

More Stories!

Forum

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The Chemotrode

by **Robert J. O'Connell**

Chapter One.

The office nurse opened the door to the examining room in the Medical Arts Building and ushered in Mrs. Kelly and her baby.

“Dr. Neville called just a moment ago, he was delayed this morning in rounds at the pediatric ward at St. Joe’s but should be here for your appointment shortly.”

Mrs. Kelly strode across the room and took a seat in the examining room. She was young, a short, slender, pretty woman with green eyes and that wondrous auburn hair and alabaster skin that is so characteristic of the colleen. Complimenting this was the splay of freckles across her cheek bones. She had a very determined look as she settled herself and her baby in the chair.

The Doctor’s examining room was small but cheerful with a large window, a small desk, two chairs and a paper covered examining table. It was comfortable in the room but the young woman hovered over her swaddled baby holding him tightly on her lap as though to protect him or shield him from what was to come or simply seeking warmth from his baby blanket.

Shortly, Dr. Neville knocked and entered from his inner office carrying a file folder. He sat at the desk, a short, stout and balding man with a fringe of sandy hair and a smooth round face that all together reminded her of a new baby. This is what a pediatrician should look like she thought. After quickly consulting the open file he said, “I am sorry to make you sit unattended, but I had a critically ill patient in the children’s ward and had to wait for the cardiologist to get in to see him before I could leave. I was out on calls yesterday afternoon so I didn’t get a chance to talk with Dr. Russell when he called, so I only have a few details about you listed on his referral sheet. Your name is Eileen Kelly and you are here for a neurological exam of your baby. Is that correct, and can you tell me more about why you’re here? Has your baby been having seizures?”

“No sir that is not the problem. I came here to see what’s wrong with my little boy? It’s hard for me to explain, it to anyone but I know something’s not right. When I pick him up and try to play with him he seems kind of empty. My pediatrician thinks I have new mother jitters. But, after I insisted yesterday, Dr. Russell agreed to make this appointment for us so we could see you right away. Thank you for agreeing to see us on such short notice as I am frantic with worry.”

“During this time of year I normally leave my afternoons free to work in my laboratory in the Medical School just up the hill. But everyone in this building knows that I am always looking for new patients for my clinical studies. How old is the baby and what’s his name.”

“He was just six months old last week and was named after my father, John Paul Kelly,” she replied.

After adding this information to the file he asked, “I gather that you don’t have other children.”

“We don’t, he is our first. We had been married for two years and he was something of a surprise. I was still a junior in college when he arrived so I had to quit my pre-med studies to

care for him. I was studying for my Physiology finals when he chose to arrive and Sister wouldn't let me take my books into the delivery room anyway."

Dr. Neville smiled while opening the bottom drawer of his desk. He removed a towel wrapping a tray with a pen light and a few other tools in it and said, "Yes, if you are talking about Sister Anastasia at St. Joe's, I know she runs a tight ship."

Eileen nodded yes at this and he continued, "But you were wise to go there, it is the best service in town, and I always do exactly what she tells me. And she usually tells me that although I am a Jew she will continue to pray for my soul. Bless her. She is a very stern woman. I have seen her throw new interns out of the room because she detected some error in their sterile technique. The smart ones leave promptly."

Standing next to the examining table he asked "Please undress John and lay him here on the table."

John lay quietly on the table looking up at the overhead light. He was on the small side for his age but well nourished. Compared to the rest of his frame, his head was rather small with thin dark hair. Unlike his Mother who had a pert nose, his was rather pointed with a broad nasal bridge between rather wide set brown eyes. His chin was small and pointed. The Doctor bent over the table and said in a gentle voice, "Well John boy, lets have a closer look at you."

John did not protest as the Doctor picked him up, nuzzled him briefly to his cheek and put him back down on the table. Dr. Neville then began to administer a standard neurological exam in which he peered and probed and measured John with a variety of neurological tools.

