



STEPHEN KING'S NIGHTSHIFT COLLECTION VOLUME ONE

"... Clearly the best of the short films made from my stuff." *Stephen King*

Death is her only way out ... he's the only one that can help.

THE WOMAN IN ROOM THE R

Directed by Frank Darabont

THE WOMAN IN THE ROOM

Stephen King

The question is: Can he do it?

He doesn't know. He knows that she chews them sometimes, her face wrinkling at the awful orange taste, and a sound comes from her mouth like splintering popsicle sticks. But these are different pills ... gelatin capsules. The box says DARVON COMPLEX on the outside. He found them in her medicine cabinet and turned them over in his hands, thinking. Something the doctor gave her before she had to go back to the hospital. Something for the ticking nights. The medicine cabinet is full of remedies, neatly lined up like a voodoo doctor's cures. Gris-gris of the Western world. FLEET SUPPOSITORIES. He has never used a suppository in his life and the thought of putting a waxy something in his rectum to soften by body heat makes him feel ill. There is no dignity in putting things up your ass. PHILLIPS MILK OF MAGNESIA. ANACIN ARTHRITIS PAIN FORMULA. PEPTO-BISMOL. More. He can trace the course of her illness through the medicines.

But these pills are different. They are like regular Darvon only in that they are gray gelatin capsules. But they are bigger, what his dead father used to call hosscock pills. The box says Asp. 350 gr, Darvon 100 gr, and could she chew them even if he was to give them to her? Would she? The house is still running; the refrigerator runs and shuts off, the furnace kicks in and out, every now and then the cuckoo bird pokes grumpily out of the clock to announce an hour or a half. He supposes that after she dies it will fall to Kevin and him to break up housekeeping. She's gone, all right. The whole house says so. She

is in the Central Maine Hospital, in Lewiston. Room 312. She went when the pain got so bad she could no longer go out to the kitchen and make her own coffee. At times, when he visited, she cried without knowing it.

The elevator creaks going up, and he finds himself examining the blue elevator certificate. The certificate makes it clear that the elevator is safe, creaks or no creaks. She has been here for nearly

three weeks now and today they gave her an operation called a “cortotomy.” He is not sure if that is how it’s spelled, but that is how it sounds. The doctor has told her that the “cortotomy” involves sticking a needle into her neck and then into her brain. The doctor has told her that this is like sticking a pin into an orange and spearing a seed. When the needle has poked into her pain center, a radio signal will be sent down to the tip of the needle and the pain center will be blown out. Like unplugging a TV. Then the cancer in her belly will stop being such a nuisance.

The thought of this operation makes him even more uneasy than the thought of suppositories melting warmly in his anus. It makes him think of a book by Michael Crichton called *The Terminal Man*, which deals with putting wires in people’s heads. According to Crichton, this can be a very bad scene. You better believe it.

The elevator door opens on the third floor and he steps out. This is the old wing of the hospital, and it smells like the sweet-smelling sawdust they sprinkle over puke at a county fair. He has left the pills in the glove compartment of his car. He has not had anything to drink before this visit.

The walls up here are two-tone: brown on the bottom and white on top. He thinks that the only two-tone combination in the whole world that might be more depressing than brown and white would be pink and black. Hospital corridors like giant Good ‘n’ Plentys. The thought makes him smile and feel nauseated at the same time.

Two corridors meet in a T in front of the elevator, and there is a drinking fountain where he always stops to put things off a little. There are pieces of hospital equipment here and there, like strange playground toys. A litter with chrome sides and rubber wheels, the sort of thing they use to wheel you up to the “OR” when they are ready to give you your “cortotomy.” There is a large circular object whose function is unknown to him. It looks like the wheels you sometimes see in squirrel cages. There is a rolling IV tray with two bottles hung from it, like a Salvador Dali dream of tits. Down one of

the two corridors is the nurses' station, and laughter fueled by coffee drifts out to him.

He gets his drink and then saunters down toward her room. He is scared of what he may find and hopes she will be sleeping. If she is, he will not wake her up.

