

## BALANCING FAITH, FAMILY & PRACTICE<sup>SM</sup>

### ***Called Into Chaos***

by Greg Asimakoupoulos

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Middle Eastern cabby deposits a pregnant Hispanic woman in premature labor at the hospital entrance. The doors open as paramedics push a gurney bearing a teenage boy who is barely breathing from a drug overdose. On their heels is an elderly Polish immigrant bleeding profusely, having been mugged by street thugs. There's also a 30-something dad carrying his hysterical young daughter who broke her arm in a soccer game.

Sounds like a plot from an Emmy award-winning TV series, doesn't it? For eight years, millions of viewers have watched "ER," the weekly series about doctors and nurses in a fictional county hospital.

But this scene is taken from the real world, specifically from the emergency room at Provident Hospital of Cook County in Chicago. Steve Roskam, an attending physician there, happens to be a fan of NBC's drama.

"Of all the medical shows on television, 'ER' is my favorite," Steve admits. "It is highly accurate and cutting edge in terms of the medical issues it introduces. Obviously they take some poetic license in order to work within the boundaries of a 60-minute time frame, but I watch it every chance I

get. Even after a hellacious 12-hour shift."

Although Steve enjoys TV's version of emergency medicine, the realities of his job are much more than weekly entertainment; they are a way of life—and ministry.

#### **Medical haberdasher**

Since 1983 Steve, a 1980 graduate of Chicago College of Osteopathic Medicine, has donned his white coat and has said a prayer at the start of each shift. Unaware of the cases he'll be confronted with, he has learned to be prepared for nearly everything and acknowledges his need for spiritual insight.

"I ask the Lord to fill me with His Holy Spirit as well as stamina, compassion and wisdom," the 49-year-old husband and father of two explains. "Unlike many physicians, we who work in the E.R. don't have a choice in the people we see. By law we are required to provide at least a screening exam for anyone who comes through the door."

As an E.R. doc Steve wears a number of different hats in any given shift. He's a pediatrician for a child with a fever. He's a gynecologist for a woman with a

vaginal bleed. He's an orthopedist for someone with a dislocated shoulder. He's a cardiologist for a heart attack victim. He's a trauma surgeon for someone with a gunshot wound.

"Those of us who practice emergency medicine are also required to be social workers, teachers, grief counselors, psychiatrists and 'addictionologists,'" Steve says with his signature smile. "It's a great opportunity to show Christ's love, but the challenges are endless."

One of the challenges Steve alludes to is the lack of relationship between physician and patient. The hospital's available beds are often outnumbered by the people who need them. The increase of malpractice cases has decreased the number of specialists available as either backups or as ones to offer definitive care to the patients requiring it. Added to those dynamics is the obvious: Those who seek emergency care are having a bad day and bring their emotional baggage with them.

#### **Slippery situation**

Of all the E.R. patients he's encountered in the past 20 years, there's one in particular Steve

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has not been able to erase from his memory: a young man built like a linebacker who was high on angel dust. The man went into his bathroom with razor blades and a gallon of Wesson oil, and turned on the water to flood the floor. After attempting to dry shave his head, he took off his clothes and poured the cooking oil all over his body. He then lay down on his back and glided across the flooded floor, repeatedly smashing his bleeding head against the wall. The woman in the apartment below called the police after hearing the banging and noticing a stream of red water running down her wall.

“It took eight cops and security officers to deposit this chemically induced psychopath at the hospital,” Steve recalls. “When I walked into the room, the stark-naked man covered in blood looked at me very calmly and snapped both of the leather restraints on his arms as if to say ‘Don’t mess with me, boy.’ As you might guess, I made a rapid exit to plot my strategy.”

Steve went back to get reinforcements. He alerted hospital security and on-duty Chicago police officers. With their help, Steve “chemically restrained” the man with a sedative and an intravenous antipsychotic.

Another memorable situation involved a young mom and dad who rushed into the E.R. cradling their 5-month-old child, who had died

of SIDS. Terrified that they had done something to cause the child’s death, they sought reassurance that the tragedy was no fault of theirs.

“E.R. docs aren’t the only ones placed in situations like that,” Steve adds, “but telling parents their child has died is the absolute worst part of my job. I’m grateful it doesn’t happen that often.”

### All in the family

Steve’s initial interest in medicine surprised him as much as it did the people who knew him in high school. The eldest of the five Roskam kids, Steve was a competitive gymnast who showed Olympic potential. He also had a passion for the arts and humanities.

“I struggled to make good grades in math and science,” Steve says, “but my dad knew I was motivated by goals. He challenged me to make it into medical school. I took the bait.”

During his first year of residency at Chicago Osteopathic Medical Center, Steve met his sweetheart, Chandler Barnes, a third-year med student. The chemistry between them was a formula for a lifelong commitment, and they were married in 1984 at La Salle Street Church on Chicago’s north side.

“It’s interesting,” he chuckles. “Not only am I married to a doctor

[Chandler is an internist in Stickney Township], but I have a younger brother and a younger sister who are docs as well. I guess my dad gave them the same challenge he gave me. Our annual Roskam family reunion could almost be viewed as a medical convention.”

Steve’s father, Swede, a chemical-products executive, did more than challenge his kids to pursue humanitarian careers. He also encouraged them to serve Christ in whatever they ended up doing. Swede and his wife, Martha, active members at Glen Ellyn Evangelical Covenant Church in suburban Chicago, insisted on weekly worship at church. They also sparked honest discussion of faith issues at home. The elder Roskams modeled a lifestyle that incorporated faith into their daily routines. Steve seeks to do the same.

### Rising to the challenge

Even when his stethoscope is slung over his shoulders, this Christian physician strives to be sensitive to the hearts of people in crisis. And he looks for ways to respond in a manner that gives voice to his relationship with Christ. It could be something as seemingly insignificant as adjusting a bed or getting a blanket or a glass of ice water so the patient is more comfortable.

“I touch patients—shake their hands, pat them on the shoulder, sit

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on the edge of the bed, look them in the eyes,” Steve offers. “When I leave the room, I’ll tell them, ‘Don’t worry! We are going to take good care of you today.’”

When a newly pregnant woman is brought into the E.R. with abdominal pain or vaginal bleeding, he’s quick to be unobtrusively pro-life in his bedside manner. As he scopes the situation with the ultrasound equipment, Steve says he always refers to the child as “your baby” and turns the screen toward the woman so she can see.

“Once I find the baby, I take a picture that I give to the mom,” Steve says. “It’s amazing; the joy on the patient’s face is usually wonderful. But, I can always tell those who intend to get an

abortion, because they don’t want to look.”

When it seems appropriate, Steve is also apt to be up-front in the expression of his faith. As an example, he remembers an elderly woman who was admitted for congestive heart failure.

“When I saw her reading the Psalms, I took the initiative to express my firsthand knowledge of the Lord’s faithfulness,” Steve recalls. “When she realized I was a Christian she asked if I would pray with her. Bending down, I asked for God’s protective hands to hold her during her stay in the hospital. I also asked the Lord for His blessing on the doctors and nurses who would be caring for her.”

Praying aside, moments of respite are the exception during Steve’s 12-hour shifts. More routine is what he describes as “predictable pandemonium.”

“Some run for cover when chaos abounds, but I love it,” Steve says confidently. “I function at the top of my game when things are right on the edge of being out of control.

“In light of that, I believe God has called me to the E.R.”

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*Greg Asimakoupoulos is a freelance writer in Naperville, Ill.*