

THE UNFORTUNATE EVENT



ittle Suzy is lying in a Brooklyn hospital bed fevered and weakened. If her temperature were heating a pot you'd hear the high-pitched tone of a whistling teakettle. That's why her six-year-old frame is on top of the dingy white sheets and not under them.

If her lungs were a train engine you'd hear *puff, puff . . . chug, chug* with the internal dialogue of her autonomic nervous system repeating, *I think I can . . . I think I can*.

Her heart, meanwhile, is in tachycardia, thumping *boom-boom, boom-boom, boom-boom*, nearly twice its normal rate.

Whistle, puff, puff, chug, chug, boom-boom. Whistle, puff, puff, chug, chug, boom-boom. Not good.

Since the arrival of her mother two hours ago, Suzy's vitals have picked up their rhythmic tempo. Again, not good. But there's nothing a mother can do in this situation, even one as dedicated and resourceful as June Williams. She has no choice but to watch and wait, sitting there in the standard-issue bedside chair. Sitting, watching, and waiting go against the grain of her take-charge personality, but, like most of us, June defers to the expertise of the medical professionals.

Suzy pops forward jackknife-style at the hips, expelling a deep "cough-cough" with lung rales inconsistent with her childish appearance. You'd think she'd dragged two packs a day for thirty years by the sound of it. She finishes by clearing her throat with a softer, more age-appropriate "uhum-hum" while patting her chest, so as to say, "It

hurts here.” Her head drops to the pillow, yet she flashes a smile at her mother.

The kind Caribbean nurse at Suzy’s bedside turns to June. “No worries,” she consoles as she softly dabs Suzy’s clammy forehead. The medical term for the beads of sweat collecting on her light brown skin is diaphoresis. “Them doctors mons be making their rounds now. De’ll be here soon. Your Suzy be’s just a little hot. No worries.”

June looks her in the eye and nods with the sincerity of a mother’s appreciation. “Okay. Thank you, nurse.”

The woman performs one last caring dab so as to say, “There now,” then gives Suzy and June a serene, comforting smile as she leaves the room.

June moves from the chair onto the bed and snuggles up to her daughter. Suzy takes her hand. “Don’t worry, Mommy, I’m fine. Like the nurse said, I’m just hot.”

“You’re the best little girl a mother could ask for.” They share a smile, acknowledging how fortunate they are to have each other, then tighten the cuddle.

“You’ll feel more relaxed if I read to you, Mom,” Suzy suggests, pointing to the table. “Reach over and hand me that book.”

The warmth of happiness comes upon June’s face as she feels her daughter’s concern. Suzy shines brightness on overcast days. June often wonders how a child of her tender years could have such maturity and caring presence. In kindergarten the teacher had called Suzy her “little helper” because of the way she looked out for less independent classmates.

“Hold on, Mom, we’re going for a ride!” Suzy warns, smiling. “I’m gonna press this button and the head of the bed is going to come up even higher.” They giggle together as the bed buzzes and vibrates on the rise. “Cool, huh? Right, Mom?”

June looks at her daughter with a blend of adoration and admiration.

“Now put your head on my chest,” Suzy tells her. “And listen to this story. It’s a good one. It’s called *Old Yeller*. That nurse from Jamaica brought it from the library when I told her how much I loved dogs. The librarian gave it to her. Can you believe this place has a library?”

With a librarian? It's on the second floor. And you know, Jamaica's an island in the Caribbean. Now before I begin, I just want your promise that we can get a dog as soon as I leave here, so say 'I promise.'

"We'll discuss it when you're discharged."

Suzy's having none of that. "Say 'I promise,' Mom?" she responds, in an insisting tone.

"I promise," June replies, giving in. She rests her head on Suzy's chest. It's burning hot. She hears the wheezing sound of labored breathing, with rapid respirations like the beats of Suzy's stressed little heart. Everything that's happening right now scares her. She raises her head to check her daughter's face. Their eyes meet and Suzy perfectly reads her mother's look of concern.

"What's the matter, Mom?"

"It's your heart. It sounds like it's beating so fast."

"That's because it is. Now listen to the story," she says, dismissing her mother's worry. "It's my new favorite, even though I'm not done yet." Suzy holds the book out, displaying the cover. "You see that dog, Mom? That's Old Yeller. That dog chased an angry mother bear away."

Suzy turns to the first page. Just as she's about to read, a group of doctors shuffles into the room, six in all, entering by order of medical rank. One is an experienced doctor, while the five others are residents. The group approaches and the attending doctor, in a commanding voice, addresses June. "Good morning. I'm Dr. Gino Valenti. I'm one of the staff hematologists taking care of your daughter. Chief of the department, I might add."

