



Testimonial on Project Empathy: Radiation Oncologist, topic contributor and project consultant

It was late Friday night when I got a call from the resident on call – she is having a difficult time with a family member, on the phone, demanding to reverse the code status of a patient whose cognitive and speech function has declined and can no longer speak for herself. My immediate reaction, what is my professional, legal and moral responsibilities? I searched the CPSO website, I read the patients chart, viewed the images, arming myself with all the facts and braced to have a difficult conversation. Fast forward to the next morning, and a few conversations later, I am relieved to learn that the difficult family member is actually a daughter that logistically was unable to be by her mother's side. What is needed of me was careful listening, is reframing of what is being said. How do I share this learning moment so learners and future patients can benefit?

I was delighted when Dr. Rodin put out a call for challenging conversations. Beyond the summary of the facts that I have kept in emails, clinical notes, Dr. Rodin recognized the issues at play instantly as I describe the story. More importantly, he operationalized the issues and dynamics, naming what was unsaid and interpreting what was said but not heard. His team suggested modifications to highlight the interactions, augmenting cultural and gender biases.

Sitting at the Premier of project empathy, the 5 minute video captured the emotions flawlessly. I felt for the daughter, the resident, the nurse all

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appreciative of the support care she feels she receives via PMH HBB. We typically speak for about one hour each Monday morning, although I will need to shift the date for Jan-March due to a course conflict. She prefers morning calls earlier in the week. I am honoured that when we wished each other well for the holidays, she told me she had shared with her San Francisco friend the level of care.

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