

BLOOD LEGACY:
THE STORY OF RYAN

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CHAPTER 1

THE LAST BODY FELL TO THE GROUND with a thud as the woman leaned down to turn the gas lever in the fireplace.

The woman stood upright, a lithe and graceful movement considering the severity of her injuries. She glanced around the room, counting a total of eighteen bodies, their limbs in various states of contortion, their injuries all more devastating than her own.

She perused the damage in the sudden silence, catching sight of herself in the far mirror. She moved closer, examining the damage to her face with a passive expression. Her hair was so matted with blood it was difficult to discern its true color. Her clothing was so bloodied it appeared a damp black in the dim lighting.

She turned from the mirror, disinterested. Her gaze again swept around the penthouse, searching for any signs of remaining life. The marble steps were stained with blood. The sprawled bodies were grotesquely positioned. The contorted limbs made no movement. Shards of glass impaled chests that no longer rose and fell.

The hiss of the gas seemed loud to her, although in reality it was barely discernible. She could hear the sounds of sirens far off in the distance. She moved to the sliding glass door, then on to the balcony. She stared downward at the black street twenty-four stories below. She could smell the gas now, seeping into the night air.

She re-entered the penthouse and glanced around, searching for her bag. She saw it on the far side of the room, clutched in the arms of a young man whose head had been removed, none too neatly. She retrieved the bag, showing little compassion for the recently deceased. She removed a small brick of what appeared to be white clay, then gently set it on the table in the center of the room.

The sirens were closer and the woman returned to the balcony. The smell of gas was powerful now, nearly overwhelming. She removed a bloody but intact case from her shirt pocket. She snapped the case open and removed a small cigar that she lit with practiced ease. With a flick of her wrist, she sent the matchstick flying off the balcony, the flame flickering out as it fell. With startling visual acuity, she tracked the match until it hit the ground, 24 stories below.

The woman puffed on the cigar contentedly a moment, her demeanor in stark contrast to her grievous injuries and the bloody scene behind her. The sirens were only a block away. She removed the cigar from her mouth, gazing at the red tip thoughtfully. With a surprisingly supple move, she stepped up onto the railing of the balcony, balancing effortlessly on the slippery surface. With no regret or hesitation, she flicked the remainder of the cigar into the room behind her, then stepped off the railing into the darkness as the world behind her exploded.

CHAPTER 2

DR. SUSAN RYERSON GAZED THROUGH THE MICROSCOPE, searching for the tell-tale signs of metastasizing in the biopsy. There were none, and she stepped back to make a notation of this in her records. She leaned forward to make another observation when the phone rang. She reached over, pressed the “speaker” button, then returned to her microscope. She brushed her red hair out of her eyes, peering into the eyepiece.

“Hello?” came the uncertain voice over the phone.

“Oh, hello,” Susan said belatedly, realizing she hadn’t even greeted the other person. Her distraction was evident to the person on the other end of the line.

“Hey doc, if you’re busy...”

Susan stood upright, again brushing her red hair out of her blue eyes. “No, Mason, that’s okay. What do you need?”

Mason was still hesitant. “I’ve got something you should see in the basement, might help your rese—”

“Okay,” Susan said, hurriedly cutting him off. She was uncomfortable discussing this with him over the phone. “I’ll be down in a few moments.”

Susan removed her lab coat, smoothing her stylish suit. She was small and slender but carried herself with self-confidence. Although a mere 34 years old, Susan Ryerson was a well-renowned researcher and

full medical doctor.

Renowned or not, Susan thought to herself, the scientific community would not look kindly on her use of human bodies unethically (and illegally) obtained from the county morgue. Susan attempted to rationalize the breach in ethics by telling herself the ends justified the means. She only used bodies that no one claimed and would be unceremoniously disposed of, anyway. The way she saw it, this was a final chance for these people to contribute something with their lives, even if it was only through their deaths.

Susan exited her private lab and used her security code to access the elevator. She stepped into the waiting elevator and leaned against the wall as the car dropped smoothly into the basement. The facility she worked for was a contradiction of sorts. It possessed one of the finest trauma centers in the United States, yet doubled as the county morgue. It fostered some of the most advanced medical research in the world, yet it routinely resembled a war zone. The hospital lost a fortune to patients with no insurance, yet made a fortune through the research and development wing. Patents and contributions were the big moneymakers in this hospital, not patients.

