

Critical Care

CANDACE CALVERT



TYNDALE HOUSE PUBLISHERS, INC.
CAROL STREAM, ILLINOIS

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Critical Care

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Published in association with the literary agency of Natasha Kern Literary Agency, Inc., P.O. Box 1069, White Salmon, WA 98672.

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Library of Congress Cataloging-in-Publication Data

Calvert, Candace, date.

Critical care / Candace Calvert.

p. cm. — (Mercy Hospital ; no. 1)

ISBN 978-1-4143-2543-9 (sc)

1. Nurses—Fiction. I. Title.

PS3603.A4463C75 2009

813'.6—dc22

2008050285

Printed in the United States of America

15 14 13 12 11 10 09

7 6 5 4 3 2 1

PRAISE FOR CRITICAL CARE

“Good-bye, *ER*. Hello, *Critical Care*! Candace Calvert delivers a wonderful medical romance that peeks inside the doors of an ER to discover a cast of real-life characters who learn to love and live and discover God’s truths, all in the high-stress world of medicine. If you like *ER* and *House*, you’ll love Logan and Claire and their friends at Sierra Mercy. Give me another dose, and soon!”

+++**SUSAN MAY WARREN**, award-winning author of *Happily Ever After* and *Nothing but Trouble*

“I’ve always said if I weren’t an author, I’d be in the medical field, so it’s no wonder I ate up Candace Calvert’s new book *Critical Care*. I lived and breathed the problems and struggles in the ER along with the characters. Terrific story and terrific writing. Can’t wait for the next one!”

+++**COLLEEN COBLE**, author of *Cry in the Night* and *Lonestar Secrets*

“Finally, a reason to turn off *ER* and *Grey’s Anatomy*. Here is a realistic medical drama with heart. Candace Calvert gets it right with page-turning prose, a heartwarming love story, and hope. Don’t make us wait too long for the next one!”

+++**HARRY KRAUS, MD**, best-selling author of *Salty Like Blood* and *Could I Have This Dance?*

For Elizabeth Dewante
Artist, loving mother, and wonderful woman of faith.
You've blessed my life.

ACKNOWLEDGMENTS

Heartfelt appreciation to:

Agent Natasha Kern—for encouraging me to follow my heart.

Tyndale House editors Jan Stob and Lorie Popp—I'm honored to be part of the team.

Talented critique partner Nancy Herriman—your friendship and help . . . priceless.

Nurse Linda Roberts—"To get through it, you've got to go through it." Wise words, dear friend.

Barbara Jamieson, RN, and Tim Sturgill, MD—I appreciate your willingness to look over my medical scenes. Any inaccuracies are mine alone.

Methodist Hospital of Sacramento—my second home and special family for so many years.

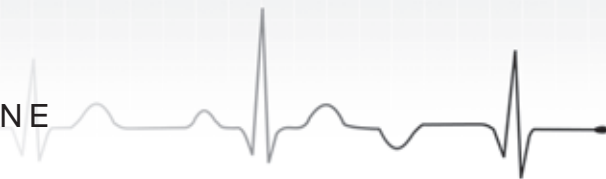
Fellow nurses and medical professionals—inspirational heroes all. Hang in there; we need you.

St. Helena's Church, the awesome women's Bible study, and Community of Hope—thank you.

My incredible children and grandchildren—your enthusiasm and support mean so much.

My wonderful husband, Andy Calvert—you've made me believe in happy endings.

CHAPTER ONE



Don't die, little girl.

Dr. Logan Caldwell pressed the heel of his hand against Amy Hester's chest, taking over heart compressions in a last attempt to save the child's life. Her small sternum hollowed and recoiled under his palm at a rate of one hundred times per minute, the best he could do to mimic her natural heartbeat. A respiratory therapist forced air into her lungs.

Don't die. Logan glanced up at the ER resuscitation clock, ticking on without mercy. Twenty-seven minutes since they'd begun the code. No heartbeat. Not once. Time to quit but . . .

He turned to his charge nurse, Erin Quinn, very aware of the insistent wail of sirens in the distance. "Last dose of epi?"

"Three minutes ago."

