

Medical thriller about an ER doctor battling with insanity.

Heartbeat

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Samuel Finn

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Chapter One

A face, almost a century old, asleep, or is it dead? No, not dead. Pale, translucent skin slack over bone, purple threads of veins, fine creases spreading from the hollows of its eyes and toothless mouth. Zach, look at it, imagine yourself so old, so many years of life.

The eyes pop open, startling me. The creases distort into a smile. “Where am I?” she rasps.

“Where are you? Well, this is the emergency room. Are you, um—” I glance down at the chart for a name, “Frieda Goldberg?”

The smile persists, her eyes cling to mine. Finally, “What did you say?”

Louder this time, “Are you Mrs. Goldberg?”

“Yes.” Her voice wavers. “Who are you?”

“I’m Dr. Mendel. You’re in the emergency room.”

“I am?”

“An ambulance brought you here from the—” I fumble again with the chart, from some nursing home. “—from Covenant Manor. Is that where you live?”

She stares vacantly. “What time is it?”

“It’s about nine o’clock.”

“Oh, in the morning?”

“No, it’s evening,” I shout in her ear.

She nods again, apparently unsurprised.

“Have you been sick?”

“Oh, yes.”

“What’s been bothering you?” Again she stares, another stumper. The transfer form mentions cough and fever, loss of appetite, and lethargy.

I examine her quickly, gently. She smells of urine. Her ribs raise stony ridges across her thin chest. My stethoscope brings me the distant whir of calcified valves. She rapidly sinks back to sleep.

This face, Zach, this old woman’s wilted face, so old, imagine so many years of life. And being so close to death.

Zach, I keep thinking of you. Why do you keep coming to mind? I talk to you now, in my head, like you’re here. I used to do that, didn’t I? Back when we were kids, or when I was a kid and you were dead. I talked to you in my head then, too.

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“Leon,” a nurse approaches. “The kid in Bed 14, the one with the forearm fracture. The parents are getting upset because it's taking so long.”

“Haven't the ortho residents come down yet?”

“They're still in surgery with that femur fracture. And the kid's in a lot of pain.”

“I told Patterson to order some Demerol for him.”

“The kid wouldn't let me give it.”

“He refused it?”

She nods. “Scared of needles.”

“The kid's hurt but he won't let us give him a shot cause he's afraid of needles. Okay, give the syringe to Patterson and tell him to go talk to them and give the kid his shot. It's his patient.”

She nods, moving away.

“Wait, Susanne, the lady on the backboard in trauma C, how does she look?”

“Good. She's stable. Sore back and neck. She's a walker for sure.”

“Okay, then move her to another room and get her neck X-rayed. Keep those trauma beds clear. What's happening in trauma A?”

“The surgery team, Beauregard and his intern, are with that kid who got shot. They're putting in a chest tube.”

“Okay, then they're off to the operating room. Where's Icky?”

“He's sewing up a little girl's face in Bed 11. There's a new intern here.”

At the nurses station a chubby young woman in a clean white coat smiles politely. She has a round face with wide hazel eyes that give away nothing.

“I'm Lydia Neuman.” She holds out a dry, firm hand. “I'm a family practice R-1.”

“Leon Mendel. Glad to have you with us. Is this your first month in the E.D.?”

“In the what?” She has freckles. Freckles on a doctor?

“In the emergency department?”

She nods. “Well, it is July, so this is my first month on any rotation here.”

“Yes, I guess that's true. Silly question, wasn't it? So, are you scared?”

She smiles again, meeting my eye. “Should I be? The patients should probably be scared of me.”

A sense of humor, good, we need that around here. And freckles. Have you come to terms with your freckles?, I want to say.

“Okay, here's the two-minute rap, and then I'll get one of the residents to show you around. We are a level one trauma center, one of two in Cincinnati, the other one being University Hospital across town, so anything and everything is brought here. And not just trauma. We get all the bums and the homeless off

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the streets when they get sick, all the people on welfare who can't find any other doctors to take care of them, all the schizophrenics and psychotics who wander the boulevards of our fair city. We have 25 beds and a 10-bed holding area over there."

I wave a hand, pointing over the counter-tops of the nurses station at the cavernous room surrounding us, partitioned and curtained, harshly lit. Nurses in green scrubs move about.

"There are usually two attendings here. Tonight it's myself and Icarus Polyzarin. We're both board certified in the specialty of Emergency—"

The radio on the counter sounds its long tone, then, "Medic 7 to Municipal Emergency."

I pick up the receiver. "This is Municipal. Go ahead, Medic 7."

"We are proceeding Code 2 to your facility with a seventeen-year-old female who ingested an unknown amount of Sinequan and Tylenol pills belonging to her mother. She also has been drinking alcohol. She is delirious and combative, requiring restraints. Vital signs are stable at this point. We have started an IV and the patient is in sinus rhythm." Shrieks are audible behind his voice. "We will be at your facility in approximately 12 minutes. Over."

"Okay Medic 7. We will be expecting you. Good luck. Municipal Emergency clear."

I turn to the white Patient Control Board on the wall and find a magnetized tag that says MEDIC from the rows of square tags at the bottom. I move it to the space marked Bed 10, a single bed room where her howls won't disturb the whole department.

"Overdoses are always such fun. Okay, where was I?"

"She must be hurting very badly to want to kill herself," Lydia says.

"You're right," I say. "We tend to get cynical here, and I am as guilty of it as anyone. It's just that with a lot of these teenage girls it's a gesture. Their boyfriend looks cross-eyed at them, or doesn't ask them to the dance, so they go home and take Mommy's pills and then we have to knock ourselves out to save them or at least to make sure they're not going to get real sick, and then they go back home giggling and carrying on like nothing ever happened. Okay, so..."

"You were saying something about you and the other attending."

"Oh, yeah, Icky and I are both faculty of the Emergency Medicine Residency Program. So there are Emergency Medicine residents down here all the time, too. As you know, the whole hospital depends on you residents to function, and the E.D. is no exception."

Her hazel eyes watch mine. She is pale beneath the freckles. These poor kids, no summer vacation, straight from medical school to internship, the frying

pan into the fire. She probably graduated two weeks ago, laughing with her friends in their caps and gowns on a lawn somewhere—

“Dr. Mendel?” she says.

I realize I've stopped talking. “Oh, I'm sorry. I was thinking of something else.” I feel my face redden. “So half the residents down here each month are from the Emergency Medicine program and the others are from other services like yourself. You should try to see—”

“We are the shock troops, the marines of modern medicine.” Icarus swaggers into the nurses station. “From the halls of the Mayo Clinic to the shores of the welfare state.”

“Icarus, this is our new Family Practice intern, Lydia Neuman.”

“Glad to have you aboard, my dear. Watch out for young Mendel there. Behind that dark Slavic countenance lurks a lecher beyond belief. And take careful note of the recent absence of a wedding ring on his left hand. Thirty-three years old and already one marriage to the wind.”

“This is Icarus Polyzarín,” I tell her, “a Greek name, so you don't need to ask. He's six feet four inches tall, so don't ask that either, and yes, he is balding above that rat's nest of hair, so don't mention that either, and yes, if he were any skinnier we would test him for AIDS, but he's been monotonously monogamous since kindergarten. So what are you having your troops call you these days, Commander Polyzarín?” I ask.

“Icarus will be fine,” he smiles down at her.

“Not Icky,” I say, “anything but Icky.”

“Please, Leon, one cannot help one's name, or one's height, or one's hair pattern. Do I tease you about your dubious intellect or your diminutive stature?”

“My stature's hardly—”

“Dr. Mendel!” Ruby, the secretary, shouts at me, pointing. “Trauma A, stat!”

“LEON!” Across the department I see Matt Beauregard's head around the curtain. “C'MERE!” He waves a frenzied hand.

“Something's up. C'mon,” I say to Lydia.

Nurses are moving that way.

“CODE BLUE, EMERGENCY DEPARTMENT,” the hospital P.A. sounds, “CODE BLUE, EMERGENCY DEPARTMENT.”

Beauregard called a Code Blue. That's a cardiac code. Jesus, what's he doing? The kid's been shot in the stomach. He was awake and talking a few minutes ago.

Around the curtain the boy's muscular body lies limp. His skin has the grayish cast of black skin with no blood flowing through it. Someone has started CPR. A clear plastic chest tube protrudes from his right chest. Each chest

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compression pumps a thick stream of bright blood into a growing puddle on the floor.

“What the hell’s going on, Matt?” I grab a hemostat from the open instrument tray and ratchet it tight on the tube, stopping the red river.

“He has a pneumo and Finkel was putting in a chest tube,” Beaugard's face is pale above the paper mask covering his mouth. “Look, there's the X-ray. There's no blood in his chest. Where's it coming from?”

A chest X-ray glows on the wall viewbox. A moment's study reveals the error. Someone hands me a pair of gloves.

“You gonna intubate this guy, Leon?” the respiratory therapist asks urgently. He's breathing for the boy with an Ambu bag and mask.

“Shit, Matt, look at that film!” I step to the head of the bed.

“He's in v-fib, Leon,” a nurse says.

“Course he's in v-fib. He's got a chest tube in his heart.”

“What about it?” Beaugard yells, staring at the X-ray. He is tall, sandy-haired, but his usual self-confidence is shaken.

“C'mon, Matt. What's the matter with that film?” I lean down with the laryngoscope in hand and slide its curved metal blade into the boy's mouth. His body quakes with the rhythm of the chest compressions. Lifting the instrument opens his mouth, raises the limp tongue clear of his throat. The tiny light shows his vocal cords and the dark slit between them that is the opening of the trachea. The R.T. hands me a plastic endotracheal tube, which I slide into the slit. Now we can breath for him. The R.T. hooks the bag to the tube and begins pumping oxygen directly into the boy's lungs.

“Did you figure it out, Matt?” I straighten up, eyeing Beaugard and his intern. Matt is a big rock-jawed football type, Finkel gangling and awkward. I'll give him five seconds more.

The Internal Medicine team arrives from upstairs, Todd Pinehurst, an insipid senior resident, and his intern. They are supposed to run cardiac codes.

“What's happening, Leon?” Pinehurst says, breathing hard. His pudgy face is pale.

“This one's a Trauma Code, Todd. I don't know who called the Code Blue.”

“Internal Medicine responds to Trauma Codes, too.”

“Fine, but you don't run them.”

“He's in v-fib, Leon!”

“Good, Todd, I'm pleased you can read the monitor. How 'bout it, Matt?”

“The film's reversed,” Beaugard says. “Somebody put it up backwards cause the heart's pushed over.”

“Right, now what are you going to do about it?”

“Aren't you going to shock him, Leon?” Pinehurst says.

“Cool it, Todd. Beaugard's running this one.”

“Jesus Christ.” Beaugard stands shaking his head. “I can't believe—”

“C'mon, senior surgery resident,” I say. “You screwed up. That happens. Now what are you going to do to fix it? You're a smart boy.”