June has never seen or met this Dr. Valenti before. Dr. Richard Wise has been the hematologist assigned to Suzy's care since her admission three days ago, though she doesn't think much of him. June has good instincts for most things and takes an instant liking to Dr. Valenti. He's tall, in his midsixties, with a full head of silvery hair, a Kirk Douglas chin, and the air of knowing precisely what he's doing.

"Oh, I'm glad you're here," June anxiously replies. "Suzy's all sweaty and her heart sounds like a drum solo from a halftime band. And she's breathing really quickly, too, but with difficulty if you listen close."

“That doesn’t sound good. No one made me aware. Let’s have a look.”

June stands off the bed, without letting go of Suzy’s small hand. This causes *Old Yeller* to slip and fall to the floor, landing at the feet of Dr. Valenti. “One of my favorites,” Valenti says as he bends down, picks up the book, and hands it to one of the residents. “A real classic.”

Suzy is pleased by the comments and smiles at him. “I’m halfway through and Yeller is some special dog. I hope the book has a happy ending.”

Valenti smiles back, says, “Yes, well . . .,” and takes a step closer as the residents fan themselves out like a poker hand at the foot of the bed. “Good morning. I’m one of your doctors. Like I told your mother, I’m a hematologist. That means—”

Suzy politely breaks in. “I know, Dr. Valenti. A hematologist is a doctor who specializes in disorders of the blood, like my disease. If you’re one of my doctors, then how come I’ve never met you before?”

“Well, you got the hematology definition exactly right, and I feel it’s my loss that we’ve never met before this moment.” Dr. Valenti pauses and studies her. “Now, how are you feeling this morning?”

“Just like my mom told you, hot and sweaty, and if my heart were a dog it would be a greyhound. That’s a racing dog, you know. I love dogs and I’m getting one when I leave here.”

“I love dogs, too. Now—”

“Sorry for cutting you off again, but are you a pediatric hematologist who takes care of kids like me or just a regular one?”

“That’s a very intelligent question, Suzy. I’m a regular one.”

“What happened to Dr. Wise, who saw me the last two days? He’s a pediatric hematologist, you know, but no offense.”

Dr. Valenti shakes his head in appreciation of her moxie. He glances at the residents, lifting a brow, then back to her. “No offense taken. He had to take a personal day today, but he told me all about you, Suzy. Are you okay with me treating you this morning?”

“Sure. We like the same books and you seem like you know what you’re doing.”

The residents share a common chuckle, making their presence felt

for the first time. As Valenti's smile disappears he directs his attention to one of them. "Dr. Hassan, take a look at that chart and tell me what you see happening here."

The resident puts his clipboard down and begins to reach for Suzy's medical record hanging on the end-of-bed patient chart holder.

"Hassan," Valenti barks, with an annoyed look on his face, "never put your clipboard down on a patient's bed. It's invasive, rude, and discourteous."

Hassan quickly picks it up, then takes Suzy's chart off the holder and begins flipping through it with all eyes on him. A moment later, he speaks.

"The patient's temperature has been spiking throughout the night and her pulse rate shows a pattern of continued elevation, Dr. Valenti."

"Hassan," Valenti demands with an annoyed look on his face, "hand me that chart. This sweet little girl has a name and it's Suzy." Valenti pauses and looks down at Suzy, who grins. "When talking about a patient in her presence, use her name. Don't depersonalize her by using the term *the patient*. Are we clear, Dr. Hassan?"

"Yes, sir."

Dr. Valenti flips through the chart with a studious eye, then hands it to the resident still holding *Old Yeller*. "Dr. Gold," he says to a different one, "when I'm done listening to Suzy's heart, I'm going to ask you the significance of the chart findings Hassan told us about relative to Suzy's disease. I'm giving you a head start on this one, so begin formulating your answer. For the rest of you, you'll be filling in the gaps of Dr. Gold's response."

Dr. Valenti takes the stethoscope, which had been draped around his neck old-school-style, and plugs it into his ears. He leans over, softly places it on Suzy's chest, and moves it about while listening intently. "Now take a few deep breaths for me, Suzy," he directs. She does. Dr. Valenti stands up and unplugs. All eyes are on him. He's formulating.

"One second," he says, then walks to the door and looks out. First left, nothing. Then right. "Nurse!" he calls in a firm voice. "Oh, nurse! Yes, I'm talking to you. Please come over here for a moment."

