What flows out from behind the rock, what opens its mouth in the water and rises . . .

I need sleep, I told myself. I need to get it while I can.

My brother as a boy, standing on the rock, intent on the task, mayflies starring the surface of the still lake . . .

Go to sleep. They're going to call you soon. Close your eyes.

Then the pager, loud on my hip as I lay with the lights out. "This is Dr. Huyler. I was paged?"

"I need transfer orders for Mr. Griego. The plastic surgeons want to move him to the floor."

"All right. I'll be there in a minute."

I kept lying on the couch, staring at the ceiling, gathering myself. I didn't want to see Griego again, to go into his room and ask him how he was doing, to watch him nod and point. He could wait, but I wanted to be rid of him. So I got up, ran my fingers through my tangled hair, walked the short distance to his room.

He looked up at me. His new chin was pink. The leeches, their work done, lay bloated and dead in a bottle of pure alcohol. He couldn't speak, he couldn't smile or frown, but he watched me intently. The wounds on his face looked clean and terrible, and I thought of how he would scare his little daughter, whose picture rested on the nightstand.

"Bueno," I said finally. "You can go."

THE PRISONER

"WHY DON'T WE PLAN ON withdrawing support tonight," the attending said, to settle the matter. "We'll give his sister time to get here." The sister was already driving, the family said, south from Colorado. She understood the urgency. The rest of the family had gathered for days, shuffling in to talk to him as he lay there on the ventilator. The guards were sick of them, bored, reading magazines in his room. It was protocol; all prisoners needed to be watched.

During the last few days of his life Mr. Garcia was watched all the time: by his family, by the prison guards, by nurses, by interns, and by me, the resident. He always looked the same: covered with tattoos, his arms pockmarked by years of shooting heroin and cocaine, his eyes half-open to the ceiling, kept alive by the ventilator. On his chest, stretching from nipple to nipple, was the green figure of the Virgin Mary, her hands pressed together in prayer.

He was in for murder. Forty-five years old, with an abscess in his heart from shooting contaminated drugs into his veins, it had finally come to this: my shift, my night on call, my job to turn him off.

The attending tried to be gentle with the family. "There's really nothing more we can do," he said, predictably. "His heart is not working any more, and he has abscesses all over

his body, even in his brain." At some level they must have understood that their brother, father, and son was a drug addict and a murderer dying a slow death by his own hand, but that was not how they spoke of him. They talked reverently of the good life he had led, how he had suffered, how it was time to let him go, where he could rest in peace with the Lord. His daughters, young women with small children, cried, his mother cried, his brother shook his head, and the small waiting room outside the ICU filled with the sound of them long after we gravely shook their hands and left.

That night, tired as I was, their glib revision of him infuriated me. Their grief was real, but the words they used to describe it were not. It was a eulogy for another life, another man, a fiction, a wish. My anger was disproportionate, unseemly, I knew; but I was tired, I told myself, of staying up all night with bleeding alcoholics, overdosing drug addicts, murderers, and gang members, and I was tired of families who remade history for the convenience of personal loss. I was sick of giving my sleep and my thoughts to them.

But I did not want to turn Mr. Garcia off. The sister arrived, and the time came. The family crowded into the room, paying their last respects with Father Rivera, whose absolution I could hear as I waited outside. The attendings and residents from the day shift had gone. I had been left to do the job alone.

I leaned against the wall. My hands were shaking and weak where they rested on my thighs. I felt breathless and lightheaded. By morning the man had to be dead. Otherwise there

would be questions about costs and staffing, questions about me. It had to be done, but I put it off anyway. I checked on the other patients, called the laboratory, called my girlfriend. I would do it. He was hopeless, it was better for him, I wouldn't want that for myself, it wouldn't make any difference in the long run, he was expensive. Still an hour passed. Finally his nurse came up to me.

"I've drawn up two hundred milligrams of morphine," she said. "The family is in the waiting room."

The guard watched with interest. "How long do you think he'll last?" he asked.

"I don't know," I said. "It's possible that he'll live for quite a while."

He was unchanged, lying still in the bed, exactly as he had been for the past weeks when we had been trying to save him. "Should I start the morphine?" the nurse asked.

I nodded. "Give him a fifty milligram bolus."

She pushed the syringe, and nothing seemed to happen. We waited a few minutes. The guard was rapt. "OK," I said. "Extubate him." She disconnected the ventilator, hit the button to silence the automatic alarms, and pulled the tube out of his mouth.

At first nothing happened. Then faintly he began to gasp for breath, his mouth forming a dark circle. "Give him some more," I said, and she did. The gasping slowed, eased by the morphine, and finally stopped. His heart was a different matter. It kept going, in strong, regular blips on the monitor, on and on for minutes until finally it too began to weaken.