“Leon,” Pinehurst persists, “why don't you guys work out your troubles later. This kid needs to be shocked.”

“Pinehurst, shut the fuck up. This is a Trauma Code and you can either watch quietly and learn something or go back upstairs.”

“Okay, okay,” Beaugard says, moving now. “We gotta crack his chest. Tell surgery we need the cardiac room now, pump team, the whole crew. Call Mandrill, the chief, and tell him we need him down here stat. Tell the lab we need two units of O-negative blood right now and six more typed and crossed stat.”

Two nurses move away. Another opens the sterile-wrapped thoracotomy tray. I slather the boy's smooth chest with brown Betadine solution. A nurse slides a rubber nasogastric tube down the back of his throat into his stomach.

Beaugard moves to the boy's left side. With a large scalpel his gloved hands make a long curved incision parallel to the ribs. The skin opens like a smile, fat and muscle gleam beneath. He incises again, deeper between the ribs. A whoosh of air relieves the pressure built up inside.

“How did you get the chest tube into his heart?” I ask him, handing the rib spreader to Finkel.

Beaugard shakes his head, breathing hard behind his mask. “Shit, Leon, you don't want to know.” His fingers move rapidly.

I glance across the bed. A chest tube trocar, like a short bloodied spear, lies on the instrument tray.

“You used a trocar?”

Beaugard nods. He holds the rib spreader while Finkel turns its short crank. Like the metal fingers of a pair of hands, the instrument pulls the ribs apart. Cartilage pops and gives way.

“Why the hell'd you use a trocar?”

“C'mon, Leon, not now,” he says angrily. Sweat beads his forehead.

Blood spills onto the bed and the floor. With the pressure of the pneumothorax relieved, the boy's heart moves back to its normal position, deep in the hole Beaugard has made. In fibrillation its muscle crawls like a sack of tiny worms, and it pumps no blood. His fingers close around it and the tube skewering it. He slides the chest tube out of the heart and stoppers the hole with a finger. Now his hands begin to squeeze, pumping for the wounded organ.

“Open up the fluids wide.” Self-assurance has returned to his voice. The nurses open the valves on the IVs. Warm saline pours into the boy's veins.

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He looks at me.

“Incise the pericardium, in case there’s any tamponade.”

With his free hand he reaches for a smaller scalpel.

“Vertical incision, watch out for the phrenic nerve.”

He slices through the tough layer of tissue that covers the heart. Jelly-like blood clots spill out.

“Now take the Foley and put it in the hole.”

He nods. Finkel passes a thick rubber catheter to Matt’s hands inside the boy’s chest. His blue-gowned arms are dark red to the elbows. He threads the catheter tip into the hole.

“Don’t let any air in. You’ll get an embolus.” I want to reach into the boy’s warm body myself, save this life with my own hands.

There is a man staring from the glass partition, staring across the room at me. He has a mustache, tangled dark hair, and wire-rim glasses. A haggard face, tired eyes holding my gaze with a concerned expression, a stranger who looks like he needs to tell me something, bad news perhaps. Who is that, Zach, do we know him?

“Okay, Finkel, fill the balloon,” Beaugard says.

The intern squirts a syringe full of saline into the valve on the catheter, filling the small balloon inside the heart. His hands shake terribly. He looks close to tears. His hands made the hole in that heart, his hands pushed the trocar into this kid’s chest, Beaugard directing him, teaching him.

I look again at the man’s face behind the glass and it looks back. My own reflection I realize, from the odd angle of the overhead light.

“Now, let it fill with blood,” I say, “and then clamp it right where it comes out with a little tension.”

“I know, Leon, I know,” Beaugard says. Good, he’s back to his old self.

The face in the glass shakes its head at my foolishness. Is it me, Zach, or is it you watching me? That could be you. We were twins, identical twins, the same genes. We would still look alike. The image of that black station wagon comes to me, the Cadillac hearse they took you away in, with the sharp tail fins and the chrome curlicue on the side.

“Okay, internal paddles,” Beaugard says, “charge to five joules.”

A nurse hands him the defibrillator paddles, small black spatulas with cables leading to the squat machine on the crash cart. He slides one behind the heart and one in front. A shrill tone sounds from the machine.

“Clear,” he says. Everyone around the gurney steps back. The machine clicks and the boy’s body shivers.

I watch the fist-sized lump of muscle begin its gentle motion again, its millions of fibers shocked into synchrony.

A firm hand on my shoulder belongs to Mike Mandrill, the chief surgery resident. “What’s happening, Leon? This kid get a bullet in the chest?”

“He got a bullet in the belly.”

“Looks like it went up into his chest.” His face has creases from a pillow, his hair needs combing.

“He got a chest tube trocar in his chest.”

“What? What the hell are you talking about?”

“Look at that X-ray.” I point to the film on the wall.

“What about it?” Mandrill says, irritated.

“Read it.”

Finkel speaks, “That X-ray got—”

“Shut up, Finkel.” He eyes me, aghast. I’m trying to save his butt.

“He’s got a pulse,” a nurse says.

“You better sedate him, Matt,” I say. “He might wake up.”

I turn back to Mandrill. “What do you see, Mike?”

Lydia watches me. Am I showing off? No, I’m trying to save Beauregard and Finkel.

“He’s got a big right pneumothorax,” Mandrill says.

“Which side?”

“Right. So what, Leon?”

“That’s how Beauregard and Finkel read it, too.”

“Operating room’s ready,” someone announces.

“Let’s go,” Beauregard says. He looks at me gratefully.

They gather the IV fluid bags and a portable heart monitor. With a clunk the wheels of the gurney are unlocked and they move off toward surgery.

“Good luck in the O.R., you guys.” Beauregard will have some explaining to do when their attending arrives. I take off my gloves and start to move away.

“How could you let this happen, Leon?” Mandrill has figured out the X-ray.

“I wasn’t in the room. I figured your boys could figure out which side to stick a chest tube in.”

He opens and closes his mouth, pale with anger. “You’re responsible for resuscitations down here. You’re supposed—”

“He was resuscitated, Mike,” I feel my own voice rising. “He was stable the whole time, from the moment the medics picked him up. Look, why don’t you go sew up his heart and come on back and we’ll talk about it. Who’s your surgery attending tonight?”

“Graffen. He’s gonna love this.” He walks quickly off to the operating room.

Lydia is still with me. “I don’t understand,” she says. “How did that happen?” We move back to the nurses station.

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“Well, that kid got shot in the belly. Who knows why, probably some drug deal, or they wanted his sneakers or something. So Ted and I evaluated him before the surgery guys arrived. They get called for every gunshot wound anyway. It was obvious he needed surgery. He was stable and had a collapsed lung on the left. The bullet must have gone up through his diaphragm and punctured his left lung. He needed a chest tube but we figured we'd let the surgery team do it. They were here anyway and we've got plenty to do ourselves, as you can see.” I gesture toward the board, which is filling up fast.

“Dr. Mendel,” Ruby says. “The overdose is in Room 10.”

“Okay, would you find Rohit and ask him to go in there.”

She pushes a button on the department intercom and pages, “Dr. Medari to Room 10, please. Dr. Medari to Room 10.”

I turn back to Lydia's freckles. “So the air in the left chest from the pneumothorax had pushed his heart over toward the right. When Beauregard or Finkel put up the chest x-ray on the viewbox they put it up backwards because the heart was on the right side instead of the left. They didn't look at the left-right markers on the film.

“So with the film up backwards they thought he had a pneumo on the right. Of course they could have listened to his breath sounds like they're supposed to, but they were in a hurry and it all seemed pretty straightforward, I guess.

“So they put the chest tube into the right side of his chest instead of the left where the pneumothorax was. But then they did the thing I can't understand. They used a damn trocar to put in the tube. Those haven't been used for years in trauma cases. You're supposed to make an incision through the chest wall and stick your finger in first to make sure you're in the right place and there's nothing in the way. But I guess they jammed it in with the trocar and sure enough with the heart pushed over to that side the trocar pierced the heart.

“Bad move. Very bad move, in fact. I'm gonna be hearing about this one for a long time. And you can bet Beauregard and Finkel are gonna get roasted for it.”

“Leon,” Ted Watanabe joins us, resting his broad behind in a chair. “Can you believe that? They stuck a trocar into that kid's heart.” Two charts on metal clipboards dangle from his hand.

“That kid, Dr. Watanabe, was our patient, too. You and I had initial responsibility for treating him.”

“But they were right there, Leon. We hardly said boo to the guy.”

“Wrong. Would you tell the court who initially examined the patient, Dr. Watanabe?”

His Japanese eyes narrow, his smile vanishes. The residents hate this game.

“I did.”

“And what did you find to be the patient's injuries?”

“He had a gunshot wound to the abdomen and a left pneumothorax.”

“And did you then obtain surgical consultation, Dr. Watanabe?”

“Yes, immediately, the surgeons were there within five minutes of the patient's arrival.”

Beyond a countertop I see a respiratory therapist scurry across the department and disappear behind a curtain.

“What's going on in Bed 3, Ruby?” I ask the secretary.

“Dr. P gotta guy havin' a heart attack, sounds like.” The department intercom speaker is on in front of her. I can hear Icky's voice talking rapidly, a patient coughing in the background.

“Has he got a resident with him?”

“Sounds like Dr. Patterson be in there.”

I turn back to Ted. “And did you inform the surgeons of your findings?”

“C'mon, Leon.”

“C'mon yourself, Ted. There's lawyers that would sell their children to get hold of a case like this. Chances are the kid's family, if he has one, will never get it together to talk to a lawyer. He'll probably be okay and they'll never understand all this. But if they did, my friend, you and I would fry along with the surgeons.”

“But we didn't—”

“Stop, Theodore. We've got patients to see. Dictate a thorough note on exactly what you did, step by step. State that I was your attending on the case and was present in the room. State exactly at what point the surgeons took over and exactly what you said to them. Do you recall if you told them which side that pneumo was on?”

“I did. I know I did.”

“Did you tell Finkel or Beauregard?”

“Finkel. Beauregard was on the phone calling for an operating room.”

“Okay, do the note, tell transcription we need it now, and then let me see it.”

He stands, tapping a chart in his hand. “Okay, I've got this asthmatic girl I'm ordering some Albuterol for. She's in Bed 7.”

I glance at the bank of heart monitors that makes one wall of the nurses station. The number next to the green tracing for Bed 7 is 138, very fast for an adult, not bad for a child. “How old?”

“She's eight.” He taps the second chart. “And there's a good-looking lady over in 12 says she knows you.”

“Probably wants narcotics. What's the matter with her?”

