

# Residency II

Book 10 of *Good Medicine*

by Michael Loucks

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# Сам Себя Издат

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# I. And That's When All Hell Broke Loose

**February 20, 1990, McKinley, Ohio**

"...and that's when all hell broke loose."

"You didn't see the shooter?" Deputy Kenseth asked.

"Not until later As I said, I was in Trauma 1, treating the seventeen-year-old victim."

"Walk me through what happened next."

"Shelly, that is, Doctor Lindsay, had just left the room when I heard the first shot."

"You knew that immediately?"

"I've been around guns long enough to know a pistol report," I said. "And there is nothing in the ED that would make any similar sound. Deputy Sommers reacted instantly to the sound and ordered all of us to get down."

"Did you do that?"

"Not immediately, because we were treating the patient. When we heard a second gunshot, she ordered us to move behind the trauma table."

"What did you observe?"

"Deputy Sommers crouched, drew her service pistol, and carefully opened the door. Almost immediately, another shot rang out, striking her in the temple. Before I could move, I heard at least five rapid gunshots from at least two guns."

"How do you know it was multiple guns?"

"Different reports," I replied. "I suppose it could be location or echo or whatever, but there were at least two distinct reports."

"What did you do then?"

"I moved to Deputy Sommers while Doctor Nielson attended to the patient on the table."

"Did you see anything that happened in the corridor?"

"No. The door had closed when Deputy Sommers was shot."

"Is there anything else you can tell me about the incident?"

"Not really. I was in Trauma 1 the entire time during which shots were exchanged."

"OK. I think that's all I have for you at the moment. I'll be in touch if I have further questions."

"Thanks."

I got up, left the consultation room, and walked into the corridor. It was 2:12am, and the ED was still closed to trauma, as it was a crime scene. That meant VERY long transport times to Columbus for almost anyone in the area around McKinley.

"Mike, go home," Doctor Cutter said when he saw me. "Your next shift is canceled."

"I can get a few hours of sleep and come back," I said. "Normally, I'd just crash in the on-call room, but my wife is waiting up."

"No. Take the day. I'll call you and let you know when you can see Psych."

"Given my relationship with them, I'd prefer an outside counselor, if you don't mind."

"Did you have someone in mind?"

"Doctor Fran Mercer, in Milford. I've seen her off and on for the past nine years. She's a clinical psychologist."

"OK. Call her first thing in the morning."

"Do I need an assessment to come back to work?"

"You work at the Free Clinic on Wednesdays, right?"

"Yes."

"Do that. I'll speak with Gale Turner, but that's mostly routine physical exams, right? No procedures?"

"Correct. I'm morally opposed to elective abortion, so I don't participate in those procedures."

"OK. You're on the surgical service, so Owen can clear you to perform procedures. Make sure you speak to him tomorrow."

"I will. Thanks, Doctor Cutter."

"Go see your family."

I nodded and went upstairs to the surgical locker room, where I stripped off my scrubs, showered, and dressed in street clothes. Before I left, I touched Shelly's locker, said a silent prayer, and then headed home.



## **February 20, 1990, Circleville, Ohio**

"Hi," I said wearily when I walked into the house at 2:47am on Tuesday morning.

"How are you, Mike?"

"The adrenaline started wearing off in the car on the way home."

"Do you want to go right to bed?"

"As tired as I am, I don't think I could sleep right now. I'm going to make some chamomile tea."

"There's hot water in the kettle," Kris said. "I thought you might want some. Is there more news?"

I sighed, "Yes, but none of it good."

I put loose tea in a tea ball and set it in a mug, then poured in the hot water.

"Shelly is in critical condition in the ICU; Loretta was still in surgery at 2:10am; Deputy Sommers died from a gunshot wound to the head."

"Lord have mercy," Kris said quietly. "And the attacker?"

"Shot dead by Deputy Turner and Detective Kleist."

"Was anyone else hurt?"

"No."

"Do they know why it happened?"

"I can piece together some things from the original patients, and what was said, so this is by no means certain. The young woman with the three gunshot wounds was impregnated by an older next-door neighbor. The young woman's father took exception and confronted the neighbor. In the process, there was an exchange of gunfire between multiple people. The girl was shot, along with her brother; the neighbor who impregnated her was shot, and his wife was killed. The attacker at the hospital was the son of the woman who was killed."

"You Americans and your fetish for guns!" Kris said in exasperation.

"First of all, you're an American," I said with a wan smile. "Second, blaming the gun is like blaming a pencil for *Mein Kampf*. I'm not opposed to reasonable restrictions on gun ownership, such as prohibiting felons or the mentally ill from owning them. I also think permits are a good idea, but I would never support a ban on guns."

"Even after your two friends were shot?"

"I didn't think cars should be banned when Jocelyn was nearly killed in an accident or when Lee was murdered with one. But can we please set this aside for another time?"

"I'm sorry," Kris said. "I shouldn't have brought politics into it. Will Shelly and Loretta live?"

"I don't know," I sighed. "Shelly is in what the newspapers would call 'extremely critical' or 'grave' condition. She lost a lot of blood, and there was damage to her liver. If she survives the next twenty-four hours, she has a good chance of recovery. As for Loretta, the last I heard was she has a possible spinal cord injury. I wanted to scrub in but wasn't allowed."

"What happened to the patients?"

"Two of the three weren't in any real danger and were sent by ambulance to Columbus. The young woman coded before we could get her to surgery."

"You were in a treatment room the whole time?"

"Yes. I didn't go into the corridor for almost ten minutes after the shooting stopped because Becky and I were trying to save Deputy Sommers while Doctor Nielson was trying to keep the young woman alive. I didn't see either Loretta or Shelly because they were taken to surgery before I threw in the towel in trying to revive Deputy Sommers."

I removed the tea ball, put it in the sink, then sat down to sip my tea, with Kris sitting across from me at the dinette table in the kitchen.

"What happens now? The news said the hospital was closed."

"To trauma," I replied. "The ED is closed until they finish the investigation. When I left, the shooter was still on the floor, covered with a sheet, and evidence technicians were swarming the place. Doctor Cutter instructed me to take today off and to speak to a counselor. I'll speak to Doctor Mercer because the last thing I want to do is talk to anyone from Psych at the hospital."

"When will you go back to work?"

"Wednesday, at the Free Clinic. I'll speak to Owen Roth after I speak to Doctor Mercer. He has to clear me to perform procedures. That's normal for any psychological or physical trauma. I don't think it'll be a problem."

"How do you feel? I mean, besides tired?"

"OK, I think. But I'm probably not the best judge of that right now. My initial reaction was as a physician. I suspect the more time I have to think about it, the more it might affect me. Strangely, I was never afraid, just concerned for my patient and then Deputy Sommers."

"How long do you plan to sleep?" Kris asked.

"Until I wake up from the nightmare," I replied with a heavy sigh.

"My class today is at 1:00pm, so I have no reason to get up early, though Rachel will certainly be up at her usual time."

"Does she know?"

"No. I didn't turn on the news until after I put her to bed. She was unhappy that you weren't here, but I explained you were helping sick people and would be late. Thank you for calling right away."

"It was after I tried to revive Deputy Sommers," I said.

"I can't reasonably object to that," Kris replied. "You called as soon as it was practical. And you're safe. I think it's best to not watch the news in the morning, which I do sometimes after you leave for the hospital."

"Probably. We can't hide all the evil in the world from our children, but I think it's better she hears it from one of us than sees the news. At her age, who knows what's going through her little head. Back to sleeping, I think I'll sleep until around 7:00am and nap later. Is Rachel on her usual Tuesday schedule?"

"Yes. I'll take her to Abi's house on my way to the university and pick her up on the way home."

"Then I'll nap while you two are out."

"Are you sure you'll be OK?"

"I think so," I replied. "I'll call Doctor Mercer first thing."

I finished my tea, and Kris and I said evening prayers, then went upstairs. I completed my bedtime routine, then got into bed with my wife, set the alarm, and snuggled close to fall asleep spooned together.

I woke with the alarm at 7:00am and felt as if I'd been run over by a truck. I knew it was the aftereffects of the adrenaline rush, and there wasn't much to do about it except begin my day and wait for my body to recover. Kris and I got out of bed, took a shower together, and after we had dressed, I dialed Doctor Mercer's private number while Kris went to get Rachel.

"Fran Mercer," she said when she answered.



"It's Mike Loucks," I said.

"I heard what happened! Are you OK?"

"Physically, yes; Doctor Cutter instructed me to speak to a counselor."

"That's normal in these situations. Are you off work until you're cleared by someone?"

"Yes and no. Tomorrow is my day at the Free Clinic, and because I don't do any procedures there, I can do that. I have to speak to Owen Roth, the Chief Surgeon, to be cleared for procedures."

"I take it from this call you want to speak to me rather than someone in Psych at Moore?"

"You take it correctly and for what I think are obvious reasons."

"This kind of thing has to be done face-to-face because it's the only way to judge the answers. I know it's a long way to come here, but I could meet you in Rutherford at 4:30pm if that works for you. That way, I don't have to reschedule anyone."

"I could do that," I said. "My normal work schedule would have me on until 9:00pm, so it's not taking me away from any plans."

"Then I'll see you at 4:30pm in the same office in the medical building as we met before. How are the two doctors who were shot?"

"One is in the ICU in critical condition; the other was still in surgery when I left the hospital around 2:30am. I'm going to call and check as soon as we hang up, then I need to call my parents."

"They know you're safe, right?"

"Yes. Kris called them both last night after I called her."

"Good. See you later today."

We said 'goodbye', I hung up, then went downstairs and let Kris know the plans.

"Will you get enough sleep?" she asked.

"Yes. I'll take a two-hour nap, and I can sleep later tomorrow due to my usual Wednesday schedule. I need to call and check on Loretta."

"Of course."

I picked up the kitchen extension and dialed the number for Surgery.

"Surgical Nurses' Station," Kim Carter said.

"Hi, Kim," I said. "This is Doctor Mike. I'm calling for a status on Loretta Gibbs and Shelly Lindsay."

"Doctor Gibbs is in the CCU and is stable; Doctor Lindsay is in the ICU and is still listed as critical."

"Any word on Doctor Gibbs' injuries?"

"Neuro has to wait for the swelling to go down to make an assessment."

"Right. Thank you, Kim."

"Are you OK, Doctor Mike?"

"Better than they are," I replied. "If there are any significant changes, would you call me at home, please?"

"Of course, Doctor."

I thanked her, said 'goodbye', then hung up.

"No change on Shelly," I said to Kris. "Loretta is in the Critical Care Unit with stable vitals, but they can't assess her neurologically until the swelling goes down."

"What's the difference between that and intensive care?"

"For the most part, it's simply a matter of staff-to-patient ratio. It's much higher in the ICU, where a nurse usually only has two patients, or sometimes three; whereas in the CCU, it's four to six. In Loretta's case, it's because she could have further neurological effects, so putting her in a ward where the ratio is about eight or ten to one is too risky."

"But she's breathing on her own?"

"Yes. If she was on a vent, she'd be in the ICU for the first forty-eight hours. But that's not etched in stone. The other thing about the CCU is that they turn the lights down at night, whereas the ICU is always lit. Given that ICU patients are nearly always heavily sedated, that doesn't affect their sleep."

"You should probably call your parents," Kris said. "I'll make breakfast."

"Thanks."

I dialed my mom's house first, and Elaine answered. She asked how I was, then handed the phone to my mom.

"Hi, Mike. Thank God you're OK!"

"Hi, Mom," I said. "Sorry, I couldn't call last night. I didn't get home until nearly 3:00am."

"Kris called, which I'm sure she told you. How is everyone?"

"The two doctors are out of surgery and are what I would call 'guarded' if I had any mind to speak to the Press for any reason. We'll know more later."

"The news said it was a domestic dispute."

"Yes, though I know very little about what actually happened before the person walked into the ED with the gun. I didn't see anything that happened except Deputy Sommers being shot, but all I saw was her collapse."

"The news said the gunman was a former Army Ranger."

Which explained how he managed to shoot Deputy Sommers in the head with the door only open a few inches.

"Well, Deputy Turner and Detective Kleist took him down with five shots," I said. "All of them hit center mass, according to Deputy Kenseth."

"Have you spoken to your father?"

"He's next. I assume you told your parents and Liz?"

"Yes."

"Thanks. I'll call Grandfather in a bit. I'll be in Rutherford, and I'll probably stop in to see him."

"Rutherford? Why?"

"I'm meeting Doctor Mercer for a counseling session. It's required before I'm cleared to do procedures. It's all standard. The ED is closed until at least noon."

"What happens to people who need the ED?"

"EMS would transport them to the nearest hospital, which for McKinley is Columbus, but in the western part of the county, they'd take them to Rutherford. Other areas could go south or east. The rest of the hospital is open and operating normally, though I suspect there is a large law enforcement presence."

"I'm just glad you're OK, Mike."

"Thanks."

I said 'goodbye', then called my dad and had a similar conversation with him. I called my grandfather, and when he heard I was going to be in Rutherford, he asked me to come to dinner, and after checking with Kris, I agreed. My final call was to Internal Medicine.

"How are you doing, Petrovich?" Clarissa asked when she came on the line.

"Like I'm on the back end of an adrenaline rush."

"I tried to come see you before I left, but they wouldn't let anyone into the ED because it's a crime scene. They did tell me you weren't hurt."

"Did they say when they'd open to trauma again?"

"2:00pm. Are you coming in?"

"No. I was told to take the day off and to see a counselor. I'm going to see Doctor Mercer later today. I'm allowed to work at the Free Clinic tomorrow, but Owen Roth has to sign off on me doing procedures. Supposedly, that's standard procedure."

"I can see it," Clarissa said. "Mental, emotional, or physical trauma could easily impact your work. Did you hear the latest on Doctor Gibbs and Doctor Lindsay?"

"Yes. I called the Nurses' station this morning. I take it the place is still swarming with cops?"

"They're checking IDs of everyone who comes in at every entrance; there are at least a dozen squad cars and cruisers at various places. Do you know anything about what caused it?"

"No more than was on the news. Fortunately, I was in Trauma 1 during the whole thing. Shelly was there but left to triage the other two patients, which is when she was shot. Deputy Sommers was shot right in front of me, though."

"Jesus, Petrovich! But how?"

"She drew her service pistol, crouched down, and opened the door to respond. A round was fired, striking her in the right temple. We tried for ten minutes, including intubation, bagging, and CPR, but it was useless. She never had a pulse, and I'm fairly certain her pupils were fixed and dilated before Becky and I got to her a few seconds after she was shot."

"And you're really OK?"

"I am. I'm sure it'll hit me at some point, which is why I was ordered by Cutter to see someone. Fortunately, he let me slide on seeing someone in Psych."

"Smart move. Those headshrinkers would use it to exact revenge."

"Fortunately, all they could do would be make a recommendation. It's up to Owen Roth. But the last thing I want is something like that in my medical records at Moore."

"I hear you. I need to go, Petrovich. Call me if you need anything."

"Thanks, Lissa."

We said 'goodbye', and I replaced the handset on the hook, only to have the phone ring immediately.

"Korolyov-Loucks residence; Mike speaking."

"Oh, thank God!" Maryam Khouri gushed. "I was so worried when I saw in the newspaper two doctors had been shot in the ED in McKinley! Who?"

"Shelly Lindsay and Loretta Gibbs."

"Lord have mercy! How are they?"

"Shelly suffered a gunshot wound to the abdomen and lost a significant amount of blood. One lobe of her liver was removed. She's in critical condition in the ICU. Loretta was shot in the back, and there was involvement of her spine. She's in the CCU after surgery, but until the swelling goes down, they won't know about any impairment."

"I'll pray for them and for you, too."

"And for Deputy Sommers," I said. "She was killed protecting a patient, Perry Nielson, me, our med students, and nurses."

"Lord have mercy! You were shot at?"

"No. We were all in Trauma 1; she was with us checking on the patient, and when the shots rang out, she drew her service pistol and opened the door. A shot rang out, and she went down from a round through her right temple. The shooter was killed seconds later by Deputy Turner and Detective Kleist, but by that time, he'd shot both Shelly and Loretta."

"Is everyone else OK?"

"Yes."

"Good. I'll let you go; say 'hello' to Kris and everyone for me. Call soon, please."

"Thanks, I will."

We said 'goodbye', and I hung up, then helped Kris finish making breakfast. We had just sat down to eat when the phone rang, and I debated if I should answer it and decided I needed to.

"Korolyov-Loucks residence; Mike speaking."

"Is this Doctor Michael Loucks?"

"Yes. Who's calling?"

"Carl Peabody, *McKinley Times*. I'd like to ask you some questions."



"No comment," I said. "Please contact the Hospital Administrator's office for an official statement."

"I want to get another perspective."

"I'm not interested in answering any questions."

"Can I leave a number?"

"You can, but it won't change my answer."

He insisted, so I wrote down the number and then hung up.

"Why not talk to the Press?" Kris asked.

"Because I don't want to," I said. "The last thing I need to do is say something that creates a problem for the hospital or the Sheriff. And I'm absolutely not going to violate Loretta's or Shelly's privacy. Talking to doctors is OK, but not the Press. Not to mention, I'm positive I'll be asked more about Deputy Sommers."

"How could it be a problem for the Sheriff if the attacker is dead?"

"I don't know, and that's a good enough reason not to say anything. I honestly don't know if there was an accomplice or if there is more to the original crime."

"Do you think there was?"

"I doubt it, but who knows? The Sheriff will sort it out with help from the McKinley PD. It's outside the city limits, so the Sheriff is the lead, but there's some kind of joint response agreement between the City and the County."

We finished breakfast, cleaned up the kitchen, and said our morning prayers. Rachel, unsurprisingly, asked me to play my guitar and sing to her, so I did that for about an hour. I was interrupted twice by phone calls -- one from Doctor Blahnik and one from Father Nicholas, both of whom I assured I was OK.

When I finished playing for Rachel, Kris and I agreed it was nice enough that we could go out for a family walk. When we returned, I built a fire in the fireplace. We spent time playing with Rachel, and I fielded calls from Peter Baldwin at Emory, as well as my godparents, Geno, Tasha, and José, who promised to call the rest of the band. The final call of the morning was from Jocelyn, and I reassured her I was OK.

Kris, Rachel, and I had lunch around 11:30am. Once we finished lunch, I cleaned up while Kris got ready for class and prepared Rachel's bag. She and Rachel left, and I went to take my nap.



## **February 20, 1990, Rutherford, Ohio**

"How are you doing, Mike?" Fran Mercer asked when I sat down on the couch in her friend's office.

"I've mostly recovered from the aftereffects of the adrenaline surge. I slept about three hours, then took a two-hour nap before I left to come see you. Tomorrow is my day in the Free Clinic, so I can get enough sleep tonight."

"Who is it I'll need to call after this session?"

"Doctor Owen Roth, the Chief Surgeon. I called him right before I left, so he'll expect your call. Tomorrow would be OK, as I'll be at the Clinic."

"I'll call as soon as we finish. Are you nervous about going back to the hospital?"

"I don't think so," I said. "I suppose the real question is how I'll feel when I walk into the ED on Thursday."

"Does some rule prevent you from stopping in tomorrow?"

"No. I wasn't told to stay away, just to take today off, which isn't surprising given I'd already been at the hospital for nearly twenty-one hours and wouldn't have had the minimum eight hours off between shifts. That can be waived in an emergency, but given the ED was closed to trauma until 2:00pm today, it was easy for them to rearrange staffing."

"I suggest you go in, spend at least a few minutes there, and see how you feel, then call me. Could you do that at lunch tomorrow?"

"Yes."

"How are the doctors?"

"Confidentiality applies," I said.

"Yes, of course."

"No change for Doctor Lindsay, which is a good thing, given she had liver damage. If she makes it through to tomorrow morning without a setback, her prognosis will be good, though she won't be out of the woods. For Doctor Gibbs, the post-surgery swelling is going down, but it'll be Thursday morning before we know if there is any neurological damage."

"Paraplegia?"

"That's the concern. She's breathing without a vent, and her vitals are stable. All we can do is wait to see what happens."

"You didn't see either of them shot, right?"

"Correct. I did see Deputy Sommers shot and killed."

"Tell me about that."

"She heard the gunshots, ordered us to take what cover we could behind the trauma table, and then drew her pistol. She crouched and opened the door and was struck in the temple almost immediately. She collapsed, bleeding profusely, and perhaps two seconds later, a nurse and I moved to her while Doctor Nielson attended to the shooting victim whom we had been treating.

"I immediately called for an intubation kit, which my student brought me. The nurse performed CPR while I intubated, and then my student began bagging. I checked for a pulse and found none, and heard no heart sounds. We continued CPR for another five minutes with no success. I then checked the Deputy's pupils and found them fixed and dilated. Given the obvious brain injury, I determined further resuscitation attempts would be futile and called time of death.

"At that point, the nurse, my student, and I moved to help Doctor Nielsen as the seventeen-year-old gunshot victim had coded due to hypovolemia. We ran in several units of blood and tried multiple doses of epinephrine, but it was to no avail, as she'd bled out. We *might* have been able to save her without the attack, but it would have been dicey, given her wounds."

"A coolly clinical report, just as I would expect from you. What happened next?"

"Just as Doctor Nielson called time of death, Detective Kleist came into Trauma 1 and gave us the 'all clear' but asked us to stay in the room until they could escort

us out without disturbing the crime scene. That happened about twenty minutes later, which is when I found out Loretta and Shelly had been shot and the gunman killed by law enforcement. We were asked to sit in the lounge and wait to be interviewed, and I took that opportunity to call Kris and let her know I was safe."

"What were you thinking when the Deputy was shot?"

"Only about our patient and the Deputy," I said. "My mind was completely clear and focused on trying to save their lives. I felt the adrenaline effects where time dilates and thinking is rapid and clear. I was on autopilot until we pronounced both patients."

"When did the adrenaline begin to wear off?"

"When I was driving home," I said. "Fortunately, it's a relatively short drive because, by the time I arrived home, I was thoroughly exhausted but not tired. I was, in effect, still wired even though I felt the physical effects of the adrenaline wearing off."

"When you slept, did you dream?"

"No."

"Did you take anything to help you sleep?"

"Just chamomile tea before bed early this morning; nothing before my nap. I did skip coffee this morning."

"That was wise. Did you, at any point, think, 'I need a drink'?"

"No. The only thing I said I needed was sleep. Kris was waiting up for me, though Rachel was asleep. We didn't say anything to her this morning."

"Probably wise. At two-and-a-half, she'd have a very difficult time processing what happened. How is Kris?"

"She hadn't heard what had happened before I called, so she didn't have time to worry about me. She was obviously concerned after I told her, but the fact I was safe limited that. She called my parents to let them know, as well as her family."

"Do you feel ready to resume work?"

"Yes," I replied. "I'm sure I'll have somewhat closer supervision for the next few days, but that doesn't bother me. Do you have any concerns?"

"Always when someone is involved in an incident which could lead to post-traumatic stress disorder. And you know the symptoms can take some time to appear. But I think you can safely go back to work, so long as you commit to calling me with *any* symptoms -- sleeplessness, nightmares, inordinate fear, and so on. Who's going to hold you accountable?"

"Rachel!"

Doctor Mercer laughed, "Yes, of course; now, the serious answer?"

"Clarissa, of course. And Ghost -- Doctor Casper. Normally, it would be Shelly Lindsay, but she's in the CCU. And, of course, Kris will hold me to account at home."

"How is she doing?"

"Great! She's four months along, so she's showing, but she's not uncomfortable. Rachel is very interested in a baby sister but not so much a baby brother!"

"Are there any little boys with whom she gets along well?"

"My godson, Michael, but she also met a boy at the park, and Kris said she played nice with him. I really think it's just little Viktor and some other boys being so rambunctious. "

"I can't imagine that was you when you were little."

"As my mom once said, Jocelyn did a good job of keeping Dale and me in line, starting with me in kindergarten and Dale in second grade."

"How are things going otherwise?"

"Fine. There have been some positive changes in the trauma surgery program, and I'll have a PGY1 in June rather than two years from now. They accelerated the program so that when the new surgical wing opens, we'll have a full complement of trauma surgeons. Our draft class for the Match looks good, too.

"My schedule is tentatively set for 5:00am to 5:00pm on a general surgical team one week and covering the ED the next. The new PGY1, who should be Mary Anderson, a Fourth Year I've trained, will cover the ED when I'm in surgery and nights when I'm in the ED. It's a lousy schedule for her, but she'll get more training that way."

"Those swapped schedules stink, but at least they're only twelve hours."

"And it's better than ninety-plus hours per week. The only downside for me is I won't have an assignment at the Free Clinic. And neither will the new PGY1. I

felt that was valuable, but it's only for ED and Medicine Residents going forward.

"Let's skip our call in the morning and schedule one for a week from tomorrow. We can cover both topics then."

"OK."

I thanked her, left, and headed to my grandfather's house. I wasn't surprised to find my mom, Stefan, Elaine, and April there, along with Paul, Liz, and Michael.

"How are your doctor friends?" my grandfather asked.

"Alive and with a chance to recover," I said. "Unlike the Deputy. Perry Nielson, one of the Attendings, said it was crazier than anything he had seen at Cook County in Chicago, and that hospital ED is basically the craziest in the country. What do you think of what's happening in the Soviet Union?"

"I believe the phrase is guardedly optimistic," my grandfather replied. "We shall see if the Communists are telling the truth, or if this is mere «маскировка» (*maskirovka*)."  
("deception")

"Changing to a subject closer to home," Mom said. "How is Kris feeling?"

"She's fine. No morning sickness or any other discomfort; Liz, how are you doing?"

"About the same. I'm due about three weeks after Kris."

"How's Emmy?"



"Itching to go back to work! She's back in about three weeks. She loves having Carrie, but she is def not a stay-at-home mom!"

"No kidding!"

"She'd love to see you if you have time to stop in. I could call her."

I thought about it and nodded, "Just fifteen minutes, but yes, I'd like that. I'm going to stop and see Dad, and I'll stop by Emmy's after that."

Liz made the call, and after dinner with my extended family, I stopped in to see my dad and answered the same questions I'd answered for everyone else. I spent about thirty minutes at my dad's house, then headed to Emmy's house.

"And here we are, unable to play doctor!" she teased after a hug.

"That was a long time ago, Deputy!" I said. "Not to mention we're both married to other people!"

"True! I spoke to Scott Turner. He put three in the asshole's X-ring."

"And Detective Kleist from McKinley PD added two for good measure. Sorry, I couldn't do anything for Tracy Sommers."

"Not your fault, Mike."

"Thanks. Can I see Carrie?"

"She's sleeping, so if you're quiet."

"Been there, done that," I chuckled.

Emmy laughed and nodded, and we walked down the hallway of the ranch house she and Al had bought just before Carrie had been born. Carrie was a cute little infant, and after about thirty seconds, we went back to the living room.

"Scott told me you disarmed a perp in the ER waiting room."

"A wrist lock that prevented him from pulling a gun from his jacket pocket. Deputy Turner was first through the door, and I called out to him. I didn't disarm the guy, but I certainly prevented him from being shot by the second-best shot in the state!"

Emmy laughed, "He'll never live down being beaten by a girl! Al won't shoot with me because I kick his ass every time!"

"You seem to be very happy."