Above the door of every room there is a small square light. When a patient pushes his call button this light goes on, glowing red. Up and down the hall patients are walking slowly, wearing cheap hospital robes over their hospital underwear. The robes have blue and white pinstripes and round collars. The hospital underwear is called a "johnny." The "johnnies" look all right on the women but decidedly strange on the men because they are like knee-length dresses or slips. The men always seem to wear brown imitation-leather slippers on their feet. The women favor knitted slippers with balls of yarn on them. His mother has a pair of these and calls them "mules."

The patients remind him of a horror movie called *The Night of the Living Dead*. They all walk slowly, as if someone had unscrewed the tops of their organs like mayonnaise jars and liquids were sloshing around inside. Some of them use canes. Their slow gait as they promenaded up and down the halls is frightening but also dignified. It is the walk of people who are going nowhere slowly, the walk of college students in caps and gowns filing into a convocation hall.

Ectoplasmic music drifts everywhere from transistor radios. Voices babble. He can hear Black Oak Arkansas singing "Jim Dandy" ("Go Jim Dandy, go Jim Dandy!" a falsetto voice screams merrily at the slow hall walkers). He can hear a talk-show host discussing Nixon in tones that have been dipped in acid like smoking quills. He can hear a polka with French lyrics—Lewiston is still a French-speaking town and they love their jigs and reels almost as much as they love to cut each other in the bars on lower Lisbon Street.

He pauses outside his mother's room and

for a while there he was freaked enough to come drunk. It made him ashamed to be drunk in front of his mother even though she was too doped and full of Elavil to know. Elavil is a tranquilizer they give to cancer patients so it won't bother them so much that they're dying.

The way he worked it was to buy two six-packs of Black Label beer at Sonny's Market in the afternoon. He would sit with the kids and watch their afternoon programs on TV. Three beers with "Sesame Street," two beers during "Mister Rogers," one beer during "Electric Company." Then one with supper.

He took the other five beers in the car. It was a twenty-two-mile drive from Raymond to Lewiston, via Routes 302 and 202, and it was possible to be pretty well in the bag by the time he got to the hospital, with one or two beers left over. He would bring things for his mother and leave them in the car so there would be an excuse to go back and get them and also drink another half beer and keep the high going.

It also gave him an excuse to piss outdoors, and somehow that was the best of the whole miserable business. He always parked in the side lot, which was rutted, frozen November dirt, and the cold night air assured full bladder contraction. Pissing in one of the hospital bathrooms was too much like an apotheosis of the whole hospital experience: the nurse's call button beside the hopper, the chrome handle bolted at a 45-degree angle, the bottle of pink disinfectant over the sink. Bad news. You better believe it.

The urge to drink going home was nil. So leftover beers collected in the icebox at home and when there were six of them, he would

never have come if he had known it was going to be this bad. The first thought that crosses his mind is She's no orange and the second thought is She's really dying quick now, as if she had a train to catch out there in nullity. She is straining in the bed, not moving except for her eyes, but straining inside her body, something is moving in there. Her neck has been smeared orange with stuff that looks like Mercurochrome, and there is a bandage below her left ear

where some humming doctor put the radio needle in and blew out 60 per cent of her motor controls along with the pain center. Her eyes follow him like the eyes of a paint-by-the-numbers Jesus.

—I don't think you better see me tonight, Johnny. I'm not so good. Maybe I'll be better tomorrow.

—What is it?

—It itches. I itch all over. Are my legs together?

He can't see if her legs are together. They are just a raised V under the ribbed hospital sheet. It's very hot in the room. No one is in the other bed right now. He thinks: Roommates come and roommates go, but my mom stays on forever. Christ!

—They're together, Mom.

—Move them down, can you, Johnny? Then you better go. I've never been in a fix like this before. I can't move anything. My nose itches. Isn't that a pitiful way to be, with your nose itching and not able to scratch it?

He scratches her nose and then takes hold of her calves through the sheet and pulls them down. He can put one hand around both calves with no trouble at all, although his hands are not particularly large. She groans. Tears are running down her cheeks to her ears.

