

ER season 13, episode 4

excerpts

["the woman she works for. \n Oh. \n Wow, that's... \n What's she going to do? \n I told her to  
\n have an abortion. \n That's what I did. \n You got pregnant \n with the husband \n of the  
woman you work for, too? \n It "]

transcript

Previously on ER:

Are you loving  
motherhood?

Yeah.

PRATT:

Oh, this isn't awkward?

What? That you and I  
are equals now?

Dr. Crenshaw is  
our new chief resident.

Neela Rasgotra.

Two years in the ER,  
then defected.

It took you that long  
to figure out you were  
wasting your time?

I'm your daddy.

What's up?

How's the new intern doing?

She's very, uh, devoted.

(quietly):

Thank you, Jesus.

Were you the best one there?

How many people did you save?

Did you rock?

Next time you don't do

what I tell you to do,

or any other attending

tells you to do,

you're gonna find yourself

getting bum-rushed

right out of this program.

You don't even

appreciate the fact

that I took

the time and money

to go out and buy you

some new clothes.

I didn't ask you

to do that.

No, because you'd rather

go to school dressed

like a bag lady.

Would you rather

I dressed like a slut?!

Because that's how most

of the other girls dress.

I'd rather you dressed

like someone that has

a mother that

cares about her.

Tony, would you please

say something?

Good morning.

What's wrong

with the way I dress?

She won't even try on the

clothes I bought for her.

Those are nice.

They're ugly, and I refuse

to conform to some anorexic,

media-fueled ideal

of beauty.

That's fine,

but you're not leaving

the house dressed like that.

Tony?

I hate

living here!

LOCKHART:

We never resolved

the nanny issue.

Do you really want someone else

raising our child?

Well, I'm just talking

about a few hours a week

so I can at least get

some stuff done around here.

Oh, I thought we had agreed

to stagger our shifts.

Well, and what,

never see each other?

I mean, even

if that was practical,

after your

first day alone,

you'd be begging

for help, trust me.

Mm. I think

I can handle it.

Well, if you can  
handle it so well,  
help me get Joe  
in the car.

We're late for our first  
Mommy and Baby class.

(baby cooing)

What?

Nothing.

What? I thought it  
would be fun for... What?

I didn't say anything. What?

(speaking Croatian)

I'm late for work. Bye.

I'll call you later.

Don't forget his frog.

(toy croaking)

(Joe crying)

I know.

Come here. Oh.

Can you say

"Daddy is a butthead," hmm?

Why is your daddy a butthead?

SARAH:

I look like a dork.

GATES:

No, you don't.

This is not my style,

and this is not me.

If you didn't like what

your mother bought you,

ask her to go shopping.

Then you guys buy

something together.

What are you doing?

Damage control.

Sarah...

What?

This is not cool.

Do you mind?

I'm changing.

I hope your mother

doesn't find out about this.

She won't.

And besides, you don't know

what it's like

for girls my age these days.

Hmm.

There is a lot  
of pressure at school.  
Oh.

What you wear,  
what you eat,  
what you don't eat.

What's his name?

Who?

This is obviously about a guy.

No, it's not.

Yes, it is.

Maybe I should dress  
like a hussy.

Maybe we should get  
you a plaid jacket.

We'll just tell everyone  
you're a lesbian.

(sighs)

Adam.

Huh?

Adam Horner, but he doesn't even  
look at me.

Well, good. I don't want  
some guy named Horndog

anywhere near you.

It's Horner.

Listen, most guys are jerks,

but if you want this guy...

Okay, wait a minute.

You're a guy.

Exactly, and if you want

this guy to notice you,

forget about your clothes

and ignore him.

That's your advice?

Yup.

Ignore him?

Yup, that's right.

Wow. You really suck

at this.

Trust me. Most guys want

what they can't have.

You ignore him, that guy'll come

running to you, all right?

Try not to k\*ll anyone today.

Bye.

TAGGART:

He's out.



PRATT:

All right.

Hope, you're going  
to take a deep breath,  
and you're going  
to hold it.

Now, if you don't get  
the tube in by the time  
you run out of air, we're gonna  
stop, and we're gonna bag.

Okay? Are you ready?

With you and Jesus  
guiding my hand, I am.

PRATT:

Right.

(inhales deeply)

Okay, sweep the tongue  
to the side  
and advance until  
you're in the vallecula.

Elevate the scope  
at a 45-degree angle.

See the cords?

All right, I'll give you

some cricoid pressure.

How's that?

Come on, Hope.

The cords should be

right there. He's a young guy.

All right, pull up more, but do  
not rock back against the teeth.

Aim the end of the handle  
to where the wall  
meets the ceiling.

Can you see  
the aryepiglottic folds?

Hello?!

Sats are  
dropping. Pratt.

Whoa. All right,  
pull out.

You bag, you breathe.

(loud panting)

I'm sorry...

I ran...

If you were doing  
what I told you to do,  
you should have been able

to pass the tube. Come on.

Maybe you should

sit down.

Yeah.

Okay.

I don't feel so good.

Uh, I'm in.

(thudding)

Yeah, this should keep it  
from swelling.

Oh, bless you, Sam.

What happened  
to her?

Nothing.

(pager buzzes)

Damn, it's only  
the morning test.

What are you doing  
with the transport beeper?

I gave that to Jane.

You know, I don't think she  
really wanted it, so I offered.

