

Your Friendly Hospital (1972)

Auteur(s) : Malaquais, Jean

Les folios

En passant la souris sur une vignette, le titre de l'image apparaît.

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DescriptionMalaquais témoigne dans ce texte d'une hospitalisation aux Etats-Unis en 1972.

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Victoria Pleuchot (Société Jean Malaquais) ; EMAN, Thalim (CNRS-ENS-Sorbonne nouvelle).

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Dear Friendly Hospital

Dear Friendly Hospital

"Your physician has made arrangements for your admission to the hospital. While you are here, it will be the aim of our staff to make your stay as comfortable and pleasant as possible."

I entered the hospital on November 19, 1972, at 1:50 p.m. The private room I had asked for had no bath, toilet or washbasin. There were two chairs, one of them spilling out its ugly inserts. The walls were soiled, the floor unclean, tufts of dirt and lint could be seen in the corners. A thin whitish towel was neatly folded at the foot of the bed. Then, after several futile attempts I finally succeeded in getting hold of the only bathroom of the far end of the corridor -- for it was constantly occupied by sniffling and puffing patients -- I had the doubtful pleasure of discovering two bloodstains in the ideal centre of my towel.

At about 3 p.m. a girl walked into the room, armed with a syringe and a handful of vial liners for blood samples. Her efficiency was perfect and quite robot-like. Before I could say hello my sleeve went up, the needle went in and blood went out. Then she smiled off and I was struck by her demeanor: she had the most incredible gait and bearing I ever saw in a woman. The same ritual was performed four or five times during my two weeks' stay at the hospital: she walked in, drew blood, dashed out, carrying herself like a drill-sergeant, and never was a word exchanged.

Shortly afterwards there was a knock on the door and Dr. H., the surgeon, and Dr. J., his assistant, came in. Both were tall, pleasant-looking men, the former in his early sixties,

Inst-Friendly Hospital

Your Friendly Hospital

"Your physician has made arrangements for your admission to the hospital. While you are here, it will be the aim of our staff to make your stay as comfortable and pleasant as possible."

I entered the hospital on November 15, 1972, at 1:30 p.m. The private room I had asked for had no bath, toilet or washbasin. There were two ^{old} chairs, one of them spilling out its ugly innards. The walls were soiled, the floor showed; tufts of dirt and lint could be seen in the corners. A thin white towel was neatly folded at the foot of the bed. Then, after several futile attempts I finally succeeded in getting hold of the only bathroom at the far end of the corridor -- for it was constantly occupied by laughing and juggling patients -- I had the doubtful pleasure of discovering two bloodstains in the ideal centre of my towel.

At about 5 p.m. a girl walked into the room, armed with a syringe and a handful of vacutainers for blood samples. Her efficiency was perfect and quite robot-like. Before I could say howdy my sleeve went up, the needle went in and blood went out. Then she walked off and I was struck by her demeanor: she had the most incredible poise and bearing I ever saw in a woman. The same ritual was performed four or five times during my two weeks' stay at the hospital: she dashed in, drew blood, dashed out, carrying herself like a drill-sergeant, and never was a word exchanged.

Shortly afterwards there was a knock on the door and Dr. S., the surgeon, and Dr. C., his assistant, came in. Both were tall, pleasant-looking men, the former in his early sixties,

with something petrinian about his, the latter in his mid-thirties and, at least by comparison, rather of the pure common breed. They introduced themselves, Dr. H. asked a few general questions, made a perfunctory local examination, and "They'll call you in a minute for X-rays, so you're ready for tomorrow's cystoscopy." I settled down with a book next to the floor lamp, but the bulb was dead. After some haggling with a couple of bureaucrats I was promised a new bulb and another room for the next day. Girls were running in and out - what with blood pressure, temperature, urine samples, etc. Some ever knocked on the door; ~~some~~ ~~of~~ civility was obviously beyond their grasp. Neither did they close the door. Toward my last days at the hospital the thing became a standing joke with some of them. Leaving my room they would wriggle their rumps and cock me in a singsong voice, "Do close the door, please..." The ~~most~~ ^{most} considerate would say they'd try to remember. They seldom did. Soon after a handyman brought a bulb for the floor lamp, a young resident physician came in and gave me quite a thorough examination. Noticing a cold sore on the shell of my head he said a dermatologist would be asked to come and have a look. I am still waiting for him. As the young doctor left, so did the floor lamp; they needed it somewhere else.