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“Nothing. Her daughter's got cystic fibrosis, fever, and vomiting.” I take the charts from him. “Okay. Ted, this is Lydia Neuman, our Family Practice R-1 for the month. Lydia, this is Ted Watanabe, a second year Emergency Medicine Resident; a seasoned veteran of the Emergency Department who with diligence and perseverance may someday be an exemplary ER doc.”

“Like you?” Ted says.

“Like me if you're lucky. Anyway, would you give Dr. Neuman the fifty-cent tour, brief her on the board, and introduce her to the charge nurse?”

They start to move away. “Lydia,” I stop her. “Listen, two things are important down here. First is honesty. Don't ever fake it. If you don't know something about your patient, or forgot to do something, then say so. Don't ever pretend or fake it. The whole system breaks down and that's when patients get hurt.”

“Give it a rest, Leon,” Ted says. “She's a big girl.”

“What's the second thing, Leon?” Lydia says.

“Listen to the nurses. They know what they're doing and they'll keep you out of trouble.”

Watanabe shrugs as they walk away, speaking to her, making her laugh.

I glance at the chart for Room 12, a thirteen-year-old girl named Britnie Zeller. The mom knows me? Britnie? Didn't her parents know how to spell? Under mother's name it says Rita Thal. Different last names, not unusual around here, but neither name is familiar.

* * *

These rooms, they're so awful. I forgot what it's like, sitting, waiting, wondering what's gonna happen. God, I could use a cigarette. And you're so helpless, sick people all around, and drunks, always somebody angry, yelling.

That baby across the hall sounds terrible. And there's blood on the floor there in the corner, and the trash can, don't look in the trash can. It makes me shiver.

Or a glass of wine, some wine would be good. Why can't they go ahead and give Britnie a breathing treatment. It's obvious she needs—

“Was he Chinese?” Britnie says.

“Who, that doctor? Well, he wasn't Mexican.” I try to laugh. “I'm sorry, that was silly. I don't know. He didn't speak with an accent. He must have been born here, don't you think?”

“Yeah, but he looked Chinese.” She sits like Camille used to, on the side of the bed, leaning forward to breathe. But she's not so skinny like Camille got, not so pinched.

“Well, obviously,” I say. “I mean I guess he could have been Japanese, or Vietnamese. No, I think Vietnamese look different. Their eyes aren’t so narrow.”

“He’s obviously not Vietnamese, Rita,” she says, the expert all of a sudden.

“Those people are very smart, I’ve read, Chinese and Japanese. Their kids do better in school.” At least they could put her on some oxygen. I could do that, get one of those little tubes out myself and plug it in that little thing on the wall.

“Smart?” Britnie says, “You mean smarter than white kids? That wouldn’t take much, would it? So now what? What are they going to do?” She is tired, impatient. “You said there’s another doctor? Why do they need another doctor?”

I move over and sit by her on the bed. It’s awkward, we don’t know each other still. “Sometimes it takes a long time here, sweetheart. They get so busy and they have to take care of really bad patients first. That doctor was a resident. He’s like a student. I mean I guess he’s a doctor but he’s still learning to be a specialist or something. Now he has to go and talk to the real doctor, Dr. Mendel, I hope. You’ll like him. He’s very kind. He’s even good looking. Some of these doctors are so dorkey looking.”

“Dorkey looking, right. Nobody says dorkey anymore, Rita. Did he take care of Camille?” she watches my face.

There is a shriek somewhere.

“What was that?” she says.

A white coat appears. It’s him.

“Hello, I’m Dr. Mendel. Are you Britnie?”

Will he remember me? He looks busy, preoccupied, that poker face they wear.

“Dr. Mendel,” I say, “I was hoping you’d be here.” Stand, smile, take his hand. His eyes flicker over me the way men do. That’s okay. “I’m Rita Thal. Do you remember me? You helped my other daughter, Camille. About a year ago she kept coming in here—I mean when she started getting sick all the time. She had cystic fibrosis also.” God, what am I saying, in front of Britnie.

“I do remember,” he smiles, “quite clearly, in fact.” His hand draws back. Still the steady calm gaze, those brown eyes behind the wire rims, the way they watch for your feelings. They don’t all do that, but he does.

“Yes, I’m sure,” I say. “You and I went round and round for a while ‘til we reached an understanding. But you were so helpful to us. So patient and kind with Camille.”

He is pale, tired. “Camille. That’s right, Camille was her name.”

And he responded with feeling to Camille, and even for a moment to me. He’s probably forgotten, but he did.

“This is Britnie. Britnie, this is Dr. Mendel.”

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“Hey,” she nods.

“Hi, Britnie,” he says, “it looks like you're not breathing too well today.” Then to me, “I didn't realize you had another child with C.F.”

“I didn't. Britnie is a new addition to my family.” Put an arm around her, hug her. “Isn't that right?”

She nods again, looking at the floor, stiff, not quite leaning away, drawn in. I can't blame her.

Now the poker face again as he realizes what I just said. Does he think I'm crazy? He must.

“Okay, so...” He looks at her chart in his hand. “So you're thirteen years old and you've been coughing and having trouble breathing?”

He checks her over quickly, those hands are so quick, so sure.

Those hands held me once. He held me as we watched Camille die. He helped her die a peaceful death, no tube in her throat, no ventilator. Down the hall someplace, in one of those rooms, in the middle of the night. He had them give her morphine. Just Camille and me, and him, nobody else, and he understood. He let me sit in the room afterward.

And oh, my, no ring now, no ring on his left hand. He used to have a wedding ring. Hmm, think of that.

He talks about breathing treatments, IV fluids, antibiotics. I love his jaw, lean, almost delicate. Britnie sits dumb, letting it fall about her ears. I'll help her with it all, this child I don't know very well.

“Have you gotten involved with the Cystic Fibrosis Clinic over at Children's Hospital?” he says to me.

Don't you remember? “I don't get along very well with the people over there. Camille and I had such bad experiences there.”

The poker face again. He looks thinner than before. He must be working too much. “Right, I remember. But you do get continuity of care there. You get one doctor who really gets to know you, the two of you.”

Which is bull, I want to say. The residents there change all the time. The real docs stay the same but you hardly ever see them.

He pats Britnie's shoulder but avoids her eye. “Well, Britnie, it's nice to meet you. We're going to do some things to make you feel better, okay?”

I follow him into the hall, people moving about. “Dr. Mendel.” Maybe here I can make contact, get past the doctor face.

He turns. Take his hand. “You know, I've thought about you a lot.” How lame. Keep going. “You were so wonderful with Camille.”

His face, there is more than fatigue. He's unhappy. Does he smell the wine on me? They all get so sensitive to it here.

SAMUEL FINN

He says, "You went through...um...you were wonderful with her yourself. It must have been difficult for you." He lets my hand go.

"No, it was the most important event in my life. It taught me the strength of love." The words are out before I realize what I've said.

He nods, watching me. Is he going to laugh? "I've never heard anyone say that before. That's remarkable."

So now what am I supposed to say? Something, ask him—

"So Britnie is not your own daughter?" He says, his eyes still on mine.

"I adopted her."

"Did you know...you must have known she had C.F."

"Of course. I went through the Cystic Fibrosis Foundation to find her. I know what you're thinking. You're thinking I must be nuts to do this again."

"More or less," he says, trying to smile. "Either nuts or you are a truly unique kind of person."

"Prob'ly nuts." Okay, take the plunge. "You have no wedding ring. You used to have one."

"You're right. It's true."

"I'm being too forward, aren't I?"

"No, not really. I do remember you. You've got quite a temper, as I recall." Such a smile he has, I'd forgotten it.

"Yes, well, it's important sometimes. It's the red hair. Redheads are very passionate, you know. Passionate in many ways." Oh, please, did I say that?

"Leon, phone call," someone calls him from the nurses station. Thank God.

"I have to go."

"Will you be back before we leave?"

"I'll be back."

"Dr. Mendel, have you been ill?"

He gazes at me. Was it the wrong thing?

"You could say I've recently been under stress."

"Perhaps I...I'm sorry for you." Almost said it, should have said it, offered.

"I'll be fine," he says, turning away.

Chapter Two

Rita Thal, she's very pretty, I'd forgotten how pretty. Maybe I didn't notice before. That short red hair and those eyes, so perfectly made up. That quick, warm smile. She smells like she's been drinking. I think she smelled that way before, too. Have I been ill, she said. Ill, do I look ill?

And I don't feel ill, but something seems different tonight, here, in the department. Fear, foreboding, like a bus wreck about to happen. Does anyone else feel it?

"Dr. Mendel, the nurse wants an attending in Bed 10," Ruby says to me.

In Bed 10 lies a delirious teenage girl, twisting and moaning. Stephanie, the nurse, and the paramedics who brought her are tying white cloth restraints around her wrists.

Rohit Medari, one of my first year Emergency Medicine residents, tries to help them. He looks scared.

"What's up, Rohit?"

"She has overdosed on Sinequan and Tylenol. She has been drinking, too."

"How long ago?"

A paramedic turns to me. "Boyfriend came over to her house, said he found her this way. Said she called him a couple hours before but he doesn't think she had taken anything then."

"Anyone else there?"

"Nope. Boyfriend said he found these bottles out on the floor when he got there. Says he just told her yesterday he was movin' on, didn't want to see her anymore."

He hands me two plastic pill bottles. The girl squirms on the gurney; her pale pimpled face contorts.

"How about parents?"

"Mom's out for the evening. Nobody knows where, but from the looks of the house she doesn't hang around much."

"How about Dad?"

"What dad?"

What dad, the usual situation. "You guys do a chemstick?"

The paramedic nods. "Blood sugar was 135. Gave Narcan with no response."

I look at Rohit's face. He is East Indian, dark, delicately handsome. "What's Sinequan, Rohit?" I hold up the bottles.

“It is a tricyclic antidepressant.”

“Right. Is it dangerous?”

He nods. “It has strong cardiotoxicity.”

“Good, what do you think we should do?”

He eyes me. “She needs gastric lavage.”

“Sounds good. Anything else?”

“Toxic screen?”

“Well, probably, but that won't come back for hours. Won't help us much now. Looks like we probably know what she took, Sinequan and Tylenol. Does she have a gag reflex?”

“No gag. You think we should intubate her?”

“What do you think?”

He glances about the room. “Yes, I guess so.”

“Damn right. What if she vomits when you pass the lavage tube, and then aspirates? You're only wrong if you don't.”

“Should we paralyze her?”

“Well, you've got two tubes to pass in a delirious, uncooperative patient. Your choice.”

“Okay,” he turns to Stephanie. “Get some Anectine, please.”

She holds up the syringe, the medicine drawn up and ready. She's several steps ahead of him, but he's learning fast.

Injected into her IV line, the Anectine renders the girl flaccid, paralyzed for about ten minutes. I help Rohit find her vocal cords and intubate her. Now the respiratory therapist can breathe for the girl, and her lungs are protected should she vomit.

