

## Edentulism

By Justin Millan

After working a code, especially one that fails to resuscitate, as ours had that night, you want a respite from the clock, maybe some time to just sit and poke at the screen on your phone or to drink a cup of coffee in a quiet corner. No event in medicine is as time-sensitive as a code; perhaps for that reason, in the aftermath, you want to be in a headspace where time doesn't matter anymore: just as time had stopped for our patient, her existence now and forever a matter of history, of old time, which is no time at all.

But between a patient's death in one of our hospital beds and the ride on the gurney down to the morgue, we typically presented the deceased to the family. It mattered to some people, this time with the body, fresh after dying. And they were coming. They had been called. Twenty, thirty, forty-five minutes, and they'd be at the door.

Which is where I stood. Trying to see the room as the family would see it. The code had dumped a blizzard of medical waste. And there was the horrible focal point, the deceased in bed: beaten-up by hundreds of chest compressions, exposed, crooked, bloodied, the defibrillator wires hanging from her chest like uprooted weeds.

I thought we didn't have enough time to undo all of this. But then again, we hadn't really possessed enough time to save her, it turned out; yet, we had tried anyway, for thirty long minutes of CPR, rhythm checks, epi pushes, suctioning. All we could do now was try again, with far lower stakes but nearly as much urgency.

One of the night nurses marched over to the sink and cranked the hot water tap, letting it run down the drain. A CNA wheeled in a linen cart. Another closed the door behind me. We rustled into disposable gowns and snapped on nitrile gloves. A window was ajar, flooding the room with cold, crisp March air - this being an old nursing tradition, the open window, to give egress to the spirit.

The deceased was a large person, long and heavy. Logrolls took three of us. The target of the bed bath was blood. It had gotten everywhere, even in her long brown hair, which was muddied and tangled until I shampooed and combed it. We scrubbed her limbs, breasts, abdomen, and groin, then together we rolled her over and washed her back. She had stooled, and there was more coming out; we wiped it away and placed a clean brief on her. We put new linens on the mattress, tucked in at the corners, and a new gown over her body, knotted behind the neck.

I looped around the room carrying a trash bag and collecting detritus - wrappers, suction catheters, little rectangular epi boxes, stray wires. Just when it seemed done, I'd find a scrunched-up glove, or a white cap from a saline flush. I followed this with a can of bleach wipes, spot-cleaning the sometimes dried, sometimes still-sticky blood on the floor and other surfaces.

It was around then that I found her dentures on the windowsill. Upper palate, acrylic resin. During the code, I had been the one to remove the dentures from her mouth. An hour earlier, the room had quaked with movement and noise, so much so that this memory, as I replayed it, caused me to break out in a sweat all over again. I remembered reaching blind into the muck of her oropharynx, where a torrent of bloody vomit had pooled despite nearly constant suctioning, feeling with my gloved fingers for the frame of the dentures, prying them off the roof of her mouth (there was a *pop!* like the lid on a mason jar), all so that the physician could make a fruitless attempt at intubation. As for setting them aside on the windowsill, that I forgot.

I rinsed them until the teeth shined, then put them back in her mouth.

The job was complete. On time. The family hadn't arrived. One after another, we degowned, degloved, and washed our hands with hot water and soap. At the doorway I stopped, turned, and took a last survey. The air in the room was cool and floral, a mix of the scent of the shampoo and the draft from the open window. We had shut off the overhead fluorescents, leaving on the small dim wall light. Everything was squared, neat, tidy, even the deceased, who lay centered on the flat bed, the white sheet drawn up to the breastbone, with her eyes closed (the lids had dropped on their own, a small gift, as some didn't). There was a serenity to the scene, yet also, jarringly, a totality of stillness. You wouldn't mistake her for sleeping.

I left the hospital sometime after 2 AM. The highway was black, empty, sparsely lit. The headlights made green flames out of the exit signs. It was a long drive home, 45 minutes, but I didn't mind. I had time.

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**Justin Millan is a writer and registered nurse working in long-term acute care in New England.**

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