

## The Door Within

I sat in the hospital cafeteria one sweltering July day, picking at the beige food on my lunch tray, trying to decide if it, or the heat, caused my lack of appetite. The air conditioning had gone on the fritz for the umpteenth time, prompting one of those obsequious, conciliatory, annoying memos as to how the maintenance staff had been doing their utmost to remedy the situation and, with any luck, the a/c should be operational by the end of the decade. I found it incredible that one of the most highly respected medical centers, housing the finest neurological group in the country—and with a giant backup generator to handle emergencies—could be so helpless when confronted by a cranky chiller unit.

Large fans had been set up in the cavernous cafeteria to move the humid air around, their presence largely psychological, for they achieved little more than create the impression that we worked on the swing shift of some B-29 engine factory during World War II. As I sat there, contemplating the wonders of technology and my sweat-soaked dress shirt, Frank literally walked into my life.

∞β∞

“Excuse me. Do you mind if I sit here?” he asked, holding a tray of the same beige food on mine.

I looked up from my rapidly decomposing lunch to find one of the hospital residents addressing me. In spite of the heat, he looked like he just stepped out of an ad in some medical journal, his hospital coat so blazingly white and crisp it hurt my eyes. His trousers had such sharp creases it looked like he spent his entire life standing. Even his name badge looked ironed. He wore rimless glasses, perched atop a cherubic nose; his short, dark-brown hair parted with mathematical precision on the left side of his head. He had a youthful, yet nondescript, open face, one you could forget five minutes after having met him. The name on his badge announced, Doctor Frank Marsteen – Neurology.

“No. Not at all,” I replied, noting that the room had two dozen empty tables.

“Why, thank you,” he said, putting down his tray and extending his hand. “My name’s Frank Marsteen.”

I shook his hand, surprised at the dry, firm grip, not missing the absence of “Doctor” when he gave his name. It caused me to lose a little of my natural reserve. “Yeah, I kind of caught that on your name tag. Mine’s Jim.” I offered, deliberately leaving out my last name and nodding toward my own nametag. I did want to maintain *some* of my natural reserve.

“Duh, that was dumb of me. Sure is uncomfortably warm, isn’t it?” Frank offered, looking as discomfited by the heat as an Eskimo in Nome, Alaska.

“Yeah,” I said tactfully, rising from my seat. “This heat’s killed my appetite, so I guess I’ll be moving along and leave you to your lunch. Enjoy.”

“Oh, dear. I hope I haven’t chased you off,” Frank said, a touch of a frown creasing his high, clear forehead.

“Nah, I’m just out of sorts today.”

“Actually, I was hoping to talk with you for a few moments,” Frank said, looking directly into my eyes and then nervously dropping his gaze to his tray. “I don’t really know anybody in this hospital, having just arrived last week.”

I don’t know if his openness or his reaching out for friendship won me over and made me sit down again, but I did and we started up a conversation. We got past the preliminaries. Frank

told me he had just graduated medical school at eighteen, the youngest in his graduating class. Big surprise there. They offered him a residency at our hospital three years ago, because of his desire to specialize in the field of neurology. I could tell he had a passion for research in that area the minute he started explaining his chosen field. Most of what he said went way over my neurological repository, a.k.a. my head, and I said as much.

“All this is quite fascinating, Frank, but I’m just a lowly radiologist. I take pictures of peoples’ skulls. I know very little of what goes on inside them.”

“I’m sorry I bored you with technical jargon, but I chose to speak with you for a specific reason.”

He had my attention, so I made it clear to him. “Huh?”

“What I’m going to tell you next is something I don’t wish to share with my colleagues just yet. I made the mistake of voicing my long-held theories in medical school and nearly got laughed out of the place; it took months for it to blow over. Highly educated minds can often be closed minds. However, I need someone other than myself to bounce my ideas off. That person doesn’t have to be a specialist. In fact, the less you know about the subject the better. So ... are you game, Jim?”

As I indicated earlier, Frank is one of those guys you like right from the get-go. “Okay, this sounds a little weird, but I’ll go along.”

Frank’s face lit up. “Very good! Thank you, Jim.” He reached into his lab coat and took out a micro recorder. “I’m going to record each of our conversations, so I can keep a running record as we go. You don’t mind, do you Jim?”

At this point, I couldn’t be sure if I minded or not, but I shook my head. Frank turned on the recorder and began.

“This is tape number one. I am speaking with Jim ...” He hit the pause button. “Could I have your last name? I can’t just call you Jim.”

“The last name’s Semkowski.” I replied, pointing to my nametag.

