If you’re ever up for a challenge, try forcing your sixteen-month-old son to swallow two eight-ounce containers of fruit punch laced with the contrast he needs for his CT scan. That’s what I’m doing. Well, not really. What I am doing is sitting on a hospital radiator, my back pressed against the window. From here, I watch two nurses. The first, a short nurse, her belly peeking out from underneath her blue scrubs, presses my son’s legs down onto the gurney, while the second, taller nurse, wearing yellow scrubs, presses her palm against his forehead. Yellow steadies him so she can insert a tube, thin as Cappellini, into his left nostril. Before they started this procedure, they introduced themselves in sugary voices, which in a pediatric oncology ward means they’re about to do the worst possible thing to your child. I can’t remember their names. They’ve done this before. Anyway, it’s as if he’s being manhandled by a pair of Mylar balloons. But Yellow keeps missing.

It’s not her fault. Even with two balloons subduing him, my son twitches his hands, wriggles his
feet, arcs his back, as if he’s being electrocuted. And how he screams. A gagging wail that makes the hairs on my neck prickle. Do I even qualify as a responsible parent? For the last eleven months, I’ve given written consent for biopsies, bone marrow aspirations, blood and platelet transfusions, MRIs, MBIG scans, morphine, chemotherapies, and weeklong hospital stays. Enough procedures and operations to make even Dr. Frankenstein blush. I want to hop off this radiator and hustle past Yellow and Blue. Sneak past my wife holding her plastic baggie in the waiting room and hit the elevator. But instead of abandoning him, I press my back against the window. Rain pelts against the glass, sharp tapping sounds that run counterpoint to the higher-pitched sounds of my son’s screams. Sitting here, I watch Blue sway with each of my son’s kicks, Yellow jab at his nose with the tube. Sitting here, I run down my checklist: he’s eating, sleeping, playing. This test is protocol. One scan, every three months. And here we are at his first test.

After eight months of chemo, I’ve learned not to watch the world for signs. That it’s better to focus on concrete details. I’ll just sit here. He’s only sixteen months old. He won’t remember me, the only father he’ll ever get, seated on this radiator.

Yellow tells Blue to keep him steady just as my son wriggles his leg free and pops Blue in the mouth. She teeters away, her weight shifting left to right, heavy, as if she’s a wind-up toy. Her hand still pressed to her mouth, she says, “This isn’t working.”

Yellow drops the tube onto the gurney, relieved that someone has acknowledged the futility of the situ-
ation. She keeps her palm resting against his forehead, so he won’t sit up. “Dad, give us a hand?”

“No.” She flinches, confused. We stare at each other. The only sound in the room is my son’s sobbing, waves of jagged breaths, rolling out in sets of three. “I’m afraid I’ll hurt him.”

Blue pulls the bottom of her shirt over her belly, her face softens. She’s trained to shift moods until she gets the response she needs. “He trusts you.”

Does he? I wouldn’t trust me. I press my head against the window. I imagine the shatter of glass, then falling backward. When nothing happens, I slide off the radiator and shuffle toward them.

My son has rash marks along his forehead from Blue’s hand. Snot leaks from his nose. His hair hasn’t grown back yet, only a shadow of stubble, so when I brush my fingers along his head, it feels like my unshaved face. I go to wipe his nose with my sleeve, but Blue says, “Don’t. The tube will slide into his nostril better.” She steps in front of me, making fists, preparing for the task ahead of her.

Yellow says, “Dad, grab his legs.”

I shift toward the end of the table. He’s wearing the same pair of red socks he wore a month ago, when our doctor told us he was in remission. My wife slipped the socks on him today, hoping to push the odds in our favor. So much for facts and concrete details.

I extend his legs and he starts his gagging wail.

Unfazed by his screaming, Yellow and Blue hunch over him. If you forget that it’s your child, ignore what’s at stake, it’s almost fascinating. Blue places her palms against his cheekbones, where only months ago, on his right side, there was a walnut-sized tumor.
Yellow hovers over his face. She swabs the tip of the tube and inserts it into his left nostril. She feeds the tube down into his nasal passage, which slides down his throat and into his stomach. My son gags, as if choking on seawater, until Blue says, “Done.”