You can't monopolize  
the beeper, Ray.

The other residents need  
the experience, too.  
She gets airsick.  
Hey, what's going on  
with your rhabdomyolysis guy?  
He's pretty stable.  
He's making urine.  
What about his creatinine?  
I'd have to  
check the chart.  
Peak CPK?  
Medicine team's  
all over it.  
Come on, man.  
You got to be all over it.  
You cannot let  
the internal med docs  
take over  
your patient's care.  
I can't?  
Hey, I'm serious, man.  
You've got  
critical patients.  
You got to stay

on top of the labs.

I know, but the guy was ready  
to hand off, and I...

And what?

And that was

a great talk.

What the hell's going on  
with the PACS system?

Down again.

They said they should  
have it running in an hour,  
but they've been saying  
that since yesterday.

So, is it true?

Rumor is

you k\*llled an intern.

Yeah, I wish.

You know, everything  
in this place is crap.

The equipment sucks,  
the students are incompetent,  
the interns

can't finish a chart,

the residents-- they don't give

a damn about their patient...

Yeah, okay, okay, Kovac.

I see what

you're going to say.

That I was the same way,

right? But I wasn't.

I didn't say anything.

Yeah, I could chart,

I could clear beds,

and I never passed out

tubing a patient.

I know, you were

really, really special.

You need to go through

in-service exam results

with your residents.

Have you seen these?

See, this is exactly

what I'm talking about.

They don't know jack

about emergency medicine.

Solomon is an idiot,

Hope is annoying

and incompetent,

Gates should have stayed  
a paramedic, and Jane is like...

What's wrong with

Jane? She is good.

No, Jane is creepy,

I'm serious.

She's always

sneaking up on me.

She's like those twins

in The Shining.

Look, in-service shows you  
their strengths and weaknesses,  
so focus on that.

They all have their  
own learning process,  
so you need to  
adjust accordingly.

If the residents fail, it may be  
because you're a bad teacher.

(sighs)

(sighs)

WOMAN:

Down on two,  
up on three,

and mommies let go!

Good.

Everyone pick up their babies.

Hi.

I'm sorry I'm late.

I'm Abby, and,

uh, this is Joe.

Hi.

Hi.

Um, am-am I in the right place?

This is the, uh,

Mommy and Baby class?

Yes. Yes, it is.

Good. Well, uh... I'm a mommy...

(laughs)

...and, uh... and

this is a baby.

Uh, yeah, being suspended

by his crotch.

Excuse me?

You're carrying your child

in a device that can cause

hip luxation and spinal injury.

He really should be in a sling.



Oh, well, you know,  
I'm a doctor, um, and...

Then you'd think  
she'd know better.

She is sitting  
right here.

WOMAN:

Well, um, then  
you should know  
that, um, a happy, healthy baby  
is always carried in a sling.

Well, I do know  
that if you dress your baby  
like some sort of  
designer accessory,  
you're headed  
for problems.

But don't worry.

I work in the ER,  
so I'll be there  
to take care of her  
when she comes in 14, pregnant,  
with a drug overdose.

Maybe this isn't

the best class for you.

WOMAN:

Thank you so much

for the lunch tray, Archie.

I particularly enjoyed

the bread pudding.

Oh, you're welcome, Emma.

That's one

of my favorites, too.

Ah, the return of Goat Boy.

I heard one of the doctors

made a charm bracelet

from all they took

from his belly.

Okay, here's what we got:

stable CHF, going to tele.

76-year-old lady with

pyelo, had levaquin.

Incomplete miscarriage.

Do a repeat pelvic

in an hour

to see if everything passed

and the os is closed.

Wait a minute, wait a minute.

What the hell are these?

Pass-ons. Oh, and her BP's a little low, like 90 systolic.

She's type-and-crossed for transfusion?

No, but that's a...

that's a good idea.

Do that, totally.

Two-year-old with possible meningitis.

Ceftriaxone on board.

Currently at CT, needs an LP when he gets back.

Morris, we do not sign out spinal taps.

Since when?

Wait a minute, wait a minute.

Hold on. These aren't pass-ons.

They're train wrecks.

I'm not taking them.

Dude, I can't.

Max has a soccer game.

It's the playoffs.

I promised him I'd be there.

Who?

My son.

It's a family thing.

Yeah, his family even

know about you yet?

No, no, no, no. We're keeping

that on the low-low for now.

You know what I'm saying?

(chuckles)

Exactly.

Thanks, dog.

Did you just

see that?

Yup. He's your dogboy.

Please. He's

not my dog,

and he's not my boy.

And we don't use

the two together.

I know.

So, you're gonna

take one of these?

Nope. I have a trauma coming in,

and you're not always going  
to have the luxury  
of having another attending  
on shift with you.

You need to learn how to handle  
these things on your own.

Mr. Jennings is  
on his way up to ortho  
and Lundquist  
is out of here.

Nice job, Ray.

Here's four more.

Are you kidding me?

Is this about  
the transport beeper?

The packing is webril,  
and we wrap with bias.

We try to keep it tight  
enough to immobilize,  
but not to the point  
of discomfort.

You don't want to  
cut off circulation.

Solomon,

you know, you didn't  
do so hot  
on the Ortho section  
of the in-service.  
So what's the difference  
between a Jones  
and a Dancer fracture?  
Dancer's a proximal  
avulsion.