Strange rhythms appeared, a whole language written in the jumping green light: sinus bradycardia, idioventricular bradycardia, ventricular tachycardia, sinus bradycardia again, ventricular fibrillation, then astonishingly normal beats, more fibrillation, and finally the flat, faintly undulating line, unreeling for long minutes as we watched him.

His family met me at the door.

"He didn't suffer at all," I said. "It was very peaceful."

They agreed with me.

NUMBERS AND VOICES

HIS PAGER TOOK BOTH NUMBERS and voices. It was a little black card on his hip, with a green diode and a screen. It weighed almost nothing, and could vibrate or ring. He wore it all the time. The world entered him through it.

"Whatcha got, slick?" he would say into the phone, and we'd tell him, and he would get into his truck and come in. His voice was the army and west Texas, a cracker from a rough town, sly, amused, full of dark things—surgery, for example, and the blues.

Dr. Blake was the head of the trauma service. He was a short, thin man, with slick hair and a razor part. He looked remarkably like Lee Harvey Oswald. I couldn't have guessed his age. When he wasn't working he would run for miles, ten, fifteen, twenty, in the hills outside the city. He was tireless.

He lived alone, in a small apartment. No one seemed to know much about his past life, and he didn't share, but one night I saw him in a bar. The band was playing behind me as I sipped my beer. When the lead guitarist started the solo, I turned around to watch, and it was him. I was sure of it. Over the glitter of bottles and the crowd, he stood on the edge of the stage with his eyes closed, his head thrown back. His fingers shivered on the neck, and he was good, he was passionate. I knew right away as I watched him that it was something true, that he loved it.

alert eyes peppering us with questions and stories. He loved his work, you could see it, he loved the razor in his hand and the heat, the faint coppery odor of blood.

He'd just read an article in *The New Yorker*, and it had drawn him in. The pilots were in their seats, he said, with nuclear bombs armed and ready. The Pakistanis, poised for the Indian cities, Delhi and Calcutta. Fire like you've never seen. One telephone call.

"I am become death, destroyer of worlds," Dr. Whistler said, stretching. "Source?"

"J. Robert Oppenheimer," I replied, "after the Trinity site test."

"Right," he snapped. "And his source?"

"The *Bhagavad Gita*."

"Right again. And which god was he quoting?"

"Shiva," I replied. "He was quoting Shiva."

Dr. Whistler looked at me for a long moment, then nodded. He seemed lost in thought, as if for an instant he'd forgotten where he was. But then he was back.

"Good," he said, looking down to where Mr. Stone's skinned feet lay waiting. "This should do it."

THE SECRET

"YOU HAVE TO COME AND SEE THIS," the nurse said breathlessly, interrupting rounds. "It's the grossest thing I ever saw."

It was early on Sunday morning, and the trauma team had been shuffling around the surgical ICU for an hour, trying to impose some order on the carnage of the night before. It was a blur for me by then, a stream of wounds and bodies. There had been only two surgery residents and me, and we had been going for twenty-four hours straight, trying not to miss something big. I felt jumpy, distant from the world, and the bright white coats and accusing fingers of the surgery attendings seemed like the fixtures of dreams. I heard myself answering questions, searching my note-cards, I felt numbers emerging from my mouth, but I wasn't really there. I could smell the odor of my body rising from my scrubs, and my feet felt loose and wet in my running shoes. But she got my attention anyway. She got everybody's. The grossest thing she ever saw—

Her patient lay in his darkened room, heavily sedated on the ventilator. After two weeks he was getting better, and for the past few days we had virtually ignored him. A young man, drunk, in his car, the same story again, coming slowly back into the world.

"Watch," the nurse said, lifting the flashlight from the

bedclothes. We gathered around the bed. With her left hand she moved the clear plastic ventilator tube to the side of the man's mouth, then carefully inserted her fingers between his front teeth and spread them apart. His jaw opened slackly, and she shone the light directly into his mouth.

His mouth was like a little pink cave. Inside were dozens of tiny white worms. As we watched, they began to move, to retreat into the darker recesses, away from the light, and in a few seconds they were gone. "Oh my God," one of the residents said. "They're maggots. He's got maggots in his mouth."

The room erupted. We were horrified, but also excited, exhaustion washed away. He was alive, and we made her do it again. We took turns, switching off the light for a minute or two until the maggots came back, then illuminating them, transfixed by their retreat into the dark.

"What we need to do," Dr. Whistler said, chortling, "is get a piece of bacon on a string and leave it in his mouth for a while. I've seen this before. This is why we don't like flies in the ICU."