"Give another." Logan halted compressions, his motionless hand easily spanning the width of the two-year-old's chest. He watched until satisfied with the proficiency of the therapist's ventilations, then turned back to the cardiac monitor and frowned. Asystole—flatline. Flogging this young heart with atropine and repeated doses of epinephrine wasn't going to do it. A pacemaker, pointless. She'd been deprived of oxygen far too long before rescue.

Logan pushed his palm into Amy's sternum again and gritted

his teeth against images of a terrified little girl hiding in a toy cupboard as her day care burned in a suffocating cloud of smoke, amid the chaos of two dozen other burned and panicking children.

“Epi’s on board,” Erin reported, sweeping an errant strand of coppery hair away from her face. She pressed two fingers against the child’s arm to locate the brachial pulse and raised her gaze to the doctor’s. “You’re generating a good pulse with compressions, but . . .”

But she’s dead. With reluctance, Logan lifted his hand from the child’s chest. He studied the monitor display and then nodded at the blonde nurse standing beside the crash cart. “Run me rhythm strips in three leads, Sarah.” After he drew in a slow breath of air still acrid with the residue of smoke, he glanced down at Amy Hester, her cheeks unnaturally rosy from the effects of carbon monoxide, glossy brown curls splayed against the starched hospital linen. Dainty purple flower earrings. Blue eyes, glazed and half-lidded. Tiny chin. And lips—pink as a Valentine cupid—pursed around the rigid breathing tube, as if it were a straw in a snack-time juice box. Picture-perfect . . . and gone.

He signaled for the ventilations to stop and checked the code clock again. “Time of death—9:47.”

There was a long stretch of silence, and Logan used it to make his exit, turning his back to avoid another glance at the child on the gurney . . . and the expressions on the faces of his team. No good came from dwelling on tragedy. He knew that too well. Best to move on with what he had to do. He’d almost reached the doorway when Erin caught his arm.

“We’ve put Amy’s parents and grandmother in the quiet room the way you asked,” she confirmed, her green eyes conveying empathy for him as well. “I can send Sarah with you, if—”

“No. I’ll handle it myself,” Logan said, cutting her off. His tone was brusquer than he’d intended, but he just wanted this over with. “We need Sarah here.” He tensed at a child’s shrill cry in the trauma room beyond, followed by the squawk of the base station radio announcing an ambulance. “There are at least five more kids coming in from the propane explosion. We’ll need extra staff to do more than pass out boxes of Kleenex. I want nurses who know what they’re doing. Get them for me.”

+++

Why am I here?

Claire Avery winced as a child’s painful cry echoed up the Sierra Mercy emergency department corridor and blended with the wail of sirens. Almost an hour after the Little Nugget Day Care explosion, ambulances still raced in. Fire. Burns. *Like my brother. No, please, I can’t be part of this again.*

She leaned against the cool corridor wall, her mouth dry and thoughts stuttering. Being called to the ER was a mistake. Had to be. The message to meet the director of nursing didn’t make sense. Claire hadn’t done critical care nursing since Kevin’s death. Couldn’t. She wiped a clammy palm on her freshly pressed lab coat and stepped away from the wall to peer down the corridor into the ER. Then jumped, heart pounding, at the thud of heavy footfalls directly behind her.

She whirled to catch a glimpse of a man barreling toward her with his gaze on the ambulance entrance some dozen yards away. He looked a few years older than she was, maybe thirty-five, tall and wide shouldered, with curly dark hair and faded blue scrubs. He leveled a forbidding scowl at Claire like a weapon and slowed to a jog before stopping a few paces from her.

“What are you doing?” he asked, grabbing his stethoscope before it could slide from his neck.

“I’m . . . waiting,” Claire explained, awkwardly defensive. “I was paged to the ER.”

“Good. Then don’t just stand there holding up the wall. Let’s go. The charge nurse will show you where to start.”

“But I—,” she choked, her confusion complete.

“But what?” He glanced toward sounds at the ambulance bay and then back at her.

Claire cleared her throat. “I don’t know why I’m here.”