Yellow picks up the exposed end of the tube and attaches a syringe-less needle. She sticks the tips of the stethoscope into her ears and presses the diaphragm onto his stomach. She presses the needle plunger. She nods, then slips off the stethoscope and holds it toward me. “Listen.” Having no choice, I fasten the stethoscope plugs into my ears. Yellow presses the plunger down and I hear hissing, like a tire filling, and nod. Blue lifts her hand and Peter sits up. She places the tube over his shoulder so he’s less likely to yank it out of his nose. Sometimes the nurses fasten it against his cheek with green tape, but not today. Then, perhaps to lessen the cold procedure of it all, ease my fear, Blue says, “We’re almost done,” though we both know the real stuff hasn’t started. But at least this part of the process is over and that’s comfort enough. Once my son was diagnosed, my life dissolved into two, fairly straightforward, segments: being in the hospital and being at home. During his tests, therapies, surgeries, it’s easy to wish that we’re safe in my apartment. But when I’m sitting on my couch, watching him teeter, pale and bald, around my living room, or when I’m spot-checking him for tumors while he’s sleeping in his crib, I’d rather be staying in the hospital, where at least he’s being monitored, at least I know he’s safe.

My son sits on the edge of the gurney and stare at his socks. Placed in a row next to him are the containers of contrast-laced juice, their foiled corners peeled
back for Yellow to insert the syringe-less needle and fill the barrel. Before continuing the process, the nurses have decided to, “Give him a breather,” so we stand around, awkward and silent. Waiting here with Yellow and Blue, I try to imagine them in a different context: at home watching sitcoms. Cooking. Cleaning. I’ve never seen a pregnant nurse on this floor, yet they guiltlessly talk about their children. Does working twelve-hour shifts at a pediatric oncology hospital, seeing kids like my son, make them hypervigilant? I know they have a caring nature that I just don’t possess, but they must also have the ability to sever themselves from the worst possible thing. Blue tugs her shirt over her belly, then adjusts her stethoscope. No, I only see them being nurses. As if to prove me right, Yellow says, “Let’s get started.”

Blue steps behind Peter and swabs the nozzle, then pokes the tip of the needle into the container. She pulls the plunger back and contrast juice fills the barrel. Blue grabs the loose end of the tube that hangs down my son’s back. She pulls the syringe out of the container and wriggles the nozzle of the syringe into the open end of the tube. She presses the plunger down. Juice loops around the coils of the tube and enters my son’s nostril. He swallows as if he’s drinking. He seems fine. He’s sleeping, eating, playing.

I glance down at his arm and notice that sometime during the process, Yellow or Blue stuck a butterfly IV into his arm. Things just seem to happen. The situation swells and recedes. One day your child is healthy. The next he’s not. It’s that scary. It’s that simple. Like now—how the room is quiet, almost peaceful. We’ve all adjusted to this reality, until there’s a knock on the
door and Dr. Lin strides into the examination room. Her chunky-heeled shoes clop against the tiled floor. Her yellow cardigan folds around her thin frame. Her lab coat is unbuttoned, the bottom flaring outward, so it appears as if she’s sailing into the room on a beam of light. That she just might save my child. As if Dr. Lin knows what I’m thinking, she touches my shoulder, then nods at Yellow and Blue who retreat toward the window. She steps toward Peter, smiling in a less-doctor-more-parental way. Peter puts his arms up, wanting to be held, which always surprises me.

She says, “How’s my brave boy?”

I say, “I’m fine, thanks.”

She laughs in a series of high-pitched breaths, which sound more like subdued sneezes. She smells like fabric softener and hand sanitizer. We stare at each other for a second too long. I smile and pray it appears less desperate than it feels. I know she’s his doctor, the conduit of the worst news, but Dr. Lin has also guided us through our best moments. Plus she’s young and smart, okay pretty too. How can I not feel some underlying attraction?

Dr. Lin kisses my son, says, “I saw your wife.”

“Lucky you,” I say, immediately wanting to take it back.

She bites her lower lip, searching for the right words, or possibly debating if she should say more. She says, “Is she okay? I said hello, but I don’t think she saw me.”

Make no mistake, doctor, she saw you. Hopefully, when you saw her she wasn’t holding that stupid baggie. I watch the rain beat against the window. I say, “She’s just worried, that’s all.” I wait for her to say
something reassuring that I can cling to, carry into the next moments: “There’s nothing to worry about,” or “His cancer is never coming back,” or simply, “He’ll be fine,” but she places Peter back onto the cot. He leans forward to be held. She steps back, her body stiffening, as if she remembered why we’re all here. She says, “I called ahead downstairs. Speed things up.”

