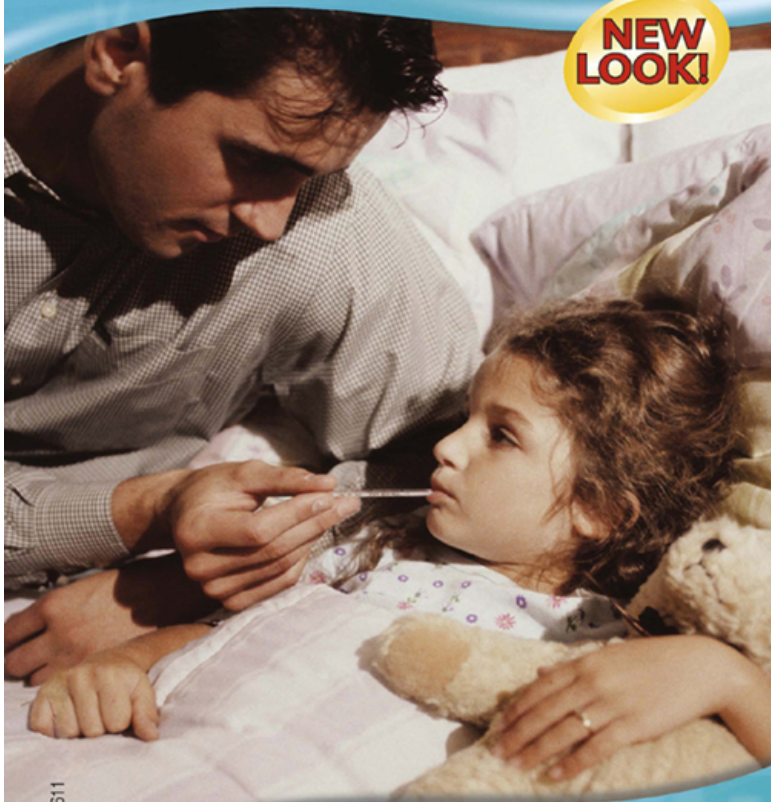


THE ITALIAN DOCTOR'S PERFECT FAMILY
Alison Roberts

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MEDICAL™

Alison Roberts

The Italian Doctor's Perfect Family

Аннотация

‘There's no one else I would want to be the mother of my children.’ Pip Murdoch is torn. She is finally, for the first time in her life, experiencing real love. Toni Costa, the new Italian doctor on the ward, is making her feel things she's never known. But she can't give in to her heart. She has responsibilities that just won't allow it. The gorgeous Italian knows he can help Pip heal the rift between her and her young daughter. He's determined to show her that he'll never leave them, and that together they can be a real family.

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For the longest time, he said nothing

Demanded no explanations.

Toni simply held her and let her cry, and if Pip hadn't realized before that she was in love with this man, she could have no doubt about it now. He had no idea what she was so upset about, but he was still prepared to hold and comfort her. It was like the way he accepted Alice as part of her life. Whoever she was and whatever baggage she brought with her, she was made to feel acceptable.

And when Pip was finally ready to talk, Toni listened with the same attentiveness he'd shown when he'd heard the story of her past. He held her as she spoke, and every subtle movement of his body and hands implied willingness to be there. To support her.

Pip turned her face and received his kiss, this time on her lips. It was a kiss that carried all the strength of his passion and yet there was nothing overtly sexual about it. It was like nothing Pip had ever experienced. More than sex, more than friendship, it conveyed hope—the possibility that Toni had fallen in love with her to the same degree she had with him.

Dear Reader,

Exploring the complexities of relationships is not just fascinating, it provides the heart and soul of any story worth reading.

Adding an extra dimension, like a parent or a child, to the developing relationship between the central characters of a romance always provides exciting possibilities, but I wanted more this time.

A parent and a child. Three generations of a family in a complex, tightly knit family circle. I knew it would take a very special hero to enter that circle. One with reasons of his own to go the extra distance. A hero who was passionate and sensitive enough to understand, even when tested, that the journey was more than worthwhile.

And who better than a gorgeous Italian?

Enjoy!

Alison

The Italian Doctor's Perfect Family

Alison Roberts



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CHAPTER ONE

THE nudge from a small elbow demanded attention.

‘Pip?’

Philippa Murdoch turned her head swiftly. ‘Sorry, hon—I was miles away.’

In the emergency department, no less, where she’d had to leave a patient who hadn’t been overly impressed by the disappearance of his albeit junior doctor.

‘I think they’re calling me.’

‘Alice Murdoch?’

Everyone in the packed waiting room of the paediatric outpatient department was looking at each other with a vaguely accusatory air. Maybe they’d all had the same kind of hassle as Pip in fitting in their appointments and they didn’t appreciate the possibility of further delay due to a less than co-operative patient.

‘Here!’ Pip stood up hurriedly, wishing she’d left her white coat downstairs. The woman who’d been trying to negotiate a truce between three small children fighting over the same toy in the corner gave her a suspicious look that made her feel as though she was somehow jumping the queue by means of professional privilege.

As if! They’d probably waited as long as anybody here for an appointment with the most popular paediatrician in the city. Which was why Pip had been forced to abandon her own duties

to make sure the consultation wasn't lost.

Had she missed something in that initial assessment of her last patient? The symptoms had been non-specific and unimpressive and too numerous to find one that seemed significant, but maybe she should have taken more notice of that toothache he'd mentioned? What if Pip had left him under observation while he was busy having a heart attack? She should have ordered a twelve-lead ECG and some bloods rather than more routine vital sign observations.

She and Alice were ushered into a small room with three chairs in a triangle on one side of a desk and a couch against the opposite wall. The nurse deposited a plain manila folder with Alice's name on the front onto the desk.

'Have a seat,' she invited. 'Dr Costa won't be long.'

Alice raised her eyebrows. 'Funny name, isn't it?'

'It's Italian.'

'Why can't I just go back to Dr Gillies?'

'Dr Gillies is our family doctor. Part of his job is to get someone else to see his patients if he's not sure what's wrong. It's called referral.'

Alice absorbed the information with a small frown. Then her face brightened.

'Knock, knock,' she said.

'Who's there?' Pip responded obligingly.

'Dr Costa.'

'Dr Costa who?'

‘Dr Costa lotta money.’

Pip’s grin faded with astonishing rapidity as she realised she wasn’t the only one to have heard Alice’s joke, but the tall, dark man, whose sudden presence seemed overwhelming in the small consulting room, was smiling.

‘I don’t really cost much at all,’ he said to Alice as he eased his long frame into the remaining empty chair and leaned forward slightly. ‘I’m free...and I’m all yours.’

Alice was staring, open-mouthed, and Pip could sympathise with the embarrassed flush creeping into the girl’s cheeks. She would have been thoroughly disconcerted to have a dose of masculine charm like that directed at her. Poor Alice would have no idea how to respond.

The soon-to-be-teenage girl was currently the sole focus of attention from a man who had to be far more attractive than any one of the pictures of the movie-star and pop idols that Alice and her friends already enjoyed discussing at length.

With hair and eyes as dark as sin, a killer smile and that intriguing accent, it was no wonder that one of the senior ED nurses had sighed longingly when Pip had explained the necessity of accompanying Alice to this appointment.

‘I wouldn’t miss that opportunity myself.’ Suzie had laughed. ‘In fact, I wonder if I could borrow someone’s kid?’

‘It’s only because my mother’s got some kind of horrible virus that’s making her vomit and Alice is too young to go by herself.’

‘It’s not a problem,’ Suzie had assured her. ‘Your voluble Mr

Symes has probably only got a virus as well. I'll keep a close eye on him while you're gone.' She waved Pip towards where Alice was waiting patiently on a chair near the door. 'Go. Enjoy!'

And with that smile from Dr Costa now coming in her own direction, it was impossible not to feel a curl of very feminine pleasure. Philippa could hear an echo of Suzie's sigh somewhere in the back of her head as she returned the smile.

'And you must be Alice's...sister?'

The noticeable hesitation was accompanied by a spark of curiosity in those dark eyes, but who wouldn't wonder about such an obvious age gap between siblings? There was also a subtle frown that suggested the doctor was puzzled by the somewhat unorthodox situation of a sibling accompanying a new patient to a medical consultation.

