



A Gift... Only Borrowed is the compelling narrative of a young father going through the challenges surrounding his family during the death of one of his children

A Gift... Only Borrowed

by Kirk Spencer

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A Gift... ...Only Borrowed



"One Heart Beat
At A Time"

Kirk Spencer

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A Gift...Only Borrowed

Chapter One

Driving down a busy, but familiar road, you look up long enough to find another car careening directly into your path. You have but a split second to make a hasty turn onto a road you never knew existed. You pull over to the side of the road, take a deep breath to try and slow your racing heart, and quickly realize you barely escaped disaster.

In the summer of 1981, I was living in the northern stretch of Columbus, Ohio, and my life was pretty much perfect. We had recently moved into a small four-bedroom brick ranch, which we could barely afford, in a quiet neighborhood and began planning out the rest of our lives as your typical traditional, middle-class family. With our two wonderful kids: three-year -old Shawn and Brooke, who was two at the time - along with my wonderful wife, Lynn, life couldn't have been much better. Okay, there was the mortgage, car payments, probably a little too much credit card debt, and working too many hours (mostly nights), but the great parts certainly outweighed the not-so-great parts.

Life seemed centered around the screaming sounds of Big Wheels, those brightly colored plastic tricycles which screeched as they were sliding all over the sidewalks in front of our house. Every night, the discussion of, "What can we have for dinner?" prevailed. Thirty-five years later, we still have that conversation! There were plenty of bedtime stories and Sesame Street was usually on TV every afternoon.

It was a little challenging, watching two little ones on those days after pulling an all-nighter while Lynn worked during the day. Taking care of two toddlers when you could barely stay awake proved

more than a little exhausting at times, but with a new home, a microwave, a dog, friendly neighbors, and much fun shared by all, our small family was living a pretty great life. If we only had that second TV, our life would be complete. Basically, we were the, “All American Family.”

Lynn and I had only been married a handful of years when her doctor confirmed what we already suspected...she was pregnant again.

Life was finally beginning to stabilize a little as we were catching up on most of our bills and looking forward to preschool. We were considering replacing the living room carpet and maybe squeezing out a small vacation next summer. Our two young ones at home were quite the handful, and we really did not need another person in our lives!

But, Lindsay Renee Spencer entered our world anyway, arriving very early on a Friday morning, December 12, 1981. She joined us very quickly, I might add. It was the shortest and easiest delivery Lynn had ever had. She went from watching TV at home late on a Friday evening, to “I don't feel so good” around 11:00 PM, to “You better get me to the hospital now!” just past midnight. Within a few minutes of arriving at the hospital, she gave birth to a 6 pound-10-ounce beautiful little girl at Riverside Hospital in Columbus, Ohio.

The entire process only took about 3 hours. Her doctor, who was supposed assist with the delivery, was so busy peering through the little window while scrubbing in, that he almost missed the entire event!

So, in December of 1981, I got to meet an amazing person who would touch and change my life forever. Herein lies that story.

Early Saturday morning, after delivering a new baby just a few hours earlier, Lynn was already up and about. She had taken a shower and was ready to visit the nursery. Back then, hospitals didn't let babies stay in the same room with their moms, though it is

commonplace today. Lynn was ready to head home a few hours after delivery. I tell you, she was built for having babies! I had left the hospital after Lindsay arrived to go home and steal a few hours of sleep. I also needed to see how the other little ones were doing with Granny (Lynn's mom) keeping watch.

When I returned to the hospital later that morning, Lynn met me midway down one of the hallways. It was time for Lindsay's breakfast, and I'm guessing our new daughter would start complaining if Mom wasn't on time.

What might have seemed like a calamity several months ago, turned out to be piece of cake, and we were blessed with a beautiful, healthy, brand new baby girl. She looked perfect - all her fingers and all her toes. The second thing I noticed was her eyes. Blue eyes are not a dominant gene, but my wife had passed down her beautiful blue eyes to Shawn and Brooke. In fact, all seven of our grandchildren have her piercing blue eyes. Lindsay's, however, were not. Her eyes were much darker, odd somehow. Other than that, she appeared perfect, albeit slightly grayish in color. I assumed that was due to her popping out only a few hours ago.

Even though Lynn tried hard to convince them otherwise, the hospital made us stay through the weekend. Early Monday morning, Dr. Mac, our children's pediatrician, came into Lynn's room. Lindsay was waiting impatiently in the nursery for us to take her home. Dr. Mac entered the room, his bright smile leading the way, and in his warm tone asked Lynn, "Is everything okay? How are you feeling?"

Dr. Mac is short for Dr. Edward McCall. Dr. Mac is the name given to him by his patients who are primarily under the age of seven. He is a very small man in his late sixties with snow-white hair. Shawn and Brooke loved him, and you could not have met a kinder or gentler man.

"Well Dr. Mac, Dr. DeVoe (Lynn's OB/GYN) says we can go home today," I said, more telling than asking.

Lynn quickly added, "Have you checked on Lindsay yet?"

"Yes, she looks fine. She's a beautiful little girl," he added with a smile and that ever-present twinkle in his eyes.

We knew that!

I quickly jumped in, asking, "When can we get out of here?" I hated hospitals - the smells, the boredom, that tiny TV, and that awful waiting!

Dr. Mac answered with a voice that seemed comforting, "You can take Lindsay out of the hospital today, but..." That little word would become the biggest little word I would ever hear in my entire life. A quick glance toward Lynn told me she shared the same look of confusion. That look of confusion changed to concern when the doctor added, "I would like you to take her to Columbus Children's Hospital for some tests before you take her home."

I can only imagine the question marks that must have crossed our faces as we asked in unison, "What kind of tests?"

Lynn's eyes strained as she leaned toward the elderly doctor, her voice turning more firm and solemn as she asked, "Why? What's the matter?"

