Having been in emergency medicine for almost 10 years, I have witnessed and participated in numerous codes, but the one that still sticks in my mind involves my youngest patient ever.

A woman in her mid-30s was wheeled into the ED and placed in my section of the department. The nurses informed me of the patient’s history: multiple spontaneous abortions under 20 weeks’ gestation, with her latest abortion occurring just prior to her arrival in the ED. She was not bleeding inordinately, had already delivered the placenta, and was comfortable given the circumstances. She had a cerclage fail at least 3 times in prior pregnancies, and she had painlessly delivered this fetus at home while sitting on the toilet. She was used to the evaluation for a spontaneous abortion and informed me that she was ready to go home to her 6-year-old child, who was being watched by a neighbor.

As I left the room, the EMS personnel asked me what they should do with the products of conception, which typically go to the pathology department. I said I would take care of it and accepted the parcel—a linen cloth that was not evidently wet or soiled containing a mass of about 1 lb. I put the bundle down, and as I reached for a jar to place the products in, I saw the cloth suddenly move. My heart quickened, and I gently but quickly unfolded the package. The EMS crew had used the birth kit in their rig and had placed a clip on the umbilicus and severed the cord. The fetus was a boy at about 16 weeks old; its eyes were closed, but I distinctly remember its delicately formed hands. It spasmodically jerked its leg again, and I felt an urge to yell for a code cart and start ventilating the fetus. At the same time, I knew the fetus was too young to survive. My heart still racing, I felt a mixture of helplessness and foolishness in evaluating my impulse to call a code. Still, I did not place the fetus in the mixture of formalin to preserve it. Rather, I sent it by runner to the pathology department just as the EMS crew had given it to me. The mother politely declined to look at him, and I discharged her later that shift after she was seen by the obstetrics service.

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