—Momma?

—Can you move my legs down?

—I just did.

—Oh. That's all right, then. I think I'm crying. I don't mean to cry in front of you. I wish I was out of this. I'd do anything to be out of this.

—Would you like a smoke?

—Could you get me a drink of water first, Johnny? I'm as dry as an old chip.

—Sure.

He takes her glass with a flexible straw in it out and around the corner to the drinking fountain. A fat man with an elastic bandage on one leg is sailing slowly down the corridor. He isn't wearing one of the pinstriped robes and is holding his "johnny" closed behind him.

He fills the glass from the fountain and goes back to Room 312 with it. She has stopped crying. Her lips grip the straw in a way that reminds him of camels he has seen in travelogues. Her face is scrawny. His most vivid memory of her in the life he lived as her son is of a time when he was twelve. He and his brother Kevin and this woman had moved to Maine so that she could take care of her parents. Her mother was old and bedridden. High blood pressure had made his grandmother senile, and, to add insult to injury, had struck her blind. Happy eighty-sixth birthday. Here's one to grow on. And she lay in a bed all day long, blind and senile, wearing large diapers and rubber pants, unable to remember what breakfast had been but able to recite all the Presidents right up to Ike. And so the three generations of them had lived together in that house where he had so recently found the pills (although both grandparents are now long since dead) and at twelve he had been lipping off about something at the breakfast table, he doesn't remember what, but something, and his mother had been washing out her mother's pissy diapers and then running them through the wringer of her ancient washing machine, and she had turned around and laid into him with one of them, and the first snap of the wet, heavy diaper had upset his bowl of Special K and sent it spinning wildly across the table like a large blue tiddlywink, and the second blow had stropped his back, not hurting but stunning the smart talk out of his mouth and the woman now lying shrunken in this bed in this room had whopped him again and again, saying: You keep your big mouth shut, theres nothing big about you right now but your mouth and so you keep it shut until the rest of you grows the same size, and each italicized

word was accompanied by a strop of his grandmother's wet diaper—WHACKO!—and any other smart things he might have had to say just evaporated. There was not a chance in the world for smart talk. He had discovered on that day and for all time that there is nothing in the world so perfect to set a twelve-year-old's impression of his place in the scheme of things into proper perspective as being beaten across the back with a wet grandmother-diaper. It had taken four years after that day to relearn the art of smarting off.

She chokes on the water a little and it frightens him even though he has been thinking about giving her pills. He asks her again if she would like a cigarette and she says:

—If it's not any trouble. Then you better go. Maybe I'll be better tomorrow.

He shakes a Kool out of one of the packages scattered on the table by her bed and lights it. He holds it between the first and second fingers of his right hand, and she puffs it, her lips stretching to grasp the filter. Her inhale is weak. The smoke drifts from her lips.

—I had to live sixty years so my son could hold my cigarettes for me.

—I don't mind.

She puffs again and holds the filter against her lips so long that he glances away from it to her eyes and sees they are closed.

—Mom?

The eyes open a little, vaguely.

—Johnny?

—Right.

—How long have you been here?

—Not long. I think I better go. Let you sleep.

—Hnnnnn.

He snuffs the cigarette in her ashtray and slinks from the room, thinking: I want to talk to that doctor. Goddamn it, I want to talk to the doctor who did that.

Getting into the elevator he thinks that the word “doctor” becomes a synonym for “man” after a certain degree of proficiency in the trade has been reached, as if it was an expected, provisioned thing that doctors must be cruel and thus attain a special degree of humanity. But

“I don’t think she can really go on much longer,” he tells his brother later that night. His brother lives in Andover, seventy miles west. He only gets to the hospital once or twice a week.

“But is her pain better?” Kev asks.

“She says she itches.” He has the pills in his sweater pocket. His wife is safely asleep. He takes them out, stolen loot from his mother’s empty house, where they all once lived with the grandparents. He turns the box over and over in his hand as he talks, like a rabbit’s foot.

