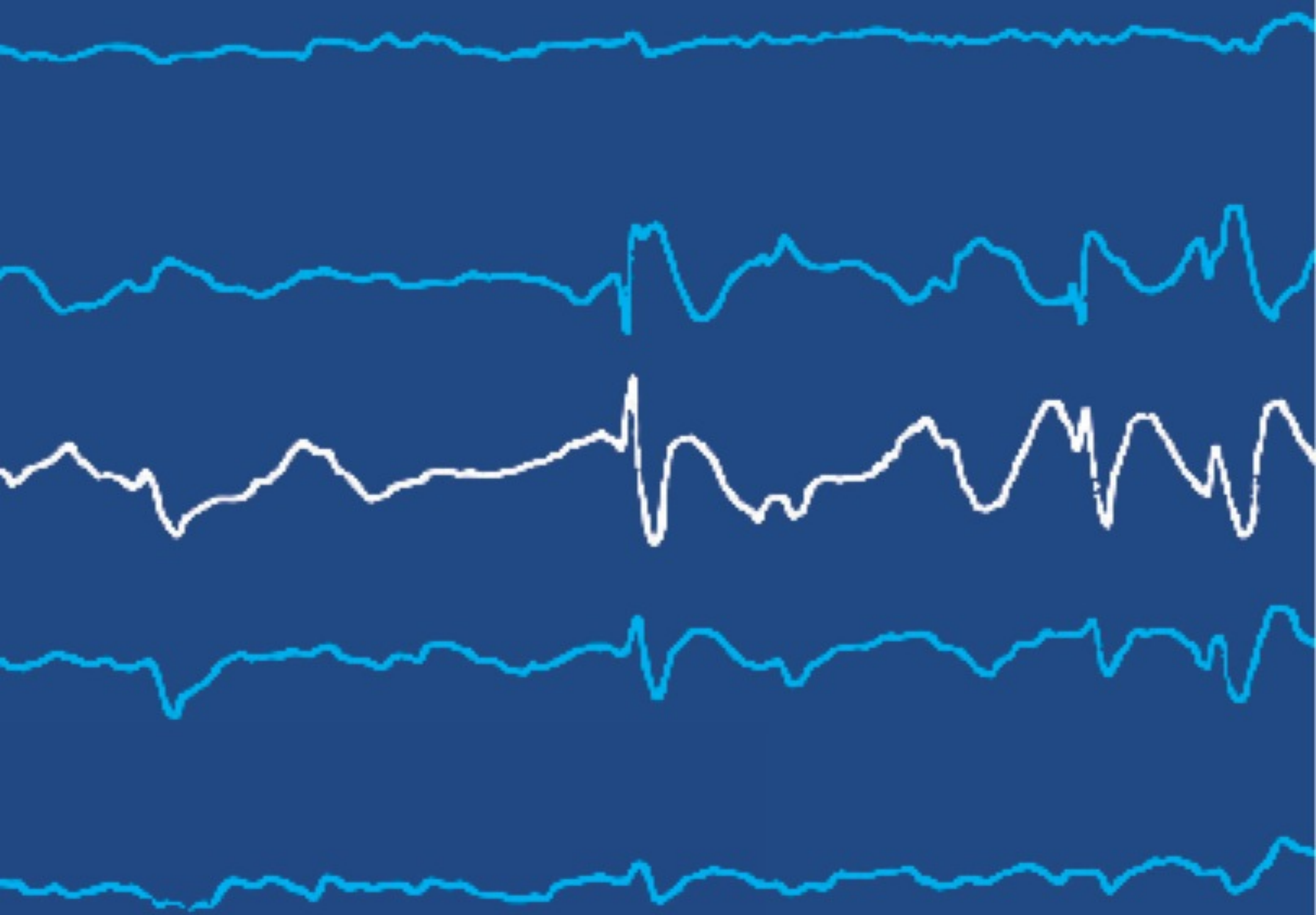
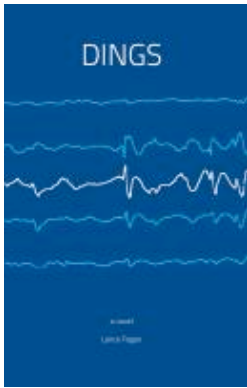


DINGS



a novel

Lance Fogan



DINGS tells a family's dramatic clinical and emotional journey as they try to understand why their third-grader is failing school. They assume that his problems stem from anxiety and stress because Dad is serving in the U.S. military in 2006-7 Iraq. The child's blank outs are finally identified by a neurologist's evaluation: it's epilepsy! The parents are devastated. Will Conner ever be able to live a normal life?

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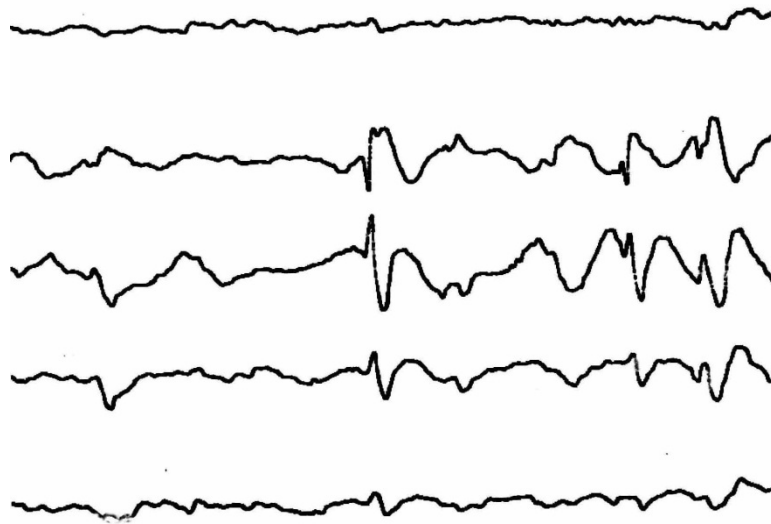
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Dings



A novel

Lance Fogan

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First Edition

Chapter 1

Conner's temperature was one-hundred-three-point-six degrees. I was sitting on the side of our bed and had begun to dial the pediatrician when I heard it. The hairs on the back of my neck bristled. What was that? It was some loud, strange animal sound.

"Arrrgghhhh!" There it was again!

Sam's head shot off the pillow, his face cast with a bleary-eyed, quizzical expression.

I dropped the phone. "Conner's room!" We bolted down the hall. The dim moon through his bedroom window showed our little boy jerking and thrashing on his bed. I pushed past my husband. "What's he doing? Conner, what are you doing?"

Conner growled. It was a drawn-out, high-pitched cry that sounded like something out of a horror movie.

"Turn on the light, Sam! Conner, what's wrong?"

Our eight-year-old was on his back, his body twisted in the covers. His head, arms and legs trembled and thrashed; he moaned a long, drawn-out groan between clenched teeth. "Conner, honey. What are you doing? Wake up, Conner!"

"Oh, God! He's having an epileptic convulsion. I've seen 'em before, in Iraq. My brother had one as a kid, too." Sam bent over and grabbed at Conner's flailing arms.

"What do we do? What should we do?" Red stains were on the pillow and red-tinged froth bubbled out of my son's mouth.

"His lips are blue! He's bleeding! He's dying! Call Dr. Jackson. No! Call nine-one-one! Sam! Call nine-one-one! It's an emergency. Hurry! Hurry! We have to get him to the hospital!"

“Stay with him!” Sam turned and ran to the telephone in our room. A few seconds later he was back. “Let’s get Conner in the car. We’ll take him ourselves. It’ll be faster. Let’s go!”

“Yes! Okay! Come on!” Conner had stopped thrashing. He unclenched his jaws and released a long, hissing sigh through foamy pink bubbles on his lips. I detected a faint odor—like urine.

“Conner? Conner, we’re taking you to the hospital, honey.” I stroked his damp forehead and pushed strands of light-brown hair away from his closed eyes. The only sound now was the rattle of his deep, noisy breathing and the roar of my throbbing pulse in my ears. I couldn’t tear my eyes away from the bubbles—pink soap-like bubbles frothing between my son’s lips.

“Ohhhh...” I knelt beside the bed and kissed his sweaty forehead over and over. His tiny hand felt cold and clammy in mine, yet only a few minutes ago he had been burning up with fever, coughing and sneezing.

Sam leaned over Conner. I had never seen my husband look so scared. “I’ll change and get some pants and a shirt on. You’d better get dressed, too, Sandra. We might be at the hospital for hours or...” Our eyes locked on each other.

“Yeah, as soon as you get back.” I pressed my lips. “I’m not leaving him alone.” I saw Grandma Audra’s face—my closest relative that I could recall ever dying. I sat down and cradled Connor’s head in my lap. My body rocked back and forth. Thank God he was breathing. I heard Sam’s dresser drawer squeak and the closet door slam.

When he came back, I left Conner to get dressed but I can’t remember doing it—only my shaking hands.

Sam lifted Conner into his arms. “He’s so light, Sandra.” Sam’s eyes glistened. And this was a man who had returned after a year of combat in Iraq less than two months ago. “Bring

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another blanket—a dry one. We’ve got to wrap him. It’s cold out.” Sam hefted Conner in his arms a couple of times and headed out of the bedroom. Conner’s bloody, red-lipped face flopped and hung down. I reached to steady his head.

“It’ll be okay. Go get Madison, Sandra. I’ll meet you in the car.” His voice choked, “Hurry!”

I ran to my daughter’s bedroom and lifted the three-year-old out of bed. She opened her eyes wide. She was too surprised to cry, but as I rushed around the room, grabbing clothes and blankets and her stuffed giraffe, her initial surprise erupted into wails of protest. Her mouth was an open cavern; I could see pinkness in the back of her throat.

“Shh, Maddie! Conner’s very sick. We have to take him to the hospital. Be a good girl. We have to go.” She was dry. I took her into the kids’ bathroom and put her on the toilet. Then I put her in some Pull-Ups just in case. The house was quiet. I hurried down the stairs with her and a blanket in my arms.

