FEATURE

CHRISTMAS 2016: PROFESSIONAL MATTERS

A millennial discharge summary

Paul Wicks imagines a discharge summary from the not too distant future

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Disclosures: Paul Wicks is just barely a millennial, which he thinks entitles him to make fun of his own generation (and to just be entitled generally). No patients were trolled during the writing of this article.

Competing interests: I have read and understood BMJ policy on declaration of interests and declare that I have no competing interests.

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Figure

Patient's Name		Bloggs, Joe		Patient's ID		451761453XMAS			
Discharge Summary		Date Admitted		08/12/2016		Date Discharged		13/12/2016	
Final Exam Summary		Discharge Status & Instructions		Clinician's Narrative		Incuded Progress Notes			
Diagnosis:		T23.209. Burn of second degree of unspecified hand, unspecified site.						Referral(s)	
Condition on discharge:		Greatly improved							
Prognosis:		Good							
History of present illness:		<p>22 year old male with 12 000 Instagram followers (bot ratio 15%) "checked in" to the emergency department on Friday night complaining of "OMG 📱🔥🔥🔥🔥🔥"</p> <p>A&E documented a one inch second degree burn to the right palm and multiple superficial burns on fingers arising from a spontaneously combusting smartphone.</p> <p>Exposure to the ignition source was apparently prolonged as the patient took the time to extract his other smartphone, record a brief video, snap a selfie, select a filter, and post it to social media. Online history included labile opinions, frequent group brunches, and liking to excess.</p> <p>Burn was cooled, disinfected, and dressed in A&E, and patient was admitted to the ward after threatening to leave a negative review on TripAdvisor.</p>							
Hospital Course		<p>On arrival to the ward, the patient reported feeling severely 😞😞😞 and described the food as 🍷.</p> <p>Patient's quality of life has been acutely affected now that he is without his primary smartphone and remains more than 12 months away from his next upgrade. We were unable to gather data using the patient reported outcome measures form as the patient disdained the use of pen and paper as "basic."</p> <p>On examination, ego was tender and inflated. Patient was initially unreactive to analogue stimuli until we titrated ward's wifi speed down to 0.6 kbps, which induced involuntary eye rolling and prolonged whining. Rapport was initially established by an FY1 on WhatsApp before that became uncool, then SnapChat (ditto), then Kik (ditto), before resorting to the old fashioned method, SMS/iMessage.</p> <p>Based on the latest government guidelines developed by an advisory committee formed entirely of the commercial sector, we used full spectrum technology deployment to formulate a management plan: We first attempted to crowdsource treatment recommendations on Twitter, but we were unable to decipher many of the replies as they had been massively abbreviated and were lacking punctuation in order to fit the 140 character limit.</p> <p>Next, an international telemedicine consultation was undertaken with our trust's franchised teaching hospital overseas as a virtual grand round. After watching a mandatory 30 second video ad on "Seven essential weight loss tricks that experts don't want you to know," our sister team suggested (via automatic translation) that we might like to "exterminate him somewhat gingerly for two nights obscuring ironing board." We have taken this advice under advisement.</p> <p>A virtual coach recommended a rehabilitative course of Pokemon GO (preferably a Bulbasaur if the trust still has them on formulary), 10 000 steps a day on a FitBit with updates streamed to Facebook so his mum can check them, and gentle thumb calisthenics such as Winter Walk or Angry Birds 2.</p> <p>After consultation with the analogue "version 1.0" multidisciplinary team we have prescribed a course of any topical ointments with 4.5 or more stars on Amazon, referred for a surgical consult with consideration taken into account of residual narcissistic function, and recommended grief counselling to help deal with the untimely loss of a treasured and valued smartphone.</p>							
Follow-up:		<p>Patient has been scheduled for discharge to the community via Uber or Hailo (depending on surge pricing) although our machine learning algorithm has volunteered to continually track his whereabouts, emails, phone calls, personal beliefs, credit rating, overall survival, date of car insurance renewal, and recovery from his most recent injury. We are reassured that these data will help improve our services.</p>							