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# The Brothers

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“And that is the sickest baby in the unit,” my colleague says as he finishes running through the list of thirty babies in the Neonatal Intensive Care Unit (NICU). “Have a great first call night.” He puts on his coat and smiles. “Try to get some sleep.”

As I contemplate whether this is kind advice or a challenge, a high-pitched repetitive blaring sound fills the small work room. I hold up my pager and see a STAT message to go to the operating room for an emergent Cesarean section. I jump up. “I’ll see you in the morning.”

I run out to the nursing station and head through the exit doors, joined by a nurse.

“They’re doing a crash section on a mom with 26 week twins,” she says as a pediatric resident doctor and nurse race down the hall behind us.

“Why?” I ask.

“The mother got up to use the bathroom and felt a small leg dangling out her vagina. She screamed for help and the nurses found her on the bathroom floor,” the nurse replies as she swipes her badge at the obstetrical unit entrance door.

“She’s in OR two,” calls a nurse at the front desk as we run past.

At the end of the hallway, the operating room door is flung open and a nurse wearing a blue gown, cap, and mask shouts, “We need you now! We can’t get a fetal heart rate on Twin A.”

I throw on a gown and surgical cap, tie my mask, put gloves on, and head to the newborn resuscitation bed. The operating room resembles a beehive in May, bustling with masked medical providers donning cobalt blue scrubs and light blue gowns, all scurrying to prepare to deliver the babies. The obstetrical team surrounds the pregnant mother lying asleep on the operating table, her abdomen splayed open. Two obstetricians each grasp an opposing edge of the vertical almond-shaped abdominal incision and with a violent tug, they pull the fistfuls of muscle and fascia apart as if they are ripping open a package—a pearly white and pink uterus pops into view, bulging like a basketball.

“Scalpel!” says the head obstetrician, putting out her right hand. With a calculated swipe, she slashes open the thickly muscled uterus. A gush of

bloody, avocado colored fluid spews from the gaping mouth of muscle as a foul smell fills the room. Another obstetrician plunges her hand into the uterus to grab the baby and the anesthesiologist peeks her head over the drape. Two neonatology teams tear open supply trays as they prepare the resuscitation beds. Requests from the teams echo through the room, "Check the oxygen flow, turn on the suction device, get me some warm blankets."

"Twin A is out!" shouts an obstetrical nurse as she runs toward us holding a tiny blue baby who is draped over her gloved hands like wet dough. She places the doll-sized baby on the bed. He is covered in blood and pus, his eyes are closed, and he is not breathing. He looks dead.

As a neonatologist, I see many newborns enter the world looking dead. Most of these babies respond well after we help them breathe. However, Twin A is not in the majority. As I hold an oxygen mask over his nose and mouth, his color remains blue. His flaccid arms and legs lay open on the bed like wilted tulips. I grab a laryngoscope, open his quarter-sized mouth, move his tongue aside with the laryngoscope blade, and peer down his throat. The blade light glimmers off his coffee bean-sized vocal cords as I slide a soft plastic breathing tube into his trachea. "I'm in. Check for breath sounds."

"Equal," the nurse says as she listens to the baby's chest with a stethoscope.

"We have good CO<sub>2</sub> color change. Let's secure the tube," I say. The respiratory therapist connects the oxygen bag to the breathing tube as Twin A's father enters the room holding a digital camera.

"How is he?" his voice trembles. I recognize him from the prenatal consult I did earlier that week. He and his wife had transferred to our hospital when their babies were 23 weeks gestation. Their previous hospital recommended terminating their pregnancy, so they came to us, hoping for a different opinion.

"Hi Mario. This is your son, Twin A. He was not breathing after birth so I had to place a breathing tube in his airway."

Mario looks at me, wide-eyed.

"Do you have a name for him?"

"Ruben," he says. "His name is Ruben." Mario's stares at Ruben's blue, limp body resting on a bloody, white cotton blanket.

"Is he okay?" Mario asks.

The pulse oximeter alarm pierces the air. Ruben's heart rate is only 50 beats per minute.

"Start chest compressions," I call to the resident doctor next to Ruben's bed.

The resident wraps her hands around Ruben's chest and begins compressions as the respiratory therapist bags oxygen into the breathing tube.

"Ruben's heart is failing," I say.

"What does that mean? Is he going to make it?" Mario has tears in his eyes. He puts his camera in his pocket and wipes sweat off his forehead.

"We will try to our best to save him." I place my hand on Mario's shoulder and guide him closer to Ruben's bedside. "But I'm really worried."

After a minute, I ask the resident to stop compressions so we can check a heart rate. "Okay, 110 beats per minute. That's better." Ruben's skin starts to appear pink colored. His thin legs twitch and he turns his head to the side. "His sats are still only in the 70s. Let's get him in the incubator. We can get an x-ray in the NICU. Then we'll give him surfactant."

