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ENG 100

Formal Assignment #1

March 10, 2018

A Room with a View

“Christine”

I opened my eyes to a well-dressed attractive man standing over my bed. He was trying to wake me as gently as possible. It was dark, and I was momentarily confused as to where I was. There was a curtain on my left, a white board in front of me, and a bathroom to my right.

“Hi, I am doctor Vollmer, we need to discuss how we are going to try and fix your problem”

“Can you have your husband meet us here at 5 pm this evening, we will need to go over our options for tomorrow.”

Bleary eyed, I agreed, and he walked out of the room, his shoes going click, click, click as he walked down the hall. I looked at the white board in front of me. NPO in big letters stared back at me. I sighed and rolled over. No food or water again today. I was surprised how used to not eating you get. I wondered why all those diets I had been on had been so hard. I turned on the television and searched for anything of interest. It was the only entertainment that I had in my closed in little space. My roommate next to me at least could look out the window. I thought of going over and saying hi just for a different view and some conversation, but she seemed to be in a lot of pain and very heavily drugged. I couldn't wait for Tom to show up with my things

from home. I should have thought to bring my I-pad and maybe even a book yesterday when I came in for my out-patient procedure. I had no idea that I would be staying. My phone was down to 30 percent and I didn't have a charger, so I was afraid that it would die, and I would be left all alone in my small sterile space. I spent most of the morning just channel surfing and napping. Breakfast and lunch came and went. The smell of my room-mate's food made my mouth water. I know it was hospital food, but it smelled good anyway. Tom finally showed up with my duffel bag filled with the requested things from home, slippers (I hate hospital socks) underwear, toothbrush, I-pad, and chargers. We had no idea what to expect later so we just sat quietly watching TV. Just after 5:00, the handsome doctor came down the hall, the clicking of his shoes preceding him. He sat down next to the bed and started to talk.

"What your previous doctors thought was a gallstone, or a bile duct constriction is actually a tumor in your pancreas that is pressing on the bile duct. This is causing the bile to back up into your liver and why it is enlarged and shutting down." He brought out a brochure that showed the area of the digestive system that was in question, so we could visualize what was going on.

"99% of the time, tumors in the pancreas are very aggressive form of cancer. I would like to go in and see how big the tumor is and see if it has spread to the liver. If the cancer has spread or if the tumor is around the portal vein or artery, I will have to just sew you back up and we will have to find other options. Best case scenario, I will be able to perform a whipple operation. This is not an easy surgery, I will remove the effected part of the pancreas, gallbladder, and duodenum. The operation will take from 8 to 10 hours and is the longest and most complicated surgery we perform at this hospital. There are many risks involved with such a long surgery and even if everything goes perfectly, there will be a lot of side effects. You will

have difficulty digesting most foods and will struggle to thrive for the rest of your life. The surgery will most likely buy you some more time and I think it is the best path for you to take.”

The room grew very quiet as I sat there in shock. Should I try and enjoy what time and health I had, or do I spend the rest of my life struggling and sick. As the silence dragged on, I just kept coming back to the same thought, how am I going to tell Lauren that her mother is going to die. I knew then what my decision had to be. I don't have a choice, Lauren needs me to be at her graduation this spring. I've never heard of half of these body parts any way. How important can they be? If this is my best hope of gaining more time, I need to do it for Lauren.

I agreed to the surgery and he left the room shoes clicking down the hall. That night, my nurse came in and said that the doctor had released the NPO and I could have one meal before midnight. Unfortunately, dinner had already been served but she was able to find me a turkey sandwich. If this is going to be my last meal, I am making the most of it. I ate every crumb. The next morning, the transport team was supposed to pick me up and have me down stairs at 9:00 a.m. At 9:45 I hear click, click, click in the hall and Dr. Vollmer enters the room.

“Have you changed your mind?” he asked.

“No, they just haven't come to get me yet.”

“Is there anything you will need after the surgery?”

“Can you get me a bed by the window? I feel so closed in here.”

“I will try my best” he said as he squeezed my hand.

The transport finally showed up and I am rolled down endless halls and 3 elevators to a room full of fabric partitions. The nurses start new IVs and the anesthesiologist came in and asked all the usual questions. Then the pain management doctor showed up.

“I do not want any narcotic pain killers, they make me throw up” I told him with a lot of confidence.

“There is no way that you can avoid them, we will have to give you medicine for the nausea and any other side effects. You will also have an epidural going into your spine for at least 4 days.” He snapped back at me. I could see he and I were not going to get along.

The severity of the operation was starting to sink in. The time came, and I was wheeled into a large sterile room full of equipment and nurses. I climbed out of my bed and onto the narrow metal operating table. I always found it odd that you climb onto the operating table yourself, I feel like a victim of some ancient sacrifice. My doctor came in and squeezed my hand.

“Everything will be fine, I will see you later tonight”. He told me as I counted backwards.

“Christine”

“Christine”, I hear off in the distance. I try to ignore it and go back to sleep.

“Christine”. I open one eye,

“How do you feel”, Humph, blackness.

“Christine”

Whatever, leave me alone, let me sleep. Very vague memories of hallways and elevators again, drifting in and out of sleep. Finally, I open my eyes, Curtains, 2 chairs, twinkling lights in the distance, and a whiteboard with NPO in big letters. Time passes, I come fully awake. I assess myself, expecting severe pain. My throat hurts, stomach is all bandaged, 2 ivs in my right hand, hmm, two ivs in my left hand, whoa. Not too bad, except for my throat. I brush my hand across my face and feel another tube going up my nose. This is obviously the cause of the throat pain. Nurses come and go checking on me. They replace bags and inject medicine into my iv lines. I drift back off to nothing.

The next day, click, click, click down the hall and I see Dr. Vollmer enter the room.

“How is my star patient?”

“My throat hurts”

“That is the tube taking excess stomach acid out, you have to have that for another 2 days”

“I don’t know if I can take it, it is driving me crazy”

“I came to let you know that obviously we were able to do the surgery, I didn’t see anything other than the 2cm tumor, it was well placed, I removed it and performed the rest of the surgery. You will be here for 6-7 days and then you can go home. We will have a preliminary pathology in a few days and we will discuss what to do next.”

Two days after the surgery, I got a roommate. She was on the other side of the room by the door in the closed-in area with no windows. Surprisingly we lived just a few blocks from each other. She had a failed colon cancer surgery; her cancer was too far spread to do anything.

We didn't talk about it for the rest of the time she was there. The day she went home we said that we would keep in touch, but we both knew that we wouldn't. Neither of us had the time to make new friends. On day 6, click, click, click down the hall and in walks Dr. Vollmer.

"I have good news for you, your preliminary pathology came back. It looks like you have a rare type of cancer that effects different cells in your pancreas. This type is a lot less aggressive and can be managed for a much longer time. I will set you up with our head of pancreatic oncology department, she will have the most experience with this. Only about 2% of patients get this type of cancer. Get your stuff packed, I will come in tomorrow around noon and give you one final check and then you can go home. Tomorrow is Christmas eve and I know you will want to spend it with your family at home."

I was excited to be home for Christmas. There were a ton of amazon boxes waiting to be wrapped. Six days of sitting in bed with an I-pad and a credit card gives you plenty of shopping opportunity and at that point I was resenting my 401K that I had been saving for years.

The next day around noon, Dr. Vollmer came in.

"Well everything looks great, I will sign off and they will be up to get you in an hour or so. Oh, I forgot to ask. How did I do with the view" motioning towards the windows wrapping around the corner room.

"It is more than I could have hoped for, thank you". As he walked down the hall I heard the click, click, click fade into the distance.

