

All Good Things . . .

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I rolled onto my side, opened my eyes, and gazed into the blue LED glow of the alarm clock. The light that broke through the curtains told me that the sun was just starting to rise. The heat from the late June sun was already hot. It was going to be a beautiful, sunny day.

“Shit!” The large, blue “6:12” beamed back at me. I’d screwed up setting the alarm again! I knew I had to be at work for 7:00 a.m. That left little time for much of anything. I usually left the house at 6:00 for the day shift.

I kicked the sheet off and jumped out of bed. No time for a shower. I ran to the washroom, turned on the tap, cupped my hands and splashed cold water on my face, dragged a comb through my hair. No time for a shave, but just enough time to brush my teeth. I found my uniform hanging in the den, got dressed, put on my boots, and donned my nylon windbreaker. Keys were already in the pocket, thank God! In the kitchen, I grabbed an apple, a banana, and a bottle of water from the fridge and entered the code to deactivate the alarm. After pushing * then 0 to reactivate the house alarm and hearing the alarm tones, I swiftly closed the door and dashed to my car. Unlocking it, I threw my “breakfast of champions” on the passenger seat and cranked the engine. I saw that “6:22” was brightly lit on the car radio. *Not bad*, I thought to myself. *I might just make it to work on time.*

CHEZ 106 and their morning team were playing the usual batch of classic rock to wake you up during the morning rush. I pulled out of the driveway, drove through the quiet neighbourhood streets, and headed east on the Queensway. Once I got comfortable with the commute, I scrolled down the memory on my cell to Maddy’s cell number and pushed “send.”

“Hi, Hon. Woke up late again, but I should make it to work on time. I’ll call later after three. Love you. ‘Bye!” I had made it a habit to call.

“Some breakfast!” I took another bite of the apple, uncapped the bottle, and swallowed a mouthful of water. I was driving a bit faster than the normal flow of traffic. Even if I were pulled over, I knew most of the Ottawa PD. My “Ottawa Paramedic Services” stickers were firmly affixed to the front and back of my ‘92 yellow Porsche 968. The stickers were sort of a “professional courtesy” request. Once you were known, some of the friendlier cops might be inclined to warn you instead of giving you a ticket. Maybe! I was still taking a chance.

My Porsche was old, yes, but still a great car. And relatively cheap! That was the argument I had used to convince Maddy to let me buy the car. It wasn’t too expensive, the car was a classic, and it was a cheap way to own a Porsche--there is no substitute.

Traffic was tight, but I was making great time. I slowed down to a more comfortable speed and finished my breakfast combination of apple/banana, washing it down with the last of the water. The late June morning sun was coming up fast in the east, blinding me. I put my sunglasses on and lowered the visor. The day ahead was going to be hot, humid, and beautiful--or so I hoped. I had no way of knowing what was waiting for me.

I’ve been living in Ottawa most of my whole life. When my family moved here, the city was not “The Regional Municipality of Ottawa–Carleton.” It was Ottawa, Nepean, Gloucester, Vanier, and a lot of smaller cities, towns, and hamlets.

My family moved here from Sudbury, Ontario, when I was three years old. My time in Sudbury has long since faded from memory, replaced with tales and stories of Bytown. Over the years, we lived in a variety of Ottawa neighbourhoods.

I grew up in Ottawa, went to school in Ottawa, and now work with Ottawa Emergency Medical Services. Ottawa has one of the largest EMS agencies in the province of Ontario, probably the second or third largest. The call volume has been steadily increasing for years and off-load delays don't help matters.

I continued driving from the west end of Ottawa along the 417 east to the Walkley exit. My turn came up fast. It was only four kilometres from the 417, but this morning, traffic was light. I turned left from Walkley Road and drove into the cul-de-sac parking lot of 2465 Don Reid Drive, home to the new Ottawa Paramedic Services HQ. The building is a marvel of engineering design and was awarded a LEED certification as a "green" building. With its abundance of windows, the lobby is awash in light. The new headquarters is much better than the old Ottawa ambulance building, which was nothing more than an old office building with drafty windows and way too many stairs. Glad we moved!

I parked the Porsche in the staff parking lot next to the bike racks. They are never used, so I knew my car was safe on one side, anyway. I grabbed my duffel bag and headed in. My analog watch showed 6:58--a new record! If this kept up, I could probably sleep in a few more minutes each morning. That is, if I ever learn how to set the alarm properly!

