The Bracelet

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The Bracelet

Laurel O’Connor, MD

It was a testament to her distraction that it took her so long to notice that the bracelet was missing. The familiar cool weight on her right wrist, usually tucked just under her sleeve was gone. She stared at the naked limb for a moment but peculiarly felt none of the usual frustration and regret that accompanied losing a loved possession. Instead she felt oddly peaceful, accelerated forward into the acceptance stage of grief. It must have fallen off, and was probably long buried inside a ripped glove, at the bottom of a biohazard bag. It was nobody's fault and it was gone. Half-heartedly she wanders back to the now pristine trauma bay, eyes roving over the now shining, damp floor and empty trash bins. A crisp sheet covers the stretcher and the room smells faintly of bleach. She thinks that the missing bracelet is an exercise in perspective.

One hour ago, she was standing in the exact same spot, setting up her table. It's almost a meditation; she's done it so many times. She taps out a rhythm in her head. Open the airway cart. Endotracheal tube out, stylet loaded, check the balloon with a syringe. Mac 4 blade, test the handle light. Video scope loaded up behind and to the left just in case. Oxygen on. Suction ready.

The room buzzes with sordid anticipation as the staff gathers. People waiver between speculating on the nature of the trauma, and casual work chat, the weather and an upcoming trip to the Caribbean, a vent being turned on, someone’s kid is failing math. Chest tube and cordis kits loaded onto metal stands, the Belmont transfusion machine whirring to life, the weather again. What should they order for dinner? She thinks, in five minutes flat,
lives will be altered or ended. As they leave the room, they’ll finish their conversation about Aruba. Then take a deep breath, wipe their foreheads, and move on to the next room.

The medics turn the corner, and a disciplined silence falls. It’s a wretched package that they move over to the stretcher, wrapped in straps and immobilizers, the fabric of jeans, a shirt, a jacket, half cut off and hanging over the edge. The green bag over a man’s face, giving jerky breaths between report.

“Male, unknown age, hit by pickup truck at high speed. Thrown twenty feet. GCS 4 on scene. Unable to intubate. Hypotensive, tachycardic. Unstable pelvis. Large volume of blood. Obvious open right femur.” She picks over the words she hears as she pulls her mask on and grabs hold of the spattered backboard.

The medic finishes and it’s like someone wrenches up the volume on a speaker.

_Airway is not secure; let’s get an airway Seventy-two over thirty

Get him on the monitor

Open the Cordis kit

I need a blood runner

As her hands do what they’ve done a hundred times, muscle memory kicking in, she thinks I could have been an accountant, an art historian, one of those nebulous consultants, but here I am. Absurdly she wants to laugh.

“Etomiadate and Rocuronium are in, let’s have a look,” she says instead.
Blood splashes the top of her face shield as she pries open his mouth, and she nudges the mask with her elbow so the smudge isn't obstructing her view. Teeth, tongue, posterior oropharynx, then just pink. Too far in, she pulls back, and the epiglottis swings down.

“O2 Sat 95, 94,” someone yells accusingly. She pushes up and away, and a bloody mess awaits her.

“Suction.”

“91 percent.” She maneuvers the yankuar in and out, and is rewarded with a glimpse of white vocal cords.

“Tube.” Someone shoves the tube into her hand and she slides it down past the mac blade.

“Tube is in.” The respiratory therapist pulls the stylet. The end-title CO2 monitor turns gold with the first ventilation.

“Tube is good.” She looks up, the spell of concentration broken and the sound of the room rachets up again. To her left, a chest tube is being loaded onto a kelly clamp; the resident’s fingers are already snaking their way into the man’s chest. On the right the cordis is being slammed into the groin, and two nurses are hanging blood on the Belmont. Someone pages orthopedics for the femur fracture and they’ve called back over the speakerphone, shouting over the chaos. The monitor beeps so furiously that it seems like it might implode. The heart rate is too high, the blood pressure too low.

Her bracelet slides up her wrist. It’s just a light chain with a single silver charm; a gift to her from her sisters on her wedding day. She lifts her arm so it slides back beneath her sleeve.
She looks down at the patient and wipes some of the blood from his mutilated face. He couldn’t be more than thirty, if that, she surmises from the few unscathed patches of smooth skin and dark hair. Gently she pries back his eyelids and shines a penlight down over them. Blown pupils, nonreactive. She has a sneaking suspicion she knows how this story is going to end.

*I need another blood runner Call the OR

*Get me the 6-inch plaster

The urge to laugh is back. She isn’t a particularly excitable person, at least by her own standards. In fact the usual furrowing of her forehead and half lidded look to her eyes that some might mistake for disinterest or apprehension is actual her thinking, working expression, running through algorithms, techniques, and memories. She doesn’t get agitated or loud, only quieter and more precise. When she’s truly thrown off her guard, out in the deep end, ready to flee, she laughs. She stifles a giggle and wonders if this is what it feels like to glance up during combat, everything slowing and blurring, the observer not quite believing each event as it happens, yet seeing the aftermath of violence as though under a microscope.