Then Rohit slides an even thicker tube along the back of her throat into her esophagus and down into her stomach. Now we can pour water into her stomach and let it flow out again, hopefully washing out any remaining pills. It's a miserable procedure with a conscious patient but this girl won't remember it in her current state, and it may save her life.

“Okay, what about the Tylenol she took? Pretty harmless stuff, right?”

“Right. No, wait, not harmless. Liver toxicity. We have to get a level four hours after the time of ingestion, then look at the nomogram for—”

I hold up a hand. “Okay, you pass. Stephanie will help you lavage her. Get labs ordered and watch the monitor. Call me if you need me.”

Stephanie waves me away with the back of her hand. She knows what to do.

I find Frieda Goldberg's chest X-ray. Her right lung shows streaks of white, pneumonia.

“Dr. Mendel, your wife is on the phone,” Ruby calls to me across the nurses station.

HEARTBEAT

“My wife? My former wife? Tell her I've checked out to the Carlton Hotel with two of the nurses.”

Ruby laughs, teeth flashing in her pretty black face. “I ain't gonna lie to the woman. You want to talk to her?”

“No, hell, it's ten-thirty. What's she calling about now? Tell her I'm too busy. That's not a lie.”

I write a prescription for Frieda's antibiotics, her discharge instructions, and put the chart back in the rack, then I write a red “DC” by her name on the board. DC for discharge so the next available nurse can call the nursing home to come and take her back.

Watanabe approaches, singing to himself, “Oh, it's another Saturday night and I ain't got nobody—”

“What are you in such a good mood about?”

“Hey, it's Saturday night at Cincinnati Municipal Trauma Center and Welfare Reclamation Department. What's your problem, Leon? Don't worry, be happy.” He holds up another chart.

“You be happy. What have you got?”

“Boy, that Lydia, she's pretty funny.”

“Funny haha or funny weird like you?” I hear the radio tone.

“Funny haha. She is.” He presents a four-year-old boy with an ear infection.

Jenna, one of the nurses, takes the radio call. “Eighteen year old with vaginal bleeding,” she says to us. “Probably pregnant. Sounds stable.”

“Gee, something new,” Ted says.

I look in on Watanabe's four year old. The mother struggles with a younger child, a chubby toddler who screams and waves his dirty hands.

“Get out of the damn wastebasket,” she shouts at him. She looks about twenty, so fat her face is distorted. The patient sits on the gurney, laughing, egging on his brother. One glance tells me he is a healthy child, safe to send home on antibiotics for his ear. They are on welfare, like nearly half our patients, the mother unwed, the two children probably from different fathers.

Then the asthmatic eight year old, a skinny black girl. She coughs and stares, bored, at the ceiling. She has pulled off her monitor lead wires.

“Hi. Where's your Mom?”

“She went out to have a cigarette.” She picks her nose with dirty fingers.

“How do you feel?”

“Okay. Can I go home now?”

“Let me listen to your breathing.”

She turns her back to me, taking deep breaths. She knows the routine. I listen with my stethoscope.

“Better?” she says.

“Sounds pretty good. How long have you been sick?”

She shrugs.

“Stay here ‘til your Mom comes back and then you can go home. Tell your mother to stop smoking. It's bad for—”

“Thanks a lot.” Her mother comes around the curtain. “Who are you?” Her sullen face throws an angry glance at me. Her hair, tinged with purple, is shaved close around her lean head, making prominent the shape of her skull. She is maybe twenty-two, with a silver nose ring.

“I'm Dr. Mendel. I work with Dr. Watanabe to—”

“Can we get outta here? She breathin' good now.” She knows who I am. She's been here many times. We are her family doctor.

“Do you know about smoking and asthma? It makes her asthma worse if you smoke at home.”

“I know. Y'all done told me that before.”

I wait, watching her.

“I know the shit, man. Y'all preach it to me every time. I be careful. I go outside or in the other room. Ain't that right, child?”

Her daughter ignores her.

So what can I do? Call Child Protective Services? Is it neglect? Take the kid out of the home and put her in foster care? Right.

At the nurses station Wanda puts an electrocardiogram in my hand. She looks tired, frustrated. “Here, Leon, I just ran this on the guy in Bed 6. He's got chest pain, looks like the real thing to me.” The tracing has inverted T-waves, an abnormality, but it may be old, even years old. I'll need one of his old EKGs to compare.

“Ruby, I need the old chart on Bed 6, please.”

“Honey, Medical Records ain't answered their phone in two hours. They either asleep or dead.”

“Well, then call the nursing supervisor. Let her work on it. Would you page that new intern, Dr. Neuman, and point her to Bed 6?”

Bed 6 is Fred Skilkin, fifty-eight years old according to the chart. He lies ashen on the bed, frightened and sweating.

“Mr. Skilkin, I'm Dr. Mendel. How long have you had this pain?”

He glances at his wife who sits next to the bed. “I never felt anything like this before, Doc. Been going on about an hour, I guess.”

“What were you doing when it started?”

“Nothing. Just watchin' TV.”

“Can you describe what you're feeling for me?”

“It just hurts like hell.” He holds a tight fist over his chest.

“What kind of pain is it?”

HEARTBEAT

“Like somebody got a knot tied around my insides and is pulling it tighter and tighter.” He’s panting.

“Does it hurt to breathe in and out?”

He shakes his head.

“Can’t you help him, Doctor?” his wife says. “Can’t you see how much he hurts?”

“Yes, I will. I just need to get a little information first so I don’t do him any harm. Fred, have you ever had any heart trouble?”

He shakes his head again.

“Okay.” I punch the intercom button. “Ruby, I need a nurse in Bed 6 right away.”

“Soon’s I find one,” she says.

It’s a judgment call, as usual, but he looks to me like a man having a heart attack. I ask the nurse to begin giving intravenous nitroglycerin and morphine to relieve his pain. The nitro will relax the tiny muscles of his coronary arteries and let more blood flow to his heart. Also an aspirin for its blood-thinning effect.

“What’s going on, Doc?” he says. “Guess it’s time to stop smoking, huh.”

I ignore the opportunity for retort. This man needs sympathy and reassurance. “Fred, I don’t even know if this pain is coming from your heart at all. It may be entirely unrelated to your heart. But we have to assume it is your heart and treat you that way. I’m going to call your doctor and talk to him about putting you in the hospital. That way we can find out if it is your heart and keep you as safe as possible until we know.”

He nods. A simple explanation, but the cardiologist will have plenty of time to talk to him. People in pain don’t remember much anyway. The man’s doctor is Hiram Rothman, an older internist, one of the downtown crowd who avoid Muni, don’t like hobnobbing with lower class patients and having residents looking over their shoulders. Back at the nurses station I ask Ruby to page him for me.

“There’s a trauma coming, Leon,” a nurse tells me, turning from the radio. “Sounds pretty bad.” She hands me the scribbled radio call report and hurries off.

How bad? The note says a twenty-four-year-old woman from a car accident with chest pain, a broken leg, and very low blood pressure. They’ll arrive in ten minutes.

Lydia appears. “Okay, you’ve got ten minutes to do a quick history and physical on the guy in Bed 6. He’s having chest pain. Here’s his ECG. I asked the nurse to start nitro and morphine, but see what you think.”

“Ten whole minutes? What should I do with the extra time?” She grins and walks off with the chart.

The slots on the board are filling fast. Each red tag means a patient in a bed waiting to be taken care of and there are eight of them. The triage nurses out in front check them in and call us to see the ones who need immediate care. I hate to think what the waiting room looks like now.

Two policemen bang through the double doors of the ambulance entrance, struggling with a handcuffed drunk. He is shouting obscenities and dripping blood from his pant leg along the floor. A nurse points them to a trauma bay.

“Where's he hurt?” I ask.

“Not sure,” says one of the cops. “He got stabbed in a fight downtown at some bar. Looks like he got it in the groin or his thigh.”

“LEMME GO. I'M GONNA GET THAT FUCKER.”

“All right,” I say, “put the leathers on.”

Claudette and Roxanne, our police security guards, appear. Tall, stout women, like twin rhinos, but they can move like cats. Rapidly they imprison the man with thick leather cuffs around his wrists and ankles, strapped to the steel bars of the gurney. I help the nurses cut away his clothes. We need to know how badly he is hurt.

“What's your name?” I ask in a friendly voice.

“FUCK YOU. UNTIE ME, ASSHOLE.” He starts to spit. Claudette's heavy hand slams his mouth shut. I hear teeth crumbling. She doesn't like spitting. The surprised man struggles to breathe through his nose. A nurse puts a paper mask over his mouth with strings looped over his ears. We have all done this before.

The doors swing open again and three paramedics push a stretcher toward us; a limp body strapped to a wooden backboard, a bloodless face with eyes closed above a hard plastic neck collar.

“Pressure's 80, Leon,” one of them yells as they pass.

I push the intercom button. “Ruby, get Patterson and Watanabe over here and call a Trauma Code.”

“The trauma team's still in O.R.,” she says.

“Team 2 will come. Go on and call it.”

A curtain away from the drunk, they lift the backboard and patient, littered with equipment, onto the gurney.

“Is she awake?”

“She was for a while,” one of the paramedics answers. His partner breathes for her, pushing oxygen in and out of her lungs with a blue Ambu bag. IV's flow rapidly into each arm.

“What's her name?”

“Leanne something.”

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I lean over the pale face and shout her name. A purple bruise pushes up the skin above her ear. The plastic endotracheal tube snakes into her mouth. I slap her cheek gently, then hard. No response.

The Trauma Code sounds over the hospital P.A. Soon the thundering herd will be upon us; surgery residents, internal medicine residents, respiratory therapist, pharmacist, X-ray techs, and a chaplain. “Okay, 2 milligrams of Narcan IV and a chemstick, please,” I say to a nurse. I slide the girl's eyelids up. She has clear blue eyes. The tiny black pools of her pupils shrink in the light.

“Pupils?” the recording nurse asks, staring at a trauma flow sheet in front of her.

“Equal, round and reactive, about 3 millimeters,” I say. Then to the paramedic, “Anybody with her?”

“Yeah, boyfriend's dead and another girl in the back they're still trying to get out of the car.”

“How'd she look?” If she's alive they will bring her to us.

“Bad.”

Watanabe appears by my side with Lydia.

“Okay, Ted, twenty-four-year-old female from an MVA. Go for it, buddy.”

“Just like that, huh.” He glares at me.

“Trauma Code's been called and I'm right behind you.”

He moves close to the bed, taking off his white coat, draping his stethoscope over his neck. Someone hands us gloves and masks.

“Okay, what happened?” Ted says.