I have never learned to keep up with technology. I enjoyed my old windup alarm clock with the dual brass bells on top. I had to wind it every night. Setting the alarm was as easy as turning the dial to move the hand to the desired time. It wasn't extremely accurate, but it was easy. Even if the power went out, the clock still worked. I owned that clock longer than I care to remember. Once it died, Maddy bought the digital dual alarm, dual time zone, auto DST settings, with a twenty-page operations manual. I have been trying to find another old windup clock for years. I liked my old clock! I like my old car! Even my cell phone is nothing more than a cell phone. No text messaging, no camera, no MP3 player, no GPS. Huge by today's cell phone standards, but it works. Unfortunately, I can't find a new battery for it, so when it finally goes, I will be forced to get a new multi-function model.

I swiped my ID card, entered through the employee entrance, walked down the hall, and, as usual, found my partner, Tom Lister, waiting for me. Again! I have a habit of doing this, but Tom always has my back. Tom is taller than me, with dark hair, big in a "bodybuilder on steroids" sort of way, which he vehemently denies. Hitting the gym five days a week is perfectly natural, he always says. Unofficially, he is also known as the Ottawa Paramedic Services' calendar boy.

"You forgot to shave again, eh, Nash? Don't tell me, you woke up late, didn't have time, and ate in the car."

"Am I that transparent?" My daily routine had become . . . well, just that. Routine.

Tom always called me Nash. I hated being called Nash. He started calling me Nash because I like the Nashville Predators. Not a very original nickname. I hate it and Tom knows it. To make matters that much worse, it caught on, and now almost everyone calls me Nash. Actually, I'm pretty sure no one actually knows my real name!

Tom is like my older brother, even though he is two years younger than me. We met in college in '97, graduated together after the two-year Primary Care Paramedic program, eventually becoming partners after we both went back to college to get our Advanced Care Paramedic certification.

"I'll book on; you clean up," he offered. I nodded in agreement.

Tom called dispatch, booked on, went to the garage, and was assigned a "bus" for the day while I went into the gym shower facilities to clean up. Some of the older medics still refer to an ambulance as a bus. Forgetting to shave was not something that was going to get me into trouble, but Tom believed you needed to look the part to be the part: clean and pressed uniform, shiny boots. Do your job well, go home safe.

"A dying breed," Maddy always said of Tom.

By the time I was finished, Tom was outside in the bus waiting for me. Our first call was to the Ottawa General Hospital ER. Tom booked 10-8 in service, and left the building. We had time to stop at Tim Horton's on Alta Vista before arriving at the OGH ER. Tim's is the quintessential police/EMS coffee refuelling centre. Only the young, elitist paramedics went for the "Mocha Grande Frappachino" and were willing to pay three times the amount for a coffee that you had to add the cream and sugar to yourself.

A quick stop for an extra-large double/double yielded a nice surprise. This was a Monday morning and Tim was busy as usual. Mondays usually means long lines with a good chance of getting a call just after you pay for your drink and before you actually receive it.

Tom is too perfect for coffee. All he drinks is deionized water--four litres a day. Of course, we have to stop every half hour for a pee break!

"How are you adjusting?" Tom asked.

I turned quickly, looked at him, shrugged my shoulders, and returned to stare at the traffic in front. He knew not to ask twice.

"Did you feed the cats?" Tom's way to get me talking is to keep asking questions until he finds one I have to answer.

"Shit!" That pretty much gave it away. Luckily, I always leave out hard food and fresh water for my two boys. They would be okay for the day.

We drove along Smyth Road, pulled up the long ramp to the second level of the OGH ER, and parked under the canopy. We removed the cot and headed in for our first call, to take a patient back to a nursing home. Not the usual call for an ACP team. Tom and I are both experienced Advanced Care Paramedics, ACP for short, but dispatch knew we didn't mind doing transfers. If you treated the dispatchers well, they reciprocated.

Tom and I knew the emergency staff at all of the hospitals in Ottawa. It's easy when your partner is a bronzed, muscle-bound beach bum with golden locks that all the women--married or single and even the occasional guy--will gravitate to!

This day was no different. We had time to chat it up with the nurses and doctors in the ER, giving the crews a chance to catch up on things.

Most of the morning was taken up by routine calls, nothing exciting. We had a few minor medical calls, but none that required any extensive medical intervention.

