

THE PACKAGE

a novel

RAFAEL SILVA



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To my mother and siblings, whom I love dearly.

*To our cat, Fifi, who kept me company in a time of need
and with whom we share a special bond.*

*Most of all, to my wife, whose everlasting patience, support,
and love make my life possible.*

...he could not avoid seeing the garden, in all its beauty, directly below him. He had not given it much thought for a few years now, until a different kind of rose caught his eye that day.

– *THE PACKAGE*

PROLOGUE

I have been a secretary in this department for as long as I can remember. I have seen, heard, and accordingly gossiped about surgeons' lives since the first day I marched in here thinking I might be able to marry one of them. Thank goodness I found my Frank before complicating my life with a surgeon.

Frank was a pharmaceutical representative who often passed through the office with drug samples, pitches, and freebies for the docs. After more than thirty years, I am still going home to him completely hooked on whatever love potion he slipped into my coffee back then. But hey, that's a different story. As I was saying, since my first day of work here, I have gotten to know many people who wield scalpels for a living and who, with startling frequency, manage to slice up their own lives.

You have, for example, the gray-haired professors, with their dictatorial aura. These are the bosses. Surgery professors are always department heads and lead all medical and nonmedical hierarchies of the hospital and the medical school. Nothing gets done without their approval or their knowing about it. Really, I mean everything—including how and who will perform the most cutting-edge medical procedure, who will be admitted to the surgery program or the medical school, which secretary or janitorial staff to hire, and even what kind of pencils the department will buy. You name it, they have a say in all aspects of life here.

Consequently, they have no other life. Just look at their personal relationships. Maybe I exaggerate, but in all these years,

almost every surgeon I know has been married more than once. I have spoken to their wives, girlfriends, kids, parents, and even patients more than they ever have or ever will. I have even coached some of their wives through childbirth. You laugh, but I helped pick half of their children's names.

I am not really proud of this, but more times than I care to count, I have lied for them. Sometimes these are simple white lies such as sending cards or presents on their behalf when they forget a birthday or an anniversary. Other times, my cover-ups are not that simple. For instance, they occasionally go home late or don't leave the hospital at all. When their loved ones call me to inquire about them, I provide a version of my standard answer: that they are in a long or unexpected surgical procedure. Generally, this is the truth. But sometimes, the real answer involves them "working" with the right young nurse or colleague. There is always someone who is more than willing to "help" take care of their needs during the countless hours they spend within the walls of this institution.

Things are easier with the younger docs. The food chain continues downward from the professors, also known as attendings, to the subspecialty fellows, chief residents, senior residents, junior residents, interns, and senior and junior medical students. Their lives are not much different. But it is typically easier for me to cover up their bad habits or infidelities because they are often unmarried and usually don't have children.

Is it the same for the women docs, you ask? You bet. A lot of them are the most impossible bitches, with truly chaotic lives. But I have never encountered more dedicated, strong-willed, and brilliant women than these surgeons.

Save for a select few—and I'll get to one of them in a minute—surgeons are hard to get along with. They have short fuses, bad attitudes, foul mouths, and god complexes. They are members of a profession that lives to work. Do I sound bitter? Yes and no. My first weeks in the office, I checked the classified ads

every Sunday. I wanted out. Yet somehow, I learned to deal with, understand, and in due course, befriend almost all of them. I have been and continue to be like a mother to many of them. They come to me, entrust me with their problems, and often ask me for advice.

They are sort of messed up. I know it. But I love them, I respect them, and I meddle in their lives because in the end, they are all heroes.

This is the story of one of these heroes—an exception to the norm—whose fate in life and love needed a helping hand.

ONE

On a cold New Haven spring afternoon, the postman came into the office, dripping wet. I teased him, asking if he could please dry out before stepping in and soaking my carpet. He smiled and handed me the usual carton full of correspondence. After signing his electronic notepad, for a package that required signature for delivery, I sent him on his way. Once he was gone, I proceeded to open and sort the journals, invitations to medical seminars, letters from prospective young surgeons begging to enter the residency program, et cetera and placed each piece in its respective mailbox.

From time to time, some of the correspondence could be personal—from birthday cards to parking tickets to divorce papers. These matters, too, went through me because the doctors generally lacked the time and proclivity to deal with them. So, I often took it upon myself to analyze their personal mail and make decisions or take actions as necessary.

The last thing in the carton that day was a rectangular box wrapped in generic shipping paper, secured with twine, and addressed to Dr. Declan Baltierra. This was the package that had required signature upon delivery. It was a bit heavy. Its size and shape suggested a bottle of liquor or the like. This was not unusual, as many of Dr. Baltierra's former patients often sent wine or other kinds of alcohol as gifts to express their gratitude. These gifts ranged from the ordinary to the unique

and insanely expensive. I thought about placing it intact on his desk. But curiosity got the best of me, and I decided to open it. After cutting the twine's bowknot, I carefully removed the thick paper and then the bubble wrap. Underneath, I encountered a case made of shiny mahogany. *Not a cheap drink*, I thought. I unlatched the lock, which seemed to be real gold, and opened the lid.