Susan Ryerson possessed four such money-making patents. She had discovered a unique drug delivery system, a method of stabilizing glutamine in solution, and two anti-obesity drugs. She saw little of the monetary returns from her million-dollar patents since her research had been completed under contract with the hospital, but she lived comfortably and was given free rein in her research. It was the latter that gave her impetus to continue.

The doors to the elevator opened and the smell of formaldehyde struck Susan full force, causing her to wrinkle her nose. She moved down the dimly lit hallway into a brightly lit office. It was empty. A scribbled note on the chalkboard said simply "IN AUTOPSY."

Susan retraced her steps down the hallway and passed the elevator. She pushed through another set of double doors and the air was noticeably cooler. She lifted the latch on the heavy metal door to the meat locker.

"Meat locker" was not actually the appropriate name for this

room. But in typical morgue humor, it was an apt description. Unlike the neatly aligned cubicles seen in film and on television, this room reflected a more accurate reality.

Hundreds of bodies were piled on gurneys and on shelves against the wall. Sometimes three deep, the bodies were enclosed in large, see-through plastic bags. Because of its dual role as hospital morgue and county morgue, most of the people here had died violent deaths, a fact evident by the twisted and contorted limbs pressed against the plastic. Gaping mouths were open in endless silent screams, or perhaps in endless silent snores.

Susan had the odd thought that even the recently dead looked nothing like the living. As she glanced around at the bodies, she thought how fine the line was between life and death. Death was the demon she chased in her research, yet no one had come up with an apt description of what exactly it was that separated these bodies from her.

Susan snorted quietly at her own mental ramblings. She could see herself at the next medical board meeting discussing her new definition of clinical death:

“It’s a lot like obscenity, gentlemen. I can’t define it, but I know it when I see it.”

The formaldehyde smell was stronger in here and Susan couldn’t help but make the connection to her high school science course; these people in their ziploc bags reminded her of giant fetal pigs.

She moved further into the room. To the right were the “crispy critters,” people who had burned to death and who would now literally break into pieces if touched. They had their own unique stench that not even the formaldehyde could completely disguise. They were not of much use to her.

To the left, against the wall, was a set of bookshelves, or perhaps mail cubicles. But upon closer inspection their true purpose was revealed. The soles of tiny little feet could be seen sticking out of the end of the cubicles. Tiny little feet with tiny little toes with tiny little tags on them. This was the only part of the morgue that bothered Susan. It didn’t have a nickname; it was just where they kept the dead babies. She could not use any of the dead infants; it was one breach of ethics

she could not force herself to commit.

She moved through another set of doors into a brightly-lit room. The air was warmer in here, and a little more putrid. The bodies had to warm up a little before they could cut on them.

A slender black man leaning over a corpse looked up. His face broke into a sunny smile. "Hey, it's my favorite doctor. You sounded kind of busy on the phone. You working on something good?"

Susan moved closer to see what he was doing. "No, not really. I'm more in a fact-gathering mode right now."

Mason set down his instrument and removed one bloody glove. "Oh, then I don't know if you'll be interested in what I have for you."

Susan glanced down at the body on the table, unwilling to leap immediately into their mutual indiscretion. "What are you working on?"

Mason picked up a clipboard. "Hit-and-run. Twenty year-old male. They're trying to match injuries to mechanism, that sort of thing."

Susan nodded. Mason was a recognized forensics expert as well as coroner. He replaced his bloody glove and pointed to another nearby gurney. "I think I've got another slasher victim. Thirty year-old female. Same type of injuries, same type of death. They need to put that guy away. It's not good when my business is booming."

Mason continued his casual conversation as he cut on the body in front of him. Susan watched with only mild interest, glancing around the room. This room always seemed to have a fungal quality to it even though it was spotless. Spotless, she thought, wrinkling her nose slightly. The place might be sterile, but it would never be clean.

Mason stopped in the middle of what he was doing. "Hey, I'm sure you've seen more than a few of these. Let me show you what I've got so you can get back to your work. Come over here and take a look at this."

Mason was already moving across the room and Susan had to walk around the table to follow him. He pulled the sheet back from a gurney against the wall.

"How old do you think she is?"

Susan stared at the profile of a woman, an incredibly beautiful woman. Shoulder length golden hair surrounded perfect features. Long dark eyelashes rested against high cheekbones above a full, sensual mouth. It was the profile of a sleeping angel.

Susan moved closer and the illusion of sleep was immediately shattered. The right side of the woman's face was crushed inward, and dried blood was splattered down the right side of her body. The remnant of clothing that was left appeared black, but was actually encrusted with dried blood.

