

ER

EPISODE 18

"*Love's Labor Lost*" (1x19)

Story Outline

by

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Episode 18

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TEASER 7:00AM

-- ROSS and GREENE toss a football outside the ambulance bay. An ambulance races past, a familiar face in the window. "Was that Benton?" Ross goes long for a pass as a car careens down the street and a bloody gang member is tossed out onto the street.

-- Ross, Greene and HATHAWAY race the gang member down the trauma hallway, passing HALEH, who takes us into Trauma One, where she finds a distraught BENTON. The old lady with the broken hip is MAE BENTON, his mother.

-- In Trauma Two, CARTER and JARVIK join the heroic resuscitation of the trauma victim. Carter witnesses Greene at the top of his game, impressed.

'-- Mae is shy about her son seeing her naked, exposed and in pain. Haleh reassures him that she'll give her special attention. Benton wants to write out the orders as Haleh has been insisting. She lightens up on him: "Don't worry, I'll take care of it. Go see if Greene needs any help."

-- Benton enters Trauma One as Greene is prepping for a thoracotomy. As Benton pulls on a trauma gown to do the procedure, Greene says he doesn't need any help -- go be with your mother.

-- When orthopedic resident JANET BLAIR arrives to admit Mae, Benton insists that the chief of orthopedics be called in.

-- Greene and Hathaway escort an OR team out of Trauma Two. As Hathaway heads home from the night shift, she passes DR. GREGORY NELSON, chief of orthopedics, steaming into Trauma One.

-- Nelson, none too happy about being pulled from his department meeting by Benton's persistent calls, does agree to do the case. Benton tries to get him to say that he, not the resident, will actually do the case. Nelson flatly refuses, and he and Blair take her off to OR. When Benton tries to get on the elevator, Nelson flatly forbids him to go anywhere near the OR.

END OF TEASER

ACT ONE 1:00 PM

-- Benton paces the OR waiting room. Unable to contain his anxiety, he heads for the OR. Through the windows he sees Nelson and Blair scrubbed, with Blair, the resident, clearly doing the procedure. As he starts to enter the room, Nelson freezes him: "Step into this room and not only will I have security drag you out, I'll have your residency hanging on my wall."

-- Carter, impressed by Greene's save, congratulates Greene on becoming an attending. "Not quite yet," answers Greene. Carter asks why Greene chose ER medicine. Greene admits the adrenaline rush and the wins feel great. Carter, considering career choices, is thinking about ER medicine. Greene feels it's the best -- you get a wide variety of exciting cases and affect real change in your patient's lives. A fat man in a tutu rolls past. Plus it's like joining the circus.

-- MARK and JODI PAULSON come in, she's 38 weeks pregnant, with mild abdominal pain, and the symptoms of a bladder infection. On exam, Greene thinks she's clinically at 32. (size of head, body, height of fundus). The couple wonder if Greene is the intern, are reassured when they hear that he's the chief resident. Mr. Paulson proudly shows Greene the ultrasound of his son: "Hey, hey, hey -- is that a boy, or what?"

-- Carter examines elderly MR. GRAYSON in Curtain 2. Doing a neuro exam: "Follow my finger with your eyes. Good. Squeeze your eyes shut." He demonstrates as he goes. "Good, show me your teeth," testing facial nerve function. Instead of grimacing, Grayson reaches into his mouth, pulls out his dentures and hands them to a surprised Carter.

-- Benton paces the waiting room as his sister JACKIE and her TWO KIDS arrive. After filling her in on their mother's condition, a guilty Benton tries to pick a fight: "Say it, Jackie. Just say it!" She won't fight, tells him to shut up.

-- Ross brings in the negative ankle X-rays on an injured high school CHEERLEADER. He gives her the diagnosis: "Gimme an S, Gimme a P, R-A-I-N." Hathaway enters: "You're in a good mood." Ross smiles, "Yeah, I am."

