

## The School Project

It had been a long hard day at work.

As I pulled into the driveway I couldn't help but to be thankful that my workday was now over. I was home and could finally relax.

"How was your day at work honey?" she said as she greeted me at the door she planted a very passionate kiss upon me. This was certainly not the greeting that I was used to receiving from my wife, but I definitely had no complaints about it.

"Oh, the usual." I replied, not even wanting to recall the rigors of the day.

I couldn't help noticing her friend Amy slowly approaching from behind my wife.

Amy carried a glass of wine in her hand.

My wife and I have a wonderful loving relationship, but Amy is definitely my favorite of all of her friends. She is a voluptuous young woman who always stirs my imagination if not my fantasies. Not only is she physically attractive, she also possesses a wonderful personality. Most often she is somewhat quiet and reserved, but when it seems appropriate she can also be effervescent and outgoing. If I hadn't loved my wife so much, Amy would definitely have been in my sights as a conquest.

"Why don't you go upstairs and relax in a nice warm bath. I've already prepared one for you," my wife suggested as she snuggled up against me in a very passionate and suggestive way.

Amy silently proffered the glass of wine to me while flashing me a Mona Lisa like smile.

"Amy and I are going to be needing some help with our school work, and maybe you can help us with it when you come back down." My wife continued.

"I've laid out some clothes for you to change into when you're finished with

your bath." My wife cryptically added almost as a side note.

Both my wife and Amy attend the local college as nursing students. I am often asked to help with their homework. I try to be supportive, and really don't mind lending a hand on occasion. The worst part is the words they use. Medical people often don't speak like normal people, but have a language all their own. For example, we normal people would call a disease or an ailment that we had acquired in a hospital just another disease or ailment. Medical people would call a "nosocomial" disease or ailment.

What kind of normal person gets a 'Nosocomial disease'? You simply catch a regular disease while you're in a hospital for some other treatment or ailment. A cold is a cold, why give it a different name because of where you caught it?

At times when I'm helping my wife with her vocabulary I find it difficult just trying to pronounce the words well enough that she can recognize them.

Although I have to admit at other times her studies are interesting even to someone like me.

I returned Amy's smile, silently thanking her for the wine, while giving my wife another hug and kiss before heading upstairs.

The bath that awaited me was indeed warm and relaxing. It turned out to be a bubble bath, scented with bath oils. The bathroom had been illuminated by a number of candles, which surrounded the tub, sink, and almost anyplace one could safely place a candle. 'Strange' I thought. It all seemed to have a very feminine touch, but why question a good thing?

The trials and tribulations of the day seemed to melt and wash away as I relaxed in the warm sudsy water and sipped the wine.

All too soon it seemed time had passed. The wine was gone (It seemed to have evaporated), and the bath began to cool. I reluctantly hefted myself out of the tub.

As promised there was indeed a pile of clothing awaiting me.

With such a feminine bath and surroundings I almost feared that there would

be a dress, or some other feminine garment waiting for me to put on.

What had been provided for me was a pale blue hospital gown. Not one of the old fashioned cloth ones that tie in the back and lets your ass hang out, but one of the more modern sort, made of disposable fabric like paper that look almost like hospital 'scrubs' and consist of pants and a shirt. There was also a pair of disposable hospital slippers in the pile.

'This is definitely rather curious' I thought.

Shrugging it off, I figured that the women were really getting into the hospital type-nursing thing and, while feeling a little strange, I figured that I would play along donning the clothes that had been left for me.

Somewhat strangely dressed as I was, I headed downstairs to see what the women were up to.

As I descended the stairs Amy greeted me.

Amy too was now dressed in hospital scrubs, and was generally attired, as you would expect a hospital nurse to be. She wore a pair of glasses and carried a clipboard. A stethoscope dangled from her neck.

"Ah, Mr. Jones. You're right on time." She said.

She glanced at the clipboard she had carried in the crook of her arm as she spoke.

I have to admit that I was caught somewhat off guard, and wasn't quite sure how to respond.