Her question was obviously laid in with a sense of wonder, concern, and maybe even a little humor. Before Dr. Mac had a chance to answer, I echoed her question, "What could possibly be wrong?"

Without any change in his expression, Dr. Mac calmly answered, "I heard a slight murmur when I listened to her heart this morning. I would feel better if you had it checked out."

We were both still confused, but at least we were leaving this place today. But, what hung heavy in the air was *What the heck is a heart murmur?* We packed up all the things we had brought into the hospital a few days ago, our brand new little girl, and headed to a place I'd never heard of.

The drive to Children's Hospital turned out to be a short one, even though we were not sure how to get there. No GPS in those days. The closer we got to this new hospital, our confusion changed to concern and then into anxiety. We didn't talk much along the way. It was snowing pretty hard, and I had to focus on my driving.

I could tell by the way mom was cradling her new baby that she was trying to console her as best she could. I could almost hear her reassurance, *"There is nothing really wrong. We'll be home soon."*

Lindsay seemed to oblige Lynn's attempts to comfort her. She slept all the way to this new hospital, bundled up in Lynn's lap. In 1981, there were no mandatory laws for infant car seats. Lindsay's sleeping helped ease some of Mom's fears, but when we turned toward each other for support, her eyes told a different story. We still didn't know what a heart murmur was or what caused it, but it couldn't be very good if we were simply heading from one hospital to another to find out.

WHEN WE ARRIVED AT CHILDREN'S HOSPITAL, it was much bigger than I expected. Apparently, there were many more sick kids in Columbus than I would have ever guessed. We parked in an attached garage and tried to navigate the maze of hallways to check in. With Lindsay still wrapped firmly in Lynn's arms and still sleeping soundly, we were met by a nice elderly woman managing the Welcome Desk who told us, "Go to the second floor, **Ward 2-Tower South: Cardiology**. When you arrive, ask to meet with a Dr. Cranen." Obviously, Dr. Mac had called ahead for them to expect our arrival. That would be the last interaction we had with him. Lindsay never saw Dr. Mac again. Unbeknownst to us, he had turned her care over to this Dr. Cranen, and we had no voice in that decision.

When the elevator doors opened, we stared into a large dimly lit, starkly quiet, empty room inhabited by a few lonely couches and

chairs. We stepped out of the elevator and onto the second floor where we were greeted by – well, no one. When the elevator doors swished closed behind me, I had expected to find another welcome desk, or a nurse's station, or at least someone waiting to give us further instructions. Instead, there was no one. Not a friendly or even helpful face anywhere. Looking about this vast, vacant space for direction or instructions, I finally spotted a sign indicating we had, in fact, arrived at our destination. In twenty paces, we arrived at the door to the world of **2-Tower South**.

There was a large and imposing metal sink adjacent to the only apparent doorway in or out of our appointed destiny. Above that sink was a sign, instructing us in large bright red letters, "Scrub in Prior to Entering" which left me with the feeling I was preparing for surgery!

After we washed our hands, we turned toward the door. It was still unclear if we had to knock first or just open it. Standing in front of it, with Mom still clinging tightly to her newborn baby, we paused for a moment trying to decide if we really wanted to venture any further. After a glance at each other that must have shared our state of skepticism and concern, we just opened the door and stepped into a whole new world.

Immediately, we were slammed by a wall of brilliant lights, extreme noise, and insulting smells that attacked all our senses. It was so overwhelming that we almost bounced back through the door! I wasn't sure I could take another step forward, but it wasn't really an option by now. I looked at Lynn and could barely whisper under my breath, "My God...what is this place?!?"

Before the door could close behind us, one of the many nurses in the ward came over to greet us where we were standing cemented in place. Without asking permission, she immediately took Lindsay from Lynn's arms and placed her in a small vacant crib that was located very near the door we had just come through. It seemed she had been expecting our arrival. The crib was a simple white one, nothing like the one we had waiting for her at home. This one was

much smaller and the railings weren't as high, probably to allow the nurses easier access to their tiny patients. As the nurse placed Lindsay on the mattress, I took a moment to scan this relatively large room. I quickly surmised that we were very much not alone.

There was a multitude of cribs, of all sizes, many similar to Lindsay's, and they were all full of babies. I noticed the cribs were all on wheels, although I couldn't imagine why. *Where would they be going?*

It turned out the door we had used was only one of the three doors that accessed this wing. The other two doors would come to play significant roles later during our stay at Children's Hospital.

The first door, the one we just entered through, we would learn more about pretty quickly; the other would soon become friendlier. There must have been another, third door somewhere in the room, but I don't recall where. Door number one let you in and out of the ward. Door number two took you to a private and quieter space and would play an important part of our stay at Children's. Door #1 – Chaos, door #2 – Tranquility. Looking back, I really can't remember where that third mysterious door was, but it would soon represent only terror to us. More about that later.

After taking Lindsay from her mom, the nurse unwrapped her from the blanket we had brought her in with, folded it neatly, and gave it back to Lynn. Then she removed Lindsay's onesie and proceeded to place some sticky pads all over her. Then the nurse attached some wires to those pads and Lindsay was now hooked up for an EKG (electrocardiogram). Except for her diaper, my baby was otherwise naked. Lindsay had been sleeping well but awoke to this activity pretty quickly and began screaming her disapproval.

"Certainly the signs of a healthy baby, right?" No one heard me. Maybe I had just said it to myself.

Now, another question popped into my head: What is an EKG? I had a lot to learn about our current situation with Lindsay.

Next, the nurse covered Lindsay with a pint-sized pink blanket with the words “Children’s Hospital” stenciled on it. My ignorance I suppose, but I thought our blanket was just fine. Apparently not.