Does great with  
conservative therapy.  
Jones is transverse,  
a little more distal  
and you got to keep  
an eye on this bad boy  
because there's a good  
chance of non-union.

Let me guess: you just had  
a patient like that?

No.

Right. Come on.

Who's got somebody  
in Curtain 2?

Uh, me, sir.

48-year-old PSVT resolved

with adenosine.

Excuse me, doctor.

Is your boss still here?

Excuse me.

I need to speak with Archie.

Dr. Morris is not my boss

and I'm afraid

he's gone for the day.

Is there something

I can help you with?

No.

Jane, you need to focus

on Cardiology.

What are the options

with a hemodynamically stable

wide complex tachyarrhythmia?

Lidocaine if you think V tach.

What else?

(coughing)

Amiodarone.

Okay, I'm guessing amiodarone.

Well, procainamide and amio

can do the trick,

but you want to stay away  
from beta and calcium blockers  
'cause you'll end up  
with V fib  
if you have a bypass tract.

Right?

So how'd you manage to fail  
every subsection  
of the in-service exam?

I guess I just don't test well.

Well, you better start.

Come on.

Have you got  
something to present?

No. Actually I started  
with Dr. Kovac...

Where are your charts?

Let me see them.

Well, I'm still  
working on them.

I told you to keep  
them current.

You got to do them  
as you go.



What part of this concept

don't you understand?

KOVAC:

Five-year-old with

crush injury to abdomen.

He and grandpa were

chopping down a tree.

They're bringing grandfather

with chainsaw injuries.

All right, I got it.

All right, keep working

up your patients

and grab a couple more charts.

KOVAC:

He needs O-neg, a second line,

and page surgery.

Where do you think

you're going?

Chainsaw injuries

can be gnarly.

No, no, no, you need to finish

with the patients you've got

before you do

anything else.

Dr. Rasgotra?

Yes.

Hi, I'm Katey Evans--  
medical student.

Dr. Crenshaw told me  
to shadow you today.

He did?

I got the feeling I was  
getting on his nerves.

He gives that impression  
to everyone.

Hey, Katey.

Friend of yours?

Hardly.

We went out a  
couple times.

It didn't work out.

Too bad. He's cute.

Cute, but he's way  
too into himself  
and to be honest,  
he's orally challenged.

Oh, bad breath?

Not exactly-- he won't

go south of 14th Street.

You know... He refuses  
to dine at the Y?

Oh, I'm sorry.

This is what  
I'm talking about.

Making friends  
and saving lives.

Does it get any better  
than this, ladies?

No, it does not.

So, Mrs. Draper is back  
for her 27th hospital admission.

Status: postpancreatic  
pseudocyst.

27th?

Yes. Someone needs  
to tell her  
the hospital stopped giving out  
frequent flier miles.

Oh, and she's a chronic  
rectal discomfort.

And you two get  
to work her up

and review her old charts.

All 27?

No. Why don't you forget

all about visits

six, 13 and, um...

what do you think, 21?

Yeah, that should

keep it interesting.

It'll be like playing

patient roulette.

Be prepared to present her

at afternoon rounds.

Smiles all around.

Maybe he should use

his extensive surgical skills

to remove that bug

from his ass.

Oh, saved by the bell.

We're paged to the ER.

I'm so glad I'm not

doing an ER rotation.

I have heard horror stories.

Oh, it's not so bad--

once you get used

to the smell.

The line is good to go.

Pressure's only 85

after the bolus.

How much O-neg?

40 per kilo.

800cc's.

Chest and pelvis films are back.

KOVAC:

Let me see.

Sam, your son's school called.

Said he never showed up

for homeroom.

First hemoglobin is 9.8.

What?

I dropped him off this morning.

Type and cross four units.

He's losing a ton of blood.

Crush injury?

Yeah. Unstable pelvis.

Open book fracture with complete

SI joint disruption

and lateral displacement.

SAM

I've got the T-POD.

How's the belly?

Spleen is okay.

Looks like a small liver lac.

So he goes to angio first?

For embolization.

Hypotension

and pelvic fracture has...

A 50% mortality.

Blood at the meatus.

Probably tore his urethra,

but that'll have to wait.

Along with his liver.

If they can stop the pelvic

bleeders in angio,

he might make it to the OR.

Okay, bring blood, FFP, and

get him on a portable monitor.

It wasn't a very big tree.

It was only about eight inches

in diameter.

I was just finishing the cut

when the chainsaw broke... Ow!

Sorry about that,

Mr. King.

We're going to get you  
really numbed up right now.

Another five of lido to me.

How we doing in here?

He's pretty lucky.

Most of these wounds

look superficial.

I'm just going

to clean and close.

How's my grandson?

Uh, his injuries are serious:

he's bleeding internally,

but he's hanging in there.

Can I see him?

KOVAC:

Not right now.

We're taking him upstairs

and we're going to try

to stop the bleeding, okay?

You good down here

if I go up to angio with him?

Yeah.

I'm good. Go.

Okay.

I was being so careful.

I thought he was safe.

Don't worry, sir. We're doing  
everything we can to help him.

Are you almost  
finished in here?

No. Why?

I could really use your help  
in Curtain 2.

You've got to be a little bit  
more specific, Ray.

Okay,

Morris' little old UTI lady,  
the one that's just "waiting for  
a ride," has a systolic of 55.

(sighs)

Damn it, Morris.