I am always amazed at how television portrays EMS. On TV, every call is life or death and all we do is run hot from one call to the next, saving lives every day. Truth is, most day shift calls are boring, and those lifesaving calls are the exception. We don't walk around the station with a trauma bag over our shoulders. Not every guy is tall and muscular with a square jaw. Not every girl is blonde with her shirt bursting at the seams, unbuttoned to her navel.

When we do run hot with lights and sirens to a call, friends and family think we get all excited and hyped-up. All we are really thinking about is that we should have gone for a leak before leaving, or are we going to get lunch at a decent time, or any lunch at all. This doesn't

make us bad, it's simply the reality of the job. This is not the job for people who like to keep a schedule.

The morning flew by, going from basic call to basic call, dealing with off-load delays, no thinking involved. It was the most perfect, gorgeous day for driving around with the windows down and not doing a whole hell of a lot. We'd been able to grab a quick bite at a deli on Metcalfe Street, then dispatched back to the Civic Hospital ER. We went inside with our empty cot and no equipment. We'd been assigned a Code 1, the lowest priority call a crew can get. Most ACP crews don't do transfers. It has always been part of the job and still is, as far as we are concerned.

Three crews, two from Ottawa and one from Lanark EMS, waited impatiently in the halls of the ER to drop off their patients. All looked dejected and gave us nothing more than a passing glance. You could tell that they had been there for a while. It was too hot and muggy to be wasting the day standing in the emergency department waiting to unload your cargo. Their tolerance for delays was running thin. Tom and I knew better than to approach a crew on the edge of reason to engage in idle chatter when they had been waiting longer than they should. At least we were there to take one away and relieve some of the congestion in the waiting area.

This is where I'd met Maddy years ago. She was a new nurse in the Emergency Department and I had just completed my PCP program. Tom had introduced us, another reason, Maddy said, to hate Tom even more! I certainly hoped she was kidding.

The Civic ER was bustling. You could see into the waiting room as we drove past the glass walls. Every seat was full, with family members standing close by. Easily, half of these patients could have gone to their family doctor instead of going to ER or use the ER as a family doctor. It was society's way of dealing with the impatient and the uninformed. If the Ministry of Health ever held an advertising campaign to teach the public what the ER was really for, wait times would drop and there would be more money for doctors, nurses, and equipment.

One of Maddy's fellow nurses handed me an envelope without saying a word. He didn't even ask whom we were there for. It was obvious he resented being at work today. Tom and I gave a quick glance to each other, made the face we've made a thousand times before to each other every time we meet someone who hates his job and wants to make sure his feelings are known.

After I verified the patient's name against the call information we received from dispatch, we followed Mr. Personality back to the bedside. No patient report, no introduction, just a quick hand gesture to inform us that we had the right patient. He kept on walking without saying another word.

Immediately, the frail, elderly woman's eyes found Tom and knew she had struck the jackpot. "Are you taking me home?" she asked Tom; I was not sure if she even noticed me.

"As a matter of fact, we are." He smiled showing too much teeth.

"This is my lucky day! You are quite the young man." I swear he blushed.

"Thank you. This is a nice break for us to take a lovely lady back home." He always knew what to say. "Ethan and I will get the stretcher ready then take you home, if that's okay? And I get to be your guide for this trip." She smiled a toothless grin.

Tom felt it necessary to scoop her up in his arms. She put her arms around Tom's neck and he turned and gently placed her on the cot while I stood by, looking at the smile beaming from her face. Tom had just made her day!

As we exited the ED, I gave a wave to the waiting EMS crews, who usually acknowledge by doing the typical head bob. Walking through the parking lot, I pushed the button on the

remote to unlock the back doors to our rig. Tom opened the dual doors while I pushed the cot into the back of the rig and locked the swing bar onto the floor block. I lifted the foot end of the cot as Tom lifted the carriage up, and we pushed the stretcher into the locking position against the floor antlers and the locking bar.

The ride to the patient's apartment complex was uneventful and took only a few minutes. We booked 10-7--arrived on scene--and unloaded our patient, taking the elevator upstairs to the third floor. Tom led the way from the elevators, pulling the cot by the foot handle. We rounded the corner and searched the hall looking for apartment 320. Tom knocked on the patient's apartment door and waited for the family to answer.