"John, look here at my pen light," as he moved it back and forth in front of John's face. The baby made a few ill directed attempts to grab it but generally remained quiet on the table. The Doctor then used a small triangular shaped rubber hammer and banged on each of the babies joints to evaluate his tendon reflexes. He

returned the baby to his mother's lap, folded the blanket around him and sat again at his desk to make some additional notes in the open file. After a few moments of thought during which his mother redressed him the Doctor finally said

"Well, Eileen I think you were wise to bring him in. He is a little small for his age, very loose and floppy when you pick him up, and he doesn't track visually very well. Most of the reflexes expected for his age are present but a little weak and sluggish. But there is no doubt that he is a well formed little boy. But I expect that you already know most of this."

Eileen responded loudly, "Doctor I admit that I am new at this but I have three younger brothers and have been around babies all my life. I know what my brothers were like at six months, so I knew that there must be something wrong with John."

He replied, "Yes Eileen, I think you are right. From this brief exam, and his characteristic facial features I guess that John has one of several defects that could arise from an abnormal pattern of cortical brain development." She nearly choked with a sharp intake of breath as she gasped "Oh Lord not his brain. I never thought of that."

He continued in a soft voice, "I can't tell the exact nature of his problem now, but we will learn more when I see the MRI scan of his brain that I will order today. Luckily we have a laboratory and scanner here in the building. Let me see when they have an opening."

He picked up the phone, dialed, and spoke quietly to the MRI clerk who answered. "Great, there is some good news. When we finish here you and John go down to room A23 in the basement of this building, the MRI center has an opening in just 30 minutes. They know what I want and you should be all done in about an hour."

The young woman stared open mouthed at the Doctor and cried, "What will happen to him?"

“First,” he said, “I want to emphasize that if I am right this is not a fatal abnormality. The amount of trouble John will have in life remains to be seen. I have many patients like this so I can say with confidence that most children with what I suspect John has, are loving, happy children who are likely to have a long and fruitful life. Their cognitive abilities are sometimes a little impaired as are their social skills. But many of them are not retarded, they just learn and relate differently. If these learning differences are noted and accommodated they can make their way in the world quite well.”

After a moment of thought during which she straightened her skirt and sat more erectly on her chair as though to compose her self she said, “What exactly is this defect called? Please, tell me everything, I need all of the details you have now, as I know I will have to explain this to my husband and John’s grandparents. They already think that I am nuts. Please tell me everything so that I understand. I don’t want to get anything wrong.”

After pausing to make a few additional notes in the new file on his desk he said, “Dear, I think it’s a little early to go into all that as I only have a suspicion about the problem. I would prefer to have this discussion with you and your husband after I see the scan and can be sure of the diagnosis. While we are at it, I would also like to take some blood from John so we can run some additional tests.”

“All right.” She replied. Standing, he opened the wall cabinet and removed several items including a gauze stoppered tube filled with glass capillaries, an alcohol wipe and a lancet. “First, let’s put John back on the table. You only need to take off his booties this time and let me warm his left foot under this heat lamp for a few minutes. Come around here and hold his leg still so that I don’t have to stick him more than once and don’t jerk it away if he starts to cry.”

Eileen nodded agreement and after a few additional minutes he opened the packet and wiped the warmed heel with alcohol. The protective cap was then removed from the lancet and he quickly stuck the pointed tip into the

baby’s heel. Blood swelled from the spot and he drew some of it up into one of the glass capillaries and placed the sample in a sterile container. Wiping the spot again he applied a small colored band aid to the heel as Eileen made crooning noises to the squalling baby.

“Thank you for your help, most mothers get a little woozy when they see their baby’s blood.” “Well Doctor you have to understand that the Kelly’s were like my family, all Dairy Farmers so a little blood doesn’t bother us. We were raised close to nature and that made us tough.”

The Doctor peeled two preprinted bar codes from a sheet taken from the cabinet; put one on the sample and the other on a preprinted form. “Take these with you and give them to the technician in the scan office. She will see that they get processed correctly. With these two pieces of additional information I am sure we shall be able to give you a definite answer.”

“Will it take long?” “No, I will be able to read the scan tomorrow and the lab results should be available on Thursday when we can continue our discussion at our next visit which I will schedule now for three that afternoon. Is that OK?” She nodded eager agreement as she put John’s diaper, onesies and booties back on, wrapped him in his blanket and left the exam room holding him and the sample tightly.

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