Before we had left Riverside Hospital that morning, Dr. Mac told us Dr. Cranen was one of the best child cardiologists in the country. Soon after we arrived, Dr. Cranen appeared bedside to take a look at our baby. This highly recommended cardiologist spent only a brief moment with us. She took a quick listen to Lindsay’s chest and quietly surveyed our daughter from head-to-toe. She really didn’t waste much time with introductions or pleasantries.

When we first met Dr. Cranen, it was hard to believe she had obtained all those credentials Dr. Mac had bestowed upon her. She spoke rather abruptly and through an extremely thick German accent. Honestly, she looked more like a Nazi concentration camp survivor than a highly regarded doctor! However, she was genuinely caring and loving with our baby. She left us feeling Lindsay was in good hands. But just as quickly, she also left us confused, unnerved, and quite anxious when she suggested – no firmly recommended - that we keep Lindsay in the hospital overnight, “For observation.” Then she added, “Nothing really to worry about. We’ll keep her here as a precaution.”

After leaving some instructions for the attending nurse, she left as quickly as she had arrived. I now added to my growing list of questions, which had begun earlier this morning with, *What the heck is a heart murmur?* followed closely by, *What is an EKG?*, now, *Why are we in this place?* And finally...what does, *Just for observation and precaution mean?* No one offered any responses to these silent questions coming from a very concerned father.

Just a precaution? A precaution for what? How could a doctor with so much training, experience, and education, be so stupid? If there was nothing to worry about, why are we still here, and why do they have to keep her overnight?

It was getting well past suppertime, and we had not stopped long enough to eat since very early that morning. The nurse suggested, trying to sound reassuring, "Why don't the two of you go home and we will see you in the morning?"

I couldn't believe we had to leave our brand-new daughter with these strangers in a place I didn't even know existed until a few long hours ago. I don't remember if Lynn and I talked very much on the way home from the hospital. We were both weary from the day's events and now had these brand-new set of worries. I had almost forgotten that my wife had delivered a baby only a few days ago! She must have been exhausted. I'm sure that any conversation we might have had would be filled with anxiety, uncertainty, apprehension, many more questions, with few, if any, answers.

It started to snow even harder as we made the thirty-minute drive north up I-71 toward home. Somewhere deep down, I harbored an uneasy feeling that our lives would never be the same again. I never shared those concerns with my wife. She had her own thoughts and worries, although I'm sure that most of them probably mirrored mine.

After a long day spent at the hospital, Lynn and I came home just before our other two children were headed to bed. When we walked through our front door, Lynn's mom was rocking Shawn trying desperately to get him to sleep. His head was resting gently upon Granny's shoulder, but he was still awake with eyes wide open when I reached in to gather him up and take him to his bed.

As I carried him down the hall, he looked at me with a sad face and said, "Daddy, please don't make grandma sing to us no more." Lynn's mom was a great grandmother in every way possible, and she had unselfishly jumped to our rescue and became our lifesaver during those first weeks after Lindsay was born by helping with our other two kids. But, apparently singing was not one of her best talents.

I smiled, tucked him in, gave him a little kiss on the forehead, and promised him I would talk to her. I never said anything to grandma about his request. I guess they would have to get used to her spending more time with them, and I could only hope she wouldn't torture them anymore by singing them to sleep!

We woke early the next morning, showered and dressed quickly, set up Granny to watch Shawn and Brooke, and grabbed a bowl of cereal before rushing out the door. We jumped into the car and hurried back down to the hospital with no idea what to expect. Columbus Children's Hospital was not in a neighborhood we would have ever visited before. We had to learn new routes every time went, one wrong turn might take you somewhere you really did not want to venture into.

WE RETURNED TO THE WARD on the second floor where we had left Lindsay the night before. We soon learned you had to scrub in rigorously prior to entering the ward each and every time you opened that door, even if you only stepped outside for a quick drink or snack. Every time you passed through that door –it was mandatory.

The place where you scrubbed in was a very large, deep metal sink, divided in the middle with an extremely long faucet that extended out over both halves. The water was always hot and the soap always harsh. The soap had a revolting odor, somewhere between rotten eggs and alcohol, and it really did a number on your skin. I surmised it was antibacterial; there was no Purell back then. We usually had to scrub in three to five times a day, and it didn't take long for us to hate this hospital policy.

This imposing room, officially known as Columbus Children's Hospital, 2-Tower South: Cardiology, was from my perspective, in a state of constant panic from the moment you stepped through that door. I'm sure it was probably that way yesterday when we first brought Lindsay in, but I didn't notice all the commotion that

dominated the entire room. Above all, it was deafeningly loud and a full-blown assault on all the senses!

It was probably the size of half of a football field. There had to be a hundred people within those walls, and most were running in every which direction. What surprised me was that everyone seemed oblivious to all this chaos, except me. Somehow, all the nursing staff seemed to comprehend the pandemonium completely, almost as if it was on purpose.

Imagine being dropped into the crazed frenzy of angry Walmart shoppers during an electronics sale on Black Friday! A store full of the chaos of irrational people crashing into the limited display of LCD TVs, except in here, all these cashiers were wearing white uniforms in lieu of blue ones! It was that noisy and that absurd!

There were babies everywhere...and I mean **everywhere**. Some babies were in small cribs like Lindsay's, a few in incubators, and still others in slightly larger beds. While children were everywhere, there seemed to be no particular mandate or organization to this disorder.

There were about forty nurses running in what seemed like senseless circles, going everywhere and anywhere. There was a man sitting in a rocking chair holding his infant who was still tethered to the bed with just about anything that could be attached to a little one. There were babies with tubes and wires shackling them to various machines. There were monitors and IV poles of some sort strewn all about the place. There were four larger hospital beds that appeared to be stationed permanently against a wall on the other side of the room. A quick glance toward the floor revealed those beds did not come equipped with wheels. They seemed to be somewhat exempt from the blast of anarchy that existed everywhere else in the room.

