Speech
Address By
Her Excellency the Honourable Quentin Bryce AC CVO
Governor-General of the Commonwealth of Australia

On the occasion of

Welcome address for the Australasian College for Emergency Medicine's 27th Annual Scientific Meeting
National Convention Centre, Canberra
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Ladies and gentlemen, I am very pleased to join you here this morning for the opening session of your annual scientific meeting, and I extend a very warm welcome to your overseas participants.

When we take the time to get together with our colleagues, away from the daily demands of our work, we’re reminded of the opportunities and solutions that collaboration brings and the enduring value of collegialism.

One of the privileges of my role is seeing, first hand:
the depth and diversity of talent and skill in this country
Australians working locally and internationally
all of you here – experts in your disciplines
the partnerships you’ve built over many years and the spirit of generosity and cooperation you bring to your regular exchanges with one another.

I think it’s fascinating the professions that popular television chooses to glamorise:
law and policing
search and rescue, the paramedics
and emergency medicine.

I guess it’s about seizing the moment when human tragedy and vulnerability collide with courage, compassion and unusual skill
sometimes it ends in triumph, other times, grief, because we can only do what is humanly possible.

But those who work on the real sets know the dismay they feel at their professional lives being represented through such a narrow and glossed prism.

Some of it’s faithful, of course, but mostly the worst, and the best bits are missing.

A few years ago, we had a scare with one of our grandchildren, Lucinda, who lives in Brisbane.

She had one of those episodes that frighten us to death.
Her Dad put her in the car – no time to wait for the ambulance.

The firemen at Hendra Fire Station helped out.

Then she was rushed to the Royal Children’s.

A few days later I went to the hospital to thank the Emergency staff.

They had been fantastic. They’d stabilised Lucinda quickly, and reassured and comforted her family.

They were so surprised I’d called in: “we only ever get complaints, not thanks”, they told me with their characteristic good humour.

I remember thinking – if they don’t get thanked, who does?

In remembering life’s true priorities,

I reflect on the extraordinarily complex issues emergency physicians, nurses and allied health practitioners face around the clock, day in, day out in our country’s emergency departments managing six million patients a year

a figure that has doubled in the last decade,

and one that is symptomatic of the load also borne by our general practitioners.

I think of your problem solving on the frontline in diagnosis and process

the only equivalent I’ve witnessed is the work of the IED detection team in Afghanistan, the specialist military engineers who identify and dispose of those insidious and lethal weapons.

There’s your urgent and critical care of patients who are typically distressed,

Your constant monitoring and juggling of time, space and beds in response to the pressures of having to move patients in, out or through, to acute or special care wards.

And what Dr Sally McCarthy in a recent ABC forum, Emergency Health in the Hot Seat, called a frustration at not being in control of your environments though she was happy to put one urban myth to bed and that is that emergency departments are no more chaotic or precarious on the full moon than in any other lunar phase!

In fact, the clear message I got from listening to Dr McCarthy and her colleagues was of:

the high level of tolerance that practitioners have for the inevitable chaos of emergency

your capacity to establish order and calm

the exceptional skills you employ well beyond your expert medical training

your intense emotional investment in the task

and the immense satisfaction you get from the work you do, notwithstanding the pressures and frustrations.

In his book, The Wisdom of the Body, American surgeon, teacher and writer, Sherwin Nuland, wrote a spellbinding account of an emergency procedure he performed in 1980

to repair an aneurysm of the splenic artery,

which had burst and frayed the vessel walls sending the patient – who happened to be a friend of Nuland – down a swift path to death.
Nuland saved her because he had the nous and know-how to locate the aneurysm at all, in a belly pooling with blood.

Of the moments following the perilous surgery, he wrote:

I had begun to feel just a bit tired as the closure stitches were going in, but the full force of my exhaustion now hit me all at once.

My mind was exhilarated, even euphoric, at what I had done…

Something within me wanted to sing and shout…to acclaim my triumph to the heavens and the ages – a woman’s life had been saved…

But I was so drained of energy that… I sat there sapped and immobile.

His diminutive first scrub nurse who had for two hours slapped the right instruments into his palm with unhesitating precision gave him a hand up, and he rallied to thank every member of his team.

I once heard the director of an emergency ward describe herself as the conductor of an orchestra.

A beautiful analogy I thought because it says so much of the largely unrecognised super human talent, grind and collaboration that go into the delivery of emergency medicine services.

In the early 1980s, the business world discovered a new corporate discipline, crisis management, which meant that they could manage crises, rather than merely stumble through them.

I wonder if it had ever crossed their minds to drop into the local emergency department where they would have seen crisis management leadership decision making teamwork communication human diligence and resilience practised, perhaps like never before, in their board rooms or on their factory floors.

Ladies and gentlemen, on behalf of all Australians, I offer you my most sincere praise and gratitude for the vitally important work that you do.

I wish you well in your discussions over the coming days.

And it is my pleasure now to declare open the 27th Annual Scientific Meeting of the Australasian College for Emergency Medicine.

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