Mario appears stunned. "We are going to take Ruben to the NICU," I say. "We will try to stabilize him there. His oxygen level is low, so we will give him some medicine for his lungs, which will help him breathe better."

"Okay, doc." Mario nods and lets out a sigh.

"Twin B is out!" shouts an obstetrical nurse. A nurse carries a small dusky looking baby on a blanket to the resuscitation bed in the adjacent corner of the room. I see his small legs kick as she sets him on the bed. *Good. He's moving.* The first year neonatology fellow places a breathing mask over the baby's nose and mouth while the nurse lays a clear plastic sheet over his body to prevent heat loss.

"Mario, let's go see your other son."

"Ernesto. His name is Ernesto."

Little Ernesto appears pink and is breathing on his own.

"Is he okay?" asks Mario.

"He looks good right now," I reply.

"He is breathing and has a heart rate above one hundred," says the fellow.

"Do you need anything?" I ask.

"No, we're good," says the fellow.

"Alright, we'll see you upstairs. Let's get Ruben to the NICU. Mario, you can come with us."

As we roll the resuscitation bed down the hallway, I explain to Mario that Ruben might be in septic shock. "Ruben's amniotic sac was ruptured for a long time. This may have allowed bacteria to invade his lungs and blood stream."

Mario nods. "Ruben's fragile body is struggling to fight the infection,"

I say.

When we arrive in the NICU, Ruben's heart rate monitor alarm begins to bellow a steady chorus of ominous chirps. Ruben's heart rate plunges down to 30 beats per minute.

"I'm going to start chest compressions!" I call out. "Draw up a dose of epinephrine—0.08 milligrams. We'll use a birth weight of 800 grams."

I place my hands around Ruben's chest and begin pressing my thumbs into his thin sternum. "One, and two, and three, and breathe, one, and two, and three, and breathe..."

"He's dying, isn't he?" Mario asks me. His eyes are full of tears.

My throat tightens. I look at the flashing monitor. Ruben's oxygen level is plummeting. I look down at Ruben who appears a grayish blue color.

"Yes. He is." I look at Mario. "I am so sorry."

Mario leans over Ruben's bed. He reaches out and strokes Ruben's fine black hair. Mario gently lifts up Ruben's tiny pale hand and holds it between his thumb and index finger as he starts to pray. Mario's tears fall down onto Ruben, landing like rain drops on his face and chest. Mario stoops down and kisses his son's forehead. Sobbing, he kisses Ruben again, then straightens up and looks at me.

"Doc, please stop. That's enough," he says.

"Okay, we'll stop." I slowly lift my hands away from Ruben's chest. Ruben is motionless. His eyes are closed and he looks gray. The nurse shuts off the monitor and ventilator. I grab a chair for Mario. "You need to hold Ruben," I say. "You're his father."

The nurse wraps Ruben in a blanket. I gently lift Ruben and hand him to Mario.

Minutes later, I kneel down and place a stethoscope on Ruben's chest over his heart. For a minute I listen in silence. I stare at the soft, fine lunago hairs on his forehead and look at his tiny brown eyelashes. His round little nose looks perfect.

I look up and meet Mario's bloodshot brown eyes. "Ruben has died." I pause. "I'm sorry we couldn't save him."

"I know you tried your best."

I sit next to Mario in silence. After a few minutes I say, "When you are ready, we need to go tell your wife." Mario bites his lip and nods. I place my hand on his shoulder. "Then we can check on Ernesto."

I lift Ruben, wrapped in a blanket, set him in a bassinet, and cover him with a thin blanket. As I push the bassinet, the metal wheels rattle, echoing

in the long hallway to the elevator.

“Do you want to tell your wife or would you like me to?”

“I’ll tell her,” Mario sighs.

Ruben’s mother, Isabella, is resting in her postpartum room. At the sound of the rattling bassinet, she lifts her head and looks over at us. Mario takes a big breath, then gently picks up Ruben and walks over to his wife.

Isabella looks at Ruben’s gray, lifeless face and then looks up at Mario.

“No!” She shakes her head. “No! Not my baby! No!” she cries out.

Mario leans over and places Ruben in her arms. He kisses Isabella’s head and puts his arm around her. Together, they lean into each other and cry.

Later that night, I get an emergency page about Ernesto. His blood pressure has dropped and his oxygen levels are falling. I rush to his bedside.

“He’s in shock. We need to start a dopamine drip,” I say.

Ernesto’s bedside alarms begin to blare and chirp. His oxygen levels and heart rate are dropping. His skin looks mottled and gray—like Ruben’s did.