Next day, at 9 a.m. I was wheeled into an elevator and brought downstairs for a cystoscopy. It was plain as day that I was more nimble than the fellow who was pushing my cart. Still rules were rules, and one had to be sheeled. We traveled through long cor-

riders full of sitting, sprawling, loitering and otherwise loud-speaking people. I waited for a couple of hours in a tiny airless room, wedged between two doors opening onto smelly lavatories. It was past eleven when Dr. H. showed up, as I was hurried readied for the x-ray. He asked to see the X-rays. There were none: they ~~had been~~ ^{had just} forgotten that I was to be X-rayed. Giving vent to his anger Dr. H. yelled, "What the hell is going on here!" then proceeded with the examination - X-rays or no X-rays. From there I was wheeled to the radiology department, only to be told after waiting for thirty or forty minutes that it was lunchtime and wouldn't I please come back at 1:05. This being indeed lunchtime, there was nobody to wheel me back to my room. So I walked on my own, accompanied by a girl in a dandy-striped smock of the volunteer worker. Once in the elevator, I asked her how old she was. She looked ~~fourteen~~ ^{fourteen} but ~~said~~ ^{said} she was sixteen. Her pair blue eyes were tilted and perfectly expressionless. She wore an extraordinary blonde feather afro about two feet in diameter and a gold ring in her left nostril. No, it wasn't a wig, she answered my question. Yes, there was a hole punched in her nostril, she confessed. How a ring in a ring is a ring, and I don't see why it should be respectable to wear one in your ear and desirable to have it dangling from your nose. Still, one wonders why the improbable advantages derived from voluntary help should prohibit a modicum of screening. This being a hospital, and given the sudden intolerance of the average adult toward the young, one wonders about the psychological boon the cares, however trivial, of Gothic-looking teenagers

Your Friendly Hospital

may bring suffering out, you, sometimes dying people.

In 1945 I was wheeled back to the radiology department. A pleasantly cheerful woman helped me lie down on the X-ray table and said she was going to fetch the doctors for the dye injection. "Don't move, it won't take a minute." She was an optimist. It took close to an hour for the gentleness to materialize. He stuck a needle into my left arm vein, then looked around for my chart. No chart. He shook his head and asked me, did I know my blood pressure and was I particularly allergic to neuroproteins. I said blood pressure was normal, and as for being allergic to whatever he meant by neuroproteins I wouldn't know. ~~xxxxx~~ ^{Gull,} what does a physician do with an ignorant of your kind? He gave a shot with the injection, stupid. A few years ago, in backward Cambodia, at the temple of Angkor Wat, I slipped over a loose stone and broke my right heel. I also got an open wound on my right elbow. "Yessss," said the local medic, admiring the damage. "You ever given antibiotic serum? Aray, maybe? No remember? O.K. we now give shot. You allergic; you need five minutes. We see." I chose not to let ~~me~~ ^{him} see. But here, in progressive America, I had no choice: the needle was already in my vein, and so was the dye. An uncharted sweat broke all over my body and I became dizzy and short of breath, I caught a glimpse of my man. He was burning quite pale, poor fellow: suppose I was perverse enough to pass out and away right there and then, and who'd be the worse off? Not I, damn it!

That afternoon I moved to my new quarters. There was a bath-

Your Friendly Neighbor

room there, which, to say the least, was a generous slice of my being in through the window. I felt almost grateful the room was a pretty little failure per day. Dinner was brought in by Mrs. D., T. and G. -- the latter an socialist -- showed up. They explained that I was to be operated on the next day at 11:30 p.m., approved my preference for a spinal anesthesia, took me a good night's rest. I was plugging a greasy fork into a baked potato -- I hadn't had a bite in 34 hours -- when Dr. D.'s assistant presented himself to check the proper alignment of my earthly spine. "What do you think you are doing?" he asked, pointing a stern forefinger at my potato. "Isn't they tell you to eat tonight?" Well, they did not. The story with the food had been right under their noses all the while they were briefing me, but the matter was never raised. After some heavy brainwork I came to the blinding conclusion that what I had taken for professional negligence was indeed grateful behavior I couldn't see either because of food he tookerant to trailing me in no way words that even a hangover should know better than getting himself a few hours prior to being sliced open? That's it, they were damn well embarrassing the poor patient. Thus comforted, I happily gave some more of my blood to the drill-sergeant girl, was sure of my mind to the attendant, refused sleeping pills and went to bed with Doris Chestnut's The Remnants of Ben Jung.

