

# Children of the Vacuum

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## Introduction

We are the ones who arrive after the alarms fade, when the last flashes have cooled to ember-glow across the hulls and the battlefield has stopped pretending to be anything but a scrapyard. We come in quietly, lights shrouded, transponders whispering apologies to friend and foe alike. Our ship is a salvage cruiser by registry, but our hearts are triage bays, our cargo holds confessionals, our corridors lined with the stubborn breath of people who refuse to be statistics. We don't win battles. We count

survivors.

Out here the enemy is not a flag or a creed; it is physics with bad manners. Vacuum does not argue, it subtracts. Radiation does not announce itself, it accumulates—like doubt, like debt. Acceleration and impact write their signatures in bones and vessels; isolation etches its letters in the long silences between telemetry pings. We practice a medicine that speaks the dialect of the void: sealing what the absence of air would steal, warming what the cold would make brittle, coaxing hearts to beat in rhythms ships can understand.

Our theater is cramped: a medbay the size of an apartment kitchen, a sterilizer that rattles in hard turns, an inventory that must last longer than common sense says it should. We balance oxygen budgets with the same care we count sutures. Every dose is a wager; every tourniquet a vow we intend to keep. The protocols look neat on a screen, but they blur at the edges when the stretcher is magnet-clamped to a deck that won't stop vibrating, when the patient's visor fogs with panic, when a gloved hand has to choose between two red codes and only one pair of hands to answer.

We are not alone, and yet we are. Command speaks in vectors and time-on-target; we translate to skin and breath. On good nights we swap ghost stories and recipes we can't cook, trade patches, joke in the gallows way that keeps the dark at arm's length. On bad nights we stand very still and listen to the ship breathe, counting the hisses that mean life is moving, measuring our own pulses through layers of suit and fabric as if to prove we're still here. We write letters we may never send. We store them where the auto-doc won't delete them by accident.

You will see us work in places that were not meant for it: clinging to a ruptured spine corridor with boots that barely hold, threading lines through suit ports while microdebris ticks against the hull like rain remembered from planets we left behind. You will meet patients who arrive without names—just call signs, just coordinates—and watch them become people again as they tell us about their sister's dog, or the comet they saw as kids, or the song stuck in their head while they waited to be found. You will also meet the ones who do not speak, and we will show you how we speak for them.

This account is a fiction that insists on feeling true. The faces are changed and the ships don't fly on any known map, but the work is honest: the improvisations and the rituals, the stubborn decency that grows in inhospitable soil. It is a case-study of medicine practiced where the clinic wall is a bulkhead and the waiting room is a debris field, where consent is a conversation conducted through fogged visors and split channels, where every intervention must also negotiate with environment, with command, with the arithmetic of survival.

We salvage more than metal. We salvage chances—slender ones, sometimes—and

moments of meaning that might otherwise tumble end over end into the dark. We will be frank about what can be saved and what cannot, about the cost of carrying both forward. You may not always agree with our calls. Some days we don't either. But we will show you how we make them: the checklists and the gut feelings, the training that holds when memory shakes, the grace we extend to strangers first so we might remember how to extend it to ourselves.

If you choose to come aboard, keep your tether clipped and your expectations unlatched. We will teach you how to count a pulse through a suit, how to hear a murmur over engine hum, how to keep a chest sealed when air is a thief. We will ask you not to look away, because looking away is how the void wins. We are medics by trade, salvagers by circumstance, and—whether we like it or not—children of the vacuum. Out here, we learn to be held by what could kill us, and to hold one another tighter still.

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## **CHAPTER ONE: Scavenger's Oath**

We do not ask for clean wounds. In fact we prefer the filthy ones because they at least declare their intentions, like bouncers shouting in a doorway. Our salvage cruiser, registered as *Kestrel's Mercy* though no one calls it that on the bridge, slides into the aftermath of a skirmish with dampers humming and a shudder that travels from stern to stem like a rumor. It is a small ship with a small appetite, yet the medbay swells with expectation every time the outer doors cycle. Our job is to arrive when the flags have folded and the flashbulbs of battle have dimmed to ash-colored glow across armor plates. We count survivors the way miners count canaries, and mostly we hope the math works.

The oath we take is not written on paper or etched into alloy. It lives in the way we check seals twice, triple-check, then check again while swearing at the universe for giving us hands that sweat. The oath says we will not be the thing that finishes someone off, and we will not lie about the odds unless lying buys time. Out here, time is currency richer than credits, and we spend it with both hands when the patient is warm enough to feel the burn. We say we are impartial, but impartiality is just a word we use while choosing who gets the last unit of cross-matched plasma. We do not always choose well. We choose fast.

