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PRESLEY

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Two days ago I experienced the death of one of my patients for the first time. Although I hope it's my last, I know that is unrealistic.

She was 5 years old. Presley came to the outpatient clinic with episodic headaches and vomiting. These episodes started on Saturday, September 27th. I saw her on October 15th, almost 3 weeks after her symptoms began. On her initial visit to her pediatrician on October 5th, her parents were told that her symptoms pointed to a viral upper respiratory infection. It would just take time to clear. And she did get better for 2 days. Tuesday and Wednesday she was fine. Playing. Eating. Acting like Presley.

On Thursday, she woke up with a headache and no appetite, and slept until 5pm that day. She was awake for 3 hours, fell back asleep at 8pm, then woke up several times that night due to her headache. The next morning, Presley threw up her cereal and both the Tylenol and ibuprofen she was given to control her headaches. Her parents rushed her to the ER where she received IV fluids and Zofran. She started to feel better and was sent home that day with the diagnosis of a viral illness complicated by dehydration. That whole weekend Presley was fine. She was eating. Drinking. Playing. Acting like Presley.

The following Monday she woke up with a headache and vomited twice. Her mother said Presley threw up every time the ibuprofen wore off. Presley was not seen by another health professional until I saw her on the 15th. Her established pediatrician was on vacation, so she was a new patient to my preceptor. I looked at her face sheet before I entered. Migraine was the only information I had to go on. Immediately prior to

seeing Presley, I saw an 11-year-old boy with seemingly benign headaches, most likely due to the fact that he needed an updated prescription for his glasses. After that encounter, my preceptor educated me on headache red flags—headaches that wake you up at night. Headaches in the morning. Headaches associated with vomiting. Presley had all of these red flags.

I walked into her room to find her draped over her mom. Arms loosely wrapped around her neck. Face buried in her mom's chest to block the light. Her mom proceeded to tell me Presley's history starting with September 27th. How she would get better and then fall deeper than she had the previous time. The anxiety in her mother's voice was fierce. Fighting back tears, her mother told me "she just hasn't been herself all week." On exam, she had thick crusted green mucus around her nose, her eyelids were heavy and she seemed irritated by the light and the fact that I made her get off of her mother's lap. The rest of her exam was unremarkable. We checked for papilledema, a sign of increased intracranial pressure. Kernig's and Brudzinski's, tests for meningitis, were also negative. Still she had 3 red flags.

Outside of the room, I discussed the differential with my preceptor. The most serious possibilities needed to be ruled out first. Because of the thick green mucus in her nose we ordered a CT scan with contrast to rule out an abscess that could be spreading to her brain. I guess because I figured she was going to the hospital to get a stat CT, my opinion of ordering a lumbar puncture did not need to be vocalized. I told myself, "Well, if the CT comes back negative, then I will speak up." Or, surely the hospital will not stop looking for answers on a child with a convincingly serious presentation. That's how I justified shirking my responsibility. After all, I was just a 3rd year medical student under the dominion of seasoned doctors who constantly correct

my zebras to horses. Just the other day my diagnosis of giardia was watered down to lactose intolerance.

After Presley was sent for her CT scan, my thoughts and energy were consumed by the next 20 kids who walked into the office. My doctor was going out of town that Friday, so I wasn't able to hear the results until after the weekend. My mind wandered to that little girl several times over the weekend, hoping and praying that she was in good hands and on her way to recovery.

Monday October 19th, I learned Presley's fate. She was being taken off of life support. My preceptor was greatly distressed and pondered what she could've done differently. The words "I guess I should have ordered a lumbar puncture" still echo in my mind. My world went black. I don't remember much of the conversation that followed. Luckily it was the end of the day when she pulled me into her office to break the news. I don't think I took another breath until I was behind the wheel of my car, gasping for air through tears.

The cause of Presley's death is still unknown. It is suspected to be meningoencephalitis due to an arbovirus, either West Nile, Eastern Equine, or St. Louis. I called my parents to cry and repent of my failure to care for this child. My dad, a family physician, reminded me that there is no treatment except for supportive care. But what if they found it earlier and supportive care was the only boost her immune system needed? I got home, cried for an hour, then got up and ran like a maniac on a completely empty stomach down to the bay. Water calms me. It's the place that I can find God and He can find me. When I got back to the house I found my roommate doing laundry. She had just started her pediatric inpatient rotation at St. Mary's

Hospital. She knew the missing piece of Presley's story—what took place from Thursday, October 15th to Monday, October 19th.

Presley was sent home after a normal CT scan on Thursday, only to return late that night seizing with a fever of 102. Every test was done this time. Now her CT scan showed dilated ventricles indicating hydrocephalus and the whole back of her brain was lit up. Her lumbar puncture was an indeterminate tap, not likely bacterial, probably viral. She was started on broad spectrum antibiotics, antivirals along with supportive care. Presley was lethargic and listless all weekend, and on Sunday, October 18th her brain began to bleed. A neurosurgeon drilled a hole in her head to relieve the pressure, but it was too late. She was declared brain dead and was taken off the ventilator the next day.

I know this little girl's fate does not solely fall on me. She received fragmented medical care, saw two doctors before me, and got sent home by the hospital twice. But the "what ifs" still haunt me. What if a lumbar puncture and symptomatic treatment on Thursday could have kept her from seizing that night? What if that was all that was needed to prevent her brain damage? What if she'd had a treatable form of meningitis? What if...

I refuse to dodge responsibility and absolve my guilt by saying there is no treatment or that I wasn't the only one caring for her.

Presley, you came into my room. I spent 30 minutes with you. I will use the guilt, my guilt, my mistake and the memory of your precious face to accept more responsibility and never leave another "what if" unanswered. I am so sorry, Presley. May your beautiful soul rest in God's presence forever, and may your family find peace. ■

CENTRAL PARK
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