“No! I don’t want to go! Thtop, Mommy!” the toddler screamed.

“Shush. It’s all right.”

Sam was sitting behind the wheel. Our SUV purred in the garage; its heater was already blowing warm air. Conner, very still now, lay stretched out across the back seat. Madison stopped crying. I strapped her into her car seat and covered Conner. The little girl whimpered again, looked down at her motionless brother and sucked on her Binky pacifier I stuck between her lips. I squeezed into the rear seat and held Conner’s head on my lap.

My tight chest heaved with quick, shallow breaths. Then, I was back in the night that Conner was born. Over eight years ago, just after midnight, like now, Sam drove me to the hospital. Except that night, we were going there so I could

deliver Conner. I bent over his face and tasted salt. I rubbed tears from my cheeks. “Oh, Conner. My baby!”

“How’s he doing?” Sam looked back and then forward again. His head turned to the right and to the left as we rolled through a stop sign.

“He’s asleep. Drive faster, Sam! Faster!”

This Southern California March night was chilly. Puffed clouds opened and then closed as they drifted over an almost-full moon that washed light onto the dark, purple distant mountains surrounding our valley.

A few minutes later, we pulled up to the emergency room entrance of the Valley View Medical Center. Madison looked over at me and blinked at the bright hospital lights and the red glowing signs.

Sam put the car in ‘Park’ and pressed on the emergency brake. “Honey, I’ll carry him in. He’s heavy, Sandra.”

“No! I’ll meet you inside. You park and bring Madison!” I gathered Conner into my arms. “I can’t pick him up! Sam! I can’t pick him up!”

“There’s a wheelchair—inside those doors. I’ll carry him to it. You get him in there while I park.” He got out, picked Conner up and carried him through the automatic doors. Sam sat Conner down in the chair and I fixed the blanket over him. Conner’s lips and chin were caked with dried, creased, red smears. He had slumped over an armrest. I propped him back into a sitting position.

“Okay. I’ve got him.”

The doors opened and I heard Madison’s muffled scream from behind her fogged-over window, “Mommy! Mommy!”

White clouds from the tailpipe puffed and floated and then melted into darkness as Sam ran back to the SUV and yelled, “We’ll be with Mommy and Conner in a minute, sweetheart.”

Chapter 2

An elderly woman with bottle-blond hair was sitting at a desk in the reception booth. The skin around her dark eyes and throat was dry and wrinkled. She looked up from a magazine and opened the Plexiglas window. “Oh, my! I’ll tell them inside that you’re here. Just let me get some information.” The large round clock’s black hands on the wall behind her read twelve thirty-one.

“My son just had a convulsion. He’s real sick. His temperature is over a hundred and three, almost a hundred and four.” I turned my head and saw nurses in the emergency ward through glass doors. “He needs a doctor! Now!”

“Yes. Just let me get some information and then you’ll be able to go right in. They’re coming to get him.”

A gray-haired, unkempt woman dozed in a maroon armchair along the wall on the other side of the room. She opened her eyes, sat up straighter, dropped her hand from her cheek and addressed an empty room: “Sure. Go ahead. Go ri-i-i-ght ahead. I’ve been waiting over an hour for somebody to see me, and they just walk right in. For Christ’s sake, I’m sick, too, you know! For crying out loud!” Her hoarse voice belied years of smoking. I saw her sagging lower lip pull off to one side and her red, lower eyelids drooped. Ivory-colored stuffing protruded through a small tear in the Naugahyde where the woman had braced her elbow on the worn armrest. An unbuttoned cloth coat hung loosely on her thin torso to expose an old pink housedress with small blue roses printed all over it. Thick, flesh-colored stockings were rolled down to her ankles and her puffy feet were stuffed into a pair of pink, terry-cloth bedroom slippers.

Shut up! Shut up, won't you? I snarled to myself as I gritted my teeth and turned back to the receptionist.

The receptionist never looked up as she wrote down my information. "Now, Mrs. Franklin, you can see this little boy is real sick, with that bloody mouth and all. The doctor will see you soon. He just took care of you two nights ago."

I shifted from one foot to the other. Conner slumped toward one side of the large wheelchair. I straightened him. "Can't we go in yet? He needs the doctor, right now! It's an emergency! Can't you see that?" What was she waiting for? What was she talking to that repulsive old hag for? What was she doing?

The receptionist's mouth twisted and she was about to say something when doors whooshed open and a tall blonde nurse wearing tan scrubs came toward us. "I've got your little boy, Mrs. Golden." She took charge of the chair and wheeled Conner back through the automatic doors. I took little skips alongside to keep up. I used one hand to support Conner in the chair while my other hand tucked the blanket back around his body. Past beds: old, pale-gray man upright in bed—clear plastic pronged-tubes plugged under his nose—rapid breaths—hissing—eyes closed—youngish brunette woman propped up on pillows reading magazine—dark red bag on a pole, dripping—needle in her arm at end of red tubing.

The nurse called out, "Dr. Choy, we need you." Her voice was so much calmer than I expected. She wheeled Conner to a bed covered with a gray blanket that spread out all tight and neat over crisp white sheets. The pillow looked huge, full. Chrome side rails hung down. I stood back and watched as another nurse came and they lifted Conner onto the bed; one took his feet and the other held him under his arms.

The tall blond handed me our folded-up blanket. "You'll lose this if you don't hang on to it. We'll take care of him now."

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You can wait there. We'll just take a minute. The doctor on duty is Dr. Choy. He's coming."

They left me standing outside as they pulled cream-colored cloth curtains around Conner's bed. I looked up when the curtains squeaked on metal rods in a track on the ceiling. The curtains closed. Bewildered and angry, I took a single step and stopped. I turned and surveyed the brightly lit ward. Disinfectant and other hospital smells wafted into my senses. Nearby, several nurses checked IV lines on poles, wrote in charts, or typed on computers at the central desk station. Only three of the other eight beds in the ward were occupied—all by adults. An elderly woman with blue-gray hair in an unbuttoned tan coat sat next to the old man getting the oxygen through the tube under his nose. I could make out black letters on the orange dust-jacket of a closed book in her lap. I saw sensible low, thick-heeled black shoes. I started to turn away but then our eyes met. She smiled. Compelled, I turned back and returned the smile: perfunctory, superficial.

Now Conner was in one of these beds but I was out here. I turned back and heard muffled words behind the curtain. Before I could get what they were saying an Asian doctor was at my side chewing on something.

"I'm Dr. Choy. I'm on duty tonight. Mrs. Golden, right?"

"Yes, I am. Mrs. Golden. That's right. My son's in there." I jerked my head toward the curtain.

"Tell me what happened to Conner. That's his name, isn't it?"

How'd he get that information? I hadn't seen anyone talking to him. A light-blue stethoscope draped around his shoulders. Dr. Choy was about my height, stocky and clean-shaven with short, straight dark hair. I saw no wedding band when he rubbed his nose. His right index and middle fingers had deep yellowish-tan stains. He wore dark green scrubs and

had tan, wooden clogs on his feet. He must be American: he had no accent.

“Yes. My son started with a cold yesterday. He developed a real bad cough and was sneezing a lot. I took his temperature less than an hour ago, I think.” I glanced at my wristwatch. “It was a hundred and three point six. When I went to phone Dr. Jackson—he’s our pediatrician—we heard this horrendous sound, this God-awful scream. We ran to his bedroom and, my God, he was having a convulsion—at least that’s what my husband thought it was. Conner was shaking and jerking all over. His mouth was all bloody, too. I don’t know why. We drove here as fast as we could.”

He nodded. “It sounds like he had a convulsion, but it seems to be over now. I’ll examine him and then I think we’ll be getting a head CT scan in addition to routine lab work. It will show if there’s anything in his brain that could cause the seizure. Let’s go into the conference room where we can sit down, Mrs. Golden.” There was an odd movement when he spoke—his cheeks puffed out in a funny, quick, disturbing way after every few words. It was peculiar, really odd. I’d never seen anyone do that.

“You think there could be something in his head then? Like a tumor, or something, Doctor?”

“We usually don’t find a tumor, Mrs. Golden, and that’s a fact.” He shook his head. “But I have to make sure that there’s nothing serious going on, especially with his fever. It’s just a routine test we do when people have a seizure.” He smiled wide and his eyes narrowed; their sides wrinkled up.

His comment made me feel a little more at ease. Maybe whatever was wrong with Conner wasn’t that serious.

I spotted Sam and Madison crossing the large rectangular emergency ward. Sam had put Madison in the stroller that we kept folded in the SUV. I waved with a side-to-side, jerking

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motion. He walked toward us. Madison's head turned from side to side. She watched the nurses and sucked on her Binky. Sam took a deep breath. He looked pitiful as he peeked through the opening of Conner's curtain. I could see through the slight opening, too. Conner was on his side: a gray blanket partially exposed his pale back and bottom, and a nurse was taking his rectal temperature. An IV line had already been inserted near Conner's left elbow. It had some white bandages over it and his arm was stretched out, taped to some kind of board.

"Sam, this is Dr. Choy. He said he's going to do a brain scan on Conner, and some other tests." My voice sounded higher-pitched than usual. I trembled inside. "The doctor said that the scan will show if there's any serious problem inside Conner's head. But they usually don't find anything." I left out "tumor." The less I thought "tumor," the less chance there would be one. That's how I manage tough, confusing situations: don't think about it. Magical thinking helps.

Madison squirmed in the stroller and reached up to me. I lifted the toddler and held her close.

"There, there, honey. Mommy's got you." I patted her hair and kissed the top of her head. I breathed in that scent. Mom used the same baby shampoo on me, and it always took me back to that time whenever I smelled it on her. Madison rested her head on my shoulder and sucked on the pacifier like nobody's business. She clutched her stuffed giraffe to her chest. Her head dropped to the crook of my neck. I smoothed her hair and kissed her ear. I shifted my weight from one foot to the other as I held her, a little dance that usually soothed her.