-- Greene gets the tests back on Jodi Paulson and diagnoses a bladder infection. He uses the opportunity to teach Carter about antibiotic use in pregnancy. The Paulsons, impressed with his expertise, ask him if he's got a private practice where they could be patients.

-- Carter passes fellow student DEB struggling with elderly MRS. DANKS in Curtain 2. He pops his head in as Deb is trying to get the reluctant old lady's dentures back in. Carter: "Those aren't hers." "Oh." When Deb hears that Benton won't be around to impress, she's out of there for the night.

-- Ross is on his way out after his shift when Hathaway passes on her way back in. She thanks him for not taking advantage of her when she showed up at his house, drunk and needy. Ross is gracious in accepting her apology -- It evens the "apology score" at 99 to 1. When she moves off, Greene asks him what that was about. Ross makes light of it, "I covered for her." Greene jokes: "What, you were charge nurse for a night?" Ross: "Kind of." Ross stops for a beat to watch Hathaway getting shift report before he heads home.

-- Mark Paulson slams into the ER: his wife Jodi collapsed in the parking lot!

END OF ACT ONE

ACT TWO 7:00 PM

-- The ambulance bay doors slam open and Greene, Carter and Hathaway make a run for Trauma One with Mrs. Paulson. She's moaning and out of it, complaining of headache. Her BP is high, They hook her up to monitors, Carter puts in an IV. Greene begins to load her with Mag sulfate when she has a grand mal seizure. They push the mag sulfate, twice the normal dose, frightening Hathaway. Finally the seizure is brought under control.

-- Greene goes to Mr. Paulson, who is confused as to what is going on. Greene answers with a studied and intelligent description of the disease of pre-eclampsia. We're fortunate that it declared itself now, right near the hospital, so that we can control the outcome. Mrs. Paulson comes around, to her husband's great relief.

-- At the admit desk, LEWIS enters for her night shift. JERRY and Hathaway are playing "Frequent Flyer" -- try to guess the patient by behavioral hints. Lewis: "Baaah. Baaaah." Hathaway: "Max Shultz, Chigago V.A.!" Jerry shocks Hathaway by snapping her bra strap. Lewis: "Jake Moon!" As Greene comes up to sign out the patients to Lewis, Hathaway gives Jerry a surprise goose: "Edna Barker, Sunnyglade Convalescent!"

-- Greene signs out the patients, tells Lewis that he'll see through Mrs. Paulson until OB takes over. He's in no hurry to go home to his empty house anyway.

-- Five-year-old KRISTIE LONG has her tongue caught in a soda can. Lewis gets a tin snips from maintenance and cuts the can away, but there's a tongue cut that needs stitches.

-- Greene evaluates the status of the Paulson baby, skillfully performs an ultrasound exam including a biophysical profile. When Carter places her on the fetal monitor, no heart beats register. Masking her concern, Hathaway moves in, asking, "Have you felt the baby move?" A tense moment, until she flicks on the switch. She stabilizes nicely, and all signs point to a healthy baby, unaffected by the seizure. Greene orders a non-stress test, an observation period on the fetal monitor. he tells Paulson the normal fetal heart rate is between 120 and 160.

-- Hathaway holds Krystie's tongue out while Lewis puts in a couple of stitches. Lewis how the adoption process is going with Tatiana. Hathaway lies, says they've changed their minds about it.

-- Mrs. Paulson has been stable, on a mag sulfate drip. Her rhythm strip is great. They move her to Curtain Area Three until OB can see her.

-- At the admit desk, Greene calls OB attending on call, DR. LIEBMAN, who is scrubbing at St. Lukes on a repeat C-section patient. Lewis is there. Greene, confident, agrees to begin induction while Liebman finishes up. Sure he can do it -- he's done two OB rotations and delivered maybe 200 babies.

