

Grace

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1. Happy Birthday

Grace finished her dance with little enthusiasm. Baring herself in front of a small group of lonely men was not the profession she had dreamed of as a child. Many of these men were without jobs or wives to go home to. Others had wives in this or another town. All lusted after her body and the bodies of the other dancers. Grace's G-string was adorned with a smattering of dollar bills inserted by patrons wanting to see more or touch more, but this club was not going to be closed again. No touching here, at least not on the premises.

After the dance, Grace disappeared through the curtain into the filthy back room, piled with props and personal belongings, many of which would never be used. She pulled the bills off the string and folded them into her little purse. Time to work the floor. Maybe a pick-me up first, she thought. With shaky hands, Grace reopened her purse and reached inside for a vial, but none was there. Benny must have taken the last of her stash.

Grace sighed, closed her purse again, straightened her posture, passed her fingers through her short black hair, and started her walk around the side of the stage onto the darkened floor. The blinding lights visible from the stage were not obvious from the floor. The spotlights left shadows across the current dancer that moved in abstract patterns across the contorting flesh. In another venue, this might be artistic.

There were even fewer people here than Grace had expected. Aging men ogled the current dancer. Chrissy claimed she was over 18, but Grace doubted it. Her ID was probably faked. Nevertheless, when vying for lecherous eyes, Grace was no match for Chrissy. Grace's face was not unpleasing but also not pretty. Grace's body was tall and trim, but not voluptuous. Chrissy was everything that Grace was not.

Grace walked twice through the narrow paths between the tables. No man offered to buy her a drink. No man wanted a lap dance. Chrissy was not even done with her dance by the time Grace arrived at the opening to the back room. Before disappearing through the curtain she turned to look at the spectators and staff. No one would care if she left. No one would care if she died.

Sighing again, Grace pushed back the fabric covering the opening and stepped into the back room. At her dressing area, she stacked her heavy makeup in the little box reserved for her. Other girls would share this table. With cold cream and a little water, the makeup was gone and the plain Grace stared back at her in the mirror. Straight black hair, tired red eyes, thin lips which she often exaggerated with lipstick, and a small strawberry mark on her left cheek.

“Have a good night,” said Fred, the late night manager. “And Happy Birthday!”

Grace smiled, “Thanks”

“How old are you?” asked Fred.

“Twenty,” said Grace. “Old enough to know better?”

Fred shrugged. Grace assumed he did not understand the question. He walked away without another word.

Grace counted the bills in her purse, \$35. Benny would not be happy about this. He was not the best boyfriend she had dated, and maybe he was the worst. Why did she stay with him? Because she had nowhere else to go. This morning, she had imagined a magical day. Good people at work would tip her generously, then she would go home to the apartment where a candlelight dinner and cake would await her arrival. But, there would be no cake. There would be no candlelight unless Benny had forgotten to pay the electric bill, with her money. She had intentionally neglected to remind him of her 20th birthday. Would he remember? Probably not.

Grace walked the two miles to the apartment, skipping cab or subway fare to save the meager earnings. The walk was refreshing if not somewhat scary at this time of night. Bums in the street were bedding down, having ceased their panhandling. She had no extra money to give any of them, anyway.

Her hands were shaking a little as she reached for her key. Nervous? Probably not, probably the cold and the beginnings of drug withdrawal. She needed a fix as soon as she got home, before the shakes became uncontrollable.

The Excelsior had been a cheap hotel before it became a cheap apartment building. All of the rooms opened onto outside walkways,

open to the elements and prying eyes. There were no elevators here, so she would walk up the five flights of stairs after walking the long distance from the club to home. *Home*, she thought. What is the definition of that word. Webster did not have this flea-trap in mind when the definition was written.

Grace climbed the last steps, her right hand noisy from tremor on the key ring. She fumbled with the key in the handle, but it would not go in. With the second try she dropped the ring and the keys clattered to the cement floor. She struggled to bend down to get the keys, her muscles sore from endless dances. On the third attempt, she inserted the key into the handle and it turned. With a symphony of squeaks, the door swung open.

The interior of the apartment was not quite dark. Flickering blue light from the television gave intermittent illumination to the front room, one of only two in the modified hotel room. The front room was living room, kitchen, and dining room. A cramped bedroom was behind this living area and contained the bathroom.

Benny was asleep on the couch, the remote control hanging loosely in one hand, a beer can having fallen out of the other some indeterminate time in the past. Grace stepped into the room and closed the door, tossing the keys on the dinette table. The clatter woke Benny, his head rising slowly at first, then snapping to attention.

Grace smiled, maybe she would get a birthday greeting. Benny stuttered, "What... what the hell are you doing back so late?"

The smile faded. "I walked. It was a slow night and I didn't want to waste the money." Grace reached into her purse to retrieve the money, just as she did every night. Benny would not let her hold onto any. She took the small wad of bills and handed it to him. "\$35. That's all. Sorry."