“Car was an old Chevy Malibu,” the paramedic says. “Looks like they went down the Ludlow Boulevard off-ramp way too fast, didn't make the curve, and flipped over the guardrail. Landed nose down. She was the driver, no seat belt. Initially conscious and complaining of chest and right leg pain, also head pain. Steering wheel badly bent and windshield shattered. Took about thirty minutes to get her out. Initial blood pressure was 90. Decreased breath sounds on the right and subcutaneous air. Obvious right femur fracture. We put on a Hare traction splint and started two lines, 14 gauge in each side. Level of consciousness went down fast. We intubated her about five minutes out. She's had about a liter and a half of fluid.”

“Her pressure's 85,” a nurse says, “pulse 134.”

Another nurse and I are undoing straps and cutting away her clothes. She is a plump girl with cold moist skin. Monitor leads are attached and her heartbeat appears above us.

The X-ray camera rumbles into place on its overhead rail.

Ted shouts at her as I did, but the Narcan has done nothing. Then he listens on each side with his stethoscope. “No breath sounds on the right. Set up for a chest tube.” His voice is high pitched, urgent.

He presses on her abdomen. “Shit, Leon, her belly's like a rock. She's gonna need surgery for sure.”

“Okay, but let's do first things first,” I say.

Angry shouts have been coming from behind me. I peek around the curtain to the next bay. Patterson is there, bent over the masked drunk.

“You under control?”

He nods. He is boyishly handsome with straight black hair. The old ladies love him.

“Lemme know what the guy needs.”

I punch the intercom speaker on the wall. “Ruby, you there?”

“Yes, hon, what you want?”

“Page Neurosurgery down here STAT.”

“Okay,” Ted says, “we need blood gases, trauma labs, two units type specific now and six units crossmatched, NG and Foley.”

“Pleurivac's ready,” a nurse says, “with the cell-saver.” Around us is a quiet frenzy of nurses and techs, each doing their job.

“Okay, where's the chest tube tray?” Ted says.

“I'll do the chest tube,” I say. “You keep going.” I glance about. “Lydia, do you know how to do chest tubes?”

She frowns. “I've done a couple.”

“Well, come watch. The next one's yours. Put gloves on.”

“COVER GOWNS.” Sonya, the charge nurse, pushes the folded blue gowns into our hands.

She is right; the gowns are sterile, they protect the patient, and they protect us from the patient. We deal in blood, blood is the water we sail on, yet we dare not touch it.

The X-ray machine starts firing, a tiny beep for each exposure. First her chest, then her neck, then her pelvis.

I splash the side of her chest with brown Betadine, explaining the procedure to Lydia. “Estimate the nipple line which is about the four-five interspace, at the posterior axillary line. This is out of the way, more dependent so blood will drain, and cosmetically better if she survives. Then make a 3- inch incision between the ribs. You need to give yourself enough room to work, especially if you're in a hurry. Then dissect down with the scissors like this, pass just over the superior margin of the inferior rib. Why's that?”

“Um, because the intercostal artery and vein pass just along the inferior border of each rib. You avoid them that way, the nerve, too.”

HEARTBEAT

“Good, good.” My gloved fingers work in the warm wet bed of the incision, feeling her ribs, cutting the muscle between them. I reach the tough pleura beneath. “If you cut down far enough with the scissors you don't have to sweat the final penetration. Watch out now.” I reach for a Kelly clamp and push its blunt tip through the thick layer covering her lungs. Dark blood spurts over my fingers and flows onto the floor. “Put your finger in quickly, make sure there's no heart sitting there, or liver or anything else. Then the tube.”

I slide the clear plastic tube, as thick as my thumb, into her chest. It fills instantly with blood up to the clamp. A nurse plugs it into the cell-saver tubing and I take off the clamp. Half a liter of blood is sucked out in seconds, a steady flow follows.

I look at the respiratory therapist pumping her lungs with an Ambu bag.

“Better,” she says, nodding at the bag.

I show Lydia how to sew the incision closed with black silk thread, snug around the tube.

“Whaddya got, Leon?” Tommy Kaminsky, the senior surgery resident on the other trauma team, stands by me in blue scrubs.

“Watanabe can tell you about her.”

Ted runs down the case to him, his voice tense, strident. Pudgett, Kaminsky's tall, silent intern, looms awkwardly behind him. His nervous eyes dart about.

I step around the curtain to Patterson, pulling off my slimy gloves. “How ya doin', Phil?”

“Good. He's pretty stable. Got about a six centimeter wound right over the right inguinal ligament. Belly's pretty tender. I think he needs to have it explored.”

“How's his urine?”

“No blood.”

The man lies strapped to the bed by his wrists and ankles, head flopped to the side, snoring.

“Does he wake up?”

“You bet. He's an obnoxious son of a bitch, too.”

“So what do you want to do?”

“Well, looks like team 2 is going to be tied up for a while with that girl. Ruby says team 1 is still in the O.R.”

Great. How long has it been? That kid with the hole in his heart better be okay.

“So I was thinking we could call the urology resident and see if they'll do this guy.”

SAMUEL FINN

“Good idea. Does he have a wallet? Okay, give it to the social worker and see if he can drum up some family. We ought to contact family if he’s got any.”

Back at the station I speak to Ruby. “Did you reach that Rothman guy, Skilkin’s doctor?” The board looks bad, festooned with red tags.

“Yeah,” she turns toward me. “He wasn’t overly pleased. He says put the man in an ambulance and send him to St. Joseph’s and he’ll take care of him there.”

“No way, Jose, that guy could be having a heart attack. Page him again and I’ll rattle his cage a little.”

“Sounds like he been sippin’ a bit.”

“I don’t care. At least I don’t have to smell his breath.”

She laughs. Rohit walks up, two charts in hand.

“Hey, superdoc,” I say, “how’s your overdose?”

“She is okay, Leon. The medicine team put her in the ICU They are not pleased, but they came.”

“I’ll bet. Is she on a ventilator?”

He nods, his thick black hair falling over his eyes. He needs a haircut. He has a family and probably hasn’t had time. He hands me a chart and describes an eighty-five-year-old woman with abdominal pain, then the other chart, a twenty-six-year-old woman with a headache, vomiting, and screaming in pain. She has had such furious visitations before. Her brain has been CAT scanned and electroencephalographed, treated with half a dozen different pills to stop her migraines. She still has them.

“You think it’s the same old thing that she’s had before?” I ask him.

“Probably.”

“Probably? You think she’s probably not ruptured an aneurysm in her head and about to die?”

Uncertainty crosses his face.

“Dr. Mendel,” Ruby calls to me, “I got that Dr. Rothman on the phone.”

I wave acknowledgment. “Okay,” I turn back and grin at him. “You’re probably right. What do you want to do?”

“Well, she says the DHE and Reglan usually works for her.”

“You know how to give it?”

“Not really.”

“Okay, the nurses know.” I move toward the phone. “Order 10 milligrams of Reglan I.V., wait ten minutes, then give one milligram of the D.H.E.”

I pick up the phone and plug my other ear with a finger. The noise level is rising with every bed full, kids crying, people groaning or cursing.

“Dr. Rothman?” I attempt a polite tone.

“Yes, who’s this?” a tired, irritated voice replies.

HEARTBEAT

“This is Leon Mendel. I'm one of the Emergency Department attendings on—”

“Will you please move my patient, Mr. Skilkin, to St. Joseph's Hospital. I will take care of him there. I don't know how he got into your E.R.” Ruby is right; his speech is slurred. Oh well, it's Saturday night.

“Well, the paramedics brought him here, sir, because he was having severe chest pain which they judged to be cardiac in nature and they are required to bring such patients to the nearest hospital. I'm inclined to agree with them and—”

“Yes, I'm sure you're right. Now if you would be so kind as to put him back in an ambulance and—”

“Well, I wish I could, Dr. Rothman, but I'm not sure he's stable for transfer. He's having ongoing pain. We're pretty cautious nowadays with EMTALA and all.”

“EMTALA! More government horseshit! What's his ECG show?”

“He has inverted T-waves in the anterior chest leads.”

“Oh, he's had that for years, son. Just ship him on out and he'll be fine.”

“Well, sir, Mr. Skilkin tells me he's never had an ECG before.”

Ruby looks at me. I roll my eyes.

The phone is briefly silent, then, “Listen, son, let me speak to your attending. I admire your caution but there's no need to worry. I can't be having my patients at Municipal.”

“I am the attending.”

Another silence. Sonya approaches me, anxious. She has been talking on the radio.

“Just a minute, please, Dr. Rothman.”

“Leon,” she says, “the other girl from that accident is on the way. She's a full code. They're doing CPR”

“Terrific. Tell Kaminsky to stick around. How far out are they?”

“Five minutes.”

I nod. “Dr. Rothman, I don't mean to be unreasonable about this but it would violate our standard of care as well as federal regulations if we transfer Mr. Skilkin to another facility. I would be happy to have our internal medicine team take care of him and I'm sure they would consult cardiology as well.”

“I don't need a damn cardiologist to help me take care of the man.”

“Well, sir, I'm afraid I don't have time to discuss this any further. Would you like to come here and care for him yourself?”

“I'm not coming down to that madhouse in the middle of the night.”

That's my answer. "Okay, sir, then I'll call our internal medicine team and arrange for him to be admitted here." He starts to talk but I continue. "Would you like them to contact you after they have seen him?"

"You're stealing my patient, young fella." Anger coarsens his voice.

"I have no choice." I feel my own pulse quicken, my own anger begin. "You're welcome to come down here and care for him yourself. You are also free to contact the chief of the Internal Medicine Department if you feel that your patient's care is inappropriate. I'm sorry we can't reach agreement."

There is only silence. Fuck it. I hang up. "You lazy asshole," I mutter to no one.

"Dr. Mendel," Ruby feigns shock.

"You're stealing my patient," he says to me. Fuck him. Ruby, get internal medicine down here to see Skilkin, please. Tell them he's a probable MI and they need to see him within 30 minutes."

The radio sounds again; a man in a coma after being clubbed in a fight. Ten minutes out.

I start toward the trauma bays. Lydia approaches me, chart in hand.

"Okay, gimme the 25-word version. There's some bad stuff coming by ambulance."

She hesitates, then speaks. "Okay, eighteen-year-old female with crampy pelvic pain and moderate amount of vaginal bleeding. She says—"

"Is she stable?" I reach for the chart.

"Well, she looks stable to me."

"Okay. Is she pregnant?"

"Probably not. She had a period two weeks ago. And she says she has not been sexually active."

"Okay, they're all pregnant until proven otherwise. You have to—"

"Oh, c'mon." She looks insulted.

"I know it seems callous and sexist and all that. But take my word for it, you'll see why before the month is out. Every vaginal bleeder is an ectopic pregnancy until proven otherwise."

She shakes her head. "You must order dozens of pregnancy tests, hundreds."

"We do. Lydia, it saves these girls' lives. They won't tell you everything. We can talk about it more in a while. Order a CBC and pregnancy test. Ruby will show you how. Then come over to the trauma bays."

