# CRITICAL CARE

## CHAPTER 1: CODE BLUE

I was elbow-deep in a man’s chest cavity when my pager went off for the third time in twenty minutes.

“Someone please check that before I lose my mind,” I said, not looking up from the aortic bleeder I was desperately trying to clamp. Sweat trickled down my temple, but I couldn’t spare a hand to wipe it away. “And can someone turn the damn air conditioning up? It’s like a sauna in here.”

“It’s Dr. Foster again,” said Raj, my favorite ER nurse, after checking my pager. “Says it’s urgent.”

“Everything’s urgent to Foster,” I muttered, finally securing the clamp. The bleeding slowed, and I let out the breath I’d been holding for what felt like minutes. “Tell him I’m literally inside someone’s chest right now.”

“I already told him that the first two times,” Raj said, his eyes smiling above his surgical mask. “He said, and I quote, ‘Tell Dr. Rodriguez that her presence is required as soon as she’s done playing with hearts.’”

I rolled my eyes so hard I probably saw my own frontal lobe. “Playing with hearts? I’m stopping this man from bleeding out. What medical school did Foster attend? University of Administrative Bullshit?”

The anesthesiologist snorted, and the surgical resident across from me—Dr. Chen, I think, one of the new ones—looked scandalized. Good. Let her be scandalized. Better she learn now that the hospital administration would happily sacrifice any one of us on the altar of budget cuts and efficiency metrics.

“BP’s stabilizing,” the anesthesiologist reported. “Nice save, Dr. Rodriguez.”

I nodded, focusing on completing the repair. Forty-five minutes later, I was closing the patient’s chest, mentally calculating how long I could avoid Foster before he sent security to drag me to his office. The man had been gunning for the ER department since he took over as hospital administrator six months ago. Something about our department being a “resource drain” and “inefficiency center.” As if saving lives was supposed to be efficient.

“You can close up,” I told Dr. Chen, stripping off my gloves and gown. “Good work in there. Your hands are steady.”

She looked surprised at the compliment, which told me everything I needed to know about her previous attending physicians. Probably all men who thought women in surgery were still some kind of radical experiment.

“Thank you, Dr. Rodriguez,” she said, her voice quiet but confident.

I pushed through the OR doors and headed for the scrub room, my surgical cap damp with sweat. My reflection in the mirror looked exactly how I felt: exhausted, irritated, and in desperate need of coffee that didn’t taste like it had been filtered through a dirty sock. Dark circles underlined my eyes like permanent accessories, and my curly black hair was fighting to escape its confines.

My phone buzzed in my pocket as I was scrubbing out. A text from Eli:

*Foster’s on the warpath. Hide while you can.*

Eli Bennett was my best friend and the only cardiologist at Manhattan Memorial who didn’t have his head permanently lodged up his own ass. We’d been friends since our first year of residency, when we’d bonded over our mutual hatred of the cafeteria’s mystery meat Mondays and our attending’s God complex.

I texted back: *Too late. Already been paged 3x. What’s the emergency this time? Budget cuts? New efficiency metrics? His hemorrhoids acting up?*

Eli’s response was immediate: *Worse. Some documentary film crew. Coming to the ER.*

“You’ve got to be fucking kidding me,” I said out loud, causing a passing nurse to jump.

I dried my hands and stormed toward the elevator, jabbing the button repeatedly as if that would make it arrive faster. A documentary crew? In my ER? Absolutely not. We were understaffed, overworked, and one budget cut away from using duct tape instead of sutures. The last thing we needed was some film crew getting in the way, asking stupid questions, and making my staff self-conscious while they were trying to save lives.

The elevator doors opened to reveal Eli, his tall frame leaning against the back wall, arms crossed over his chest. His dark blonde hair was perfectly styled despite the fact that he’d probably been at the hospital as long as I had.

“You look like shit,” he said cheerfully.

“Thanks. Just spent three hours stopping a guy from bleeding out through his aorta.” I stepped in and punched the button for the administrative floor. “What’s this about a documentary?”

“Foster’s big idea to improve the hospital’s image. Apparently, some hotshot filmmaker wants to do a series on urban healthcare. Foster thinks it’ll bring in donors.”

I groaned, leaning my head against the elevator wall. “Perfect. Just what we need. Cameras in patients’ faces during the worst moments of their lives.”

“That’s not even the best part,” Eli said, his voice dripping with sarcasm. “Guess who’s going to be the star?”

The elevator doors opened, and I stepped out, turning to face him. “If you say me, I will end you.”