"I'm doing something I love, and which I'm very good at, and I have a wonderful new daughter with Al! What else could I ask for?"

"I'm glad."

"And you?"

"Mostly happy at work and looking forward to baby number two; well, the first with Kris."

"Mostly happy?"

"There have been some ups and downs, but things are pretty good. A bit more drama than I would have preferred, but until yesterday, I would have said things were going as well as could be expected with a new program."

"You enjoy it, though, right?"

"Like you, I'm doing what I love and something I'm good at."

Emmy smirked, "True when I was sixteen and you were eighteen, too!"

"Fond memories! I do need to get going because my girls are waiting for me."

"Don't be a stranger, Mike! Let's get the families together."

She walked me to the door, we hugged, and I walked to my car. I waved, got in, and headed back to McKinley.



## **February 21, 1990, McKinley, Ohio**

"How are you doing, Mike?" Gale Turner asked when I arrived at the Free Clinic on Wednesday morning.

"I'm OK. I saw a counselor yesterday, and she called Owen Roth to clear me. I spoke to him this morning, and I'll be back doing procedures tomorrow."

"Good. You'll have only exams and birth control requests today. I'll handle anything else. That's per Doctor Cutter."

"Understood."

"OK. Get to it!"

I left his office and went to the break room, where Trina jumped up and hugged me.

"I'm so glad you weren't injured," she said. "When I heard two doctors were shot, I thought the worst. How are the doctors?"

"Shelly Lindsay is improving and will be moved to CCU from ICU today. Loretta Gibbs will have a neuro exam later today. She's still in the CCU."

"Hi, Doctor Mike!" Nurse Michelle said, coming into the break room. "I'm glad you're OK."

"Me, too!"

"We have our first patient," she said. "Employment physical for the PD."

"Sworn officer or civilian?"

"Sworn officer; a detective coming here from a small town in Eastern Kentucky. She actually started on Monday."

"OK. Bring her to the exam room, and we'll get started."

The exam was routine and was the first of seven appointments before lunch, six of which were either for new or renewed prescriptions for birth control. When it was time for lunch, I let Doctor Turner know I was heading to the hospital to do what Doctor Mercer had suggested, and about ten minutes later, I parked and went in the usual entrance, which was now staffed by a security guard. He didn't ask for ID, so I walked down the long corridor, past the main entrance, and into the ED, where a Sheriff's deputy checked my ID before admitting me.

"Mike?" Ghost said. "Is everything OK?"

"Yes," I replied. "My counselor suggested I come visit today to see how I felt walking into the ED."

"How *do* you feel?"

"Strange because I'm wearing a tie and my medical coat! How is Loretta?"

"Not good. They called for specialists from Cleveland Clinic and OSU to consult."

"Is she awake?"

"Yes, I'm sure she'd want to see you if you have time."

"I'll make time," I said. "Any update on Shelly Lindsay?"

"Bob Aniston said she's out of the woods but will have a long recovery."

"That's a relief. Did they move her to the CCU?"

"Yes."

"OK. I'm going up to see them, but I need to step into Trauma 1 first, if it's open."

"It is."

"Thanks."

I walked into Trauma 1 and still felt OK, so I left the ED and headed to the CCU to see Shelly and Loretta. I spoke with the charge nurse, and she gave me permission to enter the CCU ward. I saw Shelly Lindsay first and stopped at her bed.

"Hi, Shel," I said. "How are you doing?"

"Feeling no pain," she said, holding up the control that let her dose herself with pain medication.

"Ghost said you're in good shape, all things considered."

"The worst part is being stuck in bed here for several weeks."

"Nobody likes being in the hospital, and we doctors are the worst patients. I only have a few minutes before I have to leave to get back to the Free Clinic, so I'm going to see Loretta."

"They told you, right?"

"Yes. I'll come see you every day."

"Thanks."

I squeezed her hand, then walked over to the opposite end of the ward.

"Hi, Lor,"

"Hi, Mike."

"I'd ask how you were doing..."

"They told you, right?"

"Yes. What did Baker and Cohen say?"

"Not much beyond the damage is at L3."

Which meant basically no function below her navel if the damage was permanent.

"Is there anything I can do for you?"

"Put in a good word with the boss? And I don't mean Cutter."

"You're in my prayers every day, Loretta. Have you seen Bobby and Bobby Junior?"

"Bobby came up to see me after a run this morning. I can't see Bobby Junior until I'm out of the CCU."

"OK. I'll come see you tomorrow. I need to get back to the Free Clinic."

"Thanks for coming, Mike."

"You're welcome."





## II. Aftermath

### February 22, 1990, McKinley, Ohio

On Thursday morning, when I arrived at the hospital, Nurse Nicole let me know that Doctor Roth wanted to see me. I decided to go straight to his office, wearing my tie and medical coat, and change afterwards.

"You wanted to see me?" I said to Doctor Roth from the door to his office.

"Come in, please, and shut the door."

I did as he asked and sat down across the desk from him.

"How are you?"

"Fine," I said. "I slept OK last night, and I don't feel impaired in any way."

"Good. We have a bit of a staffing problem with losing Shelly for an extended period of time. I spoke with John Cutter and Brent Williams, who's the Acting Chief in the ED, to work out a solution. We've had to juggle, and Medicine is going to lend Emergency Medicine two Residents and bring in *locum tenentes* to cover. Two are necessary, as he needs to cover for Loretta and for you.

"I'm sure you know that it's nigh on impossible to fill an empty Resident slot in February, and Shelly is a PGY5. The best we could possibly do is someone who failed to Match last year, and that is not something I want to contemplate. That means you'll take on some of Shelly's role and be on-call for the ED. Basically, going back to the old way, or how it is when you aren't on shift."

"It sounds as if my hours are changing."

"As of today, unless you need time to make arrangements for childcare. You'll have Shelly's current 0500 to 1700 shift, the same as we plan for you to have in June."

That meant I could leave at 5:00pm, which was a good thing, and having my weekend free was a good thing. There was, though, one concern.

"What about the Free Clinic?" I asked.

"Doctor Saunders will take over that shift," Doctor Roth said. "We can't afford to lose a surgeon, even if you can't completely cover for Shelly."

I really didn't want to give up that shift, but there wasn't much I could do about it, as nobody outside surgery could perform the procedures I was authorized to do in the ED.

I nodded, "OK. Who from Medicine?"

"Doctor Gómez and Doctor Saunders. The rule used to be more senior Residents, but Doctor Saunders has completed her ED rotation and had very high marks. She works a shift schedule almost identical to yours, so she'll take on your students; you'll take Shelly's."

"The ED will be short an Attending," I observed.

"Fortunately, that's not my problem," Doctor Roth said. "Brent Williams was authorized to accelerate hiring an Attending who was to start in June. He can fill you in, if you want more information."

"OK. Who are Shelly's students?"

"Erin Jackson and Todd Blythe. You interviewed Erin, and she's on our Match list; Todd is Third Year and hasn't decided."

"OK. Does Brent know I won't be in the ED today unless I'm called?"

"Yes."

"Dress code?" I asked with a raised eyebrow.

Doctor Roth laughed, "John Cutter said to cut you some slack and say it would be OK for you to conduct rounds in your scrubs."

"And what do *you* think?"

Doctor Roth smiled, "That 'advice' from Cutter is similar to 'advice' from your Bishop!"

I laughed and nodded.

"And off the record?"

"I think the public perception is that patients are actually more comfortable with a doctor in scrubs in the hospital. In private practice, ties and medical coats are still appropriate."

"I appreciate it. Who is handling Shelly's surgeries?"

"Some of the more junior Residents will have a chance. I'll see what I can do for you, but with you covering the ED, we have to be smart about it."

"Am I cleared for all procedures?"

"I don't see why not. You seem to be on an even keel, and Doctor Mercer believes it's OK to throw you back into the fray. Go find your students and bring them up to speed on the new plan. You'll be supervising prepping Burke's patients today and tomorrow. Shelly was on his team."

"Any updates on Shelly or Loretta?"

"Shelly continues her recovery, and if it continues apace, she'll move from the CCU to Medicine on Monday. Her liver function is good, which was the obvious concern besides the hypovolemia. Loretta has an incomplete SCI at L3. Late yesterday, she regained some sensory function in her right leg, which is a hopeful sign but is not definitive one way or the other. Neither specialist is willing to make any kind of prognosis at this point."

"OK. I'll check in on both of them each day I'm here."

"Then get to it, Doctor!"

"Right away!"

I left his office and went to the locker room to change into my usual red scrubs, then went to the lounge where I saw a pair of students -- a short brown-haired girl and a lanky black-haired guy.

"Good morning, Erin; I presume you're Todd?"

"Yes," he said as they both stood up.

"Hi, Doctor Mike," Erin said. "Shall we present the pre-ops?"

"Yes, please. A quick note before you begin -- things will change because I have a different role from Doctor Lindsay. Todd, I'll want to see your procedure book after Erin presents."

"We have two procedures today," Erin said. "We verified all labs and vitals for each patient are in range..."

"Sorry to interrupt, but I'd like to hear the actual vital signs and any labs that are borderline, please."

"Sorry, Doctor."

"It's OK. I do things differently. Continue, please."

"Patient one is a sixty-seven-year-old male scheduled for a resection of a functional adenoma. BP is 150/82; pulse 75; PO<sub>2</sub> 98% on room air; EKG shows normal sinus rhythm with no variation; fasting glucose is 162; cleared for surgery by Doctor Burke.

"Patient two is a nineteen-year-old female scheduled for excision of an osteochondromas of the right knee. BP is 114/62; pulse 64; PO<sub>2</sub> 99% on room air; EKG shows normal sinus rhythm with no variation."

"Distance runner?" I asked.

"Marathons," Erin replied. "All labs were completed and verified for both patients and no anomalies other than the fasting glucose on patient one. Both have been NPO since midnight."

"What's next?" I asked.

"Patient one needs to be shaved and an IV inserted."

"OK. We have a few minutes before we need to do that. Todd, may I see your procedure book?"

Todd handed me his book, and I flipped through it. While I had interviewed Erin, I hadn't worked with her, as I hadn't been in the ED when Erin had served her Clerkship. Her Sub-I would be in April and May, but with my new assignment, I wouldn't see her in the ED.

Todd hadn't had an Emergency Medicine rotation -- it was scheduled for April and May as well. His book showed what I considered sufficient procedures for a Third Year who hadn't yet had his Emergency Medicine Clerkship.

"I'm assigned to cover the ED," I said. "That will be our main focus. The usual procedure is for the Fourth Year to stay on the ward and the Third Year to accompany me. If possible, I'll take you both to observe. Any questions?"

"Will we have a chance to scrub in?" Erin asked.

"I can't promise, given I'm a PGY1, and I've been assigned to the ED as part of the trauma surgery program. Let's go see our first patient. Todd is to present when we go into the room. Please introduce me as 'Doctor Mike'."

"Yes, Doctor," he said.

The prep was routine, with Erin inserting the IV and Todd shaving the area where the incision would be made. Doctor Burke came to check on the patient, and Erin presented. Shortly after he left, anesthesia arrived, and twenty minutes later, we moved the patient to OR 2.

"I'm going to go check on Doctor Gibbs and Doctor Lindsay," I said. "Use the time to study, please."

I left the surgical ward and headed for the CCU to see both Shelly and Loretta.

"Morning," I said to Shelly Lindsay. "I hear things are looking up."

"That's what they tell me. Give me a peek at my chart?"

I chuckled because patients weren't usually allowed to review their own charts, and there was no official exception for doctors. I took the chart from the hook at the end of the bed and handed it to her. She flipped through it, handed it back, and I hung it on the hook again.

"Hoping to get rid of the catheter?" I asked with a grin.

"Yeah, but the screws won't let me out of bed until I move to Medicine."

"I've been inside Southern Ohio Correctional Facility in Lucasville," I said. "This is *nothing* compared to that!"

"What were you doing there?"

"Prison ministry. I thought I told you about that, but perhaps not. Anything I can get you?"

"A pizza?" Shelly suggested.

"I wonder if anyone has ever tried to call for delivery from a hospital bed?"

Shelly laughed, "I should do that just to see Baker's reaction!"

"On a serious note -- anything I need to know about your Third Year?"

"He's competent and attentive, about all we can say about most Third Years. You know we put Erin on our Match list, though I don't know if we're her first choice."

"Where else did she interview?"

"Every hospital in Cincinnati. If you recall, she's from Milford, and I think she'd prefer to go back."

"I had the impression during the interview that she had a reason to be in this area."

"Boyfriend, but they broke up right before her Match list was due."

"Well, that was inconvenient. I take it he works here?"

"He's an engineer who works for the McKinley Water Department. They met at a chess tournament and then went to UC together."

"We played against Milford during my Junior year in a regional tournament, but I don't recall seeing her. And I haven't played much at all since I graduated. I bet she knows a friend of a friend who I met in Cincinnati. Anyway, I need to see Loretta and then get back to the ward. I'll come see you tomorrow; call me if you need anything I can provide."

"Thanks, Mike."

I squeezed her hand and then went to Doctor Gibbs' bed.

"Morning, Lor," I said. "Owen Roth said there was a significant improvement."



"Hi, Mike. I have feeling in my right leg except for a few spots on my inner thigh; no voluntary muscle movement, though."

"You had significant trauma, Lor. It's only been three days. Getting feeling back is a good sign. Did they tell you about the staffing changes?"

"No. What?"

"Clarissa Saunders and Antonio Gómez are assigned to the ED until the end of May; I'm covering for Shelly but handling ED consults during my shifts. Obviously, I can't do everything Shelly did, but they're short surgeons, so I'll be doing most of the daily scut. Burke is bringing in two *locum tenentes* to cover for Clarissa and Antonio. Clarissa will cover my Free Clinic shift as well. Owen Roth says that Brent Williams is going to try to accelerate hiring an Attending and has permission to hire right away if he's able."

"What a mess," Loretta said. "Any more information about what happened?"

"The Sheriff is not saying much because they're still investigating the original incident. He scheduled a press conference for 1:00pm tomorrow to give a status update. They did arrest two suspects in the original incident. You know what happened with the guy who attacked you and Shelly and killed Tracy Sommers. Her funeral is tomorrow."

"Scott Turner, right?"

"And Jill Kleist. Five rounds total, all hits."

"How are you doing?" Doctor Gibbs asked.

"I'm sleeping OK and have no nightmares. I went to the ED yesterday and didn't have a bad reaction."

"Keep talking to your counselor."

"You, too. I hate to cut this short, but I need to get back to the ward. I'll stop in on my way out today."

"Thanks, Mike."

I left the CCU and returned to the ward just in time to be called for a consult. I went to the lounge and asked Todd to join me, and we went down to the ED.

"Mike Loucks, surgery," I said, walking into Trauma 2. "What do we have?"

"Hi, Mike," Naveen Varma said. "Kelly Jordon; twenty-year-old female; high-speed MVA; stable vitals; unit of cross-matched whole blood; abdominal guarding and distension; no penetrating wounds. Ultrasound is ready for you."

"Thanks, Naveen."

I performed an exam and confirmed Naveen's observations, then performed an ultrasound.

"Free fluid in Morison's," I said. "Todd, call upstairs and let them know we have an ex-lap with possible splenic involvement. Report the vitals, please."

"Right away, Doctor Mike!" Todd replied, then made the call.

After a brief conversation with the nurse, he said Doctor Roth wanted to speak to me.

"Yes, Owen?"

"Looks like it's you and me," he said. "Bring your patient up, and both your students can scrub in. We'll decide on whether to do an open or laparoscopic procedure after evaluation."

"We'll be up shortly," I said.

I hung up and asked Naveen to have one of his students call for transport, which they did. Eight minutes later, we wheeled Ms. Jordan into OR3. Todd and I went to the scrub room where Erin was already scrubbing in under the watchful eye of Nurse Ellen. Once we all finished scrubbing in, we joined Doctor Roth, Doctor Birch, and an anesthesiologist I didn't recognize.

"Open procedure, Mike," Doctor Roth said. "You're third surgeon, so you handle the suction, and if there are no complications, I'll have you close."

"Understood," I said.

Fifteen minutes later, the spleen was exposed.

"That doesn't look like a lot of damage," Paul Birch observed.

"I agree," Doctor Roth replied. "Mike, what's the choice for the best prognosis?"

"Resection," I replied. "It's possible to repair minor splenic lacs, but in anyone over eighteen, splenectomy is the preferred choice, based on overall outcomes."

"Mike is correct," Doctor Roth said. "Paul, this should be an easy one. Are you ready to perform your first splenectomy?"

"I am," Doctor Birch replied.

"Then switch places with me, and I'll assist."

The procedure was textbook, with no complications, and I was allowed to close, something I'd done several times. That boded well for my training rotation, which would start in June, as I had demonstrated proper technique and knowledge to move to the next phase, which would include performing initial incisions.

When I completed the last suture, Doctor Roth asked Paul to take the patient to recovery, as I had to remain on call. I was extremely happy I hadn't been called out of the surgery, as that was a distinct possibility, given we were short-staffed.

I had just changed into fresh scrubs when Sarah, the Charge Nurse, let me know that I was needed in the ED for a central line. I called to Todd, and we took the stairs down to the first floor and hurried down the corridor into the ED. I stepped into Trauma 3 to find Ghost and Clarissa working on a patient who had been in a construction accident. I quickly inserted the central line, then, at Ghost's request, performed a pericardiocentesis and finally performed a surgical assessment.

"I'll take him," I said. "Todd, call up and let them know we have a patient coming right up."

He made the call while Ghost filled me in on the vitals and treatment. Clarissa, Max, Todd, and I transported the patient to OR3, which was being hurriedly prepared by the nurses.

"What do we have, Mike?" Doctor Roth asked when my students and I joined him in the scrub room.

"Traumatic amputation of the left arm at the elbow; central line and two litres of plasma; fluid in the pericardium aspirated by pericardiocentesis; BP 90/50; tachy

at 110; intubated; PO<sub>2</sub> 96%; five of morphine in the field; tourniquet applied just under forty minutes ago by a co-worker. No recovery of the severed limb."

"Any other injuries?"

"None appreciated. Main concern is hypovolemic shock, but the tourniquet was applied almost immediately and the paramedics got plasma into him right away, along with IV saline."

"OK. It's a cleanup job, then. How much of the arm is left?"

"The humerus appears intact to the trochlea. I'm not sure if there's enough muscle to cover the bone."

"Tendons?"

"None appreciated on visual inspection."

"Julie, get the fluoroscope set up, please," Doctor Roth said to the circulating nurse.

Five minutes later, we were in the OR, and Doctor Ross began examining the patient's arm.

"What have you got for me today, Owen?" Kenneth Cole from Orthopedics asked.

"Traumatic amputation of the left arm at the elbow. Humerus is intact, there does not appear to be enough muscle to cover the end of the bone, and there's significant ligament and muscle damage all the way to the deltoid."

Doctor Cole joined Doctor Roth, and they viewed the fluoroscope together, then Doctor Cole performed a visual examination of the injury.

"I suggest we revise the amputation to facilitate a prosthesis," Doctor Cole said.

"I concur," Doctor Roth said. "Todd, we're done with the fluoroscope," Doctor Roth said. "Please store it. Julie, bone saw tray, please. Mike, no need for you and your students to stay."

"OK," I agreed.

I was disappointed, but I knew I had responsibility for consults, and with Doctor Cole in the OR, there were four surgeons, as Doctor Cole's Resident had come with him. My students and I left the OR and went to the lounge.

"I hear you played on the Milford chess team," I said to Erin. "I know a guy who played with you -- Larry Higgins."

"Our best player! He's a Grand Master now. I take it you met him at a tournament?"

"Yes, and then again when Doctor Saunders and I went to interview at UC medical school."

"He didn't get in," Erin said. "So he decided to go to nursing school. He's working at The Christ Hospital in Cincinnati."

"Feel free to refuse to answer, but I strongly suspect you knew the guy who invented 'strip chess'."

Erin laughed, "Oh my God, talk about crazy! I'm sure you're referring to Steve Adams, but it was his girlfriend, Jennifer, who invented it."

"That's the guy," I said. "Was Milford as crazy as the rumors say it was?"

"And then some!" she said, shaking her head. "But it was a lot of fun!"

"I bet! Harding County High was not like that, despite the best efforts of my closest guy friend and me!"

Erin laughed, "I'm pretty sure our High School wouldn't have been nearly as crazy without Steve and his female friends. He's in Chicago now, and from what I hear, he runs a computer company."

"Todd, where are you from?"

"Detroit. I went to University of Detroit Jesuit High School and Academy, an all guys' school. That kind of limited the craziness!"

"Bummer!" Erin declared with a soft laugh.

"Yeah."

I checked my watch and excused myself to call down to the ED to see if Clarissa was free for lunch. She checked, and five minutes later, we met in the cafeteria.

"Having fun with your new assignment?" I asked.

"I did NOT sign up for this! Did you have anything to do with it?"

"No. I only found out this morning when I spoke with Owen. Given the surgical team is already understaffed, losing a senior Resident is a big problem, so they yanked me out of the ED three months early."

"Did you see Doctor Gibbs and Doctor Lindsay?"

"Yes. Loretta regained some sensory function in her right leg, which is a hopeful sign. Shelly's labs look good. She asked me to bring her a pizza."

Clarissa laughed, "And?"

"I suggested she order delivery, and she wondered what Baker would think about that."

"I don't think he'd be amused! Anything I need to know about your med students?"

"They're all basically average," I said.

"How are you holding up?"

"OK. The weird thing is I wasn't scared. I think I was too focused on trying to save Tracy Sommers and the seventeen-year-old victim. I'm very curious to see what Sheriff Tomkins has to say tomorrow. I can't piece together a sequence of events."

"I'm curious, too," Clarissa said. "What did you say to Rachel?"

"Just that Bobby Junior's mom was hurt. I'm not sure how you explain something like that to a two-and-a-half-year-old."

"I'm not sure how you explain it to a thirty-year-old!"

"What's your opinion of gun control?" I inquired.



"An impossible task and the end result will be that only the bad guys and cops have guns."

"Clark would say that means ONLY bad guys have guns!" I observed.

"But you don't agree, right? You've always had good relationships with the police and deputies."

"Except when Angie was missing," I countered.

"That was Dean «сука» (*suka*), not the cops!" ("bitch")

"I almost never use Russian these days."

"That's because you've done the one thing that NOBODY has done since Napoleon -- surrendered to the French!"

"And I very much enjoyed the surrender ceremony!" I said with a smirk. "So much so that I was happy to reenact it multiple times!"

"Doctor Pig makes his appearance!" Clarissa exclaimed with a laugh.

"I make no apologies for enjoying sex with a hot French girl!"

"You made no apologies for enjoying sex with ME, Petrovich! And I'm a lesbian!"

"You have the right parts in the right places, Lissa!"

"As I said, Doctor Pig!"

"Nah, Doctor Pig would have drinks with Jill Kleist or Louise Rehling at .38 Special or have taken Deputy Nelson up on her offer to play doctor!"

"Emmy still has the hots for you?"

"What can I say?" I asked with a grin.

"I know how you could make Clark laugh and then cry!" Clarissa smirked.

"How would YOU know?" I asked with an arched eyebrow.

"Just an educated guess based on statistics!" Clarissa smirked.

"And one confirmed by Emmy years ago," I chuckled.

Clarissa laughed so hard she attracted attention of others in the cafeteria. I simply continued eating my lunch nonchalantly.

"You're serious?" Clarissa asked a minute later when she'd finally regained control.

"Deadly', I smirked.

"Can anyone join this party?" Sophia asked, coming up to the table.

"Sure," I said.

"I have to ask -- what caused Clarissa to laugh so hard?"

"Mike has a reference who confirms that it's NOT true what they say about bwack men!" Clarissa said and giggled for the first time in years.

Sophia smirked, "I could have told you that from personal experience! Well, at least with regard to Mr. 'they said you was hung!'!"

"This convo just got WAY out of control!" I declared.

"Come on!" Sophia smirked. "You have to say 'and they was right!'"

"And this is where Doctor Mike says he needs to return to surgery!" I said, shaking my head.

"I heard they shuffled people around," Sophia said.

"I'm assigned to Emergency Medicine until the end of May," Clarissa said. "Mike is upstairs but handling consults."

"Have you been to see Doctor Gibbs and Doctor Lindsay?" Sophia asked.

"Yes," I replied. "Doctor Lindsay is doing well, and her liver function tests are all in range. Doctor Gibbs has recovered some of her sensory function in one leg, which is a good sign. And I hate to eat and run, but I do need to get upstairs to supervise my students prepping the next patient."

I left the cafeteria and returned to the surgical ward. The afternoon was routine, with two consults -- a rule-out appy and ingested coins -- neither of which resulted in admissions. At 5:00pm, I called home to let Kris know I was on my way home, that nothing was wrong, and that I'd explain once I arrived.



## **February 22, 1990, Circleville, Ohio**

"Overall, that sounds like a positive thing," Kris observed once I'd laid out the plans for the following three months.

"With regard to the schedule, yes, but you know me - I like the adrenaline rush that comes with Emergency Medicine."

"You'll just have to get 'high' on something else!" Kris said.

"My *other* rush comes from an activity which is increasingly complicated for the next six months!"

Kris laughed softly, "And yet, Doctor Forsberg says it's OK through the eighth month!"

"With some accommodation for your belly, which makes our preferred lovemaking position difficult!"

"Poor baby! He can have the «minou», but just not the way he prefers!"

"Despite what I said, it wasn't a complaint; it was an observation!"

"Well, this liberated French woman does NOT tolerate the usual antics by French men in such circumstances!"

"Nor does this 'reactionary' American!"

"Do you get hit on?" Kris asked.

"Occasionally," I said. "Interestingly, it's mostly cops because Becky and Kellie have put the word out to nurses and nursing students to stay away, which I appreciate. And no medical student who has enough brains to become a physician would do that at this point, given the changes to the rules."

"Male police?" Kris asked with a goofy smile.

"No!" I chuckled. "Detectives Rehling and Kleist, both of whom are divorced. I did get hit on by a guy once, many years ago. I politely declined, saying I was straight."

"Not Robby, right?"

I chuckled, "Robby and Lee flirted incessantly with me, to the point where Sophia called it 'foreplay' when he joked around. No, it was one of Milena's friends, and he was positive I was gay after two of Milena's female friends danced with me in a way that Sophia described as the hottest thing she'd ever seen where everyone was clothed! One of the girls was behind me, and one in front, and it was extremely obvious what they wanted. I declined, and that's when the guy hit on me."

Kris laughed, "Because no straight male would turn down a threesome with two hot girls?"

"That was his thinking. Let's just say that wasn't the only pair of girls I frustrated."

"Just how many opportunities did you have for having multiple girls at the same time?"

"Plenty!" I chuckled. "I revealed I had done that on two occasions, but, and I'm being completely honest, that was not my thing. I far prefer my one-on-one encounters with you!"

Kris smiled, "But a sexless *ménage à trois* is OK?"

"Before her final meltdown, Angie suggested that would be the case with whomever I married. I could see how you and she could say that about Clarissa,

especially given that she and I will eventually have a baby together. Artificially, of course."

"You love her more than anyone," Kris observed. "And no, I'm not jealous in any way. It's my little sister who is green with envy!"