On November 17, ninety minutes before the appointed time, I was carried away. Downstairs was as busy as Grand Central at noon. Doors swung, telephones rang, loudspeakers blared, typists

Your Friendly Neighbor

6

typed, white-clothed nurses ran in circles, blue-clothed surgeons with masks pushed up their foreheads hurried ~~up~~ ^{along} there, lying in a row among other patients beneath a green-painted wall. I doubted five people being wheeled out on their casket stretchers from the operating room. Cadaverous, moaning, rattling in the throat, connected to rods and pins and tubes, they weren't exactly a corpse-boosting sight under their bloodied sheets. Just behind me a woman in her late seventies was becoming hysterical. A doctor spotted her, came over, glanced at her apart — and exploded. "Damn! Who fed you lunch? You can't go into surgery with a bellyful of grub!" To wit behold, once again the truth were my speculations about the exquisite politics of the medical man.

The operation itself was a beauty. The assistant anesthesiologist asked me to curl up, checked again my precious vertebrae, found the one he liked best, put in some Novocain, inserted the most formidable needle I ever saw. He was so efficient I hardly felt a prick. When I returned the horizontal position Dr. G. drove the tiniest ^{of} needles into a vein at the back of my left hand, secured it with tape around a small towel he placed beneath my palm, hooked me up to the intravenous solution, and colorless life started to ooze into my system. He snatched for a while as Drs. A. and B. busied themselves over my anatomy, and soon I noticed I couldn't wriggle my toes. The feel of death from my hips down was quite extraordinary. I made heroic attempts at moving my legs; it was utterly unbelievable that half of that flesh which was we should dare to scorn my will. I had a good

Our Friendly Nurses

view of the surgeons' hands and shoulders, but a dark crowd about
rised above my head prevented me from seeing their faces. "Are
you already working on me?" I asked. "Yes sir," said Dr. H.
without looking up. "Have you been at it long?" "Fifteen minutes
or so," he said. Oh, in spite of my resolve to hold on like old
Billy Bell, not only did my body and mind drift apart but I mis-
took track of time. It was both humiliating and amusing. Humilia-
ting, for the gross living convulsions of my brain had been
uncoiled first by a few drops of lead nitrate and cocaine, for
I was actually exporting the material to stimulate the smooth ar-
rangement of my viscera. I don't say if it was half-success or
whether my end-nerves did as they were told, but pain leaped
through the innermost parts of my being and I felt strongly
elated. Now that I had it my way, that no such piece of meat
~~was~~ prevailed over my thoughts, I was willing and ready to put
out to sea. Instead I was bread up and stowed away in the re-
covery room. It was night when I woke up in my room. I surse
was shooting morphine into my arm.

From there on things became more heroic. The nurses were
young, inexperienced, overworked and generally undependable.
A few random questions revealed that most of them had about six
year or so of professional training. Out of the eight nurses
I came to know, six said they were not expecting to stay; they
were underpaid, the work was exhausting, the neighborhood dan-
gerous. Though they were new on their jobs, they already showed

the scars and blemishes of occupational apathy : a patient was a drug and a nuisance. For the first three days following surgery, as long as I ~~was~~ ^{was} unable to move, the bed was left undisturbed; thereafter, even though the sheets were changed daily, not once during the two weeks I remained at the hospital were they scooped out for night-time. Elbow and back sores resulted, which the girls, provided one asked them to, obligingly rubbed with some ointment. Except for the routine chores -- replacing the I.V. when it ran dry, drug distribution and an occasional shot in the arm -- one received no attention; even drinking water had to be asked for, which meant ringing the bell and waiting anywhere from ten minutes to an hour or longer. The subdued, rhythmic, steadfast ringing was obsessive; one's ear was glued to it as to some meticulous torturing device. I couldn't help but wonder how many of the twenty-nine patients on that floor were gasping, choking or turning pinkish while the bell went on and on and on.