The noise was simply disturbing. Babies were crying, monitors screaming, cribs and assorted machines being moved about. There were nurses yelling above all the noise while barking

instructions to one another. There was even one older child, probably around two years old, dressed in only a tee-shirt, and running through and around the ward as if he had recently escaped the confines of his bed. His mother was frantically in tow, grasping his IV pole which was still secured to several wires and tubes, and trying to keep up with him! We later learned that he had just completed open heart surgery two weeks previously and was obviously having a remarkable recovery!

There had to be over forty little kids in that ward varying in age from one day to two years, or as most parents referred to it, day 1 to whatever number you needed; and all in different states of health. We learned early on that the parents of children residing in this room counted intervals one day at a time. You learned very quickly not to look past the day you were restricted to. There was no past or future, only this day.

I know I just said it, but it bears repeating since we had to deal with it constantly. I have never witnessed this much mayhem, especially in a hospital. Somehow though, it seemed to work, even amongst all the craziness and turmoil. I just couldn't see through it. The only thing I could think was, *Someone must have set off the fire alarm, and absolutely no one knows what to do!*

I don't know if Lynn agreed with me about our current situation. There wasn't room to talk about it, and she was concentrating on a little girl lying in a small bed, crying out for breakfast.

A COUPLE OF HOURS into our second full day in this new place, another nurse came over and greeted us with a friendly smile. She acted as if none of the surrounding commotion and chaos bothered her at all. She seemed immune to everything that was quickly driving me out of my mind!

I really can't convey well enough the madness that was Children's Hospital 2-Tower South. Whenever I opened the door to enter that scary place, the uproar of clatter slammed me in the face like a ton of bricks. Every time, my knees almost buckled from the sights, smells, turmoil, and...the noise. *Are you kidding me, how could this possibly be a hospital?*

Our nurse quickly checked the monitor that was now attached to Lindsay as she began telling us the rules and regulations for the ward simply known as "2-Tower South." She had to talk loudly as she went about her job so we could hear her over all the racket. It didn't seem to bother her though. I got the feeling everyone simply had become used to yelling, and she seemed oblivious to everything that was happening all around us. I had to lean in a little just to hear her better. She took it all in stride, almost as if we had all moved to another, more private room.

She answered some questions about visiting hours, Lynn's nursing, and a little about what would be going on with our daughter. She said, "Visiting hours are around the clock for parents; 8:00 AM - 8:00 PM for other visitors. You are welcome to visit any time...unless the window shade is down," she added, pointing back toward the door we had just come through. I hadn't even noticed the window in the door, let alone a shade above it.

I would regret it, but I asked anyway, "Why?"

She looked up from Lindsay long enough to answer calmly, rather matter-of-factly, and in a more determined tone, "If the window shade is pulled down, it means there is an emergency in the ward with one of the patients and only the medical staff is allowed in." And then, almost as an afterthought, she casually tossed out, "And of course, that child's parents."

She could have easily added, "*Terrified* parents." But, she really didn't have to.

She turned to Lynn and said, "You can nurse Lindsay whenever you wish. If you can't get down to the hospital, pump your breasts, freeze your milk, and any of the nurses will be glad to feed your baby for you."

*Why was she telling us about visiting hours? Aren't we going home today? The doctor had said, "We'll keep her **overnight for observation.**"*

Well, they'd spent the night observing her, so why aren't we leaving?

Lindsay was crying; she was obviously hungry. Lynn would have picked her up right away if it weren't for all those wires that were connected to her. The nurse told Lynn she could nurse Lindsay in another room, one which would be a little quieter.

Then she showed Lynn how to pick Lindsay up, what things we had to take with us, and what things we could leave behind. With our baby now firmly back in her mother's arms, the nurse led us through and around the maze of cribs and machines to a tiny room which was only about a hundred feet away from her crib. Though it was only a few steps away, we immediately noticed we had left that commotion and constant noise behind us once we walked through that door. When the door closed behind us, it was as if we entered another new world - one which was markedly different and suddenly still.

This new place was about the size of a large living room. It was complete with a couch, some oversized chairs, a couple of coffee tables, and some lamps placed neatly around the edges. I think there was a coffee maker on a counter across from the couch Lynn sat on. Several times a day, the three of us gathered together in that little sanctuary so Lynn could nurse Lindsay. I don't remember seeing any other parents or nurses joining us. In fact, I am certain no one else was ever in that room the entire time we were at the hospital. I don't know if that was intentional or not. There was no other door out of this room except the one that led right back into pandemonium.

For some reason, the lights always seemed to be turned down low in that room, maybe to help the babies and their parents be more comfortable. Remarkably, that room offered protection from all those sounds that were always screaming at you from that adjacent room. There was total chaos on the other side of the threshold, and it was always very unsettling, but once inside, we found a safe haven. There, we were offered a brief reprieve from the terror of everything we had left behind, simply by allowing a door to close behind us. Trust me, we never rushed Lindsay's nursing - quiet was good! I have no idea how much time Lynn spent in that little room nursing Lindsay that first week, but I joined them as often as possible. Lynn didn't miss too many feedings those first few days, and I needed to spend some peaceful time with this part of my family before driving home to be with the other part of my family.

After Lynn finished nursing that first time, we had to return Lindsay to her crib, by opening that door and crashing into that unbelievable room from Hell! Her nurse quickly rejoined us and began attaching all those wires we had left behind. Above the noise that we were beginning to get a little used to (I said, "A little"), I suddenly heard a very loud sound that filled the entire ward.