I chuckled, "And yet, she has her eye on at least one boy at the Cathedral, so the crush will pass."

"Yes, of course! In my experience, they always do. The key is not to do something foolish because of what you Americans call 'puppy love'."

"I'm going to remind you that YOU are an American, my Franco-Russian partner!"

"And yet, I do not subscribe to many of the foolish ideas here, especially about guns."

"I actually had a brief discussion with Clarissa about that and pointed out that Clark would say the theory of 'only the government can have guns' results in *only* the bad guys having guns."

"Given the racism here, I can understand his point, but can you see mine?"

"If guns, like nuclear weapons, could simply disappear, human beings would still find ways to kill each other, both in small numbers and in large. Before nuclear weapons, we had World War I. How many died at the Battle of the Somme?"

"France lost at least 50,000 killed or missing, and the British Commonwealth nearly twice that many, including close to 20,000 on a single day. I don't know

how many of «Les Boches» were killed, but the total casualties were over a million."

"So, ten times Hiroshima or Nagasaki. I recall the number of German soldiers killed was over 150,000, which was more than either atomic bombing. Let's go back before machine guns -- how many French died in Napoleon Bonaparte's wars of conquest?"

"Close to two million French soldiers and civilians," Kris admitted. "And as many as five million from other countries."

"Who had most, if not all, of the guns?"

"You are VERY difficult, Mike," Kris said playfully.

"Thank you!" I declared. "Shall we make dinner and spend time together as a family before I take you to bed?"

"Yes!" Kris readily agreed.



## **February 23, 1990, McKinley, Ohio**

On Friday, at 1:00pm, the surgical staff who were not in an OR gathered in the lounge to watch the televised coverage of Sheriff Tomkins' press conference.

Ladies and gentlemen, I have a joint statement on behalf of Chief Donner and myself, then we will take questions.

At approximately 5:30pm on Monday, February 19, uniformed McKinley police officers responded to a domestic disturbance call made to 9-1-1. Upon arrival, police found

four gunshot victims, one of whom was deceased. Three victims were transported to Moore Memorial Hospital by the Hayes County Fire Department.

Detectives investigating the original disturbance call filed their final report yesterday with the following conclusions:

An adulterous, romantic relationship between a seventeen-year-old girl and fifty-six-year-old Jack Collins led to the minor girl being impregnated. When her father, Leroy Hoffman, discovered this, he confronted Mr. Collins by brandishing a handgun. The argument grew heated, and Kelly Collins, wife of Jack, retrieved a shotgun and advanced on the arguing men. The shotgun had not been cocked, but when she pointed it at Mr. Hoffman, he fired a round, striking her in the chest, killing her instantly.

Mr. Collins grappled Mr. Hoffman, and they struggled for the gun. The gun discharged, wounding Mr. Hoffman and leaving Mr. Collins in possession of the firearm. At that point, the minor and her older brother, Mark Hoffman, came upon the scene. Mark Hoffman drew a concealed handgun, and he and Mr. Collins engaged in a gun battle in which the minor girl was shot three times and her brother once, while Mr. Collins escaped any injury.

Police secured the scene, but unknown to them, Jack Collins Junior, age thirty-six, had left the scene and had made his way to the hospital in search of Mr. Hoffman. When he arrived at the hospital, he entered the Emergency Department through unsecured ambulance bay doors and was confronted by a nurse, who he shoved out of the way. He brandished the pistol and began looking for Mr. Hoffman.



At that point, he was confronted by Doctor Michelle Lindsay, who had just come out of a trauma room. He shot her once, in the stomach, then fired again, striking Doctor Loretta Gibbs in the back. At that point, members of law enforcement who were in treatment rooms responded. Mr. Collins took cover behind the nurses' station, and when he saw Deputy Tracy Sommers, he fired a single round, striking her in the temple, instantly killing her.

As he began to move, he was confronted by Deputy Scott Turner and Detective Jill Kleist, who each fired at him. Mr. Collins was struck by five rounds and died instantly, bringing the incident to an end.

Deputy Sommers, Deputy Turner, and Detective Kleist acted in the best tradition of law enforcement and brought the incident to an end with minimal loss of life.

The first question was the one I would have asked -- why there was no law enforcement presence in the corridor.

"Our practice, in such cases, is to secure the scene and to protect the individual victims. Detective Kleist, Deputy Turner, and Deputy Sommers were each in a treatment room. I didn't say this in my statement, but the time from when Mr. Hoffman brandished his firearm until he was shot by law enforcement was just under fifteen seconds. Mr. Collins was a former Army Ranger and was able to accurately discharge his handgun in what was, for him, a combat situation.

"Both Chief Donner and I have agreed that in future incidents, we will station at least one armed officer at the unlocked entrance. In addition, Moore Memorial will be employing off-duty members of law enforcement as security

in the Emergency Department. As those will all be sworn officers, they will be armed."

"That can't be the right solution," Sarah, the Charge Nurse, said. "Guns in the hospital?"

"There was a very tense debate about that," Owen Roth said. "That's why it's off-duty cops and deputies. We couldn't allow armed private security. It's not perfect, but the County Board insisted due to liability concerns."

"That seems like a bad reason to bring guns into the hospital," I said. "I mean, I get responding officers and deputies, but armed security? I'm not anti-gun, but it just seems wrong."

"To me, too," Doctor Roth agreed. "The Board approved money for full security doors for the ambulance bay in the new ED. They'll require a swipe card, but there will also be an emergency mechanical release on the inside in case the system fails. We might be able to dispense with permanent security at that point, but I wouldn't count on it."

"Swell," I said.

The rest of the press conference didn't shed any additional light on what happened except to fill in some other background details and to note that Deputy Sommers would be posthumously awarded a medal for gallantry. When it concluded, I still had a question that had not been asked nor answered -- how could the seventeen-year-old girl have been shot three times during the events described?



## February 24, 1990, Southern Ohio Correctional Facility, Lucasville, Ohio

I stopped short when I walked into the common room at the prison, seeing someone I hadn't seen for nearly eight years -- Charlie Fox, the rapist who had, for a day, been my roommate. I wondered if he recognized me in the cassock and with a beard, as I'd been clean-shaven when we'd met. He was with an older gentleman in a suit, who I suspected was his dad but who also might have been a Protestant pastor.

I also knew that Len Nelson was in the prison, but I'd heard he was in segregation due to incidents between a group of what amounted to neo-Nazis and black prisoners. I had zero desire to see him, and he was locked up at least until 2015, given his 'twenty-five to life' sentence. His association with the neo-Nazi's would likely mean he wouldn't get out after only twenty-five years.

"Morning, Frank," I said when I sat down at the table with him.

"Morning. I expected you tomorrow, with the deacon who brings communion to Nick. Did your schedule change because of the shootings?"

"Yes. One of the doctors who was shot was a surgeon, so they moved me out of the ED to surgery to help cover, and moved other doctors around to cover the ED, as the Chief Attending was one of the ones who was shot."

"How close were you to the shooting?"

"The Sheriff's Deputy was shot right in front of me, but I never saw the gunman until about twenty minutes after the police killed him. We were in a trauma room, and Deputy Sommers was responding to the gunfire when she was shot after opening the door of the trauma room."

"I'm glad you weren't hurt."

"Me, too!"

We played our usual games of chess, then the group gathered for prayers, including a new addition. Once the prayers were completed, I took time to talk to each man, including the new guy.

"Alan Edwards," he said, extending his hand.

"Doctor Mike Loucks," I said. "And also a chaplain, which I suspect is obvious."

"The black robes kind of gave that away."

"What are you in for?"

"I thought you would recognize the name. You were taking guitar lessons from Anicka Blahnik when I was arrested."

"A plea bargain of eight years for rape, if I recall correctly."

"I was a complete idiot, and I have nobody to blame but myself. Do you play in public at all?"

"When I have time. I'm in a band -- Code Blue -- with four friends. We play four or five gigs a year."

"What do you play?"

"Mostly covers of rock and pop from the 50s through the current day, though I also play some traditional Russian music on the balalaika."

"I recall Anicka saying you had significant voice talent."

"She and Milena both tried to convince me to sing with Milena and try out for parts in musicals, but I was pre-med, so I simply didn't have the time. Is there anything you need?"

"A time machine to go back and not allow a horny thirteen-year-old to convince me to do something I knew was wrong."

"Fresh out of those," I said.

"What church do you represent?"

"The Orthodox Church in America, whose heritage is the Russian Orthodox Church."

"Some of the best choral music ever written," he said. "The Divine Liturgy by Tchaikovsky is a beautiful masterpiece. The one by Rachmaninoff is almost as good. Do you sing at church?"

"I have, in the past, but again, it was time that interfered. Medicine is all-consuming."

"So is music," Alan observed.

"I agree. Do you have a chance to play?"

"Believe it or not, we have a small group that plays chamber music. I also fiddle, which is far more popular here than Classical."

"I can imagine."

"How often are you here?"

"Once a month. If there's anything you need, let me know, and I'll do my best to procure it or arrange it, with the obvious limitations."

"Thanks."

We shook hands, I said goodbye to the men, then left the prison to head home to Kris and Rachel.

### III. Appendectomy

#### February 26, 1990, McKinley, Ohio

The formal funeral for Deputy Sommers was conducted on Monday morning, but I wasn't able to attend due to my shift at the hospital. She received full honors from the Sheriff's Department, the McKinley Police Department, the Harding County Fire Department, and the Ohio State Patrol. The flags at every fire and police station in the county had been flown at half-mast for her, and every member of law enforcement and fire protection had worn a black band around their badges.

At the time I knew the funeral mass was to begin, I was in the lounge. I quietly recited the prayers for the departed, using the standard form rather than the abbreviated form used for non-Orthodox. She had, as I saw it, given her life defending and protecting our patient and the medical staff, and as such, deserved the full prayers. When I finished the prayers, I went to visit Loretta in the CCU.

"How are you doing this morning?" I asked.

"Feeling in both legs, but it's still limited, and I can't move them."

"That's an improvement," I replied. "You and I both know that the kind of improvement you're seeing is a very good sign."

"But not determinative."

"True, but it's a strong indication you'll be able to walk again, though possibly with the need of assistive devices."

"There goes my medical career."

"You don't know that, and neither do I! What have Vanderberg and Cohen said?"

"Wait and see, but they're encouraged by the fact that I have increased sensory function."

"There you go! How long are you in the CCU?"

"Until Friday, most likely, then I'll go to a rehab facility in Columbus."

"I'm going to ask for permission to escort you," I said.

"I appreciate it. Come see me tomorrow?"

"Of course. I'm going to see Shelly now. Is there anything I can get you?"

"A working set of legs."

"In time, Doctor," I said. "You know how this works."

Loretta rolled her eyes, "Easy for you to say from that side of the bedrail!"

"We doctors make the worst patients," I commiserated. "And I was bad before I became a doctor."

"Like most men!"

"Whatever!" I chuckled. "See you tomorrow."



I kissed her cheek, then left the CCU to head to Medicine, where Shelly was in a semi-private room with a young woman suffering from kidney failure.

"Morning, Shelly," I said. "How are you doing?"

"Better now that they moved me here, but I still haven't managed the pizza!"

"I'd *kill* for a pizza!" Cathy, the young woman in the other bed, exclaimed.

"And I'd be dead if I tried to sneak one in here! Tim Baker would have my butt in a sling!"

"Doctors are just no fun!" Cathy grouched.

"Shelly and I are fun!" I countered. "It's the Chief of Internal Medicine who's the problem here!"

"Damn straight!" Shelly agreed.

"Just how much fun?" Cathy asked with an arched eyebrow.

I held up my right hand. "About as far as this ring allows!"

"Wrong hand!" Cathy exclaimed.

"Correct hand for an Orthodox Christian," I replied.

"Well, there goes my idea of trading for a pizza!" she teased, causing both Shelly and me to laugh.

"No offense intended," Shelly said mirthfully, "but fired AND divorced? Nobody is THAT good!"

"You left out 'dead'," I chuckled, "because, despite her protestations of being French, my wife is VERY Russian in certain aspects of her personality!"

"Are you sure about that?" Cathy asked with a smirk.

I laughed again, "Positive, and no, that's not an opening for you to ask for a chance to prove it! Mind if I ask about your condition?"

"Polycystic kidney disease; I'm having a transplant later this week from my cousin. It was delayed by what happened last week. Where you there, too?"

I nodded, "I was in the trauma room Shelly -- Doctor Lindsay -- had just left, and where the Deputy was shot."

"Holy smokes!" Cathy exclaimed.

"If things go a certain way, Mike might assist with your surgery," Shelly said.

"Well, that would be one way to get him inside me!" Cathy smirked, once again causing both Shelly and me to laugh.

"You, young lady, are dangerous!" I chuckled.

"I'm a college student!" she exclaimed. "We're *supposed* to be dangerous! Being a sober, responsible adult can wait until *after* I graduate!"

"What's your major?" I asked. "I mean besides guys...or girls, for that matter."

Cathy laughed, "It would increase my chances of a date on Friday nights! Finance with a minor in computers. I plan to get my MBA and become a CPA, same as my dad."

"What year?"

"Junior at OSU, but my family lives here, so that's why I'm here instead of there. I took the semester off, but I'll take classes during the summer to make up and should graduate on time."

"My wife is at OSU," I said. "She's a poli-sci major and is planning a Master's in public administration."

"What's her name?"

"Kris Korolyov. She's on what amounts to a five-year plan because we'll have our first child together in June and plan the second one about two years from now."

"First together? You have other kids? Or she does?"

"I have a daughter with my first wife, who died the day our daughter was born."

"Holy smokes!" Cathy gasped. "I don't even know what to say."

"Most people don't," Shelly said. "I can say this because I know Mike really well, but it was just one of those rare, random things which there was no way to detect or prevent. It was genetic, similar to your kidney condition."

"Is it OK to ask what happened?"

"In layman's terms, a blood vessel in her brain burst in an area where it caused her heart to stop."

"Whoa!" Cathy gasped. "Unreal."

"Surreal is more like it," I said. "I was a medical student, and all I could do was stand and watch helplessly as the medical team tried to resuscitate her. I'm sorry to cut this short, but I have to get back to work."

"Sorry if I upset you," Cathy said.

"You didn't. I need to get back to my students. Shelly, I'm glad to see your liver enzymes are completely normal. When are they kicking you loose?"

"Friday."

"And when can you come back to work?"

"I have to complete my psych evals, and Doctor Roth has to clear me medically. I'd be happy for you to do the exam."

"I BET!" Cathy teased. "He's hot!"

Shelly laughed, "And taken! I'm no homewrecker! But I trust him to give me the benefit of the doubt, unlike the headshrinkers."

"Any chance you can see someone outside the hospital?"

"No. Owen got quite a bit of guff for allowing you to do that, but he made it stick."

"I had no idea, but I guess I should have known, given my relationship with them."

"Washouts who couldn't even Scramble for dermatology!" Shelly exclaimed.

"On that note, I'm headed back to the lounge! I'll come see you tomorrow."

"And me?" Cathy asked.

"If you're here, then I will."

"Sadly, for two more days before the surgery, then a weeklong recovery."

"See you both tomorrow," I said.

I left the room and walked towards the surgical ward when my pager went off, signifying a consult in the ED. Rather than stop and use the phone, I simply picked up my walking pace and reported to the nurses' station.

"Doctor Casper needs you in Trauma 2 for a rule-out appy," Karli said.

"On my way."

I went to the lounge and let both Erin and Todd know they could accompany me to the ED.

"Morning, Ghost," I said when we talked in. "What do we have?"

"John Smythe, twenty-six, presents with typical signs of acute appendicitis. Ultrasound scan confirms."

"Let me take a quick look," I said. "You know the drill."

"A snot-nosed Resident has to confirm the diagnosis of an Attending!" Ghost teased.

"Pretty much!" I agreed, stepping over to the trauma table. "Good morning, Mr. Smythe. I'm Doctor Mike from surgery, and as Doctor Casper irreverently put it,

I need to confirm that you're a candidate for surgery. As we're a teaching hospital, I'd like my Sub-Intern, Erin, to perform the exam."

"She's gorgeous, Doc!" he said quietly, then louder, added. "Sure!"

"Erin, physical exam and ultrasound, please."

"Right away, Doctor Mike!" she exclaimed, sounding almost giddy.

She performed the basic exam, then, with guidance from me, the ultrasound.

"What do you see?" I asked.

"Enlargement, along with free fluid in the right iliac fossa. That, along with the other symptoms, is determinative. A surgical case."

"Indeed it is. Call upstairs and let them know we'll be bringing him up. Then call for an orderly."

She moved to the phone to place the call.

"Are you going to do the surgery?" John asked me.

"As Doctor Casper put it, I'm still a 'snot-nosed Resident,' so I'll assist, but a fully-trained surgeon will perform the surgery."

"How long have you been a doctor?"

"About nine months," I replied. "Surgeons train for about seven years, some longer, if they specialize. Let me explain the procedure to you, then we'll go over the consent forms."

I went over the steps of the procedure, along with the risks, then asked Todd to walk Mr. Smythe through the consent form, which he did. The orderly arrived just as that was completed, I signed the surgical admission form, clipped it onto the chart, then we headed upstairs. After handing Mr. Smythe over to the nurses, my students and I went to scrub.

"How much of this do you feel comfortable doing?" Doctor Aniston asked.

"I know the steps and assisted Doctor Blake as second surgeon on one last July. I've seen several since."

"Not the question I asked," Doctor Anniston said.

"I would be comfortable performing each step, so long as I was under close supervision and could ask for assistance."

"Then you take the lead."

"As a PGY1?" I asked.

"You can say 'no'..."

"Contrary to the opinions of numerous young women over the years, I'm not a complete idiot!"

Erin and the two nurses in the room all laughed, and Todd nodded his commiseration.

"A problem every guy has, no matter what!" Doctor Aniston agreed.

"My gay friends didn't," I said. "But otherwise, yeah."

"Being gay limits your opportunities for being an idiot," Nurse Linda declared.

"Doctor Aniston," I said. "When I assisted Doctor Blake, my medical student was allowed to close the dermis and epidermis. I'd like Miss Jackson to do that; she's signed off for unsupervised suturing."

"Seriously?!" Erin gasped.

"Seriously. Doctor Aniston?"

"Let's see how things go; if there are no complications, I'll allow it. Miss Jackson, you'll suction for us. Now, everyone scrub in!"

We did and went into the operating room together, with Doctor Aniston directing me to the primary surgeon's spot.

Doctor Bernard, the anesthesiologist, raised an eyebrow but didn't say anything.

"Hi, Mr. Smythe," I said. "Contrary to what I said before, I'll be the lead surgeon with Doctor Aniston here watching me like a hawk."

"You're in very good hands, Mr. Smythe," Doctor Aniston said. "We're a teaching hospital, and Doctor Mike is ready for this. He's assisted before and knows the procedure."

"Go for it, Doc!" Mr. Smythe said.

"Put him under, please," I said to Doctor Bernard.

He did, and two minutes later, announced that the patient was sedated and had stable vitals.



"Are you sure about this, Bob?" Doctor Bernard asked. "Mike's a PGY1."

"I'd let him perform the procedure on my son," Doctor Aniston said. "Good enough for you?"

"You're the boss."

"Mike, let's begin," Doctor Aniston said. "Tell me each step before you perform it. If anything out of the ordinary happens, I'll decide if I need to take over. This should be perfectly routine, as he appears in excellent health and is in good shape."

I nodded, took a deep breath, and looked to Nurse Linda, "10-blade, please."

"I'm going to begin with a transverse incision parallel to McBurney's point, incising the epidermis and dermis."

"Proceed," Doctor Aniston directed.

I made the incision as I'd seen Doctor Blake and others do, then handed the scalpel back to Linda.

"Retract, please, and I'll use the Bovie to dissect down to the external oblique aponeurosis, then I'll open the aponeurosis, exposing the internal oblique muscle."

"Continue."

"Bovie, Nurse," I requested.

I successfully dissected down to the muscle, then returned the Bovie and asked for a scalpel to open the aponeurosis.

"Retraction, please," I said to Doctor Aniston who placed a second retractor in the surgical site.

"Now I'll divide the muscles, then locate the appendix," I said.

"Continue," Doctor Anniston directed.

I divided the muscles, and Doctor Anniston shifted the retractors.

"Forceps, please, Nurse."

I grasped the peritoneum with the forceps, made an incision, and located the appendix.

"Suction, please, Erin," I instructed.

She cleared away the fluid.

"Babcocks, please, Nurse," I requested.

Linda handed me the forceps, and I grasped the taeniae coli and advanced until the appendix was externalized.

"Appendix is inflamed and enlarged," Doctor Aniston declared. "Proceed with excision, Mike."

"Next is dissecting the mesoappendix," I said.

"Continue."

I did that, then asked Linda for clamps, which I attached to the appendiceal vessels.

"Next, I'll divide the appendiceal and ligate them with sutures."

"Correct," Doctor Anniston said. "You're doing great, Mike."

I divided vessels, then asked Linda for the needle driver and silk sutures, and used them to ligate the blood vessels, then removed the clamps.

"Suction, please," I said to Erin.

She did that, and I examined the surgical field.

"No leaks," I said.

"I concur," Doctor Anniston agreed.

"Excision and then invert the stump into the cecum."

"Proceed."

I excised the inflamed appendix and dropped it into a metal basin. Next, using forceps, I inverted the stump into the cecum.

"Very good, Mike," Doctor Anniston said. "No rupture, no involvement of any surrounding tissue. Nice and clear. You may close; your call on closing the dermis and epidermis."

"Erin," I inquired, "tell me how you would close this incision."

"I would begin with an antiseptic lavage, then close each of the three muscle layers separately with running absorbable sutures. There was no rupture, so no drain is necessary. I'd close the dermis with 3-0 subcuticular absorbable sutures, then close the epidermis with basic mattress sutures."

"Very good," I said. "Doctor Anniston, if you would move aside, and Todd, if you would take the suction, Miss Jackson will assist me, then close the dermis and epidermis. Linda, surgical closure tray to me, please."

"A Fourth Year? Suturing?" Doctor Bernard asked.

"Owen instructed us to be more aggressive in our training," Doctor Anniston said. "Miss Jackson is one of our top draft choices for the Match. And we're short surgeons, too. Mike and I are both comfortable."

"It's your rodeo; I'm just along for the ride," Doctor Bernard said.

I closed the muscle layers, then turned the patient over to Erin.

"Erin, step by step," I said. "There are no prizes for speed. If you have questions, ask; if you are not confident, say so, and I'll close the final layers."

"I can do this with your supervision," she said confidently.

"Then proceed," I said.

She took her time, similar to the way I had done the exact same thing back in July, though I'd been an actual Resident at the time. I watched extremely closely, as did Doctor Anniston, to ensure she completed the procedure correctly, and he and I both offered advice as she worked to close the incision.

"Nicely done, Miss Jackson," Doctor Anniston said. "Neat, evenly spaced sutures with good tension."

"We're finished," I said. "Doctor Bernard, please terminate anesthesia. Erin and Todd, once Doctor Bernard disconnects Mr. Smythe, please escort Mr. Smythe to Recovery. I'll be along shortly."

Doctor Aniston and I moved to the scrub room while the others prepared Mr. Smythe for transport.

"There is going to be blowback," I said quietly.

"Well, Frank can complain to his Chief, but Owen cleared this with Cutter, so we're good. How do you feel?"

"Pumped!" I replied. "But not nearly as pumped as Erin! I just hope the Match gods are kind to us."

"Why?"

"She broke up with her boyfriend, who is here in McKinley, just before she had to submit her Match list. She's from Cincinnati, and Shelly is concerned she listed those hospitals ahead of us."

"She could technically resubmit her list," Doctor Anniston said. "Wednesday is the deadline for late submissions. She'd need to pay the fee for late registration, but she could submit a revised list."

"Where did we list her?" I asked.

"Third after Ryan Harrison and Mary Anderson."

"That's rough," I said. "Hospital preferences take precedence, and even if she lists us first, a hospital in Cincinnati might snatch her.. We know Mary will Match for Trauma Surgery because we put her first, and she put us first. Can we revise to put Erin second?"

"Let me speak to Owen. Do you know where else Ryan tried to Match?"

"He had five other interviews, all in Columbus or Dayton."

"OK. Erin can't hurt herself if she simply swaps us for another program, but you know the rules, right?"

"Yes. I can't expressly tell her we listed her, but I can encourage her to change her list, which will convey the message."

"Exactly. It's a dumb system, and we really ought to be allowed to tell the students."

"My proposal is that a hospital receive two or three draft choices for students at their affiliated medical school. That would save everyone time and effort because we know Mary Anderson knows she's going to Match for the only available slot for trauma surgery. It's really silly to pretend that position is actually competitive."

"That's actually a good idea, which is why it will never fly!" Doctor Anniston said with a grin.

"Trotsky was right!" I said with a grin of my own.

"Trotsky?"

"He said the bureaucracy would betray the revolution, and he wasn't wrong."

"Amen, Brother. Go change and check on your patient. Leave me your procedure book, and I'll fill it out."

"Thanks," I replied.

That was a nice thing to have, but I needed more practice, better training, and my Board certification before I could perform even that simple procedure on my own. That said, I was WAY ahead of any other Resident, including some PGY2s who were on the 'old' program.

I went to the locker room, changed into fresh scrubs, put on my baptismal cross and wedding ring, then headed to Recovery. I verified Mr. Smythe's vitals, then asked Todd to sit with him while Erin and I stepped into the corridor.

"Thank you, thank you, thank you!" she gushed. "I'd hug you, but the rules..."

"I appreciate the sentiment," I replied. "What you just experienced is Moore Memorial changing the way surgical training is done. You did something today most PGY2s haven't done -- full closure on a procedure. You won't see that at any other hospital, and we hope you Match here. I'm not sure if you're aware, but you can change your Match program rankings until 5:00pm on Wednesday. If you didn't list us first, we hope you'll consider paying the small fee and changing your rankings."

"I want to ask a question that I don't think I can ask," Erin said.

"And it's one I cannot answer if you do ask. You're an intelligent young woman who's in the top five in her class, so I think you can infer what you can't ask, and I can't say."

"I'm going to assume someone told you I came to the medical school because of my boyfriend, and that we broke up."

"That is the scuttlebutt. I also know you interviewed at several hospitals in Cincinnati because you're from Milford."

"You're very well-informed!"

"If you haven't noticed, the hospital grapevine is very effective!"

"Oh, I've noticed! If I wanted to change my ranking order, what would I need to do?"

"I believe you'll need to fax it to them by Wednesday at 5:00pm Eastern time. There's a phone number on the letter you received saying you were registered to check the process."

"Is there a way to guarantee I Match here?"

There was, but because she wasn't first on our list, the only way to ensure she could Match was to list *only* Moore Memorial, which was a risky proposition if, somehow, she didn't Match with us.

"Only a risky one," I replied. "I don't advise it."

Erin nodded, "Let me think about it."

"That's all I can ask. Go sit with Mr. Smythe and call me when he comes around. Todd can have his lunch."

"OK."



I headed to the nurses' station, arranged for a room for Mr. Smythe, then went to the lounge. About forty minutes later, Erin called to say Mr. Smythe had come out of his anesthesia. I checked him, signed the chart to release him, and then had Erin call for an orderly to take Mr. Smythe to his room. I sent her to lunch, then called to see if Clarissa was available. She wasn't, so I went to the cafeteria alone, and when I saw Ghost, I went to sit with him and Maria Vega from Internal Medicine.