That inward curl shrivelled so fast it was a flinch, but Pip managed to keep her smile in place for another heartbeat. About to correct his assumption, she was interrupted by Alice.

'Mum's sick,' Alice informed Dr Costa. 'Isn't she, Pip? She couldn't come with me today 'cos she's got some horrible bug that's making her throw up all the time.'

'I'm sorry to hear that!'

He really sounded sorry, too. Pip took a deep breath.

'We didn't want to miss this appointment.' She didn't need to catch the meaningful glance from Alice that pleaded with her not to make any corrections. It could be their secret, couldn't it? Dr Costa wasn't the first person to assume they were sisters and it

was much cooler than reality as far as Alice was concerned.

It seemed perfectly reasonable. Secrets were fun after all, and if they were harmless, they only added to bonds between people.

‘There’s quite a waiting list to get into one of your clinics, Dr Costa,’ Pip added calmly, as she shot Alice just the ghost of a conspiratorial wink.

‘Call me Toni. Please.’ He was eyeing her white coat. ‘You’re on staff here, Pippa?’

‘It’s Pip. Short for Philippa.’ Though she liked Pippa rather a lot more, especially delivered with that accent. ‘And, yes, I’ve just taken up a registrar position here. I’m a month into my run in the emergency department.’

Alice was watching the exchange with keen interest.

‘I thought you were supposed to be Italian,’ she said to her doctor.

‘I am. I come from Sardinia, which is a big island off mainland Italy.’

‘Tony doesn’t sound very Italian.’

‘It’s Toni with an “i”,’ she was told. ‘Short for Antonio. Will that do?’

Alice returned the smile cautiously. ‘I guess.’

It was Pip’s turn to receive another smile. ‘Thank goodness for that. What would I have done if I couldn’t have established my credentials? Now...’ He reached for the manila folder on the desk. ‘Tell me, Alice, how is it that you’ve come to see me today?’

Alice looked puzzled. ‘I came on the bus from school. I often

do that now so that Pip can give me a ride home in her car. I used to have to catch two buses.'

Pip caught the unspoken appeal as the paediatrician opened the file. He wasn't getting the short cut he might have hoped for in this consultation.

'Alice's GP made the referral,' she said helpfully. 'He's been trying to find a cause for recurrent abdominal pain with associated nausea and vomiting and some general malaise that's been ongoing for several months now.'

Toni Costa was nodding as he skimmed the referral letter. 'No evidence of any urinary tract infections,' he noted aloud, 'but your doctor's not happy to settle for a diagnosis of childhood migraine or irritable bowel syndrome.'

'Mmm.' Actually, it had been Pip who hadn't been happy to settle for an umbrella diagnosis, but she didn't want to have anyone else thinking she was interfering because of her training.

The swift glance she received from her senior colleague conveyed a comprehension of her thought that was instant enough to be unsettling, but his expression suggested a willingness to respect her opinion that Pip appreciated enormously. The invitation to say more was irresistible.

'Mum had a cholecystectomy for gallstones a few years ago,' she told Toni. 'And she had an episode of pancreatitis last year. The symptoms were rather like what Alice seems to experience.'

Pip paused, waiting for the kind of reaction Dr Gillies had made to the suggestion. The unsubtle query of how soon

after Shona's illness Alice's symptoms had appeared. As though Alice was disturbed enough to be suffering from Munchausen's syndrome and had latched onto a known condition. As if you could fake the symptoms like tachycardia and pallor and vomiting that could come with real, severe pain!

‘And you're concerned about a possibility of an hereditary condition?’

‘Yes.’ The tension in Pip evaporated. Toni Costa was going to take her concerns seriously. Her opinion of this man shot up by several notches.

‘What's a hairy-de-tairy thing?’ Alice demanded. She gave Pip a suspicious glare. ‘You never said I might have that.’

Toni was smiling...again, and Pip decided that was just the way his face naturally creased all the time. Did smiling always make those almost black eyes seem to dance? No wonder he was so popular with his patients.

‘Hereditary just means it's something you were born with,’ he was explaining to Alice. ‘You get a whole parcel of genes when you born and some of them come from your parents and grandparents and something hereditary means it came in the parcel.’

‘Is it bad?’

Toni shook his head, making sleek waves of rather long, black hair move. ‘It doesn't mean anything by itself, Alice. It's like catching one of your buses. If it's hereditary it just means you already had your ticket. If it isn't, you're buying the ticket when

you jump on the bus instead. It's the bus we're interested in, not the ticket.'

Was he always this good at explaining things to children? Further impressed, Pip watched the satisfied nod that made Alice's ponytail bounce.

'So what's my bus, then?' she asked. 'Where's it going to take me?'

'That's what we're going to try and find out.' Toni Costa folded his hands on his lap and leaned forward a little. 'Tell me all about these sore tummies you've been getting.'

It was a relief to slide into a routine initial assessment of a new patient. Toni could now completely ignore the slightly odd atmosphere in his consulting room.

'And how often do you get the sore tummy, Alice?'

The young girl screwed up her nose thoughtfully. 'The last time was the same day as Charlene's party because I couldn't go.'

'And how long ago was that?'

'Um...well, it's Jade's party this weekend and she's exactly a month older than Charlene.'

'Older?'

'I mean younger.'

Toni nodded. 'So the last episode was a month ago. And the one before that?'

'I had to miss school and they were going on a trip to the art gallery that day.'

Toni raised an eyebrow at Alice's sister and could see the smile

in her eyes. She had to know exactly what it was like, chasing the information he required, and how frustrating the process could be sometimes.

‘They’re happening at four-to-six-week intervals,’ she supplied readily. ‘And it’s been ongoing for nearly six months now.’

With a quick, half-smile by way of thanks, Toni turned his attention back to his patient. ‘It must be annoying to miss special things like your friends’ parties,’ he said sympathetically.

‘Yes,’ Alice agreed sadly. ‘It really is.’

‘So the pain is quite bad?’

‘Yes. It makes me sick.’

‘Sick as in being sick? Vomiting?’

‘Sometimes.’

‘Is the pain always the same?’

‘I think so.’

‘How would you describe it?’

The girl’s eyes grew larger and rounder as she gave the question due consideration. Pretty eyes. A warm, hazel brown with unusual little gold flecks in them.

Her sister had eyes like that as well. Very different.

Intriguing.

Toni cleared his throat purposefully. ‘Is it sharp?’ he suggested helpfully into the growing silence. ‘Like someone sticking you with a big pin? Or is it dull, like something very heavy sitting on you?’

Alice sighed. ‘Kind of both.’

Toni gave up on getting an accurate description for the moment. 'Is it there all the time or does it go away and then come back—like waves on a beach?'

'Kind of both,' Alice said again. She bit her lip apologetically and then tried again. 'It doesn't really go away but it gets worse and then not so worse.' She shook her head. 'It's really hard to remember.'

'I know, but it's important you tell me everything you can remember about it. Does it stay in one place?'

'Yes. In my tummy.' Alice gave him a long-suffering and eloquent look. Did he really expect a tummy pain to go somewhere else—like her head, maybe?

Toni smiled. 'What I meant was, does it stay in exactly the same place? Does it get bigger and go to more places in your tummy, or does it make your back feel sore?'

Alice's face brightened. 'Sometimes it helps if I put the hottie on my back instead of my front. Is that what you mean?'

'Yes. Knowing that sort of detail is very helpful.'

Radiation of abdominal pain to the back could well point to something like pancreatitis and the thought automatically took Toni's gaze back to the older woman sitting in front of him.

She had to be quite a lot older than her sister. Late twenties probably, which was why he had been initially hesitant in querying their relationship to each other. Far better to assume they were siblings than to insult a woman by suggesting she looked old enough to be someone's mother.

The resemblance was certainly marked enough to make them believable siblings. Pip had those same astonishing eyes. Her hair was a lot darker—a real chestnut instead of red-gold—but the genetic inheritance in the soft waves was also apparent.

And should be of no interest whatsoever in this interview.

