



What They Didn't Teach You in Medical School:

The Cynic's Glossary of Public Hospital Terms

Medical school is supposed to prepare us for hospital life. But the experience The Hobbit had is far from it. From Day 1, one is inundated with terms and fanciful slogans that a doctor never did come across in medical school. Fear not, The Hobbit will now share with you his take on what they mean:

ACADEMIC MEDICAL CENTRE

A place where medicine is researched on, taught and practiced by doctors who consider how much they are paid to be academic. One such centre is rumoured to be called Utopia while the other is to be named Eden.

ALLIED HEALTH

A bunch of people who are anything but allied. But seriously, they do valuable work.

ALLOCATED COSTS

Costs that the doctors have to live with, while it still remains their responsibility to keep the clinical department profitable. These costs include maintaining legions of admin staff, management consultants and the big sculpture in the main lobby of the hospital.

ANNUAL APPRAISAL

The tool they use to justify paying you a crummy bonus.

ANNUAL SCIENTIFIC CONVENTION

Something that each hospital must have because the other hospitals have them. Contributes to global warming due to the amount of hot air emitted, and are usually held during the Hungry Ghost Month. This is due to cheaper ballroom rental rates and surgeons who are more free.

BED MANAGEMENT

A department in the hospital supposed to manage bed availability and assignment. It is an interesting concept because the department is staffed by folks who have zero say over who gets admitted and discharged.

BUSINESS DEVELOPMENT

Folks who are supposed to sell what you do. Problem is; after all the selling and buying, you are still paid less than peanuts.

CASE COORDINATORS/ MANAGERS

Folks who are supposed to lighten your workload but instead increase your paperwork.

CLINICAL GOVERNANCE

Some nefarious and nebulous concept that non-medical folk have to tighten already screwed on doctors. (C.v. Corporate Governance)

CLINICAL PRACTICE GUIDELINES AND CLINICAL PATHWAYS

Used by doctors who strangely are the same people who read cookbooks religiously when they cook (bad food).

CORPORATE GOVERNANCE

Some concept that non-medical folk profess to have in place to justify long overseas trips in Business Class and spending zillions on stuff that mean nothing to the patient, let alone you.

CREDENTIALING

A way of limiting the performance of lucrative procedures to a select (usually senior) few in public hospitals.

EMERITUS CONSULTANT/ PROFESSOR

Old and poor specialists who have devoted their entire lives to patients in exchange for a permanent parking lot in a public hospital.

◀ Page 24 – What They Didn't Teach You in Medical School

EMPLOYEE ENGAGEMENT SURVEY

Something that most doctors are completely disengaged from.

FACULTY PRACTICE

Something better than surcharge and reserved for a select few. "Faculty" does not imply that there is any sharing of expertise though.

HEALTH SYSTEM

A strange term copied from the Americans to describe or name a hospital. Does it imply that there was no system hitherto?

HUMAN RESOURCE DEPARTMENT

The department that exists solely to devise and implement policies which screw up your life. Their implements of terror include travel policies, medical benefit reimbursement policies, hand phone bill reimbursements and of course, staff car-parking policy. The average IQ of the department's staff is reputed to be binary.

INTERNATIONAL MEDICAL SERVICE

A service set up in public hospitals to cater to the needs of foreigners. Does not serve foreign construction workers, beer promotion ladies and *pei-du* mamas.

JCIA

Just Create Intense Anxiety

JOURNAL CLUB

A more humane version of Mortality and Morbidity Round, resulting in slight injuries and bruised egos (C.v. Mortality and Morbidity Round).

KPIS

KPI stands for Kowtowing to Political Imperatives. The more you kowtow, the more bonuses you get.

MEDICAL RECORDS OFFICE

This exists for two reasons – it is the black hole of the Hospital where things get lost, and it is also the place with folks who bug and nag at you to complete your medical reports. Seriously, the MRO folk are people who are paid even more miserably than doctors and are doing equally thankless jobs.

MISSION, VISION AND CORE VALUES

Stuff that all hospital staff, except for top management have to memorise by heart. Despite what all the signboards say, public hospitals have only ONE mission – not to lose money and not to generate bad press.

MORTALITY AND MORBIDITY ROUND

Most of mortality and morbidity comes from injuries and professional deaths of junior staff involved in these

regular meetings, in which senior staff whack other senior staff by proxy through *tekaning* the junior staff as the hapless young ones present cases.

PATIENT SATISFACTION

Is a gauge of what the patients think about everything the hospital has to offer other than your clinical skills, of which the patients have absolutely no idea.

SENTINEL EVENT

An event that implies that even more sh*t is yet to be found.

SERVICE QUALITY

Is the need to have a consistently courteous face even when you are badly paid and have 30 patients booked in your morning clinic.

SERVICE QUALITY SURVEY

Is the survey conducted by either the gahment or hospital administration to see if patients who are happy paying \$20 to visit the barber, and who pay only \$23 to see you are happy with your service.

STRATEGIC PLANNING RETREAT

An event staged with much fanfare to celebrate the majesty of bigwigs in which you have been unfortunately asked to attend as a stage prop on a precious Saturday. Unlike what the name suggests, there is actually no productive motion or action produced or clear direction taken during the meeting.

SUCCESSION PLANNING

The tool some nasty head of department uses to bump off competitors.

SURCHARGE

What keeps consultants in public hospitals above subsistence level. You know it's getting kind of ridiculous when the surcharge is more than the base fee.

TEAM-BASED SYSTEM

A system that ensures each senior consultant has a personal slave(s) (C.v. Ward-based System) and is also the main reason behind why junior medical staff can ignore a senior staff when the latter walks into the ward.

TCM

A branch of medicine that we never learnt. Consists of practitioners who can be found in the clinics of main lobbies of major hospitals. These clinics can be non-profit or for-profit. The practitioners in the latter category can charge fees higher than your CMB.

WARD-BASED SYSTEM

An obsolete system of allocating junior medical staff (that means the junior staff must achieve the ridiculous target of getting to know every patient in the ward). ■