When I realize the scan is just an elevator ride away, I can’t meet Dr. Lin’s gaze. My vision shifts toward objects in the room: the bell jar filled with tongue depressors; the asterisks of light reflecting off the knobs of the cabinets; the cast-iron pedals underneath the sink, as if by memorizing meaningless details, I can somehow control what’s happening. I do this until I feel calm enough to face the doctor. She runs her finger along the toes of my son’s red socks. She says, “Those are really cute,” and I take it as a positive sign. Then Dr. Lin whispers in Peter’s ear, “You take some good pictures for me.”

* * *

When I enter the examination room, I recognize the nurse, who is leaning against the ring of the CT scanner, whispering into her cellphone, “That’s why I’m leaving. I can’t manage it anymore.” I shift my son to my other hip, surprised that he’s not crying like he always does when he sees the machine, and fake a cough. She holds up two fingers. I think about the physical and mental effort it has taken me to enter the exam room, but I can’t stay here, so I open the door and walk into the hall.

My wife pops out of her chair, says, “What’s wrong?”
“Nothing. She’s on her cellphone.” My son leans forward, wanting to swap parents, but I step back.

She says, “For what?”

“For whoever she’s talking to.”

She shifts her weight, her face darkening. We watch a nurse walk past us, her soft-soled shoes making shushing noises as she moves down the hall. She says, “Bullshit. There are kids waiting.” I stare at the rows of empty chairs, the primary-coloured cubbies filled with donated toys. We’re the only people here. “Not really time for phone calls.”

“It seemed important,” I say.

“Good. Take her side.” The plastic corner of the baggie peeks out from between her fingers. She crosses her arms, hiding it. “Why would you ever be a husband?”

My arm muscles are burning from the weight of my son. I twist toward the exam door and pray that it swings open so I can escape this argument. I say, “Oh fuck off.”

“No. Look at me.” She yanks my shoulder, and I feel plastic slap against my neck. When I twist around I see her kneeling in front of our son’s curls, strewn across the floor. She scoops hair up and stuffs it into the baggie. I almost tell her that this is why she should’ve left her insanity at home, but then I remember how, after his second round of chemo, I saw Mara hunched over Peter’s crib. She was using the muted television as a light as she pinched hair off his mattress and stuffed it into the baggie. Now, I place my son onto the chair, trying not to think of the bacteria, his immune system, and kneel onto the floor.

She points toward a knot of hair drifting down the hallway. “Stop moving.”
“I’m not moving,” I say.
“Yes you are.”

She drags her arm along the floor. Her fingertips are grey with dust. I lean over to snatch a thick curl near her sneaker. She shoves my hand, plucks it off the floor, and drops it into the baggie. “I need to do it.” She holds the baggie up toward the fluorescent lighting, measuring the contents. “Besides here comes your pal.”

From behind me I hear the door open, then the nurse’s voice says, “Ready?”

If I didn’t focus on concrete details, I’d convince myself that this accident was a warning, a sign. But he’s eating, sleeping, playing. So I stand, lift our son off the chair, and follow the nurse into the room, toward the scanner’s patient table, already draped in hospital sheets. Children’s rainbow-painted handprints circle the room in a jagged line, brightening the green cinderblock walls. Stuck along the CT detector ring are stickers of spaceships, focal points for kids as they’re passed through the machine. Behind the ring is a wall-length panel of darkened glass, where the techs operate the machine, their silhouettes shifting.

The nurse says, “Sorry about before.” She straightens the rosary beads hanging around her neck and tucks them into the V of her maroon scrubs. She whispers, “That was my therapist.” I try to think of the proper response. “Who cares right? All you’re going through.” She rubs Peter’s back, and he digs his fingernails into my neck. “Here, let me.” She slips her hands underneath his arms and peels. As Maroon carries Peter to the machine, he juts his arms toward me, his eyes filled with desperation.
When they reach the CT machine, Peter clamps his legs around her hip and buries his head in her shoulder. Maroon pries his arms off her neck, then tips forward until his legs fall free. She straightens and places him onto the bench. Unable to move, I follow the hand-prints along the walls of the room until I hear, “Dad, can you help?” At first I think it’s an inner voice, some paternal instinct, but then I realize the disembodied words came from the overhead speaker, uttered by one of the faceless lab techs. When I walk over, Peter screams, and I can’t tell if he’s scared or angry at my mid-sized act of betrayal. I say, “We’re almost done,” probably not what he wants to hear, then press his legs onto the bench.

