells me they are putting a patient in the resuscitation room with a blood pressure of 50/30. I run back to evaluate the patient. His blood pressure is normal now. He feels better. "This always happens when I get dialysis." I place orders in the computer for various tests and tell him I will check on him later.

I head back to the waiting room, but the patient with chest pain does not answer when I call his name. I ask the triage nurse where he is. "He left because you wouldn't talk to him." I call the patient's listed phone number in the chart to ask if he will come back. His line is disconnected. The clerk tells me the surgeon is on the phone. He wants to know why the hospitalist has not admitted the patient with the abscess. I explain. He tells me that

makes no sense. I agree. He hangs up.

I look at my watch. I am two hours into my shift. I have seven hours to go.

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