He shook his head, his low groan sounding far too much like a smothered curse. “If that question’s existential, I don’t have time for it. But if you’re here to work, follow me. Erin Quinn will tell you everything you need to know.” He pointed at a crew of paramedics racing through the ambulance doors with a stretcher. A toddler, his tiny, terrified face raw and blistered behind an oxygen mask, sat bolt upright partially covered by a layer of sterile sheets. “See that boy? *That’s* why I’m here. So either help me or get out of the way.” He turned and began jogging.

Speechless, Claire stared at the man’s retreating back and the nightmarish scene beyond: burned child, hustling medics, a flurry of scrubs, and a hysterically screaming parent. *Help or get out of the way?* What was she supposed to do with that ultimatum? And what gave this rude man the right to issue it?

Then, with a rush of relief, Claire spotted the Jamaican nursing director striding toward her. This awful mistake was about to be cleared up.

“I’m sorry for the delay,” Merlene Hibbert said, her molasses-rich voice breathless. “As you can imagine, there have been many things to attend to.” She slid her tortoiseshell glasses low on her

nose, squinting down the corridor. “I see you already met our Dr. Caldwell.”

Claire’s eyes widened. *Logan Caldwell? Sierra Mercy Hospital’s ER director?*

Merlene sighed. “I’d planned to introduce you myself. I hope he wasn’t . . . difficult.”

“No, not exactly,” she hedged, refusing to imagine a reason she’d need an introduction. “But I think there’s been a mistake. He thought I’d been sent down here to work in the ER.” *Tell me he’s mistaken.*

“Of course. A natural mistake. He’s expecting two more agency nurses.”

Claire’s knees nearly buckled with relief. “Thank goodness. They need help. I can see that from here.” She glanced at the ER, where patients on gurneys overflowed into the hallway. A nurse’s aide held a sobbing woman in her arms, her face etched with fatigue. Styrofoam coffee cups, discarded cardboard splints, and scraps of cut-away clothing littered the floor. All the while, the distant cries of that poor child continued relentlessly.

“Yes, they do,” Merlene agreed. “And that’s exactly why I called you.”

“But I’ve been at Sierra Mercy only a few months, and my hours are promised to the education department—to train the students, write policies, and demonstrate new equipment.” Claire floundered ahead as if grasping for a life preserver. “I’ve interviewed to replace Renee Baxter as clinical educator. And I haven’t done any critical care nursing in two years, so working in the ER would be out of the—”

“That’s not why you’re here,” Merlene said. Her dark eyes pinned Claire like a butterfly specimen on corkboard. “I need you

to assess my staff to see how they're coping emotionally. I don't have to tell you this has been one miserable morning." She studied Claire's face and then raised her brows. "You listed that in your résumé. That you've been recently trained in Critical Incident Stress Management?"

CISM? Oh no. She'd forgotten. Why on earth had she included that? "Yes, I'm certified, but . . ." How could she explain? Merlene had no clue that Claire's entire future—maybe even her sanity—depended on never setting foot in an ER again. It was the only answer to the single prayer she'd clung to since her firefighter brother's death in a Sacramento trauma room two years ago. Being helpless to save him left her with crippling doubts, sleep-stealing nightmares, and . . . She'd mapped her future out meticulously. The move to Placerville, a new hospital, a new career path, no going back. Everything depended on her plan.

Claire brushed away a long strand of her dark hair and forced herself to stand tall, squaring her shoulders. "I understand what you're asking. But you should know that I haven't done any disaster counseling beyond classroom practice. I'm familiar with the principles, but . . ." What could she possibly offer these people? "Wouldn't the chaplain be a better choice?"

"He's going to be delayed for several hours. Erin Quinn's my strongest charge nurse, so if she tells me her ER team is at risk, I believe it. They received six children from that explosion at the day care. Four are in serious condition, and a two-year-old died." Merlene touched the amber and silver cross resting at the neckline of her uniform. She continued, frowning. "Dr. Caldwell's working them ragged. An agency nurse threatened to walk out. Security's got their hands full with the media. . . . You're all I can offer them right now."

Claire's heart pounded in her throat. With every fiber of her being, she wanted to sprint into the northern California sunshine; fill her lungs with mountain air; cleanse away the suffocating scents of fear, pain, and death; keep on running and not look back. It would be so easy. Except that these were fellow nurses in that ER; she'd walked in their shoes. More than most people, Claire understood the awful toll this work could take. The staff needed help. How could she refuse? She took a breath and let it out slowly. "Okay. I'll do it."