Benny took the cash and stared at it as if it were soiled with excrement. "Bet your ass you're sorry. You're some sorry bitch. I don't know why I let you stay here."

Grace's voice lost all its all strength, "I thought you liked me. I thought you wanted me. I didn't know it was just the money."

Benny rose from the couch and approached. Grace's heart skipped a beat. Would he hug her, reassure her that he loved her and would take care of her. The answer was too quick. A backhand slap across her face snapped her head. She twisted and fell onto the linoleum of the kitchen area, hitting the corner of the stove along the way.

Stunned, Grace was momentarily disoriented. Her trembling was uncontrollable now. She needed a number of items that she was not going to get, care, compassion, and not in the least, drugs. She tried to speak, but before words came out, a kick to her stomach expelled all of

her air. Pain from the impact and panic from the loss of air gripped Grace. Fully aware now, she looked up at Benny. He seemed to sway, though Grace thought that perhaps this was her unstable mind. She turned her legs and tried to kick Benny's legs, but only hit air as the poorly directed strikes failed to connect even with an intoxicated man.

Her feeble attempt at striking drove Benny further into his rage. He pounded her face, arms, legs, and body with fists and feet. Grace tried as best she could to protect herself, but could not. As consciousness slipped, she felt his strong arms lift her from the floor. He had a hand on her belt and another on the nape of her neck. She was dropped momentarily as the apartment door opened. Her next sensation was impact on the cold concrete of the outdoor walkway. Then she felt nothing.

2. Depths of Despair

Grace awoke some time later exactly where she had landed. Shivering amplified the tremor, and pain further impeded her movement. She placed a hand on the door to the apartment. Through bloodied eyes, she looked at the number on the door to see that she was at the right room. She fumbled in her pocket for her keys. Benny would be asleep again, she thought. He would be okay in the morning when he sobered up. This was not the first time he had beaten her, in fact, it had become a ritual lately. He did not seem to realize the bruises he inflicted on her did not help her earning potential at the club.

There were no keys in her dress, then she remembered that they were on the table. She knocked at the door, lightly at first. There was no answer. She knocked a little harder. "Benny" she called. Each time she knocked a little harder. He would not leave her outside all night long, she thought. "Benny!" she shouted, no longer caring whether folks in the neighboring apartments would hear her.

A loud crack accompanied a piercing pain through her left chest. She had been shot. Grace again crumpled to the floor, part from weakness and part for self-protection.

"Stay out!" came the muffled bark of Benny through the splintered door. Then, there was silence.

Grace listened to her own breathing, which seemed to crackle now. Her hand had reflexively cradled the wound in her chest, and she now pulled it away. The hand was covered with blood, her blood, from the gunshot wound. In panic, she pulled open her blouse, to see an entrance wound on the outside of her left breast, with an exit wound just a few

inches beyond. Grazed, she thought, though the wound could get infected and she was worried about the crackling of her breath. Did she have blood in her lung? She knew the wound was too far off center to do any damage to the heart, and she thought that anything else could heal.

Grace tried to push herself off the floor. She could not stay here. Again, she collapsed, this time in pain from the chest wound accompanying pains from the bruises. Rising again, she fought the pain to bring herself to a standing position. Despite the ruckus and even a gunshot, no one had opened their doors to help, investigate, or even gawk. No one wanted to get involved. Typical, thought Grace.

She looked around for belongings but there were none. She would leave this apartment with exactly what she had arrived with, the clothes on her back. She needed a new place to stay.

Grace limped down the walkway to the stairs. She never thought that walking downstairs would be harder than walking up, but this trip was. Bruises on top of bruises made the effort heroic just to descend five levels. She moved slowly since greater effort caused rapid breathing which worsened the lance in her chest. Finally, the last set of stairs dumped her onto the street. She looked both ways. Where would she go?

The club was downtown, to the right. Since that was the only place she knew she would be welcome, she decided to work her way back. While she struggled to make headway on the sidewalk, she briefly smiled. She imagined herself in a G-string dancing with all of these wounds. Who would find her attractive now? Some neo-Nazi sadist? No one. The smile faded and she plodded along.

Hours passed and she knew that she had made a wrong turn somewhere. Nothing seemed familiar. Fatigue, injury, and drug withdrawal clouded her mind. Then raindrops hit her face, lightly at first, then faster, harder, and colder. Soon, she was drenched with icy autumn rain. She ducked into an alley which was at least partly covered by the eaves of the bordering buildings. The soaking abated in the rain shadow. She could go no further. She looked at her watch, it would be light in just a couple of hours. She should try to sleep.

