

Epidemic Ethics: The Doctor's Dilemma

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Introduction

This book begins in a locked building and an unlocked question: what do we owe to one another when there is not enough to go around? In a city racked by an undead surge, a mega-hospital becomes both ark and arena, its hallways a geography of hope, fear, and calculation. Behind sealed glass and taped doors, choices were made at speed and under sirens; afterward, when the quarantine gates groaned open, those choices walked into daylight with the people who survived them. Now, in a courtroom

ringed by containment scanners and armed bailiffs in disposable gowns, the accounting begins.

At the center stands a physician-administrator—brilliant, exhausted, responsible—accused of playing god. The survivors who lost loved ones want a name for their grief and a shape to their rage. Prosecutors stitch together whiteboard algorithms and supply logs into a theory of intent. The defense reconstructs corridors, crash carts, and the rhythm of alarms to show what it meant to act when minutes were the unit of fate. Between them runs a thin strand of contested truth: the human cost of medical decision-making when the usual rules cannot hold.

Epidemic Ethics is a courtroom drama braided with flashbacks from the first weeks of the outbreak. It is also, unavoidably, a novel about triage. The language of ribbons and tags, of “immediate,” “delayed,” and “expectant,” is a vocabulary invented to save the most lives when the world is on fire. I have drawn on the architecture of real crisis standards—how oxygen is rationed, how ventilators are assigned, how staff are shielded or exposed—to render the pressure and precision of hospital life when scarcity becomes the air itself. The procedures and policies here are fictionalized, but the dilemmas are not.

This is not a puzzle with a clean solution. Triage asks us to weigh fairness against outcomes, duty against risk, and the sanctity of one life against the saving of many. It leaves what ethicists call moral residue: the ache that remains when all options are bad and one has to choose. In these pages, you will encounter administrators with clipboards and trembling hands, nurses who refuse to abandon a patient even when the protocol says to move on, families who bargain in whispers outside negative-pressure rooms, and a community that must decide whether to call courage heroism or hubris.

The structure alternates: the present-tense theater of trial—testimony, exhibits, cross-examinations—paired with the kinetic past of the first surge—code calls, resource counts, and the terrible arithmetic of nights where the sun refused to arrive. The courtroom demands perfect hindsight; the wards offered only partial foresight. Moving between them, the narrative asks you to hold two clocks at once: the one that ticks in seconds as a pulse thread thins, and the one that measures responsibility in years.

You are, in a sense, part of the jury. I will not tell you whom to condemn or absolve. Instead, I invite you to sit with the uncertainty that real clinicians and patients know too well: that in catastrophe we do not choose between good and bad, but between hard and harder. This is a story about an undead contagion, but it is more deeply about the living—about duty and fear, about the quiet audacity of care, about the line between policy and mercy. If it succeeds, it will leave you arguing with yourself long after the verdict is read.

Enter, then, the quarantined courthouse and the ward where the alarms never quite silence. Watch the witnesses reach back to the moment when their world narrowed to a bed number and a color-coded tag. Listen for what people say when they are out of time. And keep your own counsel as the evidence mounts, because in the end the only certainty is that the cost of choosing—and of not choosing—never leaves the room.

CHAPTER ONE: Quarantine of Justice

The courthouse smelled like hand sanitizer and fear.

Not the ordinary fear you find in any hall of law — the nervous cologne of defendants, the citrus-rind anxiety of lawyers flipping through last-minute notes. This was a deeper scent, animal and institutional, the smell of a building that had been sealed shut for six weeks and reopened like a tomb. The air handlers still weren't working right. They cycled with a low, asthmatic wheeze that made everyone speak a little louder than usual, as if the building itself were hard of hearing.

Judge Harold Maren sat behind a plexiglass partition that had been bolted to the bench overnight. He was seventy-one years old, lean and angular in the way of men who had outlived two wives and a kidney, and he surveyed his courtroom with the expression of someone who had been told this was necessary and was not yet convinced. On either side of the gallery, bailiffs in disposable isolation gowns stood with riot shotguns across their chests. Their gloves were double-layered. Their eyes were unreadable.

The gallery itself was two-thirds empty. Not because the public lacked interest — the livestream had over four hundred thousand concurrent viewers by nine in the morning — but because physical attendance required a containment wristband, a temperature scan, and a signed liability waiver. Most people had decided that watching from home, in the comfortable anonymity of their own terror, was preferable to sitting in a room that still had decontamination mist clinging to the baseboards.

There were exceptions, of course. There were always exceptions.

On the left side of the gallery, three rows back, sat a woman in a gray coat who had not once looked away from the defendant's table. Her name was Margaret Osei-Larbi, and her daughter Sade had died on the fourteenth night of the outbreak in Bay Four of Meridian General, after being reclassified from red to yellow on the triage board. Margaret did not know what that reclassification technically meant. She was not a physician. She was a seamstress from the Tenth District with strong hands and a voice that could fill a church. But she knew that her daughter had been breathing when the tag changed, and she knew that her daughter had stopped breathing six hours later,

and she knew that whoever changed that tag had made a decision about who deserved to live.