The men shook hands. "Yes, Mr. Golden. I'm Dr. Choy. How are you? Your wife just told me what happened. I'll be taking care of your son."

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I saw a tiny particle of white rice fly out of the doctor's mouth. I also detected the pungent aroma of garlic and ginger coming from somewhere.

Sam's eyes looked at the ID tag pinned to the doctor's scrub shirt: SAMUEL CHOY, M.D., Ph.D., Emergency Medicine. His gaze fixed on an open pack of cigarettes bulging from the pocket behind that tag. He looked up into Dr. Choy's face. That look—that near-sneer that had become too familiar in our home—said everything. How did Sam ever get along in Iraq? So many soldiers smoked.

The doctor didn't miss his expression, either; it seemed like he temporarily lost his train of thought. Dr. Choy stared for a second. Then he looked down, cleared his throat and turned his attention back to me as a nurse slid open the curtain around Conner's bed. Conner was on his back now. The gray blanket covered him up to his chest. He seemed to be in a deep sleep, breathing softly. The blood was gone from around his mouth, thank God.

"He's ready for you now, Doctor," she said. "I'll get his vitals into the computer. They're normal, except his rectal temp is one hundred and one point six. The five-percent IV D and W are going in at a slow drip."

Our eyes met. "Thank you," I whispered. She smiled and touched my hand as she and her colleague walked past us toward the nurses' station.

Sam looked pale. He gripped the back of a chair. His jaws clenched when Dr. Choy said, "Mr. Golden, a little while ago your wife described what happened to Conner at home. It sounded to me like he had a grand mal seizure." I clasped Sam's hand. The doctor turned his head and looked at an open door of a nearby room. "Here, why don't we sit down? We can go into the conference room." He took a step forward. "Has Conner ever had one before?"

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Sam and I looked at each other but before he could answer, I interjected, “No, Doctor. I—we—want to be where we can see Conner. Can’t we stay here? No. He’s never had a seizure; of course not!”

I saw the doctor’s eyebrows pull up and his eyes opened wider after I said that. I realized I had shouted. “I’m sorry, Doctor. I’m a bit upset and topsy-turvy now. No, Conner’s never had anything like this before.”

I saw this calm demeanor that doctors acquired. His face relaxed. He directed a slight smile at me, accompanied by several little nods. “Okay. We wouldn’t be far away but I understand that you want to stay close to your son. We’ve done vitals on him and drawn some blood for tests. We’re also collecting urine and I’ve started him on a medication that should prevent any more seizures.”

Medicine! What medicine?

Without seeming to pause for breath, “The CT scan will be done in a little while. The scanner is in the radiology department down the hall. They’ll come for him shortly. It’ll only take a few minutes. It could tell us why he had this seizure.”

Why he had this seizure? We would know that...right now...good.

“Your son has a moderate fever; his temperature has come down a bit from what you said it was. Now, please tell me everything that happened before you brought your little boy in.”

“Well, Doctor, as I said, Conner was sneezing last night. He was coughing a lot, too, and...” I told him everything. I knew I sounded rushed, and I kept looking at Conner as we all stood next to his bed. Conner was on his back with his eyes closed; the IV dripped a clear liquid into his arm. A clouded plastic bag hung from the side of his bed and pale, yellow urine

ran into it from a clear tube coming out from under the sheet covering him. “Is that tube stuck inside my son’s bladder? That’ll hurt, Doctor. Why’d you have to do that?”

“No, Mrs. Golden. Don’t worry. The tube is not inside his bladder. It’s a condom catheter stuck onto the end of his penis. Urine will just come out naturally. No, nothing’s inside him. So, what happened?”

Sam blinked hard a couple of times and wrapped his arm around my waist. His cheeks bulged as his jaws clenched.

Dr. Choy glanced at Sam, and then he leaned over and coughed into his fist. “Sorry.” He looked at me and smiled. “We’re going to take good care of your son. He’s going to be all right. Seizures are quite common and they’re not always serious. Conner can be perfectly fine afterward.” There were those funny little blowing cheek puffs again between his words.

The doctor coughed again and covered his mouth with yellow-stained fingers. He cleared his throat and stepped away from Conner’s bed. “Why don’t we all sit down in our conference room while the scan is being done? I need to ask you more questions about your son’s medical history.”

Sam and I nodded. Conner seemed comfortable now. Dr. Choy escorted us to the conference room just steps from my son’s bed. He waited at the doorway and extended his arm to usher us inside. I carried Madison and Sam pushed the empty stroller into the room.

“Would your little girl like some milk or juice?”

“No thank you, Doctor. She just needs to sleep. I would like to take her to the bathroom. She’s potty-trained, but I don’t want to over-test her. Where is it?”

I put the blanket that I had been holding down in the stroller, excused myself and carried Madison to the bathroom. My soles squeaked on the linoleum floor. I set her on the toilet

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and waited. The mirror reflected my drawn and worried expression: my muddled auburn pageboy, cut off above my shoulders; my brown eyes, pink from shed tears, starkly contrasted with my clear, pale complexion. I wondered if that old rash would break out again with all this stress. The taste of pasta salad from supper came up in the back of my throat. I tucked my blouse back into my slacks and pulled down my sweatshirt. I really have to lose these extra fifteen pounds... "That's a good girl, Madison, honey," and I pushed the flush handle. We washed our hands.

We passed Conner's bed. It looked like he hadn't moved. The IV dripped and it seemed like his urine bag was filling up. In the conference room, I sat Madison back in the stroller, eased the back down and covered her with the blanket. She closed her eyes and rhythmically sucked on her pacifier. She was fast asleep.

Sam and the doctor sat opposite each other at the rectangular wooden table. There were four dark, hard-back wooden chairs on each side and one chair at either end. I sat beside Sam across from the open door. I wanted to see Conner. Madison slept in her stroller behind me next to the wall.

Dr. Choy chuckled and slid several containers of Chinese-takeout to the other end of the table. Their top flaps winged upward and a set of wooden chopsticks stuck out of one of the white boxes. The containers featured drawings of vicious-looking dragons with open mouths and Chinese writing in bright red. "I'm sorry. I was having my lunch when you arrived." He smiled. The pungent aromas of garlic and ginger filled the air.

Sam smiled back. I set my mouth in a grim line. I could barely see the foot end of Conner's bed.

I noticed red blood splotches on my sweatshirt's right shoulder where Conner's bloody mouth had touched it in the

car. As I looked down at it, Dr. Choy said, “You can get that spot out pretty easily, Mrs. Golden. Just dab milk on it. That’s a trick I learned from nurses early in my training. It works every time. The milk enzymes break down the blood cells.” He had a broad smile with great looking teeth, sparkling almost.

“That sounds like a neat trick. I’ll try it.”

Conner’s nurse appeared in the doorway. She briefly surveyed our little group and announced, “CT can take him now, Dr. Choy.”

“Good. I’ll finish the physical exam when he gets back. It looks like he won’t need any sedation; he’s still postictal.”

Postictal? I raised my brow and looked at Sam.

Dr. Choy picked up on my quizzical expression. “That means that Conner is still in a stupor, Mrs. Golden. It’s routine after a convulsion. He’ll sleep, probably for a few hours. He won’t remember most of this when he wakes up. The radiology department will finish with his scan in a few minutes. After they bring him back I’ll take a look at it.” He alternated his gaze between Sam and me. I liked him. He explained things.

The nurse smiled, nodded and walked away. Dr. Choy held a clipboard and occasionally he looked down to write notes as we talked. “Has your son ever had fainting spells or blackouts before?”

“No. He’s always been healthy.” A gloom, a terrible weight settled on my shoulders. Why did this happen? He’s had high fevers before. We all have. Would he really be okay? Maybe he would be paralyzed. Could he die? Could Conner die tonight? I gnawed my lip and my body shuddered once. I looked down at my balled-up fists in my lap. I uncurled the fingers and looked up. Was this really happening? Maybe I would wake up and all this would just be a dream. God, was I going nuts?

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Dr. Choy directed his queries to me and only occasionally glanced at Sam. I thought he did this because I had done most of the talking. I was the one who had answered most of his questions so far. What was wrong with my husband? He was always the one to take charge of a situation, to be in control. But, lately... He could be in this with me a bit more. I stared at Sam sitting next to me but his face was down; he looked at his lap.

“Has Conner ever complained of headaches?”

“Sometimes. But he doesn’t seem to be too bothered by them; not for long. He usually stops complaining that his head hurts after a little while. If he says his head really hurts, I give him a Tylenol. The pediatrician warned me not to give aspirin because it could poison his liver and cause real problems at his young age. So, I use Tylenol for both my kids, but not much; a couple times a year, maybe. Headaches never seemed like they interfered with anything he really wanted to do, unless he wanted to get out of school.” I had begun to ramble again.

“Was there any vomiting with those headaches, or nausea, Mrs. Golden? Did he want to get into a dark room when he had those headaches?”

“You mean, like migraine? No. My mom used to get those, but she hasn’t had one in years.” I glanced at Sam. He sat still beside me. He had leaned back with his hands folded on his abdomen. His eyes looked a little droopy. I smiled at him and reached for his hand. He nodded and squeezed mine.

Dr. Choy shot a quick glance at Sam but then turned his attention back to me. “Has Conner complained of any dizziness?”

“Well, only after spinning around in those games that kids play. You know. That’s all.”

“And you said that he’s had no passing out or fainting spells, right?”

“That’s right.” I pressed the tip of my tongue on my upper lip. If anything like tonight happened before, I...I couldn’t...

“Has he had any vision troubles?”

“No. Dr. Jackson checks his eyes with that eye chart every year. He says Conner’s vision is fine. He seems to see all right to me, too.”

“Any hearing problems or pain in his ears?”

