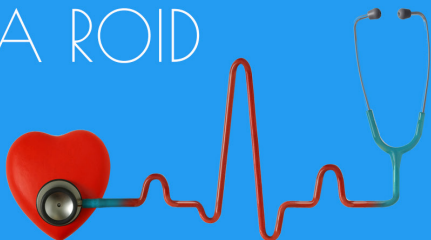




EMMA ROID

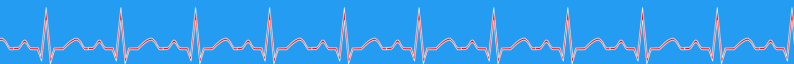


A DR ADAM CARRINGTON ROMANCE

ACCIDENT AND ENGAGEMENT

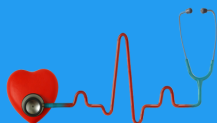


THE HERSTON GENERAL HOSPITAL
MYSTERY ROMANCES III



THE HERSTON GENERAL HOSPITAL MYSTERY ROMANCES

Dashing and debonaire Adam Carrington is everyone's favourite consultant at Herston General. Patients adore his reassuring bedside manner, whilst his colleagues can only stand in awe of his reputation as a man who can operate with skill and save lives others believe hopelessly lost. With helpful nurse Sister Sally Wellbeloved by his side he spends his life doing what he does best: making people better. But matters are not always straightforward in the world of the brilliant medical practitioner and Adam is often forced to spend as much time solving crimes as curing patients.

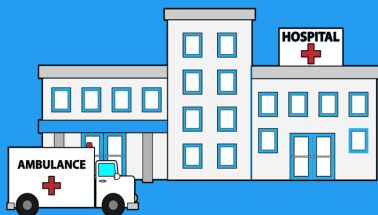


"Carrington is a brilliant invention. So accurate he could have been drawn with a scalpel"

"Tales to set the blood pulsing and the heart. Hospital dramas don't get better than this."

"Perfect hospital reading"

"A Transfusion of drama into the everyday crime novel"



AN ADAM CARRINGTON NOVEL



Emma Roid is the nom de plume of Mr Ahmed Aziz (DHRA member since 2016). An NHS consultant for more than 30 years and a private practitioner since 2016, Ahmed has performed thousands of largely successful operations and is generally regarded as “a safe pair of hands early in the week”. Winner in 2018 of the silver scalpel for medical crime fiction for his debut novel Emergency Ward Love, he has gone on to write more than one other book (2).

He is married to Polly Deathridge (who he freely admits is his model and inspiration for much loved fictional nurse Sally Wellbeloved) and lives with her in Dorset . They have 15 children. Between operations he splits his time between writing and research. He recently appeared before the Disciplinary Committee of the GMC but prefers not to talk about it.

EMMA ROID

ACCIDENT AND
ENGAGEMENT



Herston Hospital Campus Map



- Emergency
- Information
- Main Reception
- Building entry

- Accessible parking
- Accessible ramp
- ACTION Bus stop
- Bicycle parking
- Car park
- Helipad
- Loading dock
- Motorcycle parking
- Stairs
- Taxi pick-up point

- 1 Central Outpatients Dept./Tower Block
- 2 Main Reception
- 3 Building 3 (various departments)
- 4 ANU Medical School
- 5 Residences (Public and Staff)
- 6 Administration (various departments)
- 7 Alcohol and Drug Unit
- 8 Pain Management
- 9 Residences (Doctors)
- 10 Pathology
- 11 Centenary Hospital for Women and Children

- 12 Emergency, Diagnostics and Treatment
- 14 National Capital Private Hospital
- 15 Building 15 (various departments)
- 19 Cancer Centre
- 20 Building 20 Radiation Oncology
- 22 Building 22 (Information Services Branch)
- 23 Building 23 (various departments)
- 24 Building 24 (various departments)
- 25 Adult Mental Health Unit
- GP1 Community Dialysis
- GP2 Rehabilitation Independent Living Unit

CHAPTER ONE

An almost imperceptible smile of gratitude flashed across the handsome face of dashing and debonaire surgeon Adam Carrington as nurse Beverley Beverley wiped a tiny bead of sweat from his brow and returned her gaze to the confusing array of surgical instruments of which Adam alone was clinical lord and surgical master. “*Clamps*” he intoned with practiced ease before making a few quick, deft and decisive incisions to separate the malignant growth from the healthy tissue to which it had been firmly attached just moments before. Seemingly unaware of - or at least unconcerned about - the life-threatening nature of the procedure upon which he was now engaged, Adam worked calmly and methodically doing what came naturally to him: saving lives others thought beyond rescue. More celebrated surgeons than he had advised that operating on this particular patient was simply impossible, but Adam had begged to differ and now, here, before the eyes of his admiring team and a group of observers especially flown in from Japan, Adam was working his instinctive magic.

