



“All finally becomes clear: he has found a way to disentangle his problems and the first in line is his splinter.”

Enlightenment

‘Oh hell’, he mutters as he careers off the corridor wall. Straightening up, he enters the room.

‘Here.’ I slide the chair up behind him, grateful for once for the smooth lino floor that ticks every infection control requirement but sadly not a single one of those in any Feng Shui handbook.

He sits heavily in the cushioned plastic seat, expelling its air like a sigh. My freshly printed and collated appraisal paperwork, caught by the sudden gust, scatters across that floor.

Seated again myself, I see this happen as if in slow motion. It took me long enough to gather those 49 hours of evidence together. Despite the turbulence of the air and my papers, it is too late to act though.

So I opt just to watch, pretending those were just petals on the wind. I fold my arms, Zen-like.

He proffers a thumb. *‘It’s a splinter from the garden.’*

Shocked afresh at the slide towards insignificant problems patients have the gall to present, I nonetheless remain still, outwardly unperturbed. He sees me merely raise my eyebrows. The thumb hangs there, wavering like an uncertain offer.

‘My wife is waiting to have her cataracts done’, he says, talking in a way that could just be small talk.

‘I know they don’t trust you to make decisions like that any more, but hopefully the referral management system will come up trumps soon.’ Internally, I grimace. Outwardly, I force a benign smile and mutter something inaudible. He’s still talking anyway.

‘While she waits she can’t see to eat. And she’s too weak to hold a needle, never mind the difficulty aiming it.’

I unfold my arms, creating a more open, encouraging posture.

‘I could try referring her to the OT or the dietitian perhaps’, I offer. *‘There is much help available. Especially when she becomes frail enough to be at high risk of admission.’*

He’s ploughing on though.

‘My glaucoma means my vision is not so good either’, he continues, *‘but my main issue is the vertigo. I’m falling all the time.’* He raises his other hand, plastered up to

the elbow. *‘I keep ending up in casualty.’*

I reach for my heavy black marker, ready to sign his plaster cast but he moves it away quickly, denying me the chance. We both watch as this movement causes a few of those pages on the floor to shift or lift their corners, then settle again.

‘I need the splinter out before I can hold a prescription’, he explains, looking at me steadily now, his tone focusing in a way his eyes cannot.

‘Or squeeze my eye drops to get my pressures down, which might help my vision and enable me to get one of your vertigo pills out of its foil packet.’

All finally becomes clear: he has found a way to disentangle his problems and the first in line is his splinter.

‘That does sound a bit optimistic, mind’, I point out, putting that marker down.

‘Yes, but surely you of all people know that the way to Nirvana is a mental challenge as much as a physical experience: without hope the path stays forever dark.’

I reach for his thumb, finally accepting.

‘I still don’t see what I get out of this though’, I say, green needle poised now at the thorn entry site. *‘You get Nirvana and I get to do something that doesn’t even attract a fee.’*

He nods towards the floor.

‘There’s always a reflective entry in your appraisal log’, he suggests, but winces as I dig the needle deeper. He knows I’m fed up with forced reflections.

‘All right’, he concedes, *‘I’ll do you another CPD certificate instead.’*

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