"Good." Relief flooded into Merlene's eyes. She handed Claire a dog-eared sheaf of papers. "Here's our hospital policy for staff support interventions. Probably nothing new there." She gestured toward her office a few yards away. "Why don't you sit down and review it for a few minutes before you go in? You can report to me later after I make my rounds."

Before Claire could respond, the ambulance bay doors slammed open at the far end of the corridor. There was an answering thunder of footsteps, rubber-soled shoes squeaking across the faded vinyl flooring.

Logan Caldwell reappeared, shoving past a clutch of reporters to direct incoming paramedics. He raked his fingers through his hair and bellowed orders. "Faster! Get that stretcher moving. Give me something to work with, guys. And you—yeah, you, buddy—get the camera out of my face! Who let you in here?" The ER director whirled, stethoscope swinging across his broad chest, to shout at a tall nurse who'd appeared at the entrance to the ER. "Where are those extra nurses, Erin? Call the evening crew in early; a double shift won't kill anyone. We're working a disaster case here. Get me some decent staff!"

Claire gritted her teeth. Though she still hadn't officially met

him, there was no doubt in her mind that Logan Caldwell deserved his notorious reputation. Dr. McSnarly. The nickname fit like a surgical glove. Thank heaven she didn't have to actually work with him—the man looked like he ate chaos for breakfast.

Claire turned to Merlene. "I'll do the best I can," she said, then drew a self-protective line. "But only for today. Just until the chaplain comes."

"Of course. Very short-term." Merlene began walking away, then stopped to glance over her shoulder. "Oh, a word of caution: Dr. Caldwell hates the idea of counseling. I'd watch my back if I were you."

Claire hesitated outside the doors to the emergency department. She'd reviewed the summary of steps for an initial critical stress intervention and was as ready as she'd ever be. Considering she'd never done any peer counseling before. *I'm a fraud. Why am I here?*

She shut her eyes for a moment, hearing the din of the department beyond. It had been stupid to put the CISM training on her résumé. She'd taken the course last fall and participated reluctantly in the mock crisis situations, mostly because it would look impressive on her application for the clinical educator position. But afterward Claire knew that she could never volunteer as a peer counselor. Never. It felt too personal, too painful.

Healing the healers, they called it, the basis for the work of volunteer teams that waded into horror zones after events like 9/11, the killer tsunami in Indonesia, and the devastating aftermath of Hurricane Katrina. *And a Sacramento, California, trauma room after a warehouse fire that killed seven firefighters.*

Claire fought the memories. Yes, the counseling teams made

sure that caregivers took care of themselves too, assessing them for burnout and signs of post-traumatic stress. Like difficulty making decisions, sleeplessness, nightmares, and relationship failures. Claire knew the symptoms only too well. She'd struggled with most of them herself these past two years, exactly the reason she'd run away from that Sacramento hospital—after refusing its offer of stress counseling—and never looked back.

But here she was at another ER door, peeking inside through a narrow panel of bulletproof glass. And now she was responsible for helping these people deal with everything she was trying so hard to forget and expected to offer the kind of counseling she'd never accepted herself. Beyond ironic—impossible and completely at odds with her plan.

Claire raised her palm and pushed the door inward.

Heal my heart and move me forward. She'd prayed it every single day.

So why was her life slamming into reverse?

The essence of Sierra Mercy ER hit Claire's senses like an assault. Sounds: anxious chatter, a burst from the overhead PA speakers, beeping of electronic monitors, inconsolable crying, and painful screams. Smells: nervous perspiration, stale coffee, surgical soap, bandaging adhesive, the scorched scent of sterile surgical packs . . . and of burned hair and flesh.

No, no. Claire's stomach lurched as she clutched her briefcase like a shield and scanned the crowded room for the charge nurse. *Find Erin Quinn. Concentrate on that.*

She took a slow breath and walked farther into the room, searching among the eddy of staff in multicolored scrubs—technicians, nurses, and registration clerks. She forced herself to note the glassed-in code room, a small central nurses' station and its

large dry-erase assignment board, the semicircular arrangement of curtained exam cubicles with wall-mounted equipment at the head of each gurney, and the huge surgical exam lights overhead.