“Well then, she’s better.” For Kev everything is always better, as if life moved toward some sublime vertex. It is a view the younger brother does not share.

“She’s paralyzed.”

“Does it matter at this point?”

“Of course it matters!” he bursts out, thinking of her legs under the white ribbed sheet.

“John, she’s dying.”

“She’s not dead yet.” This in fact is what horrifies him. The conversation will go around in circles from here, the profits accruing

to the telephone company, but this is the nub. Not dead yet. Just lying in that room with a hospital tag on her wrist, listening to phantom radios up and down the hall. And

she's going to have to come to grips with time, the doctor says. He is a big man with a red, sandy beard. He stands maybe six foot four, and his shoulders are heroic. The doctor led him tactfully out into the hall when she began to nod off.

The doctor continues:

—You see, some motor impairment is almost unavoidable in an operation like the “cortotomy.” Your mother has some movement in the left hand now. She may reasonably expect to recover her right hand in two to four weeks.

—Will she walk?

The doctor looks at the drilled-cork ceiling of the corridor judiciously. His beard crawls all the way down to the collar of his plaid shirt, and for some ridiculous reason Johnny thinks of Algernon Swinburne; why, he could not say. This man is the opposite of poor Swinburne in every way.

—I should say not. She's lost too much ground.

—She's going to be bedridden for the rest of her life?

—I think that's a fair assumption, yes.

He begins to feel some admiration for this man who he hoped would be safely hateful. Disgust follows the feeling; must he accord admiration for the simple truth?

—How long can she live like that?

—It's hard to say. (That's more like it.) The tumor is blocking one of her kidneys now. The other one is operating fine. When the tumor blocks it, she'll go to sleep.

—A uremic coma?

—Yes, the doctor says, but a little more cautiously. “Uremia” is a techno-pathological term, usually the property of doctors and medical examiners alone. But Johnny knows it because his grandmother died of the same thing, although there was no cancer involved. Her kidneys simply packed it in and she died floating in internal piss up to her ribcage. She died in bed, at home, at dinnertime. Johnny was the one who first suspected she was truly dead this time, and not just sleeping in the comatose, open-mouthed way that old people have. Two small tears had squeezed out of her eyes. Her old toothless mouth was drawn in, reminding him of a tomato that has been hollowed out, perhaps to hold egg salad, and then left forgotten on the kitchen shelf for a stretch of days. He held a round cosmetic mirror to her mouth for a minute, and when the glass did not fog and hide the image of her tomato mouth, he called for his mother. All of that had seemed as right as this did wrong.

—She says she still has pain. And that she itches.

The doctor taps his head solemnly, like Victor DeGroot in the old psychiatrist cartoons.

—She imagines the pain. But it is nonetheless real. Real to her. That is why time is so important. Your mother can no longer count time in terms of seconds and minutes and hours. She must restructure those units into days and weeks and months.

He realizes what this burly man with the beard is saying, and it boggles him. A bell dings softly. He cannot talk more to this man. He is a technical man. He talks smoothly of time, as though he has gripped the concept as easily as a fishing rod. Perhaps he has.

—Can you do anything more for her?

—Very little.

But his manner is serene, as if this were right. He is, after all, “not offering false hope.”

—Can it be worse than a coma?

—Of course it can. We can't chart these things with any real degree of accuracy. It's like having a shark loose in your body. She may bloat.

—Bloat?

—Her abdomen may swell and then go down and then swell again. But why dwell on such things now? I believe we can safely say

that they would do the job, but suppose they don't? Or suppose they catch me? I don't want to go to court on a mercy-killing charge. Not even if I can beat it. I have no causes to grind. He thinks of newspaper headlines screaming MATRICIDE and grimaces.