An alarm was blasting from somewhere in the ward. Apparently, it was coming from a child across the room in one of those large hospital-style beds. I had no idea why this alarm was going off, but it quickly brought three additional nurses to that child's bedside. Then all the other parents were immediately ushered out of the room. We were quickly escorted past that sink and dumped into the waiting area.

We would be able to re-enter a short time later, after scrubbing in once again. I assume the nurses were able to stabilize that child's situation. Then, without pause, everyone and everything returned to its stupid and unsettling confusion. Nothing much happened around Lindsay's crib the remainder of Tuesday. We stayed as long as our hunger could be put on hold, but finally gave in and left the hospital late that evening, leaving behind our newborn once again. If I

remember anything about our first full day in that hospital, it was the **NOISE!**

WE ARRIVED AT THE HOSPITAL very early Wednesday morning, practically flew out of the elevator door, raced to the sink, scrubbed in, and opened the door to find Lindsay sleeping. At this point, we continued asking the same question from anyone who might hear us, “Why are we still in this place?”

Dr. Cranen had simply told us, “Lindsay is here for *observation*,” whatever that meant! Well, her *observation* had gone on for two days now with no further information coming forth. I wanted to scream loudly enough for everyone to hear me, “Someone should be telling us something by now!”, but I wasn’t sure I would be heard. I was tired of standing around, waiting, and honestly, feeling foolish.

I took a quick look around the ward once again, trying to familiarize myself with the surroundings of 2-Tower South. Up until now, other than a fast look around as we entered, I had been locked into staring over that small footprint of space we occupied adjacent to Lindsay’s crib. There had to be some sort of method to this madness.

As I said, the ward was a very large room, and it was sort of divided into two separate parts. I say “sort of” because there were no specific lines painted on the floor, no room dividers, or anything that specifically separated the two extremely different sides from each other. It was more of a natural selection, if you will. An imaginary line that might move occasionally as needed keeping each side unto itself.

The left side of the ward, where Lindsay resided, was quite a bit larger than the right. The left side was full of all the smaller cribs. The thirty or so small cribs on our side of the room were moved around constantly and, from my perspective, for no apparent reason.

I guess those cribs were moved as needed for any new patients that might be arriving, which was pretty much daily.

When a new baby arrived, the nurses would simply rearrange the cribs on the left side of the floor to squeeze one more little bed into the fracas. Another family, who would have no idea what lay ahead for them, quietly and nervously joined the rest of us.

They followed closely behind as a nurse ushered their baby through the jungle to find their individual spot next to a crib where they too would stand for who knew how long. Every new family held that same look, somewhere between amazement and horror. I'm sure each new set of parents probably assumed they would only be here a day or two as we did, and then began their own sentence in this place feeling helpless and stupid. I keep calling it "feeling stupid," but I think all parents felt that way, at least for the first few days. We sure did!

These cribs were not in rows of any kind. In fact, I couldn't see any pattern at all for these babies' temporary homes. Since there were no chairs or workstations set about on the left side, I guess it really didn't matter where the cribs ended up anyway.

Somehow, whenever a new baby squeezed his or her way into 2-Tower South, there always seemed to be just enough room to fit one more in. The whole left side of the ward was on wheels, and all the parts moved about as needed. It never occurred to me during those first several days why there was always just enough room to fit in another new child. Sadly, I discovered later, that if there was room for a new child, many times it meant another had just left. You never knew why there was one less family in that place. There were no announcements or discussions about who had left or why. As soon as you noticed a new family had found their spot on the ward's floor, all the other parents just returned their attention back to their own child.

On the left side, there was always plenty of noise, action, and, as I said earlier, what seemed to me constant bedlam, (pun intended).

I really cannot overemphasize the craziness that was Columbus Children's Hospital, 2-Tower South. But, while most of the commotion and action emanated from the left side, the right side was immensely different in almost every aspect.

The right side of that make-believe line was known as "The Wall." The main reason it retained that title was simple: the large hospital beds which contained their tiny patients were up against the only exterior wall in the ward. It is also where the only windows were.

Those four windows were very small, rectangular, quite high up, and did not let in much daylight. We couldn't see very much through them to the outside world since they were placed so close to the ceiling. It was only possible to ascertain whether it was sunny or cloudy, snowing or raining. Also, the right side did not seem to be as loud or chaotic as the other side.

The Wall had its own unique sounds that were hard to describe. Different, slower, noticeably calmer, but also more intense.

There were only four beds on the right side of the ward, and each one was placed directly under one of those four windows. Those beds were much larger than the cribs across the way where Lindsay was stationed. They also seemed to be attached to more machines. Actually, as best as I could tell, those beds were adult hospital beds. The children were almost consumed by them. Huge beds, very small occupants.

For some reason, the children against The Wall always appeared naked, and they had numerous IV's, tubes, and wires stuck in strange places. At each bedside, there were always two nurses present. We would learn this was known as constant care nursing, as opposed to intensive care nursing. Constant care required two nurses working around the clock, continuously connected to their patient. Later, when we received Lindsay's hospital bill, we found out that constant care nursing is also double the cost of intensive care nursing.

and not fully covered by our insurance. The nurses assigned to each bed, seemed completely attached to their patient, never looked up much, and quietly went about executing whatever tasks they needed to perform.

Any sounds emanating from the right side were muffled, not that we could hear much at all over the screaming coming from our side. There were very few chairs on the floor and most of them were set aside for the parents whose children occupied those four bigger beds pushed up against that wall. My guess is that those kids started out on our side of the room, and at some point, graduated across that imaginary line. I always felt that those kids should be in other rooms, you know, rooms set aside for the really sick babies. I often wondered why we were parked so near to them.

The children against The Wall were unlike all the other babies on the other side of the ward. They stood out for a myriad of reasons, but mostly for one very important reason. Unlike the left side, where the cribs were constantly being moved about, the beds against The Wall never moved. The babies did.