-- Greene checks Mrs. Paulson with OB intern ROGER BELTRAN, who is brand new and much less experienced than Greene himself. She is far along in her pregnancy, the baby is ready to come out. He goes over the choice with the Paulsons and Beltran, who is clueless. Mr. Paulson asks, "This is a precious baby, and you're having questions, shouldn't we just go ahead with a C-section?" Mrs. Paulson is more relaxed -- it's not him that has to get cut open. She wants to try vaginal delivery and has every faith in Greene. Paulson asks "What would you do if it was your wife?" Greene would induce. "Okay, go ahead."

-- Beltran has the gall to ask Greene if he feels competent to manage awhile, until a bed opens up in OB. Greene thinks he could muddle through without Beltran's guidance. He attaches a scalp fetal monitor, rupturing her membranes, and begins a pitocin IV drip to induce labor.

-- As they walk to the desk, Lewis asks why the choice to do the induction? Greene is defensive: "You think I'm wrong?" "No," says Lewis, "I wouldn't want to do a C-section either."

-- Hathaway and Greene check Mrs. Paulson. Everything's going well, she's started having regular contractions, maybe it's time for an epidural.

-- Beltran returns with an anesthesiology intern, PAUL URAMI, who is unable in five sticks to get the needle in. Paulson looks to Greene to intervene, and Greene puts the catheter in where it belongs in one shot. As the anesthesia is given, Mrs. Paulson tells her husband, "Forget your fantasy about me having more kids and quitting work. This is it." Greene comments: "Sounds familiar." It does to Hathaway, too.

-- In Curtain Area Three, Mr. Paulson intently watches the baby monitor. Lewis comes in to see another patient, and Paulson asks her if it's normal for the rate to periodically fall. Lewis reassures him.

-- Greene and Lewis are interrupted by Paulson: "Hey, hey hey!! Come in here!! The baby's rate is down to 95..."

END OF ACT TWO

ACT THREE 1:00 AM

-- Greene checks her out. Her labor is progressing very fast. The strips from the monitor are borderline worrisome. He explains that babies sleep in 20 minute cycles -- let's wake him up. He "zaps" her abdomen with a sonic device. The fetus responds favorably. He goes over the strips with the Paulsons, reassuring them. Labor progresses. Greene, a bit less sanguine, wants an ETA on Liebman.

-- The baby's heart rate falls again. The tracing shows late decelerations, a sign that the baby may be having some difficulty. Greene recommends a trial of infusing fluid into the intrauterine catheter. And let's get OB down here.

-- Mrs. Paulson is screaming in pain. OB is finishing a C-section, will be right down. Paulson is fully dilated, the baby is coming. The late decels have started again, but the baby's going to be out in no time, so it's okay. She's ready to push. Let's go.

-- Push. Push. Push. She's not progressing. Getting bad readings on the baby. Greene, getting worried: "Let's get it out. Now! Where the hell is Liebman?" He sends Carter to OB for forceps, starts a pudendal block.

-- Carter races down the hall with the forceps, breathlessly enters the room. OB has two C-sections and 3 imminent deliveries. Liebman's supposedly in transit. Now what? Hathaway stresses that prudence says wait for OB. "You've done what they asked, no one will blame you for waiting." Greene: "The baby's monitor says now or never. I've gone this far on my choices, I'll see it through." Sweating it, he applies the forceps and pulls as Mr. Paulson freaks out. He gets the baby's head out, but the shoulder is stuck. He tries several maneuvers he remembers from OB rotation, and another from the OB text Carter reads. Nothing works. Greene decides: "Crash C-section. I'll push the baby back in, you hold it Carter."

-- They race to Trauma One, mom in knee-chest (kneeling) position, Carter holding the baby's head in. Greene scrubs quickly. Anesthesia? Before he can make a decision, she seizes again! Greene paralyzes and intubates her. Carter bags. Baby monitor screams. Can't wait. They drape her and Hathaway holds up the scalpel. Greene, shaken, hesitates.

