

# The oblique view



We continue our series in which Consultant Interventionist Dr Michael Norell takes a sideways look at life in the cath lab...and beyond. In this column, he looks at the myriad of signs that dominate hospital life.

## Signs

Working within any organisation one becomes accustomed to an environment, which, to an outsider, must feel decidedly alien. Every attempt is made to allow the public image to be as open and comprehensible as possible, in the same way as with customer accessible areas of police stations (of which I have no specific knowledge, by the way) or airports. But as far as hospital-based workers are concerned, it is only when we end up on the receiving end of 'health care delivery' that we are obliged to see ourselves as others see us.

A slightly late re-entry into fatherhood caused me to muse on this notion recently and, finding myself attending an antenatal clinic, I just looked around and got to thinking . . .

Firstly, there is the basic external sign-posting. This starts at the main road entrance and guides us to those departments which the public are most likely to require: the laundry, chiropody and the mortuary. Directions to the 'pay and display' parking areas are supplemented by illuminated – and randomly generated – figures supposedly indicating

the number of available free spaces. These turn out to be reasonably accurate just so long as you are prepared to park up on a flowerbed, fence or one-foot-high curb, thereby realising the true purpose of your off-road gas-guzzler.

Then there is the basic geographical layout of the organisation; just as with airports or hotels, hospitals are constructed according to a standard formula. Whether in Amsterdam's Schipol airport, or the lobby of the Meridien Hotel in Paris, one knows instinctively where the toilets are likely to be, even without the help of the silhouetted couple which has become the iconic and internationally recognised sign for the loo. Similarly, in a patient waiting area, you just know where you are likely to find the flower stall, newsagent or cash machine, all (particularly the last) vital resources for the expectant father.

### The eccentric.....

I recall working in one hospital where the internal routes to the A & E department, pathology or main X-ray were marked by different coloured footprints (with

smaller ones heading to the paediatric ward). You would stride diligently along endless corridors, head-down as you religiously followed your assigned pathway, hardly noticing others who were doing the same thing. Collisions and polite apologies were therefore commonplace. The painted shoe patterns even led into the changing cubicles and onto the X-ray table itself; one might have almost expected to see miniature footprints appearing across the subsequently developed X-ray film.

Whether loitering in the waiting area or passing time just by wandering aimlessly along ward corridors, the extraordinary array of notices, posters and announcements make their real impact. We are bombarded by a blunderbuss of messages, each conveniently encompassed in A3 or A4 format. Flyers giving advanced notice of 'upcoming' conferences lie side by side with advertisements for mandatory training sessions and tables converting kilogrammes to their equivalent in stones and pounds. I would suggest that the latter is best avoided, particularly if sited close to a digital weigh-

ing machine and next to the green, yellow, orange and red nomogram that plots your weight against your height proudly indicating whether you are pleasingly svelte or a lard-arse.

### .....and warning

It is simply human nature. When there are the scales and you have all the time in the world on your hands, you automatically step on and after a few seconds the red LED display stabilises. You stare aghast, alternating your gaze between the electronic readout and your position on the aforementioned 'Chart of Death', which has been helpfully positioned at face height in front of you. You think to yourself, "I really do not need to know this right now," as you rapidly calculate just how much your shoes, clothes, watch, mobile phone and loose change, might actually weigh in order to bring you into the 'safe zone' and thereby increase the chances of you still being around when your new infant has her first birthday.

A colourful cartoon demonstrating graphically that "we are what we eat" is blue-tacked next to a photo-

graph of a dissected cigarette exposing its porridge-like innards and thereby reminding us that smoking might not exactly be a sensible thing to do. And nestling amongst glossy posters of the department's submissions to various scientific meetings, is – naturally – the ward's mission statement or its 'philosophy of care'.

This sits nicely alongside the announcement that abusive language or violent behaviour towards hospital staff will not be tolerated – or else! (Huzzah! . . . or else what, exactly?).

A relatively recent addition to the abundant literature that adorns the otherwise dull and faded magnolia walls are the innovative and varied reminders of the importance of personal hygiene and disinfection, both contributing to the armamentarium in the newly-waged battle against MRSA. One has to acknowledge that these posters are eye-catching and clever, if not slightly amusing, but whether they will produce the desired result remains to be seen.

#### .....to 'let's bond'

Just as our cardiology wards have the ubiquitous Frank Netter illustrations of cross-sectioned ventricles and graphic displays of coronary arteries, atheroma, stents and balloons, maternity units are similarly festooned. The overwhelming

advantages of breast feeding are amply described, such as encouragement of maternal bonding and enhanced infant immunity. Mothers, who are keen to relate to their newborn as early as possible, are prompted to discuss with their midwife the possibility of an immediate 'skin on skin, contact experience' with their recent arrival. A phone number to use if one is contemplating a birthing pool sits alongside another offering support for would-be mothers at risk of domestic violence.

To us, who pass by these images day in day out, they appear second nature and barely impinge on our consciousness. But I do wonder what our patients and their families make of this mass of clinical or administrative information. Perhaps just one less cigarette or sausage roll, one pair of cleaner hands and a little more politeness, will make it all worth while. . . at least until you try to peel off the 'Your vehicle is parked in an inappropriate location!' notice from your front windscreen.

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