All right, here,  
keep irrigating  
and set up  
another suture kit.

I'll be right back.

Got it.



76-year-old,  
fever and gram-negative rods  
on the UA.

Morris said she was tucked,  
nothing to do.

I guess he lied.

Yeah.

Tachy after two liters, he  
should have seen this coming.

Access?

PIV, we're working  
on another...

HALEH:

Pratt!

Here.

BARDELLI:

Rennie Stevens,  
welding t\*nk expl\*si\*n.

Second- and third-degree burns  
over chest, face, and arms.

Vitals?

Tachy, BP: 138/90,  
sat 82.

Other one's

more stable.

Other one?

Luis Escobar, 23,

shrapnel to neck

and left chest.

Vitals stable,

good breath sounds.

All right.

I better page an attending.

I am an attending.

I got this.

Put him in Trauma Two.

Jane!

You're with Haleh.

Solomon, you're with me.

Come on,

Trauma One.

Let's go.

Ray, titrate dopamine

and mix up levophed

if she doesn't respond

to 10 mikes.

All right.

All right?

Alex, where are you?

No, you're not.

Don't lie to me.

The school called  
the hospital.

Yeah, well, you got ten minutes  
to get your butt back to...

Solomon,  
help Sam make some room.

Please give me something  
for the pain!

All right,  
another five of morphine.

Hang tough, Mr. Stevens.

We're going to help you.

Start a second line with  
two liters of LR, wide open.

Full thickness  
over the entire chest.

I'll alert the burn unit.

Sats down to 83.

Okay, listen to me  
very closely, Mr. Stevens.

We need to put a tube in

to help you breathe, okay?

Eight—oh and an

intubation tray.

I'll be right back.

Talk to me, ladies.

Blunt and penetrating trauma.

Thrown against a wall

by the blast.

Looks like shrapnel

to the upper torso and neck.

Hey, what's

your name, man?

Luis. Luis Escobar.

How's Rennie?

Uh, we're working on him,

but now it's your turn.

Tell me where it hurts.

My chest.

BP: 95/65.

Yup, he's decreased

on the left.

Sats 92%.

Any pain here?

(Escobar yells)

All right, CBC, chemistry,  
coags, type-and-cross for two,  
liter of ringers, C-spine,  
chest, and pelvis. Page surgery.  
I'll be right back.

You're doing good, Mr. Escobar.

(crowd applauds)

MORRIS:

That's it, Max.

That's it. Hustle!

MAN:

Go, Stuart, stay with him.

Come on, Max, come on.

You take this guy.

If you can't go around him,

you go through him!

Hey, come on, man.

What?

You're not setting

a good example.

Whoo!

That's it.

Nice, nice, buddy.

You're k\*lling them

out there.

Who is that

with your son?

I don't know.

Excuse me, Coach?

Who's Max talking to?

COACH:

I'm not sure.

He said he was a friend.

Chest x-ray on Escobar.

All right,

pneumothorax on the left.

Set up for a chest tube.

I'll be right over.

We're having a hard time

finding a second line.

Dr. Pratt,

he's bradying down!

Hold on.

Try a saphenous.

If that doesn't work,

we'll go central.

Right.

Heart rate's in the 40s!

I need to put a tube  
in your chest  
to re-expand your  
lung, Mr. Escobar.

Need any help in here?

Push 50 mikes of fentanyl.

What's going on  
with Morris' patient?

Uh, I think  
she's doing okay.

I handed her off  
to Gates.

Gates?

You left her with Gates?

Yeah, he's all over it.

All right, you're going to  
feel some pressure here, okay?

(grunts)

Gates is an intern, Ray.

Who's supervising him?

I guess,  
officially, you are.

Jane, find out  
what's going on with Gates.

I'm not having any luck

with the ABG.

Angle the needle

at 45 degrees.

I can't see.

My glasses keep fogging.

Well, maybe next time,

you should leave

the hazmat uniform at home.

Feel for the pulse.

You see that?

Yo, Doc.

Your sheet metal guy in Exam 3

lost his foot pulse.

Nurses can't get

his leg out.

All right, tell them to give him

five more of morphine

and, uh, grab me a Doppler.

I'll be there in a few minutes.

Someone grab me

a central line kit.

This young lady needs

a CVP monitor.



You're putting it

in a central line?

Yes.

Early Goal-Directed Therapy

for Sepsis--

all the kids are doing it.

Are we going to get in trouble?

No, this lady is in trouble.

We're trying to save her,

that's what we do.

God,

give us the strength

and the knowledge

to help save

this sweet woman.

Hallelujah to that, sister.

Good embolization

of the superior gluteals

and pudendal arteries.

That ought to buy you

a little time.

Pressure's back down to 60.

Another 400 of PRBCs.

Crenshaw's standing by

in the OR.

Looks like the liver

lac opened up.

His heart rate's

dropping.

Damn it.

Okay, let's transfer him.

One, two, three.

Mig of atropine and

squeeze in the blood.

Want me to continue bagging?

No, see what they need

in the ER.

I've got this.

Hi, it's me.

Mommy and Baby

was a freak show.

Um, so we're headed

to the park and I thought maybe

even if you only had

a couple minutes,

you might want to come by

and say hi.

I'm going to look

for some normal moms,  
so we'll be here  
for a while.

Bye.

Hi.

Hey.

Can I sit here?

Sure.