After lunch, I let Doctor Aniston know about my conversation with Erin, and he promised to speak to Owen Roth once the lengthy surgery he was performing was complete. The afternoon was routine, with three consults, two of which resulted in admission for surgery, but not emergency surgery, and those cases would be dealt with on Tuesday or Wednesday. At 5:00pm, I left the hospital and headed home to Kris and Rachel.



## **February 27, 1990, McKinley, Ohio**

"How in the world did you get to do an appy and a Fourth Year close?" Shelly Lindsay asked incredulously when I walked into her semi-private room on Tuesday.

"I'm just that good," I replied haughtily but with a smirk. "Who blabbed?"

"Erin, when she stopped in to see me before she went home yesterday. She was so happy that if you weren't married and it wasn't against the rules..."

I laughed, "Yeah, yeah."

"Wait!" Cathy interrupted. "It's against the rules to fool around?"

"Doctors with medical students, yes; patients, too!"

"While they're under your care," Shelly said with a smirk, stirring the pot.

"Troublemaker! And to answer your question, despite my reputation, I didn't ask. Bob Anniston asked me. Well, about the appy I brought up. I asked if Erin could close the dermis and epidermis, and she did show her gratitude in a very satisfying way!"

"Smart ass!" Shelly declared. "I know it wasn't that because you're faithful to a fault!"

"I fail to see how fidelity can ever be a fault," I replied. "But, no, of course not. She paid the late fee and re-ordered her ranking list for the Match. Owen re-ordered our list to put her second. That gives us a good chance of getting her, though you know there are no guarantees. I wish we had my draft picks."

"You and every hospital associated with a medical school! I'm assuming you had a very careful conversation?"

"Yes. She drew the correct inferences."

"Can the outsider inquire what the heck you're talking about?" Cathy asked.

"When medical students are close to graduation," I replied, "they interview with hospitals for Residency programs. After those interviews, the student prepares a ranked list of programs where they would like to Match. The hospitals prepare lists of students they would like to hire. All of that is fed into a big computer which spits out a list of Matches such that it is impossible for anyone to have a better available Match. It's something you might be aware of with a minor in computers -- the stable marriage problem."

Cathy nodded, "OK, I know that one. From what you're saying, you can't share the information?"

"The student can tell the hospital that they listed them and in what ranked order, but the hospital is forbidden to tell the student that they are on the list, let alone their rank on it. That's meant to prevent gaming the system. If I, as a student, know for a fact that a hospital listed me in their first slot, I could submit a list of one hospital and be guaranteed one of those two spots."

"That only works if the hospital's list is given more weight. Otherwise, you could have multiple students put the program first, and some other factor would be needed to decide."

"Hospital preferences are paramount," I replied. "The one possible exception is a married couple, as they are matched together in the same hospital or the same city, which changes the calculations a bit, though a strong and weak partner cannot improve the weak partner's Match."

"So what happens if you don't like where you Match?"

"You're out of luck," Shelly said. "It's there or nowhere. If you decline, you can't Scramble or Match. It's possible to find a program after everything is done, but it'll be a lesser program in an undesirable location. You know, dermatology in International Falls, Minnesota, or something like that. It's not like a sports draft where you can hold out, either. In order to participate in the Match, you agree to accept the assignment at the salary offered. If you don't, you're basically out. Permanently."

"So what did you say, if I can ask?" Cathy inquired.

"I simply talked up our program and said we'd be pleased to have her and reminded her she had until 5:00pm Eastern tomorrow to change her list."

"And that doesn't break the rules?"

"No," Shelly said. "A hospital may express interest in the student beyond inviting them for an interview. What they cannot do is promise the student a listing, reveal that they are on the ranked list, or reveal the ranking order."

"Doctor Mike, was this your first choice?"

"Absolutely, and I was positive I was theirs. I mean, how could I not be when I designed the new program that was created!"

"Mike cheated!" Shelly exclaimed. "And we're ALL jealous about that!"

"I'm only jealous about his wife!" Cathy declared.

"You and half the nurses in the hospital!" Shelly exclaimed. "The other half simply don't care that he's married!"

"And on *that* note, I'm going back to the surgical ward! See you both tomorrow."

"Do you get to participate in my surgery tomorrow?" Cathy asked.

"No. I can't do scheduled procedures because I have to be on-call for the Emergency Department. I'll come see you on Thursday, OK?"

"OK."

I left the room and headed back to the surgical ward.



## February 28, 1990, McKinley, Ohio

Because of my revised schedule, I had rearranged my call with Doctor Mercer to be at lunch rather than in the morning.

"How has your week been?" Doctor Mercer asked.

"Fine."

"No nightmares or feelings of dread?"

"No. I know this might sound odd, but it feels like just another day in the ED."

"Which means either you have ice water in your veins or you're suppressing your emotions."

"Given my history, I'm going to go with the former. Nobody shot at me, Doctor Mercer."

"Fran, please. But you saw someone shot and killed in front of you."

"I did. And over the past five years, I've seen over a hundred people die before my eyes, sometimes after bloody accidents, sometimes after horrible burns, sometimes from brain bleeds."

"You did have an emotional reaction to that one."

"Yes, of course. You know the automatic defense mechanism of doctors who work in the ED -- we have to turn off our emotions. People who can't, don't make it."

"Yes, and many of them bottle it and resort to alcohol or illicit drugs to compensate."

"Prayer and church do that for me," I replied. "They always have; well, except when church was the stressor. But given my role, that's no longer the case and unlikely to recur."

"There's no chance of you being ordained again?"

"It's generally against the canons and would require extreme «ekonomia» by Bishop JOHN, and that would create a potential firestorm. But even if he were willing to do that, and he might be, Kris would refuse."

"Would that cause tension in your marriage?"

"The opposite, actually. It would save me from having to refuse my bishop!"

"So it's not something you want?"

"Not a chance. And I really prefer not having to say 'no' to my bishop, especially when he blames me for his enthronement!"

"How are you to blame?"

"I orchestrated it together with my grandfather! I knew he was a godly man as a celibate priest and was exactly what was needed after the nightmare with his predecessor. Bishop JOHN is looking to get even!"

"You're joking!"

"Of course I am! But it's a joke between him and me as well. I know, at some point, he's going to ask, and I can truthfully say that Kris is adamantly opposed to the idea."

"How are things at the hospital?"

"Very good. On Monday, I performed the first-ever appendectomy by a PGY1."

"Be careful you don't overreach, Mike."

"It was a textbook case, and one of our most senior surgeons was right there with me, and I had to declare each step before I started it. It was a perfectly routine procedure. Part of it is my special training program, part of it is that we're shorthanded because our best Resident is recovering from surgery after being shot, and part of it is that I'm just that good!"

Doctor Mercer laughed, "Well, you have the surgeon's ego, that's for sure!"

"And you know I said that to tweak you."

"You did, but you also believe it and have confidence in your own skills, or they'd never have let you do it."

"That's true. I gave my Fourth Year a chance to do something that most Fourth Years never do -- suture. There was a bit of blowback, but because the Medical Director and Chief Surgeon had approved, nothing came of it."

"Blowback?"

"The anesthesiologist objected to a PGY1 and a Fourth Year performing the entire procedure. He complained to his Chief, who lodged an objection with the Medical Director. Nothing came of that because of the approval, but also because my training program is special. I was already doing procedures that weren't the norm for PGY1s in the ED. And that's going to be the case for the new PGY1 in June or July, depending on when she chooses to start."

"Change is difficult for most people, and doctors tend to be very averse to changing training programs."

"Tell me about it! I'm in a completely new program, and I've heard the complaints. But I don't mind because the doctors who matter are behind the changes. There are other changes, too, which make a lot of sense, including having Residents in Internal Medicine complete an eight-week rotation in the ED during their first year, and are covered by someone from the ED. The same is true for pediatric Residents, but that was postponed to next year because of scheduling concerns in Pedes."

"Have you talked through the events of the day minute by minute?"

"Twice. Once with law enforcement, and then once with the internal review."

"How did you feel while doing that?" Doctor Mercer asked.

"The only word I can think of that applies is 'clinical'."

"I'd say that's par for the course for you. Is there anything you feel you need to talk about?"

"Not really, no."

"I have a question, which I probably should have asked before, but after you read me off last August, I'm somewhat surprised you got in touch."

"Put that PhD to work and figure it out," I challenged.

She was quiet for a full minute before she answered.



"Because for me, you're a known quantity, and you could be yourself without raising any red flags. And after you read me off and challenged my methods, you were positive that I wouldn't say anything I couldn't defend before the Medical Board. And if you were your typical self, I'd sign off because I could say that you were acting 'normal', for want of a better word."

"Exactly right. But there's one other important point, which you probably either won't get or, if you do, would be reluctant to say."

"That pretty much telegraphs it," Doctor Mercer said. "The one topic I always avoid, if at all possible. Your faith."

"And I'm going to remind you that healing, of whatever kind, has to be holistic -- body, mind, and soul, or spirit, if you prefer. I've forgiven you for Angie because you engaged in a public act of «metanoia», but that only goes so far. After the hearing, you told me that Doctor Paulus had taken you to task. So I come back to the question I asked you in Lou's last August -- what are you going to do about it?"

"Whatever else is true, I have to follow the standard of care, just as you do. I know you're a major rebel, and you push the edge of the envelope, but you also have limits and restrictions. You seem to think I don't, and that's simply not the case. I do agree that, at times, I had tunnel vision, but my outcomes were, in the main, positive.

"My difficulty was always with the outliers, and it still is. You and one other male patient defy basically any categorization, and trying to apply *any* norms to either of you failed miserably. What that tells me is that when a patient defies categorization, I can't apply any of the standard methods. I doubt that answer will satisfy you, but that is as far as I can go."

"Tell Steve Adams hello for me," I chuckled.

"How the..." Doctor Mercer began but then stopped mid-syllable. "Sorry, I can't say anything."

"It's OK, Fran," I said. "I dated Dona Bingham, and Angie's friend Anna was one of Steve's girlfriends. I met Larry Higgins in Cincinnati when I interviewed at UofC, and I've spoken to Doctor Al Barton. I met Steve's then future wife, Jessica, when she was a Second Year at Indiana University, and my current Fourth Year played on the Milford Chess team when he was there. I also met his Swedish girlfriend, Pia, when Elizaveta and I were in Europe."

"Oh for Heaven's sake!" Doctor Mercer laughed. "I'd accuse you of pulling my leg, but if you know those names... Have you met him?"

"No. I expect, someday, we'll cross paths, But given everything they've told me and your reaction when I asked about the rules to 'strip chess' when I was a Sophomore, I put it all together. Given the rumors I hear, he had to be the other patient."

"You know I can't discuss that!"

"Of course. Anyway, going back to my holistic point, you admitted your error, and as such, what's in the past is in the past. A clean slate, as it were."

"Forgive and forget?"

"In essence, yes, though 'forget' doesn't mean quite the same thing as 'not remember', but instead means 'not hold against'. To say otherwise would create an impossible contradiction."

"How so?"

"How could an omniscient God forget anything?"

"An interesting point," Doctor Mercer said. "But what about asking God to remember?"

"In that case, it means 'call to mind' or 'give conscious thought to'. Think about how we use it -- if we remember something, it's because it wasn't in our active memory but lying passive or dormant until called upon. We have many memories like that - they're stored and never come to mind unless triggered by some event or we set our mind on them. So, God knows all, but we're asking him to actively think about us. And that's true in both our faiths.

"What I'm saying is that human beings, besides being *Homo sapiens* are also *Homo religiosus*, not in the medieval or liberal Protestant understanding of that word, but that the taxonomic 'wise man' is also 'religious man', or perhaps better *Homo pneumatikós* or 'spiritual man', mixing Greek into the Latin for clarity of what I mean. You can't treat the «ψυχή» (*psyché*) without also treating the «σάρκα» (*sarka*) and the «πνεύμα» (*pneúma*) -- psyche, flesh, and spirit. I'd go further and say you have to treat the «νοῦς» (*nous*) as well."

"That's the concept of the true mind, right?"

"Yes. The mind's eye, if you will, without which we cannot fully apprehend God's energies, or what Roman Catholics and Protestants incorrectly refer to as 'grace'. It is the part of us that, according to Buddhism, can achieve total awareness or enlightenment -- the «ātman» or essential self. But the theology lesson isn't important. What's important is treating a patient holistically.

"I know your arguments against my position, and in one sense, I agree, but in another, I strenuously disagree. Do you have to walk a fine ethical line? You bet! But could you treat me in ANY way without understanding my faith? I don't believe so, and I would wager you've had other patients with strongly held

religious views. Ignoring that does the patient a disservice and could even cause harm. I think we can dispense with the obvious examples, don't you?"

"There's no need to rehash the conversation from August. I hear you, Mike, but that's a minefield."

"And one you're called to traverse. Find a way, Fran. If I can do it, you can do it. But it's impossible for you to treat *Homo pnevmatikós* without taking his *pnévma* into account."

"All good points. And based on our conversation, I'm going to say we don't need to speak again on the topic of the shootings. I would like to talk from time to time; in fact, Doctor Paulus suggested it."

"And that caused you to think she's certifiable, right? At least for an instant?"

"Longer," Doctor Mercer said with a soft laugh. "But she said something important -- you challenge me, and I've always learned more when I'm challenged."

"I think that's true for most of us," I replied.

"Have you seen Angie?"

"At church a few weeks ago, and Kris, Rachel, and I are having dinner with her and her family on Saturday."

"Let me know how she's doing, please."

"I will. I'm sorry to end this call, but I need to grab a quick bite before my lunch break ends or I'm paged."

"Call me in a few weeks, please."

"Will do."

We said 'goodbye', I hung up, and went to the cafeteria to grab a sandwich and an apple.



## IV. Loretta, Shelly, and Angie

**February 28, 1990, McKinley, Ohio**

"Hi, Petrovich!" Clarissa exclaimed when she walked into the surgical lounge on Wednesday afternoon.

"Hey, Lissa! What's up?"

"I'm on a late lunch break, so I decided to slum!"

"The slums are up one floor, at the north end of the building."

That was where Psych had their ward.

Clarissa laughed, "No surprise you'd think that! Where are your toddlers?"

"Doing toddler stuff! Prepping for afternoon rounds."

"How did your call with Doctor Mercer go?"

"She admitted she made errors with regard to me and one other patient."

"Angie?"

"No, besides Angie. Dona's, Anna's, and Pia's ex."

Clarissa laughed, "The kid from Milford was seeing her?"

"Apparently, but keep that to yourself."

"Of course. What was the gist of the conversation?"

"That her approach to psychology is wrong, and she'll make mistakes with anyone who is spiritual because she's put that part of the person completely off limits, and she's not treating them holistically. In the end, it's the same argument I make about medical care in the hospital -- specialization is necessary, but it's the enemy of holistic treatment."

"I think you're going to beat that dead horse for the rest of your career."

"The horse isn't dead," I said. "And I don't think I'm tilting at windmills, either. I think we can bring about change, but it'll be slow. Believe it or not, I can be patient."

"That'll be the day!"

"I did say 'can'," I retorted.

"Yeah, yeah," Clarissa said, rolling her eyes.

"How are you liking the ED?" I asked.

"It's not what I signed up to do," Clarissa replied, "but I don't think Doctor Gibbs or Doctor Lindsay signed up to be shot."

"Life does not deal us the cards we want; we have to play the hand we're dealt."

"True. I hear Doctor Gibbs is going to rehab in Columbus on Friday."

"She is," I confirmed. "I wanted to take her, but Doctor Roth nixed that because we're already short a surgeon."



"Another helicopter ride?"

"Actually, if it were, then I'd go because the ED can't spare a flight surgeon for a non-critical case. But she's going by private ambulance service."

"I stopped in to see her yesterday; what's your take?"

"Having feeling in her legs is a very good sign. Nerve function below the injury is a strong indicator of at least partial recovery. It's likely she'll be able to walk, but she might need some kind of assistive device. Shelly is being released on Friday, and as soon as Psych clears her, she'll be back. She wanted me to do her physical."

"Who knew?" Clarissa smirked.

"Lissa..."

"Sorry. Why?"

"Because she believes I'll give her the benefit of the doubt, and that's precisely why it won't be me."

"True. I'm not saying you'd fib, but for anything that was a judgment call, you'd see it her way. Did you hear the rumor they hired a Chief of Emergency Medicine?"

"Yes, and allegedly from a suburban Chicago hospital. But until they announce it, who knows? It should have been Loretta, but she's out of commission for several months, most likely."

"That sucks," Clarissa observed. "On the plus side, you know who your Chief is, and the Medical Director is the one who approved the trauma surgery program when he was Chief Surgeon."

"That's why my only concern about who filled the slot was about Loretta. Sadly, I don't think they were willing to put a woman in charge of a major department."

"Or a minor one, except the Nursing Director!" Clarissa declared. "The OB chief is a guy, for Pete's sake!"

"At least Norm Zenker isn't a complete Neanderthal like the dinosaur who ran OB at Good Samaritan. And I bet when Zenker retires in a few years, one of the women Attendings is hired. If leadership, except nursing, remains all male, that'll attract EEOC attention."

"As it should!"

"So long as we don't reduce standards, I have no problems. You know my mentors have mostly been female."

"Anicka, Milena, Loretta, Shelly, me..." Clarissa said.

"Among others," I replied. "In any event, I'd say Shelly is on track for Chief Surgeon."

"Can you imagine the heads that will explode if that happens?"

"Mo Rafiq is gone," I said. "I don't think any of the rest would have their gonads shrivel reporting to Shelly, especially after she literally took one for the team!"

"I know you have ice water in your veins, Petrovich, but I can't believe how calm you are about it."

"I was born to be a trauma surgeon. I'm just glad it's not in 'Hawkeye Pierce' conditions."

"True. I need to get back."

We hugged and she left. A minute later, my students returned from prepping for afternoon rounds. The afternoon was largely uneventful, and at the end of rounds, Doctor Roth asked me to come to his office.

"How are you doing being out of the ED?"

"You know that's my natural habitat, but I knew this was part of the training. I miss it, but I need the skills you and the other surgeons will teach me over the next five years."

"I actually wanted to discuss with you how we'll go about training Mary Anderson."

"The biggest challenge is how she learns the procedures if she's stationed in the ED and handling consults."

"That's exactly what we identified. Bob Anniston suggested that for the first three months, you and Mary should be assigned the same shift so you can teach her procedures for central lines, chest tubes, pericardiocenteses, tracheostomies, and escharotomies. At that point, you'd switch to the alternating rotations."

"I think that makes sense; my concern is my surgical training."

"According to Bob, you were perfect on your first surgery."

"Because literally nothing went wrong!"

Doctor Roth nodded, "The length of the program is, at least in part, intended to ensure you see as many things go wrong as possible so you're able to deal with them when you're the senior surgeon in the OR. You're way ahead of the game, Mike. The next three months will, in effect, make up for the three you'll spend in the ED. Same shift as you have now, and one of the new Residents will cover nights. That is unless you have some objection."

"I think it makes sense, given only a surgeon can teach Mary the procedures."

"Thanks for being flexible."

"You're welcome. Have you heard anything about the new Chief of Emergency Medicine?"

"Probably just the same rumors you have. Cutter hasn't said anything to me, but I'd expect an announcement in the next week."

"It should be Loretta," I said. "Northrup did it as a desk job, and given the new ED, that's what it will be for the next year."

"She'll be undergoing intensive rehab for at least two months, and there is no guarantee she'll walk again. She won't be reinstated until she finishes rehab, assuming she's able to practice emergency medicine at that point. We can't do the rehab here, and even after all the upgrades over the next five years, there are no plans for a rehab clinic here."

"All logical, but it still feels wrong."

"I'd worry if you didn't think that. Your heart's in the right place, Mike. In the end, though, we have a hospital to run, and there are major changes coming down the pike."

"How long will Shelly be out?" I asked.

"She's able to come back April 1st, assuming she passes her physical and psych eval, which I expect she will."

Six weeks following severe trauma and major surgery wasn't out of line, given the strenuous nature of surgery and the need to stand for long periods of time.

"I hear you received some pushback from Psych about allowing an outside psychologist to clear me," I said.

"Cutter didn't trust Psych to give you a fair shake, given the animosity between you and them. Lawson would have used your 'cool as a cucumber' nature against you, insisting you were lying to them. Cutter, Getty, Strong, Ghost, Nielson, and I all know you to be unflappable. Shelly told me how you handled what happened with your wife.

"I've only ever known one other person who was as cool a customer as you, and that was an Attending in the ED at USC Medical Center during my Sub-I. He was a combat trauma surgeon in Vietnam. Word has it, the ramshackle building where he was performing surgery was hit by mortar shells -- he didn't even blink and continued operating."

"Nurse Kellie Martin," I said. "When we lost an engine on the helicopter returning from OSU, I think her heart rate *dropped* while mine went through the roof."

"I'd have had what the nurses call 'code brown' at that point!" Doctor Roth declared. "So you did better than I would have!"

"When Kellie asked me how I was doing after the emergency landing, I said I'd managed not to soil my underwear, so I saw that as a plus. OK to change subjects?"

"Yes."

"Pascha, that is, Orthodox Easter, is the week following Western Easter. I'd like to take Great and Holy Friday as a day off so I can attend services."

"Comparable to Good Friday in the Catholic Church?"

"Yes, though we don't abbreviate the services, and they basically run all day."

"As a seriously lapsed Catholic who only goes occasionally to keep my wife happy, I am glad for the abbreviated services! I spoke to Ghost about the Orthodox services. No wonder you can stand for hours and not even notice! Anyway, you're entitled to religious accommodation, and Shelly should be back then. Are you going to play golf with us this year?"

"During the weeks I'm on a surgical team, yes. The other weeks, I obviously have to cover the ED."

"Good. Anything else?"

"No. Do you have anything else for me?"

"No. Just keep doing outstanding work."

"I will."

We shook hands, and I returned to the lounge. I had two consults, neither of which required emergency surgery, and at 5:00pm, I headed home.



## March 1, 1990, McKinley, Ohio

On Thursday morning, after rounds and overseeing my students prep patients, I went to see Cathy and Shelly.

"How are you feeling?" I asked Cathy.

"Like one of those girls in slasher movies! You know, where the masked guy with a knife comes after the cute girl, usually either while she's having sex or just after?"

I chuckled, "I'll let Doctor Edmonds know you think he's Freddy or Jason!"

"Hey, it's true, right? A masked man with a knife did this to me!"

"Technically. Context is key!"

I checked her chart, then the Foley bag.

"Urine output looks good," I said.

"If I never see a dialysis machine again, it'll be too soon! My nephrologist said that transplanted healthy kidneys don't develop cysts. And the warden said I'll be able to go home on Monday!"

"I've been inside a prison; trust me, this is NOT anything like that!"

"As a doctor, right?"

"Primarily as a lay chaplain. Sorry, I can't hang out longer. I'll stop in and see you tomorrow."

"Anytime you want."

I smiled and stepped over to Shelly's bed.

"Roth said they decided to kick you out today," I observed. "Something about being a pain in the ass to the staff?"

Shelly laughed, "The stupid TV remote broke, and it took almost twenty-four hours for maintenance to bring a new one. I mean, seriously? What's up with that?"

"It ain't the Hilton, that's for sure! Let me guess, you pressed the call button every time you needed the channel changed?"

"Or the volume changed, or it had to be turned on or off!"

"They should have stuck one of the candy stripers in here with you."

"They're having trouble recruiting since Hayes County High dropped the community service requirement for graduation."

"A foolish change. Yes, I know they're focusing more on academics, but dropping some vocational courses and things like community service requirements was a really bad decision. While I don't object to standardized tests, tying funding to test scores, as some have suggested, is likely to lead to further disparagement of graduating well-rounded citizens."

"You know the argument -- higher education is the path to upward economic mobility."



"Pardon me while I laugh at the fact that a friend of mine became an apprentice electrician three years ago, was paid during his apprenticeship, and now, as a journeyman, makes more than I do and will for at least the next four years. Not to mention overtime, collective bargaining, and a job he can go home from each day without any concerns! And compare that to my friends who are teachers who make less than he does, and probably will forever. The disparagement of trades and of manual labor is a terrible opinion and a worse policy."

"Athletes and rock or pop stars are overpaid; teachers and doctors are underpaid," Shelly observed.

"I understand your point, but if Major League Baseball generates billions in revenues, the players should share in that. The problem is not the athletes or musicians, but that the public is willing to fund those sports at those levels. Of course, because so much of it is advertising revenue, the costs are spread out in a way that people don't notice, unlike their property tax bill or income tax return!"

"Raise their taxes!" Shelly declared.

"The problem is, as Willy Sutton remarked about banks, the middle class is where the money is. That said, we shouldn't subsidize sports stadiums for billionaire NFL owners!"

"Amen to that!"

"Changing back to a more important subject, when is your psych eval?"

"Tuesday. Once they clear me, then it's a physical, and I can come back as of April 1st."

"That's what Owen projected your return date to be. Any chance it could be sooner?"

"Hospital policy is six weeks after major surgery. Something about liability insurance."

"Every single day I hate insurance companies more and more. Ditto with Medicare and Medicaid refusing to pay for tests and treatment that doctors think is appropriate."

"You're preaching to the choir! How is Loretta?"

"Unhappy, but she has a bit more feeling in her legs. Yesterday, she had a positive Babinski rather than an indifferent one. I'm no expert, obviously, but she's showing improvement each day. You should stop in and see her once they kick you."

"That's my plan," Shelly confirmed. "You up for lunch once a week in March?"

"Of course."

"Cool. How about Thursdays?"

"Works for me," I agreed.

I squeezed her hand in lieu of a hug, then headed back to the surgical ward.



## March 2, 1990, McKinley, Ohio

"If you're OK with it, Kris, Rachel, and I will come visit you after Liturgy on Sundays," I said to Loretta on Friday morning.

"I'd like that."

"How are you feeling today?"

Loretta smirked, "OK to be gross?"

"I'm a doctor! How gross could it be?"

"Guess where I itch?" she smirked.

I laughed then said, "Sorry, I shouldn't laugh, but if you have feeling *there*, that's a VERY good sign."

"TELL me about it! Lift the sheet and uncover my feet."

I laughed hard, "OK to be a smart ass?"

"What did I just walk into?"

"In the Bible, Naomi tells Ruth to uncover Boaz's feet, then lie down next to him and do what he tells her. Seems innocent enough until you understand that urine was referred to 'the water of one's feet'. She was, euphemistically saying, 'expose his genitals and have sex with him'."

"That was NOT an invitation to sex, you goofball!"

"I know that! I said I was going to be a smart ass!"

"Just uncover my feet!"

I did as she asked and saw her wiggle her left big toe.

"Wow!" I exclaimed. "That's huge! You're going to walk, Lor!"

"You do know what rehab is like, right?"

"I've heard the horror stories, but seriously, if it's that or a wheelchair..."

"Oh, I agree; I just don't want to be tortured for months on end!"

"How long at the facility?" I asked.

"At least a month, then it's week to week. Shelly stopped in to see me yesterday after they kicked her."