Claire tried to avoid the anxious faces of the family members huddled close to the tiny victims. Because she knew intimately how much they were suffering. No, much worse than that. *I feel it. I still feel it.*

When she'd agreed to do this for Merlene, she'd hoped this smaller ER—miles from the Sacramento trauma center and two years later—would be somehow different, but nothing had changed. Especially how it made Claire feel, the same way it had in those weeks after Kevin's death. Unsure of herself for the first time in her nursing career, she'd been antsy, queasy, and clammy with doubt. Dreading the wail of approaching sirens and jumping at each squawk of the emergency radio. No matter how hard she tried, she couldn't shake the irrational certainty that the very next ambulance stretcher would be carrying someone she loved, someone she'd be unable to save, and . . .

A cry in the distance made Claire turn. Her breath caught as the young charge nurse opened a curtain shielding a gurney.

A child, maybe three years old, rested upright in a nest of blue sterile sheets, tufts of his wispy blond hair blackened at the tips—some missing in spots—reddened scalp glistening with blisters. One eye had swollen closed, and his nose was skewed a little to one side by the clear plastic tape securing a bandage to his cheek. The other blue eye blinked slowly as if mesmerized by the drip chamber of the IV setup taped to his arm. An oxygen cannula stretched across his puffy, tear-streaked face.

Beside him, a stainless steel basin, bottles of sterile saline, and stacks of gauze squares sat assembled on a draped table. Burn care:

control pain, cool the burn to stop it from going deeper, monitor for dehydration, and prevent tetanus and infection. All the bases covered. *Unless the burns are horrific and complicated, like Kevin's. Unless there is profound shock, heart failure, and . . . No, don't think of it.*

Claire exhaled, watching as Erin Quinn pressed the button on a blood pressure monitor and efficiently readjusted the finger probe measuring the child's lung status. She made a note on a chart and moved back to the bedside as the child stirred and cried out.

"Mommy?"

"Mom's getting a bandage on her leg, Jamie, remember?" she explained gently, then caught sight of Claire and acknowledged her with a wave. She called to another nurse across the room. "Sarah, can you finish the ointment on Jamie's scalp? watch him for a few minutes?" After giving a brief report to the petite blonde nurse, she crossed to where Claire stood.

"Good, you found me," Erin said, noting Claire's name badge and offering a firm handshake. Strands of coppery hair had escaped from her ponytail, and her blue scrubs were splotted with snowy white burn ointment. She nodded as Claire glanced once more at the injured boy. "Second-degree burns. No explosion trauma, otherwise he'd be on a chopper ride to Sacramento. But Jamie's got asthma, and the smoke stirred things up. So . . ."

"He needs close observation," Claire finished. "I understand."

Erin smiled. "Hey, I really appreciate your coming here. We've had a horrible shift, and my staff are workhorses, but the Hester child was a real heartbreaker. We worked a long time to save her, but it didn't happen. And only last weekend we had the first drowning of the season. Junior high boy fishing on the river. Overall my crew seems to be coping fairly well, but today might be that last straw,

you know? So I have a couple of issues I'd like to discuss with you. I can spare about ten minutes to fill you in. Will that be enough to get you started?"

"Yes . . . okay." Claire tried to recall the details of her review. How much could she offer here? One person couldn't do more than a brief assessment and let the staff know more assistance was available. At least she'd found the self-help pamphlets. "But first I should tell you that I left a message for the hospital social worker because if an actual debriefing is needed, then a mental health professional is required. That's policy." She swallowed, hoping she sounded more confident than she felt. "The debriefing should be done tomorrow or the next day."

"What?" Erin shot her a look that clearly implied Claire was the one who needed mental help. "Tomorrow? I called you here because we need help now. Didn't Merlene tell you that?" She pressed her fist to her lips. "Look, I've had a lab tech faint, the media's harassing family members in the waiting room, and an agency nurse threatened to walk out. Walk out, when I'm short-staffed already! I'm sorry if I seem testy, but I'm responsible for the quality of nursing care here. My team needs help, and I'll do everything it takes to make that happen. Merlene told me you were a trained peer counselor. Aren't you?"

