

Can't Forget

A novel

by

James Gottesman

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Chapter 1

Hayley Green scanned the vacant waiting room in the 2-West Oncology Suite. Other than the soft breathing of her parents, only the whistling air-conditioning vent above her head provided sound. Empty of people at five thirty p.m., empty of color other than pale blue walls, but mostly, empty of happiness, the room exuded bad news.

Trying to focus on a procedure consent form in her hands, Hayley's thoughts were light-years away, emotionally tuned into a music-less merry-go-round of unanswerable questions in her head – *Who is going to take care of my mother and father?... What happens to my job?... When do I start treatment?... Why? Why me?...*

Hayley's merry-go-round had no off-switch and the litany of whos, whats, whens and whys revolved unendingly, never reaching a conclusion, never having an answer to a single question. The spinning had begun sixty-two hours earlier after a two-day nosebleed prompted a three a.m. rush to the emergency department at Seattle Med, followed by a visit later that morning with her longtime family physician. Hayley's fleeting memory of that tearful meeting was '*...some form of leukemia. I'm so sorry. I'm so very sorry. ...get you to a specialist.*'

Hayley reread the form's header for the fifth time, 'Consent for Bone Marrow Biopsy.' She stopped as the page evaporated into blankness. She curled her knees up on the couch and remounted the merry-go-round.

Hayley sat with her parents, Rachel and Mel Green. That, in itself, was unusual. Since graduation from high school, Hayley had managed her health care independently of her mother. Rachel Green didn't deserve the exclusion but accepted her daughter's nuances. Hayley couldn't remember if her father had ever accompanied her to a doctor.

Although Hayley and Rachel talked daily and loved each other's presence, Rachel Green had long ago stopped questioning her daughter about almost anything medical. In fact, Hayley controlled most aspects of her life and Rachel rarely got an entire sentence of criticism finished

before being interrupted.

“She’s just wired that way,” Rachel would tell friends and herself.

However, Rachel and Mel Green now sat with their daughter when the three came to the unsaid realization that this catastrophe of catastrophes was different.

Rachel gambled and said, “I thought Brad was coming?”

“I guess not,” Hayley said, softly. “He's already missed work and you know law firms and new associates. They count every minute and second. He has to keep his billable hours up.”

“This is important. You were going to announce the...”

“Stop, please,” Hayley interrupted. “Be realistic. Brad's there, but not there. I didn't want to tell you just yet. We talked last night, or more honestly, he griped and I listened.”

“And?”

“He suggested we take some time-off until I got my 'medical situation' straightened out. Now I have leukemia and something else called 'medical situation.' I was so wrong about him and I don't want to talk about it.”

Small tears appeared and held tight to Hayley's eyelids, refusing to let go. Swollen lids and ruddiness hid large, youthful, olive eyes and satin ivory skin. She looked at her mother's lap, filled with semi-damp tissues under folded hands. Hayley grabbed a used tissue and caught the moistness.

“I'm sorry, sweetie,” Rachel said, then quickly changed subjects. “Dr. Marshall was so nice to stay late to see you on short notice.” Hayley's mother air-swept the room with her right hand, staring at the walls filled with framed awards and certificates.

Hayley looked at her own hands and then back to her mother's waving hand. *Used to be the same hands.* Tan colored age-spots dotted Rachel Green's parchment-like skin, along with prominent veins and knuckles. *She's getting older.* Hayley squeezed her mother's left hand as the right continued to wave.

Rachel added, “Look at all the awards he's won. He must be good.”

Everybody says he's the best. I know he took care of Helen...."

Hayley had already tuned out her mother's ramblings when a nurse came into the waiting area, looked at her watch, shook her head, then approached the couch and announced to the otherwise empty room.

"Hello, I'm Kelly Drummond, Dr. Marshall's nurse. I'm sorry it's so late." Drummond, turning to Hayley said, "I assume you're Hayley?" Not waiting for a response, Drummond continued, "Did you read and understand the form? Do you have any questions?"

"I'm good," Hayley lied, without hesitation, as she signed the consent.

Drummond looked past Haley's blank stare to the angst-painted faces of the older couple. When they said nothing, Drummond said, "Please follow me, Miss."

As Hayley stood and stepped to the middle of the room, Drummond turned to Hayley's seated parents. "Mr. and Mrs. Green, the procedure will take about thirty minutes and Hayley should be ready to leave in about forty-five minutes. The results will be back in forty-eight hours. Before you leave today, I'll have an appointment set up for you to meet with Dr. Marshall to discuss the findings and the next steps."