It was not a bottle. If the object before my eyes was real, I could not believe it. I sat there and stared at it for what seemed like an eternity. Then it all made sense. There was a note in meticulous handwriting inside the box:

To my Angel of Independence,

Please add this trophy to the countless others you must surely have. It is legitimately yours.

Thank you.

No signature, no indication of the sender's identity. I later realized that if I had examined the contents further, I would have known who'd sent it. But even then, I had a hunch regarding its origin.

You know, some research shows that parents often have a favorite child. This made me feel better. Of all the young men and women under my motherly wing, Declan was my favorite. He was a young surgeon who trained in cardiothoracic surgery in Texas and whose intellectual and technical gifts made him, at thirty-three, the most sought-after man in the world of academic surgery. Toward the end of his surgical training, he considered job offers from the most prestigious institutions in the country. Perhaps because he'd gone to Yale as an undergraduate, he decided to accept the faculty position here, at the Yale School of Medicine. He'd been with us for over three years. I've never met

another surgeon—or, frankly, another person quite like him. Needless to say, regarding the package, I took affairs into my own hands and stuck my nose deep into somebody else’s life.

I closed the box and fumbled around for the return shipping address. The postal service does not deliver packages without one. I looked at Declan’s schedule for the next few weeks, broke out some new hospital letterhead, and I simply wrote a date, time, place, and seat number and signed it: *Trust me, your and his best friend*. Then I added a small footnote: *P.S. Consider the Omni Hotel at Yale*. I stuffed the brief letter in an institutional envelope, addressed it to “the resident of,” and ran down to the post office to make it all happen. Just as I dropped it in the mail slot, I got a bit nervous for a second. Then I thought, *What’s done is done, and chances are, nothing bad will come of it*. At the end of the day, I took the package home to tell my Frank all about it.

He was retired now. He had climbed the company ladder in his salesman days, and we lived comfortably in a beautiful house near Science Hill. We had one kid, Frank Jr., who was a great radiologist and a very happy family man out in California. Tea was already waiting for me when I arrived home. I placed the box on the kitchen table and took off my cold-weather gear.

“Hey, Iris, what’s this?” Frank asked.

“It’s an unfinished story.”

“Oh crap. Oh no. You are not meddling again, are you? Who is it now? What is this?” Frank proceeded to open the box in his curious and customary way. He looked at the contents and then glanced at me with incredulous eyes. “Hon?”

“Give me that! If you must know, I think it’s the real thing. Like I said, it’s an unfinished—ah, situation.”

“Honey, the last time you had a situation at work, we had three different women and one truly deranged kid receiving therapy from us. Please, tell me it’s not about any of your surgeons.”

“Well, it is. Besides, it’s about Declan. You know how much I like him. He is different. I think he deserves the plan I’ve put in motion for him. That is, of course, if it works out.”

“Declan? Tell me again about him.” Frank settled into his chair at the table and lined up our tea mugs.

Once comfortable, we sat in the twilight of the evening with Rif, our Labrador, and I told Frank Declan’s story—a story in which the package might just play an important role.

TWO

It was a night of debauchery and sin in Galveston, Texas.

A swarm of young adults from the Houston area had descended on the island to consume the truckloads of alcohol that had been wheeled in for Mardi Gras. The Strand District sparkled with glitter as bands and floats paraded down its streets, with participants throwing colorful beads at thousands of inebriated spectators. The bars and dance halls conveniently forgot their fire marshal capacity codes and bustled to serve the sea of customers. Jazz music and tobacco smoke emanated from the open windows of every business along the parade route.

Meanwhile, in operating room 26 at the nearby University of Texas Medical Branch, heart surgeons were working on a tedious heart-lung transplant. OR 16 had a nineteen-year-old kid who was reportedly minding his own business a few hours earlier and had been shot in the chest by “a bullet that came out of nowhere.” And in OR 4, Declan was helping neurosurgeons cut out some kind of spine infection that had to be approached through the chest. He had just finished his general surgery residency eleven months ago and had joined the cardiothoracic team as a fellow. This meant he was about two years away from being a bona fide heart surgeon. At any rate, the chest surgery staff had their hands full.

Around one in the morning, Declan was done clearing the heart and lungs. It was time for the neurosurgeons to work their magic. He stepped back, sat on a stool, and caught some

“standing sleep.” That’s what the surgeons call it. They never really sleep during their long shifts. As they say, “You catch sleep if and when you can.” A few minutes went by, and his pager went off. Since he was still scrubbed in, the OR nurse checked the page and called the number.

“Dr. Baltierra, it’s Dr. Williams from the emergency room. He wants to know if you could please look at some X-rays with him.”

“What do you think, Patty?” Declan replied, raising his gloved hands.

She turned back to the phone. “I’m sorry, Dr. Williams, he is scrubbed in at the moment.” There was a pause, after which Patty simply said, “Okay, bye.”

Shortly after the phone call, Dr. Williams himself appeared in the OR, gowned and holding a set of films.

When Declan saw them, he exclaimed, “Oh shit! Still alive?”

“Yeah, man, she’s drunk and high out of her mind. Anesthesia and Medicine are up there trying to decide what to give her to slow her down.”