‘Any associated symptoms other than the vomiting?’ he found himself asking steadily. ‘Diarrhoea, headache, temperature?’

Pip shook her head.

‘And no family history of migraine?’

‘No.’

‘Peptic ulcers? Gastrointestinal reflux?’

‘No. And she’s been trialled on antacid medications.’

‘Any unusual stress factors or family circumstances?’

Pip looked startled. Almost taken aback.

How curious.

‘I don’t have an ulcer,’ Alice said firmly. ‘That’s silly. Only old people get ulcers. They thought Nona might have one once.’

‘Nona?’

‘Mum’s name is Shona,’ Pip put in quickly. ‘For some reason, that’s what Alice started calling her when she learned to talk, and it stuck.’

‘Oh?’ The extra distraction from professionalism was unavoidable. ‘How strange!’

Pip’s gaze was shuttered and her tone guarded. ‘Is it?’

‘Only to me, maybe.’ Toni smiled reassuringly. ‘I was largely brought up by my grandmother. Nonna.’

‘Was her name Shona, too?’ Alice sounded fascinated. ‘How weird!’

Toni shook his head. ‘No. Nonna is Italian for grandmother.’

And that was more than enough personal stuff. So odd that sharing something so private had seemed compelling. Almost as odd as the glance now passing between the Murdoch sisters. Toni stood up in an attempt to get completely back on track.

‘Now, cara, it’s time I had a good look at this tummy of yours. Can you climb up onto the bed for me?’

But Alice was staring at him now. ‘Why did you call me Cara? My name’s Alice.’

‘Sorry, it’s Italian. It means...sweetheart.’

‘Oh...’ Alice dropped her gaze shyly as she moved to climb onto the examination couch. ‘That’s all right, then.’

There weren’t many people that could have won Alice Murdoch’s full co-operation so easily. Pip stayed where she was, seated by the desk, while Toni began his examination. Close enough for support but far enough away to allow closer interaction between doctor and patient. Pip was more than happy to observe an examination that was thorough enough to be both impressive and a learning experience for her. She would make sure she remembered to apply the same principles for her next paediatric patient.

Toni did a head-to-toe check of Alice with astonishing efficiency, covering a basic neurological, cardiovascular and respiratory assessment before concentrating on Alice’s abdomen.

He also fired questions at Pip. Fortunately, the focus of his attention and the distance across the consulting room meant he probably didn't notice anything unusual in her responses.

But, then, he wouldn't be expecting her to be able to answer them easily, would he?

'Do you know if there were any difficulties associated with Alice's birth and the pregnancy?'

'Ah...' Pip had to stifle a kind of incredulous huff of laughter. 'Difficulties' couldn't begin to cover the emotional and physical trauma of a sixteen-year-old girl discovering she was pregnant.

Having the father of that baby abdicate any kind of responsibility or even acknowledgement of his child.

Being forced to burden her own mother who was still trying to get her life back together after the tragic loss of her husband and Pip's father only the year before.

Suffering a labour that had been so badly managed, prolonged and horrendous that Pip had known ever since that it was an experience she could never face repeating.

Her hesitation was interpreted as a negative response, but Toni's nod indicated it was only to be expected. 'I imagine you would have known if there had been anything seriously amiss.'

'Yes, I think I would have.'

'Normal milestones?' he asked, after listening to Alice's chest and heart with a stethoscope. 'Do you remember what age Alice started walking, for instance?'

'She was just over twelve months old.'

Twelve months that had been the hardest in Pip's life. The responsibility and practical skills of caring for a baby would have been totally overwhelming and dreadful if it hadn't been for Shona. In a way, though, it had been a wonderful twelve months because Shona had forged an even closer bond with her daughter and then rediscovered her joy in life through her granddaughter. That she had become more of a mother to Alice than Pip had been gradual but inevitable as Pip had been encouraged to finish her schooling and even chase her dream of going to medical school.

'What about talking?' Toni asked, as he let down the pressure from the blood-pressure cuff around Alice's arm.

'I'm not so sure about that. Around two, two and a half.' Hard to confess her lack of certainty but it was true—she wasn't sure. Alice hadn't been stringing more than a few single words together when Pip had headed away for her first term at university, but she had been chattering by the time she'd headed home for her first holiday break.

'Childhood illnesses? Measles, mumps, chickenpox and so on?'

'She's fully vaccinated. She had chickenpox when she was... oh, about four. The whole kindergarten class came down with it, I seem to remember.'

Not that Pip had been there to help run baths with soothing ingredients or apply lotion or remind Alice not to scratch. The letters and phone calls from her mother had made her feel guilty

she hadn't been there to help and share the worry. Worse than the poignancy of missing the joy of other milestones. But, as Shona repeatedly said, it wasn't because she didn't love Alice. She was doing what was best for both of them. For their futures. It couldn't be helped that she had to be away so much.

No wonder their relationship worked so much better as sisters now. They all knew the truth, of course, but it worked so well for all of them the way it was.

Pip had the niggling feeling that Dr Toni Costa might not think it was an ideal arrangement. He already thought it strange that Alice called her mother 'Nona' and there had been something hidden in the tone which with he'd shared the information that he'd been raised by his grandmother. She wasn't about to try and analyse why she didn't want to be thought less of by Alice's paediatrician but it was enough to prevent her correcting his initial assumption that was now making answering his questions rather uncomfortable.

It was a relief when he concentrated totally on Alice again for a few minutes.

'Show me where you feel the pain in your tummy.'

Alice pointed vaguely at her midriff.

'Does it hurt if I press here?' His hand was on the upper middle portion of Alice's abdomen.

'A little.'

Pip could see how gentle he was being, however. How sensitive his touch was. It was hard to look away from that hand,

in fact. The olive skin with a dusting of dark hair. Long fingers and neatly manicured nails. Movements that were confident but careful.

‘What about here?’ He was trying the upper right quadrant now. The area that pain would be expected if Pip’s suspicions had any grounds.

‘Yes,’ Alice said quickly. ‘That hurts.’

‘A little or a lot?’

‘Not too much. But that’s where it gets really sore when I get sick.’

The strident beeping at that point made Toni glance at the pager clipped to his belt. Then he raised his eyebrows in Pip’s direction.

‘Sorry. I think ED’s trying to contact me.’

‘Feel free to use the phone on the desk if you wish.’

‘Thanks.’ Pip was embarrassed to interrupt the examination but she couldn’t not take the call. What if her Mr Symes was busy having a cardiac arrest in a side room or something?

Suzie sounded apologetic as well. ‘I’m sure it’s nothing, but Mr Symes is complaining of chest pain now. Says it’s a crushing, central pain that’s radiating to his left arm.’

Classic symptoms. Almost too classic. ‘Any associated symptoms?’

‘Not really. He’s been complaining of nausea since he came in, along with all those aches and pains, but he’s not vomiting or sweating or anything. He reckons this came on suddenly.’

‘I don’t suppose he gave you a pain score without being asked, did he?’

Suzie laughed. ‘Ten out of ten. Do you think he’s been reading the right textbooks?’

‘We can’t afford to make assumptions. Can you do a twelve-lead ECG and put him on telemetry?’

‘Sure.’

‘What’s his blood pressure?’

‘One-fifty over ninety.’

‘Safe to try a dose of GTN, then. Put him on oxygen as well. Six litres a minute.’

‘OK.’

‘We’ll do some more bloods, too, and add in cardiac enzymes. I can do that when I come down. I shouldn’t be much longer.’

In fact, Toni was sitting down to share his findings with her as she hung up the phone, and Pip was aware of a vague feeling of disappointment that the consultation was almost over.

‘Cardiac patient?’ he queried.

‘Probably not, but we’ll have to rule it out.’

‘I won’t keep you too long. Alice seems like a normal, healthy little girl on first impression. The only finding I can make is mild and rather non-specific abdominal tenderness.’

That feeling of disappointment grew. Were her instincts misplaced? And would there be no reason for Alice to see Dr Costa again?

‘Mind you, that’s not an unexpected result and it certainly

doesn't mean I don't wish to make any further investigations.'

Pip nodded, listening intently.