Kaminsky and Manny Altman, senior neurosurgery resident, are talking over the comatose girl. Red fluid, saline mixed with blood, is flowing from a thin tube protruding from below her navel, a peritoneal lavage catheter inserted

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to see if she is bleeding internally. She is. X-rays of her neck, chest, pelvis, and shattered thigh bone glow on the wall viewbox.

"Gentlemen," I say, "what's the plan?"

"Looks like a quick trip to the CT scanner," Kaminsky says. "See what's going on in her head, then on to the O.R."

"Sounds good. Her girlfriend is about two minutes out; full code with CPR in progress."

Altman squints at me. "Same accident?" He has pale blotchy skin and his voice squeaks when he's nervous.

"Yup, they had a hard time getting her out. I don't know any more than that." I look back at Kaminsky. "If she had no vitals when they got her out then I'm probably going to call it, let her go."

"Let her go?" Altman says. "You won't crack her chest?"

"Survival from cardiac arrest from blunt trauma is virtually zero," Kaminsky says, "maybe one in a hundred thousand cases, not worth the risk of exposure to the staff. If she's flat line she's dead."

"Is your attending around?" I ask him. This will be a decision I would prefer not to make alone.

"He's on his way."

They both gaze thoughtfully at me, through me, at nothing.

"So, Manny," I say, "there's a guy coming in a coma after being clubbed in a fight. You need to get cooking on this girl here and get her through the scanner so we can move quickly on him."

They turn back to the gurney.

"Leon," Watanabe sticks a chart in my face. "This is a four year old with meningitis, I'll bet anything. Fever, lethargic, stiff neck, looks classic."

"Okay, what do you want to do?" I hear the rumble of an ambulance outside. A nurse moves toward the doors.

"A spinal tap but you gotta see the kid first. That's the rule."

"Right. No, wrong; not this time." I hand him back the chart. "Too much going on. Order his labs and page pediatrics stat. Let them do it. Then get back over here."

He nods, snatches the chart and turns away.

"Ted," I call after him. "Sick kids are top priority. Make sure the peds team gets down here."

He gives me a thumbs up.

I punch the intercom switch. "Ruby."

"Yes, hon."

"Find Icky and get him over to trauma C right away."

I walk out through the wide double doors. The big blue and white box of a city aid car sits in the glare of arc lights. Its engine is still on and rainwater runs down its sides. I didn't even know it was raining. The heavy summer air is mixed with exhaust.

Claudette and one of the nurses pull open the rear doors. There is shouting inside. Lee Moses, a black paramedic, jumps down and sees me, meets my gaze. He shakes his head. Another is doing chest compressions in the crowded compartment. They wear the tan canvas fireman's pants, held by suspenders over grey sweat-stained tee shirts.

A frantic voice is yelling, "Fuck the monitor. Get the oxygen bottle. All right, LET'S GO, LET'S GO!"

The stretcher slides out. It's spindly legs drop down, like an insect landing. Moses snaps them into locked position. Two other paramedics jump out.

A body lies amid the wires and tubes, skin bloodless and sallow in the glare. One eye is swollen shut, the skin purple and bulging. Her head and neck are the dull blue of cyanosis.

A feeling, something cold, sickening, starts inside me.

They move her quickly toward the open doors. One of them scurries beside the gurney, struggling to keep up the CPR, to keep blood moving through her body.

"LEON," the crew chief shouts at me, Dan Sylvester, a tall stout paramedic, usually soft-spoken. His face shines with sweat. "You gotta do her, man. You gotta crack her chest quick."

"Tell me what happened, Dan." We follow them.

"She was talking to me, Leon." He is panting, voice panicky. "It took a long time to get her out. Too long, God damn it."

"When did she stop talking?"

"I don't know. Just a few minutes ago."

They lift her onto the gurney. Nurses move in close.

"Do you want a Trauma Code, Leon?" Jenna asks me.

"Not yet."

"WHY NOT?" Dan shouts in my face.

I reach up and grab his shoulders. "Calm down, Dan. Did she have a pulse when you got her out?"

He stares, eyes wide.

"No. Doc, she didn't," Lee Moses says.

I move over to the girl. Icky appears on the other side.

"How long was she pulseless before you got her out?"

"We couldn't reach her," Dan says.

"When did she stop talking?"

HEARTBEAT

“She stopped talking about ten minutes before we got her out,” Lee says.

One of the nurses is bagging her, trying to push oxygen into her lungs. Only the right side of her chest rises. The left side is hugely swollen, with the bubbly feel of air under the skin. Where ribs should be there is no resistance. The heart monitor shows a flat line. Her belly is swollen and faintly purple, full of blood.

That feeling, fear, no, worse than fear, grows stronger. Zach, what is this? I haven't felt this before.

“When did she stop breathing?” I say.

“Couple minutes after that.”

“YOU DON'T KNOW THAT!” Dan yells at him.

“She was not breathing for ten minutes before you got her out?” I look at Lee Moses.

“YOU COULDN'T TELL,” Dan screams. “SHE WAS TALKING TO ME, LEON.”

“Are you sure, Lee?”

“NO, HE'S NOT SURE!” Dan spins me around and shakes me. “JUST DO IT, LEON. WHY CAN'T YOU JUST CRACK HER CHEST AND FIND OUT?”

Claudette's blue bulk appears. “You let go a' him, son.” Her soft voice is startling.

“I'm sure, Doc,” Lee says to me. “She was dead when we got her out.”

“YOU DON'T KNOW THAT,” Dan says, “YOU DON'T KNOW HOW LONG SHE WASN'T BREATHING.” He takes deep sobbing breaths.

“Flat line on the monitor?”

“Flat line from the start,” Lee says.

I look at Icky. “Not breathing for maybe ten minutes, lifeless on extrication. Flat line. No response to fluids and CPR.”

Another pair of paramedics rolls a stretcher by; the head-injured man.

Icky shakes his head slowly. “She's dead. Let her go.”

“NO, NO! GOD DAMN YOU GUYS.” Dan shoves one of his crew out of the way and starts violent chest compressions. “DON'T LET HER DIE LIKE THAT. DON'T STAND THERE AND JUST TALK HER TO DEATH.” Ribs snap under his hands, the gurney shakes.

I wrap my arms around him from behind and pull him away. “Stop it, Dan. Stop it. She's dead.” I turn him around. “She's dead, Dan. We're not letting her die. She's dead already. We're not going to rip open her chest cause it won't help.”

“You could at least try,” he growls, shrugging away my arms.

“It's too late, Dan. There's no chance to save her, none, zero.”

SAMUEL FINN

He puts his hands to his face. "I was talking to her. She's a nice girl. She was scared." He looks at me again, tears starting. "I told her she wouldn't die, Leon. I told her I wouldn't let her."

"You didn't let her die, Dan. You did all the right stuff. She's been hurt too bad. Too bad for anybody to save."

His crew takes his arms and walks him away.

Chapter Three

When someone dies, Zach, that's when I think of you, when a patient dies. Why is that? Kind of morbid, don't you think? There's that time, finally, that moment when everyone around the gurney knows it's coming, or that it's already come. Even the family, if they're in the room. Sometimes it's good to have them in the room. They can see the process and it's not such a shock. They can stand in there with us and feel it come, too.

It's almost a relief when it comes, when the struggle stops, the rush of putting in tubes and making decisions. Then, when we stop CPR, stop sticking in needles and—

“LEON,” Wanda shouts to me as she scoots a loaded wheelchair through the department. With one hand she holds a slumped figure from falling out.

“Icky, can you do the head injury?” I yell across the station.

He nods. “I got it. Go.”

“C'mon, Phil,” I say to Patterson, scribbling on a chart nearby.

“He's an old lunger,” Wanda says in the room. “Wife says he couldn't breathe tonight.”

Bluish gray skin, flaccid jowls on an inanimate face, unconscious. Phil grasps under his arms. I take his bony legs. We heave him onto the gurney. He is mainly bones and a barrel chest.

A lunger, a man whose lungs have suffered the smoke of three or four packs of cigarettes every day for decades, whose fine spongework of tiny alveoli has been scarred and shredded into the stiff empty pockets of emphysema, always infected, barely able to take in enough oxygen to keep him alive. Now a cold or a virus has pushed him over the edge. Or perhaps his heart has given up, exhausted from years of pumping blood through those stiff lungs.

He's not really old, fifty-five, but he looks seventy with hide-like skin, tobacco-stained fingers. He lies gasping, barely moving any air. I look at Phil.

“C'mon, Leon, bag him,” he says, loud, irritated that even now I'm doing the game, being the teacher. I grab the Ambu bag with its mask and start trying to push air into the man's chest.

“Crash cart,” Phil says to Wanda, ripping open the man's shirt. Buttons fly. “Let's see what his heart's doing.” He grabs the defibrillator paddles from the cart and holds them to the bony chest. On the heart monitor a flat green line appears with an occasional wide spike.

“He's agonal,” Phil says.

Agonal, as in agony, the final agony, the last beats of a dying heart. “You’re right,” I say in a neutral tone, watching him. He’s smart, a senior resident. He can do this, make the decisions, give the commands.

His clear gray eyes flicker over mine. “You never quit, do you, Leon? Okay, hit the code switch and intubate him. Wanda, start chest compressions.”

I slide a finger beneath the metal protector on the wall and flip the little blue switch there. Again, that cold feeling rises inside me, not fear, dread maybe. You could call it dread. Not of something happening now, but of something coming. It’s been there the whole time, this feeling has, since out on the ambulance ramp. I want to walk away, to be somewhere else when this guy dies, when we give up and let him die. He’s good as dead now, look at him, nothing, truly nothing is going to stop death here.

Wanda positions her hands, one palm over the other, and pushes down. There is a loud crunch, his stiff decrepit ribs snapping under her pressure. She cringes but continues. It’s not the first time we’ve traded a few ribs for the faint chance of restarting a heart.

Someone hands me the airway box from the crash cart. Open it, find the cool steel laryngoscope blade, click it onto the handle, the tiny bulb lights up, fumble through the plastic wrappers for an 8-millimeter tube. Quickly now, this guy’s not breathing, his brain cells are dying, rank by rank, legion by legion. Open the slick wrapper, take the tube in your hand. I should have gloves on. No time. Find the syringe, fill it with air, attach it to the valve, lever open the man’s mouth, slide in the blade, hope he doesn’t vomit.

“Stop, Wanda.” The rocking of his body under her hands stops. Don’t vomit, old guy, whatever your name is. Dentures rattle loose in his mouth, pull them out, slimy disgusting things. Lift the tongue with the blade, look for the cords, lift some more, there’s the tiny slit between his vocal cords, now the tube, gently, quickly, okay, it’s in. Hold it steady, push the plunger on the syringe, inflate the balloon. “Okay, Wanda, go ahead.”

A respiratory therapist has arrived and takes the tube from my hand to start breathing for the man. I hear the switchboard operator’s voice call the code through the hospital.