“He gets ear infections occasionally, like when he catches cold. Dr. Jackson treats it with ampicillin. That’s all. All the kids seem to get them much more than Conner does.” I became aware that my foot had begun to bounce the way it does when I get tense and I cross my legs. I stopped it.

“Has Conner ever told you that he feels numb or gets weak anywhere?”

“No. No, he hasn’t. Only when he hits his funny bone in his elbow sometimes, and he said that made his hand tingle. That happens to me, too, if I hit it the right way, Doctor. I mean the wrong way, don’t I?” I chuckled and cupped my right palm under my left elbow.

The doctor looked up from his scribbling and smiled. “And what about rashes? Have you noticed any lately?”

“No, I haven’t.”

“Has he had his vaccinations? All the ones his pediatrician recommended?”

“Oh, yes. Both children are up-to-date with our doctor’s recommendations.” My foot jerked up and down now. I uncrossed my legs and put both feet on the floor.

“What childhood diseases has he had?”

“None, really.” I leaned forward and rapped my knuckles on the table twice. “I mean, that’s what the vaccinations are for, right? I mean, I had chickenpox myself, but that was it. My kids haven’t had it. None of their friends have, either.”

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“Does he take any medicines, prescription medicines, every day?”

“No, but I give the children a ‘One-A-Day’ multivitamin. That’s it. I’m wondering about those, too. Are they really necessary if they’re eating well? Probably not, from what I’ve read.”

Dr. Choy’s expression didn’t change. He continued, “And has he ever been in the hospital overnight for any serious illness or any surgeries?”

I shook my head. “No.”

Sam’s eyes were closed now. Was he awake? I became aware of a rhythmical squeak; I turned around. Madison’s cheeks moved in and out with her Binky between her lips.

“And what about the relatives? Any diseases that run in the family? Anyone have seizures or epilepsy?”

Sam sat up straight and cleared his throat. So, he *was* awake. He turned to me and then back to Dr. Choy. “You know, actually, my younger brother had a convulsion when he was very young. He had a fever. I remember it like it happened yesterday, now that I’m reminded of it. It was scary. He was shaking like Conner. It seemed like it lasted forever, but it probably went on for only a minute. It never happened again, thank heaven. He’s fine, now.”

What the—? My stomach dropped. “You said that tonight at home, didn’t you? You never told me that before.” I turned to Dr. Choy. “Could that affect Conner? Did that have something to do with what happened to Conner tonight? Could he have inherited it?”

“I never *told* you, Sandra, because I never thought about it until now. Jimmy’s fine. Anyway, he never had another one. No one else did. It was a long time ago, Sandra.” He furrowed his brow and returned my fixed stare. “Sandra, it just *never came up*,” he said without hiding his irritation.

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Dr. Choy broke in: “It sounds like your brother had a febrile seizure, Mr. Golden. They’re common in young children and not serious. Maybe five percent of people have them when they are very young and sick with a fever. And no, Mrs. Golden, I don’t think that it’s related to Conner’s seizure tonight.”

I wondered how he could be so sure. Why not?

The doctor smiled, nodded and wrote something on his clipboard. “Thank you. You were both very helpful.”

A middle-aged woman with short, wiry gray hair appeared in the open doorway.

Dr. Choy turned his head. “Ah, here’s Mrs. Beck from the Financial Services Office. How are you, Mrs. Beck?” He smiled at her, turned back to us and said, “Mrs. Beck needs to get some information from you about your medical insurance and that sort of thing. Here, sit down, Mrs. Beck. I’ll leave you to it.”

“Hello. How are you?” She smiled and sat down.

I pushed my chair back to get some distance from the woman’s cloying perfume.

The doctor looked over at Madison, still sound asleep in her stroller. “I’m just going to check on my other patients now. When Conner returns, I’ll look at the scan and do a more thorough examination. We should be getting the blood tests back shortly. I’m concerned that he still has a fever. Depending on what those tests show, I’ll probably recommend a lumbar puncture. I want to rule out meningitis as a possible cause of his seizure. It’s another routine test. We’ll talk about that when I get back.” Dr. Choy’s chair screeched as he pushed back from the table and hurried out the open door.

I looked up at the doctor, my mouth agape. Sam shook his head.

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“Lumbar puncture? Isn’t that a needle in the back, one of those long needles? Sam, I’d rather he not do that to Conner.” My skull felt like it was being squeezed. “Sam, maybe we should get another opinion.”

He turned toward me and placed his hand over mine but his expression was vacant. It was as though I was dealing with this alone and he was just, like, watching everything. I slumped in the seat and pulled my hand away from his. I closed my eyes and began to count slow, deep breaths.

Mrs. Beck’s long, pink-tipped fingers began to shuffle her papers.

We heard a whoosh of automatic doors and then squeaky wheels echoed as they approached the conference room. There was Conner, covered with a blanket on the gurney. The side rails were up and he was secured by a broad, black strap buckled across his stomach. The plastic IV bag hung on a pole attached to the stretcher and the full urine bag was between his feet.

Conner turned his head sleepily on the pillow as he was wheeled past the conference room. He saw us. “Mommy!”

The orderly looked in through the doorway and said, “He was a very good boy! He did fine, and we got him back in no time.” The man’s soft, Punjabi accent sounded musical.

I gave the financial officer a frosty glance and pushed my chair away from the table. She turned around in her seat and saw Conner on the gurney. “I’ll come back in a little while.” Mrs. Beck smiled, gathered her papers and left.

Sam was already out the door and reached Conner first. He clasped the hand without the IV. I leaned down and kissed his forehead. “Conner, sweetheart! How are you feeling?” I nodded my head toward the conference room. “Sam, keep an eye on Madison! No, wheel her out here.”

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Conner's eyes were wide and pleading. "Mommy, what happened? Where are we?" His breath was sour and his lips wrinkled and dry.

"You're in the hospital, honey. You got sick, but you, you'll be all right, my darling boy," My voice trembled.

Sam returned with Madison in the stroller. She was still asleep, thank God. He squeezed Conner's little hand between both of his and forced a huge grin to hide the worry I saw in his unsmiling eyes.

Conner lifted his head and contorted his neck to look at the IV tube protruding from under a bandage at his elbow. "Why do I have that thing in my arm, Mommy? Take it out! Take it out! I want to go home!"

I brushed a lock of hair off his forehead. "Soon, honey, soon. When the doctor says so."

"I want to go home! *Now!*" Tears streamed down his cheeks. He slid his jaw from side to side and twisted his mouth. "Mommy, my mouth hurts. It hurts real bad."

The blood was gone from his face except for some red streaks on an upper front tooth.

The tall, blonde nurse moved from behind the nurse's station and approached the gurney. "Let's get Conner back into bed now, Mom," she said. Out of the corner of my eye I saw Sam's eyes move over her.

I forced a smile and nodded. I followed the gurney back to his curtained cubicle. Sam pushed the stroller. The nurse said, "Okay sweetie, we're going to lift you onto that nice bed. You just pretend you're on a magic carpet." She and the orderly lifted him smoothly onto the bed. Sam and I sat on chairs on either side of the bed. Madison slept in her stroller next to me. The nurse adjusted the blanket and touched some control on the IV. "Dr. Choy will be right with you." She smiled at Sam and

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then at me. The curtains squeaked on their ceiling tracks as she pulled them closed around us.

Sam and I each held one of Conner's hands between the guardrails. He had become quiet. His eyes were closed again. I was surprised—momentarily alarmed—that he had fallen back asleep so quickly. My eyes moved to his chest. It moved up and down in slow, deep, regular breaths—up and down, up and down. As I watched, those breaths were pulling me back to a better time—a much better time before this night. I looked off, unseeing, until I heard Sam.

“He looks so peaceful now, honey.”

Chapter 3

The automatic doors opened. I saw Dr. Choy stride purposefully toward us through a crack between the curtains. He parted the curtain and slipped into our cubicle. Sam's jaw muscles began to work. I detected the stale smell of tobacco.

I held my breath and looked up.

Dr. Choy looked down at Conner. He cleared his throat. "Your son is still postictal; that's why he's sleeping again." He turned his gaze toward me. "I expect he'll sleep for a few more hours."

"Yes, we remember," Sam said and looked at me. I pursed my lips and nodded back.

Dr. Choy said to me. "The CT scan shows that his brain appears normal." Then, he turned to look at Sam.

"Thank God!" I grinned at Sam and pumped my fist.

"Oh, that's great, Doctor. Thank you." He blinked quickly and looked down.

Dr. Choy nodded at each of us and continued, "That's very reassuring. We'll have to wait for the official results when the radiologist reads the scan in the morning, but it looks good to me."

He cleared his throat and said in a halting voice, "So, you know, uh, the question that we have to answer is, uh, why did Conner have this seizure?"

"The doctors said that my brother Jimmy's seizure was because of a high fever. Isn't that why Conner had it, too? His fever was high."

Dr. Choy tightened his grip on the guardrail and leaned over. He seemed to be studying our sleeping boy. "How old did you say your brother was when he had his seizure, Mr. Golden?"

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“I think he was one, maybe two years old. He was real little.”

“Hm.” Dr. Choy straightened up. He rubbed his chin and turned to look down at Sam seated in the chair next to him. “You see, very young children can have seizures when they get febrile. That is, when they have a high fever, such as from a cold or the flu. Typically, we find no serious cause for those. But, Conner is eight. That’s a bit old to have a benign febrile seizure. We need to be sure that nothing serious has caused it.”

Then he looked over at me. “I checked his blood-panel studies, and they’re all normal. That’s very good news. But, the fever could be associated with meningitis or encephalitis. Those are serious infections in the nervous system that would need to be treated right away. We wouldn’t want to miss that.”

Oh, God. “Meningitis!” My stomach cramped. I searched Sam’s face. He just looked at Conner and said nothing.

Dr. Choy lowered the guardrails on the sides of the bed, first on his side and then he walked over and lowered the rail on mine. I slid my chair over to give him room. He walked back to Sam’s side again. He pulled down the cover and began moving Conner’s head up and down off the pillow. He explained, “Any stiffness in the neck would suggest that your boy has one of those serious infections. It’s not stiff.”