She hated herself. Erin Quinn was right. Claire needed to do whatever she could for these people. Somehow. She reached into her briefcase and grabbed a sheaf of glossy pamphlets. "Yes, I've been trained. And I can start an initial assessment, get things going in the process. I promise I'll do as much as I can to help, and . . ." Her voice faltered as heavy footsteps came to a stop behind her. She fought an unnerving sense of *déjà vu* and impending doom.

“Help?” A man’s voice, thick with sarcasm, prodded her back like the devil’s pitchfork.

Claire turned, several pamphlets slipping from her fingers.

It was time to officially meet the newest threat to her plan, Dr. Logan Caldwell.

ABOUT THE AUTHOR

Candace Calvert is a former ER nurse who believes love, laughter, and faith are the best medicines. A multipublished author of humorous mysteries, she begins an exciting new direction with the debut of *Critical Care*. A mother of two and native Californian, she now lives with her husband in the beautiful hill country of Texas. Visit her Web site at www.candacecalvert.com.

BOOK DISCUSSION GUIDE

Use these questions for individual reflection or for discussion within your book club or small group.

Note: Book clubs that choose to read *Critical Care*, please e-mail me at Candace@candacecalvert.com. I'll try to arrange a speaker-phone conversation to join your discussion.

1. In the opening scenes of *Critical Care*, nurse Claire Avery must counsel ER staff after a heart-wrenching disaster. This might be viewed as step one in God's plan for her own healing. Why?
2. Dr. Logan Caldwell is initially seen as critical, controlling, heartless. How does this impression change as the reader sees more scenes through his eyes? What motivates his behavior? Discuss.
3. *Critical Care* utilizes symbolism through various motifs. For example, daffodils signify hope. In your opinion, what does Logan's oak stump represent?
4. Claire and the ER, Smokey and the raccoons—why are these conflicts strangely similar?
5. Claire prays with her patient Jada Williams. Many hospitals today attempt to provide for patients' spiritual needs. Have you

(or a friend or family member) ever had a medical care worker offer spiritual support? offer to pray with you? How did (or would) you feel about that?

6. The Sierra Mercy ER staff participates in a voluntary debriefing after the Little Nugget Day Care tragedy. The facilitators recommend several ways to combat symptoms of stress, including exercise, eating well, journaling, and doing things that feel good to you. What have you found effective in helping you de-stress?
7. Nurse Sarah Burke's near-fatal accident becomes a catalyst in the healing of both Claire and Logan. How does that happen for each of them? Discuss.
8. In a climactic scene, Claire confronts Logan regarding his treatment of newly hired nurse Keeley Roberts. Why do you think that defending this nurse becomes so important to Claire?
9. Sarah, during most of her hospital stay, has recurring dreams about a birthday party. The elements include the blazing light of candles, a silver balloon reflecting that light, her daughter at age two, and the appearance of a man she thinks is her father but who has long hair, a bathrobe, and eyes full of love, acceptance, and patience. Even though he is attending a child's birthday party, this man seems to have eyes for only Sarah. Though confusing, it fills her with "unimaginable joy." How does this affect her? What hope do you see in this? Discuss.
10. ER nurse Erin Quinn finds it difficult to trust. She forces herself to try, despite red flags warning her about the sincerity of her boyfriend, Brad. Have you ever had that experience? What are signs you might be heading down a wrong path—anxiety, a

sinking stomach, sleeplessness? How easily do you trust? How readily do you turn to God to provide the answers to these nagging doubts?

11. Jeremiah 29:11 sets this book's theme, and Claire must learn that God is the ultimate planner for her life. Can you identify with this struggle? Are you a planner? How difficult is it for you to "let go and let God"? Discuss.
12. The prominent message of *Critical Care* is one of hope. The book's epilogue offers both elements of closure and hints of struggles to come. Claire, Logan, Sarah, Erin—how far has each come in personal growth? their faith journeys? What do you see for their futures? Why?

Please visit my Web site at www.candacecalvert.com for more information on upcoming books in this series.

Thank you for reading *Critical Care*.

Warmly,
Candace Calvert