'I'd like to do some further blood tests and another urine culture and microscopy. I think a general abdominal ultrasound examination would be a good idea. Maybe even an MRI scan.' Toni was ticking boxes and scribbling notes on request forms.

'We might like to consider a carbon-labelled urea breath test and possibly endoscopy to rule out the gastritis and duodenal ulceration that *Helicobacter pylori* can cause.'

Pip nodded again. This was more than she had expected.

'Alice hasn't been hospitalised with any of these episodes, has she?'

'No. I came close to bringing her in the first time because she was so miserable, but it only lasted about half an hour.'

'It would be ideal if we could see her and get a blood sample while she was having the pain. To check liver function for elevated blood amylase levels.'

'So you think pancreatitis is a possibility?' Pip caught Toni's gaze and held it. To voice the unthinkable—that Alice could have a tumour of some kind—was unnecessary. The eye contact told her that he already knew her deepest fear.

'I'm not ruling anything out at this stage. We'll find out what's causing the problem and then we'll deal with it, yes?'

'Yes.' Pip dropped her gaze, embarrassed to show how grateful she was. 'Thank you.'

'And you'll bring her in if it happens again? And call me? I'd

like to see her myself if it's at all possible.'

The warm smile that curled around the words made Pip think that this consultant might even get out of bed and come into the hospital at 3 a.m. if that's when the attack happened to occur.

And that he was really going to do whatever it took to make a diagnosis and then fix whatever was wrong with Alice.

Did all the relatives of his patients feel so cared about?

So...safe?

Pip was smiling back as Alice finished getting dressed and plopped into the chair beside her. She glanced from Toni to Pip and then back again.

'OK,' she said. 'Where's my bus off to, then?'

Alice was less than impressed with all the tests she might have to undergo.

'Why can't they just take an X-ray or something? You know I hate needles.'

'An ultrasound test is completely painless and it's better than an X-ray. And an MRI scan is even better. It's like having photographs taken of what's inside your tummy. It's incredibly detailed.'

'Ooh, gross! Can you see, like, what you had for breakfast?'

Pip laughed. 'Almost, but I wouldn't worry about any of it. You might have to wait for weeks to get an appointment for something like an ultrasound. We'll do what Dr Costa suggests and bring you into hospital next time you get a sore tummy.'

'Will you come with me?'

‘Of course.’

‘What if you’re working?’

‘Then I’ll stop working to look after you. Like I did today to go to your appointment.’

‘Do you get into trouble for doing that?’

‘Of course not.’ Pip almost managed to convince herself as well as Alice. ‘I just have to make up for it later. Like now. Are you OK to sit in the staffroom and read magazines while I go and look after the patients I still have?’

‘Sure.’

‘You can get a hot chocolate out of the machine. You know how to work it, don’t you?’

‘Yeah.’

They bypassed the main area of the emergency department to reach the staffroom.

‘Hey, Pip?’

‘Yeah?’ When had she picked up Alice’s speech patterns that now came so automatically?

‘Dr Costa’s nice, isn’t he?’

‘Very nice.’ Her agreement was deliberately casual. What an understatement!

‘Is he married?’

‘I have no idea.’ Liar! Pip knew as well as most women on the staff of Christchurch General that Toni Costa was single.

‘Maybe you should find out.’

‘Why?’

‘Cos it’s about time you got a boyfriend and I think Dr Costa’s hot.’

Pip wasn’t about to engage in that kind of ‘girl-talk’ with any twelve-year-old but most especially not her own daughter. ‘I’m way too busy to fit a boyfriend into my life.’

‘If you leave it too long, you’ll get old and crusty and no one will want you.’

‘Oh, cheers!’ But Pip was grinning. ‘For your information, kid, twenty-eight isn’t old!’

They had reached the staffroom now but, as usual, Alice had to have the last word.

‘Well, he likes you. I could tell.’

Toni sat back in his chair and sighed with relief as the shrieking toddler who had been the last patient in today’s clinic was removed from his consulting room.

He eyed the pile of manila folders and patient notes on his desk and pulled a pen from his pocket. While it would be nice to escape the hospital completely and revel in the peace and quiet of his home, he never left a clinic until he’d expanded his rushed notes to make a detailed summary of each visit. It wouldn’t take long.

When he got the Alice Murdoch’s file, however, he found himself simply staring into space, fiddling with the pen instead of writing efficiently.

How long would it be before he saw the Murdoch sisters again? Not that he’d wish an episode of acute abdominal pain on

Alice, of course.

He could always find another reason to visit the emergency department, couldn't he? A consult that he didn't send a registrar to do, for example.

It wasn't as though he intended to ask Pippa out or anything. Good grief, she was the relative of one of his patients.

Only the sister, though, not the mother. Did that somehow make it more acceptable?

But what would be the point of starting something that would go nowhere? He'd done that too many times already. And she was a doctor. A career-woman. Toni wasn't about to break his number-one rule. However ready he might be to find his life partner, the mother of his children was going to have to be as devoted to them as he intended to be.

As devoted as his own parents had always failed to be.

But he was going to have a career, wasn't he? Wouldn't any intelligent woman also want a career—at least part time?

Maybe this Pippa Murdoch was planning to go into general practice some time.

Part time.

Toni tried to shake off his line of thought. Tried, and then failed, to complete the task waiting for him on his desk.

There was just something about the bond between those sisters that was very appealing. It was something special. Unusual.

Her family was clearly very important to her. She had left a

patient who sounded as though he could be having a heart attack to accompany Alice to the appointment, and she was concerned enough to be determined to get a more definitive diagnosis than her family doctor had supplied.

He respected that.

And there was no getting away from the fact that she was a beautiful woman.

Different.

Stunning, in fact.

Toni reached for the phone and punched in an extension number.

‘Ultrasound Reception, Marie speaking.’

‘Hello, Marie. It’s Toni Costa here, Paediatrics.’

There was a small noise on the other end of the line. Almost a squeak.

‘You’ll be getting a request for an abdominal ultrasound on a twelve-year-old patient of mine, Alice Murdoch.’

‘Yes?’ Marie sounded keen to be helpful.

‘I’d like you to let me know when you schedule the examination. If I’m available, I’d like to come and watch.’

‘Really?’ Marie recovered from her surprise. ‘Of course, I’ll let you know as soon as it’s in the book. Is it urgent?’

Toni considered that for a moment. ‘It’s important rather than urgent,’ he decided aloud. ‘But it would be very nice if it could happen within the next week or two.’

And it would be very nice, albeit unlikely, if he happened to be

free at the time of the appointment. That way, there was at least a chance he might see Pippa again in the not-so-distant future.

He went back to finishing his paperwork.

Quite oblivious to the half-smile that occasionally played at the corners of his mouth.

CHAPTER TWO

THE child looked sick.

Pip had gone past the mother, sitting with a boy aged about two on her lap, twice. They had been there for nearly half an hour and should have been seen before this, but a major trauma case had come in and a significant percentage of the senior emergency department staff were tied up with several badly injured patients in the main resus bays.

The department had been crazy all day. Pip currently had three patients under her care and they were all genuinely unwell. Seventy-five-year-old Elena was having an angina attack that was much worse than usual and could herald an imminent myocardial infarction. Her investigations were well under way and adequate pain relief had been achieved, but Pip was trying to keep an eye on her ECG trace as she waited for blood results to come back and the cardiology registrar to arrive.

Doris, in cubicle 3, was eighty-four and had slipped on her bathroom floor to present with a classic neck of femur fracture. The orderlies had just taken her away to X-Ray and then she would most likely need surgical referral for a total hip replacement.

Nine-year-old Jake had had an asthma attack that hadn't responded well to his usual medications and his frightened mother had rushed him into Emergency just as the victims from

the multi-vehicle pile-up on the motorway had started arriving. Judging the attack to be of moderate severity, Pip had started Jack on a continuous inhalation of salbutamol solution nebulised by oxygen. She had also placed a cannula in a forearm vein in case IV drug therapy was needed, but his oxygen saturation levels were creeping up and the anxiety levels dropping in both mother and child.

Pip was about to check on Jake again and consider whether he needed admission to the paediatric ward.

Toni Costa's ward.

