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## **THE VIGIL**

by

Robert Crooke

The duty nurse watches over Irene like an old friend. Without acknowledging Richard as he enters the room, she leans toward her patient, observing some sign she is trained to notice. Finally, she rises from her bedside chair and faces him.

“Mr. Morris.”

“Hello again.” Having neglected to ask her name earlier, Richard now strains to read it—Millicent Ford, RN—on the pin above the left breast pocket of her starched white blouse. “Ms. Ford.”

“I’d like to speak with you a bit,” she says, moving to a chair on the other side of the bed. “Please!” She urges him to sit, extending her hand, palm up, across Irene’s unmoving form.

“All right.” As he quickly sits, he notices the rings on her left hand. “*Mrs.* Ford.”

“Call me Millie.” She settles herself, straightening the folds of her shapeless brown skirt, before taking another hard look at Irene. “Your wife is very strong.”

Richard’s heart drops as he senses what is coming. “But?”

The nurse’s expression softens. “We’re seeing the last stages now.”

“Okay.” His response sounds ridiculous even to himself.

“I can try to answer any questions you may have,” the nurse offers.

This is a whole thing, Richard decides, a script these nurses are schooled to take you through.

“Okay.” He looks carefully at Irene and sees a transformation clearly is underway. Great changes have occurred in just the past few hours. Even her beautiful face is becoming the face of a stranger with pallid skin, sunken cheeks, and eyes more cratered than closed. “If there’s anything, I’ll ask.”

The nurse smiles warmly.

“I won’t waste your time chatting about the obvious,” he promises. “You have other patients to see, I’m sure.”

“My other duties are complete,” she says. “I gave morning report at the daily staff meeting, and they’ve assigned me here indefinitely.”

“You mean it’s that close.”

She gives him a look of sad competence. “I’m afraid so.”

So this is it, Richard thinks. The culmination of what Irene has asked him to witness—the passing of her life, the dispersal of her things to their children and grandchildren—everything to do with her existence and memory. She has placed it all in his hands. And not for the first time. He sees again how this brief sojourn, after decades of silence and separation, has been a second marriage. Or another aspect of their first, perhaps, since marriage exerts such a strangely permanent force. The vows seem to hold us forever, no matter how we may try to break them.

His mind flows with images of Irene as the twenty-year-old girl he met at a summer club dance. He remembers the brilliant white dress she wore—its shaped bodice, belted waist, and flowing knee-length skirts—and her blond hair combed straight back, held with a simple red

ribbon, to reveal the pearl ear studs that matched her necklace. He sees again her untroubled smile, the wordless invitation of her offered hand, as the band commenced a slow number and they moved closer on the dance floor.

“Your wife is a nurse,” Millie says.

“Yes,” he confirms. “She was an art scholar in her younger years. But she didn’t...that didn’t...work out. Do you know her professionally?”

“As a nurse? No.”

“You’ve read her patient profile.”

“I have.” Millie pauses. “I would have known anyway.” She extends her hand again in that palm-up gesture toward the bedside tray-table.

He understands she is referring to Wendy’s prayer card. “Catherine of Siena,” he says softly.

“Patron saint of nurses,” Millie notes.

He acknowledges her observation with a grateful smile. “Our daughter-in-law made that for her. The funny thing is, Irene’s not even Catholic.”

“Faith belongs to everyone.”

“For whatever it’s worth.”

Millie frowns.

“Faith doesn’t change anything, really,” he adds. “Does it?”

“It doesn’t change the way things are,” she concedes. “Faith is more about changing the way *we* are.” She glances at Irene. “I detect faith in your stories.”

A reference to his writing at this moment is surprising. “Oh?”

“It isn’t obvious in a religious sense,” she says. “But it’s there, in the insights and disappointments, the compassion for horrible things the characters do to each other and themselves. The acceptance of a certain plight.”

“Plight?”

“Our *fate*,” she says. “Being alive, making the mistakes we make, but holding ourselves together as we proceed, day by day, toward something inevitable.”

This refreshingly blunt nurse really does understand his writing, he thinks. But does she assume it is the same as understanding him? Or Irene?