On the right side of the gallery, closer to the front, sat the people who agreed with that decision — or at least agreed it had been necessary. They were fewer in number but louder in posture. Shoulders back. Chins up. The bearing of people who had survived something and intended to be understood as victors, not witnesses.

Between these two groups, in the well of the courtroom, stood the defense table and the prosecution table, separated by the same distance as a hospital hallway — close enough to hear breathing, far enough to be someone else's problem.

Dr. Elaine Voss sat at the defense table with her hands flat on the surface in front of her, the way she had been trained to place them on a crash cart. She was sixty years old, compact and deliberate in her movements, with the kind of face that looked older in photographs than in person. Her dark hair was pulled back tightly. Her white coat — she had insisted on wearing it in court, and so far the judge had allowed it — was buttoned to the collar. She had not slept well in four days, but she did not look it. Sleep deprivation had been her baseline for the better part of two years now, and she had adapted the way certain animals adapt to altitude: quietly, and with a permanent redness in the eyes.

Her lead attorney, Marcus Tillman, stood and buttoned his jacket as the bailiff called the room to order. Tillman was a litigator, not a medical man. He liked to say that he had chosen the courtroom over the operating room because the patients were better dressed and the outcomes were easier to reverse. He had taken on Dr. Voss's case pro bono, which surprised people until they met her and realized that pro bono was the only arrangement that would make sense to someone who had spent forty years treating patients who could not pay.

Across the aisle, Prosecutor Sandra Ying was already on her feet. She was younger than Tillman by fifteen years and carried herself with the brisk authority of someone who had never lost a case she cared about. Her opening argument had been filed with the court two weeks prior — a forty-seven-page document that read like an indictment of triage itself — and copies were available in the gallery, though few had read past the executive summary before the courtroom tension made the fine print blur.

Judge Maren rapped his gavel once, a restrained gesture, as if he were afraid of breaking something.

"We are convened," he said. "The matter before this court is the case of the People versus Dr. Elaine Voss, Director of Meridian Regional Medical Center, charged with seventeen counts of criminally negligent homicide and one count of criminal conspiracy in the allocation of emergency medical resources during the declared

public health crisis. The defendant will rise."

Elaine rose. Her knees clicked. She hated when her knees did that — she had been a runner once, in another decade, in another life — but she stood straight and looked at the judge and did not sit until he told her to.

"You have been provided with an amended copy of the charges," the judge continued. "Do you understand them?"

"I do, Your Honor."

"And how does the defendant plead?"

Elaine glanced at Marcus. Marcus gave the faintest nod. She had been through this choreography before — not in a courtroom, but in the wards, where every admission was also a kind of plea and every diagnosis required someone to say the thing out loud and accept the weight of hearing it.

"Not guilty, Your Honor."

The gallery stirred. Margaret Osei-Larbi did not move. Her hands were in her lap, open, as if she had placed them there for someone to take inventory.

Judge Maren nodded slowly. "We will begin with the prosecution's opening statement. Ms. Ying, you may proceed."

Sandra Ying did not hurry. She had a gift for standing still that Elaine found almost offensive — the courtroom equivalent of a surgeon with steady hands, except Sandra's instrument was language. She buttoned her blazer, adjusted the microphone clip on her lapel, and looked out at the jury.

Six people. Four women, two men. A teacher, a retired electrician, an accountant, a bus driver, a college student, and a former soldier. They had been sequestered for the duration of the trial, which was projected to last six to eight weeks. They had been screened for exposure to the undead contagion — all negative — and they had been instructed in containment protocol by a public health officer who read the instructions aloud twice, slowly, as if she were reading bedtime instructions to children who might not sleep.

"Members of the jury," Sandra began, "Dr. Elaine Voss oversaw a hospital. Not a hospital the way you and I think of hospitals — not a place where you go to get better, where there are enough beds and enough medicine and enough time. By the fourteenth of March, Meridian General was no longer a hospital. It was a sealed container holding twelve hundred patients, three hundred staff members, and

dwindling supplies of everything that keeps a human being alive."

She paused and let the word *alive* sit in the air. She was good at this.

"What happened in those weeks was not medicine as any of us understand it. It was triage at a scale that our protocols were never designed to handle. And triage — real triage, the kind that happens when you cannot save everyone — requires someone to decide who will be saved and who will not. That someone, in this case, was Dr. Voss."

From the defense table, Elaine kept her face neutral. Marcus had told her — more than once, and with the patience of a man accustomed to losing arguments before winning them — that the worst thing she could do was react. So she sat and watched Sandra's mouth move and thought about the board.

The board.

Even now, sitting in this courtroom with the containment scanners humming at the door and bailiffs checking the air filters, Elaine could see it. The triage board. Twelve feet long, mounted on the wall outside the emergency department's east corridor, illuminated from behind by LEDs that cast a pale glow across the hallway like moonlight on water.