From the hall the sound of slowly approaching footsteps is heard, then a nurse can be seen crossing the six-inch gap made between the right side of the doorframe and the well-built body of Dr. Valenti.

"I'm sorry, I don't know your name," he says. "You must be new around here. I'm Dr. Gino Valenti, just like the tag says. Nurse, please bring a heart monitor to this room right away and hook Suzy up to it."

"Yes, doctor sir, mon, right ahway," the nurse replies in a lilting island accent. Dr. Valenti may not have recognized her, but June and Suzy know who she is.

He struts confidently back to the bedside. "Nothing to worry about," he says. "I just want to monitor your heart rate more closely, Suzy. Would that be okay with you?"

"I guess," she answers with hesitation. "Is a heart monitor the clip thing you put on my finger?"

"No, Suzy, that's something different that basically measures your pulse rate. What I want to use is a cardiac monitor, which evaluates your heart directly. So, is that okay with you?"

"I never had that done before. How are you going to do that? Will it hurt?"

"No, it's not going to hurt."

"How does it work?"

"Well, technically speaking, the nurse is going to place something like stickers on your chest that are really called electrode patches. Then she's going to connect plastic-coated wires to those patches, which are called lead wires, and plug the other end of those wires into a cable coming from the machine."

"How does that monitor my heart?"

Valenti looks at June. "She's a real pip, isn't she?"

"That's my baby," June says. "She's going to be the first African-American female president."

Valenti grins, then turns back to Suzy. "The way it works is the electrode patches pick up the tiny electric current made by your heart muscle during a heartbeat and it is transmitted by the wires to the machine, which is really just a recording instrument that prints

out a graphic tracing of the electric current generated by your heart. Got it?"

"Got it," Suzy confirms.

"I know *you* understand, Suzy. That 'got it' was for Dr. Gold over here." Another chuckle circulates at the foot of the bed. "Now, Suzy, I'm going to step outside with your mother and these doctors and have an adult conversation. All right?"

"That's fine with me, Dr. Valenti. I know you're going to tell her the bad stuff you don't want me to hear. My mom will want to know everything, so don't hold back." She gives Valenti an endearing smile. "Just say it like it is."

Dr. Valenti makes a "you're quite the precocious kid, aren't you" nod. "Thank you, Suzy. We'll be right back."

Once outside the room, he leans against the wall facing June. The residents keep their same positions in the horseshoe, now around them. "That's a remarkable little girl you have there, Mrs. Williams," Dr. Valenti comments.

"It's Ms. Williams, and yes, she's something special. But she can never get a break from her disease."

Before Valenti responds, the group's attention is distracted by a loud noise. It's a continuous *click-click* sound with a split second between the double clicks. Approaching from down the hall is the Caribbean nurse wheeling a cardiac-monitoring machine with a broken wheel. As she slowly nears, pushing the machine, the clicking sound becomes louder. She reaches the group, stops, and so do the *click-clicks*. She's breathing heavily, very heavily. She leans over and rests her hands on her thighs just above her knees, tugging at her whites. Her position resembles that of the guy at the foul line late in the game waiting for the basketball from the ref so he can tie things up. The residents have inverted their horseshoe circling the nurse and watch as she sucks air to catch her breath.

She takes one last big inhale as she uses her hands to push off her thighs, then stands up. "Oh, I be tired, mon," she gasps. "Had to go all da way to da basement to get dis here machine, ya know. Not a one

available on dis here floor, mind ya. Da basement I be tellin ya, it be far, far away. Here you go, doctor sir, mon.” She turns to walk away.

“Nurse,” Dr. Valenti says in a stern voice, “my instructions were for you to hook up that child in there. Could you please do that?”

“Me, doctor sir, mon?”

“Yes, you, nurse, thank you.”

“Ya, mon, doctor sir,” and she *click-clicks* the machine into Suzy’s room.

Dr. Valenti turns back to June and, with a comforting look, continues. “Ms. Williams, everything is just fine right now. Suzy’s having some mild complications associated with her blood disorder, a little more serious than the ones that gave rise to her prior three admissions. There’s nothing to worry about. I promise. In a girl her age, this kind of thing will come and go. When she gets older, she’ll be at risk for more serious complications, but like I said, for now she’ll be fine. Would you mind waiting here a moment while I pull these residents to the side for some instruction?”

“You mean you’re going to talk about the bad stuff?”

“Now I see where Suzy gets it from, Ms. Williams. But no, like I said, at her age the complications from a crisis are relatively minor when treated. Suzy’s going to live a healthy and productive life. She’ll be giving you grandchildren whom you’ll be visiting one day at the White House during her presidency. I’m just going to do a little Q and A with my students. Okay?”

