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A Simple Mistake

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During my fifth morning of rounds, he was extubated. Frankly, I was relieved he was not 1 of my 3 assigned patients. I wanted more opportunities to practice my neurologic exam and his inability to speak, let alone move, would definitely be a barrier. I was assigned to the patient next to him in the intensive care unit (ICU) who had a very interesting exam, and I was already thinking about my presentation. While we were leaving the patient’s room and I was trying to memorize the lab values I had scribbled on my paper, it finally dawned on me, I actually knew this patient.

I knew his face but not his name. I remembered a unique accent, a vibrant personality, and a wild history full of obstacles. It was no wonder I did not recognize him at first; lying in his ICU bed after having suffered a large ischemic stroke, he had lost a lot of what defined him in my mind. Once I recognized his face I was surprised that I had not only failed to recognize his name, but did not speak up when he was presented on rounds as having no history in our system. I was present for part of his history when I was on a different rotation 6 months earlier. I remembered the daily struggles with treating him when his religion precluded us from drawing or giving blood. I remembered that, though he was experiencing homelessness, he had a loving wife in another country whom he spoke to daily. And, perhaps most importantly, I remembered how to spell his name.

In medical school, we are taught about making mistakes. I remember reading and rereading multiple scenarios where a mistake was made and a patient was hurt. We sat down together in a small group and debriefed what happened and why. We talked about the main strategies to employ to avoid making mistakes, like having alarms built-in to the medical record, double checking an order, and having multiple time-outs before a procedure. But this was not giving
someone 10 times the appropriate dose of a medication or operating on the wrong limb. It was a simple spelling error—2 letters switched—and we had no idea who we were treating.

This was a seemingly simple mistake. But by noticing it, we were able to respect his religious wishes and come to a compromise on how to continue safely taking care of him. We were able to reach his wife after finding her number in an old note stored under the correct spelling of his name. She sobbed on the phone to our resident; she had not heard from her husband in over a week and feared the worst. We now knew who he was and how he had interacted with the medical system in the past. We knew about his complicated social situation and overall, we were able to appropriately tailor his care according to his particular circumstances.

Mistakes are made every day in medicine. Fortunately, they are rarely the big, serious ones that we learn about in school. But even the small ones can significantly affect a patient’s life. We may never know where and how the mistake was made in this patient’s journey from his home to the emergency room, but as students and future providers, we need to recognize that even the smallest actions can have a lasting impact on a patient’s life. Something as simple as incorrectly typing in a patient’s name can dictate so much of their care.