A catheter inserted into my bladder through the abdominal wall kept me pinned flat on my back. The stabbing sensation was at times close to intolerable. The night after I was operated on I tried to summon a nurse and ask for a painkiller, but both the bell and light cords were beyond my reach : whoever wheeled me back from the recovery room had neglected to fasten them at the head of my bed. Writhing and squirming, I managed to get hold of the telephone on the bedside table and, groping in the dark, I called my wife who called the hospital. I suppose

she gave them a piece of her mind, for nurse and pill appeared as if by magic. The drug didn't work; the exercise had been too much and I spent a sleepless night. It must have shown because Dr. G., who made the rounds early in the morning, inquired what was the matter with me. I told him what and why. "Well," said he, his voice righteous, "you did reach the phone, didn't you?" The sight of a nurse who just then entered the room stopped me from telling him to go and hie it. She checked the I.V., wiped my face with a wet towel, propped me with my toothbrush over a small basin -- and my stomach heaved. "You sick?" she asked with solicitude, petting my head. "Want to throw up?" I clamped the basin and clutched it to my chest. "Couldn't you?" I stammered, trying hard not to vomit. "Couldn't you?" Sweet little nurse: instead of toothpaste she ^{had} fed me a brushful of hair cream.

Thus began my fourth day at the hospital. The incidents I have so far recounted cannot be ~~recounted~~ ^{reported} as a mere succession of fortuitous blunders. There was a pattern to it -- a pattern of untidiness verging on laxity. At least on two occasions I was aware of pills meant for other patients were handed to me. That I did not gulp them down was purely incidental; had I been less observant or too groggy to notice, chances are that several people would have ingested the wrong delicacies. In fact, the way things were done it was rather remarkable that mistakes of this kind didn't occur more often. The typical ~~mistake~~ ^{accident} could piece it together, runs like this. Once a day, nurse in

Now, your surgeon and/or his assistant come by, glance at your chart, say a few stereotyped reassuring words, scribble in the nurse the name and dosage of some drug you are to be given at such and such intervals, whereupon they drift to the next patient, and the next one, and the next one -- till the round of visits is completed. The nurse, who may or may not have jotted down their instructions (often they just memorize them), will then scrawl on a ledger the different items which, in turn, the doctors do or do not initial. How the prescriptions reach the hospital pharmacy, I don't know; be that as it may, the drugs get to their respective destination points in small envelopes bearing the patients' names, whence they are emptied into as many shallow unlined paper cups about one inch deep. These are arranged row after row on a large tray, with each envelope loosely wedged for identification purposes against its neighbor. Since the tray-carrying nurse must push open quite a number of doors, go from bed to bed, hand out the goodies, brief the patients as to what's what, etc., anything -- a draft, a slip, a bump, a bumpier into someone -- literally anything is liable to cause a mix up.

Why the pharmacy envelopes are emptied on arrival, is understandable: their contents have to be checked against the ledger; why the drugs are transferred into paper cups as shallow as that, even a slight jolt may spill them overboard, is less understandable; why, tempting the devil, the cups are left unmarked, is beyond understanding. Or is it? After all, tagging boxes of

expensive paper cups while there are these handy small envelopes with the recipients' identities neatly spelled on them, would be both repetitive and time-consuming. Granted, this does enhance the risk of confusion -- for instance with getting Brown's laxative. But then, as Hippocrates didn't say, errare humanum est. Or consider, for a change, the urine and blood chapters. Urine collecting, which was the province of female attendants, served two main purposes: laboratory tests and the evaluation of one's liquid input-output ratio. The precision instrument for figuring the output quantum was the attendant's eye: a look at the plain, non-calibrated glass jar, and one was worth 100 or 200 or whatever cc's she deemed right and proper. The input aggregate she determined after inquiring as to ~~as~~ what and how much fluids went down one's throat. One would say, "let us think, make it about two cups of water, one cup of tea, three sips of chicken broth," and this too the attendant smartly rendered into prescriptive cc's. Why, even, what for should any physician take stock of such expertise, I cannot imagine. Still, the Fluid Balance Sheet did provide instructive reading. Thus I was much enlightened to learn that, ^{which means} ~~their~~ their spelling was rather lax, water the attendants would write H₂O, not otherwise, and that among various cc's, coffee and apple juice -- two beverages I don't drink -- went a long way toward my personal hydration. As to that portion of one's output which was ^{sent} sent for the lab, it inevitably started on its journey in an unmarked receptacle. Since the same routine also presided over blood sampling, the