Grace huddled as close to one wall as she could, about six feet into the alley. She heard a rustle, and her dark-adapted eyes noted another figure under the opposite eave. A roommate, she thought. How many times she has passed these bums sleeping on the streets, and wondered what chain of events had led to their predicament. She had known that it could never happen to her, but she had been wrong. Maybe I'll die, she thought. The cold and wet and drug withdrawal along with the wounds would certainly be enough to kill her. That would be fine, heaven must be nicer than this.

Grace contemplated her life after death. Heaven? Not a chance. Heaven does not admit bad girls. She had been a dancer, prostitute, drug addict, petty thief. God did not want her. But, she thought, I am a nice person, aren't I?

A pool of black water was gathering beside her from the increasing torrent. The eaves still gave her some protection from the deluge. She turned her head and released her right hand's grip on her chest wound. She extended the bloody hand into the puddle to clean away some of the mess. As she splashed her hand in the puddle, she saw a stranger, morphed by the reflection in moving water. She snatched out her hand, and the puddle quickly calmed, only disturbed by little splashes from rain and tears. The face looking back was that of a monster. In the black water with distant street light, she saw the reflection of an old weathered face, no longer pretty or perhaps never pretty. Multiple dark splotches marked the bruises. Deep-set dark eyes looked like vacant holes in an empty skull. And the strawberry mark now merged with one of her bruises.

Grace turned away and rolled onto her back. She was destined for hell. She knew it. "God, take me!" she yelled, "Oh God, please."

3. Resurrection

Vague disconnected images flew past her field of view, shades of white and blue mostly, sometimes with shadows. The shadows seemed so close at times. Where am I? Grace asked herself. No answer was forthcoming. Am I alive? The answer to that question was also evasive. Am I in heaven? Am I in hell? Judging from the pain, she reasoned that she was either alive or in hell; heaven would not feel this bad. She had not thought it possible to feel pain simultaneously in every part of her body.

Grace tried to move. Pain intensified though she thought that not possible, either. She relaxed as much as she could, but the pain did not completely abate. She pulled one arm, gently at first and it did move. Though still largely blind, Grace willed the fingers of her right hand to close slightly. There was nothing to close on. She then pulled the wrist towards her body, it being positioned beside her, pulled away from her chest. It moved a few inches then abruptly stopped, a band on her wrist arrested the motion.

"Relax, relax," came a muffled voice. Grace strained to hear better. She pulled harder. "Settle down, Miss," said the voice, now a little clearer. Grace's mind was clearing. She felt a cold sensation in her right forearm and consciousness faded.

Bright red light streamed into her eyes. She tried to close her eyelids, but they were already shut. She turned her head and the light abated somewhat.

The muffled voice returned, "Is the sun too much on you?" Grace tried to answer but could not. Her mouth could not make the words. Her lungs were not under her control. She started to struggle, then she remembered the previous encounter and the subsequent fade-out. She must have been given a sedative. She would relax this time, and maybe she would not get another sedative.

A metallic scraping sound came from her right, and the bright light faded. Grace then opened her eyes. Her first visions were of straight and curved lines in every direction. They made no sense. As her mind continued to clear, she recognized the nearest lines as bed rails. She was in a hospital. Other lines were connected to her and to nearby equipment. She followed one clear tube with yellow liquid downward until it ended in a bandage attached to her forearm. So this was the route of the sedative. This was not as good as cocaine or heroin. Probably more expensive also.

A figure entered her field of vision, a woman, though she could make out no other detail. Something was blurring her vision. "Welcome back, sleepyhead," said the figure in a lyrical voice. "Can you hear me?"

Grace nodded, she could hear fine now.

"You are at General Hospital. This is Tuesday November 7th."

Grace nodded again and looked at the figure. She had short hair and her outfit had so many colors, yet her reduced visual acuity did not allow her to see a pattern.

"You had multiple injuries. You're doing much better now."

Grace nodded again. Then the voice softened and the figure turned to face someone out of her field of view. A brief conversation ensued, then a second figure entered her vision. This one was taller, also with short hair, and trimmer. The new figure spoke to her, "We're going to get the tube out of your throat, okay?"

Grace did not even know that she had a tube in her throat, but that would explain the difficulty with talking and controlling her breathing. She nodded again, though she was apprehensive. Would she breath without the tube?

The new figure approached, getting very close. Soon, the new figure's jacket completely obscured her view. The breast pocket had too many pens. Two ID badges swung from short lanyards attached to the collar, but she could not read either one.

Grace felt tape being pulled from her face, torture since her face was already bruised. The tape continued to rip completely around her neck, pulling out more than a few hairs. Soon the ripping ended. When she thought that the painful part was over, she felt a sensation in her throat, loss of pressure which she had not realized was even there. Then, with the new figure still obscuring her vision, a searing pain tore through her trachea. Plastic and tissue were being separated with complaint. Grace would have screamed if her vocal cords had not been forced open by the tube. With a second pull, the tube slid out.