Yo no quiero  
perder mi trabajo  
pero si mi jefa se entera,  
es la primer vez en mi trabajo  
y yo estoy muy nerviosa,  
yo no se que hacer.

Quisas estas tarde.

Is everything okay?

She thinks she's pregnant.

Oh, congratulations.

Oh, no.

No?

No, the father is the husband  
of the woman she works for.

Oh.

Wow, that's...

What's she going to do?

I told her to

have an abortion.

That's what I did.

You got pregnant

with the husband

of the woman you work for, too?

It happens.

Los unicos hombres

que no fantasayan

con estar con sus nanasson

los que ya estan haciendo.

Mm.

What'd she say?

Oh, "The only husbands

that don't fantasize

about banging

their nanny...

are the ones

who are already doing it."

It's sort of our nanny motto.

Oh, you're all nannies?

Yeah, aren't you?

Yes.

Yes, I am.

All right, tube's in position,  
no pneumo.

Vent pressures  
are almost 50.

Damn it. Chest wall's  
restricting lung expansion.

He needs an escharotomy.

Ten blade.

Sats down to 84.

All right,  
put the vent rate up to 25  
and the tidal volume  
down to 500.

Solomon, I need room, man.

Okay, Mr. King.

We're gonna find you  
a new parking spot.

Mr. King?

Mr. King,  
can you hear me?!

TAGGART:

Son of a bitch.

Pratt!

The little head lac's

not so little.

All right,

keep pressure on it.

He must've hit

something arterial.

Recheck a crit and

type and cross for two.

Okay, okay, sats are coming up.

Thank you.

That's one down.

We need an

attending in here.

Pratt, take

a look at this.

All right, what's that,

fluid in the spleen?

Looks like a hematoma.

Where's surgery?

Paged them three times.

Anything else

in the abdomen?

Nothing in Morrison's.

Vitals stable?

Tachy, but pressure's okay.

Second hematocrit 38.

Entrance and exit lateral  
to the midline.

Doesn't penetrate platysma.

Burn unit on two.

IV blew. We can't get  
a second line in here.

And grandpa's crit  
is down to 29.

All right,

I'll be right there.

What's going on with Gates?

He's asking for  
a rib spreader.

What the hell would he be  
doing with a rib spreader?

I'm not really sure.

TAGGART:

Pratt, what do you  
want me to do?

Just a sec.

What's going on out there?

Sorry, sorry, we were

stuck upstairs.

What do you need?

Burn unit is holding.

All right, page Kovac.

Don't bother.

We left him

with a pelvic trauma.

The boy crumped

in angio.

All right, uh...

Neela, get this guy up to CT.

Ray will fill you in on the way.

Haleh, transfer that

burn unit call next door.

Jam it into overdrive.

Go! Go! Go! Go! Go!

Come on, ref.

That's a foul.

Come on, this is soccer,

not water ballet.

Way to go, buddy, dig deep.

Work that ball.

Hey. Sorry I'm late.

I got hung up at work.



How are they doing?

Winning two to one.

Go, Stuart.

Go, Stuart!

Come on, Max!

Dude, you stay

with him, buddy.

Come on, Maxie.

Kick in the

afterburners, baby.

Do you know that guy?

No, who is he?

Apparently,

he's a friend of Max's.

Never seen him before.

Oh, okay, don't get fancy.

Don't get fancy, just...

just put it in the net!

Put it in the net!

Goal!

(cheering)

Yes!

Baby!

That was a rocket, huh?!

That's got to hurt, right?

Yes!

All right!

Did you see that?!

Yeah, that was beautiful.

You were giving them a taste  
of Maximum destruction.

(growls)

Hey! What the hell do you think  
you're doing?

Did you touch my kid?!

What?

You touched my kid.

Whoa, whoa, wait.

He's not your kid?

No, I don't know  
who this creep is.

Is this how you  
get your jollies,  
touching little boys  
at a park?!

Whoa, whoa, whoa,  
you're making  
a big mistake here.

I think you're  
making the mistake  
you freakin' pervert.

Back off, man.

What, am I too  
big for you?

Sir, are you okay?

Wake up.

Wake up, sir.

Call 911.

Get an ambulance.

And the cops.

There's no need to panic.

It's all good.

I'm an ER doc.

I'm an ER doctor.

Everybody just back up.

Let me do what I have to do  
and give me...

Oh!

They spent about  
a million dollars  
on fertility dr\*gs  
to have this kid.

Look at her, that's not  
a million-dollar baby.

Right, like,  
take the hint, lady.

Maybe there's a good reason  
why Mother Nature  
doesn't want you  
having kids of your own.

(speaking Spanish)

The woman she works  
for is a bitch.

(speaking Spanish)

She felt sorry  
for her husband.

He seemed so lonely.

(speaking Spanish)

She was always going away  
with her friends.

And all she did  
was shop.

My boss has closets  
full of clothes  
she never wears.

Which is good for me.

So you wear her clothes?

What, you don't?

No.

You fool around

with her husband?

No.

He's ugly?

No.

Oh, no, he's...

he's hot.

He's a doctor.

I worked for

some doctors.

They wanted to kids safe

so they let me drive the Lexus.

And they went away a lot,

so I could always

use their apartment.

Which they didn't know about.

Course not.

Course not.

How you feeling, Mr. King?

I was a little woozy there

for a bit,

but I feel better after my nap.

Bacitracin and

a gauze dressing.