The doctor turned Conner over, pulled open the hospital gown, examined his thin back and legs and then rolled Conner onto his back again. As he looked over his chest and belly, Dr. Choy said, “Just searching for spots and rashes on his skin that could be a sign of disease. They’re subtle things that can tell us a lot.” I looked at Conner’s apricot-complexioned skin with new interest.

It seemed that he paid particular attention to Conner’s hands.

His fingers prodded and pushed into Conner's belly. Then, they smoothly moved along both sides of our boy's neck, under his armpits, his groin and his inner elbows.

He inserted his stethoscope's earpieces and listened to Conner's chest, moving the end to different areas. Occasionally, the doctor held his breath; other times he looked up at the ceiling and closed his eyes as he listened.

He turned and grabbed an instrument hanging on the wall. It had a dark green cone attachment like the one our pediatrician uses. He pushed a button; it illuminated, and he peeked into Conner's ears. "No redness in the canals. That's good."

Next, he propped open Conner's eyelids with his fingers and shined a flashlight into each of our boy's pupils. I stood up. The light underscored greenish flecks in Conner's brown iris. I saw the pupil get smaller in the beam of light. All kinds of questions cropped up, but I didn't want to interrupt the doctor doing his work. I glanced over at Sam. He watched the doctor, too. Finally, Dr. Choy propped open Conner's eyelids again and touched each of Conner's eyeballs with a small wisp of cotton that he took from a jar at the bedside. That could not feel good. I imagined the sharp, irritated feeling when wind blew something in my eye. Conner blinked, even though he was asleep.

Dr. Choy must have seen my shudder. He looked up from his bent position over Conner. "This doesn't hurt, Mrs. Golden. That's normal; a normal response tells me his brainstem—the back of his brain—is working well."

"Oh," I said, without comprehending what he meant.

Now, Sam was on his feet. "What was that, Sandra? What did you do, Doctor?"

"I just touched his cornea with this wisp of cotton to test the corneal reflex."

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“Uh-huh,” Sam said. I smiled at him.

Throughout the examination Dr. Choy, at times, murmured, “Fine, good.” When he said that, I nodded and looked at Sam. I started to feel a little hope. Maybe everything really was fine and we could go home. I had forgotten all about that mention of a spinal tap.

The doctor propped open Conner’s mouth with a tongue depressor and directed his flashlight inside. “Look! He bit his tongue. Right there! Do you see that? That’s where all the blood came from.”

He leaned back, still propping Conner’s mouth open for us. I could see that the whole left side of Conner’s tongue was swollen and dark blue. There was a red jagged cut along the edge.

My hands flew to my mouth. “Oh, my God. That’s awful!” I groaned and lowered my hands. “People can bite off their tongue during a convulsion, Doctor. I heard that. They can even swallow it, can’t they?”

“No, no, Mrs. Golden. It’s pretty common to bite the tongue during a grand mal seizure. Don’t worry. This is not a serious injury; it will heal in a few days. I promise you, no one has ever bitten off his tongue during a seizure. Nor is it possible to swallow the tongue. Those are old wives’ tales. You said that he wet himself at home. That also happens routinely during a seizure. Loss of bowel control can also occur.”

He pulled out a small hammer from a lower pocket on his scrub shirt. The triangular tip was the color of red clay. He tapped the rubber tip on Conner’s elbows and knees as I had seen doctors do in movies and on TV.

“What does that tell you, Doctor Choy? I’ve seen doctors do it so many times. Why do you do it?” I watched his face and hesitantly added, “I hope you don’t mind these questions.”

“No. I encourage questions. Many people don’t ask enough of them. The reflexes can tell us if there’s a neurological problem, Mrs. Golden. It can tell us if the problem is in the central nervous system—that’s the brain and the spinal cord—like with a stroke. Then the reflexes are real brisk and jumpy, and the hand or foot jumps real hard when we hit the tendon.”

I glanced down at my elbow.

“If the problem is in the peripheral nerves—like the nerves that go out into our arms and legs—then they won’t jump when we hit the tendon, or hardly at all.” He said this as he scraped the hammer handle’s pointed metal tip across the bottoms of Conner’s feet. That made my own feet tingle. My toes curled.

“He has good reflexes. Everything seems normal. He still has a fever, though. I want to make sure that we are not missing a treatable infection in his nervous system. I would like to perform a lumbar puncture—that’s a spinal tap—to examine the fluid in his spinal column. It would tell us if there’s an infection.”

“Oh, no, Doctor! Do you have to do that? I don’t want Conner to have that. He’s so little. I think it would be too dangerous for Conner.” My mien beseeched Sam. I wanted him to agree with me—he *had* to agree with me. I draped myself over the bed. I glared up at Sam. Why didn’t he say anything?

Sam grimaced but maintained his stony silence. I straightened up: my fists clenched at my sides. I pressed my lips; my tongue pushed hard against the back of my teeth.

“I understand that you’re worried, Mrs. Golden. Look, this is a routine test. It takes just five to ten minutes.” He paused. This time a little puff of his cheeks squelched an inaudible burp that I saw rise up his torso. “We do it as an outpatient procedure in the office, and when it’s over most patients are surprised at how easy it was. More times than not, they say,

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‘You mean, that’s all there is to it, Doc?’ Mrs. Golden, this test is very safe.’

‘You had a ‘spinal’ when you had the kids, didn’t you, Sandra?’ Sam had a croak in his voice when he finally spoke up. He cleared his throat. ‘I remember that,’ he said.

This was what Sam said? *This* was my support? Irritated, I replied, ‘Yes, but that’s *different* from what he wants to do to Conner!’

‘It’s basically the same thing, Mrs. Golden, except you had an anesthetic injected into your spinal canal to numb you. For this test, I don’t put anything in. I take out a small amount of spinal fluid to study in the lab for infection and other problems. Don’t worry; Conner’s body will replace the fluid within a half-hour.’

I heard Sam ask, ‘Will you analyze the results yourself?’ My shoulders drooped.

‘I send the spinal fluid to the lab for a technician to examine. But, yes, I get the results to interpret and make a diagnosis.’

‘Gee, Doctor, um, the needles, you know, they’re, ah, they’re real long.’ Sam stammered. ‘I’ve seen pictures of them someplace, in some book or other. It must, uh, really hurt a lot, doesn’t it?’

I jerked my head with quick nods. A surge sprang into my chest as I looked at my husband. At last, Sam was showing a little support for me. I turned to Dr. Choy.

His eyes locked with Sam’s. ‘They’re long needles only because the tip has to reach deeper, Mr. Golden. That needle doesn’t hurt any more than shorter ones. It just has to go deeper, that’s all. And, it usually doesn’t hurt at all, or not much, anyway. I numb up the area with a local anesthetic. You need to know the possible side effects of a spinal tap, though. I clean off the skin with a sterilizing solution first, but there is a

very remote possibility that the spinal tap can cause an infection. I have never seen it, but you must know that it can happen. Local soreness occasionally occurs. And, on average, one out of three patients gets what's called a 'post-spinal headache.' We really can't predict who will get that headache."

"If you do this test, uh, I remember they told me that I had to lay flat for a long time after my spinal when I delivered my children. What about that, Doctor?"

"It doesn't make any difference if you lie down for twenty-four hours or for five minutes following a spinal tap. One out of every three people still gets that headache no matter how long they lay flat, and it can last a few days. We do spinal taps here just about every day. It's very routine, Mrs. Golden.

"Having said all that, I recommend Conner have this procedure because he has a fever and he had a convulsion. Meningitis and encephalitis can cause his seizure, and it's critical to know if that is the case, here."

"But, you said the CT scan was normal. Doesn't that mean he doesn't have an infection? Why do it then?"

"No, Mrs. Golden. Meningitis usually doesn't show on the scan. The best way to rule it out is to examine spinal fluid. If the spinal fluid does not show any sign of infection, you can take him home. I am also going to refer Conner to a specialist—a neurologist—to find out why he had the convulsion in the first place. Meanwhile, as I've said, I started a medication to prevent him from having any more seizures."

"Wait. You gave him a medicine. *What* medicine? You said it would prevent more seizures. Does that mean you expect he could still have *another* one?"

"It's possible, Mrs. Golden."

I sensed he was trying hard to hide his annoyance. Although we were the same height, the way he tilted his head when he spoke made me feel like he was looking down over

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his nose at me. Those little cheek puffs were faster and more pronounced, too. His lips tightened into a slight grimace.

Sam pinched the bridge of his nose with his thumb and index finger. “I really think that Dr. Choy should do the test, Sandra. We want to be sure that Conner doesn’t have meningitis. We wouldn’t want that...” His voice trailed off.

“This is getting really confusing for me.” I felt this compulsion—this duty—to protect Conner. I still wasn’t convinced about what the doctor wanted to do. “You make it sound so safe and simple. I’ve heard bad things about spinal taps, Doctor. I remember my uncle told me once that one paralyzed a friend of his. It was a long time ago, but I remember it.”

Dr. Choy smiled and shook his head. “No, I don’t think so, Mrs. Golden. This procedure is often done *after* people are *already* paralyzed. That’s probably what your uncle was referring to. Now, I really think the spinal tap should be done. My nurse will give you the release form that you need to sign. It covers what we’ve talked about. Why don’t you go back to the conference room now to wait while I do it? By the way, is Conner allergic to Lidocaine? You know, the numbing medicines that dentists use?”

He was talking so rationally. Doctors’ facts: they didn’t mean he was right; doctors were not always right. I just didn’t want Conner hurt anymore. God, I wasn’t making sense.

The men’s voices interrupted my turmoil. Sam was saying, “No. I don’t think so, not that we know of, anyway. He’s never needed it before. Isn’t that right Sandra?” He turned questioning eyes toward me and shrugged.