Grace tried to yell, but pain radiated down into her lungs; the vocal cords were inflamed and painful themselves. After the barest of squeaks, she forced herself to be quiet. As the pain was abating, she realized that she was breathing on her own. She now had control over her respirations. She also realized that the pain was less if she took gentler breaths.

The figure retreated from her view, now further blurred by tears and whatever goo was in her eyes. The figure was holding a curved plastic tube which Grace assumed must have just been in her. The tube dripped a small amount of blood and mucous.

The second figure spoke softly to the first and a cool infusion entered her right arm again. Grace relaxed with lessened pain and lessened cares.

Grace awoke with clear thoughts, perhaps clearer than she had had in some time. The room was again bright, but not from sunlight but from fluorescent fixtures glaring overhead. The walls were steel and glass, with the wall above her head studded with numerous mechanical and electrical devices. The wall to her right was floor-to-ceiling window, looking out onto darkness, the brightness of the interior obscured any exterior visualization.

Grace gently moved her head. Her throat complained just a little, it was still irritated from the breathing tube. Turned 45 degrees onto her right side, she could not see completely to the left side of the room, but apparently, it was a wall of glass mirroring the window to the right, but with a view of the nurses station. In her peripheral vision to the left, she could see some figures moving, but the blur was still present. A gentle bong arose from outside the glass and immediately, a nurse approached. Grace could identify her as a nurse now, the characteristic scrubs, stethoscope hung over her neck, and tired smile on her face.

“Hey, girl. You awake again?” said the nurse.

Grace nodded.

The nurse said, “Okay, girl. It’s time to talk. What’s your name?”

Grace tried to speak and with the first croak she developed the sensation of a cat crawling up her trachea using all of its claws. The nurse saw the pain. "Just whisper."

"Oh God," came the soft breath.

"Sorry girl," said the nurse, "That name's taken. What's your real name."

"Grace," she answered in a barely audible whisper.

"Grace... that's a pretty name. I guess we'll stop calling you 'girl'." She approached Grace and pulled the pillows from behind her back, allowing her to roll onto her back. "My name's Jennifer. I'm your nurse this evening. Your Doctor is Jones, Dr Sara Jones. It's Wednesday November 8. Okay?"

"Right," Grace answered. "November 8. Thanks Jennifer."

The next few days were occupied with small improvements, first a few sips of water, then some pasty custard. She had forgotten how much she could want food. For the last two years, her cravings were of a variety of chemicals, and food was almost inconsequential. Always trim, her frame had at times become emaciated, as often happens with substance abuse. Maybe she would have been more curvaceous if she had eaten more.

The gunshot wound was the slowest to heal. Though there were no retained bullet fragments, the lung cavity had been penetrated and bacteria from the skin had been carried in. Antibiotics were infusing multiple times daily, not only for the wound, but also for the coexistent diseases which Grace had picked up along her trek through the depths of society.

One week later, Grace was moved out of the intensive care unit to the floor. She watched the ceiling lights pass by as the bed was rolled out of the brightness of the unit into the more dimly lit corridor then into the elevator.

Grace's bed shared the elevator with three medical personnel. One, a tall man of perhaps 30, glanced at her. Grace spied the name tag. Todd Smith MD. Medical Staff. Emergency Department. Maybe this was one of the people who saved her life in the ER. She smiled, but he did not return the pleasantries. He glanced blankly across her face then looked down. He continued to frown and looked back at his clipboard, undoubtedly planning his next smile for sometime in the distant future. To him, Grace was just another case, a spiritless body occupying a bed in his hospital. Grace's smile faded and she sighed.

The floor of regular rooms was much more softly decorated than the ICU, where the lights were never off. Stark metallic walls were

replaced by tans and pastel colors. A decorative border near the ceiling and simple drapes on the windows made this significantly homier than the ICU. Grace was going to miss Jennifer, though. She had been such a support through this difficult time. Grace had made the passage through drug withdrawal largely while sedated or asleep. Now, she was still in pain but this, also, was getting better.

Grace quickly met her new caretakers. Two women bounced into the room, both African American and both clearly beyond their youth.

“Hey Grace,” said the first, the one with the prominent red RN designation on her badge. “I’m Heather, and I’ll be your nurse today.” She then turned to her companion, “And this is Debbie, your nursing assistant. She’ll be working the closest with you.” Debbie smiled and nodded, and Grace returned with the same gesture.

Heather continues, “Debbie will give you a bath, get you all cleaned up, then I’ll be back with a million questions. Okay?”

“Sure. Thanks,” said Grace. “Thanks a lot.”

The bath was wonderful. Still with limited mobility and unhealed wounds, getting into a bathtub was impossible. Yet the sponge bath, her first complete cleaning since arrival, felt fabulous. Her skin had been sticky against the sheets. Her hair had felt like snakes, and this was now washed, as well. After more than 45 minutes of attention, Grace was clean, if not perky. Debbie fetched a small mirror with a handle. She handed it to Grace.