Rachel and Mel Green nodded simultaneously as Rachel added to her small pile of tissues.

Drummond ushered Hayley out of the waiting area and led her down a hallway.

As they walked into the hallway, Hayley said, "Nurse. So you know, I'm twenty-eight years old and have a Master's degree in Social Work and Psychology. I appreciate the conversation with my parents, but you need to address everything to me and only to me. I'll decide what they need to know. Clear?"

Drummond slowed her pace, turned and said, "I'm sorry. I couldn't tell if you were processing everything."

"I probably wasn't."

Drummond squeezed Hayley's hand as they walked through a door marked 'Procedure Room #2.'

Hayley stared at the over-lit, but still lifeless, pale green room. A large, padded mechanical table centered the room. Drummond walked ahead to a cupboard and removed a folded light-blue paper gown.

"Do I really need to undress again?" Hayley semi-whined, knowing the answer. "Dr. Marshall just examined me twenty minutes ago."

"I am afraid so," Drummond replied, handing Hayley a paper gown. "This opens in the back. You'll need to remove your long-sleeved blouse and everything below the waist. I'll be back in a minute so you can undress in private."

"You can stay. I'd like to get this over as quickly as possible."

As Hayley disrobed, Drummond repapered the procedure table's well-worn dull black padding. "Don't tie the waist string. I'd like you to lie here, face down on the table," Drummond added as she smoothed the paper.

Looks like butcher paper,' Hayley thought but said nothing.

As Hayley mounted the table and lay prone, Drummond scurried around the room, gathering supplies to set up a biopsy tray. She applied a blood pressure cuff to Hayley's left arm, took measurements and announced the numbers to herself. "One ten over seventy, pulse seventy-two." Drummond artfully slung the stethoscope around her neck, then opened the back of Hayley's gown and placed a paper sheet over Hayley's bare legs. "Tell me if your legs get cold. I can put on another sheet."

Hayley watched as Drummond opened a package of gauze.

"Which bone do you use?"

Waving the iodine-soaked sponge in a circle, out of Hayley's view, Drummond said, "The iliac crest, it's part of the pelvic bone back here. Don't touch. It's sterile. Okay?" Drummond's 'okay' wasn't a question, but an order.

Drummond turned her head to the door as Dr. Harold Marshall entered the room. Salt and pepper hair and small jowls on a round face exuded confidence and experience, while the sagging lower lids made

him to appear tired. He mumbled a few words to Drummond and then came to Hayley's side.

"I see we're ready. Do we have any questions?" Marshall asked.

"No," Hayley said, "but we'd like you to explain what we're doing as we go along."

"Sure," Marshall mumbled, disregarding the mild sarcasm.

"We're ready," Hayley whispered to herself, softly, then shut her eyes. *I'll never be ready. We, who are 'we?' Why do doctors always use 'we?' Do doctors use 'we' when they take care of other doctors? Doubt it. I need to promise that I'll never use 'we' with any of my patients.* Hayley opened her eyes to watch Marshall put on a pair of sterile surgical gloves and withdraw an anesthetic into a needle and syringe from a small bottle that Drummond held at chest level.

"This should sting a little, just for a few seconds," Marshall said.

Seconds later, Hayley responded, "Ouch. Thanks for the warning."

"The rest should be easy," Drummond added. "You may feel a deeper pain for a moment once Dr. Marshall enters the bone marrow. It's important that you remain absolutely still."

Drummond watched Marshall as he worked quickly and confidently. He made a small scalpel nick in the anesthetized skin over Hayley's right pelvic bone. Marshall examined an old-style, large bore, bone marrow biopsy needle that he had used over a thousand times in four decades of practice. The needle kit came with a cumbersome, screw-on, safety guard to prevent the needle from penetrating too deeply. Marshall felt the guard restrained his touch and feel and, per his custom, removed the guard. He then inserted the biopsy needle down to the outer cortex of the bone.

Bone marrow sits between an inner and outer layer of bone. Most marrow biopsies require a moderate amount of force to penetrate the outer layer, or cortical bone. Marshall tried gently first. The needle would rarely penetrate cortical bone with such little effort, but he liked to show a modicum of caution.

"Did you feel that?" Marshall asked.

"No, just a little pressure," Hayley said, her chin now resting on folded hands.

Marshall applied a bit more pressure, this time with a twisting motion. No movement, no penetration.

"You okay?" Marshall asked.

"Yep," Hayley mumbled. "Just some mild pressure."

Marshall then applied firm pressure with twisting, an amount of pressure to which he was accustomed. An unusual loud 'crack' resonated through the room as the needle advanced quickly and deep into Hayley's back.