Command likes us tidy, which is to say they like us far enough from the bridge to be useful but not so far that we become interesting. We file reports in triplicate, though two copies are digital ghosts and one is ink on flimsy paper we hoard like museum artifacts. The ink smells of solvents and stubbornness. When we write that a patient is stable, we mean their numbers lied long enough for us to believe them. When we write

critical, we mean the universe has tightened its grip and we do not expect the grip to loosen. We try not to write anything we cannot say aloud with a straight face, because the next of kin, if they exist, may read those words while floating in station cafeterias or barracks berths, and they deserve a sentence that holds weight.

The ship groans as we match velocity with a dead cruiser that still thinks it is winning. Its name is something proud—*Vanguard* or perhaps *Iron Covenant*—but the hull is peeled back like a citrus rind, showing ribs of conduit and veins of coolant that have already forgotten how to flow. We approach from the aft quarter because the fore is a gallery of holes, each one a mouth that once shouted orders and now only whistles. Our pilot hums something tuneless and adjusts the magnetics with a delicacy usually reserved for picking up dropped coins. I tighten the collar of my scrubs and wonder if the universe takes notes on who survives to scrub another deck.

Medbay is a kitchen-sized room that has learned how to argue with itself. The sterilizer rattles on its mounts whenever we change course, as if it is afraid it will be blamed for any infection that blooms later. The autodoc is wedged between supply lockers and a cart that carries nothing but guilt—empty saline bags that got counted but never refilled, torn foil from coagulant patches, and gloves that were used once and then dropped in panic. We have stickers above the lockers with bold block letters that say things like “SHARP” and “BIO,” but the letters have begun to curl at the edges from humidity that sneaks in during hard burns. We do not fix the stickers because peeling them would disturb the dust, and the dust is the only thing holding the place together.

Our first alert sounds while we are still two thousand kilometers from the dead cruiser. It is a polite chime from the comms officer, who sounds like he is reading from a menu rather than announcing that people have been torn open by shrapnel and flung into the arms of indifferent geometry. The alert lists ship codes and probable injuries, and we begin inventory in our heads. Bandages, check. Clamps, check. The thing that unkinks the stubborn vein, check. The thing that talks a patient into not dying while we sew, check. We split into teams before we have left the room, because waiting for consensus is a luxury that belongs to planets with more air than they know what to do with.

We suit up in layers that feel like confessing sins to a priest who is also a wrestler. The inner liner is snug and smells faintly of antiseptic and old sweat. The outer shell is bulkier, less forgiving, and has patches on the shoulders that mark us as something other than crew, though we crew the ship as surely as anyone. I tap my helmet and listen for the whisper of airflow, a rhythm that says the suit is alive and willing. When the seal hisses shut, the world shrinks to the view through the visor and the sound of my own breathing, amplified just enough to be companionable. I like that part. It reminds me I am still here.

Mag-boots click onto the deck as we make our way to the airlock. Each step is a

negotiation with magnets that behave differently depending on the ship's attitude, which changes whenever someone on the bridge belches a course correction. We grip handrails like children holding onto bus straps, and we joke about gravity being a myth invented by people who have never had to chase a rolling scalpel in null-G. The humor is thin, but it holds. Thin is better than nothing when you are floating toward a corpse that used to be your classmate or rival or brother. We do not talk about the dead by name until we have them on a stretcher, because names are heavy and we are already carrying too much.

The airlock cycles with a shudder that rattles teeth. For a moment there is only the hiss of pressure equalizing, and I think about all the things that can go wrong in that hiss, and how we trust a machine built by contractors who never left a planet's surface. Then the outer door opens, and we step into the corridor that connects our ship to the wound. The umbilical is a thick hose of cables and lines, a leash that supplies air and data and a faint sense of security that is mostly theater. We clip our tethers to the line, and the line clips to the ship, and we become a chain of people who refuse to let go.

The dead cruiser's interior is a maze of broken light and bent panels. Emergency lamps flicker like nervous eyelids, and the floor tilts at an angle that makes me wonder if we are walking or if the ship is slowly folding itself into a smaller, more manageable shape. Blood floats in globules that look like marbles made of bad wine, and we navigate around them with a care usually reserved for religious relics. My boots magnetize to the deck with a thud that feels like an apology each time I step. The ship groans again, deeper this time, and I tell myself it is just metal cooling.

We find the first patient wedged in a corridor that used to be a junction for coolant flow. He is alive, which is a surprise to all of us, and his suit is leaking air in a rhythmic pattern that matches the blinking of a nearby indicator. The indicator is dead, but the rhythm is not. We kneel, careful not to let our knees drift and bump into his broken ribs, and we introduce ourselves by name and rank, though I suspect he can hear only the static in his own head. We ask him to tell us his name anyway, because it is easier to stitch a person than a statistic, and words give us something to hold onto while we work.