His grin was answer enough.

“No. Absolutely not. I didn’t go to medical school for twelve years to become some reality TV doctor.”

“Take it up with Foster,” Eli said as the doors began to close. “And try not to get fired. I need you for drinks on Friday.”

I flipped him off just as the doors shut completely.

Foster’s office was at the end of a long hallway decorated with framed photos of hospital donors and board members—old white men in expensive suits, looking pleased with themselves for deigning to throw money at healthcare while simultaneously voting to gut insurance coverage for the poor. I’d fantasized more than once about drawing mustaches on all of them.

His assistant, a perpetually nervous man named Gerald, looked up as I approached.

“Dr. Rodriguez,” he said, reaching for his phone. “I’ll let Dr. Foster know you’re here.”

“Don’t bother,” I said, already pushing open Foster’s door.

Cameron Foster was a small man with oversized glasses and the personality of a DMV employee with hemorrhoids. He glanced up from his computer, his thin lips pressed into what I assumed was his attempt at a smile.

“Dr. Rodriguez. So glad you could finally join me.”

“I was in surgery,” I said, remaining standing even though he gestured to the chair across from his desk. “Saving a life. You know, the thing this hospital is supposedly about?”

Foster’s smile tightened. “Yes, well, we’re all working toward the same goal, aren’t we? Saving lives. And to continue doing that, we need funding.”

“Let me guess. Budget cuts again?”

“Actually, an opportunity.” He folded his hands on his desk. “We’ve been approached by an award-winning documentary filmmaker who wants to showcase the vital work done in urban emergency departments. It’s an excellent opportunity for Manhattan Memorial to raise our profile and attract donors.”

“And you volunteered my department without asking me.”

“As Chief of Emergency Medicine—”

“Acting Chief,” I corrected. “Until Diana returns from her sabbatical.”

Foster waved a dismissive hand. “As Acting Chief, then, you’re the natural face of the department. You’re young, photogenic, and your patient outcomes are excellent.”

“Photogenic?” I repeated, my voice dangerously low. “Is that what you’re looking for in a department head? Someone pretty for the cameras?”

“Don’t be difficult, Maya,” Foster said, using my first name in that condescending way that made me want to stab him with a ballpoint pen. “This is happening. The board has approved it. The filmmaker, Luke Parker, will be here tomorrow to meet with you and discuss logistics.”

“Luke Parker?” The name sounded vaguely familiar. “The war correspondent?”

“The same. He’s pivoted to documentary work. His last film on the opioid crisis won several awards.”

I crossed my arms. “And what if I refuse?”

Foster’s fake smile disappeared entirely. “Then I’ll have to reconsider whether you’re the right person to lead the emergency department, even temporarily. Diana recommended you highly, but if you can’t see the bigger picture…”

The threat hung in the air between us. I wanted to tell him exactly where he could shove his documentary, but I thought of my staff, already stretched thin and demoralized. If Foster replaced me with one of his cronies, they’d suffer even more.

“Fine,” I said through gritted teeth. “But I have conditions. Patient consent is non-negotiable. No filming anyone who doesn’t explicitly agree. No interfering with care. And if I say the cameras need to go, they go. Immediately.”

Foster nodded, already turning back to his computer. “I’m sure you and Mr. Parker can work out the details. That will be all, Dr. Rodriguez.”

I turned to leave, my hand on the doorknob when Foster spoke again.

“Oh, and Maya? Try to smile for the cameras. We want to project a positive image.”

I didn’t trust myself to respond, so I just left, slamming the door hard enough to rattle the pretentious art on his walls.

By the time I made it back to the ER, I’d mentally composed and discarded at least fifteen resignation letters. The only thing stopping me from actually quitting was the knowledge that my department would be even worse off without me running interference between them and administration.

The ER was in its usual state of controlled chaos when I pushed through the double doors. Two ambulances had arrived while I was in surgery, and the waiting room was standing room only. A child was screaming somewhere, and the distinct smell of vomit hung in the air despite the industrial-strength cleaners our janitorial staff used.

Home sweet home.

“There she is,” said Olivia Washington, our charge nurse and the actual person who kept the ER running. “Foster finally let you go?”

“Not before informing me that we’re going to be reality TV stars,” I said, grabbing a patient chart from the rack. “Some documentary crew is coming tomorrow.”

Olivia raised an eyebrow. “For real? Don’t they know what it’s actually like in here?”

“That’s probably exactly what they want to film. Overworked staff, understocked supplies, patients waiting hours to be seen. It’ll make for great television.”