“Okay.”

Valenti and his residents shuffle a few steps to the left until they’re out of June’s earshot. “Okay, Gold,” Dr. Valenti queries, “can you tell us why I’m placing that wonderful little girl in there on a heart monitor?”

“To monitor her heart?”

“Very good, Gold. No doubt you’ll be discovering a cure for the common cold by the time you’ve completed our program.” Valenti turns to the next resident. “Dr. Guthrie, you’ve been quiet as usual. How are things this morning?”

“F-fine,” stutters Dr. Guthrie.

“Don’t be so nervous, Dr. Guthrie. Nobody likes a nervous doctor. Now, can you tell Dr. Gold and the rest of us why I just ordered a heart monitor? And please give us an answer incorporating the relevant information particular to Suzy’s condition.”

“Yes, sir,” Dr. Guthrie replies in a hesitant voice, not comfortable being the center of attention. “Suzy has sickle cell disease, which is an inherited blood disorder in which red blood cells are abnormally shaped. Instead of the RBCs being round, they’re distorted to the elongated shape of a sickle. A sickle is basically the shape of the letter C. Unlike round RBCs, which move easily through the body’s small blood vessels, the pointed and stiff sickle-shaped cells have a tendency to get stuck in these tiny capillaries. This can cause a sickle cell crisis which, technically speaking, is a vaso-occlusive crisis. *Vaso*, meaning vascular, and *occlusive*, meaning the inside of the vessel is blocked. So a sickle cell crisis is when the sickle-shaped cells obstruct the capillaries restricting blood flow to an organ. The lack of blood flow, known as ischemia, results in the deprivation of oxygen and can lead to organ damage. A sickle cell crisis can cause varying symptoms of pain to different parts of the body, depending upon where the vascular occlusion is.”

“Very good, Guthrie. Anything else you want to add?”

Dr. Guthrie nods. “The worst type of a sickle cell crisis is a sickle cell stroke to the brain. This is when the rigid sickle cells block the tiny brain vessels and the patient strokes out from the ischemia. Suzy doesn’t appear to be in this type of crisis, but, like all sickle cell patients, she’s at risk for developing a sickle cell stroke. The type of sickle cell crisis Suzy’s in is known as an acute chest crisis. This is caused by the trapping of the sickle-shaped red blood cells in her lungs, which obstruct the normal exchange of oxygen. The signs and symptoms of this are the exact ones Suzy is now exhibiting. She has difficulty breathing, is coughing, and has chest pains. When Suzy arrived here, she only had an elevated fever, which is generally the first indication that a child is going into crisis. So, Ms. Williams responsibly got her daughter here in a timely manner. Suzy’s constellation of symptoms,

however, evidences a worsening of her condition, putting her in a full-blown acute chest sickle cell crisis.”

“Dr. Guthrie,” Valenti interjects, “very good, but the question was why I ordered the monitor.”

“Yes, of course,” she responds, but before continuing she looks worriedly over to June, to the doorway of Suzy’s room, then slowly turns back to the group. “Without having listened to Suzy’s heart, I believe you ordered the heart monitor because her heart is beating faster than normal. Tachycardia can be an early sign of pulmonary congestion, when the sickle-shaped cells block the arteries that bring blood to the lungs. This causes the heart to beat more quickly as a compensatory measure in an effort to get more oxygen to the lungs. Like a heart attack, where the heart muscle is deprived of oxygen, the lungs can have a similar type of attack if they are deprived of oxygen, called a pulmonary infarction. A pulmonary infarction leads to a cardiopulmonary arrest, where both the heart and lungs stop functioning. An acute chest crisis that progresses into a cardiopulmonary arrest is the most common cause of death in sickle cell patients, so I believe you want to monitor Suzy’s heart to keep a watchful eye out for this.”

“Excellent, Dr. Guthrie. That was a textbook answer. I’m so pleased you switched your residency program from cardiology to hematology. You’re a born hematologist. Now let’s go back to Ms. Williams. It’s rude to keep her waiting there alone for too long.” The group shuffles back over.

Dr. Valenti faces June. “Ms. Williams, as I said, Suzy is going to be just fine. I’m going to put her on oxygen, which should help her breathe easier, and change her oral antibiotics to intravenous, upping her dose. I’m going to give her some fluids and medicine to dilate, or open, her lungs, which should also help with the breathing. I’m actually a little surprised Dr. Wise didn’t order these things earlier. It’s standard practice, but he’s the pediatric hematology expert, not I. I’ll make a note to discuss it with him.”