"Please come this way, and have a seat over here." Amy continued.

She indicated a chair at the dining room table, which had been turned ninety degrees from the table, and now faced the seat at the head of the table.

I sat in the chair, which she had indicated.

"I need to get your vital signs", she said as she shoved a thermometer into my

mouth, and sat in the seat at the head of the table.

She gently took my left arm and wrapped a sphygmomanometer (Blood pressure) cuff around the upper portion of the arm.

When she had finished taking my blood pressure, she removed the thermometer from my mouth and glanced at it's reading, recording both numbers on what appeared to be my chart on her clipboard.

She then rose and approached me in a clinical manner. She was holding her stethoscope, and it was obvious that she intended to study whatever noises my body was making internally.

She listened intently to several locations on my stomach, chest and back before returning to her seat and making a few more notes on my chart.

Amy then produced a knee percussor, which she used to bang on both of my knees to test my reflexes. Again when she was done she made some notes on my chart.

Next she retrieved an otoscope (Sometimes called an auriscope, a small flashlight that the doctor uses to look inside your ears), which had been lying on the table. She looked into both of my ears, up my nose, and grabbing a tongue depressor, she looked in my mouth, and down my throat with the familiar "Say Ahhh" command. She then had me follow the light with my eyes, without moving my head, as she moved it up, down, right, and left. Finally she moved very close to me and looked directly into each eye as she shone the light directly into them, probably checking my optic nerves.

When she had finished she added more notes to my chart on her clipboard.

As she once again took her seat she began to ask questions about any medications that I take, any allergies that I might have, what exercise I get, and my dietary habits. She specifically asked about my lunch.

Amy seemed very pleased to hear that I had been busy, and due to circumstances beyond my control I had missed lunch today.

She also asked about bowel movements.

She made notes on everything that I had to say.

All rather in depth and personal, I thought, but nevertheless she was doing it quite seriously in a very professional manner and I was happy to play along with her game.

Once she was finished with her questions Amy studiously examined my chart.

After what seemed to be a few minutes she slowly, somberly shook her and gave me what can only be described as a sad look. There might even have been the beginning of a tear in the corner of her eye.

"I'm going to show this to your doctor, Doctor Smith" she said. "I'll be back shortly."

I remained in my seat at the dining room table, while Amy wandered into the living room and conferred with my wife who was seated on the couch and was busy removing and arranging a number of small packages from a rather large cardboard box that sat on the floor in front of her.

It became clear to me that what I saw as my home, Amy was certainly seeing as a medical office, or perhaps even a hospital. I wasn't sitting at a dining room table, but in a chair in an exam room. There also were imaginary walls in appropriate places. I was certainly not supposed to be able to see into the treatment room, which I saw as my living room. I began to get a better concept of what this game we were playing was.

The two women talked for a short time before Amy returned.

Once again Amy gave me a somber, almost pitiful look.

"Doctor Smith has reviewed your chart." She informed me.

"He thinks that you might possibly have a good prognosis if we begin treatment immediately." She seemed to have stressed the 'Might' and 'Immediately' as though I were doomed if this advice wasn't urgently and fully heeded.

I did note that Nurse Amy had not specified just what my ailment was.

Nor did she make any reference as to what this treatment might consist of.

Her voice was grave and serious. I couldn't help but to hope to be cured by immediately following to the letter, any suggestion for treatment that she might offer.

With such a lovely and sincere young lady offering what sounded like my last vestiges of salvation, how could I even question such trivial matters as the nature of my affliction, and the type of treatment?

I still wasn't sure where all of this was headed, but I was sure that if Amy's nursing skills were only half as good as her acting skills she would surely make a wonderful and highly skilled nurse.

"Please follow me into the treatment room" Amy commanded.

I rose from my seat and followed Amy into the living room.

The carpet had been covered with a tarpaulin, which covered most of the exposed carpet in the center of the room.

A chaise-lounge (Patio furniture) had been placed in the center of the tarpaulin.