Seeing another child waiting for assessment made her think of Toni again, but Pip was getting quite used to that. It wasn't just Alice's fault for making that unwarranted but rather delicious suggestion that he'd been attracted to her. Pip preferred to think the explanation was because she'd been so impressed with the man as a paediatrician. How good he was with interacting with his young patients and what a good example he'd set in making such a thorough assessment of a new case. How he'd taken Pip's unspoken concerns seriously and made her feel that her daughter was in safe hands.

Toni wouldn't leave an obviously unwell child just sitting to one side of an emergency department and waiting too long for assessment because of pressure on resources, would he?

The small boy looked febrile. His face was flushed and appeared puffy. What bothered Pip more, however, was how quiet the child was. With the alien bustle of an overworked

emergency department flowing past in what should have been a frightening environment, the boy was just lying limply in his mother's arms and staring blankly.

Even from several metres away Pip could see that the little boy was in respiratory distress. A small chest was heaving under a thin T-shirt...way too fast.

Pip moved towards him, pausing for a moment beside the central triage desk.

'Doris has gone to X-Ray so we've got an empty cubicle for a while. Could you find me a bed, please, Suzie? I think I should take a look at that little boy over there.'

'Oh, would you?' Suzie sounded relieved. 'That would be great. I was just going to upgrade him for an urgent assessment. He's looking a lot worse than he did when he came in.' She sent a nurse aide to find a bed in the storage area off the main corridor to the hospital. 'Put it in cubicle 3. Hopefully we'll have another free space by the time Doris comes back.'

A stretcher was coming through the double doors from the ambulance bay. Another one was lined up behind that.

'What's the history?' Pip queried briskly, before Suzie could get distracted by the new arrivals.

'Just became unwell today. Running a temperature, off his food. Family's new in town so they didn't have a GP to go to.'

'Cough? Runny nose?'

'Apparently not. Temp's well up, though—39.6 when we took it on arrival.' Suzie was moving to intercept the first stretcher.

‘His name’s Dylan Harris. Turns two next month.’

Pip smiled at a mother who was probably her own age. What would life be like for herself, she wondered briefly, if she had a two-year-old instead of a twelve-year-old? She certainly wouldn’t be doing what she was doing now—a job she loved with a passion.

‘Mrs Harris?’

‘Yes...Jenny.’

‘I’m Dr Murdoch.’ The thrill of saying those words had never worn off. Worth all those long years of hard work and heartache. ‘Follow me. We’re just finding a bed so I can check Dylan for you.’

‘Oh, thank goodness! I think he’s getting sicker.’

The bed wasn’t needed immediately. Pip carried the chair Jenny had been sitting on as she led the way to cubicle 3.

‘Keep Dylan sitting on your lap for the moment, Jenny. It’ll keep him happier and help his breathing as well.’

‘He’s started making funny noises.’

‘Mmm.’ Pip was listening to the soft stridor on expiration and a gurgle on inspiration with mounting alarm. ‘And how long has he been dribbling like that?’

‘Is he?’ Jenny looked down at her son. ‘I hadn’t noticed. It must have started just now.’

Something that could compromise a child’s airway this quickly was extremely serious and Pip already had a fair idea of what she might be dealing with. She signalled Suzie to indicate

the need for assistance but the senior nurse was still occupied with a patient on an ambulance stretcher. Her apologetic wave and nod let Pip know she would do something as soon as she could. Pip reached for an oxygen mask.

‘Hold this as close as you can to Dylan’s face without upsetting him,’ she instructed Jenny.

Pip could see the way the skin at the base of his neck was being tugged in as Dylan struggled to breathe and the retraction of his rib-cage when she lifted his T-shirt to place the disc of her stethoscope on the small chest.

An empty bed was being pushed into the cubicle behind her.

‘Get me a nurse, please,’ Pip told the orderly. ‘Preferably Suzie, if she’s available.’ She took another glance at Dylan’s face. ‘You’re being such a good boy. You’re not feeling too good, are you, sweetheart?’

She got no response. Not even eye contact from the toddler. Pip looked up at Jenny.

‘Has he been talking much today?’

‘He hasn’t said anything since we got here. He’s not even crying, which is weird. He usually cries a lot. Does that mean it’s not that serious?’

‘Not necessarily.’ Pip wasn’t going to alarm Jenny by telling her that it was the quiet children that were usually most at risk. With the oxygen mask held close to his face, Dylan was leaning back on his mother’s shoulder, his chin raised. The ‘sniffing the air’ position that indicated an instinctive method of maximising

airway calibre.

‘And he hasn’t been coughing at all?’

‘No. This came on really suddenly. He seemed fine except he wouldn’t eat his toast this morning. I wondered if he might have a sore throat.’ She cast a worried glance at her son. ‘It’s getting worse, isn’t it?’

It was. Dylan’s eyes drifted shut and his head drooped. Pip touched his face.

‘Dylan? Wake up, love. Open your eyes.’ She got a response but it wasn’t enough. ‘I’ll be back in a second,’ she told Jenny. Slipping through the curtain, Pip nearly collided with Suzie.

‘Any of the consultants free at the moment?’

The nurse shook her head. ‘One of the trauma cases has arrested. It’s a circus in Resus.’

‘I need a paediatric anaesthetist here,’ Pip said. ‘And we need to get Dylan to Theatre. I’m pretty sure he’s got epiglottitis and his level of consciousness is dropping.’

Suzie’s eyes widened. ‘I’ll find someone.’

‘Get me an airway trolley in the meantime?’

‘Sure.’

Pip could only hope that intervention could be avoided until Dylan was safely under the care of an expert anaesthetist.

‘I think Dylan has something called epiglottitis,’ she told Jenny a moment later. ‘It’s a nasty bacterial infection of the epiglottis, which is at the back of the throat. If it gets inflamed it can interfere with breathing, which is why Dylan has started making

these noises.'

'What will you do?'

'We treat it with antibiotics but we have to protect the airway in the meantime. I'm going to get Dylan taken to an operating theatre if possible to have a tube put down his throat.'

'He needs an operation? Oh, my God!'

'Not an operation,' Pip said reassuringly. 'Not unless it's difficult to get a tube in place. In that case, it might be necessary to create a temporary external airway by—'

Suzie was back with a trolley. 'Someone's on the way,' she interrupted Pip. 'Shouldn't be long.'

It was going to be too long for Dylan. The small boy's eyes suddenly rolled and then closed. Jenny felt him go even floppier and when she moved the oxygen mask to look at her son, they could all see the blue tinge to his lips.

'Dylan?' Pip rubbed his sternum. 'Wake up!'

There was no movement to be seen. Including the chest wall. The toddler was in respiratory arrest. Pip plucked him from his mother's arms and laid him on the bed.

'Oh....God,' Jenny gasped. 'He's not breathing, is he?'

'No.' Pip was pulling on gloves and hoping she sounded much calmer than she felt. Where on earth was that consultant? 'We're going to have to put the tube in here. Could you hyperventilate him, please, Suzie?'

While the nurse used the bag mask to try and pre-oxygenate Dylan, Pip pulled the tubing from the suction kit and switched

the unit on. She clipped a straight blade to the laryngoscope and picked out the smallest, uncuffed endotracheal tube from the sterile drape she had opened on the trolley.

‘Hold his head for me, Suzie.’ Pip peered over the blade of the laryngoscope moments later. ‘Can’t see a thing,’ she muttered.

‘Secretions?’ Suzie asked.

‘Yes. And the epiglottis is very swollen.’

‘I’ll give you some cricoid pressure.’ Suzie pressed on Dylan’s neck and Pip tried to take a deep breath and banish her mounting alarm. She knew how critical it was to get this airway secured and it was not going to be easy.

Jenny was sobbing loudly enough for another nurse to put her head around the curtain.

‘I can’t bear to watch,’ the young mother gulped.

‘Come with me for a moment, then,’ the nurse said. ‘I’ll look after you while the doctors look after your little boy.’

Pip was barely aware of Dylan’s mother being led from the cubicle due to her intense concentration on the urgent task, but even with the pressure on the neck, the secretions sucked away as much as possible and her best efforts, there was no way to get the tube past the obstruction of swollen tissue.

‘It’s no go,’ Pip said tersely.

