

Things I will never forget: my name, my made-up birthday, the rattle of a train in a tunnel. The sweet grit of toothpaste. The bitterness of coffee and blood. The dark of the Hospital at night. My mother's face, when she was young.

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Things other people will forget: where they come from, how old they are, the faces of the people they love. The right words for bowl and sunshine and sidewalk. What is a beginning and what is an end.

# BOOK I

In a place far away from anyone or anywhere, I  
drifted off for a moment.

—Haruki Murakami, *The Wind-Up Bird Chronicle*

# I.

On our third month in the Hospital, the pilgrims begin to appear. They gather outside the doors, faces tipped to the sky, while our Floor Group watches at the end of the fifth-floor hallway. The windows have bars on the outside and we have to tilt our heads to get a good view. Sometimes the pilgrims wave and we wave back. Or they hold hands and sing and we hear their voices through the glass. Some stand outside for hours, others for days. We don't understand what they could want from us.

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Early November and already the cold is descending across the plains. We can't go outside, but we hear about it on the Weather Channel and feel it on the windowpanes. We can tell from the pilgrims' clothing too, the way they come bundled in overcoats and scarves. The twins, Sam and Christopher, named the visitors, since the first one to turn up wore a black hat with a wide brim, like the pilgrims they learned about in school. I can remember

the way the twins grinned as they offered this fact, pleased by the strength of their memories.

For hours I stand by the fifth-floor window and watch the pilgrims pace in front of the Hospital or use sticks to draw circles in the dirt. It's like observing wildlife.

When the sky darkens and rain falls for three days straight, I go to Dr. Bek and make a case for letting the pilgrims inside. His office is on the sixth floor, a windowless room at the end of the hallway, furnished with two high-backed rolling chairs—Venn chairs, he says they're called—and a desk shaped like a half moon. We all choose our dungeons: this is a saying I've heard somewhere before, though I can't remember the source, a nibble of worry. The one personal touch is a poster of massive gray cliffs, fog-dusted peaks, ridges veined with snow, on the wall behind Dr. Bek's desk. It's the Troll Wall in Norway, where he was born.

In Norway, there are half a million lakes. In Norway, the cheese is brown. In Norway, the paper clip was invented. These are the things Dr. Bek has told us.

Me, I know nothing of Norway. I used to live in Somerville, Massachusetts, on a narrow street with no trees.

Dr. Bek types at his desk. Manila files are stacked next to his computer. I look at the folders and try to imagine what's inside: our case histories, the results of our blood work, all the ways he is trying to find a cure. Dr. Bek is fair and tall, his posture stooped inside his silver hazmat suit, as though he's forever ducking under a low doorway. Behind the shield, his eyes are a cool blue, his cheekbones high and sharp. When he's angry, his face looks like it has been chiseled from a fine grade of stone.

The Hospital staff guards against the sickness with Level A hazmat suits, chemical-resistant boots and gloves, and decontamination showers before entering their quarters on the second floor. They need these precautions because they aren't special,

like the patients are thought to be. When we came to the Hospital, our possessions were locked away in basement storage. “Why does our stuff have to stay in the basement?” some patients demanded to know, and Dr. Bek explained it was all part of releasing the outside world for a time, of releasing a life that no longer belonged to us.

Each patient was given a pair of white slippers and four sets of scrubs, two white and two mint green. Louis, my roommate, and I avoid wearing the white ones as much as possible, agreeing they make us look like ghosts.

All the patients have been assigned weekly appointments with Dr. Bek, to make sure our feelings don’t stay in hiding. When our feelings stay in hiding, bad things can happen, or so we’ve been told.

I have no talent for following rules. I ignore my appointed times. I only go to his office when I have questions.

I sit across from Dr. Bek and tell him two pilgrims have been standing in the rain for days. They’re shivering and sleeping on the ground.

“They could get pneumonia and die,” I say. “Why can’t we let them inside?”

“Joy, I take no pleasure in their struggle.” Dr. Bek keeps typing. Every breath is a long rasp. The sound is worse than nails on a chalkboard or a person running out of air. “But we can’t let them in. After all, how can we know where these people came from? What they want? What they might be carrying inside them?”

