

Women in Emergency Medicine Committee

## The Emergency Physician on “Disability” (Maternity Leave)

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“12 weeks! That is a *long time*.”

That was the first thought I had as my excited friend and fellow emergency physician gushed about our generous maternity benefits. She herself was a mom of two toddlers and on hearing my big announcement was full of helpful advice and upbeat news. She repeatedly said “It will fly by so fast” and I remember thinking that I am *different* and will need major projects to “utilize” this abundance of time. Now, that the end is almost here, I find myself laughing at how naive I was. They say life changes when you have a kid. Well, whoever “they” are, “they” were not kidding.

You cannot blame me for thinking it was a long time, however. What adrenaline driven, high-on-life, ADHD emergency physician would not have that thought on hearing “12 weeks off?” When in your adult life did you get 12 weeks off?

Hence, I made a long list of projects, mainly compromised of non-clinical but professional related work, like CQIS, presentations, etc., that I had been planning, but never gotten around to. You know, the last third of your “to-do” list — the part you never get to. Now all of a sudden this neglected southern section had the position of honor — a time slot dedicated specifically to tackle it. I was all excited to start my “leave” and start working on my projects. This way I would remain productive, and not drive my husband insane. Hmm, everything seemed in order. Excellent!

My upbeat mood and strong grip over my life continued through the last days of my pregnancy *and* through the delivery. My baby, like an obedient intern, was right on time — normal delivery, no complications, no issues. I went into labor right during my last shift and delivered few hours after. Brilliant time management kid! Done like a true emergency physician. So far, so good. She was born precisely at 3:35pm. As my husband likes saying — the precise time my regime ended.

To my bewilderment, the seven pounder snatched my life, days, schedules, lists, and tossed them right into the diaper genie, pretty much the moment she was born. The next two weeks passed in a haze, in a blurred continuity of diaper, feeds, burp, sleep (if you can call 60 minutes stretches that) and reset with a background noise of crying. Actually crying was the good part or else I found myself having this odd compulsion of continuously checking for her breath, *just in case*. You never know with SIDS. During those first two weeks, my tired zombie mind imagined her in all PALS scenarios. Ignorance is bliss and doctors know way too much to experience this bliss ... ever. I had always been the snotty one medically — upturning my nose at people who sought medical care for small cuts, colds, and tummy aches. Keep calm and drink green tea, would be my inner voice advice to half my ED patients for their “ridiculously silly” complaints. Thankfully I always maintained the thin veneer of outward credibility — for this very veneer reflected by my pediatrician must have protected me during my multiple calls for the non-existent “issues” that my baby experienced in my mind. I even sent her a seven minute video of my baby sleeping, while “breathing very loudly” — just to make sure that she didn’t have a congenital laryngeal stenosis, stop scorning, it is an entity — it exists.

After two weeks, she slept for five hours in a stretch! Ask any new parent, and they will tell you that this is an absolutely glorious experience. Like sun peeping out from under the cloudy sky on a “flood warning and thunderstorm” prediction day. Yes, I felt poetic and I felt energized, a little giddy. Almost invincible. I had my life back. Albeit a slightly different life. Maybe like switching to a stick shift. Yes, that’s it. It took a little getting used to but now I was back in control.



*“Let us not treat going back to work as soon as you can as an accolade. Let’s not encourage our women and men to continue with their lives as if nothing has changed. For a lot changes.”*

I took my list out, a sly smile on my face. I decided to start from the “easier” stuff and do some chart reviews. It felt a little silly, being so excited about chart reviews, but after doing nothing-else-but-baby, chart review seemed a nice little tease. Excited, I pulled up my laptop and opened my home access for EMR. Wait, access denied? Oh well, those silly password requirements. Undeterred, I decided it was time to reset my password to my newborn’s name, anyway. Hmm, not able to reset? Ah, well a call to IT is not as bad as it is made out to be. It’s ok. We had good IT support at our ED. Small setback. Hence, still not deterred, I called up IT, explaining them the issue. The friendly IT personnel asked me to hold on for a minute while he looked up the issue. Sometimes it’s a new trainee and they need to ask their colleagues about simple stuff like password reset. That’s alright. The answer came back, “Ma’am, your access has been denied as you are ‘disabled’.”

Hell hath no fury like a postpartum high on hormone, low on sleep, EP being called disabled. I lost it. Every fiber in me became a warrior and I entered into a high-pitched, fast-paced, angry monologue. A small rational corner of my brain told me in a subdued voice that this was not that particular person’s fault and I should have an adult conversation and find out more as to where this “mistake” is coming from. That small voice was

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ignored pretty much like a second year medical student and I ended my monologue by suggesting the IT person to complete his training before answering calls.

The next half an hour I vented out about the inefficiency of this world in general and that person in particular to my still asleep daughter. After which she had enough and woke up and demanded to be served, distracting me from my rage and changing me to the newly born docile mom avatar. After the next round of burp/feed/diaper I handed her over to her doting and very hands-on father. Half glad that I could not “work,” I sat down and composed a very descriptive email to my Chairman to intervene and take care of this highly preposterous situation.

The next few days went in another blur as my daughter decided that a five hour stretch of sleep was not good for my mental health. By now I was fully adjusted to my stay-at-home-mum role. I was now feeling relieved of having no access to my charts/work communication. There was no point of looking at the list and hence I was spending guilt-free doting mother time, or at times, just pampering myself. Enjoying it. Rather *loving it*. I got *the* email from my chair. I opened it, consoling myself that I had few dreamy days and now I can start some “real” work. Luckily for me God and my hospital had different plans in store. Our hospital had made a new policy where anyone on maternity leave will have no access in any official capacity and will not be allowed to do anything work related for the entire 12 weeks.

Stunned, I just laid down, internalizing the content of the email. Accepting it. Loving it. I looked at my chubster and a calmness took over. A feeling of extreme pleasure and pure joy, no guilt, no hurry-lets-complete-the-list, no strategies to “use” the time to the maximum. Just me and the baby. Just being a mother and recovering and bonding. What an absolute bliss! I cannot explain how grateful I felt. I need not compete with the “other” new moms who are back to work before you know it. I need not pretend that my life is still the same, for by far it was not. I could just enjoy the greatest blessing that life can bestow — the blessing of a new life itself.

The next eight weeks flew by. Now, it’s that time. The time to go back to the “real world.” However, I got these 12 weeks of bliss and struggles of being a new mom, pains and pleasures of breastfeeding, of sleepless nights, of hormonal rages, and maternal joys. Of being *just* a mother and *fully* a mother. To rest and recuperate, to bond and feed, to get used to a new life and my new life.

Having a kid changes your life. It is not an easy change. Don’t let anybody tell you otherwise for “they” were right. You need all the help you can get. You need to be “disabled” from work to be fully “able” in your new self and the new life dependent on you. The struggle will go on for your entire life as you are a parent now and it’s not easy being one.

I go back to work, mostly happy and excited, for emergency medicine is still one of my greatest loves. I go back with a happy soul. I wish all the parents out there get to experience these weeks. At the risk of sounding political, I do wish that we bring in a reform, at least in the emergency medicine world. Let us not treat going back to work as soon as you can as an accolade. Let’s not encourage our women *and men* to continue with their lives as if nothing has changed. For a lot changes. Let’s welcome these changes and bring in a culture of taking as much time as we possibly can. To celebrate and adjust. ●



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