Suzie sounded just as tense. ‘What do you want to do?’

Pip had to think fast. She couldn’t rely on a senior doctor arriving in time to take over. If she didn’t do something herself, now, this little boy could die.

‘Ventilate him again for me, Suzie.’ She ripped open another kit on the trolley. ‘I’m going to do a cricothyrotomy.’

Stripping off her gloves and reaching for a fresh pair, Pip had to fight a moment of pure panic as the consequences of not succeeding with this next procedure forced themselves into her mind.

Then, for some strange reason, she thought of Toni Costa.

Well, not so strange, really, because Dylan would probably end up being the paediatrician’s patient.

And she had been thinking of Toni at rather disconcertingly frequent intervals over the last week anyway.

For whatever reason, Pip could almost sense his presence in the cubicle right now, and it brought an underlying confidence to her determination to succeed. So that Dr Costa would be impressed at the emergency care a patient of his had received.

Her fingers were as steady as a rock as she palpated the cricothyroid membrane on Dylan’s neck. There was no need for local anaesthetic as the child was deeply unconscious, and there was no time in any case. Pip stabilised the ring of cartilage with one hand and made a single, decisive incision with the scalpel.

Part of her brain registered the movement of the cubicle curtain and the fact that someone had entered the space and was now standing behind her. A large figure. Maybe it was Brian Jones, one of the emergency department consultants, answering her plea for back-up. She couldn’t look up at this point, however, or hand over to anyone else, even if they were far more

experienced.

Reversing her hold on the surgical instrument, Pip inserted the handle of the scalpel and rotated it ninety degrees to open the airway. Then she slid the tube into the incision, removing the introducer and replacing it with the tip of the suction apparatus tubing.

She attached the bag mask to ventilate Dylan and listened with her stethoscope to make sure both lungs were filling adequately with air. Then she checked for a pulse and looked up just as the curtain twitched back for the second time, allowing herself an audible sigh of relief.

A sigh that was abruptly terminated. It was Brian Jones who had just entered the cubicle, so who had been watching over her shoulder for the last few minutes? Pip's head swivelled for a second to find Toni Costa standing behind her.

'What's been happening?' Brian queried.

'Epiglottitis,' Pip informed her senior colleague succinctly. 'Respiratory arrest. Intubation failed due to the amount of inflammation.'

Dylan was making a good effort to breathe on his own now and was stirring. He would need sedation and the assistance of a ventilator urgently, but the consultant took a moment to nod with satisfaction.

'Well done, Pip' was high praise from a doctor known for being taciturn. 'Let's get him on a ventilator. Where's his family?' 'I'll find his mother,' Suzie offered.

‘And I’ll make sure they’re ready for this young man in ICU.’ Toni moved to follow Suzie but turned a second later. ‘Bravo, Pippa,’ he said quietly. ‘You certainly didn’t need my assistance.’

Warmth from that single, unusual word of praise stayed with Pip until she ended what had been a memorably long day. When her last patient, Elena, had finally been admitted for observation in the chest pain ward and Doris was in Theatre, having her hip joint replaced, Pip took a few minutes to visit the paediatric intensive care unit. She wanted to check up on Dylan and, if she was honest with herself, she wanted to enjoy that sensation of having done something special. And if she was really honest with herself, the possibility of meeting Toni Costa again had to be a distinct bonus, so she was more than happy to find him talking to Jenny and a man she assumed to be Dylan’s father.

‘Oh...it’s you!’ Jenny’s face lit up. ‘He’s going to be all right. Darling...’ She turned to her husband. ‘This is the doctor I told you about. The one who saved Dylan’s life when he’d stopped breathing.’

‘Really?’ The man stepped forward and gripped Pip’s hand with both of his. ‘What can I say? How can I thank you enough? It was...’

It was clearly too much to articulate further. Dylan’s father was overcome by emotion.

‘Sorry...’ he choked out.

‘It’s OK,’ Pip reassured him with a smile. ‘I totally understand. It was a frightening experience.’

For her as well. What would Dr Costa think if he knew that he'd provided the confidence Pip had needed to succeed, even before the surprise of his genuine presence? She didn't dare look at him.

'I'm so pleased to hear Dylan's doing well,' she added.

'He's doing very well.'

Pip had to look up as the paediatrician spoke. She found herself basking in a smile she could remember all too easily.

The warmth of this man!

'And I must congratulate you again,' Toni added. 'I didn't get the chance to tell you how impressed I was with what I saw. I couldn't have managed that procedure any better myself. You did, indeed, save young Dylan's life.'

Pip had never felt so proud of herself. It had taken so much hardship to cope with the long training and compromises in her personal life to get to precisely this point, but Toni's approval and the gratitude of Dylan's parents made it all seem worthwhile. More than worthwhile.

But then Pip's gaze was caught by the sight of the young parents moving to sit with their son. They were holding hands with each other and they both used their free hands to gently touch their child. The bond between the three of them was palpable and Pip was aware of a sense of loss that took the shine off her pride. Life could be so complicated and there was no doubt that sacrifices had been made for her to get to where she was. Sometimes things got lost that could never be replaced.

‘Don’t look so worried,’ Toni said. ‘He is going to be fine.’

Pip nodded. And smiled—happy to let the paediatrician assume she had been thinking of the child they could see. The return smile gave no hint that he might have guessed her real thoughts, although his words were startling.

‘How’s Alice?’ he queried.

Nobody could read minds that well, Pip reassured herself. ‘She seems fine at the moment.’

‘Have you received the appointment for the ultrasound examination?’

‘Yes, it’s next Thursday. Faster than I would have expected.’

Toni didn’t seem surprised but then his attention was being diverted by a nurse approaching with a patient’s chart.

‘Could you sign off these medication adjustments, please, Dr Costa?’

‘Sure.’ But Toni was still looking at Pip as she turned away with a nod of farewell. ‘I’ll try and drop by to see what they find on ultrasound. Ten o’clock, isn’t it?’

Pip’s nod slowed and she left the unit feeling oddly dazed. How on earth had Toni known the time of the appointment? And why would he want to interrupt what had to be a gruelling work schedule in order to attend?

For one, extremely disconcerting, moment, Pip thought that maybe Alice was right. Maybe Toni Costa was attracted to her and was looking for an opportunity to see her again. She couldn’t deny that the possibility of seeing him again had not

gone unremarked in her decision to follow up on Dylan Harris's progress.

How would she feel if that was the case? Pip walked through the hospital corridors barely noticing the people or departments she passed. If the tingling sensation in her body right now, coming in rather pleasurable waves, was anything to go by, she would feel very good about it.

Very, very good!

Alice was not feeling very good. Pip entered her home that evening to find her daughter looking downright mutinous.

'Nona's taken my phone,' she announced by way of greeting for Pip. 'It's not fair!'

'It's perfectly fair.' Shona appeared in the kitchen doorway. 'You spend half your life texting your friends. You'll get it back when you've finished your homework.' She smiled at Pip. 'You're home, finally! Wash your hands, love, it's almost dinnertime.'

The tone Shona used to speak to both Pip and Alice had been...well...motherly. Caring but firm. Possibly a little close to the end of a tether. Alice and Pip exchanged a glance. They both knew it would be a good idea to smooth potentially troubled waters. Alice disappeared upstairs, to at least look like she was doing some homework. Pip followed her mother to the kitchen.

'You OK, Mum?'

'I'm fine. Bit tired, I guess.' Shona pushed strands of her greying hair behind her ears as she bent to open the oven. 'It's just casserole and baked potatoes. Hope that'll do.'

‘It’ll be fantastic,’ Pip said sincerely. How many other overworked and stressed junior registrars could bank on going home to a warm house and delicious hot meal? Or having their laundry done or messages run when time simply wasn’t there for mundane chores?

But, then, how many twenty-eight-year-olds would want to be still living in their childhood home?

It wasn’t that Pip resented the security and comfort of being mothered. It was just that—sometimes—it would be nice to choose entirely for herself. To maybe sit down and chill out with a glass of wine instead of being immediately sucked into a predictable family routine.