“Wha—what?” I turned to Dr. Choy. “No. That’s right. And Doctor, we’ll be with Conner when you do this.”

His firm expression and the way he shook his head surprised me. “No, Mrs. Golden. It would be best if you both waited in the conference room.”

“But—I’m his *mother*! I should be there *with* him.” I paused to let it sink in. “Okay?”

“No, Mrs. Golden. I will have my nurse assist me. That is all that I will need. That’s how we do it; that’s the way I want to do it. The procedure takes just about ten minutes. You’ll be able to be with him as soon as I finish. Please, go with your husband. We’ll come and get you as soon as I finish.”

He was emphatic. His hard stare made me uneasy. I didn’t think that I could argue him out of it. I looked at Sam and bit back my protest. I murmured, “Is that okay with you, Sam?” in total surrender.

Sam got behind the stroller, “Yes. We’ll wait there.”

When we walked into the conference room Mrs. Beck was at the table waiting for us again with her paperwork spread out before her. I completed the financial and insurance forms in just a few minutes. I thanked her when she wished our son and us well as she left.

I walked over to check Madison. Sam had pushed Madison’s stroller near the wall behind him. She was fast asleep under the blanket. The pacifier had dropped from her mouth and was under her shoulder. I watched the blanket that covered her chest rise and fall for a moment. I put the pacifier in my pocket and sat down.

Sam sat across the conference table. We stared silently at each other. Funny, I hadn’t even heard the wall clock before, but its ticking pierced me now. I glanced over at it and then looked into Sam’s eyes. He shrugged.

I dug a tissue out of my pocket and blew my nose.

“Hey,” Sam said softly. He reached across the table. I reached out, too. He placed both hands on top of mine and

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squeezed. “Sweetheart, the doctor *did* say we’ll be able to take him home soon. Sandra?”

“Oh, Sam!” I whispered. I lowered my head onto my outstretched arms on the table and closed my eyes.

Chapter 4

Several minutes later, Dr. Choy and a nurse were behind the curtain with Conner. The boy was sound asleep, still under the combined postictal stuporous effects of the convulsion and the sedative effect of the intravenously administered anti-seizure medication.

As the nurse unwrapped a sterile spinal-puncture kit and placed it on a metal stand next to Dr. Choy, the doctor positioned the boy on his side. He pulled Conner's knees up to his abdomen to round out the spine and open the spaces between the bony vertebrae. Conner moaned softly in his stupor and his body tried to straighten, but Dr. Choy held the boy's flexed torso and legs still with his hands for several seconds. The boy relaxed.

The doctor inserted his washed and dried hands into sterile gloves with a loud snap, donned the sterile gown from the kit and sat on a stool. He swabbed rusty-brown antiseptic solution over Conner's lower back. Then his fingers felt the spaces between the boy's vertebrae under the skin. He decided which space in the lower vertebral column had the best opening to insert the long spinal needle. As he'd done a hundred times before, Dr. Choy covered his patient's naked back with the sterile paper drape from the kit, the center of which had been cut open in order to gain access to the spine.

He injected the local anesthetic. "We're lucky he's still postictal; otherwise, we'd have a real fight on our hands," Dr. Choy said as he looked up at the nurse standing opposite him over Conner. "This local anesthetic burns. It's usually the most uncomfortable part of the whole procedure, you know."

He placed the anesthetic syringe down on the tray and picked up the spinal needle. That needle could look a foot long

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to a patient, but it measured less than four inches. He pushed the sharp tip into the numbed skin, confirmed that his aim was correct and then pressed the needle deeper. It slid smoothly into Conner's back.

Dr. Choy took a deep breath. No movement, no cries, no moans from his patient. At least I haven't hit bone yet, he thought. The doctor pushed the needle deeper until he felt the reassuring "pop" as it penetrated the thick, fibrous ligamentum flavum membrane that enclosed the spinal canal. He pulled out the hollow needle's stylet. Colorless, clear cerebrospinal fluid immediately dripped out the end of the now-empty, hollow-bored spinal needle. The tension in the doctor's shoulders dissolved as these welcome first drops fell onto a towel he had placed on the floor for this purpose.

He attached a long, thin measure-marked plastic manometer tube to the end of the needle and watched the colorless fluid climb slowly up the tube. The surface of the fluid undulated up and down slightly with each of Conner's breaths. The fluid level finally stopped rising at the 140-millimeter mark; the pressure in the cranial cavity and spine was normal.

Samuel Choy mused at the similarities between spinal fluid and seawater as he watched the fluid: both liquids shared the same chemistry. This fact had fascinated him ever since medical school.

And, he recalled his grandmother's sea stories. Grandma Liu grew up along the Pearl River in southern China. Her pet cormorant was trained to dive for fish for the family to eat and to sell. With her funny laugh and with a gesture of fingers around her throat, she had described how a tight ring around the bird's throat prevented it from making the fish its own meal. He loved her stories from China.

The nurse broke his reverie from the opposite side of the bed. "If I ever need a spinal tap, Dr. Choy, I want you to do

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it.” His weak smile masked the pleasure he felt at the compliment.

He removed the manometer and placed a collection tube under the end of the needle. A few drops splashed onto his clogs. “The fluid looks clear. Good. It’s unlikely Conner has an infection,” he said to her. He collected three tubes of spinal fluid for testing. Then he pulled the long spinal needle out of the boy’s back.

“I’ll take the vials down to the laboratory. You won’t need me now, will you?”

“No. I have everything under control here. The orders are written. Go ahead.” He nodded at her, and she left.

Dr. Choy turned Conner onto his belly. He observed a red drop oozing at the puncture site. He wiped it away and washed off the antiseptic solution from the boy’s back with a damp towel warmed under the spout at the nearby sink. Then he dried the skin and placed a Band-Aid over the puncture, retied Conner’s hospital gown and rolled the boy onto his back. “We’re all done, Conner.”

Conner stared up with uncomprehending eyes.

Dr. Choy covered him with the blanket and snapped the bed’s guardrails back into place.

**October 2006: Southern
California**

Chapter 24

Conner squeezed my hand as we followed Hannah to Dr. O'Rourke's office. I glanced at the framed art reproductions that adorned the corridor walls; several looked familiar. As soon as we entered his office, I detected the aromas of cinnamon, apple and coffee, but I couldn't see any lunch leftovers or candles or anything.

"This is Conner Golden, Doctor." She then turned toward us, nodded and with a face-lit smile announced, "Mr. and Mrs. Golden." Hannah then indicated the neurologist with her open palm. "And this is Dr. O'Rourke." She left and pulled the door closed behind her. My heart quickened.

The man whom I recognized from the website smiled, stood up and came around his desk to greet us. He was several inches shorter than Sam and only an inch or so taller than me. The doctor's bowtie was not the same as the one in his website portrait. This one's butterfly wings were deep red and arrayed with narrow, bright blue and yellow diagonal stripes. His temples were gray; the rest of his head was covered with dark, medium-length hair parted on the left. The crown of his head had a neat, round bald spot that reminded me of the tonsure that monks wore in paintings from the Middle Ages. The corners of his light-blue eyes wrinkled with a warm smile. A slight paunch pushed aside the edges of his unbuttoned knee-length white coat.

Dr. O'Rourke smiled even more broadly as he extended his hand to Conner. Our boy pressed against his father's torso. Sam smiled and gently pushed Conner out in front of him with his palm. Our child's eyes widened as he looked up at the neurologist with a guarded expression.

At Sam's encouragement, he extended his arm and shook the doctor's hand. He reached for mine with his other hand and looked down. His small palm was icy-cold.

The doctor leaned forward and regarded Conner's hand. Several of the fingers were stained with blue and red ink that I couldn't remove from his recent art project. "Hello, Conner. I'm Dr. O'Rourke. It's very nice to meet you. I see that you've been doing some painting."

Conner looked at his right hand, which was mostly enveloped in the doctor's. Then he cast a sideways glance at the doctor and flashed a shy smile.

"I'm so sorry, Dr. O'Rourke. I couldn't wash off all of the ink from Conner's hands. My son is into mythology, and he likes to draw and paint Greek and Roman and Egyptian characters."

Still leaning over Conner he exclaimed, "Mythology! Hey, now! Wow! And you are only in the third grade? You're eight, right?"

"I'm eight and a half." Conner cocked his head and grinned with widened eyes. Sam and I both smiled at our son's brisk retort.

The neurologist nodded several times and looked up at us. His broad grin exposed a small chip off his left lower-front tooth. "That's a pretty sophisticated subject for a third-grader. You must be really smart."

The small talk was helping our son get comfortable with this man in the white coat. I saw him turn his attention to the certificates and pictures on the walls and to the books on the shelves as we chatted.

"Do you also know the Scandinavian stories and the Native American mythology tales too, Conner?" Dr. O'Rourke cocked his head, raised his eyebrows and waited for his young patient's response.

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Conner grinned with growing enthusiasm. “Oh yeah. I know pretty much all of them. They’re on my computer. I have tons of mythology games. I play with Zeus and the Titans and the Greek Underworld. There’s some stuff about the Vikings too, but not much about the American Indian ones.” Conner waved his hands and shifted his weight from foot to foot as he described his favorite mythology games to the neurologist.

I smiled and felt a bursting feeling in my chest. Sam had a proud grin.

“That is *wonderful*, Conner.” The doctor indicated three matching dark-green cushioned chairs in front of his desk. “Please! Everyone have a seat. Why don’t you sit here, Conner,” he pointed to the middle chair. Dr. O’Rourke lowered himself into a cordovan-shaded leather armchair behind his large mahogany desk.

“I’ve been reading Dr. Choy’s notes, and I’ve had a look at the results of all of your lab tests, Conner. I’m pleased to say that everything seems normal.” He smiled at me and then at Sam. “That’s great news. Let me explain more about the records that I’ve seen.”

