

The Family Consult That Never Happened

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“Out of curiosity, do you know about legal rules and treatments for noncitizens... specifically organ transplants?” I read my cousin’s text as I got ready to begin my commute home. When I moved back to Miami after being away for 14 years, I had envisioned many changes. The focus of my work was now going to be more on academic family medicine. I was buying a house with my husband. One thing I had not anticipated was the increase in health-related questions coming from family members, especially those without medical insurance. Over the years, our family of four had grown, with family arriving from Colombia. As I looked around my backyard on a warm and humid August afternoon, during my housewarming-birthday barbeque, I now counted 28 relatives. The health questions were usually related to aches, pains, and over-the-counter medications. I answered my cousin’s text with general information, not quite knowing the context.

“The issue is that Pato is very ill and they are suggesting a possible lung transplant...but she may not qualify.”

This question froze me in place. Patricia, whom we all called Pato, was my cousin’s ex-wife. They had two kids and coparented. She was 42 years old and we were her only family in Miami. I knew she had been in the hospital recently, but I did not know that she was sick again.

“Wow. *Asi de grave está Pato?* In which hospital? Is she on BiPAP or intubated?”

“They intubated her today around 11 am.”

I was shocked at how Pato had become so sick, so fast. Yes, during family gatherings, there was the chronic cough that she attributed to her asthma. It was often triggered by her work painting homes and exposure to chemicals. She had seen a doctor who ordered chest imaging and pulmonary function tests, which she had been unable to complete due to the cost.

As I drove home, the queued podcast carried on without my attention. With the stop and go of Miami traffic, I replayed in my mind a conversation I had with Pato months prior. She had mentioned her cough and texted a picture of an ipratropium bromide solution packet. I told her, “When we have a chance, we should talk about alternatives,” because her regimen did not seem optimized. But we never did.

In the days following the news of her critical status, I received more updates along with pictures of her bedside monitor and vitals. Pato was diagnosed with pulmonary tuberculosis, in addition to acute viral infections. She was under precautions and could not have visitors. I called my cousin. His voice was calm and collected as he shared the facts, the pauses giving space to emotion his words could not express. The team was checking in often and had discussed a possible transfer to another facility. I felt powerless not being able to visit; we had to wait and see how she responded to the tuberculosis regimen. I allowed myself to hold on to hope against all odds. But Pato’s condition worsened, and she ultimately passed.

“*Familia,*

Patito está en la gloria del señor,

Inicia su camino al descanso eterno!” my cousin announced via text.

As I sat in the small chapel for the memorial service, I watched as each of my family members filled the slightly dimmed space. We were all dressed in black and gray and listened as the priest, in his white robe and green tunic, spoke about the love and sacrifices Pato had made for her daughters. As tears filled my eyes, I grieved for the loss of a life at such a young age from a condition that could have been treated sooner.

Since Pato's death, I have wondered if the conversation we never had about her medications would have changed her trajectory. Would I have recognized that there was more to her chronic cough than asthma? It is possible that the outcome would have been the same, but now I am left wondering if I could have done more. How could I properly assess her symptoms through quick consults, via texts or calls, and without the tools normally available through my clinic? And what exactly was my role as an extended family member who is also a doctor?

During my commute, beside the highway, I can see the hospital where Pato spent her last moments. The tall, glass-lined walls and the colorful sign highlighting a recent award are a daily reminder that my role as a doctor and a family member are not separate roles. Both roles are part of my identity. I am a daughter who is going to be curious about her mother's lab results. I am a cousin who is going to check in on a cousin about their hospital stay. I am an immigrant who went into medicine to improve the health of communities. And my family is my community. Yes, I will miss opportunities to follow up and offer assistance. But that is part of the process, and I do not have to do it alone. I will ask my family how I can best help and take each health-related question one at a time.