It had been a whiteboard — the kind you find in every hospital in the world, generic, forgettable. When things were normal, it was used for shift assignments and staffing updates. When things stopped being normal, it became the surface on which decisions were written in dry-erase marker that smelled like mint and evaporated by morning.

Red. Yellow. Green. Black.

Four colors. Four dispositions. The entire population of Meridian General reduced to the palette of a children's game, except the game was not about winning and there was no board to clear.

Red, if you were lucky, meant you were seen first. Yellow meant you could wait. Green meant you were ambulatory and could probably manage without a bed for a while. Black meant —

Black meant other things, depending on who wrote it and when.

Elaine closed her eyes. The courtroom around her continued its mechanical breathing — the shuffle of papers, the cough of a juror, the low thrum of the air system struggling to pressurize a room that had, until recently, been adjacent to a decontamination corridor.

Judge Maren glanced at the clock on the wall. It was an analog clock with a second hand that ticked audibly, and every tick sounded to Elaine like a pulse. She wondered, not for the first time, whether the prosecution had measured the room's acoustics and chosen this building specifically for that quality — the way sound carries, the way silence is impossible, the way every intake of breath from the gallery is audible to the person in the dock.

"The defendant," Sandra continued, "maintained authority over resource allocation throughout the crisis. She approved the triage protocols. She signed the memos. She authorized the removal of patients from ventilators to make those ventilators available to patients classified as — and I quote from Exhibit Fourteen — 'more likely to benefit from continued mechanical support.' She did this not once, not twice, but on forty-three documented occasions. The defense will tell you these were impossible choices. The prosecution will tell you that impossibility does not grant impunity."

The gallery was silent. Margaret Osei-Larbi's hands were still open in her lap, and Elaine realized, with a lurch of something she did not want to name, that Margaret was not looking at her anymore. She was looking at Sandra. She was listening to someone speak for her daughter.

Marcus stood for the defense. He was shorter than Sandra and broader, and he spoke with the unhurried cadence of a man who had learned long ago that the jury trusts the person who seems to be thinking as they speak, not the person who seems to be performing.

"Members of the jury, my client is a physician. She is not a politician, not a bureaucrat, not a strategist. She is a doctor who, when the world did what the world does — when it broke — stood in a hallway full of dying people and tried to hold the line. The charges against her are criminal charges, and they carry real weight. But the question this court must answer is not whether Dr. Voss made decisions. Decisions were made; that is not in dispute. The question is whether those decisions were criminal."

He paused and adjusted his glasses — a gesture Elaine recognized as his bridge between paragraphs, the way she herself used a breath between sentences when she was about to say something she knew would hurt.

"Triage is not a crime. Allocating scarce resources is not a crime. Making a choice between two lives when you cannot save both is the most human act a physician can perform, and it is also the most terrible. The prosecution would have you believe that there was a right answer — that somewhere in the chaos of those weeks, there was a path that would have saved everyone, and Dr. Voss chose not to take it. We will show you that path did not exist."

The jury watched him. One of them — the college student, second row, left side — had a notebook open. The others sat with their hands in their laps or on the armrests, holding themselves the way people hold themselves in waiting rooms, with the particular stillness of those who know the wait will be long.

Judge Maren looked at both attorneys. "Ms. Ying, Mr. Tillman, you are both aware that this trial will involve extensive testimony regarding events inside Meridian General during the quarantine period. The court has approved the use of reconstructed timelines and documentary evidence. I remind both sides that the standard is evidence, not emotion."

"Yes, Your Honor," they said in unison, and the word *unison* made it sound rehearsed, which it was, because everything in a trial is rehearsed, even the outrage.

And so it began.

Elaine did not look back as the first witness was called. She did not need to hear the name; she knew it already. Of course she did. It had to be Carlos.

Carlos Ríos had been the night-shift charge nurse in the emergency department during the first week. He was the one who had filed the internal complaint that triggered the investigation, the one who had gone to the health department with his clipboard full of notes and his face full of fury. The prosecution had called him as their second witness — after a senior resident who had already testified that the triage protocols were "applied inconsistently and without adequate patient evaluation," a characterization that Elaine knew, with clinical precision, was both true and misleading, the way most truths are when you pull them out of context.

Carlos took the stand with the posture of a man who had been rehearsing this moment for months. He was forty-three, broad-shouldered, with deep-set eyes and the calloused hands of someone who had done too many compressions on too many chests. He wore a suit that was one size too large, and it made him look like a boy playing authority.

"Sustained," the judge said to no one in particular, settling back into his chair.

And there it was — the first real crack in the floor of the courtroom, the first hint that beneath the procedure and the posturing and the containment scanners and the disposable gowns, there was something fractured that no one had agreed on how to name.

Elaine placed her hands flat on the table.

The trial had begun.

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