

My son Nick was born with a three chambered heart. He had his first heart surgery when he was five days old, another a three months old, and another when he was a year old. Early in the patient's mother/doctor relationship I made it clear to Dr. Kirk Kanter, Nick's heart surgeon, that I expected to see him daily.

Because of the numerous hospital stays I got to know Dr. Kanter well. During one admission, I waited at Nick's bedside into the early afternoon for Dr. Kanter to make his rounds. He usually made rounds at seven in the morning but that day he had an early case, and had not been by yet. Hungry, and the cafeteria closing time approaching, I gave up on Dr. Kanter showing up until later that evening. I left Nick sleeping after telling the nurse where I was going. Before I left, I wrote a note for Dr. Kanter and posted it on Nick's crib. It read: My child must be well enough to go home if he is well enough for his doctor not to come by and see him.

I returned to find Dr. Kanter coming down the hall towards me. He told me he'd seen Nick and had left a note for me. His note read: This child must need to be in the hospital if his mother doesn't care enough to stay by his bedside.

Dr. Kanter and I, as well as Nick now that he is twenty, have a wonderful open relationship where we say what we think to each other. Dr. Kanter later was the surgeon that did Nick's heart transplant and this year, eighteen years later, he perform an aorta replacement on Nick.

Doctor's need to understand real life for a patient.

Things I did to improve communication between Dr. Kanter and I: I made it clear early in our relationship that I expected to talk to my son's surgeon daily. I learned to

make a list of questions because a doctor's time is valuable. Above all, the process involves a partnership. Both parties must respect each other.