Disease is as old as life itself, Dr. Bek is fond of pointing out. An adversary that cannot be underestimated. For example, when cacao farming peaked in Brazil, mounds of pods amassed in the countryside, gathering just enough rainwater to create a breeding ground for the biting midge. From this slight ecological shift came an outbreak of Oropouche, or Brazilian hemorrhagic fever.

According to Dr. Bek, it only takes the smallest change to turn our lives inside out.

“It’s my job to see danger where you, a patient, cannot.” He stops typing and opens the folder at the top of the stack. I watch his eyes collect the information inside. “To protect you from the flaws in your judgment.”

Dr. Bek is a widower, but not because of the sickness. His wife died many years ago, or at least that’s what I’ve overheard from the nurses, who sometimes talk about him when they think they’re alone. Dr. Bek tells us little about his life beyond the Hospital walls.

As for the pilgrims, I have no argument—there is plenty of evidence to suggest flaws in my judgment—so I leave his office. Already our group of one hundred and fifty has dwindled to seventy-five. During the first month alone, a dozen patients became symptomatic and were sent to the tenth floor. We didn’t see them again.

Still, I feel a pain in my chest when I look out the window and find a pilgrim balled on the ground, his body pulsing from the cold. Before the rain, this man was pacing, and then, out of nowhere, he did one perfect cartwheel. I wish I had a way to talk to him, to ask why he came, to tell him no one is going to help him here. I don’t think it’s right to watch these people suffer, even if it’s a suffering they have chosen.

Finally the rain lightens and the man scrambles to his feet. He stares up at the Hospital for a long time, and I wonder if he can see me watching. What kind of person he thinks I am. He turns from the window and staggers away. Another pilgrim calls after him, but he doesn’t look back. It’s still drizzling. The sky is charcoal and goes on forever. I watch his silhouette grow smaller, until he is just a speck on the edges of the land. We the patients are always dreaming about being released from the Hospital.

Sometimes it's all I can think about, the outdoor air rushing into my lungs, the light on my face, but I don't envy that man then.

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The Hospital is ten stories high, plus the basement. The patients live on floors two through six. Each of us is assigned a Floor Group; each Group is staffed by two nurses. Louis and I belong to Group five. All floors amass for Community Meetings and activities and meals, but otherwise the Groups have a way of sticking together.

I call the basement the zero floor. On the zero floor, there is a door with a triangle of glass in the center, a small window to the outside, and beneath it the faint green glow of a security keypad. Floors seven through nine sit empty. All elevator service has been suspended. You can punch the round buttons, but nothing will happen. Dr. Bek believes in the importance of exercise, so the patients have free passage to the other floors by going through the stairwells, except the first floor, where the staff lives, and the tenth floor, where the sick patients go—both are forbidden to us, also guarded by keypads.

The Dining Hall has a keypad too, but the staff allows those doors to stay open. Whenever possible, they like to create the illusion of freedom.

In the beginning, there were thirty patients on each floor. Now, after three months, no floor has more than fifteen. But the staffing has not changed. There are still ten nurses and Dr. Bek. "Way to lighten your workload!" Louis and I sometimes joke, because laughter makes us feel brave. In the end, the patients might be outnumbered.

An incomplete list of the rules: each Floor Group has a job within the Hospital. The Common Room is located on floor

five and it is the job of our Floor Group to keep that space neat and clean. Floor Group three is in charge of the library. Every other week, Group two rounds up patient laundry in canvas rolling carts. After meals, Groups four and six collect trash, stack the red plastic trays, and wipe the warm insides of the microwaves and the stainless steel buffet tables. The surfaces of the tables are dull, but sometimes I catch a smudged reflection as I move through the food line and think, Who is that face? Each floor is responsible for keeping their own hallway in order. “A busy mind is a healthy mind,” Dr. Bek likes to say.

In the Hospital, there are no razors in the showers, just miniature bars of white soap that melt between fingertips, slip down drains. In the Hospital, there is nothing to drink but water. The plastic chairs in the Dining Hall are the color of tangerines. In the Hospital, we celebrate every patient birthday, knowing full well that it might be their last. In the Hospital, our meals come frozen in black trays, the plastic coverings fringed with ice, and we wait in line to heat them in the large humming microwaves. In the Hospital, there is no such thing as mail.