only explanation that comes to mind points either to a collective
fession for anonymity or to a general shortage of labels and
signs. The drill-sergeant girl scratches in, punctures your vein,
scratches out, and there goes your blood, any in a handful of
vacutainers. Untopped, of course. All three or four or five
of them, without the slightest identification. Carried off one
doesn't know where to, not to the lab, not immediately at any
rate, there may be other punctures on the girl's path, or she
may want to blow her nose, or scratch herself, or sneeze a chunk
with a ~~bit~~^{bit} -- it's all in a day's work. Or she clasps your and
possibly other vacutainers in her knowing hand, or slips them
in her pocket, or passes them on, will they find their way into
guess what, envelopes to be sure, only a little roomier now, and
she or someone else marks them with your or someone else's name.
Well, to misquote Hippocrates again, if life itself is a mishmash,
so why not your friendly hospital?

Friendly indeed. There was that unfailin' nurse and one of
the attendants who wandered lily into my room, when I asked would
they please adjust my pillows. "Push yourself up," said the
nurse. "Bend your knees and push yourself up." With that tube
stabbed into my bladder, the one thing I was supposed not to do
-- ^{assuming} ~~supposing~~ I'd be capable of it -- was to bend my knees. She
wasn't impressed. "I'm not your maid," she said. No, certainly
not, but I was hurting and wouldn't she please help me to dress
myself up. "Oh shit," she said, and walked out. The other girl,

Your Friendly Hospital

"Your physician has made arrangements for your admission to the

25

the attendant, remained there at the foot of my bed, giggling with merriment. I could see she felt buoyant. Subdued and vindicated. There was ^{and} a cool sister to her liking, not afraid to bowl out those ballyhooes, and thought they were the greatest. I waited for her mirth to subside and said would she mind crawling up the bed. She took hold of the crank, gave it a turn, but something must have clicked within her, some potent liberating force, because she dashed forward and snatched the pillow from under my head. "Hit up!" she shouted, reaching for the blanket. "On your feet, sister!" As I snugged at her to stop it, she doubled up in imitation of a cripple and launched into a wild frolic. "That's how you'll look!" she exulted, hobbling along. "You don't know nuttin' 'bout operational. That's how you'll be limp'n', baby!" I was both frightened and fascinated by her savage delight. There was no performing, no stage craft to it. She was all sparks ^{and} fire. It circled her, it burned away patches of immemorial wounds and I was going to be singed in the process. Only shame, only a bizarre sense of decorum kept me from yelling my head off. She was beautiful with innocence and wrath, and had I felt less wretched I'd have enjoyed it thoroughly.

Friendly indeed. There was that young nurse who, as I rested my head on her shoulder in a weak attempt to prop myself up, shrieked hysterically "Don't touch me, I've got a bed back!" There was that attendant who loved pouring sugar in one's tea, though repeatedly asked not to. There was that other attendant

Your Private Hospital

Your physician has made arrangements for your admission to the

14

who found it frail to slide the thermometer in one's mouth when it was hot from a scalding beverage. And there were one's first wobbly strolls...

On the morning of the third day after surgery I was to take a few steps with the help of a nurse. Because the catheter made it impossible for me to sit up the nurse propped my ankles, swiveling me ^{at} ninety degrees over the edge of the bed, then pulled me ^{down} by the gown till my feet reached the floor. To say that the transaction was both expeditious and brutal is hardly an over-^{bed}statement. But even so it was a picnic compared with what was to come before. There was, hooked to a tall stand, a plastic container from which the I.V. solution was dripping into my blood stream. Right above the floor, pinned to the bed sheet, was a plastic pouch. This and the catheter were connected by a flexible transparent tube through which blood and urine trickled down from my bladder. Both contraptions were on my left, in the narrow space between bed and window. Since there was no room there to swivel on one's buttocks with legs outstretched, the feat had to be accomplished clockwise, from left to right. First, though, the two containers must be switched across the bed. The I.V. presented no problem. Unhooked from the stand, handed over for me to hold it, it was promptly hooked back onto the stand which had been wheeled around the bed on its castor base. Next the pouch was unpinned -- nothing to it -- and suddenly it was hell and damnation. Time and again, instead of sliding it crosswise over my body, the nurses would lift the thing at arm's length

