

The Disappeared Man

By E. S. Strout MD

Medicare program to be bankrupt by 2041.

MSNBC headline March 27, 2002

There is no logical explanation for these disappearances, Mulder.

Dana Scully

1.

Overhead fluorescents. Venetian blinds shuttering a single window. Pole with metal crossarm looming over the bed. Clear fluid trickling from a suspended IV bag into transparent plastic tubing. Spiky green EKG tracings marching in lockstep. Another heart attack? But there was no pain. He was too weak to sit up.

“Y’all are awake. Good.”

Where had he heard that Cracker drawl? Jack squinted in the glare. Blond crewcut. Benign, inscrutable smile. Power suit. White shirt, dark tie. Mirrored sunglasses concealing his eyes. Badge clipped to a jacket pocket, orange band over an I.D. photo, BLAKE WATKINS, PROJECT DIRECTOR printed below. A soldier shouldered a carbine in shadows outside the door.

“Where am I?”

“You’ve created a serious problem for me, sir.”

2.

Seventy-two hours earlier:

“My friend Matt Aldrich was having chest pain. Can he have visitors?”

The teenaged Medicare Hospital volunteer tapped computer keys, then flicked Jack a sullen glance. “No Aldrich here, sir.”

“Here, the paramedics said.”

She gave a sigh of exasperation, then spun the screen so he could see. “Like I said.”

“Where’s Intensive Care?”

The girl tried to grab his arm. “You can’t . . .”

“I’ll see for myself, lady.”

The ICU supervisor scribbled on a patient’s chart. She favored Jack with a tired scowl. “Yes?”

“Matthew Aldrich. Older guy, seventy-two. The paramedics brought him here last night.”

“Seventy-two? We didn’t admit him to Intensive Care. Try the Medicare Research facility.”

“But he was having chest pain.”

“Wouldn’t disqualify him for the new longevity project. It’s voluntary. Don’t you read your updates?” She grabbed another chart from a huge stack, dismissing Jack with a shrug.

3.

MEDICARE GERIATRIC RESEARCH CENTER--NO UNAUTHORIZED PERSONNEL, the gate sign in front of the former hospital read. An M.P. in camouflage dress and helmet stopped Jack with a raised hand.

“Your chart and admission tag, please, sir.”

“I’m a visitor. My friend Matt Aldrich is a patient here.”

“You’ll need top secret clearance.”

“Top secret, my ass. Page your C.O., soldier.”

The man tugged at his chin strap. He glanced up at the razor wire topped enclosure, where a surveillance video camera cycled. “I’m just a grunt, sir. The security. Please?”

An ambulance’s siren hooted in the driveway. The M.P. checked the driver’s I.D. badge, then clicked a remote to open the gate. Orderlies unloaded two sleeping patients onto gurneys at a side entrance. A manila envelope with an orange MEDICARE RESEARCH

tag accompanied each.

Intrigued, Jack watched.

4.

“Medicare Geriatric Research Center.”

“Matthew Aldrich, please. He’s a patient there.”

Hesitation. “Impossible, sir.”

“Put your supervisor on,” Jack demanded. On-hold Muzak assaulted his ear. He lit a cigarette. Waited. Chainsmoked another.

“Blake Watkins. How may I help you, sir?”

“Matt Aldrich. My friend . . .”

Jack could hear computer keys clicking. “If your, ah, friend is here, he’s volunteered for the Medicare Longevity Research Project,” Watkins’s cautious voice drawled.

“But his chest pain . . .?”

“Cardiac symptoms are not disqualifyin’. We have no Aldrich listed.”

“I’ll see about that,” Jack told the dial tone.

5.

Eight hours later:

“Chest hurts, Doc.”

The Medicare E.R. doctor checked a paper strip readout from the EKG machine.

“You’ve got some changes here, but nothing acute. They could be from your previous attack.”

“So I can go?”

“You’re sixty-nine, Mr. Simms? Is that correct?”

“Almost seventy.”

The doctor made a note on a clipboard. “Is there somebody at home? Your wife . . .?”

“I’m a widower.”