Susan took a step back so she could not see the damaged side of the face. She examined the woman's features and could see why Mason was in a quandary. The woman could be anywhere from twenty to forty.

"Who is she?"

Mason glanced down at the clipboard. "That's why I called you. She's a Jane Doe. Apparently was involved in one hell of a fight. I'll be damned if I can determine her age, though."

Susan understood his indecision. The woman had an ageless quality about her; perhaps twenty to forty was too narrow a range.

"Take a look at this."

Mason pulled the sheets upward from the bottom of the gurney. Susan moved to look and let out a small gasp.

The woman's legs had numerous compound fractures with bone protruding in several places, most noticeably where the right femur had broken through the side of the thigh.

Susan looked closer, something did not seem quite right, beyond the obvious fact that the woman's bones should not be protruding from her body. She glanced up at the length of the torso.

Mason nodded, following her train of thought. "She's about six inches shorter than she should be. Her legs are telescoped." He glanced at the clipboard again. "She appears to have jumped from some unbelievable height. They thought she was involved in that terrorist bombing downtown, but they found her several blocks away. There was no evidence she was dragged or carried." He paused, looking down at the body, "And it's not likely she walked." He cocked his head to one side,

examining the damaged legs. “Whatever she jumped from, it looks like she landed on her feet.”

Susan glanced at the length of the torso. “She was tall, then.”

“I would guess around six feet. She’s also a good 25 inches across the shoulders. Between that and the quality of muscle she carries, I would guess she had the body of a world class athlete.”

“Have you done any work on her yet?”

Mason shook his head. “No, she really doesn’t have any priority. She’s been here for some time now, case remains open, ruled as a homicide. But I was given instructions to go ahead with the autopsy, then dispose of the body. I’ve been keeping her in the icebox. Don’t really know why,” he said self-consciously, “I just felt like doing so.”

The “icebox” was a neat row of refrigeration units in another room. It was a step above the meat locker, and closer to the television/film version of body containers. It was where they put bodies needing identification by next-of-kin. They sure as hell didn’t want the next-of-kin walking into the meat locker.

“Jane Does” were rarely put in the icebox, but strangely, Susan understood Mason’s compulsion to do so. She felt an odd sadness as Mason pulled the sheet back over the woman’s body.

“I thought maybe you could give her one more chance to make a difference, since they’ll probably never find out who she was.”

Susan felt suddenly grateful to Mason, that he had reframed her ethical struggle in such a way. She nodded thankfully to him. “Yes, I think I can use her. I’ll make arrangements to have the body moved upstairs after hours.”

Susan opened the door to her house, carefully eyeing the walkway behind her. She lived in a low-crime area and the walkway was well lit, but one could never be too careful at 5 o’clock in the morning. She had stayed at the lab far later than she realized.

She pulled the tasseled cord to a lamp and soft light fell on beautiful antique furniture. She set her paperwork down on a smooth,

mahogany desktop. The room, a study in luxurious grace, was also in meticulous order.

Mr. Earl, her gray, short-hair cat, leaped up onto the cushioned seat. She picked him up and scratched the back of his head. She set him back down and he trotted into the kitchen behind her, knowing he would be fed. Mr. Earl was one of two allowances of disorder in her very ordered and elegant world.

Susan boiled a cup of Earl Grey tea, her favorite, then settled in her chair near the bay window where she could watch the sunrise. Mr. Earl leaped up into the chair and settled in her lap next to the steaming cup of his namesake. She stroked the back of his neck as she sipped her tea.

For some reason her mind kept returning to the golden-haired woman in the morgue. Perhaps it was simply because her research that night had been mundane, but Susan found her thoughts returning to the dead woman with unusual frequency. Certainly the woman's injuries were notable, but Susan did not generally dwell on any of her research subjects, and technically the woman wasn't even her subject, yet.

Susan finished her tea and rinsed the cup out in the sink, setting it to dry in its rack. She let Mr. Earl out, then turned as she heard the sound of little padded feet across her wood floor. Her five year-old, Jason, stood in the doorway, his red hair tousled and his eyes still sleepy.

Susan held out her arms and he ran into them, his little padded feet slipping and sliding on the floor. She picked him up, hugging him tightly.

"Did you sleep well, munchkin?"

He tried to appear petulant, but his effort was comical. "No, I was waiting for you to come home."

"Now don't you act that way," said the large, genial woman in the doorway. She moved into the kitchen, patting Susan on the shoulder. "Your mommy works very hard."