Sitting in the parking lot, he turns the box over and over in his hands. DARVON COMPLEX. The question still is: Can he do it? Should he? She has said: I wish I were out of this. I'd do anything to be out of this. Kevin is talking of fixing her a room at his house so she won't die in the hospital. The hospital wants her out. They gave her some new pills and she went on a raving bummer. That was four days after the “cortotomy.” They'd like her someplace else because no one has perfected a really fool-proof “cancerectomy” yet. And at this point if they got it all out of her she'd be left with nothing but her legs and her head.

He has been thinking of how time must be for her, like something that has gotten out of control, like a sewing basket full of threaded spools spilled all over the floor for a big mean tomcat to play with. The days in Room 312. The night in Room 312. They have run a string from the call button and tied it to her left index finger because she can no longer move her hand far enough to press the button if she thinks she needs the bedpan.

It doesn't matter too much anyway because she can't feel the pressure down there; her midsection might as well be a sawdust pile. She moves her bowels in the bed and pees in the bed and only knows when she smells it. She is down to ninety-five pounds from one-fifty and her body's muscles are so unstrung that it's only a loose bag tied to her brain like a child's sack puppet. Would it be any different at Kev's? Can he do murder? He knows it is murder. The worst kind, matricide, as if he were a sentient fetus in an early Ray Bradbury horror story, determined to turn the tables and abort the animal that has given it life. Perhaps it is his fault anyway. He is the only child to have been nurtured inside her, a change-of-life baby. His brother was adopted when another smiling doctor told her she would never have any children of her own. And of course, the cancer now in her began in the womb like a second child, his own darker twin. His life and her death began in the same place. Should he not do what the other is doing already, so slowly and clumsily?

He has been giving her aspirin on the sly for the pain she imagines she has. She has them in a Secrets box in her hospital-table drawer, along with her get-well cards and her reading glasses that no longer work. They have taken away her dentures because they are afraid she might pull them down her throat and choke on them, so now she simply sucks the aspirin until her tongue is slightly white.

Surely he could give her the pills; three or four would be enough. Fourteen hundred grains of aspirin and four hundred grains of Darvon administered to a woman whose body weight has dropped 33 per cent over five months.

No one knows he has the pills, not Kevin, not his wife. He thinks that maybe they've put someone else in Room 312's other bed and he won't have to worry about it. He can cop out safely. He wonders if that wouldn't be best, really. If there is another woman in the room, his options will be gone and he can regard the fact as a nod from Providence. He thinks

—You're looking better tonight.

—Am I?

—Sure. How do you feel?

—Oh, not so good. Not so good tonight.

—Let's see you move your right hand.

She raises it off the counterpane. It floats splay-fingered in front of her eyes for a moment, then drops. Thump. He smiles and she smiles back. He asks her,

—Did you see the doctor today?

—Yes, he came in. He's good to come every day. Will you give me a little water, John?

He gives her some water from the flexible straw.

—You're good to come as often as you do, John. You're a good son.

She's crying again. The other bed is empty, accusingly so. Every now and then one of the blue and white pinstriped bath-robés sails by them up the hall. The door stands open halfway. He takes the water gently away from her, thinking idiotically: Is this glass half empty or half full?

—How's your left hand?

—Oh, pretty good.

—Let's see.

She raises it. It has always been her smart hand, and perhaps that is why it has recovered as well as it has from the devastating effects of the "cortotomy." She clenches it. Flexes it. Snaps the fingers weakly. Then it falls back to the counterpane. Thump. She complains,

—But there's no feeling in it.

—Let me see something.

He goes to her wardrobe, opens it, and reaches behind the coat she came to the hospital in to get at her purse. She keeps it in here because she is paranoid about robbers; she has heard that some of the orderlies are rip-off artists who will lift anything they can get their hands on. She has heard from one of her roommates who has since gone home that a woman in the new wing lost five hundred dollars which she kept in her shoe. His mother is paranoid about a great many things lately, and has once told him a man sometimes hides under her bed in the late-at-night. Part of it is the combination of drugs they are trying on her. They make the bennies he occasionally dropped in college look like Excedrin. You can have your pick from the locked drug cabinet at the end of the corridor just past the nurses' station: ups and downs, highs and bummers. Death, maybe, merciful death like a sweet black blanket. The wonders of modern science.