“Saving those others have pronounced beyond help is my life’s work”, he had once told a conference audience: *“It’s what I came into medicine to do; what the sacrifice of my hard-working parents was all about, what keeps me energised and alive”*. The most brilliant surgeon of his generation, he was also the most loved by patients, colleagues and the general public alike.

Anaesthetist Gregory de’Ath checked the patient’s vital signs as the unmistakeable voice of Maria Callas emerged soothingly in the background from the especially installed speakers. “*Casta Diva, che inargenti. Queste sacre antiche piante ...*” the voice continued, as Adam made further incisions, each with the same assured skill

and practiced ease. Within five minutes his work was complete. “*Sutures and close*” he instructed with calm authority before handing over to Royce Masterson his assistant.

Once in the washroom, Adam removed his scrubs, stripping to the waist to reveal a well-toned torso, testament to hours of work in and out of the hospital gym. “*Wonderful work*” Adam, Sister Sally Wellbeloved told him as she too began removing her gloves and headed to the showers. For all its mystique and romantic allure, surgery was a messy business and washing away the sweat and detritus was essential if a nurse was to maintain her fragrant post-operative appeal. And Sally was certainly fragrant. Everyone agreed. She had been voted Herston General’s “*Most fragrant nurse*” three years running - in fact ever since she had first come to the hospital, attracted like so many others by the opportunity of working with dashing and debonaire Adam Carrington. “*Thanks Sally*”, Adam responded to her retreating back. “*Have a good one*”.

It was almost 10 minutes before Adam’s mind began to relax and to turn to subjects other than that of saving lives. Perhaps he would allow himself a small beer with Sally tonight, perhaps a take-away and a video: something superficial and mindlessly diverting: Jacques Rivette’s *Paris Belongs To Us* perhaps, generally regarded as the 6th most impenetrable movie ever made. As long that is as the ever-insistent pager stayed silent and he wasn’t called yet again to save a child, a mother, a girlfriend or a friendless refugee whose lives would certainly be forfeit without the timely deployment his unique talent.

Hardly had the thought formed in his head than the call came: “*Mr Carrington Procedure 13, Proceedure 13. Mr Carrington please*”. Adam knew what Procedure 13 meant ... knew only too well. Something was seriously wrong and, exhausted as he was, he must obey the clarion call. Lifting his tired limbs as though momentarily in slow motion, he soon

sprang into action and was picking up the internal phone ready to hear whatever grave news awaited him. To his surprise the voice on the other end was not that of the hospital's usual pager Ms Usuel Pajer, but rather his friend Di Agnosis, the hospital's multi-talented radiographer and Head of DXA, PET/CT, MRi, Ultrasound and CCS Scanning. Though a close colleague and friend, it was rare for Di to contact Adam directly. Instinctively the dashing and debonaire surgeon sensed something was wrong. Terribly wrong.

"What's terribly wrong?" Adam asked as Di's voice came through, breaking as it did so. His forensically incisive mind alert to every nuance, Adam quickly grasped Di's plight. A patient on Ward C136 was dead - unexpectedly dead - and only hours after emerging from one of Di's machines. Telltale signs - a light toasting over the whole expanse of his body similar to that associated with prolonged contact with a griddle - suggested a level of over-exposure to some form of light or heat. Random scorch marks, blotches and patches of seared material from a Scotch-plaid dressing gown embedded in the skin aroused further suspicion. Quickly ruling out either a visit to a discount tanning salon or a late winter break in Corfu, Adam stared disbelievingly at the phone. There was only one likely cause and it was closer to home, much closer to home. In fact so close to home it almost *was* home. Either the patient had wandered half-sedated into the hospital barbecue (unlikely given that it had long since cooled and been packed away until the Summer) or Di had used the wrong settings when he had scanned the patient a few hours before. But Di? Di of all people. He was the best trained and most reliable knob-twiddler in Herston General. He was meticulous; checked and double-checked everything. What could possibly have gone wrong? A momentary aberration (perhaps the distraction of a cheese and tomato sandwich which was Di's only known and very occasional vice), a power surge, a machine malfunction or something far more sinister? Was Di being set up by those who wanted to relocate all of Herston General's scanning

to a new state-of-the art centralised facility at Bradpole General and knew that Di - vociferous champion of localised point-of-care scanning - was their most implacable opponent?

Adam's mind moved into super-overdrive as he pushed his elegant surgeon's fingers anxiously through his long raven locks, looking every inch the champion schoolboy cricket captain he had once been. Casting aside his *persona* as the Seurat of the scalpel he quickly assumed instead the mantle of the master detective: the Cezanne of the crime-scene, the Toulouse-Lautrec of the telling clue, the Monet of the missing evidence, the Picasso of the probable cause.