Your Friendly Hospital

*Your physician has made arrangements for your admission to the

29

and all the muck accumulated in the tube would flow back into my battered flesh; time and again, all through the six strolls I took while clasped to that pouch. The pain was excruciating. To see the shock of actually seeing the filth rush downwards along the transparent tube. I would tell the nurses not to raise the pouch, to keep it low, I would spit and sputter and curse, but of little avail: they didn't listen, didn't look, didn't think, and if perhaps one of them did react she would pause in suspended animation with that portable ascer above gravity level and wonder what the fuss was all about.

Then, last but not least, there was that alluring mini-skirted physician, truly the flower of the medical profession -- the only one among the people I came in contact with at the hospital whom I felt like hitting in the face. I had seen her a couple of times before, wide-eyed, modest, dutifully trailing in Dr. M's wake. Now, on the sixth day after surgery she walked in all by herself. No greeting. No smiling. The very embodiment of proficiency. "I'm going to remove that thing," she announced, gesturing toward my niddie. "Please do," I said. "Please do." She did. Pulling down sheet and blanket, pulling up my shirt, she ripped off the dressing, yanked the catheter out, fished a piece of rumped gauze ^{out of} her pocket, covered the wound and took for the scar. There was dried blood and urine and rot on blisters, and she merely covering the mess with a flimsy piece of gauze and scolding off, not caring to disinfect the wound, to brush the oozing tube off the bed, to pull the bedclothes up my naked body. Not caring.

Your physician has made arrangements for your admission to the hospital. Please see your nurse. It

16

Just not. The effort I made to hold back a surge of profanities almost blinded me, and yet, damned civilized coward, all I did was ~~to~~ ^{grin} my teeth. Well, maybe I did growl some, for she froze in her tracks and turned around. "I'm?" she said, voice suspicious, face sour. I was itching to slap her, itching to put her handsome kisser out of joint with one manly slap. Oh-huh -- except that I was nailed to the I.V. device and fairly valiant enough to swat a fly. For all that, ^{and} not unlike the frolicking attendant, she excited my curiosity. Drumsquely I felt like trying to break through her austerity with a few neutral, matter-of-fact words. "It's been eight days..." "Six!" she cut in, standing there, the image of pightened arrogance. "Eight," I said, choking with self-restraint. "It's been eight days I haven't moved..." "You'll get your perspective!" she hissed, cutting me off again.

It was no use. I bit my tongue and stared at her till she left. I didn't get "my" perspective. Not before Drs. H. and G. came by, which was some thirty hours later. And it was in their tow that the lady doc entered my room once more. On her tiptoes, so to speak. Proper and nice and ever so modest. Drinking in the surgeon's banalities as though he spoke gospel truth. "We are ready to remove your stitches," she advised me with a broad grin. "It won't hurt. Well, not really." Gentle, obliging, she helped me with the bedclothes, produced from her pocket a pair of tweezers and set about her task under the bored gaze of the two others. "See," she signalled happily, pulling the last stitch.

Your Friendly Hospital

"Your physician has made arrangements for your admission to the hospital. Will you go back to

17

"It didn't hurt much, did it?" That bitch! "How did you dare?" I said in a deliberately subdued voice. "How did you dare?" Then, as though fearful I might spill it all in front of the bigwigs, she blurted out: "O.K., O.K., I apologized. Friends again?" Oh yes, she was fair game for headshrinkers, that pussy-out was -- reason enough for me not to disclose her initials. And yet, does my hand ^{long} ~~reach~~ to spell her name in full...

With the catheter gone, passing water via the bona fide channel became an hourly torture. This lasted for several weeks after I was discharged. As it turned out I had developed, mostly due to the unflinching care I received, a whole of a viral infection. The number and variety of antibiotics I had to take increased for a time whatever active light I may have harbored under my skull. Still, as operations go, mine was just routine. The bill came to over \$200.00 ^(plus) dollars -- a bargain. And, by the way, your friendly hospital was Peter Bent Brigham, Boston, Mass. 02115.

Jean Malacquaie