The damage was as bad as she had remembered when in the alley. Grace’s face was still beefy red, the bruises bulging against the suture lines from the repaired lacerations. The pupil of one eye was larger than the other, and she vaguely remembered Dr Jones saying something about that in the ICU. Would Dr Jones continue to see her here? Her ICU nurses would abandon her, but surely not her doctor.

The survey continued. Grace inspected her neck and shoulders, then she did not need the mirror to look at the rest of her. She had lost even more weight in the last week, she thought she looked like the victim of a concentration camp. Bones were all in the right order, and though there had been internal injuries, her young frame had taken the beating well. The slowest wounds to heal were on her face and her chest. The chest would require antibiotics for weeks, she remembered Dr Jones saying. How many weeks? It was a mental blur.

Grace used the mirror for a second survey her face. The eyes were deeper still with the weight loss, and the thin lips were almost colorless. She must have lost blood. Even the strawberry mark on her cheek seemed pale. She handed the mirror back to Debbie. “Thanks. I look like a monster.”

Debbie said, "Ahh... You'll be a pretty girl when Dr Jones and God get finished with you."

Grace smiled, "Then Dr Jones is a miracle worker, because I wasn't a pretty girl before any of this." Debbie started to answer but Grace continued, "And God has no interest in me."

Debbie stopped her task of arranging Grace's clean gown. "Now, there'll be no talk like that. God loves you, no matter what you done. You want God to love you?"

Grace answered, "Sure. Yes, of course I do."

Debbie asked, "You sorry about the trouble you been in?"

Grace answered again, "Yes, I am."

Debbie asked the last question, "You gonna try to stay out of trouble?"

Grace said sincerely, "Yes."

Debbie resumed her duties, "Okay then. God will help you. That's that." She finished with the snaps and then arranged the sheet and blanket so that for the moment Grace had a perfect bed.

Grace asked herself whether it would really be as simple as Debbie said. Could God help her? She surmised that he had better things to do.

This had been the best night of sleep Grace could remember, and now some idiot was waking her at what time? She opened an eye and glanced at the large industrial clock on the far wall. 6:15AM. Who is up at 6:15AM?

"Good morning, Grace." Said a sing-song voice. "Sleep well?" It was Sara Jones.

"Morning Doc," said Grace. "Why so early?"

Jones used her penlight to survey the injuries as she spoke. "We've got a busy day every day. Have to start early." She listened to Graces heart and lungs, listening particularly intently to Graces left lung. Then she continued, "You'll get more antibiotics today, and then I'm going to have the social worker come to talk to you. Okay?"

"Sure. Whatever you say, Doc." Grace answered.

Jones continued, "You are going to need at least six more weeks of antibiotics with periodic dressing changes. This doesn't need to be done in a hospital but it doesn't need to be done on the street either. Okay?" Jones peered over her reading glasses.

"Okay," acknowledged Grace. "I'll be good."

“Glad to hear that,” said Jones, still with her stare. Jones finished the brief exam, tapped on her tablet PC a few times, then waved as she left the room.

The social worker came too soon, Grace thought. Grace knew exactly what this would be about. What will she do when she gets out of the hospital? Where will she go? Who will look after her while she is getting the antibiotics for however many weeks?

“Good morning, Grace,” said the social worker in same lyrical voice as many of the other staff. Did they all go to the same speech school? “I am Gloria Fentress, your social worker. Dr Jones wanted me to make arrangements for the next few weeks. Okay?”

Grace nodded. She had thought this though, but only partly. Her calls to Benny’s number had gone unanswered, she had only heard his voicemail prompt the first two times, then had gotten the calls from her cell phone blocked. The last time, her cell phone had not worked at all; the bill had not been paid.

Gloria asked, “Do you know where you will be staying after discharge?”

Grace said, “I’m not sure. I thought probably with my father. He lives just outside of Philadelphia.”

Gloria said, “Did you talk with him.”

Grace nodded. “Sure, he’s fine with that,” she lied.

Gloria looked through some papers in her folder on her lap as she perched on the arm of the small couch. “I don’t have any information on providers we can count on in that area, but that’s out of our range.”

“Providers?” Grace asked.

Gloria looked up from her papers, “Grace, you don’t have any insurance, and I might assume that you don’t have money to cover all of these expenses.”

Grace shook her head without speaking.

“Okay then,” continued Gloria. “We’ll have to find some public provider who will give you the meds and other care you will need, since there will be at least 6 weeks more of antibiotics, plus lots of lab, etc.”

“Okay,” said Grace.

“Let’s call your father and see what providers are in his area.” Gloria continued to look at Grace, “Can you give me his number?”

Grace recited the number from memory, it had not changed since childhood. As she spoke, Gloria entered the digits into her cell phone. The women both looked at each other as the phone rang.

“Hang up, please.” Asked Grace.