-- Greene makes the incision. Carter holds the retractors, sponge clamps. First through the skin. The muscle. The peritoneum. Greene remembers something about the bladder flap, but can't remember what. Another hesitation. Then

plunges through the uterus. There's 2 liters in the uterus!! Oh, shit -- it's a placental abruption! The placenta has ripped free of the uterine wall.

-- Greene pulls the baby out, he and Carter clamp the cord. The baby is not breathing!

END OF ACT THREE

ACT FOUR 3:00 AM

-- "Carter! Push on the aorta while I do the baby."
Greene intubates the baby, puts in an umbilical line, gives it glucose, hyperventilates it. After agonizing seconds the baby takes a halting, gasping breath. A NICU team arrives and wheels the baby off.

-- Mr. Paulson, who looks in the incubator at the intubated, IV'ed baby. "Is he all right? Is he brain damaged? Greene needs to finish up with Mrs. Paulson, but quickly explains that baby wasn't breathing, but five minute APGAR scores are encouraging. Mr. Paulson asks the hard questions. Why did this happen? Why didn't she have a C-section? Why did you think you could do this yourself? When can we transfer to her own hospital? You haven't made one good decision all day. Greene can only answer that the outcome so far is favorable. Go to the nursery with your son.

-- Back to the mother, Greene packs the uterus and repairs the wall as Carter hold pressure. Blood transfusions arrive, Stitches in, he tells Carter, "Let go." Carter does. It's holding. Hook her on a respirator, pump in the fluids, let's get her up to ICU. Dr. Liebman, the OB attending, arrives, just when she's not needed any more.

-- Liebman and Greene argue. Liebman: A chain of errors in judgement. Greene: "I did as you asked. Where were you?" Liebman: Missing pre-eclampsia, and then electing to induce, then pulling her into a shoulder distocia. She should have had the C-section. "Who the hell do you think you are? The only thing that saved you from a disasterous outcome was dumb luck." Lewis runs up: "Mrs. Paulson's crashing!"

-- Mrs. Paulson has dropped her O2 sats precipitously. Her pulses are so weak that no one can get a blood gas. She's increasingly cyanotic and in distress. BP falling. As Greene preps to put in an arterial line, skillfully puts in the line. At the site of his puncture, she doesn't clot her blood. Uh oh... DIC, a massive clotting disturbance. She starts bleeding out her incision. She vomits blood. Greene pumps in the blood transfusions, orders platelets, clotting factors. Her BP continues to fall, and she codes. CPR started, meds, defibrillation. Is she hemorrhaging?? He and Liebman re-open the incision and look inside. Blood everywhere. Clamp the abdominal aorta. Despite the efforts, she is dead.

-- Time passes and the outcome is obvious. Greene calls off the code. Hathaway tries to comfort him: "You made the judgements and you followed them through. It's all you can ask of yourself." Greene: "I killed her, playing God." Now it's time to face Mr. Paulson. Dreading the

confrontation, Greene walks out, pulling off his bloody gown.

-- He passes the admit desk on the way upstairs. It's dead quiet. No one says anything to him.

-- In the NICU, the baby has had it's tube out and is doing really well, sitting on his stunned father's lap and getting a bottle as Mr. P rocks slowly in the rocking chair. Greene comes up in the window and watches the scene silently, unobserved. He draws a deep breath and enters. We don't hear the conversation, but Mr. Paulson lowers his head in grief.

-- Greene stands alone in Trauma One, dressed in his street clothes. Mrs. Paulson's body hasn't been moved out yet. Carter comes in. "Dr. Greene, I think you did a heroic thing." Greene cannot answer him, just turns and walks out the door.

-- On the El platform, Lewis invites Greene to join her for breakfast on their way home. He refuses, telling her he has too much to do. She senses his devastation, but there's nothing more she can offer. He gets on the last car and looks at her out the back window. Lewis watches Greene's face recede as the train pulls away.

-- On the jetty, past old men ice fishing in the early morning hour, Greene walks alone. CAMERA RISES, as Greene's figure shrinks below, the Chicago skyline rises up behind him until he is a speck on the water's edge.