“We need to intubate him. Get the ventilator ready.”

A flurry of nurses run back and forth carrying supplies and shouting requests.

“Please call his parents. They need to be here,” I say as I stare at the flashing monitor. *I can’t believe this is happening.* Ernesto is not moving. His arms and legs lay limp on the bed. *I can’t let him die.*

“His blood pressure is not responding to the dopamine. Can you order dobutamine and two doses of epinephrine?” I say to the nurse practitioner.

The heart rate alarm rings out. “His heart rate is in the 50s!” a nurse yells.

“Let’s start compressions,” I say. My hands encircle Ernesto’s small chest. “One, and two, and three, and breathe, one, and two, and three, and breathe...”

After one minute I stop to check the heart rate. “40! Give a dose of epi,” I say to the bedside nurse. “Resuming compressions. One, and two, and three, and breathe, one, and two, and three, and breathe...”

I look up and see Mario and Isabella staring at me. They are both crying.

“Is he okay?” Isabella asks, seated in a wheelchair.

I shake my head. Isabella puts her hand to her mouth and then reaches for Mario’s hand.

My hands remain wrapped around Ernesto as my fingers feel his thin ribs. His eyes are closed. His head bobs as I continue CPR. I want to close my eyes and wake up to a bad dream. I look up at his parents.

“Mario and Isabella, Ernesto is dying. He likely has the same infection that Ruben died from.” Isabella reaches up and grabs Mario, then pulls herself up out of her wheel chair. As Mario holds her, they slowly walk toward me. I peer down at Ernesto and see some dark blood in his breathing tube. My heart pounds in my chest and sweat runs down my back.

Isabella reaches out and strokes Ernesto’s head as Mario holds her. Tears run down his cheeks. Isabella looks up at me. She snuffles and bites her lower lip.

“My son is not going to make it, is he?”

I swallow hard. My throat feels dry. My thumbs rest on Ernesto’s sternum.

“No, he’s not,” I say in a soft voice.

I look at Mario and meet his brown eyes, which look full of pain. He reaches out and touches Ernesto’s chest. Then he lifts Ernesto’s small hand and places it between his thumb and index finger, like he did with Ruben.

Mario closes his eyes and tears stream down his cheeks. “Doc, you can stop now.” He looks down for a moment and stares at me. “He’s...” he pauses and his voice cracks. “He’s going to be with his brother. In Heaven.”

My eyes well up as I try to fight back tears. I look over at the nurse. She is crying as she shuts off the ventilator and the alarms. In silence, I stare at Ernesto.

“You need to hold him,” I say. Isabella nods and wipes her eyes.

As I wrap Ernesto in a blanket and disconnect his monitor wires, Mario helps Isabella sit in her wheelchair. I place my hands around Ernesto and then I slowly pick him up. I set him in Isabella’s arms and stand back. Mario rubs Isabella’s back and kisses the top of her head as she leans over and kisses Ernesto.

After a few minutes, I approach them. “Is it okay if I listen?”

They nod. I kneel down and place my stethoscope on Ernesto’s chest. I close my eyes and listen. I hear the muffled sounds of his mother crying. I picture Ernesto’s heart in his chest, dark and cold, like an over-ripe strawberry. After ten long seconds I think I hear a faint heartbeat, like a distant drum struck in the dark. I continue to listen. I hear the rustling of the stethoscope as my hand moves, but no further heart beats. After a minute, I open my eyes. Ernesto’s parents are looking at me. Mario has his arms around Isabella, who is leaning her head into his chest. I take off

the stethoscope. With my hand touching Ernesto's chest, I look up at his parents.

"Ernesto has died." I pause and gulp. "He is with his brother now."

As Mario pushes Isabella's wheelchair, I wheel Ernesto's bassinet down the dimly lit hallway back to their postpartum room. The rattling wheels echo in the hallway.

When we enter Isabella's room, I see a white bundle in a bassinet next to her bed. It is Ruben.

I wheel Ernesto over next to his brother. I peer at their peaceful, small faces.

"They have the same nose," Isabella smiles.

"Your boys were beautiful." I reply. "I am so sorry this happened."

"Thank you. Thank you for all you did," Isabella says and wipes a tear from her eye.

I swallow hard. "I wish I could have done more."

"You gave them a chance," says Mario.

I spend the rest of the night filling out death certificate paperwork and writing death summary notes. Both of the twins' blood cultures later grew Group B streptococcus, the leading cause of bacterial sepsis in newborns.

A year later I got a call from Mario.

"Hey doc, we have a new baby girl!"

"Wow, congratulations!" I smile. "That's great news." The image of her two brothers in their bassinets fills my mind.

"I am sure her brothers are watching over her."