He takes the purse back to her bed and opens it.

—Can you take something out of here?

—Oh, Johnny, I don't know ...

He says persuasively:

—Try it. For me.

The left hand rises from the counterpane like a crippled helicopter. It cruises. Dives. Comes out of the purse with a single wrinkled Kleenex. He applauds:

—Good! Good!

—But she turns her face away.

—Last year I was able to pull two full dish trucks with these hands.

If there's to be a time, it's now. It is very hot in the room but the sweat on his forehead is cold. He thinks: If she doesn't ask for aspirin, I won't. Not tonight. And he knows if it isn't tonight it's never. Okay.

Her eyes flick to the half-open door slyly.

—Can you sneak me a couple of my pills, Johnny?

It is how she always asks. She is not supposed to have any pills outside of her regular medication because she has lost so much body weight and she has built up what his druggie friends of his college days would have called “a heavy thing.” The body's immunity stretches to within a fingernail's breadth of lethal dosage. One more pill and you're over the edge. They say it is what happened to Marilyn Monroe.

—I brought some pills from home.

—Did you?

—They're good for pain.

He holds the box out to her. She can only read very close. She frowns over the large print and then says,

—I had some of that Darvon stuff before. It didn't help me.

—This is stronger.

Her eyes rise from the box to his own. Idly she says,

—Is it?

He can only smile foolishly. He cannot speak. It is like the first time he got laid, it happened in the back of some friend's car and when he came home his mother asked him if he had a good time and he could only smile this same foolish smile.

—Can I chew them?

—I don't know. You could try one.

—All right. Don't let them see.

He opens the box and pries the plastic lid off the bottle. He pulls the cotton out of the neck. Could she do all that with the crippled helicopter of her left hand? Would they believe it? He doesn't know. Maybe they don't either. Maybe they wouldn't even care.

He shakes six of the pills into his hand. He watches her watching him. It is many too many, even she must know that. If she says anything about it, he will put them all back and offer her a single Arthritis Pain Formula.

A nurse glides by outside and his hand twitches, clicking the gray capsules together, but the nurse doesn't look in to see how the "cortotomy kid" is doing.

His mother doesn't say anything, only looks at the pills like they were perfectly ordinary pills (if there is such a thing). But on the other hand, she has never liked ceremony; she would not crack a bottle of champagne on her own boat.

—Here you go,

he says in a perfectly natural voice, and pops the first one into her mouth.

She gums it reflectively until the gelatin dissolves, and then she winces.

—Taste bad? I won't ...

—No, not too bad.

He gives her another. And another. She chews them with that same reflective look. He gives her a fourth. She smiles at him and he sees

with horror that her tongue is yellow. Maybe if he hits her in the belly she will bring them up. But he can't. He could never hit his mother.

—Will you see if my legs are together?

—Just take these first.

He gives her a fifth. And a sixth. Then he sees if her legs are together. They are. She says,

—I think I'll sleep a little now.

—All right. I'm going to get a drink.

—You've always been a good son, Johnny.

He puts the bottle in the box and tucks the box into her purse, leaving the plastic top on the sheet beside her. He leaves the open purse beside her and thinks: She asked for her purse. I brought it to her and opened it just before I left. She said she could get what she wanted out of it. She said she'd get the nurse to put it back in the wardrobe.

He goes out and gets his drink. There is a mirror over the fountain, and he runs out his tongue and looks at it.

When he goes back into the room, she is sleeping with her hands pressed together. The veins in them are big, rambling. He gives her a kiss and her eyes roll behind their lids, but do not open.

Yes.

He feels no different, either good or bad.

He starts out of the room and thinks of something else. He goes back to her side, takes the bottle out of the box, and rubs it all over his shirt. Then he presses the limp fingertips of her sleeping left hand on the bottle. Then he puts it back and goes out of the room quickly, without looking back.

He goes home and waits for the phone to ring and wishes he had given her another kiss. While he waits, he watches TV and drinks a lot of water.