One of the medical students went down to the cafeteria for the bacon, and before long the news had spread throughout the hospital. Nurses and medical students and residents from other services began filing through his room until finally the charge nurse put a stop to it. "This isn't a sideshow," she said, to settle the matter.

Tied to a string, raw and shiny with fat, the bacon worked beautifully. The nurse pulled it out every half hour or so, and

each time it was alive with maggots. She wiped them off, dropped them into a bottle of alcohol, then replaced the bacon. "It's like fishing," she said, chuckling, shaking her head.

A month or so later, in the trauma clinic, I saw him again, stiff, thin, walking slowly with his cane. The nurse called his name, and he came slowly forward to the desk. We sat a few feet away, and as he stood writing his name on the forms, weak and alive, we whispered.

"That's the maggot man. Remember him? He's right over there."

No one had told him a thing.

do two lines of coke. Every morning. How when she'd had a really bad day she'd go to the farmers' market and buy a live chicken. She'd take it home and light candles and put on music and cut the chicken's throat with a straight razor."

Esmeralda's going to die tonight.

But the months passed, and Ruth was well and truly gone. No one knew where. Probably she left the city, drifted to the raves of New Orleans or LA, where no one would know who she was. But I'm not certain, and half of me expects to see her again, there in the doorway as I stand by the gurney.

"What do you have for me, Dr. Huyler?" she'll ask, full of prayers and cocaine, smelling like candles. And I'll answer her.

"Gunshot wound," I'll say. "To the head."

POWER

I'M HARD ON HIM, I don't give him any time to plan. I ha him on the gurney, and his eyes are flicking back and fort He wants escape, to rise and flee, but he can't. So he star to cry, and I go right through his tears, purposeful, hea down.

"You need it, Mr. Hyde. We're going to put it in whethe you like it or not."

"I want my wife!" he cries. "I want my wife."

He is alert from the car; he remembers the crash exactly.

"Can't you do something else? Isn't there another way?"

I say nothing. I'm thinking, there's no other way because this is serious. There is no time to negotiate. It's going in because I think you have a ruptured spleen, and afterwards I'm going to stick a needle in that smooth white belly of yours and see. But first we have to put it in, and before that I have to check the prostate.

"Don't put it in, don't put it in, don't do it. Mary! Mary!"

I just nod to the techs, and they grab his legs and spread them apart. "I was abused as a child. I was raped. You don't understand."

I suspected it, and I pause, but it doesn't matter if I understand. You're fifty years old and I think you have a ruptured spleen, and you're going to die unless we know.

"I'm sorry, Mr. Hyde."

"It's not the needle," he gasps to the nurse, "the needle doesn't bother me—"

But I put two gloves on my right hand, lubricate the index finger, and go inside him before he can think.

"Oh, oh, oh!" he cries, but I've done it and peeled off the glove, and it looks OK.

"All right," I say to the techs. They are strong men.

"I don't care if I'm bleeding inside. I don't care. Mary, Mary, no, don't let them, Mary—"

And then he stops speaking, he just goes somewhere else, he vanishes. His face is great distance. The tech eases the catheter in deep, smooth and quiet, until the urine flows out like gold, and the bladder drains until it's out of the way and safe from the needle.

I wash his belly with iodine, quickly. Then I pop the needle in, just below the belly button, and—Oh, look at this. Do you see what I have in my hand? The syringe is full of blood; your belly is full of blood, I was right, I have a nose for it.

"Mr. Hyde," I say, "You need an operation. We're going to take you upstairs to the operating room right now."

He nods, he sounds like a little boy, his face creases up again, he opens his eyes.

"Do what you want to," he says.

Discharged, five days later, in good condition.

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THE VIRGIN

SHE WAS SO BEAUTIFUL she caught me. I entered the room looking down at her chart, so when I raised my eyes I had no warning, no time to prepare myself. She was fifteen, and I was exactly twice her age. But I couldn't help it. She was oracular, the kind that leaps from the crowd. And she was used to it, I could tell, but she was shy anyway, and smiled a small embarrassed smile when she saw me.

A young man stood next to the examination table. He was older, in his early twenties, and he looked rough. He wore a black Raiders shirt, baggy jeans, basketball shoes, a buzz cut, the endless uniform of the gangs, and he stood there staring with his dark eyes—birddogging me, as he would call it. A challenge, the kind that in the city led to trouble.

"Hello," I said, in my mildest voice. "What can I do for you?"

"I'm having this itching." She spoke softly. "It itches real bad."

"Where is it?"

"It's down there," she said, not meeting my eye.

