

Old Scrubs

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Doctor Hal Winters remembers watching construction workers pour and grind the terrazzo floors in this wing of the hospital. Over the three decades since then, he has walked these corridors thousands of times; each crack, patch, and undulation is familiar. Were there ever a need to get from one end of the building to the other in pitch darkness—during a power failure or natural disaster perhaps—he could find his way by tracing the floor’s subtle ripples and feeling the textures and seams of the wall coverings. *Someday, before I retire, I’ll try doing just that.* He turns the corner and heads toward the operating room as efficiently as his aging joints will allow.

Hal’s patient, Betty, is half-asleep by the time he changes into scrubs and walks into OR25. Over the years, he has biopsied, removed, or reconstructed something on nearly every member of Betty’s family. He grips her shoulder. “We’ll have that big old lump out of your neck in a jiffy! I’ll talk to Cliff as soon as we’re done. See you in Recovery.” She nods as her eyelids drift closed. In a few minutes, the procedure is underway.

Hal pulls the knife through the skin and begins to separate the normal tissues from the rock-hard mass. “Retractor.” He rearranges the instruments. “Here, hold this,” he says to the surgical tech. Hal notices that the mass is stuck to the surrounding muscles and veins. *This is going to be more difficult than I thought.*

The chief of surgery, Doctor Julie Pembroke, peeks through the doorway. “Good morning, everyone!” she sings. “Everything okay, Doctor Winters?”

Hal glances up, squinting obliquely at her from under his heavy, graying eyebrows. Back in the day when Doctor Pembroke was probably still in high school, Hal was working eighty hours per week and tackling every challenge thrown at him. Colleagues referred their most difficult cases. Not anymore. No one said anything, but he knows people call the younger surgeons now. He pauses, shrugs, and drops his gaze back to the surgical field. “Got it covered, Doctor. Thank you.” There is an unmistakable growl in his voice. Her face disappears and the door drifts closed.

Soon, the mass is almost out. As his knife makes its final swipe, blood unexpectedly floods the operative field. “More sponges!” He instinctively presses his left fingertips firmly into the center of the wound, staunching the flow of blood pouring from the vein he has inadvertently cut. “I need you to pay attention!” he barks at the surgical tech. “Unclamp the suction!” She reaches to release the suction tubing. “Now give me another hemostat!” He plunges the tips of the clamp into the pooling blood aiming where, experience tells him, the vein has been damaged. He tightens the clamp and tilts its handle toward the tech. “Here, steady this while I tie things off.” He throws some knots, then removes the hemostat from

the wound. The bleeding resumes unchecked. “Another clamp!” He repeats the process twice, adding more ties. He throws stitches into the wound and snugs the sutures tight. “All right,” he says. “Let’s see if that did it.” He releases pressure on the wound and watches. The bleeding is controlled. “Okay. That’s better. Let’s get this thing closed.”

Hal rinses the wound with saline and dries the area with a gauze. As he does so, he notices an unexpected glistening, pale, spaghetti noodle-sized white stump of tissue caught in one of his silk ties. “Damn,” he says. “Get me a nerve stimulator.” Hal reluctantly touches the electrode of the device to the stump, then groans as the nearby muscles jump vigorously. *Just what I needed*, he thinks. *I cut the damn nerve*. “Call someone from Plastics and tell them to come fix this.”

Ninety minutes later, the young plastic surgeon—whose name Hal has forgotten—is giving her contact information to Betty’s husband. “Now, Clifford,” she warns, “even though we sewed the cut ends of the nerve back together, her range of motion will never be the same. Her shoulder muscles will be very weak for several months so physical therapy will be critical. Make an appointment to see me next week.” Hal wonders how quickly news of his complication is spreading through the hospital. He avoids Cliff’s gaze and says little.

Betty is sitting up in bed when Hal stops by the Recovery Room. He grips her hand for a few seconds, frowns, then heads to the locker room, avoiding the surgeons lounge and the OR front desk.

The locker room is empty when Hal sits down on the bench and kicks off his old, stained surgical shoes. He pulls off his scrubs and dresses slowly.

After dropping his scrubs in the laundry hamper, Hal slips into his lab coat. He grabs his pager off the locker shelf, clips it to his belt, then pats his pockets to make certain he has not left anything behind. He hears the hospital-issue lock bang against the chipped blue painted metal as he kicks the locker door closed. He looks around the room and turns to leave.

People push past Hal as he makes his way into the brightly-lit corridor. After two tentative steps, he brushes the fingertips of his right hand against the wall, gathers in a deep breath, and continues silently down the long, familiar hallway with his eyes tightly closed.