These need to come out

in seven days.

You know, I could probably

take those out myself.

No.

You need to come in

for a wound check.

Hey, make sure

that guy's X-ray

goes up with him

to the burn unit.

He's had three

liters of fluid

and needs seven more in

the first eight hours.

Is there any chance

I can be with my grandson?

I don't think so,

but we can get an update

on his condition.

CT's back on Escobar.

Grade three splenic lac.

Okay, good.

Consent for surgery

and he's all yours.

Sorry, but my chief

wants to observe him

down here for a while.

You just told me

he tore his spleen.

With no free blood,

and stable crits.

His belly's tender,

he's tachycardic,

and he'll have other fluid

losses through his burn.

The OR's full.

We can't take him

right now anyway.

Well, we can't keep

him down here.

We're getting slammed and

he's tying up a trauma room.

I don't know.

Put him in the ICU.

Crenshaw says we can't

use our last bed in ICU.

Hey, that's not

Crenshaw's call.

What do you want me to do?

I want you

to get rid of him.

If his crits are stable

for six hours,

he can go to telemetry.

Neela...

Louise Escobar's

girlfriend is here.

All right, I got

to go find Gates

before he kills somebody.

When I get back, that

guy better not be here.

Systolic pressure in the 70s

after aggressive fluid

resuscitation but responded well

to a dopamine infusion at

10 mikes per kilo per minute.

What have you been doing?



Excuse me.

Central venous

oxygen saturation

is in target range of 88%.

At this time, patient

remains guarded but stable

for critical

care service.

What is that?

I'm dictating my notes.

And you're kidding me, right?

There's no time

for you to send stuff

to a transcription service.

I need your notes

on the chart now.

Well, I find it so inefficient

to write everything down.

Yeah, well, that's

how we all do it,

so you better figure it out.

And what were you doing

with a rib spreader?

Well, one of your minor victims

from the expl\*si\*n came in  
with metal wrapped  
around his leg.

It was occluding blood  
flow to the foot,  
so I used the rib spreader  
to pull the metal off.

Seemed safer than a  
blowtorch, right?

Yeah, right, right, right.

Okay, hold on, hold on,  
one second, one second, man.

I get it, okay.

You're the cool guy, the  
paramedic who became a doctor.

And I'm pretty sure that  
all the residents are eating up

your w\*r stories

and tales from the street--

I don't tell w\*r stories.

But this is the ER.

And we have a way

of doing things,

a curriculum for shaping

young doctors, even you.

Oh, is that what this is about?

You feel the need to "shape" me?

Why don't you just teach me.

I like the shape I'm in.

I can't teach somebody

who thinks they know everything.

What are you talking about?

Talking about you running

around here unsupervised.

Putting in central lines.

What was I

supposed to do?

You were busy in

a double trauma.

I saved some woman's life

and some guy's foot.

And what would have happened

if you had messed up

on either one?

I don't know.

Who would have been responsible

for that? Not you.

Me. It would have been

my ass on the line.

So do we have to go through this  
every damn shift?

I don't know. You going to ride  
my ass every damn shift?

Because you seem to be  
missing the point here.

I didn't mess up.

That's not the point,  
and that's your problem.

Who's got  
the urosepsis case?

Dr. Gates. At  
your service.

Maya Tennyson,  
Critical Care.

Yeah, excuse me,

Dr. Tennyson,  
but we're in the middle  
of some...

She's still on dopa at 10?

She's holding  
her pressure  
like a champ.

Hmm, nice work  
with the early  
goal-directed therapy.

By the way,  
I love the dictation.

I can never read  
anyone's writing down here.

The Bluetooth.

You just speak in this  
little machine right here  
and it prints up  
instantly at the desk.

I like it.

This ER needed an attending  
with some initiative.

Hey, I'm the attending.

He's an intern.

Well, actually, the Bluetooth  
was Dr. Pratt's idea.

Huh.

I want to see the rest  
of your charts now.

I bet you do.

Hey, Timmy, do they still

put people's names on hats

and stuff like that

in the gift shop?

You know what?

I think so.

But if you want to write

your name in your underwear

or something, man,

a Sharpie works

just as well.

No, no, no.

I just need to get

a gift for somebody.

What the hell happened to you?

I was att\*cked by ninjas.

What's it look like?

Who's this?

Obnoxious soccer dad,

blunt head trauma with LOC,

breathing on his own,

normal vitals. What's open?

Talk to me, Morris.

Nothing to talk about.

Guy came at me.

I defended myself.

I'm patching him up.

Why'd he come at you?

Have you ever been

to a kids' soccer game?

Those parents are crazy.

I would never do anything

to hurt my grandson, Irene.

It was an accident.

What were you thinking?

He's only

five years old.

He shouldn't

be anywhere

near a chainsaw.

He wasn't.

Then why is

he in surgery?

Hey, I'm Dr. Pratt.

Uh, Dennis King,

this is my wife, Irene.

I can't believe this.

We only leave

our son with family,

just to be safe, and this

is how we're rewarded?

We're doing

everything we can

for Thomas.

Why don't I have a

nurse take you up

so you can

be with him

when he gets

out of surgery?

Okay.

Dennis, Dennis,

I'm sorry.

You know I am.

I know,

Dad, I know.

I raised my two boys by myself.

Wasn't easy being

a single dad back then. I...

I don't think I was

very good at it.