"She was as annoyed as every other patient who is required to leave by wheelchair. They got her to the door, she stood up, turned, and came back into the hospital and walked up to see you."

"She told me, and you know it's about liability."

"Insurance companies are the bane of our existence, though I'm not sure the government running things is any better after seeing Medicare and Medicaid! Sorry for the rant!"

"Right there with you! Changing topics, Bobby asked me to remind you that you're expected at the firehouse for dinner at some point. He doesn't see you now that you're in the surgical ward."

"As soon as we have our trauma surgery PGY1, I'll be in the ED for three months to train her on procedures, then alternate weeks. That's the new thinking on the training. But as with everything having to do with my program, always subject to change. I'll give Bobby a call."

"Did you hear they charged the girl's father with murder?" Doctor Gibbs asked.

"Yes. And that seems right to me, given he started the confrontation and brandished his pistol. Charging her lover with murder for killing her seems right, too, given she was effectively an innocent bystander. Her brother was charged with attempted murder for firing on her lover, though he missed all eight shots."

"It had to be the guy with Special Forces training who was at the hospital," Doctor Gibbs said ruefully. "But at least he won't be a burden on the taxpayers."

"I detest violence, but in this case, I'm grateful that Kleist and Turner were both crack shots and ended things before it got worse. Did you hear that the County Board voted a full scholarship for Deputy Sommers' son to go to any State school?"

"Small consolation for losing your mom at age five."

"Agreed. Rachel didn't have to suffer through the loss of her mom, which made it easier for her. Well, besides having to put up with a clueless dad."

Doctor Gibbs laughed, "I have news for you - she's going to think you're clueless for about six years starting in about nine years!"

"I think I can wait!" I chuckled. "I need to get back. Call so I can come see you on Sunday."

"I will. And thanks, Mike, for everything."

I smiled, kissed her forehead, and left the CCU to head back to the surgical ward. When I had my next break, I went to say 'goodbye' to Cathy who was being released. She flirted lightly, as was her usual practice, and I played along, though always careful to make it clear I was teasing. When I left her room, I returned to the surgical ward.



## **March 3, 1990, McKinley, Ohio**

"Why?" Rachel protested when I tried to put on her earmuffs in the music room at Taft on Saturday morning.

"Because the band is loud when we practice! If you want to listen, you have to wear your earmuffs. Or you can sit in the hallway."

"NO!" Rachel protested.

"Having fun, Mike?" Kari asked with a smirk.

"Petulance and toddlers go hand-in-hand," I chuckled. "Rachel, you need to wear your earmuffs or sit in the hall."

"NO!"

"Yes," I said firmly. "I told you that before we left home when you asked to come with me."

"DON'T WANT TO!"

I picked her up, grabbed a small chair, and walked into the corridor, setting the chair so Rachel could see the band, and I could see her, and put her in the chair. She immediately scrambled out of it, and I grabbed her and put her back. It was the ultimate test of wills, and I couldn't let my daughter win, or she'd think she could defy me simply by being, well, defiant. It took three rounds before she glared at me and crossed her arms but didn't move from the chair.

"You are SO dead," Sierra said with a smile. "Want me to watch her?"

"I'd appreciate it. She can only come into the music room if she puts on her earmuffs. She refuses to wear them."

"She's being a toddler!"

"Yep! Rachel, you stay with Sierra, please."

She glared at me but didn't refuse, so I went back into the music room, picked up my guitar, and looked to Kim.

"Let's start with *I Melt For You*," she suggested.

Two hours later, we completed our practice.

"Every Saturday now, right?" Kim asked.

"With the exception of your Easter weekend and the following one."

"OK. That gives us nine more practices, I believe. I think that should be enough for the Proms. You could do an evening or two if necessary, right?"

"Yes. Wednesdays are out, but other nights are OK. Also, remember Kris is due around the third week in June."

"Even if she's late, that shouldn't interfere with the Fourth of July."

"It won't. If she hasn't delivered by the last day of June, they'll perform a C-section."

"Where is Kris?"

"She's putting the finishing touches on a paper that's due on Monday. She'll be here next week."

I grabbed my things, then bundled an unhappy Rachel in her spring coat, and she, Kari, and I left the building together.

"How are you doing?" I asked.

"Good," Kari replied. "I started dating an attorney in the Public Defender's office. He graduated law school last year."

"I'm glad to hear that. You should have him come to band practice so we can meet him."

"Yes, Dad!" Kari said with a soft laugh. "He was busy preparing a brief this weekend and needed the time. He's helping defend one of the shooters from the domestic violence incident that ended at the hospital. Are you going to have to testify?"

"I don't think so," I replied. "I didn't actually see anything."

"José said you were in the room where the deputy was killed."



"I was, but from where I was, I could only see her, not out into the corridor. All they could ask would be medical questions, and Doctor McKnight could answer those. My chart notes would suffice for any treatment, but honestly, Deputy Sommers was dead before she hit the floor with a round through her temple. And even so, none of that would matter for the others who were charged because all that happened on their adjacent properties, not at the hospital."

"Sorry, I changed from asking about testimony to being concerned about you but didn't indicate the context switch!"

I laughed, "Why does that sound like a computer term?"

"Because it is! You're doing OK, right?"

"Yes. I met with a psychologist who cleared me to return to work right away. I only missed one full day."

We reached our cars, and once I had Rachel buckled into her car seat, Kari and I exchanged a quick, chaste hug. She and I got into our respective cars, and Rachel and I headed to McKinley Music and Movies.

"Morning, Mike!" Johnny called out when we walked in.

"Morning! Anything new and interesting?"

"*Highwayman 2* and *Vigil in a Wilderness of Mirrors* by Fish."

"I'm not a huge fan of country, but it's hard to pass up an album by Johnny Cash, Waylon Jennings, Willie Nelson, and Kris Kristofferson! I actually don't have the first one, so if you'll get me both of those and the Fish album, I'm good."

"CDs, right?"

"Yes."

"Were you at the hospital when that stuff went down last week?" he asked as he retrieved the three discs for me.

"Yes, but thankfully, Deputy Turner and Detective Kleist ended it before I was in any real danger."

"And how is the little one?"

"Rachel, tell Johnny how you are, please."

"Not happy!" she declared.

"We had a bit of a standoff," I said to Johnny. "I wanted her to wear ear protection while the band practiced, and she exercised her right as a toddler to object."

Johnny laughed, "I have two boys, seven and four, so you don't have to tell me!"

He rang up the purchase, and I paid him.

"See you in a few weeks," I said. "Rachel, say 'bye', please."

"NO!"

"Be polite, young lady," I instructed.

"NO!"

"Good luck," Johnny said with a grin.

"Thanks. I think I'm going to need it!"



## March 3, 1990, Cincinnati, Ohio

"May I hold Rachel?" Angie asked when Kris, Rachel, and I arrived at the Stephens' house on Saturday evening.

"You can try," I said. "She's in a mood."

"Rachel, come to Angie?" she asked.

Rachel smiled, walked over, and reached her arms up to be picked up. Angie picked up Rachel and I thought I saw a smirk on Rachel's face.

"She's such an angel," Angie observed. "What mood?"

"She's had an attitude all day today," I chuckled. "And she's showing it by being nice to you when she was unhappy with me all day! I don't get it because she usually likes 'papa time'."

"She's two, right?" Mrs. Stephens asked.

"Yes. She'll be three at the end of August."

"It's the age where they discover a level of independence, and they let you know about it! Do you have a moment to speak privately?"

"Kris?" I asked my wife, indicating I wanted her permission.

"Yes, of course," Kris replied. "I'll stay with Angie and Rachel."

Mrs. Stephens and I stepped into the kitchen.

"Angie asked about seeing Doctor Mercer again. I'm not sure that's a good idea."

"Me, either. Did Angie give a reason?"

"She doesn't like the behavioral counselor she's been seeing, and the psychiatrist suggested we find one Angie likes and can relate to. She always liked Doctor Mercer and Doctor Mercer helped at the hearing."

"Have you spoken to Doctor Mercer?"

"No. I wanted your opinion first."

"Does Angie know that?"

"No. I said I wanted to confer with the attorney Laura Bragg hired to help us. What do you think?"

"I think I'd like to speak to Doctor Mercer. I spoke to her on Wednesday, and I need to ask her a very specific question."

"Would you mind sharing?"

"Just to confirm something we discussed -- holistic treatment."

"I'm sorry, I don't know that term."

"It means, to put it simply, treating body, mind, and soul. Medicine gives the soul short shrift, even in hospitals run by religious organizations. In my mind,

true healing only occurs when all aspects of a patient's being are taken into account."

"Wasn't that happening with Father Stephen?"

"The problem was, as I see it, that he and Doctor Mercer didn't discuss Angie's spiritual health. He, in obedience to Bishop JOHN, reported relevant details to Doctor Mercer, but they didn't discuss Angie in a way that I believe would have helped. For Angie, as for me, receiving the Eucharist is a necessary part of healing our bodies, minds, and souls."

"So what is it you need to ask?"

"If Doctor Mercer will treat Angie in the way I think will be most beneficial. If not, then we need to find another counselor. I think she will. She actually asked about Angie when we spoke on Wednesday, and I promised to let her know how Angie was doing. On that, Angie seems a bit more alert."

"She has good days and bad days. Doctor Hoffman has reduced the dosages to the minimum that keeps Angie on an even keel about ninety percent of the time. She's working again, but only half days. More than that, and she becomes erratic. Aikido helps, as does going to church."

"Any medical problems?"

"No. She had a complete set of lab tests, and her liver and kidney function is good, something that her doctor said they have to watch closely."

I nodded, "Long-term use of any drug can impair liver and kidney function. How's her diet?"

"Good. No processed foods, limited sugar, limited salt, and limited complex carbohydrates. Fruit, vegetables, chicken, fish, and shellfish, along with nuts as snacks."

"Not all that different from my diet," I replied. "Though I eat too many French fries."

"I think we ALL do!" Mrs. Stephens said with a smile.

"And her sleeping habits?"

"The mild sedative she takes keeps her calm and helps her sleep."

"Is Angie's friend Anna still in Chicago?"

"Yes. She's still working For Allstate at their headquarters in the Chicago suburbs. She married Gerryd, has a son who is eighteen months, and is about three months pregnant. Unfortunately, she hasn't come to visit in over a year. Angie spends quite a bit of time with the women from church, both her age and the older ladies."

"Good. I'll call Doctor Mercer on Monday and then call you."

"I know it might be asking a lot, but could you see Angie more often? She was so happy today."

"My schedule has changed and would probably allow that. Let me speak to Kris, but I think we can do that."

"Good."

"Code Blue is playing at the Goshen Prom on May 11th."

"Linda Kane let me know. Angie is looking forward to it."

"Great! Shall we go rescue Angie from my daughter?"

"That adorable little angel?" Mrs. Stephens asked mirthfully.

"That's how they trap you!" I chuckled. "Then they turn into toddlers! And later, into teenagers!"

We both laughed, then returned to the living room where Angie, Kris, Rachel, and Mr. Stephens were sitting.



## **March 3, 1990, McKinley, Ohio**

After dinner at Angie's house, Kris, Rachel, and I drove home, where I read to Rachel, and we said our evening prayers. Once Rachel was in bed, Kris and I relaxed in the great room with tea.

"Is it OK to ask what you and Mrs. Stephens spoke about?" Kris inquired.

"Of course! Even without our 'no secrets' rule, I'd tell you. Angie asked about seeing Fran Mercer and Mrs. Stephens asked for my thoughts on that."

"Please don't take this the wrong way, but is Angie aware that Doctor Mercer agreed with the treatment by the psychiatrist who had his license suspended?"

"No, I don't believe so, as there was no need to tell Angie. Part of it is that I'm not sure Angie could comprehend the nuances of being required to report what

Angie had told Father Stephen and where responsibility for the choice of treatment actually lay.

"Remember, too, that Fran's reaction was as much about me as it was about Angie. She felt I was ignoring the standard of care because I was too close to the matter, which is the exact reason ethical physicians do not treat loved ones or family members, except *in extremis*. It's far too easy for judgment to be clouded, even if you recognize the possibility."

"We didn't discuss it, but how do you reconcile that with the situation with Elizaveta's grandfather?"

"The problem nearly always lies in the opposite direction -- making an extraordinary effort or taking significant risks to achieve an unlikely outcome. In this case, it was obvious that Nikolay Vladimirovich was not going to survive, or if he did, he would be on a ventilator in a hospital bed until he had another significant coronary event. His request for me to call Father Nicholas was made because he knew he was dying.

"Once his heart stopped, I felt resuscitation efforts would be futile. I had spoken with him quite a bit over the time Elizaveta and I were courting or married and knew the last thing he wanted was 'heroic measures', as they're called. I considered that knowledge to be the equivalent of a living will, and Viktor and Doctor Gibbs concurred with that decision."

"That's your fear as well."

I nodded, "That's why we had Stefan draw up the living wills."

"What did you say to Mrs. Stephens about Doctor Mercer?"



"That I'd speak to Fran on Monday. I actually have an idea that I think will help, assuming Fran is willing."

"What's that?"

"In cases where cross-discipline expertise is needed, the hospital will convene a working group of physicians, nurses, and other professionals who meet regularly to discuss the patient's care. That's especially true for difficult or complicated cases, or cases where there is no known cure."

"Like with schizophrenia, right?"

"Yes. I think the best approach would be to have Father Stephen, Fran, Angie's GP, her gynecologist, and her Aikido instructor meet regularly, perhaps by conference call, to discuss her treatment. We know that Angie does better when she attends church and practices martial arts and that her diet directly affects her moods and her emotional stability. All of those people have to work together to get it right."

"You didn't mention her psychiatrist."

"Sorry, yes, obviously Doctor Hoffman would be involved and would probably be the one to lead the group. But I think it has to start with Fran because everything I've read says that behavioral psychology shows better results than any other possible treatment. Remember, I have but one goal here."

"To keep Angie from being sent to an inpatient facility."

"Exactly. She's living a productive life that is fulfilling, at least so far as it can be. That should be our goal for any patient we treat. That said, there is no possible way Angie can ever achieve the things she wanted most in life -- a husband and

children. Greenberg threw all of that out the window when he committed malpractice."

"May I ask how much money was provided?"

"Stefan negotiated an annuity that will provide \$36,000 per year for life for Angie, though it's set up so that the money goes to whoever is her primary caregiver. That's her mom, and it will be so long as her mom is capable of caring for her."

"What happens after that?"

"It gets tricky, but Stefan set things up such that Lara and I are 'next friends' and we'd have significant input into her care, with Lara directing the financial side. The State would have to decide who would have custody. If something happened soon, God forbid, her brother would have custody, and more than likely, Angie would live in a Roman Catholic group home, though there is a chance she might be able to live with one of the women from Saint George, Loveland."

"Angie's parents are in their fifties, right?"

"Her dad is fifty-two and her mom is forty-nine. I hope that means at least twenty years where Mrs. Stephens can reasonably care for Angie. We'll worry about what happens after that, after that. Mrs. Stephens did ask if we could see Angie more often, and I said I'd discuss it with you."

"Rachel certainly loves her!"

"Rachel was being a...toddler!"

Kris laughed, "I was so surprised to see YOU on the receiving end! She usually worships the ground on which you walk!"

"Hold that thought for when she's a teenager," I chuckled. "I saw how things were with Liz, Tasha, Emmy, Lara, Elizaveta, and others. Conflict is normal. That's true even for your sister, though to a lesser extent than most. The Tsarina is asserting her newly discovered independence. It's right about this age when they figure out that they can flat-out refuse to do something, and adults are, generally speaking, helpless to force them."

"I bet when 'Mama' has a new baby to care for, 'Papa' will walk on water once again!"

"We'll see!" I said. "Ready for bed?"

"With you? Always!"

I took our empty mugs to the kitchen, and then Kris and I went up to bed.



## **March 4, 1990, Columbus, Ohio**

"Hi, Loretta," I said when Kris, Rachel, and I entered her room at the rehab center on Sunday after church.

"Hi, Mike!"

Bobby and Bobby Junior were there as well, and I greeted them.

"How are you doing?" I asked Doctor Gibbs.

"They ran every test they could think of on Friday, and my physical torture begins tomorrow morning."

"Therapy, Doctor," I corrected. "What did the tests show?"

"I had a contrast CAT scan, and the neurologist said the results looked 'promising'. I can wiggle both big toes."

"That's excellent news."

"What happened?" Rachel asked.

"I was hurt at the hospital," Doctor Gibbs said. "My legs don't work right, and they're going to fix them."

"Papa can fix them!" Rachel declared.

*"Back to walking on water again,"* Kris said quietly.

"Papa isn't that kind of doctor," I countered. "Papa's job is to save lives. Other doctors fix this kind of problem."

"Why?" Rachel asked.

"Because a doctor needs special training to fix legs; my special training is to save people who are in accidents or who have a heart attack or things like that."

"Why?"

"Because there's just too much for any single person to know!"

"Papa knows everything!" Rachel declared.

"Do you know the difference between God and a surgeon?" Bobby asked me with a grin.

I chuckled, "I've heard that one once or twice! But I'm not the one making the claim! And I'm smart enough not to run into burning buildings!"

"Don't look at me!" Bobby declared. "I'm right with you on that one! You know paramedics rarely do that. And speaking of running into burning buildings, you haven't come to the house for dinner. We still owe you for the LT."

"LT?" Kris asked.

"Short for 'lieutenant'," Bobby said. "In this case, it's Jim Greer."

"Pick a night except Wednesday or Saturday," I said.

"A week from Tuesday," Bobby suggested. "We'll get the entire company to the house, plus the captain. It'll be crowded, but we can pull the engines out of the bay and set up tables. We've done it before. What time does your shift end?"

"5:00pm."

"Then let's call it 6:30pm in case you get shanghaied into a trauma."

"Sounds good."

We spent about thirty minutes visiting, then Kris, Rachel, and I headed home for a meal with Elias, Serafina, Subdeacon Mark, and Alyssa.



# V. Because I Love You

**March 5, 1990, McKinley, Ohio**

"I'm honestly surprised," Fran Mercer said on Monday evening after I explained why I had called her.

"If you're surprised, then I'm concerned," I replied.

"Why?"

"Because it tells me you still have a misconception about my views on what happened."

"Given how often you read me off, don't you think I have reason to be at least mildly surprised that you'd consider it?"

"I suppose that's reasonable, though you should also consider what drives my actions."

"Angie's wellbeing is primary over just about everything except your family."

"And because she asked, what was my only possible course of action?"

"Oh, stop!" Fran said, laughing. "You're using the rhetorical tricks your mom used on you!"

"Guilty as charged. I only have one question for you, Fran. Can you commit unequivocally to treating Angie holistically? That is body, mind, and soul? And spare me the reflexive 'ethical concerns'."

"You do acknowledge that they are real, right?"

"If you were trying to convert her or convince her to give up her faith, I'd have you before the licensing review board so fast your head would spin. But that is not what I'm talking about, and you know it! You and I talked about these issues years ago, and you seemed willing to discuss them with me."

"You weren't a patient, Mike. Even if we called a few of those sessions 'counseling', it was more akin to coaching than what the practitioners would call behavioral counseling. Everything I did with you could be done by a layman, except that first evaluation."

"Fair enough," I replied. "But given how integral Angie's faith is to her wellbeing, it can't be ignored or even minimized. I have a thought of how we might proceed."

"What's that?"

"In the same way the hospital uses cross-discipline teams to treat patients with complex or unknown maladies, we should do that with Angie. A monthly meeting, which could be by conference call for convenience, with you, Father Stephen, Angie's GP, her Aikido instructor, and, if appropriate, Leslie Hoffman. You all discuss Angie's case, share what you know, and agree on a unified treatment plan that minimizes the use of pharmaceuticals."

"I'm sure you're aware that Doctor Hoffman has an approach closer to yours," Fran said.

"Yes. It's one of the reasons Marjorie and Ken named her in the petition to move Angie away from the now-disgraced Doctor Greenberg. What do you think of the idea?"



"I think it's a good one, though I'm not sure how easy it will be to coordinate everyone."

"I'll speak to everyone and get them on board, then turn it over to you. I need to stay away from that group so I can be Angie's friend; I'm absolutely not her doctor."

"But are you going to second guess us at every turn?"

"No. That was the point of what I just said. The only person with whom I'll communicate about Angie regularly is Marjorie Stephens. Well, and Angie, of course. So long as Marjorie is happy, I'll be happy."

"Can you really stay hands-off?"

"Can you really treat Angie holistically?"

"One of those is more difficult than the other," Fran said.

"I know. You have the much harder challenge!"

Fran laughed, "You know that's not what I meant!"

"Yes, but I actually meant what I said. Given our disagreements in the past, it's a reasonable question and a legitimate concern. Remember, I am not proposing any specific course of treatment, only that the treatment deals with Angie as a complete person -- body, mind, and soul. It's only in that synergy that we are who we are -- our authentic selves."

"And you think all the others will buy in?"

"I do. Father Stephen and Angie's Aikido instructor will agree immediately. I can't imagine any GP worth his salt who wouldn't agree simply based on continuity of care. My interactions with Leslie Hoffman tell me she'll agree. That leaves you. Are you going to reject Angie's plea for help based on a flawed view of humanity?"

"More 'black or white' thinking?"

"No," I countered. "Infinite shades of grey. It's you who are engaging in 'black or white' thinking when it comes to dealing with matters of faith. You know what the literature says about regular church attendance and schizophrenia, even if it's anecdotal. Anecdotal, it may be, but it helps Angie. So, please tell me a better plan for *this* patient."

"You are, as you promised you would be, a forceful advocate for your patients or, in this case, your friend."

"Does that mean you accept?" I asked.

"On a trial basis, yes, assuming the others agree."

"I'll accept that, given we're attempting something different. I'll get in touch with Father Stephen and contact Angie's Aikido instructor. Once they're on board, I'll speak to her GP and Leslie Hoffman."

"Do your supervising physicians find you as difficult as I do?"

"More, I suspect," I chuckled. "You don't have to deal with me twelve to fifteen hours a day, five or six days a week!"

"You take perverse pleasure in being a pain in the butt, don't you?"

"I may take pleasure in the fact that Doctor Gibbs regularly calls me a pain in the ass and, in fact, upgraded me to 'royal pain in the ass' back in November."

"How are your reviews?"

"All good, though I have been spoken to about being confrontational."

"Shocking," Fran said lightly. "I'll let you go. Get in touch when you've spoken to the others."

"I will."

We said 'goodbye', I hung up, then returned to the great room to spend time with Kris and Rachel before bed. A short time later, we said our family prayers, and I put Rachel to bed.

"How did it go with Doctor Mercer?" Kris asked when I joined her on the couch after Rachel's bedtime routine.

"She's willing to give it a try, which is probably the most I can expect at this point. I have to be very careful not to try to treat Angie but simply manage the process. It's a fine line, but I think I can walk it."

"Is there any chance at all that Angie will recover?"

"There have been sporadic reports of what I would call long-term remission for women in their forties or fifties, but that's almost always those with late-onset. As far as I'm aware, there are no verifiable reports of women who exhibit symptoms as teenagers entering long-term remission. Of course, I'm not an expert, and I don't read the literature because I simply don't have the time. To be honest, I also don't have the training or experience to understand the literature. I'd be in the same boat with an oncology journal."

"I always had this conception of doctors as knowing more than they actually do."

"Me, too. I struggled with the concept, but now, five years after my first Preceptorship rotation, I understand what they were trying to tell me. But enough about medicine! What can I do for you?"

"Put on some soft music and cuddle before bed."

"That I can absolutely do!"



## **March 6, 1990, McKinley, Ohio**

"How did things go with your call with Doctor Mercer?" Clarissa asked at lunch on Tuesday.

"OK. It took some arm twisting, but I think things will work out. This morning, I called both Father Stephen and Jonas Blane, Angie's Aikido instructor, and both agreed to participate in what I'm calling Angie's treatment team meetings. Marjorie is contacting Angie's GP. Once he agrees, then I'll speak to Leslie Hoffman. I'll work through Marjorie Stephens to ensure they're making progress, and consult with Father Stephen if they seem to be veering off course."

"Creating the 'wall of separation' you need so it doesn't appear you're treating her."

"Exactly. I'm acting as her friend, doing my best to ensure her medical team works with her spiritual advisor and her physical trainer, though Aikido has a spiritual component, similar to Shōtōkan karate."

"You're doing a good thing, Petrovich. I know how much you love her and how upset you were at what happened."

"If I believed in specific answered prayer, the one prayer I would make would be for Angie to recover enough to live a normal life, even if she was never able to marry and have kids."

"I'm going to ask this as only Lissa could -- not for Elizaveta not to die?"

"I'm talking here and now, Lissa. I didn't ask for Angie to never have been afflicted with schizophrenia. I mean, at that point, the entire universe is upended. Maybe the multiverse does exist, and there are realities where Angie is healthy, and Elizaveta doesn't die, but if those things changed, what else would change? And would I *ever* ask for anything that took Rachel from me?"

"Never, despite her being in full toddler mode!"

I couldn't help but laugh, "Alternating between 'Love Papa!' and 'No!' from minute to minute!"

"The first said in French, of course, thanks to your sister-in-law!"

"Yeah, yeah," I chuckled. "She has a boyfriend now, so she's torturing HIM instead, I'm sure!"

"And yet, she's still teaching Rachel to speak French!"

"She has less time, so that's a good thing!" I grinned. "How is the ED?"

"Non-stop excitement! Exactly what I *didn't* sign up for! I don't know how you adrenaline junkies do it!"

"Always looking for the next hit to maintain the high!" I chuckled.

"I will be SO happy when June 1st rolls around! You can have it! I'll go back to actually spending time with patients and having more than a few seconds to think. You were made for emergency medicine; I wasn't."

"Just hang in there, Lissa. There's a light at the end of the tunnel."

"And I swear it's an oncoming train!"

We finished our lunch and Clarissa returned to the ED while I went upstairs to supervise my students prepping the afternoon surgical case. I had just completed that when I was paged by the duty nurse for an ER consult. As was the usual practice, I left Erin to escort the patient to the OR while Todd accompanied me to the ED. We took the stairs, and walked down the corridor and into Trauma 1.

"Hi, Ghost. What do you have?"

"MVA with major chest involvement; classic flail chest with multiple internal injuries. He needs a central line and a chest tube."

"Cutdown tray to me!" I ordered.

Kellie brought me the tray and assisted me while I put in the central line and chest tube.

"500cc in the Thora-Seal," I observed. "He's going to need surgery. Todd, call upstairs and let them know we need a chest cutter in about ten minutes."

Ghost ordered two units on the rapid infuser, and a minute later, the patient's blood pressure improved. Once he was stabilized, Naveen Varma, Todd, Ghost's student Janelle, and I escorted the patient up to OR 3.

"Scrub in, Mike!" Nelson Burke instructed. "Your students, too. How bad?"

"MVA; flail chest; 800ccs total in the Thora-Seal; BP is 90/60; tachy at 110; right tib-fib compression fracture; assorted lacerations and contusions."

"Stood on the brakes?"

"That would be my guess."

We all moved to the scrub room to prepare for surgery.

"You'll be the second surgeon," Doctor Burke said. "Blake will be about thirty minutes, and this guy can't wait. Can I count on you to ligate or Bovie?"

