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An excerpt from
The Corpse Bloom

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with

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Chapter One

Early Exit

The call that changed Dr. Bradley Baker's future came from his past. In the first few seconds of his rise from sleep, Brad was a child again, listening to the voice of the friend he'd drifted so far from.

“Brad? It's Sam. They found a kidney for me—almost a perfect match. Can you come?”

No mistakes...no mistakes...

Brad's mantra played in his head as he pushed his BMW up to ninety through the empty lanes of Storrow Drive. The two-word dictum normally began when he stepped into the operating room, but this morning had already veered far from Brad's plan for the day. He'd expected to walk onto a jet, not race into surgery. Everything changed with Sam's two a.m. call.

Now childhood memories of his friend blurred with the white lights of the Boston skyline whizzing by. Scouting forest trails, racing through cornfields, diving into the churning waters of the cold Maine sea—they all came back in a flash, like the flickering frames of a movie of their days spent exploring the woods and coast near the Baker family farm.

Brad saw the red light too late and hit the brakes. He turned the wheel to correct his skid over a patch of ice. With the car's nose poking into the empty intersection, he waited for his pulse to settle. Glancing to either side, he punched the pedal and ran the light. Time was an enemy now. Every second lost increased the chance that the waiting kidney would fail his friend.

Five minutes later, Brad screeched to a stop in his parking spot at Boston General Hospital. He slammed the door, sprinted inside, and weaved past the residents and attendings making their early morning rounds in the quiet halls. He changed into scrubs in the surgeons' locker room and put on a mask.

"How we looking, Bonnie?" Brad asked his circulating nurse when he walked into OR 19, noting the lock of hair peeking out of Bonnie's surgical cap that revealed the color of her latest dye job (blond). He glanced at the patient lying on the table in the center of the sterile white room.

Sam Kirby was fully anesthetized and lying on his back, his body draped in sheets the same robin's-egg blue as the scrubs worn by the surgical team.

"*We're* looking good, Doctor," Bonnie replied. "I only hope my kids are when they walk out the door. The last time Tom got them off to school, Kelly came home with her skirt inside out, and Robbie had two different shoes on his feet."

"At least you got this crew in order," Brad said, glad to see the familiar faces of his team. "Thanks for rounding up the usual suspects."

"With one addition," Bonnie said as the door behind them swung open. Brad

turned to see a rail-thin kid wiping at his steamy glasses with the sleeve of his scrubs. Bonnie walked over and pinched the bridge of the young man's mask tight over his nose.

"That should help cut the fog," she said. "Dr. Baker, this is Ryan Turner. He's a fourth-year med student. I'm not quite sure how he found his way into our OR this morning."

Brad nodded at Ryan, thankful that his own mask concealed his frown. He had approved Ryan's attendance at Brad's next living-donor transplant, an operation that would have been a lot less hurried than the cadaver transplant he had rushed in to perform today. Someone in administration must have screwed up and called Ryan to come in.

While Brad relished his role in training the next generation of healers, this morning he planned on putting his full focus on his friend. But his next thought was about the nature of that man and how Sam would have responded to the earnest young face turned toward Brad now.

"No matter," Brad said, crinkling his eyes so the kid could infer Brad's smile. "I assume you did your homework this morning?"

"Homework?" asked Ryan, his eyes widening.

"Did you do a preoperative evaluation of our patient?"

"Oh, yes. Of course."

"Tell me about the lab values."

“His hemoglobin was low, and his potassium was high.”

“Why?”

“His failing kidneys are responsible for both. They’re no longer able to remove potassium or make the erythropoietin that produces red blood cells.”

“Right on both counts. We’ve got two units of blood cross-matched and ready to go to provide the latter when the clamps come off at the end of this procedure. Now let me introduce you to the crew,” Brad said, turning to the staff around him. “You’re in luck, Ryan. You’ve got the A-team here today.

“That long drink of water is our surgical tech, Logan Carter,” Brad said, pointing to the young man at the foot of the operating table. “And the guy standing over our patient who looks like Tom Brady is Miles Riker. Miles only has about six months left in his fellowship before he heads up a transplant team of his own.”

“Five months,” Miles said. “And you know I hate football.”

“Heresy,” Brad said, walking around the OR’s perimeter for a quick survey of the preparations being made before moving to the drape separating the sterile operating field from the upper portion of his patient’s body.