“Why?” asked Gloria, but before she could get an answer, someone on the other end answered. Gloria directed her attention to the phone. “Hello, this is Gloria Fentress from Newark General Hospital. Can you...” Her introduction had been cut off. She listened for a minute, then tried to speak again, “Well, your daughter, Grace...” Then she pulled the phone away from her ear without closing salutation and pressed the End button. She looked at the phone rather than at Grace.

“What’d he say?” Grace asked.

“He said he didn’t want to talk with you,” said Gloria.

“What did he say exactly?” Asked Grace.

Gloria looked down at her papers. “He said he only wanted to know if you were dead.” She tightened her grip on her clipboard. “He said not to call again.” She forced herself to look at Grace. “I’m sorry. This is terrible.”

Grace thought her emotions were exhausted but was surprised when her eyes misted. She averted her gaze, also looking intently at nothing. “Okay, what happens now?”

Gloria straightened herself, always the professional. “Right. Well, in a way, that makes things a little easier. If you have nowhere to go and need intravenous meds daily, you have to stay in the hospital. It’s simple.”

Grace said, “I can’t stay here. That’s not right...”

“No, no,” Gloria interrupted. “That’s what we’re here for. So I’ll make the arrangements for long-term stay. It takes a little paperwork, and a commitment on your part to go with the program. Okay?”

“Program?” asked Grace.

“Yes,” answered Gloria. “You will stay in this same room, but it will be designated as assisted care – you’ll have to do some things for yourself, but otherwise you will be here in the same room and floor.”

Grace nodded.

The next days and weeks were a blur, not because of drug intoxication but because of sameness. She dutifully gave her blood samples each morning, checking to ensure that the antibiotics were not damaging her kidneys or liver. In the afternoon, the little bags of medicine would infuse tying her to her bed. Otherwise, she spent more time at the nurses’ station and less in her room. The hospital was never empty, never quiet, never dark. There were always some people that she knew, and her sphere of acquaintances grew over time.

On Christmas morning, Grace slept later than normal. She had gotten used to fetching her own breakfast tray from the food cart before the nurses assistants delivered them. But this was Christmas morning. She would let the aide bring the food in. She lay under the bed sheets, enjoying the warmth. The plastic mattress had ceased to be a bother, she was used to it now. While she was deciding whether to get up, there was a quick double knock on her door and it swung open before Grace could respond. She knew who that would be.

“Good morning, sleeping beauty,” said Dr Jones.

“Hey Doc.” Said Grace. “But I’ve never been a beauty, sleeping or otherwise.”

Jones performed her brief exam as she had on each of the preceding days in each of the preceding weeks. She then departed from the routine by sitting on the bed. Grace quickly moved her right leg to allow more room. “Grace, you are almost finished with the antibiotics. Do you know what you’re going to do when you finish? Where you are going to go?”

Grace studied her hands as they straightened the sheets on her chest. “I’m going to live with my Dad...”

“Now stop.” Interrupted Jones. “You and I both know that your father won’t have anything to do with you.”

Grace shrugged, “I don’t know. I guess I’ll get another job and get an apartment.”

Jones said, “You can’t return to the same life you were living before you came here. You barely survived this time. You might not next time.”

“I won’t do drugs anymore,” said Grace with a confident tone, though her body language did not convey confidence. She continued to fiddle with her bed sheets.

“Do you know that you won’t?” asked Jones.

Grace hesitated before answering, “I hope I won’t.” She forced her mind to consider her options. Back to dancing at the club? Her continued weight loss had not made her look sexier. Maybe they would take her anyway. Where would she find an apartment that she could afford? How would she secure an apartment before she had money from working? Would she live in a shelter? Live on the street? The dismal possibilities were depressing.

Jones bent close, “We can help you, but you have to want to live a better life. Do you?”

Grace’s tears flowed again as she nodded. She could not speak.

4. Goodbye

Ten years passed.

Twin glass doors slid aside to admit a stretcher accompanied by two paramedics. An aging triage nurse approached and directed the paramedics to the nearest vacant trauma room. "Trauma 7!" she shouted. She then barked to the clerk, "Get respiratory and have Dr. Ashport in here right now!"

The clerk picked up the phone, made a quick call, then gave an overhead page. In less than a minute the hulking form of Dr Segwick Ashport arrived in Trauma 7. "What' up?" he asked, approaching the stretcher. The paramedics were clearing away their equipment as the nurses attached the room monitors to the lifeless form.

The eldest paramedic answered, "Jane Doe. Found down on Broadway. Looks like OD, with a core temp of 32." Hypothermia frequently accompanies alcohol and drug overdose – patients are not be able to maintain body temperature through shivering or protective behavior. The paramedic continued, "No ID on her, in fact, nothing, so she was probably robbed while unconscious."