His name is Rael, and he used to be a sensor officer before the bridge decided he would be better at bleeding out in a corridor. He laughs when he says it, and blood bubbles at his lips. We do not scold him for laughing. Sometimes laughter is the only sealant that holds when the rest of the body fails. I press a hand to his chest and feel the flutter of a heart that is trying to remember how to beat in time with the rest of him. My partner, Mara, already has a sealant patch ready, and she applies it with a precision that suggests she has done this dance before. The patch hisses as it bonds, and the leak slows, then stops, and Rael's breathing settles into something less ragged.

We float him onto a stretcher that looks like a metal frame wrapped in stubborn hope. The straps crisscross his torso and legs, securing him without promising safety. We anchor the stretcher to a mag-clamp on the deck, and I realize we are all anchored in one way or another. There is a comfort in that, and also a fear. We transport him down the corridor, weaving around debris that used to be important to someone. A panel floats by with wires that still twitch, as if the ship is dreaming of signals it can no longer send. We ignore it, because we have learned which ghosts are worth acknowledging and which are just noise.

The umbilical drags behind us like a tail, reminding us we are guests in this ruin. Our comms crackle with updates from our ship and from command, which is somewhere safe behind a screen and a set of coordinates. They tell us there are more patients deeper in, near the engineering section. They tell us the sector is hot, which is a polite way of saying there are things that may try to finish the job. We thank them and keep moving, because thanking is easier than arguing, and arguing takes air. We have a finite supply, and we do not like to waste it on pride.

Engineering is a cathedral of broken things. The main turbine is split like a fruit, and the coolant pipes weep silver tears that freeze into lace on the walls. We find two patients here, tangled in a nest of harnesses and cables. One is dead, or close enough that we agree not to argue. The other is a woman with a helmet cracked down the middle, her eyes open and tracking us with a confusion that is almost polite. We introduce ourselves again, because introductions are the first step in convincing someone they are still part of the world. She says her name is Hessa, and she says it like it is a weapon she is not sure she knows how to use.

Hessa's suit has lost pressure, but not all at once. It is a slow leak, the kind that lets you think about air until air becomes a religion. We patch her helmet with a temporary seal that looks like a bandage on a forehead, and we promise her better soon. She laughs again, and this time I hear the sound of something breaking inside her, maybe in a good way. We float her onto the stretcher next to Rael, and we secure her with the same straps, and we tell her we will not let go. We do not know if we can keep that promise, but saying it makes our hands steadier.

We head back toward the umbilical with three patients and a sense of purpose that feels heavier than gravity used to. The dead cruiser shudders again, and I think it might be angry at us for intruding. We do not apologize. Apologies are for people who have time to regret. We clip our tethers tighter and move faster, because time is the one thing the vacuum does not give away for free. The umbilical welcomes us back with a hiss and a thump, and we float across the threshold like swimmers returning from a dark sea.

Back on *Kestrel's Mercy*, the medbay is ready for us, or as ready as it ever is. The

sterilizer rattles in approval, and the autodoc whines as it powers up. We float the stretchers into position and begin the work of undoing the damage we do not have time to undo. The patients are stripped of their suits, weighed down with blankets that are more for comfort than warmth, and hooked to monitors that speak in beeps and waves that tell stories we have learned to interpret. We check vitals, apply patches, and argue gently about who gets the next dose of painkiller, because there is never enough to go around.

Rael wakes up while we are cleaning his face, and he asks if he is still in the same war. We tell him yes, but we also tell him he is safe for now, and we do not know which part is the lie. He smiles, and the smile is crooked, but it is his. Hessa sleeps, her breathing even, and we cover her with a blanket that has seen more corners of this ship than we have. We note her injuries and file them in our minds, because the notes we write later never capture the whole truth. The truth is in the hands that steady, in the voices that calm, in the decisions we make without thinking and then have to live with.

When the work slows, we sit on the deck and let our legs dangle, because there is no up or down in medbay, only a shared sense of tired. The ship creaks around us, and the sterilizer clicks off, satisfied for the moment. We talk about food we have not eaten and places we have not seen, and we do not talk about the dead, because they are already here, listening in the pipes. We are medics, not priests, but we know how to keep a vigil when one is needed. We check the patients again, because checking is what we do, and we do it until the numbers tell us to stop.

Command will ask for a report soon, and we will give them numbers that look tidy, even though we know the mess inside. They will use those numbers to plan the next move, and they will not ask about the way Rael laughed or how Hessa's eyes tracked us like she was trying to memorize our faces. That is not their job. Our job is to keep the faces alive long enough for them to matter again. We do not know if we will succeed. We only know we will try, and we will try with the same stubborn decency that grows in inhospitable soil.

We are children of the vacuum, learning to be held by what could kill us, and to hold one another tighter still. The cruiser groans again, and we take it as a sign that we are all still here, still breathing, still patching leaks in the dark. Tomorrow there will be another breach, another alarm, another patient who refuses to be a number. We will meet them with gloves and gauze and a careful, practiced kindness. We will not promise miracles, but we will promise to stay until the math, for once, works in their favor.

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