A routine that had been the only way she could be doing what she was doing, Pip reminded herself. And look what she’d achieved today. A life saved. A family who would be only too happy to return to a normal routine. Pip gave her mother a one-armed hug as Shona stood up to place a tray of hot baked potatoes onto the bench.

‘What’s that for?’ But Shona didn’t sound displeased.

‘Just because I love you,’ Pip responded. She grinned. ‘And because I had a great day today. I had to do a really tricky emergency procedure on a little boy, Mum. He’d stopped breathing. He could have died but he’s going to be fine.’

‘Well done, you!’

Shona’s smile was proud but Pip could detect an undertone. ‘You sure you’re all right? Is that pain back again?’

‘No, not really. Just a bit of an ache.’

‘Have you made another appointment with Dr Gillies yet?’

‘No. I’ll do it tomorrow.’

‘That’s what you said yesterday. And last week.’ Pip eyed her mother with concern. She looked a bit pale. And tired. ‘Is Alice giving you a hard time about doing her homework?’

Shona smiled again. ‘No more than usual. We’ll get it done.’

That ‘we’ didn’t need to include Pip, but she brushed aside any feeling of being left out. ‘Anything I can do to help in here?’

‘Have you washed your hands?’

‘Mum, I’m twenty-eight! If I want to eat dinner with dirty hands, I’m allowed to.’ Pip sighed fondly. ‘OK, I’ll go and wash my hands.’

‘Good girl. Tell Alice to wash hers as well. Dinner will on the table in five minutes.’

Alice was brushing her hair and staring at herself in the bathroom mirror.

‘Dinner in five,’ Pip told her. ‘Wash your hands.’

‘Hey, Pip—can we watch “Falling Stars” after tea? In your room?’

‘Sure.’ Although half an hour of watching a gossip show about Hollywood celebrities wasn’t Pip’s cup of tea, time cuddled up on her double bed with Alice, watching the tiny screen of her portable television, had to be a highlight of any day. It was usually after Shona had gone to bed and often with illicit bowls of popcorn or a packet of chocolate biscuits to share.

Their time—with no parental type obligations to fill, for either of them.

Alice bolted her dinner with one eye on the kitchen clock.

‘It’s nearly 7.30,’ she announced finally, with a meaningful glance at Pip.

‘I know. I’m sorry I was a bit late today. Things got really busy.’

“‘Falling Stars’ is on at 7.30.’

‘I know. You can go and watch it if you like, and I’ll come after I’ve done the dishes.’

Shona was only halfway through a plateful of food she had been picking at without enthusiasm. ‘Have you finished that assignment you have to hand in tomorrow, Alice?’

‘I’ll do it later.’

‘No, you won’t. You never do. You’ll have to get it done before you do anything else, and that includes watching television. Especially watching television.’

‘But it’s my favourite programme!’

‘It’s a load of rubbish.’

‘Mum said I could watch it.’

Alice only called Pip ‘Mum’ when she wanted to play one of the adults in her house off against the other, a habit that had formed over the last few months—ever since she had decided it was cool to call Pip by her given name.

Pip took one look at her mother’s drawn face and knew it had been the wrong button to push tonight.

‘Mum’s right. You have to get your homework done, Alice. I’ll

tape the programme and we can watch it later.’

‘But I want to watch it now! I’ve been looking forward to it all day!’ Alice looked at Pip with the face of someone unexpectedly betrayed.

Shona said nothing but her lips were a tight line.

‘Please, Pip?’

It was tempting to give in to that plea and maybe negotiate a compromise, like supervising the homework being done later, but Pip could sense a disturbing undercurrent to what should have been an average family-type wrangle. Roles were being challenged.

Alice expected her support but maybe she was too used to getting her own way by pulling the ‘friends’ card out.

Shona expected her support as well. Pip was Alice’s mother after all, and maybe Shona was feeling too tired or unwell not to play the ‘mother’ card.

Pip was caught in the middle but it was perfectly clear which way she had to jump.

‘No,’ she said firmly to Alice.

‘But you said—’

‘I know what I said, but I didn’t know you hadn’t done your homework.’

‘Yes, you did! You heard—’

‘That’s enough!’ Shona’s fork hit the table with a rattle. ‘I’m sick of this.’

Alice jumped up and stormed from the room, slamming the

door behind her.

‘Sorry, Mum,’ Pip said into the silence that followed. She sighed. ‘I’m not very good at the parent bit, am I?’

‘We’re getting to the difficult stage, that’s all.’ Shona echoed Pip’s sigh. ‘I’d forgotten what it was like, living with a teenager.’

‘Was I so awful?’

‘No.’ Shona smiled wearily and reached out to touch her daughter’s hair. ‘You were great.’

That touch took Pip instantly back to childhood where the gesture could have provided comfort, communicate pride or been as loving as a kiss. The love she had for her mother welled up strongly enough to bring a lump to her throat.

‘I wasn’t that great. Remember the fuss I made when you wouldn’t let me get my ears pierced? I kept it up for a week.’

‘It wasn’t your ears I minded—it was the belly-button ring you wanted.’

‘And what about that first rock concert I was determined to go to?’

‘I seem to remember you getting your own way in the end that time. Thanks to your dad.’

They were both silent for a moment. The memory of that terrible wrench when Jack Murdoch had died so suddenly was still painful. A period neither of them liked to dwell on. Pip skipped it entirely.

‘And then I got pregnant.’ She snorted softly. ‘I have no idea how you coped with that so well, Mum.’

‘When you have to cope, you do. That’s all there is to it, really.’

‘And you’re still coping. Far more than you should have to at your time of life.’ Pip couldn’t brush aside the pangs of guilt. ‘I should be taking full responsibility for Alice by now. I should have a house of my own and not make you live with all her mess and angst.’

‘And how would that help while you’re still finishing your training?’ Shona straightened visibly in her chair. ‘I wanted to do this, Pip. I still do. I want to see you settled into the career you’ve always dreamed of. Into a relationship, even.’

Pip rolled her eyes. ‘Yeah, right! Just what every man my age wants—a woman who’s still living at home and relying on her mum and a package deal with an angsty teenager thrown in.’

‘Don’t judge all men on what James thought. He was an idiot.’

‘An idiot I wasted four years on at medical school. I’m in no hurry to go back there.’

‘It might have helped if you’d told him about Alice a bit earlier.’

‘Getting pregnant at sixteen isn’t something I’m proud of, Mum.’

‘Maybe not, but Alice should be,’ Shona said quietly. ‘You can be very proud of her.’

Shona’s words stayed with Pip as she tidied up after dinner. They could both be proud of their girl, but the credit had to go largely to Shona for the successful upbringing of Alice. Imagine what a disaster it would have been if it had been left entirely

to her? But she was much older now. Hopefully wiser. And it was way past time she took more of the burden from Shona's shoulders.

The silence from her daughter's room had been deafening and, having finished her cup of tea, Pip left Shona in the living room and went and tapped on Alice's door. It might be a good time to try and have a real 'motherdaughter' type talk. To start a new phase in their relationship.

'Alice?'

There was no response.

Pip tapped again and opened the door. Alice was curled up on her bed and had her face turned away from the door.

'Alice?' Pip stepped closer. She could see that Alice's arms were locked tightly around her slight body. 'We should talk, hon.'

Alice rolled and Pip saw that her face was scrunched into lines of what looked like severe pain. Reaching to smooth the hair from her forehead, Pip felt the damp skin and then Alice groaned.

'Oh, no!' Pip took hold of her daughter's wrist, knowing she would feel the tattoo of an overly rapid heart rate. 'Is it your tummy again? Why didn't you come and tell me?'

'It just started.' Alice broke into sobs. She didn't look anything like her twelve and a half years right now. She looked like a sick frightened little girl. And along with her maturity had gone any desire for a 'cool' relationship with her mother. 'It hurts, Mummy. Make it go away... please!'

‘Right.’ Pip pulled the duvet around Alice. ‘Put your arms around my neck. I’m going to carry you to the car and then I’ll take you into the hospital.’

‘No-o-o!’

Shona had heard the noise. ‘What’s happening?’

‘Tummy pain again. I’m going to take her into Emergency.’

‘Should I call for an ambulance?’ Shona asked anxiously.