“You have a lovely family,” she tells him, taking another close look at her patient. “It’s very clear how much you all care for her.”

“Irene and I have been divorced for many years,” he feels obligated to announce. “We married quite young. It didn’t work out.”

“Like the couple in your first book,” Millie suggests. “*Broken Promises*.”

“On a certain level, no doubt.”

“Marriage is difficult at any age,” she proposes. “But particularly when we’re young.” She searches his expression as if for a sign of his comfort with this conversation. “When we’re young, we expect certain feelings to last forever.”

“Turns out they do,” he says. “It’s other things that change.”

Millie smiles a bit ironically.

“I betrayed her,” he says abruptly. “Again and again.”

“Why?”

“I felt that she’d betrayed *me*.”

Millie contemplates his spontaneous admission without comment.

“I’m still betraying her,” he says in wonderment at this sudden need for confession.

Millie nods. “It’s a theme in all your novels—betrayal.”

“People tell me that,” he says.

“You tell *everyone*’s story,” she asserts. “Who hasn’t betrayed someone? Who hasn’t *been* betrayed?”

He laughs now. He likes this woman, admires her toughness.

Millie leans forward to examine Irene again. “I’m sorry about your marriage.”

“Marriage is difficult,” he replies. “Just as you said. Time passes and we change. Yet, the feeling we have for the person we married never leaves us.”

“Is that the feeling you think you betrayed?” Millie asks boldly.

He stares at Irene’s perceptive nurse. “I look back on my life and see a coward who ran from love,” he says. “A dishonest man who preferred freedom but couldn’t decide if he was a libertine or prude.”

He pauses.

Millie offers no response, having settled back in her seat to focus on her patient.

Richard wants to make one last, unflattering admission: that memory, at his age, is only approximation, an unstable blend of apparent fact and bitter feeling. But he senses the limits of her interest in being his confessor.

Moments pass until he remembers his unambiguous promise to Irene—to stay close until the very end. That she isn’t conscious doesn’t matter, he thinks, if she can sense, somewhere in her dreams of death, his presence. His effort.

He takes her hand.

Millie smiles warmly; she approves.

“I think it helps her,” he says, already feeling the strange responsiveness in Irene’s grasp. “It helps *me*, anyway.”

The lush afternoon light bends and fades away. Night descends over the Nesaquake Cove and distant Sound. Darkness presses against Irene’s windowpane. Family members start arriving from the visitor’s lounge in response, perhaps, to the changing light, or to some instinctive sense that one of the flock is in distress.

Millie relinquishes her seat. Richard, holding tightly to Irene’s hand, can have no such thought.

“I’ll get more chairs,” Millie says as she leaves the room.

Henry guides Wendy to the chair Millie has vacated. Phil moves another chair from the corner to the bedside for Carole.

“Where are the kids?” Richard whispers.

“We decided they’d had enough,” Henry replies, standing behind his wife.

“Their babysitter came to get them,” Wendy adds. “A nice girl from our block.”

“Excuse me.” A familiar workman has appeared with three folded metal chairs, which he opens and sets behind the women.

Richard thanks the man, who replies with a nod and leaves.

Millie steps in again.

Richard leans forward for a closer look into the stillness of Irene’s expression. When he looks up again, Henry and Phil are seated. Millie has taken the last empty chair to the far corner,

from where she can observe the room.

There are tears in Wendy's eyes now, but Henry is his stoic self. Phil looks the part of family counselor—grave, respectful, and objective.

Carole watches her dying friend. She hasn't allowed herself eye contact with Richard since entering the room—not for a second—as if telling him he isn't here.

An hour passes in virtual silence until another woman enters with a stethoscope around her neck and a digital tablet cradled in her hands.

Millie stands and introduces her to the family. "My nursing supervisor, Ms. Critchlow," she says.

One by one, Richard and the others identify themselves.

After a brief smile of acknowledgement to all, Ms. Critchlow directs her attention to Irene, whose form and presence seem with each passing moment to recede.

Richard reads the supervisor's nametag—Nora Critchlow, RN, MSN—as she gives her tablet a few light taps.

"Where are we on vitals?" she asks Millie.