“Took her long enough,” Phil says, stooped over an arm. “She must have been doing her nails.” Blood drips from an IV catheter he has inserted. With a twist he attaches tubing to it.

“He needs some epi,” Phil says, taping the IV in place. I fumble again in the crash cart for an amp of epinephrine, sitting in rows of little boxes. Pop-top boxes for fast opening. Out slide the syringe and amp, now pop off their plastic tops, then fit the two together with a twist.

“Epinephrine.” I hand him the syringe to shoot into the man’s vein.

HEARTBEAT

With luck his heart will start back up, if too many cells haven't died. And with more luck, much more luck, he might even wake up. If too many brain cells haven't suffocated, too many thousands of neurons with their webs of synapses, so delicate, so sensitive to a few moments of no blood, no oxygen. We are breathing for him now, forcing oxygen into his lungs, more oxygen than they've seen in years. He might survive, brain damaged, or comatose, to lie somewhere in a smelly nursing home for another year or two until he dies. But if he's really lucky he won't. What he really needs is to die here and now in whatever peace we allow him.

A tiny frightened woman appears in the doorway. "Here's the wife, Phil," I say. "I'll talk to her."

I take her arm and turn her back into the hallway, away from this scene. "Ma'am, I'm Dr. Mendel. What happened to your husband tonight?"

Her face is pinched, sallow, no doubt a longtime smoker, too. She holds a gray handkerchief up to her mouth with both hands and stares through smudged glasses, watching the code team run into the room, an ICU nurse, a pharmacist, and the internal medicine residents, Todd Pinehurst and his intern again.

This feeling, this cold dread, it's death, the feeling of death. And in that moment of her stillness I see it in her. Death slides into her unmoving eyes, turns them dull and lifeless, shouts at me for an instant until she moves.

"What did you say?"

I touch her hand. "Ma'am, we need to know some information about your husband."

"He couldn't breathe," she says. "Just like every night. He couldn't breathe, only tonight was worse. He wouldn't let me call an ambulance."

"Did he have any chest pain?"

"No, I don't think so. He never tells me..." Her voice trails off.

"Has he had any heart trouble before?"

"No, no, just his breathing, his lungs."

"What medicines does he take? Do you know?"

She opens a jumbled purse. "I used to keep a list."

It doesn't matter, I want to say, it doesn't make a molecule of difference, lady. We're just going through the motions because...because this is what we do, because this is all there is to do, all that's left to do.

Her shaking hands fumble inside the purse, then give up. "I don't know where it is." The skin of her face looks as if it might crack, the folds and wrinkles worn deep, now contorting with fear, grief. The chaplain arrives, relieving me of her.

Patterson does the Advanced Cardiac Life Support routine with Pinehurst looking on, carping at his every move. Intravenous drugs and electrical shocks

to jumpstart the man's spent heart, even high dose epinephrine, 10 milligrams at once, enough to put a normal heart into seizures. Fifteen minutes work and still nothing but a flat line on the monitor.

The rest of the code team stands watching, waiting to be dismissed. If he were going to respond it would have been right away. They know it. We all know it.

"Why don't you end it, Phil," I say. "We've got other people to take care of."

"Then go do it, Leon," Pinehurst says quickly, as if he's been waiting for the chance. "Patterson and I can do this."

"Not appropriate, Todd." He's trying to irritate me. "The emergency department attending supervises all codes. You know that."

The weasel eyes in his flabby face glance upward as he makes a be-my-guest gesture with his pink hand.

"Okay, let's stop. Nice try, Phil. Would you speak to the wife? She's in the quiet room with the chaplain." I turn to Pinehurst. "Your expertise was invaluable, Dr. Pinehurst, as usual."

"Fuck you, Leon," he says.

It worked. He's made me angry. "I don't think 'Fuck you' is the appropriate response to an attending, Dr. Pinehurst, or any of your fellow physicians. And I'll be more than happy to discuss it with your chief resident. Now why don't you quietly disappear back upstairs."

I step next to the gurney.

Oh, Zach, look at this, another corpse, another dead sack of blood and muscles and guts and brains. And the man in the glass is there again, in dull green scrubs with a stethoscope hung around his neck, a solemn ghost staring back at me. Is it you, brother? What would you say to me if you could? Would you tell me to stop sending souls to you? In that place where you are, whatever place it is, where you've been for so long. How long? Thirty-three years minus eight—you were eight, right? We were both eight—twenty-five years ago.

Wanda ignores me, removing tubes and wires. She works quickly. We need the room.

Something screams from within this dead flesh, a long thin dying scream. I shiver and feel sweat start. I glance up. Wanda hasn't heard it. But I have.

* * *

Finally, around four, there is a lull. I walk out to the ambulance ramp. The rain has stopped. The dark city hums, cooling down. A cop nods to me.

HEARTBEAT

Zach, brother Zach, do you see what I am, what this place is? There is death here, with its foul smell. Souls and minds packaged in flesh, that sweat and puke and bleed and gasp. Their bones break, their vessels tear, their hearts flounder, their lungs fill with fluid and pus. We try to stop it, hide it under bright lights, behind long words, fight it off with plastic tubes, complex chemicals, fence with it with tiny swords of stainless steel.

Zach, those bodies spoke to me, the old lunger, and that poor girl's corpse, before they moved her to the morgue, her organs crushed and ruptured, her brain silent, cooling and still, its maze of cells and synapses dissolving into a handful of mush. I went back and stood by her. I never do that. Her soul, something, opened a dark cavern in my mind—I saw it like a dream—and then I felt it leave and disappear howling into that darkness.

I've never felt these things before, or heard these sounds. Brother, what has happened?

Seven a.m., Peter Schulman appears, scrubbed and wary. "Well, how was the night?" He eyes his residents for the day.

"Bad," Icky says, drooped against a counter, his head on a hand. "Seven deaths and two major fuck-ups."

"Major fuck-ups? What happened?" Peter is the medical director for the department, short, balding, with tiny quick eyes.

"Matt Beauregard, the surgery R-3, and his intern," Icky says. "They stuck a chest tube into the heart of a kid with a simple gunshot wound to the belly and a pneumothorax. Hit his right coronary and they couldn't save him. Used a trocar, for God's sake. And the other was..." He glances at me.

"A girl with a ruptured tubal pregnancy that bled out into her belly," I say. "She looked stable and nobody checked on her for about an hour and then we found her dead." I shrug. "At least I assume that's what she had."

"Whose patient?" Peter says.

"Mine, my intern and technically my patient. I hadn't actually seen her. Things were crazy here for a while."

"I'd call it a systems error," Icky says. "Insufficient nurses to check on patients, insufficient rooms to put patients in. Hell, Leon hadn't even laid eyes on the poor girl when we found her dead. Improper triage, I don't know."

While Icky goes on I look for Lydia. She sits alone across the station, pale, staring away from us, at nothing. Is she the worst casualty of this night? That girl was her patient. She had examined her and, according to the unspoken rules of this game, should have figured out how serious she was, how immediate her problem. I step toward her but she stands and walks away.

I listen to Ted and Rohit and Phil hand off to the day-shift residents the five warm bodies remaining, two drunks sleeping it off, one schizophrenic awaiting a

bed upstairs, a kid with abdominal pain, and a pregnant teenage girl who is bleeding, awaiting ultrasound. Yet another, maybe this one will survive.

I pour my cold coffee down a sink and move toward the locker room to change clothes.

Finally, the quiet single uninterrupted task of driving home, windows down, feel the air, put my mind in neutral. Sunday morning, six lanes of empty concrete, heating up already in the sun. The factories are quiet, Frigidaire's plant like a wall on one side, Proctor and Gamble sprawled in its valley below on the other. A simple job would be nice, running a machine, sitting at a desk.

Two deaths, Zach, two avoidable, preventable deaths. Damn, I'm going to catch a lot of grief about this night. That kid with the chest tube in the heart, can you believe he died! Beauregard came down from the operating room and told me. Finkel hit his right coronary artery with the trocar. Talk about bad luck. See, you're not supposed to use trocars anymore. They're old fashioned, barbaric. Unless you're a resident and the attending on your service is so damn old fashioned and barbaric that he still uses them. Which Chester Graffen is, so his boys, his residents, go and use a trocar to put in the chest tube because Beauregard knows that when Graffen arrives in the operating room and Finkel has to tell him what's going on and Finkel says in his quivering voice, "and then we put in a chest tube," that Graffen is going to say, "Did you use a trocar?" And Beauregard knows they'll catch holy hell if they say no.

So they did a bypass graft to try to fix the artery but by the time they realized what had happened and got him onto the heart pump and then got the graft sewed into place there was so much damage to his heart they couldn't get it started again and had to let him go.

So Beauregard tells me that Graffen wants to have a talk with me. In fact, just when I see old Graffen come stomping into the department, somebody gives a yell from Gyn 1. Lydia's vaginal bleeder was waiting for her ultrasound to see if she had a tubal pregnancy, this black girl named Katrina Morris. I run in and there's this dead girl lying on the pelvic table, her belly's huge with blood. Guess she did have a tubal pregnancy, a ruptured one and all her blood was in her belly. Damn, Zach, this kind of thing should not happen.

So we stick in a couple central lines, a femoral and a subclavian and give her about six liters of fluid, four units of blood, and do CPR for about half an hour. We turned her blood back on as fast as we could, but you could see it wasn't going to work. No response. She was dead, just died in there quietly, all by herself in that room. Nobody had checked on her for two hours. She just ruptured her tubal pregnancy and bled to death into her abdomen, not a drop on the floor.

HEARTBEAT

Great couple of cases, huh, Bro. I'm going to get fried; Emergency Services Committee, Ob/Gyn Committee, Quality Assurance Committee, Risk Management Committee. Damn, I'll be explaining this night for a year. And poor Lydia; it was almost her first patient. I hope it doesn't spoil her month in the department. She's a smart girl.

What about that Rita what's-her-name and her kid with C.F., her adopted kid with C.F., for God's sake. Who in the world would intentionally adopt a kid like that? When I went back to check on her she asked me if she could cook me dinner some time. Wonder what she wanted. I guess that's an innocent enough come-on. Hard to turn down such an exquisite face. Also a little hard to trust. Too bad she drinks so much.

Home, my restful nurturing home, my depressing frightening home. Damn, Jasmine's car in the driveway, her stupid Peugeot she thinks is so sophisticated. Who cares. Okay, gird yourself. Maybe she'll just let you go to sleep.

I step inside and glimpse a white disk headed for my teeth. Duck!

Crash. Damn, a plate, she's throwing plates. I look up.

"YOU GODDAMN BASTARD, LEON. I HATE YOU." She stands across the room, by the stove, pale green panties and a tee shirt, no bra. She looks good, especially good when she's angry.

"I know that," I say, "and have known it for about three months now."

"Fuck you." She is fidgety, nervous, the way she gets when she's been doing cocaine.