Three inches deeper than Marshall had ever seen. Three inches past the mark on the biopsy needle where the safety guard had been removed.

Marshall and Drummond echoed the same alarm, "Oh."

At the same moment, Hayley's head lifted off the table and she screamed, "Ow. Ow. Oh my God, that really hurts. That hurts so much."

Dr. Marshall, at first stunned by the depth of the needle, withdrew it completely and held pressure over the puncture site. Drummond stood confused, mouth agape and unable to move.

"Hayley, I'm sorry," Marshall said. "You,... you,... you must have had significant softening to your bone at this spot and the needle went a little too far....Everything will be okay....We'll just try a different spot, a little bit lower, in a moment."

Hayley bit her lower lip, shook her head violently, while her hands clenched the side of the exam table. "Please don't do it again," she pleaded, "I'm in so much pain...I feel horrible..."

Drenched with sweat, Hayley's face appeared pale as faded linen.

"I think I am going to puke," Hayley said, as she tried to raise her head. "I..feel..so..."

Hayley's plaint trailed off as her head fell back to the table, her eyes

rolled up, her lids closed softly and then her arms dropped limply towards the floor, dangling like puppet arms after the strings had snapped.

All was quiet.

*_*_*_*

“Dr. Marshall, I think she’s fainted,” Drummond said.

“Take her blood pressure, would you? She’ll be fine in a minute,” Marshall replied.

Drummond whipped the stethoscope off her neck and quickly inflated the pressure cuff.

"Eighty over forty and pulse one-O-eight and weak. What should we do?"

"She just fainted," Marshall said, attempting to regain his composure, "Take her pressure again."

Drummond immediately reinflated and deflated the pressure cuff. "Sixty-five, maybe. I can barely hear it. Her heart rate is one forty, if it's even a pulse I even feel." She watched Marshall standing stone still, eyes searching, as if an answer might be written on the walls.

“Well, I’ve never seen anything like this,” Marshall said. “I don’t know how that needle got so deep. I guess you’d better call an IV team to start some fluids and let's lower the head of the table.”

Drummond stood speechless, unable to move. She had seen countless bone marrow biopsies over the past decade, most by Dr. Marshall and all without complications. She had never seen the biopsy needle track so quickly and deeply. Before taking the cushy, daytime clinic job, Drummond had spent twelve years as an ICU nurse so she had a good idea of untoward events. She had a sense of when something was bad, really bad or terrible.

Terrible.

“Kelly, I said lower the head of the table,” Marshall repeated, waking Drummond from her self-induced trance.

Drummond now focusing, lowered the head of the procedure table and then ran out to the hallway phone to dial the IV-team pager. The line was busy. Dialed again, busy. Again, busy.

Drummond could hear Dr. Marshall's pleas for help, crescendoing through the hallway. "Kelly. Kelly. Come back, I can't use this damn stethoscope. I can't hear a thing. Kelly. Kelly."

Drummond dialed the IV-team pager once more – busy. *Oh God, this is terrible.*

Drummond made a decision, or more honestly, a gamble, without Dr. Marshall's opinion or approval. She dialed nine-one-nine-one, the hospital emergency paging system, and said, "Kelly Drummond, RN, here. Code Blue Two-West Clinic. Procedure Room Two."

Immediately, the loudspeakers erupted throughout the hospital, "Code Blue Two-West Clinic. Procedure Room Two." Three seconds elapsed and the loudspeakers repeated the message.

Drummond reentered the procedure room to find Dr. Marshall, hands trembling, attempting to take a blood pressure from the limp, pale, and unresponsive patient.

"This damn thing doesn't work," Marshall screamed at Drummond. "I need a better stethoscope, not this piece of shit." He flung the stethoscope over Hayley's body onto the floor in the corner of the room.

"It was working a second ago, Dr. Marshall. I'll get another."

"She just.. just.. fainted," Marshall said, angrily. "I did not authorize a Code Blue. You..you..shouldn't have done.... It's.. it's.. it's not needed. Go back and call it off... and get me an IV team, stat. She just needs some IV fluids. That's all,... some fluids."

"Dr. Marshall, she's not responding and the head of the table is down," Drummond pleaded, "She's been this way for more than five minutes. I really think we need help."

Drummond knew Marshall would never allow a nurse, even a senior and seasoned veteran like Drummond, to direct him.

"Kelly, go out and call it off. Now, God damn it," Marshall screamed.

"I...I really...", Drummond mumbled.

Marshall, interrupting, yelled, "Now. Now is now. Do what I tell you."