Suddenly, a low, dense thud came from behind the door of apartment 318. Startled, Tom and I looked at each other. No words were said. We just continued to stare. No other sounds could be heard. We waited. Nothing more! Instinctively, I reached for the door handle of 318. "NO!" Tom whispered between clenched teeth.

I don't listen very well. Curiosity got the better of me. I slowly wrapped my hand around the handle. I gave it a gentle turn, felt the door open, and carefully pushed it open a crack. The door was unlocked! I peered into the apartment against the darkness, allowing my eyes time to adjust to the lack of light. The room was ominously black; heavy drapes were drawn against the sunshine outside. A quick look back at my partner was all that was needed to confirm that I should not be doing what I was about to do.

"Hello!" I called out.

No reply.

"Hello!" I repeated.

Again, there was no reply or sound from inside the dark apartment.

"Ottawa Paramedics."

I released the Velcro cover from my LED flashlight on my belt, depressed the thumb switch, and held the flashlight in my clenched fist at eye level with the light splitting the darkness. I opened the door just enough to let myself in. I left the door open to let the ambient light from the hallway illuminate some of the apartment. The darkness still dominated the room.

Tom remained with the patient in the hall. Tom had the portable radio with him. He was the driver on this call, and the driver always carries the radio. I swept the beam of light back and forth, slowly and methodically, attempting to distinguish the forms in the darkness. I followed the light to the right, walked a few feet, and moved the light to my left into the living room. I shone the light high to the right then slowly moved it across the room to the left. The drapes were pulled closed with only a thin strip of sunlight forcing its way through at the top. The light went across furniture that suggested someone in his or her thirties or forties: elegant, not too comfortable, and rigid. I stepped into the room. My heart was pounding so hard I could feel the pulse thumping in my ears. I was not supposed to be here and I knew it. This was not our job.

"Hello?" Nothing!

My light swept across the room and moved across the floor to the left then to the right. A hall went to the right, against the outside wall. The circle of light moved across the floor and lit the edge of the hall and a single running shoe that was pointing straight up.

An empty shoe doesn't balance on its heel!

I couldn't make out a leg or anything else. If there was a foot inside the shoe, the leg it was attached to was hidden behind the wall. No choice, I thought to myself. I am in this far--I might as well finish it. I followed the light through the maze of furniture to the edge of the hall, turned right, and found the rest of the body on the floor in the hall.

Now it *was* our job! I took two steps, knelt down on the patient's right side. I reached for a carotid pulse, found none, but felt something warm on my fingers in the darkness. I was ungloved.

"Shit!" I knew better.

I moved the light to the patient's face. My fingers were covered in blood and you could see the impression in the blood where I pressed against the left side of the neck, searching for the carotid pulse. I wiped my fingers quickly back and forth on my right pant leg with all the grace I could muster. My pupils were blown wide open now and, even in the darkness, I could make out more than when I first entered.

I moved the light down and saw the reason why there was so much blood. The entire right parietal lobe of patient's head was missing. Dark hair and blood were mixed in the cavity of the wound. Blood had pooled around the patient's head as he lay there. Tissue and brain matter were hanging on the jagged edges of the skull. The bright white of the bone created a halo effect that circled the outer aspect of the wound. I turned the patient's head and noticed a small entrance wound over the left temple. Dark speckles surrounded the entrance wound; possibly gunpowder. This was a "through-and-through" gunshot at close range. I followed my light up to the right against the wall and saw where the blood had splattered brain matter, and skull fragments had left their mark on the wall. I moved the light back to further examine the wound. The size of the wound and the damage indicated the calibre of the gun that obviously did the damage.

"Gun?" I said to myself, realizing we'd actually heard the murder take place. That meant the killer must still be here.

My right knee was in the warm blood which was soaking through my pants. I tried to stand but my knee slid in the blood. I was about to turn and call for Tom when something hard pressed against the back of my head.

"Don't move, please!" The voice was calm, sincere, and almost apologetic.

"Shut off the flashlight, get up, and turn around." This was not a request but a command. I thumbed the switch killing the light and holstered it. I kept my head down to show my understanding of who was in charge. I stood up slowly, so he would not confuse my fear with an attempt to attack. I could feel my foot sink deep into the wet, blood-soaked carpet like a foot in wet sand on the beach. Slowly, I turned.