“Children? Other relatives?”

“Negative.”

“Wait one.” The medic consulted a printed sheet, inked a check mark. “Let’s keep you overnight, sir, and repeat the EKG in the morning.”

“Anything you say, Doc.”

“Mr. Simms? Wake up, please.” Another doctor. “Your condition is not serious. Are you aware of your option to volunteer for the Medicare Longevity Research Project?”

Jack rubbed sleep-sodden eyes. “No.”

“You could live to be a hundred or more. And be productive.”

The doctor held out a clipboard, handed Jack a pen, pointed. “Your signature on this line to participate, sir.”

“Okay, doc.” Jack managed a wriggly scrawl.

The doctor added an orange MEDICARE RESEARCH tag to his chart. A nurse handed Jack two yellow capsules. “These will help you sleep.” He took them with a swallow of water.

When she was out of sight, Jack spit the undissolved pills into the plastic water carafe on the bedside stand.

Morning. A shake of Jack’s shoulder. The orderly. Another paper cup. “Research protocol. Please swallow these.”

Two more yellow capsules joined the previous two.

6.

His sedated fellow passenger snored. The gate M.P. made a checkmark on his clipboard, waved the ambulance through.

Inside, Jack slitted an eyelid open. Orderlies scrambled, pushing patients on gurneys. Patients slept in glass-fronted treatment spaces. White-clad personnel stood at their bedsides, monitoring IV’s, making chart notes. Clerks pecked away at computer

keyboards. Another spat numbers into a phone. Two M.P.'s idled, carbines at parade rest.

An orderly handed Jack's records to a clerk. "Volunteer."

Rooms lined a narrow hallway. Subdued lighting. Personnel scurrying. The gurney stopped by a door that was ajar. Through half-lidded eyes, Jack could see a white-haired woman in the bed, asleep. 1184 code 101 was stamped on the orange tag on her door. Seconds later the lady was wheeled out and another tag taped up. 1232

The orderly lifted Jack onto the bed and covered him with a blanket.
"That's me? A number?"

A surprised stutter from the man. "D-double-blind study, sir. Project protocol."

Jack stifled a yawn. "Whatever."

He listened, ear to the door. "Twelve thirty-two's awake," the orderly's voice accused.
"Asking questions. You know the routine. He's gotta be sedated."

"He's had four hundred milligrams of Nembutal," the nurse said. "I'll get some Placidyl."

"Well, step on it. He's scheduled for treatment this evening."

Jack found a bathrobe in the closet, cracked the door. An M.P. stood at a cross corridor, carbine slung. A moment later he about-faced and marched away.

Jack edged out, back to the wall. He held his breath when a nurse crossed the hallway ahead of him, eyeballing a chart. When she walked on, he checked the tags on closed doors.

1188. 1197.

A cautious peek inside each. Patients sleeping. No Matt.

At the cross-passageway, a patient lay on a parked gurney, blanket to his neck, eyes closed. The orange MEDICARE RESEARCH I.D. tag attached to his chart read 1162 - code 101. Jack tiptoed. The man did not stir.

He froze in a shadowed corner at voices behind a door. "Treatment concluded. Classified disposal for IV gear."

When the medics left, Jack checked the tag.

1213

Booted footfalls. The M.P.

The door stuck. Jack's clammy fingers slipped off the latch. Closer footsteps. He tried with a shoulder. Nothing. Pressed the latch with both thumbs. Pressed again.

The M.P.'s shadow loomed, his carbine silhouetted on the wall. "Please, God?"

Another shoulder to the recalcitrant door. Another. Jack slumped in surrender as the guard's rifle tip appeared at the corner. The door gave way with a reluctant squeak.

"Hold it right there."

Jack sagged against the door jamb. Angina stabbed at his chest. "Stuffy in there, corporal."

"Orders, sir. Back inside, please."

7.

He squinted in the gloom. A half-empty bag of clear solution dangled from an IV stand. Plastic tubing snaked around the crossarm and fluid dripped from the unsheathed needle. A shaded lamp at the bedside shone on a familiar face.