Drummond turned to the door and was immediately spun around by a team of physicians responding to the Code Blue. She looked to the ceiling, closed her eyes and mumbled to herself, "Thank you, Jesus."

Chapter 2 – minutes earlier

Benjamin Hunt, M.D., Chief Resident in Surgery, along with two senior residents and two interns walked quickly over the second floor sky-bridge to the west side of the hospital complex to see surgical consultations on the medical wards.

Ben, despite movie-star looks, was not well liked by most of the hospital staff. The residents and nurses referred to him as 'Attila the Hunt.' Penetrating ice blue eyes, a softly chiseled face that appeared perpetually tanned and Charles Atlas build added to the characterization. The moniker was not a compliment and Hunt didn't care. The non-English-speaking staff had a similar 'nom de sonofabitch.' Ben had just started as Chief Resident in Surgery, an R6 position denoting his sixth year of surgical training post medical school.

Opposite the outpatient cancer clinic for private clientele of the medical school faculty, Ben and his team's attention turned to the added decibels of the hospital loudspeakers. "Code Blue - 2 West Clinic, Procedure Room 2." Code Blue denoted a cardiac arrest or some life-threatening emergency. Seconds later the loudspeakers repeated the emergency call.

Less than fifteen yards from the call's origination, Ben stopped for a second and then started to run down a short corridor into the 2-West Oncology clinic followed by his two senior residents and two interns.

"Where's the Code?" Ben shouted at the lone secretary seated behind a huge reception counter.

The young secretary didn't look up from her computer screen and used her left thumb to point over her shoulder. "Behind me, I guess. Dr. Marshall's the only one still here. Down the hallway to your left. Procedure Room #2. Second or third door."

Ben banged his hand on the counter hard enough to knock a box of appointment cards onto the floor, then screamed, "Get your God-damn ass out of that frigging seat and take us there now. I'm not playing hide-and-seek searching for a Code Blue. Move."

The now-frightened secretary sprang from her seat, repeating, "Sorry. Sorry....," opened a door to the clinic area, and scurried in front of Ben until she got to an unmarked open door that led into an almost empty waiting room.

An anxious older couple sat clutching the ends of a couch speaking frantically as the surgical team sped by. "What's happening? Stop. Please, what's..." Both had a hand in the air, waving desperately, like fourth grade students trying to show classmates they knew the answer to a question. Ben and his team took no note as they followed the secretary past the couple into a narrow hallway full of rooms on both sides.

The secretary said, pointing, "In there. In one of the procedure rooms."

As Ben entered the hallway, shouting echoed from an open door twenty feet away. He headed to the sounds, a room marked Procedure Room #2, and entered, running down a nurse trying to exit. Ben righted the falling nurse who looked to the ceiling and mumbled something unintelligible.

Ben yelled back at one of the two interns, Jesse Tavares. "Tavares, gotta be a crash cart somewhere. Find the secretary and get it." Looking to the other intern, Sally Boestom, he said, "Boestom, you stay."

Ben surveyed the room. A young woman lay prone on a procedure table, head tilted downward. He guessed five foot two or three, a hundred and five pounds, motionless and the pale dirty-white color seen in fresh corpses. For all intents, she looked dead, or close to it. Dr. Marshall, a well-known oncologist, stood at the woman's side trying to check her pulse.

"Talk to me. What's happening?" Ben addressed Drummond and Dr. Marshall together.

"You're not the IV team. I needed an IV team," Dr. Marshall, sweat staining the top inch of his white cotton collar, said, "They'll be here in a few minutes. Who, who the hell are you? This is my patient. My patient, do you understand. Where's the IV team?"

Ben disregarded Dr. Marshall's rambling and turned to face Kelly Drummond. "Nurse, talk to me. What happened?"

Drummond, fear pasted on her face, responded, "We were doing a standard iliac crest marrow biopsy on this woman with leukemia. The needle accidentally penetrated to its hilt. She had intense pain and then passed out. I've never seen a needle go so deep. Dr. Marshall removed

the needle and we thought she'd need just a moment to collect herself, but she's been unconscious and hypotensive since."

"How long?"

"Six, seven minutes. Pulse over one-forty. BPs less than sixty."

Pointing to a small punctate oozing hole on Hayley's right lower back, Ben said, "That's the entry point?"

"Yes."

"Where's the needle?"

She pointed to a six inch, large-bore biopsy needle sitting on a sterile tray. Blood covered the entire length of the needle shaft. The pristine, chrome needle guard sat, unblemished, on the opposite side of the tray.