Susan smiled at the older woman, grateful for her support. "I'm sorry, Neda. I should have called—"

Neda gently cut her off. "I know how you are when you work. I slept in the spare bedroom. And little bossy boy here," she said, affec-

tionately ruffling Jason's tousled hair, "was asleep at 8 o'clock." She held out her arms for the boy, addressing Susan. "You're very tired. Why don't you go to bed and I'll get Jason breakfast and get him to school."

Susan hugged her son tightly, then gratefully handed him over to the woman. "You're a godsend, Neda. I'll set the alarm so I can pick him up."

CHAPTER 3

SUSAN TOOK A FEW DAYS RESPITE FROM WORK to spend with Jason, then returned to the lab. It was one of the benefits of being a prime producer for the hospital; she could name her own hours.

She donned her lab coat, making a mental note to call Mason in a few hours and make arrangements to get the body. She hoped he still had it in the icebox. She settled down to review her notes.

Mason pulled his latex gloves from his fingers with a snap. He pulled hard on the fingers of the gloves, then released them. They shot across the room like a rubber band, bounced against the wall, then slid down the wall into the waste receptacle.

“Two points.”

He meandered down the dimly lit hallway to his office. He turned on the small lamp on his desk, then killed the overhead flourescents.

“That’s more like it. A little ambiance.”

He stretched out on the worn couch next to his desk. A short nap wouldn’t hurt anything; he didn’t have any pressing cases right now and it had been slow the night before. He pulled a tattered pillow to

his chest.

He was just beginning to relax and drift off to sleep when he was jerked rudely awake. Something was not right. He listened intently, but it wasn't really a sound that he was listening for.

Mason sat up. If it wasn't a sound he was listening for, then what the hell was it? That didn't make any sense. He started to settle back in the couch, rearranging the pillow.

He sat back up. What the hell was that smell?

Mason was so used to the odors associated with the morgue he could no longer smell the formaldehyde. But that wasn't formaldehyde he was smelling now.

"Shit."

He tossed the pillow to the floor. His bet was those computers had gone offline again, and that was bad news.

He walked down the hallway, turning right at the elevators. Ever since they had changed the refrigeration units from manual to computerized, they had been nothing but trouble. It had been a simple thing for him to check the temperature gauge every few hours and adjust the thermostat accordingly, but no, they decided they could save pennies, hell, even nickels a month in energy bills if a computer did it for him.

He pushed through the door of the control room. The first time this baby had gone down, the icebox had pretty much melted. Next-of-kin identification had not been pleasant that week.

Mason examined the controls thoughtfully. Everything appeared to be functioning properly. All temperature levels read normal. All computers seemed to be online.

His puzzlement growing, Mason pushed through the doors to the icebox and caught his breath. The smell was definitely coming from in here. He flipped the switch to his right, but nothing happened.

Oh, that's right, he thought sarcastically, another energy saving device. The lights are controlled by computer, another cost-efficient and totally impractical idea. Just what young aspiring trainees needed, the lights in the morgue going on and off on their own.

Mason stood for a moment while his eyes adjusted to the dim light. He scanned down the row of units. He was ready to turn away

when out of the corner of his eye he saw what he was looking for.

Another drop of water landed on the floor.

Mason walked over and bent down to the puddle on the floor. He glanced up to the units where the condensation was coming from. He touched the lower unit and it was warm to the touch. He slid his hand up the metal surface as he stood. This unit was nearly hot. In fact, it appeared this unit was the one malfunctioning and radiating heat outward to the adjacent units.

Mason lifted the handle on the middle unit and pulled the drawer outward. He felt a pang when he saw the golden hair; he was hoping it had not been her unit, but apparently it was. He would have to let Susan know her research subject probably wouldn't keep much longer. He leaned forward, though, puzzled. He was surprised the stench had not overwhelmed him; the smell was coming from the adjacent units.

Mason was just about to shut the drawer when he stopped and pulled it out a little further. Something seemed strange about the body he had put in here days ago. He pushed the plastic closer to the face so he could get a better look, but the plastic was still blurry. He reached in with both hands and unzipped the top portion of the bag so the woman's face was exposed.

He stared at the face, trying to figure out what was bothering him. He was surprised at the lack of stench when he opened the bag. He shrugged his shoulders; so this body was not decomposing as rapidly as the others were. Hell, she looked better now than she had three days ago.

Mason stopped. Maybe that was what was bothering him. Maybe she did look better than she had three days ago.