"Is there a particular issue we need to discuss for me to be allowed to go to sleep for a while or may I simply go? I might lock the door, however. Don't you have rehearsal or something this afternoon?" I'll get angry soon, too. I can feel it.

"Your asshole attorney called last night to discuss our upcoming happy event."

Meaning our divorce. "He's not my attorney, Jasmine. He's our attorney. Remember, we thought we might be able to—"

"End this without strangling each other? Not a chance, asshole."

She wings another plate, which whizzes in before I can twist away. It nails my shoulder.

"Ow, shit. God damn you." I bend down and find it with my hand, watching for the next. It comes and shatters on the mantel behind me.

Anger grabs me now. "Good shot, Jas, you're starting to get your range. Here, try this one again." I spin it back at her, satisfied with the flicker of fear that crosses her face. The plate misses. "I'm touched that you're at least using our wedding china. Very symbolic and all."

She turns toward the cupboard to find more plates.

“Any chance we could cool this anger to its usual distant apathetic smolder and both live here today?” My own damn home and I can't even go to sleep here. I don't want to argue or fight or even talk to her.

“You know...” I begin, but my voice falters. I almost want to cry. “You know I could call the police, Jas. You're assaulting me, also destroying property that's mine, too.” I feel stupid, struggling for words. “Community property, you stupid bitch.”

“THEN CALL 'EM, YOU BASTARD.” She hurls another one, wide into the wall.

May as well leave. I back out the door. Another plate shatters inside, then another and another. She wins this one. I can't deal with it.

Tears come now as I walk to the car. It's sad, this home we had, this start of a home and a family, trashed, emotionally ransacked by that creature I married. Thank God she never got pregnant.

Driving over to Icky's, to Kentucky suburbia, far above the Ohio River on the freeway bridge. A string of barges slides along down below, the water shimmering in the morning sun. The other bridges march along upstream, stately, almost empty.

There was an AIDS patient, too. I helped Lydia with him, a cadaverous twenty-four year old in a coma. Oh, Zach, I don't think she'd seen one like him before, end-stage, a skeleton covered with skin. He probably had cryptococcal meningitis or some other disastrous infection that only AIDS patients get. I think Lydia was shocked, but she didn't let on.

His mother was there with him, the poor woman. She'd been caring for him at home. She fussed around the gurney, straightening sheets, helping move him so Lydia could examine him, but you could tell she was exhausted. At five in the morning, she should have been home dreaming about grandchildren.

“Look what's happened to him,” she said, “He was such a healthy boy, a cheerful boy.” Lydia held her hand and let her talk for a while.

Death was there, too, Zach, around that bed. The air, something, was different. I had to leave them, Lydia and the woman and that awful thing on the gurney.

Ah, rich midwestern suburbia, Icky's huge rambling lawn scattered with trees, his new house with its three-car garage. Birds, peace and quiet. I can hear Sarah's shriek through a window. She and Icky fight all the time.

I walk in through the front door and head for the noise. I almost make the fridge when Sarah sees me. “Leon, we were hoping you'd drop by. Maybe you could referee, or keep score. I mean, since you're here anyway.” She uses sarcasm the way Jasmine uses plates.

HEARTBEAT

“Thanks, sweetheart. It's so nice to feel welcome. Maybe I'll just sneak a beer and steal off to your hammock outside for a few hours. Remember the old open invitation? ‘Any time things get too terrible with Jasmine, Leon, you come and stay with us. Sometimes when two people are distancing themselves...’”

But Sarah has already distanced herself from me, yelling at Icky again. She is tall, athletic, a little horse-like in her tennis clothes.

Icky shrugs at me from a barstool, leaning exhausted on the wet-bar. He nods toward the refrigerator. “Hey, open one for me, too, Leon. I always like a beer when I go to a fight.”

I hand him a Pabst and head for the patio.

Sarah's shrill voice pinions me against the glass door. “Leon, will you please tell me why your partner has to come home after every shift and tell me how hard the nurses work, and how damn noble they are?”

Icky slowly shakes his head.

“I think I'll sit this one out, Sarah.” I slide open the door. “We had a long night. Can I have the hammock for a couple hours?”

“Go for it,” Icky says.

“Go for it,” Sarah growls, “God, listen to him, Mr. Macho here. He can't just say 'Sure,' or 'Be my guest,' or something a normal person might say. No, it's gotta be something macho, as if you were Rambo or somebody.”

Icky and I sneak a glance at each other.

“Rocky,” I say.

“What?” She turns on me.

“You mean Rocky. It was Rocky that said that.”

“Said what?” she shrieks again.

“Said ‘Go for it.’ Rocky Three. Never mind, nothing.” I duck out onto the back lawn. Rebop, their big pointer, trots out with me.

Icky's got his creature comforts down. I slide the huge hammock on its green metal frame into the shade of two trees by the fence. The dog watches me solemnly, then trots over when I lie down. I scratch his neck, staring up at the leaves.

That girl, Zach, the one with the tubal pregnancy. I knew she was dead when I walked into the room. Not in the usual way, not because of the pallor or the stillness. You can resuscitate people out of that sometimes. No, her soul had gone, I felt it. Her poor simple soul had gone screaming away into God knows where.

Into black nothingness, death, that same place you went to, Zach, so long ago. Are you there still, in some huge black abyss, some endless place that just goes on and on?

SAMUEL FINN

I shiver as the feeling passes through me. Something has changed, Zach, hasn't it?

* * *

Net after net of alveoli spread around me, blood flowing, cells tumbling through the lacework of capillaries. Beyond, high above me, arch the pale beams of ribs, red muscle in between, neat bundles stretching and contracting. I know it's coming but I can only wait, watching the delicate spongework of these lungs. Whose lungs? Now a patch of muscle explodes in blood and the dull grey steel of a trocar stabs at me.

Okay, okay, I'm awake, sweating and hot. The sun has moved right over my face. I close my eyes and replay the images in my mind. Guess I don't need Freud to puzzle out this one.

Back to the house. The dog has abandoned me. I sneak open the glass door. It's quiet. I hope she let Icky get some sleep. No blood on the floor, no broken plates.

I find the phone and punch in my own number. Nine rings, where's the answering machine? Jasmine answers.

"So are you done throwing plates?"

Long silence. I hate her melodrama.

"Yes, that was stupid," she says. "I let you get the better of me."

My fault, huh. Oh, well, we're way past talking these days. "May I return peacefully to my home?"

"Your home?"

Shit. "Sorry, Jas. But saying our home sounds a little ridiculous these days, don't you think? How about 'the home in which we both currently reside?' Is that better?"

"Look, Leon, I don't give a damn. Come home if you want. I'm going out anyway."

Icky's daughter, Anna, comes roaring through the room, the dog barking behind her.

"Okay." Now I pause. Even simple things like saying goodbye get all screwed up. 'See you soon,' implies affection. 'See you later,' doesn't fit. I don't want to see her later. 'Do you want me to wait till you go out?' No, then I'm giving in, establishing a new precedent.

"So?" Jasmine says finally, hard-voiced.

"So nothing," I say, trying for a neutral tone. "Bye." I put the phone down, not wanting to hear her reply, guessing she said nothing.

HEARTBEAT

“Hi, Leon. Here,” Anna squeals. A tennis ball comes flying, followed by the dog.

“Hi, goofy, where are your folks?”

“In bed,” she says with a significant look.

She's eleven, so I keep my face in neutral. “In bed? They must have made up.”

“They always do. Throw me the ball.”

“That's reassuring.”

“Yeah, but Dad said we're going to the pool.”

“Well, better a happy well-rested Dad to take you there than a crab.”

“He'll have that F.F.G.,” she says with a giggle.

“That what?”

“F.F.G.”

“What's F.F.G?”

“Can't tell. Come on, Rebop.” She moves toward the glass door.

“Well, I don't even want to know.” This is an old game.

“FRESHLY FUCKED GLOW,” she shrieks, tearing out toward the yard.

* * *

“Any low flying plates?” I try to joke as I walk in the door.

“Cute,” she says coldly from the couch, still in just panties and tee shirt. Is she tantalizing me? We haven't touched in weeks.

“You look quite fetching. What's the occasion?”

A cigarette burns in her hand, its smell mingles with marijuana just smoked.

“I hate this, Leon.”

“Hate what?”

“What? What do you think? Living here, walking around each other, like living in the ruins of an emotional holocaust.”

“The aftermath of nuclear war, perhaps? Deadly radiation poisoning the survivors.”

No comment, the vacant venomous stare, the slight squint in the smoke. That mouth, I'd like to tie her up, tantalize her, torture her—

“You're a bastard, Leon. You don't care at all anymore. Emotionally you've packed up and left already.”

“Speaking of packing up and leaving?”

“Four days, damn it. You know that as well as I do. I can't get into the place for four more days.”

“Too bad your mother doesn't live nearby.”

“Fuck you. This place is as much mine as it is yours. I'm making it easy for you by moving out myself. Even slimeball lawyer O'Connor admitted that.”

“Well, do you think you can maintain a nonaggressive posture in the meantime?”

She rearranges herself on the couch, lying on her side, eyeing me. “Maybe. Wanta screw?”

“Screw? You are too weird when you get high, Jas. Especially lately.”

“It might be fun in a macabre sort of way,” she says, unsmiling.

Her aerobicized legs and anorexic waist are tempting as usual.

“The totally meaningless fuck, huh?” I say. “The spiteful fuck. Just take out our feelings and leave them in the other room, right?”

“Something like that. Or are you worried about your little problem?”

“My little problem?” I'm beginning to feel like I'm the cobra and she's the mongoose.

“You haven't been exactly performing on demand lately.”

Lately? It's been weeks since we even considered sex. “Oh, that little problem. I see. Actually I was rather proud of my performance in that regard, or shall we say lack of performance. I think it reflects an emotional sensitivity said to be lacking among men these days. You haven't exactly been little Miss Responsiveness yourself.”

“Perhaps you're reverting to your previous sexual identity? Maybe that's really you, Leon, after all. Maybe all this has been—”

“My what?”

“What was his name, your gay lover of years ago? Fritz or something?”

“His name was Fitz, and that was a long time ago. Sorry, Jas, but if you're trying to get at me you need a better angle than that. I've never been ashamed of that relationship, and you're sure as hell not going to make me now.” Fitz, huh, I haven't thought about him in a while.

She crushes out the cigarette in the cluttered ashtray and stands, stretching, pulling her shirt tight over her breasts. “Well, Mr. Sensitive Heterosexual, I'm feeling very erotic right now. If you think you could surrender yourself to your purely physical urges I'll be on the bed. No commitment, no consequences, just a willing body, female body that is.” She walks out of the room.

Right, just a willing body. Where has that unencumbered body been the last couple years, that same body so good at finding excuses, so good at withholding itself.

Medical thriller about an ER doctor battling with insanity.

Heartbeat

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