‘It’ll be quicker if I take her.’

‘I’ll get the car out,’ Shona offered. ‘I can drive.’

‘You don’t have to come. It could be a long night.’

‘Of course I’m coming.’

‘I don’t want to go,’ Alice sobbed. ‘I don’t want to move!’

‘I know, hon, but we have to. We need to do what Dr Costa asked us to do. When you’re in the hospital you’ll be able to have some medicine that will take the pain away completely.’

Alice’s arms came up to lock around Pip’s neck. She braced herself to take the weight.

‘You promise?’

‘Yes.’ Pip lifted the girl. ‘I promise.’

‘Will Dr Costa be there, like he said he would?’

‘I don’t know, hon. Let’s hope so but it’s late and he’s probably gone home by now.’

Alice was still sobbing. ‘But I want him to be there.’

‘Mmm.’ The strength of her own desire to have Toni Costa there was overwhelming. Pip had to close her eyes and try very hard to sound casual. ‘Me, too.’

CHAPTER THREE

THE triage nurse took one look at Alice and sent them straight to a resus bay.

The registrar on duty, Graham, was right behind them.

‘Let’s get some oxygen on,’ he ordered a nurse, ‘and I want some vital sign baselines. What’s going on, Pip?’

‘This is Alice, she’s twelve,’ Pip responded. ‘She’s got acute epigastric pain radiating to her back with associated nausea and vomiting.’

‘First time this has happened?’

‘No. She had an appointment with Toni Costa recently because we want to find out what’s causing it. He asked me to bring her in when it happened again so we could get bloods to check amylase levels.’

‘Right. I’ll get a line in straight away.’

But Alice jerked her hand away from the registrar. ‘No,’ she said fiercely. ‘I want Dr Costa.’

‘He doesn’t work in Emergency, love,’ Graham said patiently. ‘Come on, this won’t hurt for more than a moment, I promise.’

‘No.’

‘We’ll be able to give you something for that pain after I’ve put this little tube in your vein.’

‘No!’ Alice’s sobs turned to a choking sound and Pip held her daughter’s head as she vomited yet again. Shona took a

dampened towel from the nurse, ready to wipe Alice's face.

'Sorry,' Pip said to Graham, 'but Toni did ask us to call him if we came in acutely. Alice was expecting to see him, I guess.'

'It's 9.30 p.m. Not much chance of him being in the building.'

'I know.'

Graham looked at the sobbing, unwell child on the bed and his expression revealed his reluctance to force treatment on someone who was very unlikely to be co-operative. He looked down at the IV cannula in his hand and then glanced at Pip.

'I could try beeping him—just in case.'

'Good idea.' Pip smoothed damp strands of Alice's hair back from her face. 'It's worth a try.' At least that way Alice would know they had tried to get the person she wanted to look after her. When she knew it was impossible, she might be prepared to let Pip put a line in her hand if Graham still wasn't acceptable.

She wasn't prepared for the look of surprise on Graham's face when he reappeared less than a minute later. 'He was in ICU. He's on his way down now.'

'Hear that, Alice?' Pip could allow herself to sound delighted on her daughter's behalf. 'Dr Costa's coming to see you.'

Alice hiccuped. 'Good.'

It was good. Better than good. Pip had no disagreement with Alice's conviction that Toni was the top of the list of desirable people to care for her. The worry that the paediatrician might have been in the intensive care unit because Dylan had taken a turn for the worse was dismissed with only a small pang of guilt.

Pip's attention had to be focused much closer to home for the moment and she wanted the best for her own daughter.

Their confidence did not appear to be misplaced. Toni took over the resus bay from the moment he arrived and managed to exude an air of authority tempered with a charm that reduced the stress levels for everybody concerned. He actually managed to both reassure Alice and gain the information he wanted at the same time. Pip could see Alice visibly relax when the doctor smiled at her and patted her hand before his fingers rested lightly on her wrist.

‘Heart rate?’

‘One-twenty,’ Graham supplied.

‘Respirations?’

‘Twenty-eight.’

‘Temperature?’ The touch on Alice's forehead was hardly necessary but Pip could see that it was appreciated. Alice closed her eyes and, just for a moment, the lines of pain on her face almost vanished.

‘Thirty-seven point four.’

‘Blood pressure?’

‘Eighty over fifty.’

‘Bit low. Postural drop?’

‘We haven't tried assessing that.’

Pip was still watching quietly, enjoying the sensation of having an expert take over. As a doctor, it was a good learning experience, being on a parent's side of this equation. Her anxiety

was actually receding to the point where Pip could register how impressive Toni's clinical skills were. He was able to palpate an invisible, tiny vein in Alice's forearm and then slip a small-gauge cannula into place without eliciting more than a squeak from his patient.

Worry kicked in again with his latest question, however. A drop in blood pressure from a change in posture could be serious and the paediatrician seemed to be looking for signs of hypovolaemic shock. What could Alice be bleeding internally from? A perforated peptic ulcer? Something as nasty as acute haemorrhagic pancreatitis?

'She said she felt dizzy when she had to sit in the car,' Pip told Toni as he taped the cannula into place.

'We'll get these bloods off and then I'd like some fluids up,' Toni said to Graham. He smiled at the nurse who was holding a page of sticky labels already printed with Alice's details and hospital ID number, ready to label test tubes.

The smile was warm. Appreciative of her readiness and inviting the junior nurse to consider herself a valuable colleague. For an idiotic moment Pip actually felt something like jealousy.

'We need amylase levels, haemoglobin and haematocrit, electrolytes...' The list seemed to go on and on as the nurse plucked tubes with different coloured stoppers from the tray. 'And we want blood cultures as well,' Toni finished.

'Goodness!' Shona's eyes had widened at the mounting pile of test tubes.

That smile appeared again. ‘Don’t worry, Mrs Murdoch. It looks like we’re taking a lot of blood but it’s less than a teaspoonful in each tube.’

‘Why the cultures?’ Pip queried. ‘Wouldn’t Alice be running more of a temperature if this pain was caused by infection?’

Toni nodded. ‘We still need to rule it out. We’ll do a dipstick test on her urine as soon as we can as well.’ The quick smile was almost a grin this time—faintly conspiratorial. ‘I like to be thorough,’ he confessed.

Thorough.

And gentle.

Pip watched Toni’s hands as he carefully examined Alice’s abdomen. She had watched him doing this once before and, unbidden, the memory had already returned more than once.

If only Alice hadn’t planted that absurd suggestion of Toni as potential boyfriend material. If only Pip hadn’t found herself remembering those hands and their touch in the middle of the night. Wondering how it feel to have them touching her.

It had been all too easy to imagine. And highly inappropriate, given the current setting, so it was easy to dismiss. It evaporated more than convincingly as Alice cried out in pain. Toni’s voice was now as gentle as his touch but excited no odd tingles in Pip. Her focus was firmly on her daughter as she stepped forward to take the small, outstretched hand.

‘It’s OK, hon,’ she said. ‘I’m here.’

‘I know it hurts, cara,’ Toni added in an equally soothing tone.

‘We’re going to do something about that very soon. It’s a bit mean, isn’t it, but we need to try and find out what’s causing it before we take the pain away.’ He turned to the registrar who was adjusting the flow on the IV line attached to a bag of fluids. ‘I think we could get some pethidine on board now.’

‘Why not morphine?’ It was the standard analgesic to use in situations such as this.

‘There’s some evidence it can cause sphincter of Oddi spasm.’

Graham nodded. He eyed Alice thoughtfully and Pip could tell he was trying to assess how much she weighed in order to calculate a dose of the narcotic. Toni picked up the hesitation as quickly as Pip did but showed none of the impatience some consultants might have displayed. Instead, he smiled at his young patient.

‘Do you know how much you weigh, Alice?’

‘No.’

‘I’m sure Mum knows.’

There was a tiny pause as Shona blinked at being the focus of attention. ‘Ah...’ She flicked a puzzled gaze at her daughter. ‘Actually, Pip’s—’

‘She’s about thirty-two kilos,’ Pip interrupted quickly. This was hardly the time or place to correct Toni’s assumption about her relationship with Alice, was it?

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