"How long have you had it?"

"For two days. It itches real bad."

"It's OK. You can talk about it."

"I don't know what it is."

"When was your last period?"

She started to blush then, beginning in her cheeks and spreading down to her neck, like water flowing out on a table. She glanced at her boyfriend, then back to me. "Does he have to hear?"

"No," I said, looking directly at him, meeting his eye. "If you want him to leave he will."

His face narrowed, and he turned to her. "Do you want me to go?"

"If it's all right," she said, looking at his feet. "I'm embarrassed."

He nodded, shortly, gave me a look, then stepped past and left the room. "I'll be right outside," he said on the way out. "You yell and I'll be there."

A look of relief passed over her face. "I'm sorry," she said. "He gets wild sometimes."

"He's in a gang, right?" As soon as I said it I regretted it. Too far, I thought. She didn't answer directly.

"He won't let me go anywhere without him," she said. "He's always with me." From the tone of her voice I realized that she was proud that he never left her, that he never let anyone look at her, proud that she was his. So I left it alone.

"When was your last period?"

"I'm late," she said quickly, as if to get through it. "I'm two weeks late. That's really why I came here. I don't want him to know."

"We'll do a pregnancy test. Is there anything else? Have you noticed any discharge?"

"Discharge?"

"Stuff coming out? A bad smell?"

"Well"—she looked suddenly her age, and afraid—"I guess so."

"All right. I'll tell you what we need to do. I need you to pee in this cup, and then I'll come in with the nurse and do a pelvic exam. Have you had one of those before?"

She shook her head slowly. "I don't think so."

"OK. It's not so bad. I'll come back in a few minutes with the nurse and we'll explain it." She nodded, and I left the room. Outside, in the hall, her boyfriend lay sprawled on one of the spare gurneys, staring grimly at the ceiling, his arms crossed behind his head. He didn't look at me, or speak, as I passed him.

A moment later the door opened, and she stepped out, clutching the gown to her body. She came tentatively over to the desk where I sat.

"Um, I don't know who I'm supposed to give this to," she said, blushing again as she handed me the jar. It was warm in my hand, gold, full of urine.

"Thanks. I'll give it to the nurse."

With a start I realized that I hadn't told her where the bathroom was, that she had urinated into the cup in her room, crouching down on the floor.

The nurse and I entered the room a few minutes later. "Anna," I began, sitting down on the stool, "here's what we're going to do." And I showed her the speculum, the light, and the swabs. "It may be a bit uncomfortable, but it shouldn't hurt. If it hurts just tell me and I'll stop."

There's no avoiding the power of that moment, what floats

out of you like a secret. You just don't acknowledge it. You banish it with an act of will. You are breezy, conversational. She's fifteen years old, and she's crying, and the nurse is holding her hand like her mother, but she's beautiful anyway, and you feel dark, ashamed, you do not like what you see in yourself. By then you're inside, you open the speculum, and it looks fine, and then you flick in the swabs and you're done.

"Everything looks normal, Anna. There's just one more thing." I stood up close, between her ankles, feeling her uterus and ovaries. They were firm, like knots, and small, as they should have been. "There, Anna. We're done. You did great. Everything looks fine."

And so she sat up, wiping her eyes with the back of her hand. "I don't want my mom to find out," she said. "Don't tell my mom."

"Don't worry, Anna. We won't tell your mom. No one will know." And with that I left the room, carried the test tube to the lab in the back, wiped the swab on the microscope slide, adjusted the lenses, and they came swimming up. Cells, normal epithelium, and what I suspected: clear little tendrils, with buds. Yeast.

"Anna," I said, coming back into the room. "Your pregnancy test was negative, but you have a yeast infection. I'll give you some medicine for it and it should go away in a few days." Her face softened, she opened her eyes and smiled, looking right at me.

"Thank you," she said, and she looked so happy that I felt old. As she stood in the hallway with her boyfriend, putting

on her coat, smiling delightedly at him as he tapped his foot and scowled, I thought of what I'd also seen on the slide. Dead, like calligraphy, like dozens of little sticks twirling slowly beneath the lens. Sperm.

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SUGAR

THE LITTLE GIRL WAS RUNNING around the room, screeching happily, and when she saw me she hid under the bed. I could see her peering at me from between the legs of the gurney as I stood with her chart in my hand. Her father shook his head, grinned, and looked at his wife. "I told you there's nothing wrong with her."

I looked down at the chart. On it the triage nurse had written, in bold black letters, "Two-year-old acting weird."

"I'm Dr. Huyler," I said. "What can I do for you?"

"Nothing," the man said, and his wife hushed him.