Amy indicated that I was to have a seat on the chaise-lounge.

"This is Nurse Suzanne", Amy introduced me to my wife.

Of course, this was a totally unnecessary gesture, but nevertheless, clearly a necessary part of the act being portrayed, so I played along.

"She will be assisting with your treatment today." Amy informed me.

Without much more ado each of the women quickly donned a pair of rubber surgical gloves. This would prove to be the standard fare for their work from then on.

Each of the women moved, and sat on a stool to the side of me, Amy to my right, Nurse Suzanne (My wife) to the left.

Each of the nurses gently took an arm and began bandaging it in thick soft cotton batting bandages.

They began at the fingers, bandaging each finger individually, and then once again the whole hand in general.

When they finished with my hands they graduated to a wider bandage material and proceeded up my arms. Eventually they reached my shoulders with the bandages.

The short sleeves of the hospital gown shirt proved to be no deterrent to their progress at all, as they simply removed the sleeves with their bandage scissors. I began to realize why, and was thankful that they had provided the disposable hospital gown rather than let me dress in my own clothing.

Thinking back on this, I'm sure that if I had chosen to wear my best suit, it would have ended up in tattered pieces on the floor just as the disposable hospital gown did.

Nurse Suzanne then instructed me to place my arms across my chest with my forearms crossed, and each of my hands wrapped around the opposite elbow. As she did this, Nurse Amy too silently pantomimed the position I was to place my arms into.

Once I had my arms properly in position Nurse Suzanne proceeded to wrap both arms together with more gauze bandage.

While Nurse Suzanne was busy with that task, Nurse Amy was busy elsewhere.

Nurse Suzanne quickly finished her task, and it seemed that before I knew what was happening both of the nurses each had a role of new material, with which they were wrapping my arms.

It quickly became obvious that the new material consisted of rolls of fiberglass casting bandage! My arms were being bound (casted) together as one, crossed

over my chest.

The women worked well together, each seeming to know just what she was to do, as well as what the other was doing. In almost no time at all both of my arms were bound together as one in a rapidly hardening fiberglass cast which bound both arms together, and reached fully up to my shoulders.

It struck me that unless this cast was removed, the task of brushing my teeth before going to bed tonight might present a rather unique challenge!

The nurses admonished me not to move or change my position while the cast solidified.

The fiberglass bandage hardened surprisingly quickly, forming a rather solid layer of casting material, which held my hands and arms rigidly in position.

It soon became clear that I wouldn't be able to free myself of this without the aid of the women. It also became clear that what I was falling victim to was really a matter of leverage. The cast was solid and strong enough, but under normal circumstances I should have easily been able to overcome it's grip. The problem was I had no real freedom of movement, and thus no leverage. This, what should have been rather thin and weak layer of fiberglass was easily holding me captive. I would now clearly be totally dependant on the women to regain my freedom.

Once they had finished casting my arms together the women proceeded with other preparations. Soon they were encouraging me to move my body down to sit at the foot end of the chase-lounge. I figured that this would make it easier for them to cut the cast off of my arms, so I willingly complied.

When I had seated myself where they had wanted me, rather than removing the cast that had been applied to my arms, each of the nurses grabbed a foot almost in a repeat of what they had done with my arms. They wrapped each individual toe in soft cotton batting bandages, and then each foot as a whole. When my feet were thoroughly wrapped they worked their way up my legs until they reached my upper thigh. Once again the long legged pants of the hospital gown provided no encumbrance to their progress, as their scissors quickly ate their way through the pants legs. As a matter of fact, it wasn't just the pants legs that they removed. The bandage went clear up to my crotch,



and the nurses found it expedient to use their scissors to remove my pants altogether. This, of course, left me totally exposed, since no underwear had been provided, and I had chosen to forgo it rather than dig out a fresh pair. This didn't seem to bother either of the nurses in the least.

Neither of the nurses seemed to have an issue with wrapping the bandage in my crotch area. In fact, it almost appeared as though they both rather enjoyed it.