I got the feeling that many of the parents in this complicated and critical ward were aboard the same boat we were in. A lot of waiting and not much information. Your child may have arrived under different circumstances, but in the end, you quickly figured out we were all here for pretty much the same reasons. Most of us had that same empty, hopeless look in our eyes. My thoughts about those other families did leave me feeling a little uncomfortable and guilty. I kept thinking, *Certainly, those kids must be much sicker than ours.*

“Observation and routine tests.” I hated those words, but I held them close, always hoping our turn to go home would come soon.

It was very difficult being at the hospital for up to sixteen hours every day, some days back and forth several times so Lynn could nurse. Children’s Hospital was on the other side of downtown

from us, so we tried to time our trips around rush hour, but many times we got caught up in it and the trip could take forever.

From the moment we walked through those revolving doors and into the hospital, there was always that very distinct and ever-present odor. I guess it was the smell of disinfectant. It filled the air from our first steps, and it stayed with us until we left. Thirty-five years later, I can still smell it.

Whenever I entered Lindsay's new home, I always took a quick look toward that outside wall. It was embarrassing, kind of like watching a car crash you couldn't divert your eyes from. Once beside Lindsay's crib, however, I tried not to look too far away from my designated space. Still, it was hard to ignore the environment we were now part of and trapped in.

There always seemed to be too many parents in this noisy room. They moved as necessary and, like us, were all standing right next to their young ones. Occasionally, you might catch the eye of another parent. The looks they returned were some of the most haunting, frightening, and depressing sights I have ever witnessed. At times, it seemed they might be looking for some kind of reassurance from me. They never found it. Every parent had that same look; my guess is we probably did too.

Being a resident of 2-Tower South was like being a member of a strange and eerie club. Everyone there had a pretty good idea why everyone else was there, and there was a strange, unspoken, common bond. No parent said much, if anything, to any of the other parents. Possibly out of fear, and probably because no one had a clue what to say to each other. I had nothing to give them. I wish I did. I'm sure I could have used some encouragement myself.

I always felt like we were stuck on our own lonely island, oddly shared by strangers who stood on theirs—only a few feet away. Obviously, our neighbors were worried and terrified about their child

too, and it didn't really matter if they had been there for a couple of hours, a couple of days, a couple of weeks, or a couple of months.

BUT, once again, "*We are only here for observation and routine tests.*"

AS I LEARNED EARLY ON, half of the main door in and out of 2-Tower South was a window. There was a shade on it which was usually rolled all the way to the top. There was a simple string attached to it, dangling low enough to allow the nurses to easily grab it in an emergency. When the shade was pulled down, it covered the whole window, top to bottom, and side to side. When it was down, no one could see in and no parents or visitors were allowed past the door - save the parents whose child was in distress.

It didn't take long for all of us to learn that if the shade had been pulled down, it usually meant a child was failing. It was a sad way for parents to find out their child might be dying. It brought a great deal of stress to all the parents who came to visit their child. That shade immediately changed someone's life, usually forever. It often meant someone's stay at Children's might ending way too soon.

If the shade was down, you never knew if it was down for your child. There was always a nurse standing by to let you know who could come in and who couldn't. Hopefully, sadly, it would be down for someone else's child. Once you learned it wasn't your turn, your thoughts of terror were immediately followed by feelings of relief, quickly followed by *What do we do now?*

Once you realized you were "safe," you quickly turned and headed straight back to the waiting area. You joined all the other parents who had been removed from the ward and not allowed back in. It was like being back in elementary school and remanded to the principal's office for doing something wrong. Then, as soon as we all arrived, there always seemed to be a collective silent sigh lifted from all the "safe parents."

Quickly, you began your nervous speculation as to what might be hiding behind that white shade. You never knew how long it might be down. It could be minutes; it could be hours. No one at the hospital ever told you how long you might have to wait. You could only sit or stand until one of the nurses came out and gave you the “All Clear” signal.

Then, we all took our turns washing our hands and quickly filed back into that ridiculous warehouse full of sick children and, once again, terrified parents. Although nothing was ever said amongst the parents that were waiting for that shade to return to its “full and upright position,” I am certain we all felt the same way. Without a word, you simply returned to your little cocoon and reclaimed your small reserved spot on the floor next to your child. It wasn’t your turn to leave, not yet anyway.

After assuming your lonely station again, you suspected there was probably one less family in that room. But, quickly your mind moved on and returned to those same frightened feelings you had felt only moments earlier. Thoughts of *What comes next?*, or *Who comes next?*, were never far away.

You learned these unspoken rules pretty quickly. After only a couple days with Lindsay being imprisoned inside that room, we began figuring out the procedures. You hated leaving your baby, but the rules were simple and clear: child in trouble meant all others out. I wish I could say it was a rare occurrence, but it happened at least once a day, sometimes more. Unfortunately, that shade was pulled down way too often. There were no guarantees at Children’s Hospital. Those fleeting moments of euphoric relief quickly returned to feelings of uncertainty, confusion, apprehension, and, eventually, full on fear. We could only cling to the belief that we would be out of there soon.

Another day came and went at 2-Tower South.

BARELY INTO OUR THIRD DAY an administrative manager of some sort came into the ward, found us quickly, and asked me to follow her downstairs. She told me I had to fill out some “State of Ohio Financial Support” paperwork.

“What kind of paperwork?” I quickly asked and then reminded her, “We have great insurance and are only here for observation and routine tests!”

Walking ahead of me, she looked back over her shoulder with a little contempt and told me, “It isn’t an option.”