She's not eight inches front to back. "Christ. The needle probably tore the right iliac artery or vein," Ben said, looking back to the patient and the entry point.

Dr. Marshall circled the table and inserted himself between Ben and the unconscious patient.

Marshall demanded, "I'd like you and your team to leave and..."

Ben, looking over Marshall's shoulder at the face of the young woman, disregarded the older man's ranting. Her deep blue lips quivered faintly as if trying to say, "Help me."

Ben, young, tall and running-back strong, overshadowed the diminutive, seventy-five year old oncologist. Before Marshall could open his mouth to start another disoriented sentence, Ben spun him around, grabbed both shoulders firmly and led him, mouth agape, onto a chair in the corner of the room.

"Do not move, Dr. Marshall. I am sorry but you're in my way. This woman is going to die. She is no longer your patient. She is mine."

Ben turned to Sally Boestom, the remaining intern, and said, "Make sure he doesn't move."

"You have no right to barge in here," Marshall screamed, "You, ...you're gonna pay for this and..."

Ben went into trauma mode and tuned out Marshall's ranting. The young woman was critically injured and would die quickly if left alone. She needed no name; wasn't old or young, skinny or fat, pretty or ugly, tall or short, Christian, Jewish, Muslim or atheist. Ben exhibited no emotion. The team had seen this before. Orders would be coming quickly.

Ben turned to his two senior residents, Roy Watson and Bob Feldmar. "Roy, Bob, let's get her on her back and get her head down thirty degrees."

The three flipped the unconscious Hayley onto her back and Watson cranked the table to give the table an additional ten degrees of head down to get more blood from her legs back into circulation. Feldmar unceremoniously pulled Hayley's paper gown off and removed her bra by cutting the bridge between the two cups.

Naked, pale as bone china, cold, clammy to touch and with an abdomen bloated like a woman in her seventh month of pregnancy, Hayley resembled many of the abdominal gun shot and stab wounds presenting to the emergency department. Many died.

"Her belly didn't get distended from fainting," Ben said. "She's bleeding big time." Turning to the nurse, Ben continued directives, "Get to the other side and keep doing blood pressure checks and reporting the numbers." Drummond moved around the table as Ben continued giving orders and asking questions. "Is there an IV setup in the procedure room? We need access now."

Drummond pointed to the corner of the room behind the door where an intravenous stand held a bag of fluids.

"Roy, Bob, get an IV running with Ringer's Lactate in one arm or the other."

The nurse yelled, "Seventy-five over forty, pulse one thirty," as Jesse Tavares rolled a large, red 'crash-cart' into the room loaded with resuscitation equipment.

Watson yelled, "I can get a line in her left elbow crease. Tavares, what do you have?"

Tavares handed Watson a large IV needle from the cart.

"Seventy over forty. Pulse one twenty," yelled Drummond.

Moments later, Watson announced, "Line's in and IV running."

Ben looked quickly into the corner. "Boestom, leave Dr. Marshall and squeeze the IV bag. When the bag is empty, replace it with another bag of Ringer's Lactate. Don't ask, just squeeze and replace bags." Ben eyed the stunned Dr. Marshall and said, "Don't even think about moving."

Ben then looked to Kelly Drummond. "Nurse, we need bags of IV fluids from the cart. Help Dr. Boestom swap bags when this one's done." Ben turned to the other intern. "Tavares, we need a gurney. Then call the OR, clear a room, any room and get a full vascular setup and anesthesia. Tell them we're in the outpatient clinic and we've got a deep stab wound to the abdomen. We'll be rolling the patient into the OR in four to five minutes. Then call the blood bank. We need six units of O-neg blood, stat."

"Seventy over forty. Pulse one twenty," Drummond said, standing ready with another bag of IV fluids, then ran out of the room to help Tavares find a gurney.

"First liter in. Another started," shouted Boestom.

"Keep pumping, Sally," Watson and Ben said in unison.

The gurney arrived and Watson, Feldmar and Ben transferred Hayley as if she had levitated from the table. Boestom moved from the procedure table to the side of the gurney to keep pumping IV fluids.

"Seventy-five over fifty. Pulse one twenty-four."

Tavares returned. "Chief. Got the OR and blood bank working."

"Tavares, dial the OR front desk on your cell phone, leave it on speaker, and give it to me. 251 20 20," Ben shouted, "then get your ass to the elevator bank below the OR. Push the 'up' button and hold the first elevator until we get there. Get everyone off. Don't take shit from anyone. Move."

"Main OR, Peter Nelson," the speaker on the cell phone answered.