"I've only used the electrocautery device once, but I can use it under your direction. I haven't ligated during surgery, but I have practiced; again, I can do it under your direction."

"OK. For the Bovie, I'll point, you shoot. For ligation, I'll give express instructions. Your students will hold retractors, and Abby will suction."

We were, at best, a makeshift surgical team, but with Shelly missing and three other procedures underway, there wasn't much choice. Shelly would return in just over three weeks, and in two months, we'd have our new complement of Residents. That would help a bit, but it wouldn't be until we moved to the new surgical wing in three years that we'd be able to handle six simultaneous procedures. We were already delaying non-emergency surgeries, and the problem would get worse before it got better.

Fortunately, while the patient was badly injured, he wasn't bleeding out quickly, which allowed Nelson to provide specific directions and advice as I completed

the tasks as he directed. The surgery went well, the internal bleeding was stopped, and when it was done, my students and I escorted the patient to recovery. I checked his vitals, then left Erin to sit with him and went to the lounge to speak to Nelson.

"Appraisal?" I asked.

"You know your knots, but you need serious practice with the Bovie. It'll come, but if we'd needed to move fast, neither skill is up to snuff. That's not a criticism, mind you, simply an acknowledgment that you're a PGY1, and those are PGY3 skills. You're skilled with the scalpel to the point where Dennis Nagle noted that you were the most skilled he'd seen in his twelve years teaching anatomy and recommended you be a surgeon."

"I wasn't aware."

"You had your mind made up. I know Owen spoke to you and tried to bring you to the Dark Side. We're very happy you found a way to split the difference and pushed us to do something we probably would have delayed doing for several years. And then the events of a few weeks ago forced us to accelerate your training. It's working because you understand your limitations. That's important as you move forward, too. Each success will make you more confident, and that's what leads to overconfidence."

"Shelly and Loretta have made that point, as has Carl Strong. And, of course, Clarissa Saunders never misses a chance to knock me down a peg or two!"

"All of us have that friend who does their best to try to keep us grounded. That's especially important for surgeons."

"What?!" I faux-whined with a smirk. "We're not gods? They told me I'd be a god!"



Doctor Burke laughed, "That is our reputation. The important thing is not to let that convince you that you can do more than you're ready to do. I believe John spoke to you in detail about that following the crike."

I nodded, "He did."

"With Shelly and Loretta laid up, who are you talking to?"

"Doctor Saunders and Ghost, along with a clinical psychologist I've worked with for years. And my wife, of course."

"That's the outside psychologist Owen referred you to for your psych eval following the incident?"

"Yes. I first met her about eight years ago as a Freshman, and we've had a few ups and downs. Coming back to Shelly and Loretta, I actually spoke to them almost every day. I'm having lunch with Shelly on Thursdays this month, and I visit Loretta on Sundays at the rehab center in Columbus."

"OK. Keep doing that, and keep up the good work, Mike. Just remember you still have a lot to learn."

"Thank you, and I will remember."

I left his office and went to check on the patient in recovery, then went to the lounge to wait for my next consult.



## March 8, 1990, McKinley, Ohio

"What did Psych have to say?" I asked Shelly when we met on Thursday at a new diner which had opened across the street from the hospital.

"The usual BS. They cleared me but felt I was pretending to be OK."

"That was my concern if they were to have evaluated me, especially given my history with them. I'm actually not surprised, given you supported me against Lawson."

"They tried to ask about you, but I refused to comment at all and directed them to Doctor Cutter."

"That also doesn't surprise me," I said. "They have it in for surgery and the ED, and me specifically."

"You know Lawson is a wannabe surgeon who couldn't Match, but I found more -- his girlfriend at the time, who was lower ranked, Matched her first choice -- surgery at UCLA. He tried to Scramble to something in LA but ended up in Grand Rapids. And as you know, they wouldn't hire him as an Attending."

"And we did?"

"Another datapoint -- his uncle was good friends with the Psych Chief at the time and pulled strings to get him hired."

"Wonderful."

"Oh, it gets better. Her uncle is Mark Edwards."

"The former Chairman of the Board of Directors of the hospital," I observed.

And Erin Edwards' dad. He was no longer Chairman, having taken a similar role at a private-sector, for-profit hospital in Columbus.

"That explains a few things," I said. "Between you and me, and not to be repeated, his daughter was relentless in trying to entice me to cheat on Elizaveta."

"How did you meet her?"

"The first time was when she was in the ED after being struck in the head by a golf club. That was in the Fall of First Year. I ran into her again when I was on my OB/GYN Preceptorship. After that, she sought me out on several occasions."

"And you honored your vows, of course, not to mention valuing your life, given what I've heard about Elizaveta."

"She was a feisty one, that's for sure. I let her know what had happened because they were classmates."

"Ever been tempted?" Shelly asked.

"Not the way you mean, but I freely acknowledge that Kellie Martin would be at the top of my list if I were single."

Shelly pouted, "Not me?"

"I want to ask *you* a question -- is that how you want me to think about you in the locker room?"

"Touché. Has Ellie Green backed off?"

"Yes. She'll hint occasionally that she's still interested, but it's tame."

"And that High School Senior who all but begged you to screw in her hospital bed?" Shelly asked with a smirk.

"You were there and saw how I handled it! And she was careful to not push things too far."

"Right, because saying surgery was the only way she'd get you inside her wasn't pushing things too far in any way!"

I chuckled, "Tone of voice. Did she mean it? Sure. Was she being obnoxious? No. She understood I was OK with a bit of teasing, but I'm positive she also knew it wasn't going to happen. If it was, the *last* thing I would have done was explain wearing my wedding ring on my *right* hand."

"True."

"How are things with your guy?"

"Moving along," Shelly replied. "I figure a Fall wedding next year, but neither of us is in a hurry. It's not like the piece of paper is a permission slip or anything!"

I chuckled, "I know a few fathers who would strongly disagree and insist that it is the *only* permission slip!"

Shelly rolled her eyes, "My dad was like that. And you know my response!"

I chuckled, "The same one quite a few young women I know chose, including my mom!"

"Who told you? Your dad?"

"No, my mom. The really funny part is she was positive her dad didn't know, but it's clear from things he's said that he was aware she was, to put it in 1950s terms, 'running around'."

"I think my dad went for the 'plausible deniability' approach."

"That sounds like the dad of a girl I dated for a few years in college. There is no way he didn't know, but he never said anything. Well, that's not quite true -- his other daughter got pregnant at sixteen, and she accused her older sister of having sex with me to try to limit the fallout. Of course, at that point, the girl and I hadn't started fooling around, so we could deny it."

"I suspect your history in High School and college would be interesting to hear!"

I chuckled, "Not High School. I didn't become a 'loose man' until after graduation!"

Shelly laughed softly, "Nice way to turn that around from the usual stupid idea that guys are studs and girls are sluts."

"You, of all people here, should know I don't go for double standards for anything."

"May I say I'll enjoy watching you about ten years from now?" Shelly asked with a sly smile.

"Miss Rachel is already asserting herself and has her biological mom's fiery personality! Not that Kris isn't equally fiery."

"Of which there is ample evidence, given she's due in three months!"

"Whatever! How are you feeling?"

"Good. I'm back to my regular exercise routine, albeit using significantly less resistance and less weight on the machines. I'm working my way back, but it'll be a few months."

"So other than about four inches of small bowel and one lobe of your liver, no internal problems?"

"None. Thank God it missed my uterus. I only want one, but I do want one."

"Fortunately, John and Owen are both enlightened enough that they won't interfere with your career beyond missing eight to twelve weeks."

"Speaking of that, how much trouble have you gotten into while I've been out?"

"I performed an appendectomy."

"As a PGY1?!" Shelly asked. "I am seriously jealous!"

"I also assisted with a trauma surgery and used the Bovie and ligated. Fortunately, the patient was stable enough for Nelson Burke to talk me through things."

"All the PGY2s and PGY3s were tied up?"

"Yes. It's been busy, and missing a qualified surgeon doesn't help."

"Not yet," she replied. "Still a PGY5."

"And yet, you're permitted to perform procedures with minimal supervision. I'm certainly not and won't be for some time. Well, except the procedures in the ED, but even those are always supervised by an Attending."

"That's more about liability than anything," Shelly said. "You're obviously qualified to perform those procedures."

"Nelson did warn me about crossing lines, the same as Owen did after the criske."

"You've exercised good judgment, which is why you're allowed to do those things. I'm positive you won't intentionally get in over your head, but I also know you'll call for help the moment you need it."

"That worked so well with OB!" I said sarcastically.

"Hey, you have the distinction of delivering a healthy baby in the ED! That's a rarity!"

"And one I'd have very much preferred to NOT have done! That said, it all turned out well, and the fact that the teenage girl's parents were supportive was a nice plus. If I never have to do that again, I'll be happy!"

"So will legal! They do not need that kind of potential liability! If *anything* had gone wrong, even if it wasn't our fault, the hospital would have been in deep sneakers!"

"True. And the same was true for the criske, though given it was a fireman, the County was on the hook either way."

"I'd have tried that as a med student if there was no other way to save his life," Shelly said. "Thankfully, I didn't have to. That said, I was first on the scene of an MVA when I was Fourth Year and provided what was euphemistically called 'First Aid' to the victims. That violated the rules, but everyone looked the other way for obvious reasons."

"Did they all make it?"

"Yes. The paramedics showed up about five minutes after I started working on the patients with a pair of First Aid kits and the minimal things I had in my medical bag. I helped them until they transported the patients. And, like you with the cruke, I reported my own behavior."

"Confession is good for the soul *and* the medical license!"

"As they say, it's much easier to ask forgiveness than permission. That's how you handled the delivery."

I nodded, "Once it was clear OB was going to blow me off, I had no choice but to order my student to commandeer the necessary equipment. Fortunately, the Attendings fought that little war."

"Territorialism is a major problem. You saw it with the battle over to whom the trauma surgeons would report."

"I prefer the red scrubs!"

"Me, too!"

"Sorry to cut this short, but I need to get back to supervising my toddlers prepping a bowel resection."

"YOU were a toddler less than a year ago!"

"I grew up! Allegedly."

"Allegedly!" Shelly confirmed with a smile.



We hugged lightly, I paid for our lunches, and then I headed across the street to the hospital. Everything went smoothly, and at 3:00pm, I walked to the medical building next door for Kris' prenatal checkup. Doctor Forsberg pronounced everything was fine and provided an ultrasound image for us. When the exam was finished, Kris headed home, and I returned to the hospital to complete my shift.



## **March 10, 1990, McKinley, Ohio**

"Are you going to wear your earmuffs?" I asked Rachel as I unbuckled her from her car seat.

She screwed up her face and glared at me, looking for all the world like Elizaveta when she had been unhappy with me.

"I don't want to!" she declared.

"But will you do it?"

She glared at me, then grudgingly said, "Yes."

"Thank you," I said.

Rachel insisted on walking, so I slung my balalaika across my back and carried my guitar case in my left hand. I held Rachel's left hand with my right, and Kris carried our sheet music as we walked into the humanities building and made our way to the music room.

"Morning, Mike!" José called out when we walked in. "Hi, Kris! Hi, Rachel!"

We all greeted him, along with the other members of the band.

"Mike," Kari said, "this is Doug Cromwell from the Hayes County Public Defender's Office; Doug, Doctor Mike Loucks, a trauma surgeon."

We shook hands and greeted each other.

"Call me Mike, please," I said. "Or, if you *have* to use my title, Doctor Mike."

"Mike it is," he said.

Practice went well, though I was out of practice playing with the group, but I was positive I'd be fine by the time we had to play the first Prom gig.

"I figure we won't try any new songs until after the Proms," Kim said as we packed up our equipment. "I figure we can use June to learn a pair of new songs for the Fourth."

"What are you thinking?" I asked.

*"Every Rose Has Its Thorn, Once Bitten, Twice Shy, Welcome to the Jungle, or Make Me Lose Control. Any preferences? You're the one who sings lead."*

"If it's up to me, then I'd choose Poison and Guns N' Roses."

"OK. We'll do those. I'll solicit input from everyone after the Fourth to expand our repertoire. We won't have time before the club gig to learn them, though, but we could for the music festival."

"How many songs are on that setlist?" Sticks asked.

"Six. Basically a thirty-minute set. Six leaves us time for an encore."

"Is there any way to find out what other groups are singing?" José asked. "It would be better not to overlap."

"I'll call Johnny and ask," I offered. "I'll also make sure we can substitute after we turn in our list so we can avoid duplication."

"Great!" Kim declared. "See you guys next weekend!"

Kris, Rachel, and I left the music room and returned to my Mustang. Once everyone was buckled in, we headed to Kroger for our weekly shopping trip. Great Lent was in full swing, but we had a seriously relaxed fasting rule, given Kris was in her sixth month. That meant fish was always allowed, and chicken occasionally, along with dairy, though we were careful what we served when our Orthodox friends joined us for meals.

"Lara doesn't follow the fast strictly, right?" Kris asked as we shopped.

"Correct. She and Nathan simply abstain from red meat, so having chicken tomorrow won't be a concern. Clarissa, Tessa, Jocelyn, and Gene will eat anything we put before them."

"Papa?" Rachel inquired from the seat in the cart.

"Yes?"

"Sketti?"

"I think we can have spaghetti tonight if Mama is OK with that."

"Yes, of course!" Kris agreed. "We can make chicken Parmesan on a bed of spaghetti noodles."

"Let's get a French loaf so I can make garlic bread as well," I suggested.

"At the bakery, not here, right?" Kris asked.

"Yes."

We bought the necessary ingredients, along with the other things on our list, then stopped at the baker for fresh bread. At home, we had lunch, and when Rachel went down for her nap, Kris and I went to lie in bed so she could nap as well. That evening, after dinner, we went to Saint Michael for Vespers, then had a quiet evening at home.



## **March 11, 1990, Columbus, Ohio**

"How are you doing, Misha?" Vladyka JOHN asked as we sat in his office at the Cathedral on Sunday following the Divine Liturgy.

"I'm OK."

"I will repeat that I thank God each day for protecting you. How are your friends?"

"Doctor Lindsay will return to work in about three weeks. Doctor Gibbs is making slow progress. We'll stop in to see her after we leave here today, but when I spoke to her on the phone on Friday, she said she has feeling in both legs and can move all her toes. That indicates she should be able to walk, though she might need leg braces or a cane. Nobody can say for sure at the moment."

"Good. And your interior life?"

"I confess every two to three weeks, receive the Eucharist every Sunday, and pray consistently."

"Have you spoken to Father Roman?"

"I did call him the day after the incident, and I'll see him the weekend of April 6th. All three of us are going to the monastery."

"And you've continued to speak to your secular counselor?"

"Yes. On that, I'm working with her complete caregiving team to coordinate her care."

"Father Stephen called to let me know. You're doing a good thing, Misha. When is your next trip to the prison?"

"Two weeks from today. Protodeacon Ivan will be there to serve the Typika, which I'm sure you know."

"You'll act as his acolyte, yes?"

"Yes."

"You have my blessing to wear your purple *sticharion*, though obviously not your *orar* or any other indicia of clerical office."

"Thank you, Vladyka. I had planned to simply wear my cassock, but I will wear the *sticharion*."

"On that matter, do you have any idea what Kris might think about our discussion a few years ago?"

"I think she would object, at least with regard to the canons. She was ROCOR, as you know."

Bishop JOHN laughed, "They do tend to insist on «akriveia» in all things! On that, Metropolitan PHILIP of the Antiochian Archdiocese granted permission for a widowed priest, Father Joseph Allen, to marry without being laicized."

"I bet that went over well."

"There was, shall we say, a small rebellion amongst some of the clergy, especially the priests in the AOEM."

The AEOM was the new name for the Evangelical Orthodox Church, which had been brought into the Antiochian Archdiocese by Metropolitan PHILIP.

"I take it that did not lead to reversing the decision."

"It did not. The reports I've received say that the laity accepted it and most supported it."

"Interesting."

"We'll discuss it again in a year or two," Vladyka JOHN said. "I did suggest to Father Nicholas that you teach Sunday School once a month, and I believe your new schedule would permit that."

"It would. I do want to say that I'm not sure Kris will see things differently, even with what you just told me about the Antiochian priest."

"Let's worry about that in the future. Will you teach Sunday School once a month?"

"Yes, Vladyka," I replied.

"Good. How is Kris doing with her pregnancy?"

"Just fine. She had her checkup on Thursday, and Doctor Forsberg was happy."

"Did you ask the sex?"

"No, but I'm reasonably certain from looking at the ultrasound image. I didn't say anything to Kris, so I shouldn't say anything to you."

The image had suggested strongly that we'd have a baby girl, but ultrasound images could be deceiving. In reading them, being certain the baby was a boy was possible, but unless the baby was in exactly the right posture, at six months, you could not say unequivocally the baby was a girl.

"Wise, Misha!" Vladyka JOHN said with a twinkle in his eye. "Have you chosen names?"

"Charlotte Michelle and John Michael," I replied.

"Will you allow me the privilege of baptizing your son or daughter?"

"Of course, Vladyka! Kris will want to stick with the usual practice of forty days, though she won't stay away from church."

"Good. I strongly discourage that practice, though I know it's important for some of the faithful. It's similar to the old taboos of receiving the Eucharist at that time of the month, something else I discourage, but there are women who abstain during that time."

"Right up there with some of the older couples covering the icons in their bedrooms when they have sex. That said, that one I could actually defend theologically."

"Go on..." Bishop JOHN said with a smile.

"Well, given the icons manifest the true presence of the saint or of Christ, it would be, in their minds, the equivalent of having sex in front of spectators. That said, that manifestation is a mystery, and in my mind, it doesn't make the icon work like a *Nineteen Eighty-Four* viewscreen. That would be the potential error in their thinking, but I don't want to go down the path of trying to explain the mysteries. That's like the edges of ancient maps having the warning, 'Here be there dragons!'"

"Quite so! The error of the Scholastics was trying to conceive that which is ineffable, inconceivable, and incomprehensible."

We prayed together, then I left his office. I found Kris and Rachel with her family, and after a brief conversation, Kris, Rachel, and I left so we could visit Loretta at the rehabilitation clinic.

"Have I mentioned how much I hate my physical therapist?" she grouched after greeting us.

"You were quite clear when I spoke to you the other day! And you know what? Tough it out! We need you at the hospital, and Bobby and Bobby Junior both need you. It may suck now, but it'll be worth it."

"You sound like a damned doctor!" Loretta complained.

"I *am* a doctor," I chuckled. "But I'm also your friend, and I said that as a friend. I'll leave treating you to far braver men and women!"



"I bet you'd make a terrible patient," Loretta said.

"I think you'd win that bet! Still have those numb areas?"

"Yes, both buttocks and the arch of my left foot."

"And the motor coordination?"

"So-so. I'm only allowed to use the rails, and I have braces on both legs, but I can mostly make my knees work the way they're supposed to."

"That's good progress."

We spent about twenty-five minutes with her, including Rachel climbing into bed with Loretta to hug her. Bobby and Bobby Junior arrived just as we were ready to leave. I shook hands with him, he reminded us about the Tuesday dinner at the firehouse, and we left.

Rachel fell asleep in her car seat on the way home, which gave me a chance to let Kris know about my discussion with Bishop JOHN.

"Vladyka broached the subject of ordination," I said. "He mentioned a widowed Antiochian priest who was permitted to remarry and retain his clerical office."

"Outrageous!" Kris exclaimed.

"Which is exactly what I would expect you to say. Vladyka said there was a bit of a clergy rebellion, though it died out quickly. The laity accepted it and, according to His Grace, largely supported it."

"Are you saying you've changed your mind on that topic?" Kris asked.

"Not at all! We agreed no secrets so I simply reported the conversation. He did ask me to teach Sunday School once a month and suggested we discuss ordination in the future. I made the point that you would likely object, and that didn't deter him."

"You're going to make me the 'bad guy', as you Americans call it."

"Again, «ma chérie», YOU are an American! You even have the papers to prove it! And it is not going to make you the 'bad guy'. It simply helps preserve my close relationship with His Grace. If you *insist*, I'll tell him 'no', but I'd prefer to wait and have him ask you. There will be no hard feelings and no animosity, and I'd very much appreciate if you would consider doing it my way."

"Because I love you," Kris said.

"I love you, too!"

"Enough to tell me what you saw on the ultrasound?" Kris asked lightly.

I chuckled, "I'm not an expert!"

"No, but I suspect you know."

"Actually, to be honest, I can't say positively, which is why I said nothing. At six months, unless you see a penis, you can't say unequivocally one way or the other. Our baby was resting in a position where it *appears* there is no penis, but it can be tricky to say for certain. The strong odds are that you have Charlotte Michelle in your womb."

"Are you happy?"

"Absolutely! And you can be sure the Tsarina will approve right up until Charlotte wants Papa's attention!"

"It's going to be what is called in America, 'an adventure'."

"That it is!" I agreed. "That it is."



## VI. Match and Scrambles!

**March 12, 1990, McKinley, Ohio**

"Got a moment, Mike?" Doctor Ross said when he saw me late on Monday morning.

"Sure. What's up?"

"Privately, please."

I nodded, followed him to his office, and shut the door behind us.

"I received our Match list," he said. "You obviously cannot share what I'm about to say with anyone."

"Understood."

"It won't surprise you, but Mary Anderson matched here, as did Ryan Harrison; it might surprise you that Erin Jackson matched here as well."

"Interesting. For that to have happened, she had to have taken a fairly extreme risk. I'm happy about that, obviously. Before I ask you about the other three, do you know if Leticia Jefferson matched with the ED?"

"She did. Brent Williams called to let me know, as he was positive you would ask."

"Excellent. Who else did we get?"

"The married couple and Felicity Howard. We didn't get our third-ranked choice or our sixth. Obviously, Mary had already Matched for the trauma surgery slot. Thoughts?"

"I'm glad we got the Kennedys, and I'm positive Felicity will bust her butt. I'd have ranked her higher, but I understand why you were reluctant to do so."

"Huge red flags, even with her improvement. To be honest, without your strong support, I wouldn't have listed her."

"I believe in redemption," I replied. "Everyone screws up at one time or another. Fortunately, my major screwups have occurred in areas other than medicine."

"And I know you'll do your best to ensure it stays that way."

"I will. Did Brent share any other names?"

"No. Just that one; he said she's the cousin of a friend?"

"My roommate at Taft for the first two years. I was his first white friend, and he was my first black friend. You could have used our interactions as material for one of those goofy sitcoms."

"First black friend? In college?"

"Yes. I mostly hung out with two friends from second grade onward, and there were no black guys on the chess team and none at my dōjō. He grew up in Over-the-Rhine in Cincinnati, and the only white people he interacted with regularly were cops, and you can imagine how that went."

"Badly. Racism is a scourge."

"I agree. That is one of my concerns about Leticia Jefferson, but I know the ED docs and nurses well enough she won't get grief from them. There are others..."

"We all know who they are, and if it were up to me, they'd be out. And I don't just mean out of the hospital; I mean no medical license. Bigotry has no place in medicine, and even if not expressed, it affects how patients are treated. Study after study shows that minorities receive substandard care, even when presenting at the exact same hospital."

"That is unconscionable," I replied. "But if you look at the details, you'll see it's actually a question of insured versus uninsured versus Medicaid. Guess which have the worst outcomes, irrespective of race?"

"Medicaid."

"Exactly. You're better off being uninsured than having Medicaid because there is no gatekeeper of any kind. Yes, the hospital has to eat the cost, but we make those decisions purely on medical need. *Our* judgment of medical need, not the government's."

"Sad but true," Doctor Roth agreed.

"Anything else?"

"Not at the moment. Go have your lunch. And I'm sure you'll stop in to see Brent."

"I will!"

I left his office, let my students know I was going to lunch, then left the floor. I walked to the ED, but Brent Williams was in a trauma, so I headed down the

long corridor to the cafeteria. I got my food, saw Sophia and her friends, and went to sit with them.

"The anticipation is killing me!" Sophia declared once I'd quietly prayed.

"You'll Match, I'm sure."

"But I don't find out where until Friday!"

"Been there," I said. "But for me, it was Tuesday morning that ended all the stress. I mean, sure, I was convinced I'd Match here, but knowing I'd Matched meant I was going to be a doctor. And that was the key."

"You couldn't have seriously been worried," Kelly Atkins said. "You were first in your class, and I heard you were the best!"

The way she said 'best' was clearly meant as innuendo, but I ignored it.

"While the odds of not Matching were slim, they weren't zero."

"Only because Mike has a hate-hate relationship with computers and was sure it could find some edge case to screw him!" Sophia declared mirthfully.

"There might be some truth to that," I chuckled. "Though I have switched to tolerance of the infernal devices!"

"Not just edge cases!" Kelly smirked.

"Kelly, stop it!" Sophia ordered. "I mean it. Stop it. Now."

"Who died and made YOU queen bitch?" Kelly asked.



"Nobody. Mike is happily married and faithful. Deal with it and drop it."

Kelly muttered something under her breath, and I decided I was glad I didn't hear it. She was quiet for the rest of the lunch while Sophia, Jenny, Nancy, and I talked about their clinical rotations. Jenny had tried to Match with Moore for Internal Medicine, but I had no idea if she had, and I doubted Tim Baker would share the list with Clarissa in advance. When I finished my lunch, I excused myself and walked back to the ED to see if Brent Williams was available.

"Hi, Brent," I said when I saw him. "Got a sec?"

"Sure. My office?"

"Yes."

I followed him to the office and shut the door behind us.

"Owen let me know Leticia had matched here. I'm extremely happy. OK to ask who else?"

"You know the secrecy rules, right?"

"Yes. Owen reminded me."

"He has to, as I do. Karl Schmidt, Julie Plemons, Mai Liu, and Mike Jorgensen. The last spot didn't fill. Are you available to interview Scramblers by phone?"

"Yes. How often does that occur here?"

"The last two years were fine, but before that, we nearly always had one that didn't fill. Remember, we were a smaller regional medical center at that point."

"When we hit Level I, I suspect that problem will go away."

"Me, too. I'll start receiving inquiries after 10:00am tomorrow. I'll coordinate with Owen for your time."

"Thanks. Any word on the new Emergency Medicine Chief?"

"An announcement is due tomorrow. I'm fairly certain it's Dutch Wernher from Rush-Pres in Chicago."

"Is that his given name or a nickname?"

"Nickname; his given name is Rupert."

"I think I'd go by 'Dutch'," I observed.

"Yeah, me, too."

"CV?"

"Mid-fifties. He switched from Internal Medicine to Emergency Medicine around 1972 and has a good reputation in the field. Graduated from UC Berkeley, attended Emory Medical School, Residency at Bethesda Naval Hospital, and two years at Cam Ranh Bay before leaving the service and being hired at Rush-Pres. Married with three daughters."

"Sounds like a good guy, but Loretta should have that role."

"We still don't know if she'll be able to come back," Brent said, "and that role has to be a practicing physician. That was one of Cutter's criteria -- no more pure administrators."

"That I can't argue with, though I'm convinced Loretta will come back."

"Me, too, but you and I both know it's a potentially long road."

"Unfortunately. Anyway, I'll keep all of that under my hat. Let me know about the Scramblers."

"Will do, and thanks."

I left his office and returned to the surgical ward, and given things were quiet, let my students take their lunch before prepping the afternoon patient. The rest of the day was routine, with three ED consults, two of which were surgical cases, though neither were emergencies. We didn't admit them, but we scheduled surgery for them later in the week.