She notices a broken fingernail on his left pinky, which is flopping carelessly over the side of the stretcher. A shred of blue fabric tucked under his shoulder is a remnant of the tee shirt he was wearing. Little did he know when he pulled it on this morning that it would soon be cut to pieces by strangers. She wonders if he had liked that shirt.

*I lost my pulse

No carotid pulse
Start Compressions Epinephrine

Get me a thoracotomy tray Get that blood in now

He has a tattoo on his chest, on the right side, a gnarled bare tree, its branches twisting up around his clavicle towards his shoulder. Does it represent a memory, or a symbol that meant something only to him, or maybe a drunken lark? The branches dance as though windswept as they push up and down on his chest. She lays a hand on his neck and concentrates on feeling.

Rhythm check

Gently fluttering under her fingers, a light quivering beat.

“I have a carotid pulse,” she yells out, twice because the first time her voice is too quiet to be heard. She hadn’t adjusted to the noise of the room.

OR is ready

Is that leg stabilized?

CT surgery is on their way Family in the waiting room

She lays her hand on his neck, stabilizing it with her other, half afraid if she moves it will be gone. She imagines a butterfly under her fingers, flitting out to perch on the barren tree below it. She imagines a thousand things he hasn’t seen or done. She wonders if he’s dreaming right now.

“What’s my neuro exam?” She looks up.

“What pupils six millimeters bilaterally, not reactive.”
There’s a momentary lull in the noise level; everyone in the room knows this portends badly. The social worker’s shoulders square up as she prepares herself for the conversations ahead. The trauma chief wonders crudely if they’re fighting a futile battle.

Not yet, she thinks. The butterfly is still under her fingers, trying valiantly to escape.

Her bracelet slides back down her wrist. She remembers her wedding day, then thinks of all the days she remembers. Who is going to remember today? A wife? A child? Parents? Will she? How many days like this can she bear to remember?

“Pulse is gone.”

*Get those sharps out of the way Start CPR*

*I have a carotid pulse!*

She imagines a green and yellow butterfly on a bleak winter tree.

It happens again and again, a skipping record. More blood, more adrenaline for patient and providers both. Every time the flickering pulse is fainter. She wants to feel it so ardently she worries she’ll imagine its presence.

*How many units are in? Pelvic immobilizer Continue CPR*

And then it’s over.

*Time of death, 16:41. Thank you everyone.*

Around her, people pull off masks and gowns, gingerly throw away scalpels and needles, tuck tubes and lines underneath a clean white sheet, which seems out of place in the room.
strenuous with debris. There is iodine and blood splattered across every surface. She thinks about how it was probably a normal day for this man. There would be calls, and so many more normal days would begin to end.

They walk out of the bay. The trauma intern slams an open palm against the wall. Outside the light is fading even though it is only midafternoon. For a moment she thinks about slipping outside into the bitter cold air, just to breathe. Before she can flee, two nurses are upon her.

“Five wants more pain medicine.” “The family in three wants an update.”

She takes a breath.

The drunk in the hallway is waking up and harassing the tech watching him. A slew of resulted labs and unseen patients no doubt wait on her computer-screen. A young man in his twenties lies in a stretcher waiting for her to stitch up his wrist, which fell victim to a box cutter at work. His mother catches her sleeve.

“Miss, when are you going to take care of this?”

She eyes the cut and thinks about the broken face, one that would have taken hours to repair, but the chore now rendered tragically unnecessary.

“As soon as I can.”

“We’ve waited almost an hour.”

“I’m sorry, I’ll get to it as soon as-” “And that will be-”

Irritation and decorum battle in her head.
A colleague walking the other way clasps her on the shoulder and turns her around. “Excuse me,” he says. “I need her for a second.” He drags her away.

“What’s up?”

“Just rescuing you. Are you OK?” She nods.

Breathe, next room. Perspective.

A blonde nurse stands in front of her, eyes pleading. “Room three, now please. The family is driving me-” “Ok room three, I’m going!”

Three middle-aged women converge on her as she enters the room, jumping up from their vigil around the family patriarch.

“No one’s been in here for hours. What’s going on?”

“Well so far, all of the tests have been reassuring.”

“Well he’s not leaving until he gets a diagnosis.” She gives the room a wane smile.

“Well sometimes in the emergency department we don’t get a diagnosis, but we rule out the life threatening things and-” She watched their hard eyes and knew her usual strategy wasn’t making headway. At the back of her mind she’s still counting compressions and frantically searching for that elusive winged heartbeat. Her words die in her throat.

“We are waiting for few more tests to result. I’ll be back as soon when they’re available. Please excuse me.” She turns on her heel before they can demand specifics.

Out in the hallway, she shrugs her shoulders, then notices the absence of cool metal sliding down her wrist. She pulls back her sleeve. The bracelet is gone.