"Pete. Ben Hunt here. Listen, don't talk. I have a stab wound to the

abdomen in the 2-West clinic. The patient is bleeding out. We'll be pushing the patient through the front door of the OR in three minutes. I want an OR room cleared, full vascular setup, two scrubs, two circulators and two anesthesiologists. Get them from anywhere. I'll take full responsibility. Three minutes and we're there." Ben looked around the room. "Boestom, can you move onto the gurney and keep pumping the fluids."

"I think so," Boestom said, and the five-foot-tall intern climbed onto the gurney, straddled Hayley's legs and continued to squeeze IV bags of fluids.

"Let's go. Boestom, duck your head at every doorway. Nurse, get a sheet over her."

Exiting the room, Kelly Drummond threw a sheet over Hayley's nakedness.

Watson and Feldmar pushed the gurney through the waiting room and past Hayley's speechless parents. Ben took no note of the man's cry of "Wait, what's happening? Hayley...Hayley."

The gurney sped over the sky bridge, down the hallway into the main corridor leading to the hospital and a bank of elevators below the operating rooms.

As soon as the group cleared into the corridor, Ben bolted ahead. "You guys push. I'll check that Tavares has the elevator secured and then take the stairs up to the OR. The gurney goes directly in."

Ben took off at full speed and reached the elevators to find Jesse Tavares arguing with a group of semi-irate evictees after he had successfully commandeered the elevator.

Ben hollered as he approached. "Everyone back off, this intern is holding the elevator for an emergency. Back off."

As the gurney approached, Ben turned to enter the stairwell next to the elevators, ran up one flight, opened the door and turned left into the OR.

"Pete, where are we?"

"7-North."

"The gurney will be here in fifteen seconds. Get them down there."

Ben ran north, then west and entered OR 7-North. Two anesthesiologists, Bob Fink and Harry Gordon were opening sterile bags of anesthetic equipment. Two nurses were dumping sterile trays of surgical tools onto two large tables. Ben knew both nurses, Polly Sawa and Diane Hopper, both excellent and experienced hands.

Already in scrubs, Ben put on a surgical hat and mask, washed his hands for ten seconds, instead of the usual two minutes, and then quickly backed through the swinging door into the operating room. Diane Hopper, acting as circulating nurse, had his gown and gloves ready.

Each second counted.

The gurney rolled into the room and Sally Boestom jumped off onto the floor, squeezing the IV bag all the while. Watson and Feldmar, still dressed in street clothes, lifted the unconscious patient onto the OR table.

"I don't feel a pulse and she's not responsive, but the EKG shows a rhythm," Bob Fink, the secondary anesthesiologist, shouted.

Ben painted iodine compound onto the still nameless patient's abdomen, threw sterile towels along the sides of her abdomen and placed a large drape over the entire area.

Harry Gordon, the primary anesthesiologist, exclaimed, "Give me a sec; I've got to get her intubated."

Ben and the nurses stopped working for ten seconds. "Done, tube in," Gordon announced. "She's deep and non-responsive. I haven't given her anything yet."

Hayley hadn't moved during the intubation, which confirmed the lack of sufficient oxygen to her brain. As soon as the breathing tube was in place, Bob Feldmar placed a large bore IV into the large vein in her neck and threaded IV tubing down into her heart.

Feldmar announced, "Central line in. IVs running wide open.""

"BP is sixty. Rate one fifty."

Hopper moved the surgical trays next to the OR table as Polly Sawa stepped up on a stool at the foot of the table. Ben, facing Watson across Hayley's abdomen, said, "Scalpel. Stand back. Blood's gonna be everywhere."

Ben made a skin incision from above the patient's belly button to the pubic bone. A second, deeper cut, of the same length opened into the abdomen. Blood, much of it clotted, spewed over the edges of the incision. Ben put direct hand pressure over the bleeding vessels shutting off all blood flow to and from her right leg and pelvis. Using suction, Watson freed the abdomen of blood.

Ben told Hopper, "Diane, keep time as of now. I need to know how long we have the circulation to the leg stopped. I don't think I can safely let go of the artery until we get her medically stable and get some blood in the room."

"Ninety over fifty. I can feel a pulse," shouted Fink. "Rate one ten. We're making progress."

The OR doors opened and Armin Cassetti, Chairman of Surgery entered the room. "Ben, what the hell's going on here? Get me up to speed."

Without looking away from the patient's abdomen, Ben said, "Young woman with probable leukemia. Dr. Marshall put a bone marrow biopsy needle through the right iliac crest into her iliac vessels. She's lost five to six units and should have been dead."

"Need help?"