Mason shook his head. Or maybe he had just mentally exaggerated her injuries. He didn't know why he was so infatuated with this particular body; he was beginning to worry about himself. If he started having necrophilic fantasies, he was definitely going to find another job.

"Okay Mason. Enough of this. Time to go find out what's wrong with those computers."

He reached down and began to zip the bag. The zipper caught

and he briefly struggled with it.

And then Mason's heart stopped.

The woman's face was framed between his suddenly nerveless fingers. The side that was crushed inward had left the orbit intact, as well as, presumably, the eyeball itself. This presumption was proved abruptly and emphatically correct.

Because the eyeball was looking at him.

Susan poured herself the first cup of coffee from her freshly brewed pot. She laced it with a touch of honey and a touch of cream, and was just preparing to savor her first sip when the phone rang. She pressed "speaker" and mumbled a hello.

"Uh, Dr. Ryerson?" came Mason's uncertain voice.

Susan stretched her neck from side-to-side, still trying to wake up. "Yes Mason?"

"Uh, doctor, do you think you could come down here and check something out?"

Susan tried to press her chin to her chest to get the rest of the kinks out. "I was going to come down later anyway. Can it wait?"

"Ummm," he said uncertainly, "I really don't think so. I really wish you'd come down here now."

Susan stood upright, finally sensing the agitation in his voice. "Is everything all right? What's wrong?"

For once it was Mason who did not wish to disclose over the phone. "I really think you should come down here."

Susan stepped off the elevator to find Mason waiting for her in the hallway. He seemed shaken. Susan touched his elbow, intending to guide him down the hallway, but he stopped, almost afraid to continue.

Susan looked at him curiously. "Mason, what's wrong with you? Why are you acting like this?"

Mason was not sure where to begin. “Doc, I thought the refrigeration units went off-line so I went to check them.” He stopped, trying to steady his voice. “The units were warm like something was heating them up. I opened her drawer and unzipped her bag, and she opened her eye and looked at me.”

Susan was confused. “What are you talking about? Who is ‘she’?”

“The woman with the gold hair. The one who jumped out the window.”

Susan felt a slight misgiving but dismissed the feeling. She knew immediately whom he was talking about.

“Look, Mason. You and I both looked at her injuries. There was no way she was alive.” She searched for a plausible explanation. “You of all people know how bodies settle. Isn’t it possible you jostled her and her eyelids rolled back?”

Mason relaxed only a little. “Yeah,” he said doubtfully, “I guess that’s possible.” He didn’t know why he didn’t reach that conclusion himself, and why it didn’t seem to appease him.

Susan nodded. “Why don’t we go in here and you can show me what happened. Okay?”

Mason nodded, but was not enthusiastic about re-entering the icebox. “Okay,” he said doubtfully, “That sounds like a good idea.”

Susan took three steps, then stifled a gag. “Well, something is definitely wrong with the icebox.”

She followed him into the control room and he fiddled with the computer a moment until the lights in the adjacent room came on. She followed him into the icebox.

One of the drawers was left partially open and upon approach, Susan saw the body of the woman she had seen previously. The bag was unzipped to just below her chin, but other than that she looked exactly the same. Both eyes were closed.

Susan reached down and unzipped the bag a little more. She felt a little foolish, but she poked the woman in the chest. Cold and hard. She stepped back and indicated that Mason should do the same. He was starting to feel foolish as well, and more so when he leaned over and poked the corpse. Cold and hard. The woman was obviously dead.

He stepped back. "Look, doc. I'm really sorry. Maybe I've just been working too hard, or maybe I had a bad dream or something. I've never had a hallucination like that before."

Susan grasped his shoulder. "And I've never known you to do anything but laugh down here, and sometimes I think you do it to cover up the things that bother you. You know it's okay. Even coroners sometimes get the creeps."

Mason let out a huge sigh of relief. "Maybe you're right. I think this one bothered me a little more than most." He reached down and started to re-zip the bag.

"Hold on just a minute."

Mason stopped. Susan was looking at the woman's face strangely. "Did you clean her up?"

Mason shook his head. "No, I usually let morticians do that. I figured it wouldn't get done in this case."

Susan shook her head as if to clear it and went to zip the bag. She stopped again, examining the face more closely. "You know," she said uncertainly, "I would swear there was a lot more damage to the right side of her face."

Mason did not agree or disagree.

She shook her head in disgust. "Now I'm being foolish. It's probably just more of the body settling." She reached for the zipper a third time, and for the third time she stopped.