"Functional changes appear definitive," Millie says while placing a digital oximeter on Irene's finger and inserting a small electronic wand in Irene's ear. Perhaps thirty seconds later, Millie removes the wand and confirms her assessment. "Body temperature below normal...descending." Leaning down to read the tiny oximeter screen, she adds, "Pulse rate is under forty...blood oxygen approaching seventy."

"Breathing appears shallow," Nurse Critchlow observes. "Manual pulse rate?"

Millie holds Irene's wrist for fifteen seconds, then looks up and shakes her head. "Weak

and irregular.”

It occurs to Richard that this run-through is part of the script, and as much for the family’s edification as for the nurses’. It is apparent from their data that Irene’s body is failing fast, though the grip of her hand remains strong.

Millie places a blood pressure cuff on Irene’s arm and squeezes the little black ball at the end of the short rubber hose attached to a small device that reminds Richard of an old SONY Walkman.

“Blood pressure falling,” Millie confirms. “Rapidly.”

“I see that.” Nurse Critchlow stares at the screen of her tablet.

Richard now realizes all of the data from Millie’s tests are being sent wirelessly to a flowchart of vital signs recorded on Nora Critchlow’s tablet.

The nurses take no extraordinary steps in response to these bleak digital messages. They follow clearly their patient’s wish to expire without intervention. They simply watch her, calmly, perhaps knowing the depth of her embrace in painkilling drugs. Perhaps also, Richard assumes, having so often witnessed death that it is, for them, as natural as life.

Whether Irene’s brain still functions at a level permitting the slightest awareness, the briefest perspective on her own departure, cannot be known. But the strangest thing for Richard is to realize the almost metaphysical function these nurses now serve. They are Irene’s guides into the darkness, or, as Millie might prefer, the light. But they appear untroubled by theoretical questions; their concern is for the suffering.

“I recommend removing the cannula and IV,” Millie says to her boss.

Nurse Critchlow nods. “Agreed.”



Millie carefully disengages the supplemental oxygen clip and tubing from Irene's nasal passages. She withdraws saline and medication lines from a dual-access catheter in Irene's forearm.

Nurse Critchlow inserts the earpieces of her stethoscope and places its resonator on Irene's chest to listen. Moments later, she reaches for the phone on the little bedside table and presses a number. She speaks softly into the receiver. "This is Nora Critchlow. Please tell Dr. Blake Room 320. Thank you."

She hangs up the receiver as silence envelopes the room. For Richard, this moment is an intimation of universal regret.

Millie starts collecting the little devices she's used to check Irene's vital signs.

Nurse Critchlow moves toward Richard and touches his shoulder. "She's gone, Mr. Morris." She pauses. "Dr. Blake will arrive shortly to confirm and sign forms."

Releasing his shoulder, she assists Millie in disconnecting a barely filled urine bag.

As they work on her, around her, Richard observes yet another change in Irene's now grayish-blue face. Its tension is gone because her struggle is over, and a fleeting softness—an illusion almost of youth—seems to animate her expression. He is struck by a monstrous fear, suddenly, that everything has been his fault, every disappointment and betrayal—hers as well as his—in their confluent lives. He feels sick with shame that something inherently dishonest and small within him has caused all their trouble. That he has been the black hole at the center of their journey.

Nurse Critchlow looks up from her final ministrations over Irene's body and addresses the family. "Come closer if you wish. There's nothing to fear."

But in the quiet moment following her invitation, before the group can respond, the lowing sound of a beast in agony shatters the room. As people turn, rustling in their seats, dabbing their own tears, Phil Marinetti plunges to the bedside, falls to his knees, and buries his face near Irene's feet. Again, slightly muffled in the bedsheets, he bellows like a wounded bull.

Carole and Wendy slip off their chairs and kneel on either side of Phil, embracing him. Millie places her hand on the back of his head.

Stunned by this and, perhaps, by inner conflict, which sends tears down his cheeks at last, Henry turns away from Phil and the women. He stares chillingly at his father.

Richard accepts the accusation and heartbreak in his son's glare. He wants to rise and embrace Henry—or try to—but he can't. He is shackled to the bedside by the grip of Irene's hand, which feels stronger now, in death, than in life.

THE END