"Thanks Chief, I think we'll be okay. I suspect Dr. Marshall's out front, screaming and hollering. I had to be a little forceful. You might check on that."

"BP is now ninety-five over sixty," shouted Dr. Gordon. "Pulse ninety-six. She's requiring anesthetic, so she's getting blood flow to her brain again. First unit of blood will be running in twenty seconds."

"You've had pressure on the vessels for eleven minutes, thirty seconds," Hopper announced.

"Bob, I'm going to let go," Ben said, "so we can get a better look. You'll need to be ready to hold pressure on the vessels above and below the injury. Here we go."

Ben released his hand pressure from the vessels as he and Watson got a quick look at the injury. "Bob, pressure now," Ben said.

Watson replaced Hunt's hands in position to compress the vessels and stem the bleeding.

"Ben, she lost another half of unit of blood in that fifteen second look," Fink said, looking at the suction container at the head of the table.

"Seems like the good doctor hath biopsied both the front and back of her right common iliac vein," Ben said. "I can see the exit wound on the front, so an entrance wound must be on the back wall. Get another six units of O-neg blood and two six packs of platelets."

"Here's the plan," Ben said after hesitating for a moment "First, I get the common iliac artery freed and Bob puts a vascular clip on it to stop all the blood flow to the leg. Next, we free up the vein above and below the injury and place tourniquets to stop all blood flow. Then open the vein in the front, suture the entrance wound on the back and close the vein."

Ben paused for a second to see if Dr. Cassetti or anyone had another idea. The room silenced for a moment other than the intermittent whooshing of air from the anesthesiologist's breathing machine.

Cassetti, who had yet to leave the OR, stood on a stool to get a better vantage point, broke the silence and said, "Ben, I agree. Go for it."

Ben quickly looked over the drapes to the anesthesiologists, "I need blood going in as fast as possible. We're likely to lose another couple units in less than five minutes. You guys okay?"

"We're set," Fink said.

Ben looked at Watson and Feldmar. "I'll need both of you suctioning blood until I get control. Ready...Go."

Ben freed the common iliac artery and Feldmar applied a temporary

vascular clip. Next, Ben freed the injured vein, above and below the injury and circled it with elastic tourniquets. Three units of blood were lost in fourteen minutes. Ben opened the injured vein above and below the puncture wound.

“Four-O Prolene....”

Sawa, a step ahead, had already loaded a needle holder with the correct vascular suture and needle and slapped it firmly into Ben's palm.

“...on a RV-One,” Ben said, finishing the sentence.

Ben closed the hole on the back of the vein, then used a fresh suture to close the front. Ben then released the arterial clamp and venous tourniquets. All bleeding had stopped.

Drs. Fink and Gordon, peering over the sheets, uttered in tandem, "Amazing."

Armin Casseti had returned and watched the procedure over the anesthesiologist's shoulder. "Great work, Ben. I don't know that anyone, including yours truly, could have done what you just did. I'll go out and tell Dr. Marshall. He's not happy but I'll try to pull him away from the family and explain things. In my opinion, if you weren't in the hallway outside Marshall's clinic at the time of the Code Blue, she's dead."

"Not just me, Chief," Ben said. "Watson and Feldmar, Tavares and Boestom, Diane and Polly, both gas passers. All needed to be on their game. A one hundred percent team effort."

Everyone in the room stood a little taller.

“Great work, everybody.” Casseti said. “I’m going back to try and calm Marshall.”

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Ben returned to the locker room, showered, changed into fresh scrubs and started towards the surgical waiting area. He stopped in the stairwell to place a call into the OR.

"OR 7-North, Diane Hopper."

"Hey, Diane, this is Ben. What's this patient's name? Never thought to look."

"Hayley Green. You need her record number?"

"Nope, thanks, I've got to find the family."

"Dr. Hunt. Great job today. I mean it," said Hopper.

"Diane, great job on your part and Polly's too. You make me look good. When I walked into the room and saw the two of you, I said to myself, we're going to be all right. I swear."

"Thanks, Dr. Hunt. I'll tell Polly too. Let us know how she does."

"Oh, another thing," said Ben. "When you guys are done, I'd like the whole team to come down to the surgical waiting area. I may need some backup when I talk to Dr. Marshall."

"Sure," Hopper said. "We'll come down when we've cleaned up in here."

Ben continued down two flights of stairs, entering the large surgical waiting area, usually packed during the day but expectedly mostly empty in the early evening. Ben re-approached the familiar receptionist at the surgical information desk. "Joni, where might the Hayley Green family be?" he asked.

"No one with that name on the schedule, Dr. Hunt," said the receptionist, scanning a large printout.