I thought I could

make up for it



by being a terrific

grandfather, but...

Looks like I blew that too.

Pratt.

You got a sec?

Yeah. I'll be right back,

Mr. King.

Thanks.

What's going on?

The police are here

for Morris

in connection

with an as\*ault.

And there are two moms

with the cops

saying that Morris

is a child molester.

What?

SAM:

I got a feeling the white mom's

got a boxer's fracture.

What is Morris' problem?

Brain damage is the first

thing that comes to mind.

Dr. Pratt.

Escobar's losing his airway.

RASGOTRA:

Why didn't you intubate  
prophylactically?

PRATT:

His face was spared.

He didn't seem like  
he had respiratory issues.

PRATT:

Damn, he's already got  
too much swelling.

Page Crenshaw again.

And get someone  
from ENT down here.

Sats down to 76.

All right, somebody  
get me a smaller tube.

A 7-5, 7-0.

It's too late for that.

You might need  
an open trach.

Heart rate is dropping.

Please help him.

He was just talking

to me.

Damn, that 7-0 won't pass.

He needs a trach.

ENT is in OR 2 on a

radical neck dissection.

They can't come

down right now.

ENT needs to be here.

Well, they're not,

and this guy needs

an airway.

And you're sure

you can do this?

I think so.

You better know so.

How many have you done?

I've assisted on several.

Oh, man.

All right, OR Girl, please

do not make me regret this.

Okay, Katey, Betadine

and sterile sixes.

Without electrocautery juice,

this will be messy.

All right, Haleh.

Can you take Tina  
to the Family Room?

Sure.

No, no,

I want to stay with him.

Come on, honey.

No, I want to stay...

We'll come and get you  
as soon as we make him  
more comfortable.

Okay, I'll be there to me.

Neela.

Oh, I was hoping there would  
be a reasonable explanation  
for your incessant paging,  
but you know what?

This is not it.

I had to do  
a tracheotomy tube.

Oh, really, and who  
told you to do that?

Because I sure didn't.

Nobody did.

My chief didn't  
answer his pages.

You did this  
without any supervision?

Dr. Pratt was here.

Oh, great, that  
is such a relief.

Unfortunately, your little  
ER forest friends  
don't count anymore.

You want to be a surgeon?

Huh, want to be  
a big girl doctor?

This isn't Barbie's  
Dream Doll Hospital  
you're playing in.

I am the ER attending.

Dr. Rasgotra was only  
following my orders.

Oh. I'm sorry. Hello.

Dr. Pratt,

is it?

I took your silence

for subservience.

You know, not a lot

of ER attendings

have the skills to do a trach.

Very impressive,

Dr. Pratt.

Well, you just, uh,

take care of my girl here

and we'll call it even.

You don't need

to worry about that.

Dr. Rasgotra gets

plenty of my attention.

Oh, I think

I can manage this from here.

Why don't you girls, uh,

finish up down here.

You've done more than

enough. Believe me.

Wow, you're so lucky.

He seems like a great guy.

Yeah, right.

I'm going to go

and find the girlfriend,

tell her

what's happening.

Hey.

You did good, man.

Thanks.

(chuckles)

Must be quiet if you

have time to stand around.

How's the kid?

Looks like he's going

to pull through.

How's the grandfather?

Eh, he's a little worried,

but he'll be okay.

You make out okay

down here?

I heard you had two

more traumas come in.

Nothing I

couldn't deal with.

Well, if it's that quiet,

maybe I'll leave a

little early tonight.

Abby could probably use

some help with the baby.

Go ahead. Go for it.

Sure?

Yeah. I got it all

dialed in down here.

This place practically  
runs itself.

Can one of you look  
at a suspected hand fracture?

Who ordered  
the films?

I did.

Everybody was busy.

I'll take it.

Did you find Alex?

Oh, yes, he was ditching school  
with a friend at the mall.

(clicks tongue)

I guess I have all that  
to look forward to, huh?

Yep.

You saved that guy.

It was so cool.

You mean "terrifying."



Dude, you rocked.

Did you see the look  
on Crenshaw's face?

The one that suggested  
he was going to punish me  
for the rest of my  
natural life for  
what I just did?

You spanked him.

Deep down, I think  
he probably likes it.

(chuckles):

Seriously.

You know it's always  
those type-A guys  
that are so wound up  
they go home and put on a diaper  
or want to be led around  
by a leash.

(laughing):

You're mad.

Hey, Neela.

Hey.

Um, uh... Ray Barnett.

I don't think  
we've officially met.  
Katey.

Hey.

Um, I'm still getting  
some of your mail.

Oh. I'm sorry.

I've tried to change  
everything over.

Well, I don't mind.

I just figured you might  
need some of these.

Thank you.

Okay.

Okay. Uh, I'll see  
you guys around.

It was nice meeting you.

You two lived together?

Oh, we were roommates.

Hope you had benefits.

It wasn't like that.

We were just friends.

Why? That guy  
is smoking hot.

Does he have a girlfriend?

Not that I know of.

I just remembered something.

Um, I'll catch up

with you later, okay?

Sure.

(sighs)

Witnesses confirm

that the other guy started

and you just

pushed him away.

I told you that.

But that doesn't

explain touching the kid.

I wasn't "touching" him.

My relationship to the boy

is complicated.

It's, uh, sort of a secret.

No, no, not like that.

Well, your hand isn't broken,

it's just sprained.