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Before long the other patients lose interest in pilgrim spotting and go back to rummaging through the books in the Hospital library or watching TV in the Common Room or trying to sneak into the Computer Room on the fourth floor, yet another keypadded space, to check [WeAreSorryForYourLoss.com](http://WeAreSorryForYourLoss.com), a government-maintained list of people reported dead from the sickness. We have supervised Internet Sessions every Wednesday and Friday, though of course we always want more.

When breakfast ends each morning, I stand on an orange chair and look out the Dining Hall windows. I turn my back on



the maze of long tables, the clatter of the Groups stacking trays. The Dining Hall is on the fifth floor; the bars on the windows are thick as arms. I peer between them, searching for pilgrims. Sometimes it's the same people. Or a new one has arrived. Or there are no pilgrims at all, just a scattering of footprints in the brown soil.

I spend a lot of time thinking about why the pilgrims started coming here, how they even found us. The easy answer is that they think this is a safe place, that we might have a cure, but that reasoning has never satisfied me. I do much of this thinking in the library, sitting between the squat bookcases filled with dictionaries and encyclopedias, plus books on space travel and the Mayan empire and dinosaurs. Dr. Bek believes that even though our bodies are confined to the Hospital, there is no reason to limit our minds.

I think about how devoted the pilgrims seem, the way they stand out there in all kinds of weather, staring up at the windows. They don't bang on the doors and shout to be let inside; they don't demand to be included in our secrets. They just wait. Dr. Bek is always reminding us of our specialness. Do the pilgrims know we're special too?

For a while, the library is the space I like best. All the patient quarters are white-walled rooms with white twin beds and white rolling medicine cabinets—other things in the Hospital that are white: the sheets, the pillows, the hazmat suits of the nurses, the flimsy shower curtains, the towels that scratch our skin—and so the walnut bookcases and the round olive-colored rug make the library feel special, a portal to a place that is separate from the rest of the Hospital.

When I start reading about the dinosaurs and the Mayans, however, the things I learn disturb me. For example, the book on the dinosaurs is not about how big and magnificent they were, but about why they all died. There is no agreement on what happened. An asteroid, continental drift, an epidemic. In the book

about the Mayans, the author says they were wiped out by a plague, that every so often “incurables” appear and civilizations are reset. When I discuss my findings with Dr. Bek, he says the sickness is not the result of some cosmic reordering. Rather it’s the simple truth that the smallest alteration can create the perfect atmosphere for a new disease to emerge. “The world is a very fragile place,” he tells me, another favorite line of his.

I’ve grown up knowing the world is fragile. No one needs to tell me that.

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I stretch out in a hallway. I’ve been walking the Hospital for so many hours, I’ve forgotten what floor I’m on. I only know that I can’t keep moving. I lie on my back, my arms pressed against my sides, and feel the cool on my spine. On the patient floors, the hallways are identical: long and white and fluorescent-lit, with an arched, barred window at one end. I think of the different Floor Groups standing at their window and watching the pilgrims at the same time, all of us mirrors of each other.

I gaze up at the lights and feel the burn in my corneas. I wonder how long I would have to look into them before I went blind. I feel the brightness in my cheekbones and inside my mouth. I feel it sinking into my skull. The floor stays empty. I begin to think no one will ever find me here. That I can lie like this forever, still and filled with light.

The voice brings me out. None of the patients have ever seen the Pathologist, but every day his voice crackles over the wall speakers. I sit up and rub my eyes, imagining a man alone in a room on the tenth floor, whispering into a machine. Sometimes he has practical things to say, like an announcement about meals, and sometimes he just talks to us.

Today he tells us what good patients we are. Meditations,

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these are called, even though I've always been under the impression that meditating is something you're supposed to do in silence. REPEAT AFTER ME: YOU ARE WELL, YOU HAVE ALWAYS BEEN WELL, YOU WILL ALWAYS BE WELL. He says we're doing everything right. All we need to do now is keep breathing.