Experience told Adam that the hospital administrators would soon be alerted and that, as sure as rehabilitation follows recovery and recovery follows surgery, the authorities would be bearing down on Di - looking for a quick solution and an easy target. "*Scapegoating*" he mumbled to himself; that was the word and what a word it was: a *portmanteau* he believed and possibly an agent noun. A nasty word in any case and in anyone's book. Especially his. How he hated agent nouns. If he had his way he would dungeonize anyone caught using them. "*Dungeonize*". Damn it. Another agent noun. They were everywhere.

For a brief moment Adam felt as though all the dragons he must now slay were ranged before him, that everything he had striven to eliminate from the world to make it a better, safer, kinder place, had rallied to an as yet unknown enemy in order to lay him low and, having done so, defeat him once and for all. He knew, of course, that this was tiredness talking: the insidious effect of four solid days in theatre saving 18 lives, sapping his strength, gnawing at his will like a guppy toying with a submerged family-sized Weetabix packet. But for as long as it lasted the effect was crippling and he could lift neither limb nor mood.

A loud bang penetrated his consciousness. “*Fucking machine*”, shouted houseman Aaron Killjoy, as he examined his coffee-soaked trousers and a laggard cup dropped far too late from its slot in the vending machine. “*Thank God for Aaron*” Adam reflected as the junior doctor’s cursing continued, bringing him quickly to his senses and rendering him the man of action once more.

“*Focus man, focus*”, he admonished himself. The mantra, to which he often turned, worked its spell: everything was becoming clear. And with clarity came decisiveness. One thing was for sure, with the help of well-beloved nursing sister Sister Sally Wellbeloved, Adam Carrington would have once again to get to the bottom of a crime; for crime it was and get to the bottom of it he would. That or else he wasn’t Adam Carrington, dashing and debonaire surgeon, life-saver and all round good egg.

“*Hang on in there my friend*”, he intoned reassuringly into the telephone’s mouthpiece, “*help is on the way*” ...

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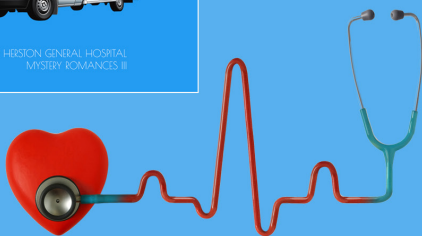
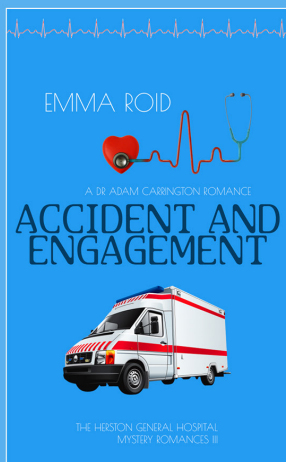
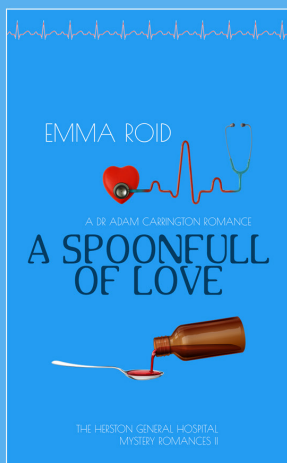
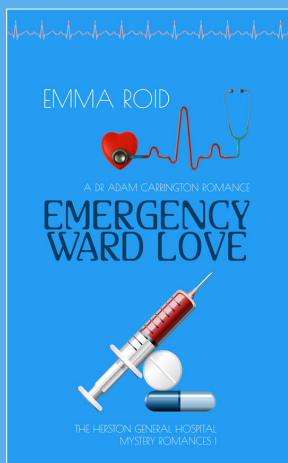
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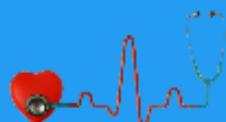
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ACCIDENT AND ENGAGEMENT

A READAM CARRINGTON MYSERY ROMANELL



Being calm, collected, Adam Carrington is everyone's favorite consultant at Haskon General. Patients adore his easygoing, laid-back manner, while his colleagues can only stand in awe of his reputation as a man who can operate with skill and save lives others believe hopelessly lost. With his old nurse, Sister Sally, Wallflowering by his side, he's seemingly invulnerable, but when a patient dies following a CT scan, all does not seem right at Haskon General. Adam's friend, psychiatrist Dr. Agnew's reputation is on the line – but can Adam and Sally get to the bottom of the mystery before her world falls apart?



Also from Emma Reid

