

## Turning Foes to Friends: Establishing Collegiality in the ED

Alan Sazama, MD FAAEM

Hopefully you've had the opportunity to see the fantastic sequel to "Top Gun" by now, but let's flash back to the original 1986 hit movie. Tom Cruise's Maverick faces off in flight training with Val Kilmer's Iceman. The two open the movie as intense adversaries but end the movie as lifelong friends. Many of you are celebrating the end of your long medical training this summer and starting a new job. Some of you will continue at hospitals you trained at, giving you the advantage of being already familiar with many of the consulting services. Some, however, will find themselves starting off with a new roster of colleagues at a different hospital. The 24/7 nature of the emergency department leads to us calling on our new colleagues at inopportune times such as nights, weekends, and holidays. This can lead to an Iceman/Maverick adversarial start to these relationships. Let's look at some practical tips to turn our colleagues in the hospital from foes to friends.

### Be an excellent emergency physician

Residency uniquely prepares you to practice medicine independently. It's important, however, to always continue learning. Sitting now on a medical school admissions committee, I frequently hear premedical students talk about how the prospect of being a lifelong learner excites them. Now that you've reached the end of your training journey, don't forget this! In your first couple of years out of residency, you'll find the experience of independent practice an effective but sometimes cruel teacher. Use these first years of transition to become excellent at your craft. This excellence will breed respect amongst the other specialties in the hospital. While they may not be thrilled to receive a call from the ED at 3 a.m., they'll know if it is coming from you, it is indeed important and that a patient will need their expertise. Even if they persist being adversarial, you'll know that you are providing the best care for your patients.



## Collaborate

Recently, I had the pleasure of taking care of a pleasant lady who unfortunately had a massive GI bleed. I met with the hospitalist outside the patient's room, and together we discussed her care plan at the bedside and took turns calling the GI consultant who was reluctant to come in. We started massive transfusion protocol and eventually involved interventional radiology to embolize one of her gastric arteries that was actively bleeding. The next day, when I admitted a different patient, the hospitalist came down, and we discussed the previous night's patient. Our collaborative decision making had led to a positive outcome for our mutual patient. This case helped develop a mutual trust and even friendship between me and the hospitalist. It's important to remember in our sometimes-broken health care system that we are really all on the same team, uniting to help patients in need. Collaboration with other specialties can be a rewarding experience and certainly benefits our patients.

## Humanize

Much has been written about burnout in emergency medicine, but it is important to remember that this isn't an emergency medicine problem but a medicine-at-large problem. It can be easy to get frustrated when the consultant is not being as helpful as we think they should be. It can be even easier to be rude back over the phone or in person when they question your expertise. We may not be thinking about what they might be going through currently. It can be hard to know if the surgeon who is barking at you on the phone just got done telling a family that their loved one didn't survive surgery, or if a hospitalist is on their eighth straight admit and is getting paged and

interrupted constantly as they're trying to take care of these patients. The cliché here is "walk a mile in their shoes." Now, none of this changes the fact that a job needs to be done. Regardless of personal feelings, patients need to be taken care of. However, humanizing our consultants can be an important step towards building collegiality. Giving grace to rude or disagreeable consultants can be one of the more challenging aspects of our field yet, if done correctly, can have tremendous payoff.

---

**"It's important to remember in our sometimes-broken health care system that we are really all on the same team, uniting to help patients in need."**

## Hang out!

While it might be wishful thinking to imagine all the hospital's doctors coming together and being the best of friends, there certainly is room for developing relationships outside of work. Find common interests with other doctors. As an example, I love golfing and have formed a golf group with some of my ED colleagues, nurses, surgeons, and hospitalists. We enjoy each other's company outside the hospital walls allowing us to be more collegial within its walls. This further emphasizes the previous point about humanizing each other. Conversation and laughs over 18 holes of golf can build relationships that leads to better teamwork during intense trauma team activations. Maybe this bond happens over similar family

situations, kids, spouses, or other hobbies. Try to find common ground with specialists and look to develop relationships with them outside of work.

For every Maverick and Iceman success story of turning foes into friends, there are some Batman and Joker relationships that stay foes forever. Some consultants will always be prickly to us in the emergency department. This is where it's of the utmost importance to always keep patient care a priority. Do what is best for the patient always, regardless of the unpleasant conversations that

may result. Residency training has probably taught you to have a thick skin. I believe if you apply the above principles, there is a good chance you may be high-fiving consultants like Maverick and Iceman in no time, albeit maybe not on an aircraft carrier. Remember, we are all on the same team! Now, where are my aviators?

**ACKNOWLEDGMENT:**

MedJEM acknowledges AAEM & its "Common Sense" newsletter for their support.