"It was an emergency. Did Dr. Cassetti come down and talk to a family?"

"He did. We put that family in Private Suite #4. There's a note here that you're not to enter until you talk to Dr. Marshall. He had me clear out Suite #6 about half an hour ago. He wasn't very pleasant."

"I would have guessed not," said Ben.

"You're supposed to wait there until he comes and not to see the family. I'll call him to let him know you're here."

"Thanks. Is Dr. Cassetti still around?"

"I don't think so. Let me ask Susan." Joni swiveled to the other

receptionist, whispered something and the receptionist whispered back.

"Dr. Cassetti left five minutes ago," Joni said. "He told Susan to tell you not to lose your cool and that you aren't dealing with a resident. He said you'd know what he's talking about."

Ben entered Private Suite #6. Two couches, three chairs, some end tables and a small sink. A flat screen TV hung on the wall tuned to a children's cartoon. Ben turned off the TV, sat on a couch, put his head back against the wall and closed his eyes.

Dr. Harold Marshall entered the suite minutes later. Ben stood and put his hands behind his back. Ben knew Dr. Marshall but doubted that Marshall knew his name. Marshall didn't normally take note of residents outside of the Department of Oncology.

Dr. Marshall had been in practice at Seattle Med for more than forty-five years and was the pre-eminent medical oncologist in the region for most of his career. Marshall's clinical research into adjuvant therapy for breast cancer was seminal work and still quoted widely. He had been the invited speaker at various meetings around the world and had met with President Obama at a White House dinner honoring national leaders in cancer research.

"Dr. Marshall, I'm Ben Hunt and I just..." Ben started.

Marshall didn't hesitate a second to interrupt. He came within an arm's length of Ben and pointed a wagging finger at Ben's face. "Who the hell do you think you are? You, without cause or justification, took over my patient's care. In my book, that's assault. You had no permission. This is not going to go well for you."

"Dr. Marshall, I don't want to get into a battle with you," Ben said calmly. "First, let me tell you that I believe you to be an outstanding and caring physician, a leader and I respect your contributions to oncology and.."

"I don't give a shit about that, young man," Marshall interrupted again. "You assaulted me and you assaulted my patient. I will have you drummed out of medicine. I swear. Cassetti tried to sweet talk me out of reporting you. I didn't buy a word of his bullshit."

Ben said nothing as his jaw muscles clenched, vice-like, giving his head a slight tremor. He took a deep breath waiting for Marshall to finish his diatribe. "Dr. Marshall, medicine is medicine and surgery is surgery. When your patient sustained a stab wound with a biopsy needle through and through her common iliac vein, she was no longer your patient. She was mine. I did what I had to do to save her life. I am glad to discuss this at length, but you may feel that it would be my views against yours. Right now, I believe that I need to talk to this patient's family and get them squared away. We still don't know how she might do and what kind of recovery she'll make, particularly neurologically."

"She would have been fine if you had left her alone, as I demanded. She had merely fainted."

Ben heard a soft knock on the door and turned to see Watson and Feldmar through the tinted window. "I have asked my surgical team, anesthesia and nurses to come down and talk to you. I have not prepped them in any way. I would appreciate it if you'd talk to them while I talk to the family."

Ben turned away from Marshall and opened the door. Roy Watson, Bob Feldmar, Polly Sawa, Diane Hopper, and Bob Fink entered.

"Dr. Marshall, this is Roy Watson and Bob Feldmar, my senior surgical residents and assistants in surgery, Polly Sawa and Diane Hopper, the surgical nurses, and Bob Fink from anesthesia." Ben then left to find Hayley Green's family.

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Dr. Fink spoke first. "Hello, Dr. Marshall. You may remember me. You took care of my mother, Helen Fink for ovarian cancer a few years ago. I want to thank you again for all you did."

Fink hesitated. Marshall had not acknowledged a single word Fink had said and continued glaring at the door through which Ben just exited.

Fink waited for Dr. Marshall to turn his attention back to the team of doctors in the room before continuing, "Dr. Marshall, what Dr. Hunt just accomplished is one of the most incredible surgical exercises that I have ever seen. Your patient was, in my view, as close to clinically dead as one could be when she arrived in the OR. We intubated her without an anesthetic. She received no sedation of any kind for over five minutes corroborating my statement that her brain was not perfusing. I think

that Dr. Feldmar and Watson can fill you in on the surgical aspects of what Dr. Hunt found and did."

Ten minutes later, the surgical team left the consultation suite. Dr. Marshall slumped in a chair, beaten and wrong.