"You know," she said, then trailed off. She glanced up at Mason. She reached down and began to unzip the bag the rest of the way. She peeled the plastic back so she could get a good look at the damaged legs.

Mason looked down at the legs. They looked much the same to him.

They did not to Susan. She shook her head in confusion. "Didn't she have a compound fracture of the right femur?"

Mason glanced down at the right leg. There were several compound fractures, but none of the right femur. He was confused as well. "I thought there was a fracture at the femur."

Susan stared at the leg a long moment, then snatched at the zip-

per. "This is ridiculous. You've been working too long and I'm still half asleep." She zipped the bag up in one fluid movement until it snagged near the chin. She pushed the zipper away from her.

"That's fine. Let's see if we can get refrigeration back on-line." She started to walk away and stopped when Mason didn't move. She walked back over to him, leaning across the body to grab his shoulders. She looked into his eyes.

"Mason, this is crazy."

"Aaaahhh."

The sigh was deep and heartfelt and very loud in the silence.

And it didn't come from Mason.

Both Mason and Susan looked down at the body between them.

The body coughed.

Susan wasn't sure if she had taken eight quick steps back or simply covered the whole distance in one huge leap. Mason had covered a similar distance in the opposite direction and now stared at Susan across that chasm with wide eyes.

Susan was in a fundamental, accelerated decision process. Should she react as she wanted to, which was to scream and run like hell? Or should she react as she was trained to, like a doctor?

She reacted like a doctor.

"Let's get this woman to ER," she said, trying to keep her tone even, "NOW!"

The gurney smashed through the double doors with Susan leading it from the side and Mason pushing it from behind. A young intern was running along side, trying to keep up.

"Who's the doctor on duty?" Susan barked at him.

He tried desperately to get a quick look at the status board as they rolled past. "I think Dr. Goldstein and a first-year resident."

Susan inwardly sighed. She and David Goldstein did not get along. He was jealous of both her work and the privileges that came with it. He had not been as successful a researcher as she had, which

was why he was still working ER. If she could have chosen anyone not to be there, it would have been him.

The no-nonsense nurse from the front desk caught up with them, and Susan turned to her. "Norma, find Dr. Goldstein and get him in here. Then join us in trauma, stat."

The nurse nodded, trying to get a look at the patient on the gurney. She hadn't seen anyone come in. She was certain she could find Dr. Goldstein down the hall by the coffee machine and/or with Nurse Fields.

Mason hit the automatic release and another set of doors opened in front of them. The young intern was joined by the first year-resident, and Susan motioned for them to take their positions.

"Mason, take the feet. I've got the head. You—"

"Baxter. Carol Baxter," the resident said helpfully.

"Yeah, Baxter, you go there. On my mark, one, two..."

On three they lifted the patient in a practiced motion and slid her onto the table. Both Baxter and the intern had puzzled looks on their faces. This body did not feel right.

"You—" Susan pointed at the intern.

"Louis."

"Louis, get me 5 milligrams of epinephrine, 1 milligram of atropine, and 100 milligrams of lidocaine." Susan pulled the sheet back from the body. "Baxter, set up an IV push. Mason, drag the EKG over here. I'm not getting any pulse."

Susan became aware of the fact that Baxter and Louis were just standing there, stunned looks on their faces.

"What are you two staring at? I need that IV push now!"

Baxter started to move, then stopped. She did not want to risk Susan's wrath, but she felt she had to say something.

"Uh, Dr. Ryerson," she began uncertainly, "this person is dead."

Susan felt her temper flare. Just because she was in R&D these days didn't mean she had forgotten everything she knew. "Do you think I don't know what a dead person looks like?" she demanded. "When you've been a doctor as long as I have, you can begin questioning my decisions! Until then, just do as I say!"

The scathing reply had the desired effect: both assistants sprang into action, following her orders out of blind obedience more than anything else. Mason dragged the EKG over and Susan swiftly attached the electrodes, eyeing the heart monitor. She had a flatline.

“Clear!”

Baxter was having a difficult time inserting the IV into the cold, hard flesh. At the doctor’s command, she jammed it beneath the skin and took a step back.

The body jumped off the table in a mockery of life. Susan glanced at the monitor.

Flatline.

Susan motioned to Baxter and Louis. “Start CPR. See if you can get some kind of pulse.” She began struggling with the intubation tube; the esophagus was generally much more yielding.

“Doctor, what are you doing?”

Norma came through the door wearing newly donned sterile clothing. She stared at the corpse on the table.