"Right," responded Ashport. He surveyed the form, a pale woman whose age was difficult to determine with certainty. The indignity of this situation left Jane Doe fully exposed while numerous wires and tubes were being attached and secured. The sun-exposed surfaces of her skin were aging though the normally clothed segments had a youthful smoothness, periodically interrupted by scars from previous injuries. Ashport ignored these old insults, they would not threaten her now. He noted bruising on the side of her chest, on the forehead, and across both temples. The eyes were swollen shut. He considered whether this was from asphalt, but then concluded that this was from a human assault, perhaps by the same individual who had taken her ID and whatever else she had possessed.

"Notify the police," commanded Ashport. "I think assault was the most proximate cause of the coma, maybe contributed to by overdose." Then after finishing his screening exam he stripped off his latex gloves. "Let's get toxicology and routines and a stat head CT." Any assault could be associated with bleeding on the brain and the CT would show if emergency surgery was necessary.

The bloods were all abnormal, showing the combination of malnutrition, dehydration, and muscle damage from the injuries and hypothermia on this cold November evening.

The overhead page called, "Dr Ashport, Radiology on line 4."

Ashport looked down from reviewing the chest and brain images on the computer monitors and picked up the closest phone. "Ashport here."

At the other end of the phone, a tired voice responded, "Looks bad. Cerebral edema. Is this anoxia?" Lack of oxygen is the most common cause for brain swelling in this and most hospitals.

"Partly," answered Ashport. "A 30ish woman found down, probably head injury and drugs. I'm looking at the images now. Do you think this is survivable?"

"Probably not, at least not without significant brain damage," answered the radiologist. "I would get neurology to see."

Moments later, an aide handed Ashport papers which included the drug screen positive for opiates, barbiturates, alcohol, and cocaine. A buffet of some of the most popular substances of abuse. Ashport shook his head.

Cliff Daniels, the neurologist on call, arrived less than 30 minutes later and examined Jane Doe in more detail. There was little tone in any of the muscles. No part of her seemed devoid of recent or past injury. This woman had not enjoyed a quiet life. He approached Ashport, who was exiting an adjacent room.

"Hey Seg, Trauma 7 looks bad," said the neurologist.

"The taxpayers had to pay for that opinion?" said the ER doctor.

"Yeh, well, she has a lot of brain damage, and the cerebral edema on the scan is unrecoverable. If she survives, she will be a wreck, and I doubt she will survive 24 hours. Do you want me to talk to family?"

"No one here," answered Ashport. "Thanks for coming in, Cliff ..."

His words were cut short by alarms coming from Trauma Room 7. The nurse called from inside. "V-tach!"

The neurologist re-entered the room and said to Ashport, "I'll take care of this. You're busy, go see someone you can actually help." He disappeared behind the curtain. Ashport stood for a moment as he heard the sounds of the neurologist, nurse, and respiratory therapist performing CPR and shocking the woman.

This was her last night on this earth, Ashport thought. So sad. Twenty-seven years of giving care to so many had not hardened him to the realities of death. That the patients were often the channels of their own demise did not soften the blow, a loss of life before its time was always a tragedy. Though not a child, this woman was not even middle age. Where was he at 30? He stretched his fatigued mind to remember. Still in residency. That was more than 25 years ago, and while he often felt sorry for himself for the work he had to do and the separation from

his family which his work demanded, he did not have problems like this woman had. He would say a prayer for her when he got home in the morning.

The third shock restored the heart rhythm to normal, though no one knew for how long. Daniels and the nurse looked at the monitor. "Stop compressions," commanded Daniels. Chest compressions had been necessary since the irregular heart beat was not delivering blood to the rest of the body.

"I've got a pulse," said the respiratory therapist. He was feeling the carotid artery with one hand as he adjusted settings on the ventilator with the other.

"I've got a pressure," said the nurse. The arterial monitor now registered a low but livable blood pressure, especially for a relatively young patient.

Cliff Daniels did not smile. This little victory would not alter the ultimate outcome. She would be dead or worse – perpetually in skilled nursing, unaware of herself or anyone around her. "Okay, let's get her to the ICU before she does this again."

The nurse called out to an aide who returned with two orderlies. A room in the medical intensive care unit was ready.

The orderlies pushed the bed as the respiratory therapist handled the ventilator. The nurse surveyed the maneuvers to ensure that the lines in the artery and veins were not pulled out and the medicines were still flowing. Daniels followed, carrying a clipboard which had all of the papers pertaining to this as yet unidentified woman.

Nurses had the large doors to the ICU held open for the new arrival. Without a word, the gurney entered the brightly-lit corridor, and the head nurse pointed to a room on the far end of the first pod. "706," she barked, and the gurney and entourage entered the designated room. As before, the nurses moved the monitor leads from portable equipment to terminals on the wall, then moved the bags of intravenous fluid to hooks on the wall. Lastly, the woman was slid onto the ICU bed and the gurney was removed. One of the orderlies would accompany the gurney back to the ER.

