## Chairman's Corner

## Listen

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Many of us - especially heads - live in our ivory towers. Take the Chief of Radiology for example - never stops boasting of the "State of the Art" equipment; a fully networked department- reasonably staffed with faculty and residents - purported to be one of the best teaching departments; high volume of patient load, great interventional work, good library and paper publishing record. Looks impressive; many outside KEM believe and think so. But Alas!, here at home in KEM as I listen carefully to my close friends- I realize the harsh reality - poor quality x rays; bad patient scheduling; wrong procedure reports; a mad-house called "USG"; lack of rapport of faculty with colleagues from other departments; Ravi is impossible to find... the list is endless. But could there be such a stark difference between one's vision and the others' perception?

Radiology is supposed to be a "service" department - servicing the needs of others; in a broad sense all departments are servicing the needs of others. Neurosurgery services the needs of a pituitary tumor patient from endocrine; cardiac surgery of a mitral valve from general medicine, the AKD of ARF from all over the hospital .. and so on. The point is, in a hospital such as ours, interdepartmental interaction is inevitable. Therefore, it is important to know what our referring physicians think of our services. Fortunately or unfortunately, the patient is blissfully unaware of the often subtle, but always internecine politics between departments. We can judge ourselves only by listening to others - many of whom are our well wishers - if only we care to listen. Let's ask our close friends what they think of the services we provide them and their patients and then the true friend will tell you the problems and deficiencies. Listen to them carefully; mull over them, discuss them with your colleagues in the department and you have a chance to correct the problems.

Gloss over them, treat them with disdain in an "I am the best" attitude and you will sooner rather than later become irrelevant in this place called KEM. The only patients you will treat are those referred to you from elsewhere. When this happens - the time has come for you to stop and listen - to the undercurrent of softly muttered criticism. If you do not keep your ears open and listen, you will enter the realm of "Who cares what they say" ego trip - a trip from which there is no return. It is just not enough for the patients you treat to be the "validation" for what you do. On the other hand, what you do and what you say, what you believe in and you have "achieved" has to be validated by your peers here in the campus because there are the ones who are most likely to know the true state of affairs, because they are the ones that interact with you and your patients on a day to day basis - either on consultation or referral.

As a radiologist, I learned early in my training, the importance of "follow-up". As a radiologist, too, I have the privilege of coming in contact with several colleagues across multiple departments in the hospital. I have often heard one department claiming to be doing "first class work" when the rest of the hospital is highly dissatisfied with the services they offer or the quality of patient care they provide. In the absence of any formal audit process in our institution, the only way you can improve yourself- if you care to - is to listen. Listen to the harsh criticisms, listen to frayed tempers, listen to camouflaged sarcasm,; mull over and improve where necessary. After all, the next best thing to improve from other people's mistake is to improve from our own mistakes.

Listen - because, they are not always singing your song!

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Contents page