Frank hit the play button and continued. “... Semkowski, a radiologist here at the Medical Center. The time is 12:35, July 17th.” He looked up at me. “You see, Jim, I have this theory that we live adjacent to parallel worlds, or universes. Actually, we are closest only to one, but that’s irrelevant at the moment. I also believe that the border between these worlds is not absolute, that there are times when we can catch a glimpse of ‘the other side.’ All of us experience this phenomenon at certain times. I call it my ‘two percent’ rule. In other words, all of us are actually a little bit in touch at all times. I’m sure you’ve heard someone say that he or she occasionally seems to be out of sync with the rest of the world. I believe that, during those times, they are expressing the fact that they are more in tune with the ‘other side’ than usual.

“Have you ever been in a room by yourself and caught a movement out of the corner of your eye?” I nodded, my interest hovering between piqued and peeved. “Jim, this is a voice recording. Please voice your reply.”

“Yeah, I have ... at times.”

“Good. Well, you know you’re alone, but you could swear that you just saw something move. Again, I feel that at those times we are experiencing a glimpse of that adjacent universe. The same with déjà vu. Perhaps we experience it because we’ve seen the edge of that alternate universe.

“There are some people who are more in tune than others. The Eastern mystics have always been noted for the unusual abilities they’ve developed. Then, there are those people with

autism. It is something we know so little about, really. Children and adults with this so-called dysfunction are characteristically withdrawn from the rest of society. How about the phenomenon we call a coma? Doctors theorize that it's the body's way to heal, but they really don't understand why it is we lapse into them. It's my belief that a person in a coma may actually be much more in touch with the other side than with our world.

"In our day-to-day experience, there's the common phenomenon we know as sleep. It's probably the closest we come to a coma every day. Scientists who have studied sleep have come to the conclusion that it's not the body that needs sleep, but the mind. So little is known, really. Perhaps when we sleep, our minds are exploring the boundary between worlds. When you think of the dreams you remember, where you're flying, or doing other impossible things, did you ever stop to consider that you didn't just *dream* them, but really *did* those things in another reality?"

"Uh, I don't want to disappoint you, but, no."

Frank fell silent. For a moment, he just sat there, lost in thought. Then, as if snapping out of a trance, he looked at me and said, "Well Jim, I guess I've bent your ear enough for today. Thank you for listening. We'll get together again soon." With that, he stood up, lifted his tray and left the cafeteria, carrying his still uneaten lunch.

∞β∞

A couple of weeks later, Frank spotted me in the cafeteria and came to my table. "Hello, Jim. Sorry I've been so delinquent in seeing you. Could you come with me for a few minutes? I've got something I'd like to show you."

One of the things about Frank; he had this direct way about him, as if he had a pathological fear of small talk. Without preamble, he would state his intentions and expect people to fall in step with him. Since our first conversation, I had done a lot of thinking about his theory. I had even taken some books about sleep studies out of the hospital library and I admit he had me hooked by that time, so I followed him.

We arrived at his room, one of those 2 x 4 monk's cells, not much more than a bed and a writing desk the hospital provides for new residents, so they'll be readily available when on call. He had packed the room with so much equipment that I wondered how he managed to fit his bed inside. I recognized a camera, recording equipment and an EEG machine. The rest of the stuff looked too specialized for easy identification on my part.

Frank explained that he had set up the equipment to record the studies involving his theory; I suppose his way of showing me his seriousness and that our earlier conversation hadn't merely been the ravings of a crackpot. He showed me to what use he put each piece of equipment. I have to admit that the whole project fascinated me and it had mollified my initial skepticism.

After the guided tour, Frank told me he had to be going, promised not to be so long in seeing me again, and left me in the hallway in front of his room, slightly stunned and more confused than ever.

∞β∞

Three weeks later, I saw Frank again. He came into the cafeteria and walked over to where I sat. He had lost some of his trademark crisp appearance. His eyes appeared sunken and bloodshot, his part no longer millimeter-perfect. In short, he looked frayed around the edges. He sat down, took out his recorder, set it on record, and began talking.

"I've been making progress with my theory, Jim. I feel I have been able to increase my daily contact with the other side, push at the envelope, so to speak. I've been reading all I can about sleep studies. Did you know it's possible to control dreams? I've tried it and I found it works. It's possible to affect the course of events in a dream. You should try it yourself. I could show you how."

"Uh, pardon me for interrupting, but you look a bit wiped," I observed.

"That's not important," he said, waving his hand dismissively. "Anyway, this fact confirms my theory. The fact that you can change the course of events while dreaming is akin to the interaction we have with events in this world. After all, what's the difference? Something occurs and we react to it, or we make a proactive move and alter the situation.

"I've also been studying the research on death and dying done by Doctor Kubler-Ross. She's convinced there is an afterlife, that her studies have led her to that irrevocable conclusion. I tend to agree with her, only I think that the afterlife she refers to is the parallel universe. Think of it Jim! The thing we are all so afraid of is merely the gateway into another universe!"

