

MGH Doctor-Mom: Managing Call

by Monique Tello, MD, MPH, Instructor in Medicine

I was on call for our practice recently. My husband was traveling, I was alone with the kids, it was close to bedtime, and I had just given them a bath.

As we were upstairs in the bathroom, I heard my pager go off downstairs. (Yes, mistake number one- I left my pager downstairs!) There I was, toweling off two wiggly giggly squeaky clean kids, and there's a page for me that probably has to do with a patient who I know is in the emergency room.

So I went into speed mode, and started grabbing all the things I needed to get the kids dressed: diapers, cream, PJs....

And then I smelled something.

Now, neither of my kids has ever pooped on the floor before. There's been pee. But I have never seen either of them squat and just poop onto the floor.

And that is exactly what my 20-month-old little girl Maria did right then.

I gasped and froze. She looked at her handiwork, and then... *reached out to touch it.*

"AAAAIGH!!!!" I screamed.

"POOPIE! POOPIE!" My 3-year-old son Gio was jumping up and down, yelling and pointing.

I managed to restrain my daughter, swipe it up with a tissue, and drop it into the toilet.

Meanwhile, BEEP went the pager from downstairs.

Ugh.

If you're a doctor-mom who takes call, then you've been there. That pager always seems to go off at the most inopportune moments; and the kids always seem to act up when you're on the phone. Or maybe your call requires rushing into the hospital. What do you do?

I never feel like I handle my call weeks very gracefully, and I can always use the advice of my colleagues. So, I asked around to see what experiences and advice other doctor-moms have.

Internist and mother K. J. shares that:

“ Usually, I love calling my patients back from home. They seem so grateful and often cut short conversations that would often last longer if they felt I was at work. I have a memory of Joshua (2.5 years) and Noah (10 months) playing well one day when I was paged at home. I could not hear well on the phone. I closed myself in the bathroom to hear the patient better. Then, I heard a loud crash. The boys had knocked a glass lamp off the table. It shattered everywhere and they were standing amidst the glass. I told the patient I would call her back - which was not until about twenty minutes later. Luckily, it was not a time-sensitive issue. The patient was apologetic for bothering me at home!”

Obstetrician and Gynecologist and mother of seven-year-old Jack and 2.5-year-old Vanessa Holly Khachadorian agrees:

“I have definitely returned patient pages with a screaming kiddo in the background. It’s a little distracting, but I think patients understand and are just grateful for the call when you are trying to balance your responsibilities.”

But is there a better way? K.J. writes: “I prefer to never be alone with the kids when on call. I make sure [my husband] is always around.”

Many of us try to have husbands, partners, or even our parents around for our call weeks. Radiation Oncologist Torunn Yock, mother of two, ages five and seven years old, describes:

“ I have been super lucky with call and my husband picking up when I am pulled too many places... I think ahead and schedule [call] for my husband to be around when I am on call. I will also fly in my parents or [my husband’s] parents when available.”

Internist Sandhya Rao, mother of 6-month-old baby girl Meera, also brings her parents in when possible: “I specifically invited my parents to come visit for my last call week. [It] worked out really well. I am doing it again for my next call during Christmas week.”

Rochelle Walensky, infectious disease attending and researcher and mother of three school-aged boys, is on call six weeks a year. She prepares as much as possible, but counts on a supportive partner as well as job flexibility:

“Generally when I’m on call, I know way ahead of time, and devote all of my time to the hospital; getting home for any event/dinner is a bonus. So, most of these conflicts largely arise when there is an unanticipated concert, school event, conference or something that I didn’t plan for. These almost always happen, and [my kids] are now accustomed to my ‘service’ time and that I’m not often available. When absolutely necessary and possible, I go in early or [plan to] stay late, and duck out in the middle of the day to attend. My husband also knows that he’s ‘on’ for home that week so he is always there representing both of us, if I can’t be.”

OB/GYN Khachadorian takes overnight call in the hospital, as well as phone call at other times. She takes advantage of technology:

“Some of my strategies are to try my best to call home just before I'm on call to connect with my kids before the night gets crazy. I think it helps both myself and my kids to just hear each other's voices even if it is only for two minutes... They love giving kisses through the phone and updating me on their day.”