## **March 13, 1990, McKinley, Ohio**

Tuesday was Match Day, and as had been the case for my friends and me, all the Fourth Years were on pins and needles until the first batch of Match letters were handed out. All of the students who had had their clinical rotations with me had Matched, though other than the names I'd been given by Owen Roth and Brent Williams, I had no idea where they might have Matched.

I took the opportunity at lunch to call Doctor Mertens and inquire how many were Scrambling.

"Six. It's a good year. I see one of the emergency medicine slots didn't fill."

"I'm expecting names from Brent Williams at some point today to begin phone interviews. Are any of the six worth talking to?"

"That's a heck of a question for the Dean of Clinical Instruction!"

"No reflection on you, Doc! There are some people who simply should not be physicians."

"Nicole Caton; middle of the pack, with average reviews. I think she might have overshot for her first choices and was unlucky with her backups."

"What programs?"

"Internal Medicine."

"Have her call Brent Williams," I said. "Well, assuming she's interested in Emergency Medicine as an alternative."

"She'll actually be in my office in about ten minutes to review the Scramble list."

"Are there any other open slots here?"

"One in psych and one in OB/GYN. That's not uncommon; surprisingly, the dermatology slot filled."

"I take it that's a tough sell here?"

"They only have one opening once every three years, and it's been in the Scramble for as long as I've been at the medical school."

"Sorry about not being able to make the guest lectures."

"I understand. How is Doctor Gibbs doing?"

"Not enjoying her physical therapy, but improving every week. She has some numbness in her lower extremities, but she's walking between parallel bars with the aid of braces. I'm positive she'll recover enough to return to the ED, though she might need leg braces permanently."

"I heard Doctor Lindsay will be back on April 1st."

"She's really champing at the bit at the enforced vacation."

"How is your wife? She's in her sixth month, or thereabouts."

"She's doing fine, and Rachel is impatiently awaiting a sister; I believe she'll try to trade in a brother! Too bad for her it doesn't work that way!"

"I was ready to sell my little brother to our neighbors for a dollar when I was five. My dad objected."

I chuckled. "Just one buck? Really?"

"That was more money back then," Doctor Mertens said mirthfully, "but he was, as the saying goes with car dealers, 'priced to move!'"

I laughed hard, "Nice, Doc. Very Nice!"

"You should call me Nora. Do you think you'll be able to lecture before the Fall?"

"Probably not, given things are still crazy around here. I will talk to Owen Roth about the Fall."

"Thanks, Mike."

I thanked her, said 'goodbye', then went to the Cafeteria to have lunch with Clarissa.

"I'm going to guess you know who Matched for the ED and surgery."

I nodded, "Yes, though I'm sworn to absolute secrecy. The last thing we want to happen is to get in trouble with the NRMP. I take it Baker didn't talk to you?"

"He barely knows I exist because I'm in the ED until the end of May."

"And yet you'll receive glowing reviews for the good work you're doing, so no big deal! You'll have two years before it's time for an Attending slot, and you'll have the extra ED experience, including your paramedic ride-alongs! Now you just need flight surgeon status!"

Clarissa laughed, "And you got it just in time for it to mostly be phased out because we're on our way to being a Level I trauma center!"

"Fortunately, there are no continuing training requirements for that which aren't satisfied by my day job!"

"I take it you heard about the new Chief of Emergency Medicine?"

"Yes. UC Berkeley, Emory, US Navy, Rush-Presbyterian in Chicago. Switched to emergency medicine from internal medicine at Rush. Married, with three daughters."

"But you're unhappy because of Doctor Gibbs."

"Yes, but as Brent Williams pointed out, she has a long way to go, and Cutter added a 'no paper pushers' requirement to the job description. You know my

problem with Northrup, though I do make a small allowance for the amount of time he had to spend on the new ED."

"Just over a year," Clarissa observed. "From what I hear, the big challenge is all the new telemetry equipment."

"That's what I hear as well. Buildings are pretty easy, from everything I witnessed with my dad growing up, but the computer stuff is complicated."

"Listen to you! 'Computer stuff'! You're too funny, Petrovich!"

"Tell me that the telemetry isn't a computer."

"Technically."

"In my book, being technically correct is the best kind of correct!"

"Of course it is! You can be a real dope at times, Petrovich!"

"Which, of course, is why you love me!"

"You just go right on with that fantasy!"

"You know MY fantasy, Lissa!" I smirked.

"There is just no way it was THAT good!"

"It's not the 'what' it's the 'who," I countered.

"And you could never consummate your relationship with the girl who would have been sublime."

"It didn't hurt she had red hair, green eyes, and a sexy body!"

"My only possible response to THAT is -- «ТЫ НЕКУЛЬТУРНАЯ СВИНЬЯ» (*ty nekulturnaya svinya*)!" ("You uncultured swine!")

I laughed, "One of Tasha's favorite epithets. And I need to get back before my toddlers kill a patient with a safety razor!"

"Oh, give me a break! Erin is an excellent medical student."

"Of course she is, but my membership card in the Residents' Union would be revoked if I didn't disparage them in jest to other Residents!"

"You might have a point...at the top of your head!"

"Love you, too, Lissa."

We hugged, Clarissa headed back to the ED, and I took the stairs up to the surgical wing. When my shift ended, I showered, dressed, and headed to the parking lot where Kris and Rachel were waiting. I got into Kris' Tempo, and we headed to the fire station for dinner with Bobby's company.

"Do you always eat this well?" Kris asked after a fantastic meal of barbecued chicken sandwiches, home fries, and homemade coleslaw.

"Firemen tend to be great cooks," Bobby said. "Though you get a lot of chili, barbecue, and spaghetti. Fortunately, we weren't rudely interrupted by the..."

"DO NOT SAY THAT!" Lieutenant Greer declared. "You know what will..."

And it happened before he could even complete his sentence. The tones sounded then a disembodied voice came over the PA...



*"Station 2; motor vehicle accident with trapped victims; US 23 at Ohio 159."*

Half the company scrambled away from the table, but Bobby and Jim Greer were not on shift, so they remained.

"You're a dead man, Murphy!" Chet, one of the firefighters, growled as he hurried away.

"Smooth," I chuckled. "is the County ever going to fix that intersection?"

"There's money in next year's county budget to change it from a two-way stop to an overpass with ramps. Hopefully, they'll actually do it, but it depends on money from the Feds."

"It's so silly," Kris observed, "that the US government can't simply maintain the roads."

"They can," Lieutenant Greer countered. "It's the state highway that's the problem. The county and state have to put in an overpass and build the ramps, but the federal government will chip in money. The county can't afford to do it without state and federal help."

"It just seems overly complicated. But I'll drop it because I see my husband's eyes rolling!"

"Come by the house on May 1st and see the red banner flown by my unreconstructed socialist wife!"

"Before this gets out of hand," Bobby said, "Captain Brinker has a medal and a plaque for you."

I wanted to protest that it wasn't necessary, but I knew that would fall on deaf ears.

"I'll keep it short," Captain Brinker said, "because I know the men hear me talk more than they want to!"

"Fuckin' eh, Cappy!" Bobby's partner Sam exclaimed.

"You're on report, Bolton!" Captain Brinker said with a grin. "Doctor Mike, please stand."

I stood up.

"For extraordinary service to an injured firefighter and his unwavering support of the paramedic program, I hereby award the Hayes Country Fire Department Citizen Valor award to Doctor Michael Loucks."

He handed me a plaque, then pinned the medal on my shirt.

"Thank you," I said. "No speech."

"Thank God!" Sam grinned.

Everyone laughed.

"I also want to thank you for providing support and encouragement to Loretta," Lieutenant Greer said. "That's actually more important, but we can't give you an award for that."

"Thanks, LT," Bobby said.

"Where's the ice cream?" Sam asked. "They told me there would be ice cream!"

Everyone laughed.

"Is he always like this?" Kris asked.

"Only when he's not on shift," Bobby said. "Then he's all business. But off the clock? He's a bigger clown than your husband!"

"I find that very hard to believe," Kris said with a silly smile.



## **March 15, 1990, McKinley, Ohio**

"How did we do in the Match?" Shelly Lindsay asked when we sat down to have lunch on Thursday.

"Very well," I replied. "I'm sworn to complete secrecy, but you won't be disappointed. The ED didn't fill one slot, and I have a phone interview today with a Scrambler from Michigan State and a face-to-face with Nicole Caton from McKinley Medical School, who failed to Match."

"Scraping the bottom of the barrel?"

"According to Nora Mertens, Nicole is an average medical student with average evaluations who shot a bit too high with her Match list and had bad luck with her backups. She was trying for Internal Medicine."

"And the other candidate?"

"Similarly situated student from UC, but who tried for Emergency Medicine only at major hospitals. Again, a bit of bad luck because if you construct your list

properly, you should Match somewhere. A single interview at a second or third-tier hospital is a fairly safe bet."

"OK, but if they built bad lists, doesn't that show something, too?" Shelly asked.

"All it takes is being fifth or sixth choice for hospitals who don't have overlapping lists. As Nora said, a bit of bad luck. And honestly, I could see that if you felt your interviews went better than they did. We all have a difficult time seeing ourselves as others see us. Paul Lincoln told me he thought he completely blew his interview here, and yet he Matched, so he obviously didn't."

"Mary Wilson actually did blow her interview, but she had great grades and excellent recommendations, so we took a chance. It was nerves, and I'm sure you've seen she's OK with patients."

"Actually, I haven't seen much of her given I'm not on a surgical team, and they have me hopping covering for your lazy butt as well as handling ED consults!"

"Lazy butt?!" Shelly growled in outrage. "They won't LET me come back for two more weeks! I'm ready. It's the damned rules that are the problem, and they don't have any leeway. Six weeks post-op for major surgery before you can come back. And the clock only starts ticking when you're stable."

"And you know why that is! Surgeons are, in general, an arrogant bunch who would lie, cheat, or steal to get into an OR! Present company excepted, of course."

"Of course," Shelly agreed with a soft laugh. "Which is, of course, why Psych objected to you going to your outside psychologist. They figured it was a scam because that is what surgeons stereotypically do."

"And if you had your way, you'd have been in an OR two minutes after you were released. And please have the decency and respect not to deny that to me!"

"Loretta is right! You're a royal pain in the ass, Loucks!"

"Thank you," I replied with a grin. "My psychologist suggested I wear such comments as a badge of honor, and she's not wrong."

"No kidding," Shelly said dryly.

We finished our lunch, exchanged a quick hug, and she left the hospital while I went back upstairs. About an hour later, I called Casey Van Houten from Michigan State to conduct a Scramble interview. He was, as I had expected he would be, an average candidate who would not have made our top ten, but by the end of the interview, I felt he was a qualified candidate. He asked when he would hear, and I couldn't make any promises. I thanked him and said that Doctor Williams would be in touch.

About twenty minutes later, I met Nicole Caton in a small conference room to conduct her interview. My concern with her was she'd listed Internal Medicine at Moore and hadn't been selected. Per my instructions from Brent, I wasn't allowed to ask for their evaluation, which didn't make sense to me. But, because Nora Mertens had said Nicole was deserving, I set aside her failed Match.

"Hi, Doctor Mike," Nicole said. "Thanks for seeing me."

"You're welcome. Have a seat, and we'll do this as a standard Match interview, though with only one physician, instead of a team."

After the usual preliminary questions and her biographical spiel, I asked my first unscripted question.

"Why did you not choose an emergency medicine Sub-I?"

"I had the required Clerkship, and because I wanted to match for Internal Medicine, I didn't think it was important. I had a Pedes Sub-I instead."

Which made sense, though not having an emergency medicine Sub-I had absolutely hurt her in the Match and would potentially work against her in the Scramble for an emergency medicine spot, at least at any urban hospital. She, like Melissa Bush, might need to look further afield.

"I'm not suggesting you'll receive a negative answer from us, but you should ask Doctor Mertens for a list of open Residencies in rural Kentucky, Tennessee, West Virginia, Georgia, and Alabama. They'll be less concerned with a missing emergency medicine Sub-I, and they almost always have open positions."

"I really do not want to work in an area like that."

"And if that's your only choice?" I asked.

"Then I suppose I would. Why didn't anyone tell me I made a suboptimal choice?"

"I have no idea," I replied. "The only thing I can say is something I was told during my time in medical school and something I stated clearly in the alumnus speech I gave at last year's White Coat Ceremony -- every morning when you get up and look in the mirror, you see the person primarily responsible for your medical education. It's not the deans, it's not the professors, it's not the doctors on your clinical rotations. It's you. Period. No exceptions and no excuses."

"I never heard that," Nicole replied. "From anyone."

"Now you have. It's not too late. We might hire you, but if not, you need options. And you're the only one who can arrange those. So, as soon as we finish, go see Doctor Mertens and ask for the list of rural programs which have trouble attracting candidates. I know someone who Scrambled to a spot in Kentucky after failing to Match in *two* Matches. Your other options are research or an insurance company."

"Ugh."

"So, how badly do you want to be a doctor?"

Nicole nodded, "I see your point."

"Good. Now, convince me why we should select you for the open emergency medicine spot."

For the next twenty minutes, she made her case, and when she finished, I thanked her, then went to the ED to report to Brent Williams.

"One name, please," he said. "You, Ghost, and Perry each had two candidates. I'll call or speak to three of them."

I considered which I'd choose and made a tentative decision.

"May I ask why I wasn't allowed to check with Internal Medicine on Nicole Caton?"

"Because we can't check outside candidates. I can't even ask if she was on their list, let alone her position."

"That makes no sense, but OK. Of the two, I'd recommend you speak to Nicole Caton."

"OK. I'll call her and have her come speak to me. I'll call the other two candidates once I finish with Nicole, then decide."

"Just you?"

"We don't have an ED Chief until May 1st, so yep, just me."

"OK. I'm heading back to the surgical ward."

"Thanks, Mike. I appreciate it."



## **March 15, 1990, Circleville, Ohio**

Later that same day, Antonne and the rest of the mentoring group came to the house to have dinner with Kris, Rachel, and me.

"Rachel is such a big girl!" Conchita exclaimed as Rachel climbed into her lap.

"You had your chance," Jordan teased. "Mike was single when you met him!"

"Nothing personal against Doctor Mike, but there was no way I was ready to be a mom as a Freshman! Talk to me in about ten years!"

"You realize his wife is actually younger than you are, right?" Danika observed.

"That's HER problem, not mine!" Conchita declared. "I love Rachel, but I'm very happy to return her after an hour!"



"There are times I'd like to do that after five minutes," I chuckled. "Especially when she has 'no' on repeat!"

"What happened?" Julius asked.

"Rachel accompanied me to band practice but refused to wear her ear protection. Toddlers are not known for their susceptibility to reason, so we had an impasse. She had to sit in the hall and was cross with me for the rest of the day."

"Just wait until she's a teenager!" Jordan exclaimed.

"YOU are still a teenager!" Conchita teased.

"OK, technically, yes, but we don't usually include kids who are eighteen or nineteen in the 'teenager' group!"

"I know a former dean who thought they were not just teenagers but children," I said, shaking my head.

"I've heard about that Dean," Antonne said. "She sounds like a real piece of work."

"That's an understatement. You six are very lucky to have Dean Anderson. She's awesome."

"Not awesome enough," Paul smirked. "I haven't been able to convince her to allow co-ed dorm rooms!"

Everyone laughed.

"Good luck with THAT," Kris said. "You Americans are so prudish!"

"And, once again, «ma chérie», " I said with a grin, "I am forced to remind you that YOU are an American, and I have the paperwork to prove it!"

"Is he always like this?" Jordan asked.

"He's actually behaving!" Kris teased.

"Antonne," I said with a grin, "how are classes going?"

"We're all doing very well," he replied. "I had a call from Doctor Nora Mertens encouraging all six of us to apply to McKinley Medical School when the time comes."

"They're all considering it," Danika said. "But you know I'm going to Stanford."

Which was, in the end, why we hadn't continued down the path towards marriage. Danika, like Katy, felt her best interests were served by going to Stanford, and I not only couldn't argue with that, but I'd insisted she be true to herself and not make that sacrifice on my account.

"Which, as we discussed, is the right choice for you. How is your dad?"

"He's doing well. He did ask that you call him some time to check in. I think he has designs on stealing you for Cleveland Clinic!"

"And Doctor Al Barton in Chicago sent me a Christmas card reminding me he'd like to talk to me when I complete my Residency."

"That's a far different culture from Ohio, and you could live in a rural area and easily drive to Cleveland Clinic. Good luck doing that in Chicago!"

"May I remind you -- and even though they aren't here, your dad and Al Barton -- that I haven't even finished my PGY1 year, and my Residency is at least seven years!"

"Right," Danika said with a smile, "because my dad didn't start working on me to stay in the family business when I was a toddler!"

"Point taken," I chuckled. "He is pretty intense."

"That's one way to put it," Danika said.

"Any trouble with anything for which any of you need my help?"

They all shook their heads, which I was happy to see. We had a wonderful rest of the evening and made our plans for our April meeting before they left.

"So, just how close of a thing was it for you and Danika?" Kris asked.

"In one sense, very; in another, not close at all. She'd have had to give up on going to Stanford and on a Residency anywhere except Moore Memorial or in Columbus. Nothing else would have worked. There was no way I was going to try to move to California with Rachel. If moving had been an option, Danika would never have even been a thought because I'd have moved to Tennessee with Annette Turner-Cooper."

"She was at the wedding, right? With her parents?"

"Yes. Doctor Cooper was my Attending for my OB/GYN rotation. I was living at their house when Rachel was born."

"And Annette offered to comfort you afterwards?"

"An offer I declined," I replied. "Whatever else was true, I was still a deacon at that point, so accepting any offers of that kind of comfort was out of the question. We did date a bit, much later, and if she hadn't had a scholarship to Vanderbilt, things might have been different. But again, as with Danika, our paths didn't align the way yours and mine did."

"Which is what led you to Danijela, and then to me, when Danijela refused to wait until your agreed time to ask her."

"Yes."

"Well, I am not complaining in any way, shape, or form!" Kris declared. "Their loss was my gain!"

"And mine," I replied. "When it comes right down to it, you were the far better choice."

"Not to hear my sister tell it!"

I laughed, "True, but since she started seeing Brett, she hasn't been teasing me nearly as much. I figure she's chosen to torture him instead!"

"I think you may be right! Shall we read to Rachel, say our family prayers, and put her to bed?"

"Sounds like a plan."

"You know, I don't think Charlotte Michelle will mind Papa making love to Mama, so long as he's gentle."

"That sounds like an even better plan!"



## March 16, 1990, McKinley, Ohio

I saw Mary Anderson hurrying down the corridor with a huge smile on her face. She nearly bowled me over, giving me a tight hug.

"Thank you!" she gushed.

"You're welcome! Congratulations."

"Do you know the worst part?" she asked.

"There's a 'worst part' of Matching here?"

"That I can't start training until June 1st! I have ten weeks of scut before then!"

"And a year of scut after," I teased.

"I know you better than that, Doctor Mike!"

"Once again, congratulations."

"Thanks."

She left, and about a minute later, Erin Jackson came up to me.

"I Matched here!"

"Congrats. You had to have taken a fairly severe risk to make that happen."

"Actually, I just called UC and told them they were my second choice, not my first. I was positive they'd move me down the list, and they obviously did. Is there any chance we'll be on the same surgical team?"

"At least some of the time, yes, because they rotate a few times a year. And you'll absolutely be on shift when I'm here because you'll basically never be off shift!"

Erin laughed, "They cut it from ninety-six to eighty hours, so it's not as bad as it used to be! I take it Mary Anderson Matched for trauma surgery."

"The bear hug gave that away, did it?" I chuckled.

"Medical students are supposed to observe everything around them! I'd give you a hug, but I'm very careful with married guys. Wives tend to have a limited tolerance for that."

"True, and it's wise to be cautious. Hugs won't bother my wife so long as they're platonic."

Erin gave me a quick hug.

"Who else Matched for surgery?"

"Bob & Sue Kennedy, a married couple; Felicity Howard; and Ryan Harrison."

"How will that work? The married couple, I mean?"

"They'll be on separate teams, and very little consideration is given for synchronizing their shifts during their PGY1 because it's just not possible. When they get to PGY3, they'll have a better chance of having similar shifts, but the rules prohibit them from being in the same surgery except *in extremis*."

"OK. Well, back to the salt mines!"

I chuckled, "It's not quite *that* bad!"

She left, and a few seconds later, I was paged to the ED. I walked to the lounge to get Todd, and we went downstairs to rule out an appy, which, for once, I did. But that didn't mean the patient didn't need surgery, as he had a bowel obstruction that needed immediate attention. I had Todd arrange to take him upstairs while I went to see Brent Williams.

"What was your decision?" I asked.

"I offered the position to Nicole, and she accepted," he said. "Mainly because she's here and can start June 1st. The other two were from out of state. Neither of them was better enough to not pick the local student."

"Clarissa Saunders will be grateful. What's the word on an Attending?"

"Cutter has it narrowed down to two. He's flying them both in for interviews next week. One from Texas, one from Arizona."

"Did somebody tell them it gets cold here?" I asked.

Brent laughed, "It snows in both Arizona and Texas. One of them went to OSU for undergrad, so that one knows for sure."

"What happens when Loretta is ready to come back?"

"That's up to Cutter, and he hasn't shared that with me. That said, you know we'll have more Residents and Attendings next year because of the new ED. I'm sure there's a spot for her if she can get around reasonably well."

"Thanks. I'm off to assist with a bowel obstruction."

"I know PGY3s who would kill for the opportunities you're getting!"

"Me, too. I wear a Kevlar jacket under my scrubs!"

Brent laughed, "Nice. Get out of here!"

"You're in Lor's chair, so you get Lor's treatment."

"Wonderful," he deadpanned.

I left his office and went back to Trauma 1, where an orderly was helping move the patient to a transport gurney. Todd, the orderly, and Joe, a Third Year, escorted the patient up to the OR where Erin, Todd, and I had an opportunity to scrub in, though I only observed, rather than assisted, as I had not resected a bowel, nor seen that procedure more than a few times.

At lunch, I met Sophia in the cafeteria.

"Well?" I asked.

"I got it!"

"University of California, San Francisco, right?"

"Yes! Obviously, that was just step one, but it was the toughest step. You know nobody is going to beat out a Greek girl for something she wants!"

"Except for a Russian girl," I chuckled.



"Not even close!" Sophia declared. "I heard Mary Anderson Matched for trauma surgery."

"That was as much of a lock as me Matching here. What's your schedule?"

"I start July 1st, and Robby's job starts August 1st. He's going to fly out in May and look for a place for us. He'll narrow it down, and I'll fly out right after graduation to see the two he likes best."

"He's at Stanford, and you're in San Francisco. How close are they?"

"Not close enough, so we'll find a spot somewhere in between."

"I'll miss you guys, but I'm very happy you Matched your first choice."

"Me, too!"

When we finished lunch, I headed back to the surgical ward to supervise Erin and Todd, prepping a patient for a lumpectomy.

"Mrs. Carson," I asked once the prep was complete, "On which breast will be performing the procedure?"

"If you don't know, I'm in real trouble!" she exclaimed.

"I do, but I need to verify that you and the chart agree. I'll actually write my initials on the correct shoulder, at the collarbone. So will your surgeon and anesthesiologist. We certainly don't want to make any mistakes."

"Left," she said. "My left."

Which confirmed what was on the chart and the X-rays. Erin handed me a new Sharpie, which I used to write 'MPL' on Mrs. Carson's left shoulder, then handed it back to Erin.

"That goes in the medical waste bin once Doctor Edmonds and Doctor Clausen sign."

"You throw away a new pen?" Mrs. Carson asked.

I nodded, "Yes. We'll use the pen for the same patient, then dispose of it. The concern is spreading germs from one patient to the next. Nobody has completed a proper study, so we act out of an abundance of caution. I know it seems wasteful, but unless we can quantify the risk, it's necessary. Erin, would you walk Mrs. Carson through the procedure and the consent forms, please?"

"Yes, Doctor," Erin replied.

*[Author's Note: A formal study in 2008 showed there was little risk of disease transmission from re-use of Sharpie markers]*

## VII. An Interview

### March 16, 1990, Circleville and McKinley, Ohio

"Did you get the students you wanted for Residency?" Kris asked when I arrived home on Friday evening.

"We did. We actually did fairly well, landing our top picks, including the one we suggested change her Match selection order. I think everyone is happy."

"Good! Are we still meeting the gang for Chinese food?"

"Yes, and the consensus, according to Fran, is that we'll see *The Hunt for Red October*. I read the book, and I enjoyed it, even though I prefer science fiction to Tom Clancy's political thrillers."

"I've heard good reviews, and I'm OK with seeing it. We'll take Rachel to my parents' house. Oksana decided to stay home tonight."

"I'm not surprised, given she's towards the end of her eighth month. I can't imagine she'd be comfortable sitting in the theatre for two hours and fifteen minutes!"

"Not to mention at least two trips to the ladies'!"

"May I say I'm happy with the initial division of labor with regard to having children?"

"Only if you want to sleep on the couch!"

"An idle threat, and you know it! Let me get the Tsarina ready. Is the plan to pick her up tonight or tomorrow morning?"

"Tomorrow, on the way to band practice."

"And you're still planning to sing at both Proms?"

*"Russian woman! Strong like ox!"* Kris said gruffly, barely concealing a smirk.

I laughed, "If I had said that, I'd be in serious trouble!"

"Yes, you would!"

"Papa!" Rachel exclaimed. "Go to grandma's?"

"In a few minutes. Please put the toys you want in your backpack."

"OK!" she agreed.

About fifteen minutes later, Rachel was safely with her maternal grandparents, and Kris and I were on our way to the Chinese restaurant to meet our friends for dinner. When we arrived, Fran and Jason were just getting out of their car.

"Did Sophia Match with UC San Fran?" Fran asked.

"She did!" I replied. "She's ecstatic."

"I bet!" Fran declared as we walked towards the entrance to the restaurant.

"That's an elite program, and they're doing truly groundbreaking work. How are you holding up?"

"I miss being in the ED, but I'm drinking from the firehose as a surgeon. I'm doing PGY3 work as a PGY1."

"Well, one good thing came out of that nightmare, then," Jason said. "How are your doctor friends doing?"

"Shelly Lindsay is going stir-crazy during her enforced break. She's back in two weeks. Loretta is making progress, but it's slow. Fran, you should go see her."

"You're right, of course. I'll arrange to go on Wednesday. Has her prognosis changed?"

"No. It's still 'wait and see'. My inexpert opinion is she'll walk with braces and a cane or one of those lower-arm crutches. I think she'll be able to handle working in the ED, but it's not up to me. It'll be up to Dutch Wernher, the new Chief of Emergency Medicine."

"Where's he from?" Fran asked as we walked in and moved towards our reserved tables.

"Rush-Presbyterian in Chicago. Ex-Navy, having served in Vietnam. Moved from internal medicine to emergency medicine in '72, which means he must have been one of the first at Rush-Pres, given Cook County had only started a few years before that."

"Sounds like a good guy. I know you wanted Doctor Gibbs."

"I did, but that lowlife who shot up the ED put paid to that, at least in the near term."

