

Busting Grandma Out

Category: Stories

written by S.E. Street | September 19, 2014

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I had been in London on business all of seven hours when my son, Tom, called me at two in the morning from our hometown, Sydney, Australia.

“Grandma’s had a fall. She’s been taken to the hospital, but she’s all right.”

My mother’s having a fall was nothing unusual; she had always been an unpredictable fainter. My husband and children and I called it her party trick, making light of it to soothe her embarrassment.

She had no recollection of these episodes; one minute she’d be seated at the table, and the next, she’d be lying on her back on the floor, her feet propped up on a chair, with the family smiling down at her as if she were Sleeping Beauty awakening from years of slumber.

We are a medical and nursing family—I’m a retired nurse, and my husband, brother and sister-in-law are doctors—and we’d long since had her undergo exhaustive tests to check for serious underlying conditions. The tests had revealed nothing other than a slow heart rate and an occasional drop in blood pressure.

At ninety-three, Mom was resolutely independent, although in the last few years she had preferred to stay at home where, day or night, she knew the lay of the land and felt safe.

During my nursing days, while caring for someone else’s elderly mother or grandmother, I had always accepted the patient’s mental condition at face value. When an eighty-year-old woman smiled sweetly and responded appropriately to the intake questions, I felt no misgivings about hospitalizing her overnight.

Now, with Mom in the hospital, I suddenly remembered how disoriented she’d become, three years back, when she’d been hospitalized for a minor procedure.

“Get her out of hospital as quickly as possible,” a staff anesthetist and family friend had warned. “At her age, she could go off like a cracker.”

At the time, I’d thought that he was underestimating my mother’s ability to stay very much in charge of herself. Waking up after the procedure, though, she’d apparently found a new focus for these energies and had put herself in charge of hospital standards.

Rather than napping all afternoon as I’d expected, she stayed wide awake, mesmerized by the activity at the nursing station in the corridor outside her

door. When she tired of that, she peered about her room, scrutinizing the walls and floor moldings in this brand-new hospital.

When the nurse walked in to check on her, Mom asked imperiously, "Who does the cleaning around here? It's a disgrace."

The nurse chatted with her pleasantly, checked her vital signs, then walked towards the door.

"Wears too much makeup," Mom announced before she was out of earshot.

The nurses told me that Mom's night had been a sleepless one. She'd been given no medication other than acetaminophen; wide awake, she'd thought that a litter of puppies had been born on the bed.

"Take your pick," she'd generously offered the staff.

She'd also announced that a circus troupe had gathered around the bed to perform for her. The emcee of the circus was the elf now perched on her shoulder. Why couldn't they see him?

When I handed her the morning paper, she hastily opened it to the Arts section.

"See?" She pointed. "Here's the write-up of the circus that performed for me last night. I have to say, it's a very poor review, and I'm not a bit surprised."

After a night's sleep at home in her own bed, she had remembered nothing of her post-op performance. Now, looking back on these hospital follies, I was anxious to avoid an encore.

The next day, I rang Mom's doctor. He confirmed that there were no broken bones, and that once the medical team had made their assessment, she could be discharged.

Having been through this process many times, I knew how long it would take for all the necessary staff to see her. I described her previous hospitalization and shared my concerns that unless we got Mom home soon she would disappear, like Alice, down the rabbit hole.

"We have to follow due protocol," he responded.

I rang Tom.

"Don't worry," he said. "By the time you get back from London, I will have busted Grandma out of there."

By the next afternoon, Mom was cleared to go. As Tom wheeled her past the nurses' desk, though, the nurse in charge changed her mind.

"Sorry. We can't let her go until she's opened her bowels."

I was disappointed but not surprised by this development. But Mom was

heartbroken. When Tom came to pick her up the next morning, she was looking out the window, thinking she was in Switzerland.

As Tom drove Mom home, she marveled at the traffic and tall buildings, but once she was safely at home, she said, "Nothing is as grand as lying back on the pillows on my own bed."

Three days later, I arrived home.

Over the next few days, Mom gradually stopped eating and drinking, and three weeks later, she died. In those last weeks, as the family filled the room at various times, she formally thanked us for our love and care.

In the early hours of the day before she died, we were lying together holding hands in the dark.

"Do you get what you want? Do you get to go home?" she asked me.

"I'm sure you do," I replied.

And so she did. And we felt immensely grateful that she hadn't disappeared down the rabbit hole on the way.

About the author:

Writer and poet S.E. Street is the recipient of the Dymocks Award and the Hunter Writers Centre Award for Grieve Writing. "After obtaining my nursing degree, I studied anthropology. It was during this time that I started to write both fiction and nonfiction. I come from a long line of health professionals: doctors, nurses and occupational therapists. My nursing days are a rich source of writing material; the short-story collection that I am currently working on has many stories reflecting life's transitions."

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