The killer stood before me. He--I assumed it was a man by the commanding voice--was wearing black: black shirt, black pants, black shoes, a black toque showing only the whites of his eyes, and black leather gloves, which were holding what I thought was a very large handgun. Any gun pointed at me would be large. Even in the darkness, I could tell the pistol looked like an automatic, similar to what the police use, except the barrel was much longer. A silencer! That explains why we didn't hear the shot.

"You are not one of them!" His voice was more aggressive now. He pressed the barrel of the silencer against the middle of my forehead. I looked down the barrel of the gun and stared him in the eyes.

"Do not interfere with me again!" His tone changed. This was not a threat but a promise. The hammer of his handgun was cocked back. I closed my eyes, not wanting to see what was going to happen. He pulled the trigger! Click! Nothing! Nothing happened. I opened my eyes questioning why I was still standing.

"Next time," he paused, "the chamber won't be empty!" He turned and bolted for the door. Tom was still in the hall with our patient. I tried to yell for Tom to stop him. My mouth was

dry. I couldn't say anything. I was going to give chase, but my legs felt heavy and thick, like day-old oatmeal. I forced myself to move and then felt the floodgates open. I felt my entire body jolted with more adrenaline than I have ever felt before. My whole body jumped into action. The attacker pulled the door open, and light flooded in from the hall.

I turned, leaped over the coffee table, and gave chase. I was already breathing heavily. I hit the entrance door with my right shoulder, sending it crashing into the closet door behind. The hollow closet door collapsed under my weight and the momentum of my run. Tom and the patient were still outside in the hall. Tom was mesmerized by the chaos that was unfolding before him.

"Call the police, 10-2000! Now!" I ordered Tom. 10-2000!--"Call police, no questions asked." If any medic calls dispatch with a 10-2000, all rigs stop transmitting, and the dispatcher radios back requesting a confirmation for an "All Clear." If no "Alpha Charlie" is given, the police respond, period. Tom knew something was up. This was not like me.

I hit the hall running, my feet were on fire, my heart pumping. The killer was a good twenty feet in front of me as he turned left toward the elevator foyer. I heard the stairwell door open. By the time I got to the door, it was just closing. Up or down? Down! He would want to leave. I would if I were him.

I leaned forward, slid my left hand down the rail, braced my right hand against the wall, and jumped from the top step to the metal landing half a storey below. My steel-toed boots hit hard, the metallic sound echoing in the stairwell. I turned and repeated my jump. I looked right and saw a painted black number two on the wall. I jumped again and again until I reached the first floor, pushing the door open, entering the lobby. I saw the black figure now. He had gained distance and was already outside the building, running past the ambulance parked in front of the building, and down the street.

I pushed hard through the glass double doors, fearing they would break from the force of my run. I looked right then left. The assailant was running down the street and had turned between two small buildings across the street. Without pausing, I picked up the pace and heard the sounds of my feet slap the interlocking paving stones that made up the apartment buildings' turnaround. I failed to look before running across the street. Drivers slammed on their brakes and leaned on their horns, as tires screamed against the hot pavement. The sun was high, and the humidity only made it worse. Sweat was pouring off my forehead. I turned between the buildings. The killer was gaining more distance. My heavy boots were slowing me down. My heart was pumping. My breaths were deep and burned my lungs. I followed the figure as best I could, but he was in better shape. He rounded the building and disappeared between two cars. He was not getting away. My pace quickened. When I reached the cars, I fell into one of the car's fenders, braced myself, pushed off and continued the pursuit. When I emerged from the front of the building, my prey was closing a car door. The engine over-revved and the tires squealed as they left rubber on the asphalt.

I ran back to the ambulance parked in front of the apartment building. I didn't have keys for the rig on me, but was determined to stop him. I found the hidden external electric door switch, pressed it, and heard the electric locks disengage. I jumped into the driver's seat and located the second set of keys. I was not going to wait for the glow plugs to warm up. It was June, and the bus had been running all day; the plugs would still be hot. I turned the key, and the large V-8 Ford diesel roared to life. I slapped the gear selector down to "D," hit all three toggle switches bringing the emergency lights into action, and stepped on the accelerator hard--and then

promptly hit the brakes, making the nose of the ambulance dip down. I jammed the gear lever back into Park and killed the engine.

“FUCK!” I slapped the steering wheel in frustration. I couldn’t chase him. Could I let him get away? It was a moot point. He was already gone, I rationalized to myself.