It would have been worth

a fracture if I would have

knocked out that freaky little

leprechaun's teeth.

What's going to happen  
to him?

He's going to jail.

What do you think  
about that, Max?

Wait!

Wait! Wait!

Don't arrest my dad.

What did he say?

Max,

what's going on?

This is where

I leave.

Good luck

with that, Pops.

Mom, Mom, this is my dad...

Dr. Archie Morris.

What's up?

PRATT:

Hey, Timmy, did you get it?

Yeah, but I didn't get  
a chance to wrap it.

Nah, it's all good.

(chuckling)

Gates! Wow, just the man

I was looking for.

Here, I got a

present for you.

What's this for?

It's so, uh, people

know who you are.

Hey. You didn't

have to do this.

Yeah, I did.

Let's see.

(chuckles)

What the hell is this?

(Timmy, Pratt laughing)

Students wear

short coats.

It helps remind

everyone, including you,

that you are

still learning.

You feel better now?

I feel great, man. Yeah.

(laughs)

(softly):

Gates.

(baby crying over monitor)

Hey.

Hi.

How long has he been crying?

About ten minutes.

I think he'll

settle down.

How was your shift?

Uh, the usual-- I had a five-  
year-old kid crushed by a tree.

I don't want to hear any stories  
about bad things  
happening to children.

He survived, okay?

How about your day?

It was divine.

Hmm.

Look, I've been thinking.

Maybe you're right,  
maybe we should get somebody  
like a nanny...

No, thanks.

But I thought you...

I changed my mind.

(sighs)

No nannies... just us.

(baby continues crying)

Doesn't sound like

he's settling down, hmm?

(laughs)

I'll get him.

(sighs)

KOVAC (over monitor):

Hey, hey, hey.

What's all that crying?

\* Should I stay

or should I go now? \*

\* If I stay

it will be trouble \*

\* If I go it will be double... \*

That good, hmm?

I should have stayed

a paramedic.

No. Doctors are much more sexy.

(grunts)

(chuckles)

Rough day?

Yeah, one of my attendings  
has it out for me.

Either that  
or he's in love with me.

I can't tell which.

How was your temp gig?

Same thing,  
different people.

(sighs)

Nobody knows you.

Nobody really talks to you.

It's like being  
the office ghost.

Do you want a drink?

No, I have to study.

GIRL:

Knock-knock. You decent?

I'm in my thong.

Guess what?

I take it your  
homework is done?

Yeah.

I've got some stuff



from school you need to sign.

I left them on the table.

All right.

There's lasagna in the fridge

if you get hungry later.

Thanks.

Well, you were right

about Adam Horner.

Oh, yeah?

Yeah.

I ignored him

all day,

even when he was looking at

me, and tonight he IM'd me.

The Horndog comes through.

It's Horner.

Watch it.

I bruise easy.

Did you save anyone today?

Yes. Actually, I separated

a pair of Siamese twins.

Must be gross

seeing all that blood, huh?

Nah, I saw more blood

when I was a paramedic.

Besides, I'm half vampire,  
so I kind of dig it.

(laughs)

Do you want me  
to help you study?

No. I want you to work  
things out with your mother.

I'd rather shave my head.

Oh. All right, good,

I have a razor  
in the bathroom,

we can shave it  
into a nice

little Mohawk.

(laughing):

Okay, I'm just kidding.

I'll talk to her.

Sometime.

Tonight?

Yeah.

Hey.

Good night, baby girl.

Night, Doc.

(over boom box):

For the next hour,  
we're going to be talking  
about abdominal pain  
in the elderly patient.

Now, I don't have to tell you  
what an important disease  
this is...

No pass-ons,  
no major tragedy, no deaths.

Gates still here?

You just missed him.

What about his charts?

They're over there.

Hey, you know, from what  
I've seen, cat's a good doctor.

Oh, he's all right.

Plenty of room  
for improvement.

Dr. Morris, I heard  
some guy att\*cked you.

Are you okay?

Oh, yes, yeah,  
I turned the other cheek.

You know what Jesus said.

You know...

when the, those guys

who trespassed against him,

as those who trespassed

against us--

can I get an amen?

Amen.

Amen.

I have a patient

waiting, so...

Good night, Dr. Morris.

God bless you.

God bless all of us.

Hey.

You want to grab a bite

with me and Max and his moms?

You worked things out, huh?

Yeah. Yeah,

they're pretty cool.

And if everything

goes well at Ike's,

we may really work

things out tonight.

if you know

what I'm saying,

Morris...

and I think you do.

You do know

they're a couple, huh?

Yeah, a couple

of lesbians

in desperate need of

a Morris sandwich. Unh.

You know

you're sick, right?

What?

Good night, Archie.

HOPE:

Could you help me

with a two-layer closure?

Nope, nope, not now, I'm off.

Weaver should be here

any minute now.

(sighs)

All right, wait, wait, wait.

First off, you never want to

inject directly into the wound.

It distorts the anatomy

for your repair.

He needs regional

anesthesia.

Have you ever done

an infraorbital block?

Not really.

Okay, well, it's pretty easy

once you know the tricks.

Now, first, what

you want to do is

you want to use your

left index finger

to palpate the

infraorbital ridge.

Got it.

Good.

Now you're going to

inject one centimeter

lateral to the ala

and advance upward

until you're five millimeters

from the ridge.

Good, good, very good.