The rest of the room was in motion as well. Logan was laying out scalpels, hemostats, retractors, and clamps on the instrument table. Nurses were connecting suction tubes to pumps and aspirators. Miles hovered over Sam’s abdomen, positioning the transparent drape that would maintain the sterile field, and the anesthesiologist pivoted back and forth as she scanned her screens.

“Dr. Eva Patel here just put our patient under,” Brad said to Ryan, giving a nod to the woman almost entirely hidden by the bulk of her anesthesia machine. “How’s he doing, Dr. Patel?”

“A few PVCs, Doctor, but he’s stable.”

Brad turned to Ryan. “What did she just tell me?”

“Uh, premature ventricular contractions?”

“You asking or telling?”

“Telling, Doctor.”

“Good, yes. But his heart couldn’t be in better hands,” Brad said, tipping his head at Eva again. “Did you notice anything unusual about the way she answered me?”

“Not really...”

“She never looked up from her screen. Why?”

“She was busy monitoring the patient, I guess.”

“No guessing about it. We call it *practicing* surgery because our goal is the orderly repetition of tasks in exactly the same way, from first slice to final stitch. To do that, the patient must remain stable. Now, tell me what an anesthesiologist has to do to maintain that condition.”

“Control the drugs that keep the patient anesthetized,” Ryan answered.

“*Powerful* drugs,” Brad said, “an entire cocktail of sedatives, opioids, hypnotics, muscle relaxants, and paralytics. The only way to do it without killing the patient is to

track every single bodily function those drugs control. Dr. Patel will monitor our patient's heart rate, blood pressure, hemoglobin levels, pulmonary function, and brain activity. She'll tweak whatever meds are needed to keep his vital signs stable. It's a delicate dance between pharmacology and physiology that lets us do the work we're here for—"

"You mean the plumbing," Miles broke in.

"Why don't you explain that to Ryan," Brad said.

"The main focus of this procedure," Miles said, "are the anastomoses we'll perform to connect the pipes that put the new kidney in place. Once we suture the donor's renal artery to the recipient's external iliac artery, and the donor's renal vein to the recipient's external iliac vein, we'll connect the ureter to the recipient's bladder, and our patient here should be good to go."

"Literally," Brad said, "although a cadaveric kidney like the one we'll be using today can take longer than a living donor's organ to output urine."

Another swing of the OR's door announced the entrance of the team's last member, the only one whose scrubs were not a shade of blue. The woman adjusted a bright pink surgical cap festooned with Disney cartoon characters.

"Ryan Turner," Brad said, "may I introduce Dr. Jill Delaney?"

"Welcome," the attending nephrologist replied, giving Ryan a nod.

"Don't let those cartoons on her head fool you," Brad said. "The brain underneath them holds just about everything you need to know about the organ we're

transplanting today.”

Brad took a moment to survey his crew, murmured a quick “Follow me” to Ryan, then led him out of OR 19 to the substerile room to scrub in. Brad usually used this three-minute period to clear his mind as he prepared for the hours of concentrated focus required ahead. But with an eager med student shadowing him, this was the best time to give Ryan an overview of the nature of his team.

“Everyone in that room we just left has a critical role,” Brad told him, as he began to wash his hands and forearms in the surgical scrub sink. “A good surgical team operates in the same manner as the body it serves. Like the organs within it, each team member is responsible for a particular task. I’ve worked with this crew for a long time. I trust each one of them to do the job they trained for. Staying focused on their tasks while keeping tuned to the entire team is the best way to reduce the chance for errors *and* increase the odds for our patient’s best outcome.”

“But you’re the one who orchestrates it all,” said Ryan.

“That’s a good word for it,” answered Brad, as he continued to scrub.

“There’re are a lot of moving parts that need to work in complete harmony. But the legal view of my role isn’t conductor, it’s captain of the ship. I’m the one ultimately responsible for my team’s actions and our patient’s care.”

He finished his scrub and led Ryan back into the operating room, where Logan was waiting to gown and glove him. When Brad was fully attired, he addressed his staff. “Let’s do a quick time-out,” he said as the team turned their attention to him.

“We’re here this morning to perform a right iliac fossa cadaveric renal transplant on Reverend Sam Kirby to address his end-stage renal disease. Are we all on the same page?”

Brad waited until all team members voiced their assent, then turned to Ryan.