"She's not acting right," she said. She wore an African print dress, and I found myself staring at the intricate pattern of swirling reds and browns. Her hair was cornrowed, a bead at the end of each strand.

"They're Medicaid," the triage nurse had whispered pointedly in my ear. The implication was clear: they wanted something for free. Tylenol, a work excuse. But it was ten o'clock on a Friday night.

"What has she been doing?"

"It's kind of hard to explain. She just isn't acting herself. I noticed it right away. But she's been fine ever since we got here."

"Can you be more specific?" I could feel myself getting

impatient. There were half a dozen patients waiting, the ER was full. I wondered why they hadn't called their regular pediatrician.

"Well," she said, thinking. "You know how people look when they're staring into a mirror? Kind of blank?" I nodded. "She's like that. Only there isn't a mirror. There's nothing there."

The child's vital signs were completely normal. Her mother coaxed her out from under the bed and held her wriggling in her arms as I listened to her heart and lungs, looked into her ears.

I'm uneasy with children. I must have been a cold, white form to her, large, bending down with my stethoscope and light. I could see nothing wrong with her. She looked impeccably cared for, without any sign of the abuse I had been vaguely and secretly considering. I always do. It's been drummed into us.

"Does she have any medical problems at all?"

"No," the father said, anticipating my questions. "She's always been healthy. She's had all her shots. She's growing like she should, and she can talk a little, only now she won't 'cause she's shy." He wagged a finger, and she giggled, hiding her face with the bottle her mother had given her.

"Has she had any recent stress, something that might have upset her?" They looked at each other.

"I don't think so."

"Is there any history of seizures in the family?"

Her mother thought for a while. "I think my brother might

have seizures," she said finally, "but I haven't seen him in a long time."

"And right now she's acting normally?"

"She's fine," her father said to his wife. "Come on, let's go. If she does it again we'll come back. It's past her bedtime."

I considered what I'd heard. A vague history of blank spells; it could mean anything, from a rare type of seizure to the vagaries of the two-year-old mind. She could see her pediatrician on Monday, I thought. She was a completely normal child.

On my way out the door, though, I turned around. "Is there any chance she might have gotten into someone's medications? Does anyone in the family take medications regularly?"

"Well, she stays with my mother when we're at work. She takes medicines."

"What kind of medicine does she take?"

"I'm not sure. Something for her blood pressure and a sugar pill."

Oral hypoglycemics—sugar pills—are among the most dangerous of overdoses. They can drop blood sugar profoundly, cause brain damage, seizures, coma. Designed for adult diabetics, they are long-lasting, and one pill could kill a small child, even many hours later.

"Let's check her blood sugar," I said, "just to be sure. And please call your mother, find out exactly what she takes."

From the doctor's station I could hear the child shrieking

as the nurse drew her blood. Her mother spoke into the phone a few feet away.

"My mother takes glipizide," she said, handing me a piece of paper where she'd written it down. "She ran out of her blood pressure medicine two weeks ago."

A sugar pill.

The nurse came out of the room with a syringe full of blood. The child's mother and I watched as she eased a single drop from the tip of the needle onto the portable blood-sugar machine she held in her hand. It digested the blood for a few seconds, then displayed the number on the screen. Forty-two.

"Is that low?" her mother asked.

"It's about half of what it should be," I replied, stunned. "She must have taken one of your mother's sugar pills."

"My mother is legally blind. She probably dropped one and didn't notice."

"We need to keep her in the hospital for at least a day and give her sugar intravenously." I said it quietly, half to myself.

"Will she be all right?" She was afraid, staring at me.

"She'll be fine." And suddenly I began to shake. "But I'm very glad you brought her in. You may have saved her life."

"My husband wanted to put her to bed," she said softly, looking off down the hall.

It was suddenly clear. Sometime that afternoon the girl had taken the pill, and by the time her parents came home she was showing the effects of low blood sugar: the staring spells, the blank look.

"What did you do when you saw she was acting weird?"

"We gave her a bottle," the father said, standing with us now. "And then we gave her a sucker."

They had given her sugar. When she arrived in the ER her blood sugar had risen enough for her to look and act herself, but it wouldn't have lasted long. Later that night, when the whole family was asleep, it would have fallen again, and she might never have woken up.

As I watched the girl skip and jump around us, the pain of the needle forgotten already, I felt sick, cold and damp, terrified by what I had almost missed. One question, an afterthought. That was all it had been.

From time to time I think about her. I imagine her playing in parks, jumping on the couch, shrieking in the bathtub. I imagine her head teeming with small thoughts, and the motion of her hands, her eyes, alive in the world, going out into it, entering it, decade after decade ahead.

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