The ER nurse gave report to the ICU head nurse, "Jane Doe, found down about three hours ago. No ID, age, family, anything. We estimate 30's more or less. Height 5 foot 9 inches, weight 110 pounds by bed scales. Labs all off the wall – Dr Daniels wrote some orders but your doc will likely change the fluids. Needs more magnesium. She arrested in the ER, V-tach, but we shocked her out. Has been in sinus with dopamine running at 10." Dopamine was required to maintain the blood pressure

high enough to supply the organs.

Daniels continued the briefing, “She’s got a lot of injuries. I think she was assaulted then left to get hypothermic. CT shows edema. I think it’s unrecoverable.”

The ER and ICU nurses both looked at the woman on the bed. The only signs of life were the beeping of the cardiac monitor and the ventilator-induced respirations alternately expanding the contracting the thin chest.

A new voice broke the brief silence, “Hey Cliff, whatcha bring me?”

Daniels turned to see Dr Sara Jones entering, pulling her stethoscope from across her neck. “No good, Sara.” He summarized the case to date.

Daniels finished his paperwork then stood to go. Jones was writing more orders. “Anything else I can do?”

Jones shook her head, “No, Cliff. Thanks. Have a good night.”

Daniels turned and left the ICU.

Moments later, the monitors in room 706 and at the nurses station gave synchronized alarms. Jones turned to look into the room and saw the ICU nurse checking for a pulse. The arterial monitor showed no blood pressure. “P-E-A!” she called from the bedside, for pulse-less electrical activity – where the heart had the electric potentials of a heart beat but the muscle was not contracting.

Jones dropped her pen and returned to the room. The nurse was already administering medication while the respiratory therapist was disconnecting the ventilator and attaching a bag, for more controlled respirations. Jones reached as far as she could over the top of the bed and began chest compressions. She was immediately joined by Daniels, who had returned to the ICU.

Jones said, “I though you were going home?”

Daniels chipped, “I didn’t even make it to the elevator.” He took over the chest compressions; being taller, the angle was better for him and this allowed Jones to direct the administration of medications.

More than 25 minutes later, after all possibilities for resuscitation had been exhausted, Jones said, “Okay, let’s call it.” She looked at her watch, “Time of death is 2:47 AM. Got it?” She looked at the nurse who did not respond with her immediate parroting of the time of death, noting it on her code records. “Hey, you awake?”

The nurse flinched and emerged from her trance, “Yes. 2:47 AM. I got it.” The nurse wrote the time on her code sheet as Jones looked on, then she dropped her clipboard onto the crash cart and briskly walked

out of the room, her head dropping in transit. Jones's eyes followed her rush across the hall into the nurses dressing room.

Jones looked back at the body, now completely still. In the aftermath of the code, she was again fully exposed. Not the beautiful nude of Rafael or Rembrandt but an emaciated lifeless body with multiple lines still attached. The girl may have been pretty at some time, but now was a corpse.

The respirator and cardiac monitor had already been clicked off by the respiratory therapist. The bright fluorescent lights illuminated the now grey flesh. The color of death is not the color used in most television programs. Dead people have a special appearance never perfectly imitated by makeup.

What a waste, Jones thought. A short and difficult life ending in premature death with no one to mourn the loss except them.

Jones then turned to look back at the nurses dressing room. She put her clipboard on top of the nurse's notes on the crash cart and exited the room, walking the short distance to the dressing room. She stopped at the closed door and listened. There were soft sobs from inside. She pushed the door open. The nurse was bent over a sink, her arms splinted against the edges to hold her up.

Jones asked, "You okay?"

The nurse nodded. Jones approached and put her hands gently on the nurse's shoulders. "What is it?" Jones asked.

"I know her." She said, "Or rather I knew her. A long time ago."

"You should have gotten someone else to care for her." Jones said.

"Didn't have the chance." She answered, "She wasn't here long enough." She then continued. "Such a waste."

Jones embraced her harder. "Come on. Let's get you cleaned up." She helped her wash her arms, getting the blood and other body fluids from her hands and wrists. Jones then wetted paper towels and wiped tears from beneath her eyes. The eyes on this tall, skinny nurse were deep, dark, and now stained with bleeding makeup on high white cheeks, the left adorned with a strawberry mark.

Jones surveyed her handiwork, "That looks better, Grace." Then she asked, "Who was she?"

Grace answered, "Her name was Chrissy. I didn't know her last name. She was a dancer at the same club. I hadn't seen her since I ..."

Neither spoke. The toil of the past 10 years was well remembered by both. But for a small twist of fate, the body on the way to the morgue could have been Grace's.

Jones asked, "Ready, Grace?"

Grace nodded, "Let's put off my birthday party until tomorrow."

Jones returned the nod. "Sure thing. For your 30th you need to have a good day."

They left the room together. There was more work to be done.

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