“You get a different question. Diabetes is the leading cause of renal failure. What are the next two major causes?”

“High blood pressure, and...”

Brad and the team waited. Dr. Delaney finally decided to help the kid out.

“Glomerulonephritis,” she said.

“I told you about that brain,” Brad said, wagging a gloved finger at Jill. “You’ve got one more shot, Ryan. Can you describe that disease?”

“Inflammation of the glomeruli,” Ryan said immediately, “the tiny filters in the kidney that remove waste products from the blood.”

“Excellent,” Brad responded. “You made the cut. Speaking of which,” he said as he approached the table where Miles and Logan now waited, “shall we begin?”

* * *

It went like clockwork. The mood in the room stayed focused but relaxed; Miles assisted while Brad took the lead with the scalpel. Even Ryan seemed to tap into the room’s flow, asking questions only in those short gaps that came between one part of the procedure and the next. When Miles removed the clamps from Brad’s final anastomoses, the connection between the ureter and bladder proved as leak-free as

the arterial and venous anastomoses that had preceded it.

“Take a look at that running suture,” Miles said to Ryan with a wave at Brad’s handiwork. “You won’t find a better-looking one in your surgical textbook.” Then Eva announced the only hiccup to their work so far.

“More PVCs, Doctor,” she said.

Brad and Miles paused with their gloved hands in midair and traded a long glance. The silence in the room stretched for the next few seconds while the team waited. A moment later, a single word from the anesthesiologist put the world right again.

“Stable,” Eva said.

The performance of the newly transplanted kidney was the day’s best surprise. The organ pinked up almost immediately. Brad and Miles shared a thumbs-up when it did, agreeing that the quick way it had perfused meant there was a good chance it would start making urine soon.

In just over three hours, the job was almost done. “Don’t you have a plane to catch?” Miles asked Brad. “Logan can assist while I close.”

“I wasn’t counting on an early exit,” Brad said. “I didn’t think there was any way I was going to make that flight. I already called Catherine to let her know I’d be delayed a day.”

“She must have loved that,” Miles said. “But I guess she’ll still have the thrill of listening to you deliver your paper to the other type A docs at your conference.”

“That’s not quite the scene I shared when I pitched a Cancún vacation to her and Grace.”

“Grace probably didn’t need any selling. She’s tall enough to pass for eighteen.”

“Why does that matter?” Brad asked.

Miles shook his head as he held out his hand to accept a pair of forceps from Logan. “That’s the drinking age down there, Dad.”

Brad’s eyes flicked to the clock on the wall just as Bonnie drew close to his side.

“You may want to take him up on that offer, Doctor,” she said, dropping her voice to a whisper. “That nurse who ducked in a few minutes ago told me your wife called.” Brad waited for Bonnie to say more, but the look in her eyes told him this was a conversation best held outside.

She continued the instant the OR door closed behind them. “First, Grace is okay.”

Brad froze.

“She was horseback riding on the resort’s beach,” Bonnie said quickly. “She took a fall and hit her head but—”

“Tell me she was wearing a helmet.”

“She was, but she was knocked out—”

“For how long?”

“I’m not sure. Catherine was pretty upset. She said Grace is conscious now, but

then the call was dropped. I'm guessing cell reception may not be the best in Mexico."

Brad's eyes raced over the bright white tiles on the floor, as if the answers he sought lay somewhere between the grid of lines at his feet. "Thanks," he said over his shoulder as he hurried to the locker room.

He called Catherine on his cell, hit the speaker icon, and placed the phone on the bench in front of his locker while he changed. A moment later, he heard his wife's voice-mail message play and cursed softly.

He snatched up the phone and jammed it in his pocket as he left, running straight into the orderly mopping the hall. They traded apologies as Brad made for the elevator. His mind started moving as fast as his legs as he searched for a way he could skip going home and head straight to the airport.

In front of the elevator, as he eyed the line of lights over the door, Brad had the nagging feeling that he'd left something undone. Then the face of the woman in the surgical waiting room he'd neglected to check in with flashed in his mind. He shook his head and turned around to go tell Sam Kirby's wife, Faye, just how bright her husband's future looked.

He flew back down the hall, careful to steer clear of the orderly, oblivious to the announcement that crackled over the hospital's ancient PA. But the second time that tinny voice blared, Brad heard its message loud and clear:

"Code blue, OR nineteen."