Even though the doctor’s friendly and confident demeanor was reassuring, I couldn’t relax. My jaws clamped and my hands pressed down in my lap. There was some pressure in the sides of my head, and I breathed quickly.

The neurologist placed both hands on the desk and leaned toward us. Sam leaned forward too, and clasped his hands between his legs. I was aware of my rapid breathing; I tried to control it. I exhaled and sat back in my chair. I crossed my legs. Conner’s brows furrowed which added to his cautious, serious expression.

“Conner, do you want to see pictures of your brain on the CT scan? They’re really interesting.” Dr. O’Rourke angled the

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computer monitor so we all could see the images. “Have you studied the body and the brain in school yet?”

“No.” Conner stood up and leaned against the desk.

“That’s right. Get close so that you can see,” Dr. O’Rourke said.

Conner propped his elbows on the desk and cupped his chin and cheeks in both palms. “Gee! Wow! My brain! It looks just like on TV shows, only this is *way* cooler. That’s really *me*? That’s really *my brain*?”

I looked at the black, gray and white images on his computer monitor.

The neurologist smiled at Conner. “Yes, it is. This is your brain. Here are your smelling nerves, your eyes and ears.” His index finger showed us where Conner’s balancing center was and the muscles that made his eyeballs move. Then he explained how thinking, speaking, comprehending, remembering, moving, seeing, touching and feeling happened in specific parts of the brain as he indicated them.

He indicated the cerebrospinal fluid that surrounded the brain and filled the chambered ventricles. “Dr. Choy obtained some of this fluid from your lower back when he took care of you in the emergency room, Conner. It was a very important part of your examination, and it was entirely normal.”

Conner reached behind and touched his lower back. His eyes widened and his mouth opened as he turned toward me. “That’s why I had that Band-Aid on my back when I came home from the hospital, right Mom?”

I nodded and touched my son’s shoulder. He turned back to the doctor.

Sam leaned closer to the screen.

The neurologist sat back and propped his elbows on the armrests. He steeped his fingers under his chin. “Everything in

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your brain looks normal, Conner. Now, let's find out how it's working."

Conner stiffened. "You're not going to give me any shots, are you?" I saw his glare at a small red ball that was on the tip of a long, thin pin protruding from the lapel of the doctor's white coat.

I touched Conner's neck. I wondered what the neurologist did with that long pin in his lapel. I counted three pens and a small flashlight in his left breast pocket. A thin handle with a pointed end protruded from the side pocket of his white coat. I glanced over the framed diplomas and certificates on the walls. I got a sense that they were staring down at my son, and modern medical science and all of its mystery were about to scrutinize him. My hands were cold.

"Conner, right now I'm going to ask you some questions about how you're feeling. Then we will all go into the exam room, and I'll check you out there. Your parents can come too; there won't be any shots or blood tests." He smiled at Sam and me.

I appreciated how Dr. O'Rourke reassured our boy. Still, Conner anxiously snapped his head around to look at his father. Sam nodded back. Then he glanced down at the spot where his IV had been. The bruise on his arm was mostly faded and had turned a pale bluish-yellow. He rubbed his arm and looked at Dr. O'Rourke.

Sam glanced over at me. We were poised to say something or to touch our son to reassure him. However, there he was, listening and seeming to understand everything the doctor said.

"Now, do you remember the night that the seizure happened?" The doctor looked down at the papers on his desk. "When was that, about a week and a half ago?"

I nodded. "Uh-huh."

Conner tilted his head and frowned. "I didn't feel good."

The doctor looked at me. “Mom, can you tell me what happened?”

I described that evening: Conner sneezing and coughing in his sleep, his high temperature, hearing the strange noises coming from his bedroom, finding him jerking all over the bed, the wet sheet and blanket, all that blood in his mouth...

“My tongue got bit. It still hurts!” Conner blurted. He opened his mouth. “Thee?” He lisped as he protruded his tongue

We all looked at the almost-healed blue laceration.

I heaved a sigh to slow my breathing. I put my cold fingers under my thighs to warm my hands. “Then there was that rush to the hospital and Dr. Choy.”

Dr. O’Rourke glanced again at the hospital notes in front of him on his desk. The neurologist smiled and drew a deep breath.

Before he could continue I sat forward and interjected, “Doctor, I, uh, *we* were hoping”—I flashed a glance at Sam’s querulous face—“uh, we were hoping to stop the Dilantin as soon as possible. Do you think that we can?”

“We’ll see, Mrs. Golden. Dr. Choy did a thorough job screening Conner for causes of that seizure. I see that he put Conner on Dilantin. That medication *may not* be necessary. Your boy is a bit old for his convulsion to be secondary to just a fever, though. Let me find out a bit more. I need more information.”

I beamed at Sam and squeezed his hand. *Yes!* He was confirming what I had learned from the Internet. The neurologist just said what I had been praying for. I leaned back in my chair.

But, he said that he would investigate further. That was when I pictured a detective with a baying hound that scurried right and left over the ground smelling out prey. So there it was

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again. Something wasn't right for these doctors. Dr. Choy had said something like that about the convulsion and Conner's older age, too. What wasn't Dr. O'Rourke telling us? I got the feeling that he was taking care not to terrify my already-shaken family. I don't exactly know why—I felt some ominous undertone.

Dr. O'Rourke asked, "Has Conner ever passed out or fainted in the past?"

"No. But, you know, I wanted to ask you: Sam's brother had something similar when he was an infant. He had a fever then, too. That was the only time it happened though. Right, Sam?" Sam nodded. "I've heard that seizures can run in families. Is that true? God, I hope not..." My voice trailed off.

"They can."

I clasped my hands and leaned forward. Then I sat on my fingers again.

Dr. O'Rourke turned and addressed his patient. "Conner, have you ever blanked out when you're thinking about something?"

"Uh, like...what?"

I looked at Conner. Sam did, too. Why did Conner say that? I got this uneasy feeling that Conner somehow understood what the doctor was hinting at. Sam's mouth dropped open. He looked at me; his eyes narrowed.

The neurologist cleared his throat and leaned forward over his desk. "I mean, let's say that you're thinking about something, or watching a movie or a TV program, or someone is talking to you. Does it ever seem as though you suddenly missed what was happening? Like your mind went blank all of a sudden. I don't mean daydreaming; everybody does that. When you daydream, your mind is still thinking of something—like you zone out—but you know it. Let's say

something is important to you and you are really paying attention.”

Dr. O’Rourke stole a quick glance at Sam and me. Then he looked back at Conner and continued, “And then, all of a sudden, the scene in the movie or on the TV screen has changed, and—” He clapped his hands once. “Suddenly you don’t know what happened, even though you were following the story really closely. Has that ever happened to you?”

Conner leaned forward in his chair and dug his fingers hard into the edge of the doctor’s desk. I saw white at their tips. “Well, um, sometimes I get these, uh...you know, I get this funny, this *ding* feeling. I don’t know, I—I—and then something else has happened and I don’t know what.”

What? Sam and I looked at each other. My jaw dropped. My body tightened and my voice was loud. “What do you *mean*, Conner? What *ding* feeling? What are you *saying*? When does this happen?”

He turned toward me. “A lot. When it happens at school Mrs. Dorsey gets mad at me.”

“Mrs. Dorsey gets *mad* at you? What do you mean? Why? What happens?” I grabbed his arm.

I looked at Dr. O’Rourke. He sucked in his cheeks and his lips pursed as he slowly nodded his head one time. His eyes moved down to my hand that gripped Conner’s arm. Otherwise, he maintained a placid expression as he watched us.

“She asks me if I...um...if, uh...I need more time to do my tests. Like that spelling test. She said I needed more time...um...to finish.”

“Did you finish? Did you need more time? Which was it?”

“I—I don’t know. I don’t know!” Conner’s chin quivered.

Dr. O’Rourke picked up his pencil and held it poised over his notepad. “What you’re telling us is very helpful, Conner.”

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I released Conner's arm and leaned back in my chair. As my legs straightened, my shoes kicked the bottom of the neurologist's desk. What was he saying? None of this made sense.

Dr. O'Rourke licked his lower lip. "How often does this happen, Conner? This ding?"

Conner shrugged. "I dunno...I dunno. I don't!"

"Well, what would you say? Does it happen every day? Does it happen every few days, or every few weeks or months?"

"I dunno. A couple of times, I guess."

"Did it happen today?"

"No." Conner sniffled.

"Did it happen yesterday, Conner?"

"No."

"Does it happen a lot?"

"It doesn't happen every day...I think." He shuddered and hiccupped back a sob. He looked at me. Tears started to roll down his cheeks. His chin trembled. When I leaned over to wrap my arm around his shoulders he sobbed louder. "I'm scared. I'm scared, Mom!" He wiped his cheek with his sleeve.

I stared out and couldn't move for a moment. I was in slow motion. Everything was in slow motion. I took some tissues out of my pocket and began to wipe his tears. My ice-cold hand shook. "Don't be scared, honey. You're doing fine."

My gaze darted between Conner and the doctor. Sam stared at our son; his cheek muscles rippled.

"Yes, you *are* doing just fine, Conner. This is very good, very helpful." Dr. O'Rourke kept his gaze fixed on his patient. "Now, do you ever imagine that you smell something that's not really there, that nobody else can smell? Do you ever get a taste that just came into your mouth without eating anything?"

Conner gave a tiny nod.

“Is it a smell or a taste, Conner?”

“I think I smell something...um, uh...but I don't know what it is.”

“Well, is it like something bad, Conner? Like, burning rubber? Something like that?”

“Yeah!” Conner's face brightened. He nodded vigorously. “That's it! That's what it is. It smells like the things Daddy burns in the yard at work.” Animated now, he scrunched up his nose and his body rocked back and forth as he nodded. “It's gross,” he added.

I couldn't believe what I was hearing. I looked at Sam. What was Conner talking about? Why had he hidden this?

The neurologist continued, “And then what happens, Conner?”

“I don't know!” Conner wiped his nose on the cuff of his shirtsleeve.