Once my feet and legs were completely wrapped individually, at the nurse's instruction, I ended up seated in what approximated a lotus position, with my legs folded together much as my arms had been.

Similar to what had been done with my arms, once my legs had been placed in their desired position gauze was used to bind them together as one.

Fiberglass casting bandage was once again placed over the cotton batting and gauze bandages this time to cast my legs into place.

It seemed like it was only a few minutes since they had started, and I was already solidly bound (casted) into a position in which I was almost entirely helpless. My arms and legs were almost totally immobilized and useless.

"Whew! That's a lot of work," observed Nurse Suzanne. "Let's take a break before we finish this one up."

"Finish this one up!" I repeated. "How about if you cut me out of this and I'll take you girls out to dinner?"

"Now! Now! Don't go getting hostile with us!" Nurse Suzanne snapped. "First of all, we're not girls. In case you hadn't noticed, we're fully grown women!"

"Doctor Smith ordered this treatment," Amy jumped in, "And we're going to complete it exactly as he ordered!"

Who was this mysterious 'Doctor Smith' anyway, and why was it that I had never met him?

"Don't make us have to call security on you!" Nurse Suzanne threatened.

"Oh, I think we can handle this one." Said Nurse Amy confidently.

I never thought this sweet young girl would have been capable of producing such an evil grin!

"Now you just sit here and behave yourself." Scolded Nurse Suzanne. "Well be back after our break to finish your treatment."

With that, the nurses walked into the kitchen - Ala nurses break room where I couldn't see them - and proceeded to make themselves a cup of coffee.

Standing, walking, or even scratching my head, bound as I was, was no longer an option for me, so I sat there and waited for the nurses to finish their break.

An interesting note is that fiberglass-casting bandages are available in a rainbow of at least a dozen colors. The women had somehow acquired what surely must have been a mixture of every available color. As they applied the bandages it appeared that they paid no attention to what color it was, they just seemed to grab whatever color came next out of the box. My casts looked like a rainbow that had somehow gone terribly wrong. In any case, they were certainly colorful.

Eventually, the nurses returned from their break.

"Really, " I said, trying to portray my seriousness with a new tact. "I do have to go to work tomorrow, and I'm sure that it's going to take a while to cut me out of these casts."

"Aw honey, didn't I tell you." My wife responded, giving me one of those 'I know I lied, but you're going to let me get away with it' looks.

"You're our school project." As though that in itself was a full and meaningful explanation.

I've already called your boss and arranged for you to have the day off tomorrow. Besides, you've got all those sick days that you never use saved up. It won't hurt you to use one once in a while. Helping Amy and I with our schoolwork certainly seems like a good cause.

How could I argue with that? My fate seemed to be sealed.

Besides, it was already too late for me to just get up and walk away!

Rather than cut me out of my bindings, it seems that they had other plans for me.

I couldn't help but wonder just what these women really had in mind.

In any case, tomorrow was Friday, and although I did have things to do at work, they would keep.

An unexpected long weekend didn't really sound all that bad to me.

I was encouraged to slide off of the end of the chase-lounge.

Since I was already sitting on the foot end of the chase-lounge it wasn't difficult for the nurses to slide me off of the end. I ended up on the floor, still with my arms and legs folded in the lotus position, balanced sort-of on my now cast covered knees and elbows almost doggie style.

Of course, I couldn't go anywhere, and my ass was sticking obscenely up in the air. I felt really exposed and vulnerable.

Initially when I was placed on the floor the nurses had taken care to ensure that my arms were extended straight out at a ninety-degree angle from my body.

Likewise they had ensured that my legs were bent at the pelvis at a similar ninety-degree angle. I could have moved my arms upward, almost over my head, and my legs downward with the result that I would have been laying nearly flat on the floor.

A luggage strap soon appeared. This strap was run in a circular fashion around my now conjoined arms and down around my similarly conjoined legs. The strap was tightened in this position so that I could no longer move my arms upward, or my legs downward. Of course I could still move my arms and legs closer together, but that would have only thrown me off balance.