We greeted others who had arrived and sat down.

"No Sophia?" Fran asked Robby, who was alone.

"On shift," he replied. "Thankfully, her final OB/GYN rotation has banker's hours!"

We all laughed because that wasn't actually true, though she would end her day at 4:00pm.

Jocelyn and Gene came in and sat down, and I saw something in her face that was quickly revealed.

"We have a baby!" she exclaimed.

"Congratulations!" several of us exclaimed.

"When?" I asked.

"The day after she delivers, which should be by the end of next week. A baby boy who'll be born to a fifteen-year-old girl. She's Lutheran and went through the Lutheran agency in Columbus. They gave her options, and she liked our biographies."

"Clearly, she's mentally challenged," I said with a smirk.

"Watch it, Mik!" Jocelyn said threateningly.

"Ignore him!" Clarissa exclaimed. "Do you get to name him?"

"Yes. We eliminated 'Michael' for what I think are obvious reasons!"

I stuck my tongue out at Jocelyn, something I hadn't done in at least fifteen years. She laughed and shook her head.

"The MD behaving like a toddler!" she exclaimed.

"I reserve the right to revert to our first days of friendship!" I said with a grin.

"Kindergarten!"

"Yep!"

"You're such a goofball, Mik!"

"You know I'm very happy for you. What names?"

"We've narrowed it down to Timothy or Sean."

"Do you have all the things you'll need?" Serafima asked.

"No, but we have a week to get them," Gene said.

"We'll have a baby shower for you," Clarissa said. "Kris, will you help organize?"

"Yes, of course!" Kris exclaimed.

"I'll help, too!" Tasha interjected. "I'm so happy for you both!"

The adoption was the topic of conversation for basically the entire meal. When we finished eating, we all went to the theatre to see the movie, which I enjoyed. It wasn't quite as good as the book, and it was a stretch to see Sean Connery with a Scots accent playing a Lithuanian Soviet submarine commander, but I enjoyed it. The others had similar reactions, including Kris, though she hadn't read the book.

"Some suspension of disbelief is necessary for movies like that," she said as we walked to my Mustang. "But overall, it was entertaining. You have the book, right?"

"Yes. It's on the shelf in my study. It's part of a series of spy dramas, though it started out as a standalone book. There are three other books in the series now -- *Patriot Games*, *The Cardinal of the Kremlin*, and *Clear and Present Danger*. He also wrote a World War III alternate history titled *Red Storm Rising*."

"Have you read any of them?"

"I have *The Cardinal of the Kremlin* on my bookshelf, but I haven't had the time to read it. Maybe I'll read it during my vacation. Hopefully, Charlotte Michelle will cooperate and be born during my vacation time, but babies are so unpredictable. I have a tiny amount of flexibility, but if our new daughter doesn't cooperate, we'll have to do some juggling."

"Fortunately, school will be out, so my sister will be able to help."

"For a definition of 'help', which means being a troublemaker!"

"Only to you!"

"In all seriousness, she's a big help and a good aunt. And, as I mentioned, she's found a new victim to torture!"

Kris laughed softly, "Did I torture you?"

"No, but you're not Lyuda!"

"But you got the best sister, right?"



"I absolutely did, Lyuda's claims to the contrary notwithstanding!"

"Do you know how many children Jocelyn and Gene want to adopt?"

"At least two," I replied. "They were fortunate to get an infant so quickly. It could be years before another baby is available for them, though they're willing to adopt a toddler. I appreciate you being willing to help Clarissa plan the baby shower."

"I'd say it was because Jocelyn was the person who knows every dark secret about you growing up, but you don't have any!"

"Neither does she! Nor Dale, either. We were all goody-two-shoes' growing up. The most trouble I got into was using a vulgar Russian phrase. I was trying to explain it to Dale, but Mom did not care."

"I think putting soap in a child's mouth is child abuse."

"I would never do it, but it certainly did work. As they say, times were different. It's a logical fallacy to hold people in the past to modern standards of which they were not aware and likely could not have conceived. Most significant change comes because of a small group of radical thinkers. That was true in France, just as it was here and in England. It took time for the ideas of «Liberté, égalité, fraternité» or the ideas expressed by...

"We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness. That to secure these rights, Governments are instituted among Men, deriving their just powers from the consent of the governed

...to be realized, even in a limited fashion. I'd say both countries are *still* working on it. And I believe you agree, though our proposed solutions are different."

"Says the government doctor, working for a government hospital, treating many patients covered by government health insurance!"

"By *choice*, «ma chérie»!"

"And our children will attend public school, just as you did, and likely a public university, just as you did..."

"Yes, yes," I chuckled. "I'm OK with *social democracy*, not with *socialism*. They are different, the opinions of many of our countrymen to the contrary notwithstanding!"

"You know I like to tease you about it!"

"The story of my life with every woman I know, starting with my mom!"

"And you love all of us!"

"I do."



## **March 19, 1990, McKinley, Ohio**

"What's bugging you?" Carl Strong asked as we ate lunch together early on Monday afternoon.

"What gives you the idea something is bugging me?"

"Just the way you're discussing your training. Even the black swan events of a PGY1 performing surgical procedures in an OR don't seem to have you as up as I would have expected."

"I'm not depressed, if that's your concern."

"No, but if you went there..."

"My mom played those rhetorical games with me from the time I was little. I'm an expert!"

Carl laughed, "OK, but you know that is a major concern for physicians."

"It is, but I think it's more that what I'm doing now doesn't provide the hits of adrenaline that working in the ED did. There's too much routine work, if you will."

"You aren't the first emergency medicine specialist to go through dopamine withdrawal! I don't mean this in a perverse way, but you derive pleasure by working at your maximum, and the more, the better. I recall you were never as enthusiastic about slower-paced medicine despite the fact that slower-paced medicine fed your *other* need -- patient interaction. I think we know which drive is stronger."

"I'd say obviously, but it wasn't obvious until I spent eight months in the ED."

"What does your training regimen look like for PGY2?"

"At least the first three months will be better because I'll be in the ED full-time to train Mary Anderson on procedures. After that, I'll alternate one week in the ED and one on a regular surgical team. That will be much better."

"Shelly is back on April 1st, right? So you'll go back to the ED?"

"Most likely, yes, but there are other considerations. I'm not sure how the contracts for the *locum tenentes* in Medicine work."

"Only YOU would decline Latin phrases we use in English!" Doctor Strong said, shaking his head.

"I gotta be me!" I chuckled.

"I believe those contracts are almost always week-to-week, or at most for a month. You should ask Tim Baker, or maybe have Owen Roth ask Baker."

"Clarissa would be VERY happy if she went back to Medicine. She's not an adrenaline or dopamine junkie!"

"Because in our roles, if the adrenaline hits, it's because something has gone terribly wrong. The same is true for all the pure surgeons. For you, it's part of your job, and you can't wait for the next fix!"

"I'm not going to argue with you on that one! How are things going in Cardiology?"

"The beat goes on!" Carl said.

I groaned, "That was bad."

"You have no room to talk!"

"True," I agreed.

"How are you doing with regard to the incident?"

"Fine. I honestly don't think about it except in relation to Loretta. I saw her on Sunday, and she's making slow progress. If I had to guess, six to eight months, though she can probably go home at the end of April."

"She's walking, right?"

"Yes, between the parallel bars with leg braces. Her coordination is slowly coming back, along with muscle tone, but she still has numbness in parts of both extremities that might be permanent."

"We just don't have the knowledge or tech to fix that completely. Where's Oscar Goldman when you need him?"

"He was the money man! You need Doctor Rudy Wells!"

"Sorry if I'm not up on my 70s TV trivia!" Carl declared with a grin.

"Those science fiction shows were my mainstay -- *Six Million Dollar Man*, *The Bionic Woman*, *Logan's Run*, *Battlestar Galactica*, *Space: 1999*, and reruns of *Star Trek*. Of course, I also watched *Emergency* and *Medical Center*."

"I was more into the cop shows like *Adam 12*, *Dragnet*, *SWAT*, *Baretta*, and *Starsky & Hutch*."

"I never asked, but what brought you to medicine?"

"A college professor. I had enrolled in a chemical engineering program, and during my first year, my advisor more or less talked me into a biochemistry program instead, on the theory that that was the future. When the time came to look into a Master's, he suggested I apply to medical school as well. I took both

the GRE and MCAT, applied to both programs and, in the end, decided on medical school because it was the greater challenge."

"Why cardiology?"

"The first time I actually saw an EKG, besides on television, I was fascinated. From TV, you don't get a true impression of just how much information is available. On TV, it's basically the 'machine that goes ping'."

"That was during your Third Year, right?"

"Yes. There were no Preceptorships at my medical school. They only started here the year before you started."

"You know my theory on that."

Carl nodded, "And there are a number of us who agree; unfortunately, the powers that be at the AMA think requiring an undergraduate degree is sacrosanct and won't even consider radical ideas like six-year medical schools straight out of High School."

"So radical that much of Europe operates that way."

"Socialism!"

"Oh, give me a fracking break!" I chuckled. "I know socialism, and that is NOT socialism!"

"No kidding!"

"My wife teases me about working for a government hospital, which she correctly deduces plenty of our fellow citizens consider 'socialist'. But that's only because they have no clue what that word actually means."

"Nobody ever went broke underestimating the intelligence of the American people."

"H. L. Mencken was not wrong," I replied. "As my friend Melody, who's now an attorney, said -- we know how clueless the average person is; well, statistically speaking, half the people are more clueless than that."

Carl laughed, "I'm going to have to use that! Anyway, I believe our time is up, and we need to get back to our respective services."

He was correct, so we left the cafeteria and took the stairs up one floor, where he turned right, and I turned left. I went straight to Owen Roth's office and was happy to see him.

"Time for a quick question?"

"If it's really quick," he said. "What?"

"I wondered if you knew if the *locum tenentes* contracts were until the end of May?"

"Pedantic to a fault," Doctor Roth declared. "Every other person would just say *locums* or *locum tenenses*!"

"I'd say 'sorry', but I'm positive you know I wouldn't mean it."

"Correct. They're on contract until the end of March, then week to week. Let me guess, you want to be released from your bondage and go back to the ED."

"I'd love to, and Doctor Saunders would be ecstatic to go back to Medicine."

"Did she put you up to this?"

"Only in the sense of bitching about not signing up for the chaos and insanity that can be the ED."

"Let me speak to Tim Baker. Shelly is a hundred percent in my mind, so we'll be back to full staff. I'm OK with you going back to your natural habitat. I'm positive Baker will be receptive, as it'll save him some money, and that's our scarcest resource."

"Thanks."

I left his office and went to find my students to supervise our afternoon procedure.



## **March 20, 1990, McKinley, Ohio**

"I'd kiss you if it wouldn't get me in trouble with your French girl!" Clarissa exclaimed. "A hug will have to do!"

We hugged.

"Did they mention what I consider the one downside?" I asked.

"That I'll still cover the Free Clinic? Yes. I know you really enjoy that, but it's PGY1s only, so it was going to end, anyway. You could always volunteer."



"Eventually. Fortunately, I get to keep my current schedule, which is 0500 to 1700 Monday through Friday."

"Who picks up the extra hours?"

"Other ED staff," I replied. "I'm on call for emergency surgery or disaster protocols."

"Pager duty?"

"Until the end of May. After that, I'll be on the usual rotation of PGY2s for pager duty once every four weeks. Because of my dual specialty, I'll be the first one called in for a disaster protocol, no matter who has the duty pager."

"You'll carry a pager full-time?"

"Yes."

"Better you than me!" Clarissa declared.

I chuckled, "Your name is on the disaster protocol list right below mine."

"What god did I piss off? I was supposed to be in medicine with time to care for my patients, not work in pit lane at a NASCAR race!"

"Poor baby," I replied. "There have only been two protocols in the last four years."

"Oh, sure! Jinx it!"

I laughed, "You have two more weeks in captivity, then you're free to go back to routine medicine."

"I *like* routine medicine!"

"It takes all kinds, I guess!" I grinned.

"Go back to your ward, Petrovich! But thanks for the good news! Lunch?"

"If we can swing it, yes."

We hugged, and I headed back to the surgical ward. One interesting thing about going back to the ED was that both Erin and Todd would be on their emergency medicine rotations. That didn't mean they'd be assigned to me, but given Erin had matched for surgery, I could reasonably request her. That would give her a chance to see more procedures and would work to the benefit of the surgical service.

There was no second surgery for which we needed to prep, so I went to the lounge and had just sat down when Margie came to the door and let me know I had a consult in the ED. Given we weren't busy, I had both Erin and Todd accompany me.

"Are you going to write our evaluations?" Todd asked as we walked to the stairs.

"Yes, though I'll discuss them with Doctor Lindsay. Neither of you has anything to worry about. We'll see what you're really made of on your next rotation."

"You're going back to the ED?" Erin asked.

"Yes. I'll have the same schedule as I have now, so there's a chance you'll be assigned to me at least some of the next two months."

"How is Doctor Gibbs?" Erin asked.

"Slowly improving. She'll be at the rehab facility until mid-April, at least, though I expect the end of the month. I don't see her coming back to work before sometime next year."

We walked into the ED and went to Trauma 2.

"Loucks, surgery," I announced, walking in.

"Hi, Mike," Ghost said. "Miles O'Brien, two, swallowed several button batteries. Ultrasound shows them in the stomach."

"Are you a *Star Trek* fan, Mr. O'Brien?" I asked the dad, standing near the treatment table.

"That obvious?" he asked with a smile.

"To me! Ghost, I'll evaluate, but we'll need Pete Barton to perform the procedures. I could do it if Miles was over twelve years old. Let me perform an exam, and I'll call for Pete to come down."

Ghost and I reviewed the patient's vitals, and then I verified his findings with the ultrasound. Once I'd completed the exam, I went to the phone and dialed the surgical scheduling desk.

"Hi, Jen," I said. "Is Pete Barton free?"

"He just finished a procedure. Do you need to speak to him?"

"I have a toddler who needs an endoscopy to remove two button batteries."

"OK. I'll send him right down."

I thanked her and hung up. Three minutes later, Pete Barton, a pediatric surgeon, came into the room.

"Hi, Mike. What do we have?"

"Miles O'Brien, two; ingested a pair of button batteries. They're in the stomach, so endoscopic removal is indicated."

"Let me take a look, and we'll do it together."

He checked Miles, then explained to Mr. O'Brien what we were going to do. I called for an anesthesiologist, as we needed to sedate Miles, and just under fifteen minutes later, we were ready to begin the procedure.

"Mr. Barton, you'll need to wait outside during the procedure, please," Doctor Barton said. "Nurse, please escort him out."

Kellie escorted Mr. Barton out of the room.

"Mike, you do it, and I'll guide and observe," Pete Barton said.

I moved to the end of the trauma table and prepared Miles similarly to how I would for intubation.

"First, insert the pediatric mouthguard," Pete directed.

I inserted the guard, which would keep Miles' mouth properly open and protect his teeth.

"Use your normal intubation procedure, but push the scope into the esophagus instead of the trachea," Pete instructed.

Using a laryngoscope, I passed the tube into Miles' esophagus, using the camera to guide me.

"I'm in the stomach," I announced.

"Erin, would you give us an ultrasound to give us an external view?" Pete asked.

She did so, and under direction from Pete, I guided the end of the scope to the location of the first button.

"Pass the four-pronged forceps tool down the tube."

The tool was similar to the normal four-pronged forceps, except that it was attached to a long, flexible, braided surgical steel cable.

"Carefully maneuver to grasp the battery, but be very careful not to puncture the stomach lining. Just go slow and be cautious. There is literally no need to move quickly for this procedure."

It took a bit of trial and error to move the tube and forceps into the correct position, with gentle correction and guidance from Pete, but I eventually was able to grab the first battery.

"Now, lock the tool and very carefully withdraw it," Pete instructed. "Todd, a basin, please."

I made sure the alligator teeth were properly engaged, then slowly withdrew the tool and deposited the battery in the basin.

"It's intact, so no problem there," Pete announced after inspecting it. "Let's get the second one."

I repeated the procedure, which was a bit easier than the first time, but I still felt clumsy. Just over five minutes later, I deposited the second battery into the basin. It, too, was intact.

"Those do not go in the medical waste bin," Pete instructed Todd. "They cannot be safely incinerated. Saline bath, then put them in a green pouch and set them aside for proper disposal. Mike, go ahead and remove the endoscope and mouth guard."

I did as instructed, and after we used the ultrasound unit to verify there were no further foreign bodies, Pete announced we were complete.

"Let's go speak to Mr. O'Brien," Pete said. "Ghost, he's all yours."

"Erin, come with us, please," I said as I followed Pete out of the trauma room. She went to the waiting room and brought Mr. O'Brien into the consultation room.

"The procedure was successful," Pete said. "We removed two batteries, and there does not appear to be any damage to Miles' stomach. You should follow up with your pediatrician as soon as possible. If you see any blood in Miles' stool, or he vomits in the next twenty-four hours, bring him back to the hospital immediately,"

"Thank you, Doctor! Can I see him?"

"Erin will take you back. He'll be coming out of the light anesthesia, so he'll be groggy."

"Thanks again!"

He shook both our hands, and Erin escorted him back to the trauma room.

"Good job, Mike," he said. "I'd sign off, but the rules don't allow that procedure to be done except by a pediatric surgeon or under the direct supervision of a pediatric surgeon."

I nodded, "Which is, of course, why I called you! May I ask a question?"

"Of course."

"Why is the cutoff age twelve? At that point, we'd still use a pediatric endoscope for most kids."

"That's true," Pete confirmed, "but it's about the hospital guidelines for when you need a pediatric specialist."

"First menses for girls; twelve for boys. But the requirement doesn't go both ways -- someone over twelve could be seen by a pediatrician."

"Yes, of course, though I'd set the upper limit at fifteen. There are no adolescent surgical specialists, so we discuss each of those early teen cases and decide based on the condition."

"What are the rules for emergencies?" I asked.

"That's a tough call, and it would be the Chief of Emergency Medicine or Chief Surgeon who would have to make that call. Unless it was truly a life or death situation, and I mean imminent, call for a pediatric specialist."

"Got it."

"Have you performed a pediatric intubation?"

"One, besides today's endoscopy. We really do need pediatric specialists in the ED."

"We'll need to do that for Level I certification, though it can be handled the same way Cutter and Roth handled your situation. I'm not sure what Pediatrics has planned, but they have another year to work it out. Anything else?"

"No. Thanks, Pete."

"Write this in your procedure book for my signature, but remember, it's not a sign-off to perform one unsupervised."

"Understood."

He left, and I collected my medical students, and we headed back up to the surgical lounge.

"How dangerous are those button batteries?" Todd asked.

"Minimally," I replied. "And had they gone past the patient's stomach, we'd have sent him home and asked his parents to check his stools to confirm the batteries had passed. If they didn't within a few days, or there was blood in his stool or gastrointestinal distress, they'd bring him back. Unfortunately, that would require an open procedure in most instances."

"Not laparoscopic?" Todd asked.

"Erin?"

"I don't know, but I can speculate."

"Go ahead."



"A combination of lack of experience combined with a lack of space."

"Good speculations. The procedure hasn't been approved for younger children, and the current tools and equipment aren't designed for children. It's similar to the pediatric endoscope and laryngoscope I used today versus adult-sized ones. Let me turn the tables and ask you what would be done if magnets were swallowed?"

"That requires immediate surgery if they've passed through the stomach," Todd replied. "There are far too many possible complications."

"Very good. Any thoughts of what specialty you'll select?"

"I'm thinking cardiology, but I'm not settled on it; I could also go surgery or emergency medicine. I'm doing doubles in cardiology and emergency medicine and singles in internal medicine and surgery."

"Sounds like a good plan. Do you plan to Match in the area?"

"Probably in Pennsylvania, which is where I'm from."

The rest of the day was quiet, and at 5:00pm, I headed home to spend the evening with Kris and Rachel.



## **March 21, 1990, McKinley, Ohio**

"Mike, there are two McKinley detectives here asking for you," Margie said from the door of the surgical lounge.

"Where?" I asked.

"I asked them to wait in the consultation room."

"OK. Be right there."

I left the lounge and walked to the consultation room, where I saw Detectives Tremaine and Kleist.

"Morning, Detectives."

"Hi, Doctor Mike," Jill Kleist said with an inviting smile and a twinkle in her eyes.

"What can I do for you?"

"We're conducting an investigation and wanted to ask you a few questions."

"OK," I said, then shut the door and sat down.

"You worked at the McKinley Free Clinic until mid-February, right?"

"Yes. One shift, on Wednesdays."

"Did you observe any inappropriate behavior of any kind?" Detective Tremaine asked.

I shook my head, "Not that I can think of. I had a few cases with girls who were obviously underage who I referred to social workers, but I suspect that's not what you're referring to."

"No," Detective Tremaine replied. "We've had four complaints about inappropriate touching against one of the doctors."

That didn't exactly narrow it down, as there were different Residents assigned each day of the week, and except for me, they had rotated every two months.

"May I ask whom?"

The two detectives exchanged a look.

"Gale Turner," Detective Kleist said.

"I honestly have no idea," I said. "I was never in a room with him when he was performing an exam, and I never assisted with abortions. His main nurse, Leslie, would be your best source."

"We've spoken to her. Did any young woman ever complain about Doctor Turner or any other member of the staff?"

"No. Other than bitching about reporting STDs to the County Health Department, I don't recall any complaints of any kind."

"What's your opinion of Doctor Turner?"

"He's a good guy, and honestly, I'd be highly skeptical of any complaints. That said, if you have four, that obviously calls my perception into question. Are you allowed to share details?"

"First, are you familiar with the procedures of an abortion?"

"Yes. I observed several D&C procedures during my training, but they were to resolve miscarriages, not abortions. The procedure is similar."

"OK. What we share with you from this point cannot be repeated. Can I trust you, Doc?"

"Yes."

"Is a patient fully sedated during an abortion?"

"Rarely," I replied. "Typically, a sedative is prescribed, but the patient is conscious throughout the procedure. The Free Clinic actually doesn't have the equipment for general anesthesia -- what you would call full sedation. Normally, the procedure would be performed with moderate sedation, which we call 'conscious sedation'."

"How aware is someone during that level of sedation?" Detective Kleist asked.

"They're able to answer questions and respond to stimuli. An extended conversation would require some effort. Recovery from that level of sedation is usually quick, and it doesn't require supplemental oxygen, though a nasal cannula is often used."

"So a patient under that level of sedation would notice being touched?"

"In most cases, yes."

"What does a patient wear?"

"Usually a hospital gown. In my experience, bras stay on, but everything else comes off. That said, it's up to the physician to decide."

"Do you know Doctor Turner's usual practice?"

"No. As I said, I never was in a treatment room or procedure room with him. All of our interactions other than polite greetings were in his office."

"Does he counsel patients in his office?"

"I'm sure it has happened, but the normal practice is to counsel them in treatment rooms and always with a nurse present, no matter where the consultation is done."

"Always?" Detective Tremaine asked.

"Always," I replied firmly. "It's a rule both at the Free Clinic and here at the hospital -- no male staff member is ever alone with a female patient. There is always a female doctor, female nurse, or female medical student."

"And male patients?" Detective Kleist asked.

"There are no rules about male patients. May I ask if you've spoken to any other doctors?"

"I suggested you be our first stop," Detective Kleist said. "You have a history with both of us, and you have a reputation as a straight shooter."

"I could say the same for you," I said with a smile.

"One less douchebag in the world," she said. "Taking him down cost Scott and me each three days on the bench, but it was worth it."

"Psych eval?"

"Yes, and mandatory seventy-two-hour time off or desk duty. Back to the clinic -- are there any circumstances you can think of where Doctor Turner would be alone with a female patient?"

"None that I can think of, no. I mean, I suspect some emergency might require that, but if it happened more than once, I can't imagine why. The procedures are obviously very intimate and proceed similar to a gynecological exam, so if the complaint is about genital touching, it's going to be tough to prove."

"When a young woman is seeking birth control, do you perform a gynecological exam?"

"Generally speaking, no, so long as they've had one in the previous twelve months. That said, if they became sexually active since that exam, then we'd strongly recommend one."

"What else would cause you to perform a gynecological exam?"

"A full-spectrum STD test series, as it requires swabs from the genitals, in addition to the anus and throat. And, of course, there are young women who use the clinic for their annual exams. Those are usually students from Taft or women on Medicaid."

"What do you know about Doctor Turner's nurse?"

"Not much. We had a few short, casual conversations, but most of my interactions were with Trina Carlisle, a Nurse-Practitioner who is licensed to act independently of Doctor Turner for a limited set of exams and procedures."

"Which nurse did you work with?"

"Mostly Michelle Stone, but there were others on occasion."

"Did you ever work with a nurse named Abby Norman?" Detective Tremaine asked.

I suppressed a groan because that was Clarissa's ex.

"No. She left the clinic before I had my first shift there as a medical student."

"But you know her?"

"Yes. She was part of a group that went to Europe the Summer after I graduated from Taft. She was dating Doctor Saunders at that point."

"She's a lesbian?" Detective Kleist asked.

"Yes."

"What do you think of her? Nurse Norman, I mean."

"May I ask why this is relevant?"

"There were a pair of complaints against her in the past. We're wondering if there's a pattern at the Free Clinic."

"Abby and I did not get along, but those complaints don't ring true. I assume nothing came of them?"

"Correct," Detective Tremaine said. "The prosecutor decided the complainants were unreliable and never filed charges. Did you know about that?"

"No. And our relationship was such that she would never have shared that with me. Nobody at the Free Clinic said anything."

"I think that's all I have," Detective Tremaine said. "Jill?"

"Just that Doctor Mike still hasn't come to .38 Special for drinks!"

"I think I'll leave that out of my interview notes," Detective Tremaine said with a smile, closing his notebook.

"Interns have no free time," I said. "Not to mention I have a wife and daughter who need me, and my wife is pregnant."

"Congratulations," Detective Tremaine said.

"Lucky girl," Detective Kleist said with a smile.

"I'm the lucky one! If there's nothing else..."

"The invitation is open," Detective Kleist said.

The three of us got up, and they left. I walked back towards the lounge but was stopped by Margie, who asked me to see Doctor Roth. I walked to his office, and he waved me in.

"Was that about the shooting?"

"No. It was about the Free Clinic, not the hospital, but I'm not supposed to discuss it at this point."

"Please tell me you're not involved."

"Not at all. I did have to fend off Detective Kleist again."



Doctor Roth laughed, "She's about as subtle as a hydrogen bomb! She actually asked about you when she was conducting the shooting investigation."

"I'm not surprised. In any event, it's not about me or the hospital, so nothing to worry about."

"OK. Pete Barton mentioned he supervised you performing a pediatric endoscopy."

"He did, and he confirmed I knew the rules for those procedures."

"Just so you know, it's all about liability and malpractice. I'm positive you or any other Resident could do those procedures on toddlers or pre-teens, but the insurance company does not want to defend a suit where the doctor performing the procedure isn't a pediatric specialist."

"Malpractice suits involving kids are invariably decided against doctors and hospitals, even more than regular suits."

Doctor Roth nodded, "Exactly. We have to pay those off, so we want our ducks in a row to limit our exposure."

"Absolutely. Anything else?"

"No. Keep up the good work, Doctor."

"I will."