And texting works as well:

“I always hate missing my son's soccer games when I am on call... But what is really cute is Jack thinks it is totally acceptable for my hubby to ‘just text me when he scores’ so I won't miss anything! Thank goodness for technology!”

Miriam Bredella, specialist radiologist and mother of two boys ages 5 and 7 years old also takes advantage of technology when she has to go in:

“Netflix. In radiology, there's usually a free computer around, and I'll bring my boys in to work with me when I have to read cases. Since we limit television during the week, streaming Netflix cartoons is a very effective distraction!”

However, sometimes needing to go in on short notice can cause problems. Bredella describes a recent call when a spine biopsy had to be done urgently:

“My older son was playing in a soccer game, and I was watching from the sidelines along with my younger son. I got a page that the patient was ready for the biopsy and I had to go in. Luckily, the game was being played only across the street from the hospital. A parent I knew agreed to watch my son, and I alerted the coach. The biopsy was of course very complicated, and I was very stressed, wondering how long the game was going to be played. When I got out, the game was over and the parents were gone; even the coach had left. But the boys were fine, playing soccer by themselves in the field!”

Torunn Yock also occasionally has to go in on short notice. She enlists trusted neighbors:

“Occasionally, I just take a chance... I talk to neighbors in the event I have to go in and my husband is out of town. I've been really lucky, knock on wood!”

Helen Delichatsios, internist and mother of two girls, ages 11 and 14 years, is more concerned with managing the everyday surprises:

“In my job, it's not so much when I'm 'on-call' that issues arise. Just general life-work balance, for example, having to deal with family issues when I'm in the middle of every day patient care. The main issue is the unexpected (sick child in the morning, call from school to pick up child, last minute school events) and the like. The key is having a back up plan - spouse, family, neighbor, who can deal with the unexpected....and having some built in flexibility in the job.”

All of these stories are validating, and the suggestions are solid. So what about that page I was trying to get to on my last on-call week?

The beeper was beeping and Maria had just pooped on the floor...

I quickly wrestled Maria into her diaper and PJs. My son Gio is usually easy to get dressed, but that night, he was determined NOT to wear a diaper. He turned and twisted and bent and giggled and I could NOT get the diaper on him. It was comedic: me snapping the diaper down and then re-adjusting it and him laughing and giggling and wiggling away...

BEEP went the pager.

Finally I snapped. I got right down in my son's face, and I yelled as loud as I possibly could, so loud that my throat hurt:

“LET ME PUT THIS DIAPER ON YOU NOW!!!”

THAT made my son hold still for a moment. And I put that diaper right on him.

We managed to get downstairs. I put on the TV and ran to my pager. I answered the page; it was the emergency room. The ER doc was filling me in when:

BANG! CRASH! WAAAAAAHHHH!!! Legos went flying and my daughter started screaming. So there I was on the phone with the ER doc, and as I picked Maria up and held her, with her SCREAMING, both me and the ER doc realized this was not going to work. We couldn't hear each other.

“Listen,” he said, “take your time. Call me back. I've got two little kids, and I've been where you are. No worries.”

“Thank you,” I said, truly grateful, and I hung up to soothe my daughter. After some hugs and cookies, I was able to call him back and discuss the patient.

Ugh. I still feel bad about yelling at my son... What did I learn from that experience, and also from all of this input from our colleagues?

SUGGESTIONS FOR BETTER MANAGING BEING ON-CALL:

1. Job Flexibility. Having understanding staff and colleagues is key. Sometimes, you just have to be home with a sick child.
2. Plan ahead. Have a partner, trusted neighbors, or even parents present, or at least aware, and ready to take over child care on short notice.
3. Take it easy. Don't over-schedule when you know you'll be on call. Lighten your load.
4. Use technology. TV is a wonderful distraction when needed. Phone calls and text messages keep us in touch with our loved ones when work duty calls.
5. Calm down. It's easy to get overwhelmed by competing responsibilities. Take a deep breath.

** My on-call story was adapted from an essay that originally appeared on my own blog in June 2013, www.generallymedicine.com