Susan ignored her for the moment. “Louis. Give me those syringes.” She, too, had difficulty injecting the drugs and ended up jamming the needle to puncture the skin before she could depress the stopper. She turned to Norma.

“I think we have a case of deep comatose, possible hypothermia. All life signs have slowed to imperceptible levels. The patient is in a deep state of unconscious.”

Norma looked at the body on the table. “Doctor, the patient is dead,” she said matter-of-factly. She looked at the heart monitor, then at the respirator. “She has no life signs.”

The room grew quiet. Baxter and Louis both stopped what they were doing and watched Susan with trepidation. It was both eerie and embarrassing to watch such a distinguished member of the faculty lose it like this.

Susan felt a hot flush on her neck. Nothing she was doing was getting a response from the victim. She adjusted the tubing on the respirator and forced another injection. A different nurse appeared to offer assistance.

“Monitor her vitals,” Susan barked at her. The nurse stepped back, and with some confusion began to write zeros on the medical record. She did not want to look at the corpse on the table.

Mason was standing back, watching the respirator. He kept having to remind himself to breathe as he willed the bag to rise and fall. He, too, was growing increasingly frustrated and more than a little embarrassed.

Susan looked up from the body. She was debating whether to attempt another defibrillation. Emergency medical care had generally already ended at this point and it was simply a matter of pronouncing death. She felt a wave of doubt wash over her as she stepped back from the table.

“Any suggestions?”

The question was directed at those present in the room, but it was Dr. Goldstein coming through the door who answered it.

“Yeah, how about burying that thing?”

Susan looked over at him. “Goldstein, I’m glad you’re here,” she said, trying to sound convincing, “we’ve got a patient in a pronounced vegetative state—”

“Nurse,” Goldstein interrupted, “what do you show for a pulse?”

The nurse looked down at her clipboard, although that was unnecessary. “Zero.”

“Respirations?”

“Umm, zero.”

“Blood pressure?”

“None.”

Goldstein peeled off the gloves he had just pulled on. “There you have it. I hope that’s not why you called me in here, Susan.”

Susan felt stubbornness war with her doubt, and the sarcasm in his voice increased that stubbornness. “David, we’ve seen several signs of life. I heard her cough in the morgue—”

Goldstein was incredulous. “You brought her up from the morgue? Have you lost your mind, Susan?”

Susan started to say something to defend herself, then snapped her jaw shut. Goldstein continued his sarcastic tirade. “Now, I know

how precious your research is to you, but this is real-world, Susan. This person is dead, and none of your patented procedures are going to bring her back.”

The silence was suddenly very loud in the room. Susan glanced down at the mangled corpse, the hot flush now traveling from the back of her neck to her cheeks. She wondered if her face was as red as her hair. She tried to salvage whatever dignity she could from the situation.

“Mason,” she said calmly, her voice betraying only the faintest quiver. “Perhaps it was just the body settling as we discussed. Better to err on the side of caution. Would you please continue with the original arrangements for this body?”

Mason nodded, embarrassed for himself but even more so for the doctor. He felt terrible at the humiliation he had caused her. “I’ll get on it right away, Dr. Ryerson.”

Susan nodded to the intern, the resident, and to the two nurses. “Thank you for your assistance. I’m sorry if I caused you any inconvenience.”

She brushed by David Goldstein without another word.

Susan slowly pulled her lab coat back on. What in god’s name had gotten into her? She was normally so calm, so logical, so rational. Yet she had just dragged a body out of the morgue and attempted to bring it back to life, à la Frankenstein. And to make matters worse, David Goldstein had been there to witness her folly. She was certain to hear about this at the next staff meeting.

Her thoughts were interrupted by a banging on the lab door. She had been so engrossed in self-reproach she had not heard the elevator. She looked out the window and was shocked to see Mason peering back at her, the gurney in front of him. She hurriedly opened the door, pulling both him and the body inside.

“Mason, what are you doing?” she exclaimed, “Have you lost your mind?”

Mason was apologetic but unrelenting. “I’m sorry, doc. I think

something's going on here. I think you should hook this lady up to some of your equipment."

Susan was exasperated. She had already suffered enough humiliation for one day. She did not want to be seen smuggling bodies into her lab in broad daylight. In fact, she corrected herself, she did not want to be seen smuggling bodies into her lab at any time of day.

"Mason," she began, trying to sound calm and convincing, "This woman is dead. She's been dead for some time now. There's nothing we can do for her."

Mason's jaw was stubborn. "Then it won't hurt to hook her up to some equipment."