My increasing frustration and anger didn’t seem to change her mind. I followed her downstairs and signed all the papers, but I didn’t feel good about it. I’m sure I pressed down on the pen she gave me hard enough to tear one or more of the forms. The billing department was way out of line assuming we would be here much longer, and I didn’t think it was their call to predict when we might be leaving. As it turned out, I was wrong about needing financial help. Apparently, at Children’s Hospital, your insurance runs out long before your hope does.

While they couldn’t actually come into the ward, we decided to bring Shawn and Brooke down to the hospital one afternoon, hoping they could look through that little window on the door and maybe get a glimpse of their new baby sister. We held each of them up to the door’s window and pointed earnestly towards Lindsay’s crib, which was still closest to the door. I’m not sure what they saw that day, or if they could even find their new sister, but Lindsay had taken up so much of our time, we felt they deserved to be there. I’m not sure if this was a good idea or not. There didn’t seem to be a manual lying anywhere close by with instructions for 2-Tower South. There wasn’t much to help us with the decisions we faced during that first week. Neither Dr. Cranen, nor any of the nurses, told us much of anything during those first few days, and it didn’t seem to matter how many times we asked.

In all my life I doubt I have ever experienced such a long week as that first week at Children's Hospital. We asked anyone who was wearing something white, "What comes next? When do we get to take Lindsay home?" While everyone was nice and polite, they simply repeated, "You'll have to wait for Dr. Cranen to tell you why Lindsay is still here." Honestly, looking back, I'm pretty sure the entire staff at Children's Hospital knew precisely why we were still there. I think they knew exactly what was coming next and how our conversation with Dr. Cranen would go. They couldn't, or wouldn't, say anything about what turning the next corner might look like.

Throughout this whole time, Dr. Cranen was a ghost. You never saw her for more than a few fleeting moments on the floor. She always acted more like an accountant buried in her books than a doctor. She rarely came over to visit our daughter, and no matter how hard we tried, we could never seem to get her attention for very long. She rarely looked up from any patient to even acknowledge their parents.

We went down to the hospital every day so Lynn could nurse, see our baby, maybe talk to a doctor, and hopefully take our little girl home. We spent most of our days and evenings camped out by Lindsay's crib, but we could never get Dr. Cranen to answer any of our questions. When she was on the floor, she would head straight to a patient, nowhere else, and then return to where ever it was she came from.

Dr. Cranen was like the Magnificent OZ hiding behind some magical curtain. She rarely came out for us ordinary people. All we wanted was for her to tell us what might come next. We didn't know if her not visiting with us was because there was no need to, or because she didn't want to. Not knowing left our minds to wander all over the place, but it usually ended squarely on fear. We feared that whatever she might say to us could shape the rest of our lives.

Once, we did catch a little of her wrath. On Thursday afternoon, one of the nurses thought it would be nice to give the older

children a treat. She brought out some popsicles and passed them around. The kids loved them. Most of them were anchored to their beds, so when Dr. Cranen made her rounds she found half her patients had purple lips. Apparently, purple lips on heart patients is very alarming. No one ever handed out grape flavored popsicles to the kids in 2-Tower South again. Make no doubt about it, Dr. Cranen ran the ward.

Day four and still no one would tell us any tests results, lab results, Dr. Cranen's thoughts, or any sort of diagnosis. No one would answer the biggest question: **"Why in the world are we still here?"** I had passed being polite sometime earlier in this ordeal. I'm pretty sure we never saw anyone else wearing a white coat in the ward. I guess all these kids must have been patients of Dr. Cranen. Quite a workload I presumed.

My God, it is noisy in this place. My head hurts and *why it always snowing?*

AT HOME, OUR OTHER TWO YOUNG ONES were doing their best to find some sort of normalcy. They had a different babysitter every day and were being fed meals by whoever could be found. You would think that there is only so much you could ask of family and friends, but everyone kept on giving.

Since the two of us, but especially their mom, was spending so much time at the hospital, the kids were cranky whenever we arrived home. They wanted to know where this new baby sister was we had been talking about for months. The best we could give them after a very long day was a bedtime snack, a quick fun bath, a short Dr. Seuss book, and a kiss goodnight. They deserved much more. I guess it was a long week for everyone.

One of the lighter moments coming from home during this crazy week was the night Lynn knew she couldn't be with Lindsay for one of her feedings. She was pumping her breast milk so she could

take it down to the nurses on her next visit. We had received an electric breast pump from the Le Leche League. I can't remember if it was a free loaner, or if we had to rent it. In any case, one of those few times Lynn and I were both home together, the phone rang. Our three-year-old son proudly announced to whoever the caller was, "My mommy can't come to the phone right now. She's squeezing her boobies!"

"Shawn! No! Wait!" I couldn't get to the receiver in time before he hung up the phone, turned toward me, and with one hand on his hip, proudly looked at me like he had just saved the world. Maybe this was one of those subtle occasions where God took advantage of an opportunity to keep us a little more grounded during that hectic week. When everything seemed to be crashing down and unraveling all around us, my young son found a way to remind us what was still important at home as well. To this day, I have no idea who called that evening, but I doubt we will ever hear from them again! The two kids were fascinated with that breast pump machine. Heck, so was I! It looked like a little locomotive steam engine. Who wouldn't be mesmerized?

We finally got a call from the hospital on Saturday of that senseless week. I couldn't keep track of the days anymore. There were no days of the week when you spent your time inside 2-Tower, South. Every day seemed like the previous one, or the next one. Same commotion, same noise, same scrubbing in and no noticeable changes. But this call was the one we had hoped for all along. Someone from the hospital called and all I could hear from my end of the phone was, "You can come to pick Lindsay up and take her home today." After that long stupid week, the only thing that I could think was, *Well, whatever they thought might be wrong with our daughter, turned out to be nothing at all. They were just overly cautious and very, very wrong.* Lynn's smile clearly reflected her relief as well, and all she said was, "Let's go bring her home!"

