



## Negative Emotions in Stressful Situations

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This is how we were born. This is the way our brain and our emotions work. We tend to be judgmental and emotional. I can't stop thinking of a case, as I was touched by what happened and I thought, if I write about it, I would stop blaming myself for my negative emotions. I was on the rapid response team, when an emergency was called overhead to the 5<sup>th</sup> floor. A 68-year old female patient was hypotensive, and with altered mentation 1 hour after bilateral mastectomy. Rushing to the room with my team, I was quickly struck by the frustrated looks on nurses' faces, but I was too focused on the patient to address them. Trying to gather some information, and at the same time trying to stabilize the patient, I could not ignore the presence of an un-usual person. Loud and bossy, the daughter intimidated everyone in the room, including the resident physicians. She tried to dictate what everyone should do, questioned why anything was done, and blocked access to the patient by holding her hand and leaning over her. Going through the differential diagnosis in my head was very difficult, as I was distracted and annoyed. Asking her to leave the room made her louder, more aggravated, and more demanding. The worst was when she accused the team of causing harm, trying to draw blood, as it was hard to find a vein under pressure. At this point, I felt mad for not being appreciated while I was trying to save someone's life. I felt what she did was inappropriate, but I continued to be professional doing what I came for. I took a deep breath outside the room, when the blood pressure improved, as I felt I needed a moment away from the family. To my surprise, the daughter followed me. This time, with a smile on her face and tears in her eyes, she approached me and apologized. A rapid response was called on her father in the same hospital a month ago. The family was asked to leave the room to allow medical team to assess and

stabilize the patient. That was the last time they saw him breathing. I did not hear what she said next, as I was distracted by my own thoughts. Was I ignorant? But I did not know. Was I too proud, so I got offended? Was I too focused on the patient, that I forgot about the family? I went home feeling guilty judging without knowing that people's backgrounds may affect their behaviors. As physicians we should be more mindful about this issue, and should know that our mission is not to only physically treat patients. We can make a difference, by addressing and understanding families' emotions. On the other hand, physician's clinical performance might be affected by negative incidental emotions. In high-stress conditions, adding an external stressor, like aggressive family members, can increase the likelihood of experiencing negative emotions [1]. How much effort, clinicians put to change such behaviors, is unclear and probably little. This may indicate lack of training on how to work with difficult patients and families. Such training can improve confidence and communication competencies [2,3].

### References

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