Susan started to argue, then relented. Nothing she was going to say was going to sway him. "Okay, we'll hook her up to an EKG one more time to see if we get anything. If not, we call it quits and I put her back on ice." She glanced over her shoulder. "But bring her in here, for god's sake. I can't believe you brought her up here."

Mason pushed the gurney into the next room and Susan pulled the door closed behind her. She used this room to conduct experiments on the effects of sleep deprivation on the immune system, and it was full of monitoring equipment for that purpose.

Susan pulled the sheet down from the woman's torso and placed the pads from the EKG on the corpse's chest, feeling mildly foolish as she did so. She flipped the switch to the monitor, and the display settled into a flatline. She gazed at the screen for a few moments, then at Mason.

"How long are we going to wait until this convinces you?"

Mason glanced down at the hard, cold flesh, then at the glowing screen with the thin blue line running across it. He himself was starting to lose conviction. Perhaps he was just trying to make up for the damage he had caused in the emergency room. Perhaps he just didn't want to accept the death of this beautiful woman. Perhaps he should just let things go.

The single beep was very loud in the quiet of the room. Both pair of eyes turned to the monitor to watch the single jagged peak travel across the screen before it returned to flatline.

"That's probably a malfunction," Susan offered uncertainly in the silence.

"It's not," Mason said, his conviction returning. He glanced over at the edge of the gurney. "Look at that."

The bag of blood from the emergency room was still hanging from its hook. They had turned the stop valve when all attempts to revive the woman had failed. The blood trapped in the tube remained. As both of them watched, the blood level in the tubing slowly dropped until it disappeared. Susan reached up and turned the stop valve. The blood from the bag began to snake downward through the curving tube. The IV that had been so haphazardly inserted held and the blood disappeared into the woman's arm.

"The blood should be pooling underneath the skin." Susan said hesitantly, finding no signs that it was doing so. She glanced up at the bag, which was now a third gone. "Or not going in at all."

Another beep broke the silence and another jagged peak swept across the EKG screen. Susan stared at the screen, then down at the body in front of her. She was baffled by what was going on, but knew she was not taking this body back to ER. She turned to Mason. "Do you think you could 'acquire' some more blood? Most of the samples I have up here are not sterile."

Mason nodded. "Sure doc, I can 'acquire' anything you need." He took one last look at the body, then disappeared.

Susan turned back to the body, which still looked like a cold, dead corpse. She tried to come up with a plausible explanation. She knew of cases where people had fallen into ponds or lakes and were trapped beneath the ice for several hours. Their vital signs slowed to nothing, including brain activity. Perhaps this woman was in a similar state, although it hardly seemed possible. If the woman were capable of being revived, she most certainly would sustain severe brain damage.

Mason returned in a frighteningly quick time considering the illegal activity he was engaged in. He carried four bags of thick, red blood. While Susan prepared to replace the original bag, which was now almost empty, Mason watched the blue flatline move across the screen. "Why don't you hook her up to the EEG?"

Susan glanced over her shoulder. "What?"

Mason motioned to the EEG. "Hook her up, see if you can get any brain activity."

Susan was skeptical, still not accepting what was in front of them. "Well, the brain requires oxygen to function. If you don't have a pulse, and you don't have respirations, you're probably not going to get any brain activity."

Mason returned to his earlier argument. "What have you got to lose?"

Susan glanced over at the EEG. Mason was right. What did they have to lose? They had already stolen a body, four bags of blood, and jumped to some wild conclusions on what was probably a malfunctioning EKG. She sighed, then moved to the EEG. She attached the electrodes to the woman's temples, then stepped back.

Mason was standing ready and he flipped the switch on the monitor, causing the screen to spring to life. He stepped back in satisfaction.

"Would you look at that."

An even, sinusoidal pattern began snaking across the phosphorous screen.

Surprise was evident on Susan's face. She still sought a logical answer, although the logical answer was becoming less and less plausible.

"This machine could be malfunctioning, too."

She moved to study the readout. "But I don't think so. This pattern is entirely too regular, but not one I've seen before." Her voice trailed off as she touched the peaks on the screen. "These look like alpha waves, but far more exaggerated than normal." She stepped back, a thoughtful look on her face. "It's almost like a sleep disorder."

Mason glanced over at the body. Now his doubt was evident. "You're telling me she's just asleep?"

The pattern on the screen changed dramatically and the regular wave began arcing up and down the grid in an erratic pattern. Susan stared at the screen in dawning recognition.

"No, I'm telling you she's dreaming."