"It's me, Matt." Jack grasped his friend's hand, then drew away in horror. It was ice cold. He collapsed against the wall, gasping for breath, heart pounding. Angina lanced at his left shoulder.

The latch rattled. He stumbled into shadows behind the door and held his breath. An orderly pushed a gurney to the bedside. Jack stepped forward, eyes accusing, rubbing at the remnant of pain.

"H-he's dead. Matt . . ."

"Where the hell did you come from?" The orderly punched a cell-phone extension. "Security . . . room one-twelve . . ."

"Don't," Jack pleaded. "I'm a volunteer. Matt was my friend."

Another orderly burst into the room. "Army's on his way . . . who's this?"

"Volunteer. He said a name."

“He’s in big trouble . . .”

Jack’s fist dropped the orderly to the floor. Blood spurted from a split lip. “Your research kills people. I quit.”

The M.P.s stopped Jack at the door, pinned his arms. “Bastards . . .” He gasped as fresh angina impaled his chest.

A nurse edged into the room, holding a syringe. “I’ve got Pentothal.”

“Use it.”

She plunged the needle into a wrist vein . . .

8.

Thirty minutes later:

There was no sense of lost time.

The man’s I.D. tag glinted in the fluorescent glare. Orange band. Laminated photo. WATKINS. Cracker drawl. “You’re an anomaly, twelve thirty-two.”

“My friend died in your experiment.” Jack tried again to sit up.

“This is perplexin’, sir. Our doctor was a little overeager in his recruitment. Y’all shouldn’t be here.”

“So I can leave?”

Watkins crooked a finger. A nurse wheeled a steel instrument tray to the bedside. Three syringes, needles sheathed in black plastic sleeves. “Please tell Doctor Singh we have an outta sequence patient.”

“Yes, sir.”

Watkins removed his shades. His eyes were steel-gray, piercing. “I’m truly sorry. You shoulda stayed at home, sir.”

A vein in Jack’s neck throbbed in time with his galloping pulse. “I’m outta here.” Then he discovered the restraints. Cloth and canvas straps bound his wrists and ankles. He blinked as sweat droplets trickled into his eyes. Angina throbbed, a branding iron in his chest. He strained against the cuffs.

Watkins's voice was contrite. "This is not your fault, sir." He motioned to the nurse. She was accompanied by a turbaned East Indian physician.

"Contingency, Dr. Singh. Age sixty-nine."

"Understand." Singh unsheathed a syringe and tapped its side with a fingernail. Tiny, bright bubbles floated up and were expelled in a faint mist. He needled the soft rubber Y-connector of the IV line.

"Somebody will know . . ."

"I'm sorry," Watkins said.

Singh emptied the Pentothal syringe.

The second syringe contained pancuronium bromide, a muscle relaxant. Potassium chloride followed. Seconds later the monitor emitted a shrill beep as Jack's EKG trace flatlined.

9.

Watkins donned his reflective shades. "No next of kin, am I correct?"

Singh blinked at his reflection. "Yes, sir. Checked and verified. FBI and military records expunged."

Watkins ticked off items on a checklist. "TRW? DMV? Credit cards?"

"Admissions confirms all civilian and military computer records erased, sir. Hardcopies shredded and burned. His auto is impounded and his apartment's been sanitized."

"Crematorium. Code-101 to Medicare and Social Security computers for records deletion. Twelve thirty-two was never here."

Singh nodded, then stamped Code-101 on the orange MEDICARE RESEARCH tag attached to the clipboard.

10.

Monday June 10, 2030:

Classified meeting. Senate Select Committee on Medicare Reform:

“Longevity Project Director Blake Watkins is here to provide us with the final results of his research group’s pilot program. Mr. Watkins, if you please, sir?”

“Chairman and Senators. As you recall, the Medicare Longevity Research Project commenced in 2023. At that time the Medicare bankruptcy situation was approaching critical mass. Our assignment was to seek a solution to the problem. As you can see from the handouts, the number of qualified Medicare beneficiaries from the target population in the pilot program has significantly decreased. We are ready now to expand the project nationwide.”

The End