“We have to show these to Dr. Katz.” Declan leaned closer to the image showing a severely injured aorta. “Damn, I just don’t know how we’re gonna deal with this.”

“I know you guys are spread out really thin tonight. Should we fly her back to Houston?” Dr. Williams asked.

“No, she’d probably die on the way there. Hold on.”

Declan asked the neuro guys if they were okay. They gave him a simple “uh-hum” without looking up. Declan broke out of his gown and went to OR 26 to explain the situation and check on a plan of action with the boss.

Dr. Katz was sixty-something, tall, and stern. He’d been working on a heart-lung transplant for nearly three hours straight. He was not about to be pulled from such a delicate procedure. But he took a moment to review the films and said, “It looks bad. Wake up Tom Montgomery and bring him in.” When the nurse didn’t move fast enough, he added, “And I mean yesterday.” Then he

told Declan, “Make sure you keep her alive. If she crashes, well, it’s all you, Dec. Can you handle it?” He looked at Declan over his surgical mask with a set of gray, piercing eyes.

“Of course,” Declan replied. Under the circumstances, this was any surgeon’s standard answer.

Declan burst out of that room and went into the suite with the gunshot wound case. He asked the attending surgeon, who was also too busy to help, if he would occasionally look in and help the neuro guys. Declan got a positive nod. Along with Dr. Williams, he rushed to the ER to check on the patient in question. The anesthesiologist had finally sedated her. She was now on a gurney, sleeping.



“Hey, how do you know this? What does this have to do with the package?” Frank shook his head. “Honey, please don’t embellish the story. Just tell me what this is all about. You’ve never even been to Texas.”

“Shut up, Frank. I am telling you exactly the way it is and how this box came to lie on our kitchen table. Besides, you surely enjoy a detailed story. I know things because my docs talk to me. A lot of Declan’s story I got one afternoon when you were on a fishing trip. I invited him over for lunch after one of his lectures on Science Hill. So, sit there, shut your hole, and listen. Pass me the sugar. Anyway, before I was so rudely interrupted, the story is that this girl—”

“When you say ‘girl,’ you don’t mean...?” Frank pointed to the mahogany box on the table.

“Well, I think so.” And again I asked him to stop interrupting so I could continue telling him Declan’s story.



The girl was, well, troubled—emotionally and socially. You know, into drugs and all kinds of questionable endeavors. She had apparently been having a routine night out with a group of friends when they decided to drive down from Houston to join the decadence in Galveston. They didn't make it far. Just outside the Clear Lake city limits, they plowed into the side of a big rig. Half of them went to a hospital there, and two, including this girl, were airlifted to the trauma center in Galveston.

Now she lay in a trauma bay, disheveled and reeking of alcohol. A catheter hung from her bladder, tubes protruded from both sides of her chest, and streaks of dried blood covered her body. Her lips and eyelids were painted black. Gunk was visible under her nails. Parts of her skin were cracked and blemished. Her multicolored hair was stiff and greasy. Metal rings pierced various body parts, but despite these decorations, she had a semblance of personal neglect.

When Declan arrived to examine her, two medical students were at her sides, cleaning up her wounds and looking for one deep enough to practice suturing. He stood at the foot of the stretcher for a minute before he placed a hand on her. In turn, members of the trauma team stared at him, hoping he would make a decision about the patient and allow them to go back to sleep.

After a brief physical exam, he looked at the medical students and said, "Carry on, guys." Then, to the chief resident in charge of Trauma Team One, he said, "Hey, Brian, if I go to the OR with this one, I will need you. So, you can send the rest of the team to sleep. Let your attending know, and share the love with Team Two—they are now first call for the night."

Soon, Declan was on the phone with Dr. Montgomery, who was caught on the mainland trying to get across the causeway to the island. Declan described the patient to him as a twenty-four-year-old, heavily intoxicated woman who had been involved in a motor vehicle accident and had suffered several fractures,

small lacerations to the extremities, bilateral pneumothoraces, and blunt trauma to the chest. Radiology studies, among other things, showed evidence of an aortic injury. And that yes, she was still alive and presently stable. Declan was ordered to prepare a cardiac surgery suite and round up a couple of general surgery residents, which he had already done.

As Dec sat in the emergency room waiting for Dr. Montgomery to arrive and finish the preparations, he felt an abysmal uncertainty. He knew the patient was facing an uphill battle. His superior was stuck in impenetrable traffic, and his patient was one of the two out of a hundred people with a ruptured aorta who arrive at a hospital alive.

I can't let someone so young die, he thought.

During the physical exam, his thoughts had briefly wandered beyond medical technicalities. A singular uneasiness enveloped him in the minute or so he'd stood at the bedside observing the patient. *How could someone so beautiful wear this mask?* he'd wondered.

When Declan looked at this patient, he was able to see beyond her appearance. He was caught off guard by an ambivalence of feelings that swayed from a detached doctor-patient relationship to something more—a rush of feelings he had never previously experienced when assessing a patient.

As Declan was still trying to make sense of his emotions, one of the medical students burst out of the trauma bay and shouted urgently that the patient's breathing and tracings on the monitor didn't look right.

She was crashing.