IN EVERY OPERATION THERE IS the briefest of moments when all surgeons are equals, a moment just before intent becomes action, permanent and irrevocable. If you want to observe that moment, you must watch closely. The gleam of the lights on the polished handle, the swooning curve of the steel, its diamond-sharpened edge poised just a hair’s breadth from the skin. The scalpel affects a slight downward tilt, fully exposing the belly of the blade. A second later there will be a line and after that, as the song goes, “scarlet billows start to spread.” But in between, there is a pause, a beat, a cerebral fermata the length of a breath. In this moment of reflection, four short lines penned by Emily Dickinson often came to mind:

Surgeons must be very careful
When they take the knife!
Underneath their fine incisions
Stirs the Culprit – Life!

Despite another song’s lyrics to the contrary, the first cut isn’t the deepest. Beneath our suit of skin lies fat and sinew, blood and bone, muscle and membrane. But the first cut is the most important, for it defines all the subsequent cuts. And the first cut is what marks both patient and surgeon – with a lifetime reminder on the body of the former; for the latter, it is a signature of sorts.

Thirty-something years ago, I was a young surgical resident. I can recall clearly the first time I stood on the surgeon’s side of the table at the start of an operation. I was not yet battle-tested, but I had the excitement of youth and the false bravado of inexperience. It wasn’t a big operation – just a simple appendectomy. The incision required would be only a few inches in length. And for the first time in my fledgling career, I would be the one to make it.

It was after hours, so only the operating room’s skeleton crew and a sleep-deprived nurse anesthetist were there to witness my mystical transition from assistant to operator. The abdomen was prepped and draped for me. The lights

THE CULPRIT:

Reflections on the BLEEDING EDGE

BY DANIEL JAMES WATERS

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