“As long as they stay out of my way,” Olivia said, handing me another chart. “Bed three needs discharge papers, bed seven is waiting on CT results, and there’s a possible appendicitis in bed ten that needs evaluation.”

I nodded, already moving toward bed ten. “Any word from Diana?”

A shadow crossed Olivia’s face. “Nothing since last week. She said the sabbatical was going well.”

I didn’t believe that for a second, and neither did Olivia. Diana Patel had been Chief of Emergency Medicine for fifteen years. She’d never taken a day off, let alone a three-month sabbatical, until suddenly announcing she needed “personal time” two months ago. Something was wrong, but Diana wasn’t talking, and I respected her privacy too much to pry.

The rest of my shift passed in the usual blur of patients, procedures, and paperwork. By the time I stumbled into the doctors’ lounge at 8 PM, I’d been on my feet for fourteen hours, had eaten nothing but a granola bar I found in my locker, and had forgotten what it felt like to not have a headache pulsing behind my eyes.

Zoe Chen, the neurology resident I’d worked with in surgery, was curled up in the corner of the couch, reading a medical journal. She looked up when I entered.

“Dr. Rodriguez. The patient from this morning is stable. No post-operative complications.”

“Good,” I said, collapsing into the chair across from her. “And call me Maya when we’re not in front of patients. ‘Dr. Rodriguez’ makes me look around for my father.”

She nodded seriously, as if I’d given her an important instruction to memorize. “Maya. Thank you for letting me assist today. I’m interested in neurosurgery, but I rarely get to observe cardiac procedures.”

“You did more than observe. You helped save his life.” I closed my eyes, too tired to keep them open. “If you’re interested in neurosurgery, you should talk to Jackson. Dr. Hayes. He did a neurosurgery rotation before settling on oncology.”

“I will. Thank you.”

We sat in comfortable silence for a few minutes, the only sound the turning of pages as Zoe read. I was nearly asleep when the door burst open and Eli strode in, followed by Jackson Hayes, looking as impeccable as always despite the late hour.

“There she is,” Eli announced. “Our soon-to-be television star.”

I opened one eye to glare at him. “One more word and I’ll tell everyone about Atlantic City.”

Eli clutched his chest in mock horror. “You wouldn’t dare.”

“Try me.”

Jackson looked between us, amused. “Do I want to know about Atlantic City?”

“No,” Eli and I said in unison.

Jackson shrugged and took a seat, his movements precise and controlled like everything else about him. Jackson Hayes was the most disciplined person I’d ever met, which made him an excellent surgeon but sometimes exhausting as a friend. Everything in his life was scheduled, organized, and planned, from his workouts to his meals to his relationships—or lack thereof, since his fiancée had left him five years ago.

“I heard about the documentary,” Jackson said. “Foster’s been trying to get press coverage for months.”

“Well, he finally succeeded,” I said, sitting up and stretching. My back popped in three places. “Some filmmaker named Luke Parker is coming tomorrow to turn my ER into a circus.”

“Luke Parker?” Jackson looked impressed. “He’s legitimate. His documentary on the Syrian refugee crisis was nominated for an Oscar.”

“Great. So he’s a legitimate pain in my ass instead of an amateur one.”

Eli laughed. “Come on, Maya. It might not be that bad. Maybe you’ll become famous. ‘Dr. Maya Rodriguez: ER Goddess.’”

“I’d rather eat glass,” I muttered, standing up. “I’m going home before Foster finds me and asks me to start practicing my acceptance speech for the Emmys.”

“Don’t forget drinks on Friday,” Eli called as I headed for the door. “The Nightcap at eight. We’re celebrating Zoe’s publication.”

I turned, surprised. “You got published? Congratulations.”

Zoe blushed slightly, her eyes still on her journal. “It’s just a small paper on neurotransmitter response in traumatic brain injuries.”

“In the Journal of Neuroscience,” Jackson added. “Which is hardly ‘just’ anything.”

“I’ll be there,” I promised, genuinely happy for her despite my exhaustion. “First round’s on me.”

I changed out of my scrubs in the locker room, pulling on jeans and a sweater that had seen better days. My reflection in the mirror confirmed what Eli had so helpfully pointed out: I looked like shit. Dark circles under my eyes, hair a mess, and was that dried blood on my sneaker? Fantastic. I was definitely ready for my close-up.

The night air was cool against my face as I left the hospital, a welcome relief after the recycled air inside. Manhattan Memorial loomed behind me, its windows glowing in the darkness, each light representing someone working, suffering, healing, or dying. Sometimes all four at once.