I know more today than I did at the beginning of this strange journey thirty-five years ago, but at that moment, all I could digest

was Lindsay didn't belong in that awful place. There were over forty other babies there who must have been very ill, and I'm sure they all needed to be at Children's Hospital, but not *our* baby. While all of us were smashed together in that very cramped place, I don't think I ever formally met any of the other parents. If I did, I don't remember any names or faces. It would have only been a simple nod or quick smile at best.

Since the children were always moving about the ward and constantly followed closely by their parents, you were never certain how long your neighbors would reside next to you. You were always so alone, but it seemed pointless to strike up a conversation with some stranger that was standing only a few steps away and possibly leaving soon. Your focus was usually restricted to the twenty or so square feet Children's Hospital allocated for your family.

It's sad to think about it now, but the families who moved in and out of 2-Tower South always remained very detached from one another. One instant your family was in, the next minute you were not. You noticed those changes only momentarily, then you quickly turned your attention back to your own child and never gave them much thought again.

Those other parents' kids were really sick, and I felt terrible for them, but only for a moment. We were going home today, and we will never have to come back to this sad, dreadful, horrible place again, and nothing could change that!

When we arrived at the hospital that morning, driving through yet another sprinkling of snow and ice, we were extremely excited and tremendously relieved. We were right all along. Those other kids were really sick; ours was not. It was unfortunate that their situation was different, but our baby was going home today. We were going back to resume our predictable average life. I wish I could say I had more compassion for those other families, but, honestly, all I could think about was mine.

During our last ride down to the hospital that morning, I was already planning the trip home. I wanted to get the hell out of that place as quickly as possible. I'm not sure how fast our little car could make the trip back up I-71 to our home, but I was sure going to push it. We had to get as far away from Columbus Children's Hospital as possible and rapidly as we could.

It began snowing a little harder, and as a result, the traffic was slowing on the expressway, but that wasn't going to detour me from my destination. I did hope the snow would cease before we would be making the drive back home with our precious cargo.

As Lynn and I entered Children's that morning, it seemed the elevator didn't share our urgency. Finally, we reached the second floor and waited impatiently for the door to open. We almost leaped out of the elevator, heading straight to that metal sink for one last time and scrubbed in like so many visits before. This time was different however, and we were happy to do so. We just wanted to gather up our baby and leave as fast as possible!

As I entered the ward, I reluctantly glanced toward The Wall. It was almost mandatory to look, if only to be sure your child had not been moved to that side of the room. Also, because you couldn't ignore the different climate stemming from those four larger beds. Compared to the left side where all the commotion came from, the right side of the room seemed to be in a different time zone. You didn't know very much about the kids over there, and you really didn't want to.

Every time you glanced over to that side of the floor, there might be one less set of unfortunate parents sitting in one of those rocking chairs looking helpless, worried, and terrified, only to be quickly replaced by another set of unfortunate parents bearing those same looks of helplessness, worry, and terror. It was extremely sad. You were sure those families would be leaving at some point, but probably without their child accompanying them. Oh well, that was a different world now. We were out of here!

When we entered the ward, Lindsay's crib had been moved, and I started to panic. Any changes in that ward instantly added to your anxiety, but I found her soon enough. They had just moved her crib closer to the nurse's station at the other end of the room. We wasted no time heading straight toward her crib. The Parent Nurse quickly intercepted us and began assuring us that we were, in fact, going home today.

On the floor at all times, there was a nurse designated as the "Parent Nurse." The position seemed to rotate between nurses every time we visited, but they were always called the Parent Nurse for that shift. Their job was to help the parents stay calm and help them understand what was happening with their child - inasmuch as they were allowed to say. While the faces might have changed every day, it was a great idea - at least the *keeping the parents calm part*.

Lindsay was unplugged from everything that had become part of her this past week, and she was sleeping soundly. She was still wrapped up in a blanket with "Children's Hospital" written on it, and there were some papers stacked on a small table placed beside her crib. We frantically began reading. The note on top of the pile said, "Going Home Instructions." We didn't get to read any further when the Parent Nurse returned to tell us, "You'll need to see Dr. Cranen prior to taking Lindsay home. I'll let her know you're here."

The second page on that pile of papers was all we needed to read, "Treat Lindsay as a normal newborn and come back in six weeks..." That's as far as we read before the nurse came back to tell us, "Dr. Cranen will meet with you now." We turned our attention away from that short stack of papers long enough to nod our approval and began to follow her. For now, all we needed was the second page.

We had brought a little plastic Playskool music box from home that resembled a small, colorful radio that played *Over the Rainbow*. We had bought it for her crib at home, but she obviously didn't need it there right now, so Lynn placed it in her crib at the hospital from the first full day after Lindsay arrived. Several times a

day, Lynn would wind up that little radio and place it by her side. Every time she turned that big knob on the front, we always hoped it would be the last time we would have to wind it up. It probably gave us more comfort than Lindsay, but we hoped she could hear it too. Lynn still struggles whenever she hears that song.

After giving Lindsay the once over as we usually did, we started gathering up some of the pieces of home that her crib had accumulated this week: her music box, a set of pajamas, some Pampers, a small stuffed bear, a few cards from friends. We placed them on the table next to that very encouraging pile of papers and prepared to leave our daughter's side one last time to meet with Dr. Cranen.

The nurse led us to Dr. Cranen's office, which really wasn't that far away, past a curtain by the nurse's station and around a corner. It made me rethink those Magnificent Oz curtains I had imagined, but they were just plain and grey. With a swish to the side, they opened the way to a door that held our future. We entered without a care in the world. This must be some sort of formality prior to going home. After all, Lindsay had already been released. We were almost giddy with joy and elation. We could never have imagined what would come next.

Our lives were about to take an immediate and abrupt turn.



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