I couldn't help but think that every religion in the world believed the same thing. "It all sounds quite interesting," I said lamely, wanting to give some sort of verbal response.

"It's more than interesting, it's revolutionary!" he responded emphatically, a fire of genius, or madness, in his eyes. I couldn't decide which ... maybe a little of both.

With that, he stood and made to leave, but he paused and turned back to face me.

"Oh, I almost forgot." He reached into his pants pocket and withdrew a small key. "This is the key to my personal file cabinet. I want you to have this copy, if, for some reason, it becomes necessary."

"But, Frank, I ..."

His earnest gaze silenced my protest. "You've been a good friend, Jim. I want you to remember that. Thanks." That said, he turned and stalked out of the cafeteria.

Though I didn't know it then, it would be the last time I saw Frank.

∞β∞

"Excuse me, Mr. Semkowski," a voice from behind me said.

I turned from the X-ray machine, where I worked at setting up for a cervical shot, and stood face-to-face with one of the staff neurologists.

"How can I help you, Doctor ..." I looked at his name badge, "... Stelson?"

"Did you have conversations with a resident named Doctor Frank Marsteen?"

"We've talked some." I answered, wondering at his interest in our relationship.

"I believe he gave you a key to his files?"

My jaw dropped in surprise. "Yes, he did. Why?"

I could see the good doctor steel himself to be patient with me. "Could we go somewhere and talk?" he asked.

"I guess so, as soon as I finish with this patient's X-rays."

Fifteen minutes later, I sat in Doctor Stelson's office. He sat behind his desk and another neurologist, a good-looking woman named Doctor Pamela Brown sat perched on one corner of his desk. By her appearance, she seemed all business.

"Doctor Marsteen was assigned to our section, Mister Semkowski," Doctor Brown said. "When was the last time you saw him?"

"About two weeks ago. Why?"

"Did he seem okay to you?"

“That depends on what you mean by okay. If you knew Frank, you’d know what that implies.”

Doctor Brown smiled, making her look less professional, something she badly needed. “Yes, I know what you mean. Let me rephrase. Did Frank seem to be himself?”

“Come to think of it, he looked a little haggard, like he’d been losing sleep, or something. I chalked it up to the project he was working on. He seemed like the type to get caught up in his work and lose track of the time.”

“Was that when he gave you the key?”

“Yes. Now, wait a minute. This is the second time you mentioned that damned key. Would you mind explaining to me what’s going on here?”

She looked at Doctor Stelson and he nodded. “I see no reason not to,” he said to her.

Doctor Brown turned back to me and went on. “Six days ago Doctor Marsteen died.”

I nearly fell out of my chair.

“When he failed to show up for his duties for a second day, we searched and found him in his room. We have listened to his tapes, including the two sections he made with you. That’s how we knew about the key. Of course, we knew about his theories, but we had no idea he was pursuing them so diligently. As with many gifted people, we attributed his studies to the usual eccentricities of genius and, Mister Semkowski, Doctor Marsteen was exceptionally gifted. We were glad to have a man of his caliber at our facility.”

I had recovered somewhat, so I spoke. “He was only twenty-one for crissake! What did he die from?”

“We could attribute his death to heart failure, but, the truth is, we can find no physiological reason.”

“You mean you don’t know?”

“That is correct,” Doctor Brown admitted, pained by that very admission. “We contacted you because you seem to have the only key to his files. We would like you to give us the key so we can see his files and perhaps ascertain the specifics of his death.”

“Why not just break the lock, or get a locksmith?”

“Doctor Marsteen obviously put a great deal of stock in his friendship with you and we felt we owed it to you. We now feel we should have notified you sooner, before he died. Even with all the hospital’s resources, we couldn’t save him.”

“Wait a minute. I thought you said you found him dead in his room.”

“I’m sorry. Perhaps I failed to make it clear to you earlier. When we found him in his room, he was in a coma. We placed him in Intensive Care and, since he showed no cognitive brain activity, we withdrew life support and he died three days later.”

∞β∞

Saddened by Frank Marsteen’s death, I mulled over his passing, and what he had divulged to me, all the next week. When he went into that coma, did it mean he had completed his transition to the parallel universe? Did it mean his body, bereft of his mind and soul, simply stopped and why he died when off life support?

Had Frank gone ‘round the bend, acting as crazy as a loon? Did I qualify for the club by actually giving his theories credence? All I know is that I’ll miss his serious demeanor and wide-eyed wonder at the mysteries of the universe. I’ll also wonder, for the rest of my life, if all of what he told me actually existed. Did the doctors fail him by taking him off life support? If

they had kept him on, could he have crossed back? For that matter, could that be the case with all comatose patients on life support?

I honestly hope he had it right and made a successful transition.