“Why isn’t my baby getting the standard care?” June asks testily.

“Dr. Wise is a good doctor, one of the best pediatric hematologists around. Maybe it’s because Suzy’s symptoms have only recently taken

a turn for the worse, but I don't know. As I said, I'll discuss it with him, but for now, no harm done. I can assure you of that. If things don't improve, which I expect they will, then I'll order a chest X-ray to look for a lung infiltrate."

At that very moment, a loud shrieking scream blasts out from the room. It is Little Suzy. The echo of her cry can be heard throughout the entire floor and maybe the ones above and below. It's followed by the accented screams of the nurse. "Help! Oh me God! Help me, doctor sir, mon! Help! Help me, God!"

June pops off the wall and barrels through the residents, knocking Dr. Gold to the floor. Dr. Valenti follows, high-stepping over Gold. All but one of the residents run around Gold into the room. The shy Dr. Guthrie freezes in place, incapable of meeting the demands of the evident medical emergency.

Upon entering the room, June and Dr. Valenti abruptly stop in their tracks at the horrid sight before them.

Suzy's neck and upper back are freakishly arched off the bed. Her hair is standing on end and she's shaking and convulsing uncontrollably, like the girl in *The Exorcist*. Her foaming mouth is wide open with no tongue in sight and her eyes have rolled back inside her head, with only the whites showing.

"Help me, mon!" the nurse screams, breaking the petrified silence from the corner a few feet away where she's kneeling and using the heart monitor for cover. "Doctor sir, help me, mon!"

Valenti grabs a resident by his shoulders and speaks to him in a firm and controlled voice. "Call a code. Call a code. She's in arrest. Get a code team here. Go now. Get a crash cart in here now!" The resident runs out.

Valenti swiftly moves to Suzy and presses her shoulders, forcing her jerking body down to the bed. He looks back and sees June standing there, her hands covering her mouth in shock and disbelief.

"Get her out of here! Get her out now!" Valenti demands as he struggles to keep Suzy's jerking body pinned to the bed.

Dr. Gold, now up from the floor, rushes over to June Williams. "Come, come. You don't need to see this," he tells her. "Come outside

the room. Dr. Valenti will take care of it. You don't need to see this. Come with me." He guides June out with comfort and compassion as she instinctively resists.

Suzy is convulsing, her neck vaulted back unnaturally. Dr. Valenti rips the electrode patch with the lead wire off Suzy's chest, tossing it backward. It slides along the tile floor toward the corner, underneath the cart, coming to rest between the thighs of the nurse, now kneeling in prayer.

Suzy abruptly stops her uncontrolled shaking, falling to the bed in apparent cessation of life. Valenti begins pounding the chest of her motionless body, attempting to jump-start the child's heart so hard that ribs are surely being broken.

"Come on, come on, Suzy! Stay with us!" Valenti pleads, trying to beat the life back into her. He seals her mouth with his, gives a blow, causing Suzy's chest to rise. This coincides with further "Help me, God, mons" coming from the corner behind the machine as the residents watch their mentor try to resuscitate the limp child.

The crude, barbaric-seeming chest pounding, alternating with mouth-to-mouth, continues for three more minutes until rushing footsteps are heard. A team of doctors hurries into the room wheeling a crash cart. Now it's time for the advances of modern medicine to have a shot at saving the child.

The code team leader picks up the paddles. "Clear!" he yells, then presses them against Suzy's chest, delivering a defibrillation shock that pops up her body. The nonlethal dose of therapeutic electrocution has no effect, so he again yells, "Clear!" and delivers a second charge. He steps back and looks at Suzy's chest. "Ambu-bag her! Ambu-bag her!" Another code team responder secures a mechanical ventilation device over Suzy's face and starts forcing air in her by squeezing the bulb.

The lead doctor puts his left arm under Suzy's upper back and his right under her knees and lifts her limp body, cradling her in his arms. He quickly turns and dashes for the door with his second-in-command running alongside, bagging her.

They exit the room, heading past June. She's sitting on the floor with her back against the wall and her head in her hands in the exact

place where Dr. Valenti had promised everything would be all right. June doesn't notice as her near-lifeless daughter is whisked away by the dynamic duo of code team responders. She's in shock and, by the looks of things, so is the motionless Dr. Guthrie, who is standing where she was when those double clicks were first heard coming down the hall. She watches the code doctors turn the corner, eyes hollow, in disbelief of what just happened.