Maroon drapes the tube along his chest. Checks the IV butterfly, says, “I’ll start with his arms.” She leans across Peter’s chest and pulls the end of the sheet hanging off the bench. She wraps the sheet across his chest, pulls it taunt, and tucks it underneath him. She walks to the other side of the platform. She grabs the sheet, pulls and tucks, leaving a tight braid across his body. Then she walks to the other side. She weaves the sheet over his stomach and hips, the rhythm of movement trance-like. She holds his ankles and spins the sheets around his legs. Peter tries to wriggle free. I see the poke of his elbow, the claw of his fingers. I place my hand on his knee, I think, and tell him to keep still. The nurse says, “I forgot.”

She digs through sheets until she reaches the butterfly IV in his arm. She pulls a syringe from her pocket. She clicks open the lock valve of the butterfly and inserts the needle. The needle filled with contrast is used in conjunction with the contrast-laced juice he
drank upstairs, though I’m not sure how they work together. She says, “I’ll inject it slowly. Sometimes it burns.” She pushes the plunger down, a fluid movement, and steps back.

The voice says, “We’re starting,” and a turbine noise swallows the room.

The plank moves through the ring smoothly, stops with a jolt, then slides away from the ring, toward me. Peter shakes his head, crying, struggling to wriggle free. How will I explain this to him? All I see are apologies. Mara showing him that ridiculous baggie. And yeah, this is all—supposedly—saving his life, but look at what we do to get him to that place. Peter lifts his head and I wave, then feel ridiculous. I step back, where he can’t see me, and stare at a rocket pasted onto the CT ring. This is the third time I’ve done this. Adjusted to this reality, I wait for him to pass through the machine again, but the bench stops with a jolt. The turbine slows. The speaker clicks on, “Nurse.”

I hustle after her and peek inside the doorway. She leans close to the techs, as they whisper intensely to each other. What if they see something? Maybe the machine is broken? Maybe the hair spilling out of the baggie triggered this outcome? I try to be rational, but the fear of relapse has metastasized into everything. He’s sleeping, eating, playing.

The nurse retreats out of the room and bumps into me. She says, “They have to redo the scan. Something’s there.” I shoot my arm, bracing myself from falling, but there’s no wall, so I stumble toward nothing. The word “bad” flashes inside me like a neon sign.

Maroon grabs my arm, says, “No, something’s blocking the pictures.”
“They see something?”
Her face searches for the words. “He’s not sure. He thinks it’s technical.”
“Technical how?”
“I can’t disclose information.” She points toward the glass. “He just said technical.”
She’s lying. The way her eyes drift toward the machine, the pause. Unless she’s telling the truth. I follow the row of handprints until I see Mara’s face pressed against the glass cutout of the exam room door. The baggie hangs against her cheek. She mouths, “What’s wrong?” I mouth back, “Nothing.” He’s eating, sleeping, playing. I watch as the nurse signs the cross on Peter’s forehead, then unravels the sheets.

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We’re hiding in the hospital kitchen, about the size of a bedroom, simple really: two vending machines, a sink, a refrigerator, a water cooler, and a couple of tables. The windows face the bridge, gunmetal blue, its arms spanning across the river, parting the cliffs of New Jersey. Peter is sitting on my lap, his back leaning against my chest, sleeping. The only sounds in the room are the buzzing of the fridge, the rain beating against the window. I try to forget about our doctor, the scan, Yellow and Blue, all of the details propelling us forward but getting us nowhere, and stare at the river. I wait for a sign to latch onto, something to show me that the odds have finally tipped in our favour: a break in the clouds, a tanker passing underneath the bridge, gulls skimming the cresting water. Something telling, climactic. Like that big scene in
a book or movie, but all I hear is our doctor’s heels, coming closer. She calls my name. I hold my breath and keep rabbit still. He’s eating, sleeping, playing. She’ll find us eventually. She always does.

But I know what you’re waiting for. Test results.

It doesn’t matter. Whatever the outcome, whether Maroon was honest or lying, we’ll always be waiting for the other proverbial relapse to drop. Even if it’s not today. Even if it’s ten years from today, though we can’t tread this pace forever. Eventually we’ll drown. So I’m sorry, but I have no wisdom or comfort to offer you. Well, how’s this, pray your kids don’t get sick, and thank Christ you’re not one of us.

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