Dr. O'Rourke turned to me. “Have you ever witnessed one of his ding spells? Have you talked with his teacher about them?”

“I don't even know what Conner is talking about. I've never seen anything like that!” I looked at Sam. “Have you? He's never said anything about them to me.”

“No. I've been away so long. I served in the Army in Iraq this past year, Doctor. I just got back two months ago.”

Dr. O'Rourke held his gaze on Sam. “I see.”

“The school had him evaluated by a school psychologist because he wasn't completing his class assignments,” I volunteered. “Everybody thought his problem was stress from, you know, because his father was deployed in Iraq. I arranged for him to be treated by a psychologist, Dr. Frank Thomas. Conner has already seen him a few times.”

Conner lowered his head and curled his fingers in his lap.

“I know him.” The neurologist nodded.

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“Could these spells be causing him to fall behind in school? You know, it turned out that his teacher from last year thought he could do better work than, too. They had no idea why he was not. And now, you’re saying that these things...these things could have...could have been going on for a whole year, Doctor?” I turned to Conner. My eyes narrowed and my voice got louder. “Conner, these have been happening for a year? Or more? Why didn’t you say something, honey? Why didn’t you tell us?”

“Sandra.” Sam reached for my hand. I snatched it away.

I pressed my lips together and shook my head. “I don’t believe this!”

“Conner, when did these dings start?” The doctor asked. His voice was gentle and even. I looked at my lap and tried to organize my thoughts. Dr. O’Rourke continued, “Do you remember when you had the first ding, your first one?”

“I—I don’t know.”

“Well, did they start a month ago? A few months ago? Before Christmas? Did they start last year, when you were still in second grade? Or, even before that? When do you think?” He smiled at our son. “Take your time. You’re doing very well, Conner.”

“Last year...um...I think, when I was in second grade. Yeah...ahh...second grade. I think...”

“And what do you mean by what you call ‘dings,’ Conner?”

“They’re dings because...uh, uh...I guess, because they feel like, uh...like little dings. You know...I don’t know.”

The doctor nodded and regarded him for several seconds. “What does a ding feel like?”

“Um...I get this funny thing...I think it’s down here.” Conner looked down and touched his shirt right over his bellybutton. “Then I get scared...but I don’t know why because

there's nothing around to make me scared. You know. Then I smell that bad thing. And then...I don't know! I don't know!" He sniffed and wiped his nose with his sleeve.

Dr. O'Rourke directed a quick gaze at us and then back at Conner. "How long do the dings last, Conner?"

"I don't know!" He started to sob again. I flashed a weak smile at the doctor as I wiped my son's cheeks and put the tissue into his hand.

"Have you ever fallen down when a ding happens? Do they ever happen when you're standing up?"

He sniffed. "No...um...but, yeah, sometimes I fall when I'm running or playing a game."

Dr. O'Rourke smiled at him. "Do you think you fall because you're having a ding?"

"No." He snorted and wiped his nose with the tissue. "I'm just playing and...uh...I trip on something or somebody tackles me. But, sometimes I drop things...you know...when I have a...um...a ding."

"Oh, Conner. Why didn't you ever tell me you were having these things?" I tried to smother the panicked tone in my voice as I brushed a lock of hair out of his eyes. "Honey, have you had these dings at home? Have I ever been with you when they happen?" I turned back to the neurologist, "I can't recall seeing *anything* like what he's describing, Doctor."

"I don't know when they happen, Mommy." He sniffed again and rubbed his nose with his sleeve. "I don't."

The office was quiet now except for his sobs. It shimmered with the vibrations of our fear and pain—a pain that pierced and gripped me completely—an agony that I would carry and remember for the rest of my life. Whatever happened to my son would change—no, it had already irrevocably changed—our lives. Just weeks ago we were having the happiest of days: Sam came home from Iraq; we pulled into our driveway with him;

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neighbors welcomed him home; he put on his old clothes; the gifts he gave us; that wonderful first dinner with candles...

“Has Conner had any problems with bed-wetting?” Dr. O’Rourke asked me.

“Hm? Oh, ah...bed-wetting?” I looked at Conner. This was not the time to shelter him—not here in this office. “There’ve been a few times, and he’s had a few accidents in his pants during the day. On laundry days—a few times I’ve found yellow stains on his underpants. They smelled like he had wet them.”

Conner moaned, “Mo-om!” and looked up at me, his eyes pleading.

I placed my palm on the top of his head. “Honey, I’m so sorry. I don’t mean to embarrass you, but this is important. The doctor has to know.”

“Conner, do you lose your urine—your pee—during these spells?” The doctor asked softly.

“We-ell...” Conner looked at me.

I nodded. “You can answer the doctor, Conner.”

He said, “Um...yeah.”

“Do you know that you’re going in your pants and you can’t stop it? Or is it that all of a sudden you’re wet and you didn’t know that you were going?”

“I-I d-don’t know that I-I’ve done it until I-I’ve d-done it,” Conner stammered through his sobs.

“Have you ever pooped in your pants?” Dr. O’Rourke’s voice was so low that I could barely make out what he said.

Conner gulped down a sob.

The neurologist cast a quick glance from Conner to us. “Has he had any bowel movements in his pants?”

“No, thank God.” I shook my head.

“Has Conner ever bitten his tongue or lip when he’s sleeping? Have you ever found blood on his pillow, Mrs. Golden?”

“Only on the night of his seizure, Doctor. I’ve never seen blood any other time.”

“So it seems that he hasn’t had any other convulsions in his sleep that you and Mr. Golden had not witnessed.”

I shook my head and looked at Sam.

Dr. O’Rourke smiled at his patient and asked, “Conner, have you ever noticed any weakness in your arms or legs when you have a ding? It can be before the ding or after it, or at any other time.”

“No.” Conner shuddered.

“Good. What about tingling feelings? Have you ever had any tingling—you know, like the pins-and-needles you get if you hit your funny bone in your elbow—anyplace in your body when you have a ding?”

“Uh...no. I don’t think so.”

I wanted to know more, as I listened to their exchange. Yet, I feared more bad news.

“Conner, have you had any headaches or double-vision? You know, like seeing two things instead of one thing. And, do you ever have any trouble seeing out of one eye? Or numbness, like funny feelings that stay there on your face?”

“My face itches, sometimes.” Conner scratched his cheek.

“Well, yes. That’s normal. What about any funny or tingly feelings on your face when you get your dings?”

“No.”

“What about swallowing or hearing problems? Do you ever hear strange noises or voices when there’s no one talking and no one else around during your dings?”

“No.” Conner shook his head.

“Which hand do you write with, Conner?”

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“Um, my right hand.” The boy held up his left hand, looked at it and quickly replaced it with his right. He turned toward me and gave me a tentative smile. He asked abashedly, “Is this my right hand, Mom?”

“That’s good,” Dr. O’Rourke said with a wide grin. He looked at me. “He is right-handed, correct?”

“Yes. He seems to write and draw with his right hand, Doctor.”

I looked at Sam. So, he finally spoke up.

“Since he writes with his right hand, the middle section of the left side of Conner’s brain is where his language center resides. In other words, it’s his dominant side. That suggests that there’s no serious structural problem in that part of Conner’s brain, especially since he had a normal CT scan. You see, the left side of the brain is dominant for most people. If you or your son reported that he had speaking or comprehension problems—that is, difficulties understanding speech—it could be a clue that his seizures came from that left-sided language area. However, he will need an MRI—a Magnetic Resonance Imaging scan, with—”

“What’s that? No! Will there be needles?” Conner leapt to his feet. Sam and I immediately reached up and touched his shoulders.

“Sit down, son.” Sam tilted his head in the direction of the boy’s seat.

Conner dropped hard onto his chair. He elevated his shoulders, opened his mouth and squinted at the neurologist. His voice quivered, “Will there be needles? Will there?”

“The MRI scan is just like the CT scan you had at the hospital. But, this time you’ll be in a tunnel.” The neurologist moved his gaze from Conner to Sam and then to me.

“Conner wasn’t awake when he had the CT scan, Dr. O’Rourke. He was still asleep after the seizure.”

“Oh. Okay. I see.” He nodded and turned back to his patient. “Well, Conner, there shouldn’t be any needles, but I can’t promise. That will be up to the radiologist. That’s the doctor who does the MRI. The radiologist will be evaluating the images as the scan is being done. If the doctor believes that more information is required, then an intravenous line may be started to inject a special dye, but—”

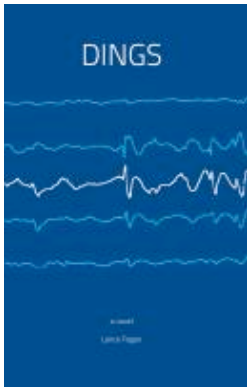
Conner pouted and crossed his arms over his chest. His swollen, red eyes welled up again.

“No. Wait, Conner! That won’t be done unless it’s absolutely necessary.” Dr. O’Rourke reached across the desk and touched our child’s hand. “The MRI shows the brain structures a little differently from the CT scan. It can give us additional, more detailed information. We—the doctors—need to be certain to rule out any problems.

“Look, Conner. We are going to become a team. From now on, we are going to be working—like playing—together, for a long time. I am going to be your coach. You are the star player. I will give you your rules and your plays. Your mom and dad will be like our team trainers. I’ll tell you what the team will do.”

I liked that metaphor. It should capture Conner’s cooperation. Brilliant. I smiled at my son and touched his back.

Dr. O’Rourke watched us momentarily, then continued, “I know this can all be confusing, but usually we don’t find any cause of epilepsy.”



DINGS tells a family's dramatic clinical and emotional journey as they try to understand why their third-grader is failing school. They assume that his problems stem from anxiety and stress because Dad is serving in the U.S. military in 2006-7 Iraq. The child's blank outs are finally identified by a neurologist's evaluation: it's epilepsy! The parents are devastated. Will Conner ever be able to live a normal life?

DINGS

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