I’d wanted to be a doctor for as long as I could remember, ever since my abuela had been saved by a quick-thinking ER doctor when I was seven. I’d never regretted that choice, not even during the worst days of medical school or the sleepless nights of residency. But lately, I’d been wondering if it was enough—if saving one patient at a time could ever make a difference in a system so fundamentally broken.

My apartment was a fifteen-minute subway ride from the hospital, in a neighborhood that real estate agents optimistically called “up and coming” but was really just “not quite as dangerous as it was five years ago.” I’d bought it after my divorce, using every penny of my savings for the down payment. It wasn’t much—a one-bedroom with questionable plumbing and a view of the building next door—but it was mine, the first place I’d ever owned that was just for me.

I unlocked the door, immediately greeted by the demanding meow of my cat, Hippocrates, an overweight orange tabby with one eye and an attitude problem.

“Yes, I know I’m late,” I told him, dropping my keys in the bowl by the door. “Some of us have to work for a living.”

Hippo meowed again, winding between my legs as I made my way to the kitchen. I filled his food bowl and then opened the refrigerator, staring at its meager contents: half a carton of orange juice, some questionable leftovers, and a bottle of white wine. Dinner of champions.

I opted for the wine and a frozen pizza I found in the back of the freezer, carrying both to the couch. As the pizza cooked, filling my small apartment with the smell of processed cheese and preservatives, I scrolled through my phone, looking up Luke Parker.

Jackson was right—the guy was legitimate. Multiple awards, critical acclaim, a reputation for tackling difficult subjects with sensitivity and depth. There were a few photos of him at film festivals and premieres, always looking slightly uncomfortable in formal wear, as if he’d rather be behind the camera than in front of it. He was handsome in a rugged, unpolished way, with dark hair that curled at the ends and the kind of beard that walked the line between intentional and neglectful.

Great. So not only was I going to have cameras invading my ER, but I was going to have to deal with some scruffy, self-important filmmaker who probably thought he was doing us all a favor by deigning to document our work.

The microwave beeped, and I retrieved my gourmet dinner, settling back on the couch with Hippo immediately claiming my lap. I ate mechanically, not really tasting the food, my mind still at the hospital with my patients, my staff, and the looming disaster of tomorrow’s meeting.

My phone buzzed with a text from my brother Marco:

*Dinner Sunday? Mamá’s making pernil.*

I smiled despite my exhaustion. Sunday dinner at my parents’ apartment in Washington Heights was the one constant in my chaotic life, the one thing I protected in my schedule no matter what. Even during my residency, I’d found a way to make it home at least twice a month, sometimes arriving straight from a shift, still in scrubs, barely awake enough to eat before passing out on my childhood bed.

*I’ll be there,* I texted back. *Tell Mamá no matchmaking this time.*

Marco’s response was a series of laughing emojis followed by: *Too late. She invited the new deacon from church. Apparently, he’s “very handsome and very single.”*

I groaned. My mother’s mission to see me remarried before I hit 35 had reached new levels of desperation lately. Every family dinner included at least one eligible bachelor—the son of her friend from church, the nephew of her hairdresser, once even my cousin’s recently divorced dentist. None of them had been terrible, exactly, but none of them had understood what it meant to be with a doctor, to come second to emergencies and night shifts and the constant, grinding fatigue.

My ex-husband certainly hadn’t understood, despite being a doctor himself. David had expected me to scale back my career after we married, to take the less demanding shifts, to be home more while he pursued his ambitions in cardiothoracic surgery. The final straw had been finding him in an on-call room with a surgical nurse—a cliché so perfect it would have been funny if it hadn’t been my life falling apart.

*Tell her I’m bringing Eli,* I texted Marco. It was an empty threat—Eli was Jewish and about as interested in me romantically as I was in him—but it might buy me a reprieve from my mother’s matchmaking, at least for one week.

I finished my pizza and wine, too tired to even make it to the bedroom. Stretching out on the couch with Hippo purring on my chest, I set my alarm for 6 AM and closed my eyes, trying not to think about documentary filmmakers or budget cuts or the patient in bed seven whose CT results had shown a mass that was almost certainly malignant.

Tomorrow would be soon enough to deal with all of that. Tonight, I just needed to sleep.

My last thought before drifting off was that I should probably wash my hair before meeting the filmmaker. Not because I cared what he thought, of course. Just because I was a professional, and professionals didn’t show up to meetings with three-day-old ponytails and blood on their shoes.

At least, that’s what I told myself.