Initially the addition of this strap caused me no grief. It did ensure that I maintained the position that I had been placed in, and ensued that I was unable to significantly shift from that position.

Both of the nurses now disappeared in search of new additional equipment.

Nurse Amy appeared with an old wooden kitchen chair. This chair had a broomstick fastened to its back with two hooks screwed into the top end of the broomstick. Under the circumstances it was apparent that this was a makeshift multi-purpose device, with the broomstick substituting for an IV pole commonly found in hospitals.

Nurse Suzanne returned with an armload of various pieces of equipment. I couldn't help but notice that there were tubes and hoses dangling as she walked.

It definitely drew my attention when she hung the large red rubber enema bag from the makeshift IV pole.

With my ass sticking up in the air as it was, and me unable to do much to rectify that situation I was quite sure what was going to happen. I must say I was not thrilled with the idea in the least!

Nurse Suzanne had not yet expended all of her surprises. She soon produced a totally evil looking enema nozzle, which featured two separate balloon like devices with inflation pump bulbs attached to each one. Obviously, the first balloon was to be inserted up a person's rectum, where it would be inflated to prevent its expulsion. The other balloon was to remain outside, where it would also be inflated to hold the device solidly in place. There was little doubt that once an enema was administered through its central tube, this device would not allow its expulsion until the balloons were deflated, and the device was removed.

I could only have pity for the victim of this device, and there was little doubt that victim would soon be me!

As a captive audience I watched Nurse Suzanne squeeze a generous glob of lubricant onto two of her surgical glove covered fingers. I then felt those fingers

slathering the substance around and into my rear passage. Nurse Suzanne seemed to take her time to be sure that my passage was well coated with the lubricant before she inserted the dreaded enema nozzle. I felt the internal balloon begin to expand as she squeezed its inflation bulb. With a few more squeezes I began to feel a definite fullness as it's size increased within me. I knew without a doubt from the feel of its size that it wouldn't be coming out before it was intentionally deflated. Next the outside balloon began to expand. I felt its size grow as well. As its size grew it began to pull somewhat on the internal balloon. I could tell that neither balloon was going to move as each locked the other into place. My rear was now sealed from both the inside and the outside, ensuring that nothing was going to get in or out unless it traveled through the central rubber tube which was part of this device.

Nurse Suzanne soon connected the exposed end of the rubber tube from the enema nozzle to the tube from the now filled and bulging enema bag. Nurse Amy had taken care of filling that bag while Nurse Suzanne had been busy inserting the nozzle.

I heard a click as the latch, which retained the fluid in the bag, was released. I immediately felt the rush of fluid into my bowels.

The cramps started soon thereafter.

"Please stop!" I pleaded. "That's enough I can't take any more!" I cried.

"Be quiet. It's not all that bad. Why I've seen small children take more than that without so much as a whimper!" Nurse Suzanne sternly warned.

At that moment I felt several sharp stinging slashes across my bottom about the same time that I heard the sharp cracks of something like a strap hitting bare flesh. "Doctor Smith ordered this, and we don't want to hear any more complaints from you about it." Announced Nurse Amy.

Somehow I got the distinct impression that perhaps Nurse Amy had gotten some real enjoyment out of placing what I was sure were bright red stripes, and perhaps even welts on my ass.

I made a mental note that it might well not be to my advantage to encourage, or even give her an excuse to do this again in the future.

Neither one of the nurses sounded like they were willing to negotiate this issue so I did my best to refrain from further outbursts.

The remainder of the fluid drained into my bowels before Nurse Suzanne disconnected the tube at its connection between the enema bag and the horrible nozzle. She then quickly inserted a plug into the nozzle tube to prevent anything from leaking out.

My stomach was cramping, and my rectum was having spasms trying to expel the fluid that had been forced into my bowels. Nevertheless, I knew none of this would do any real good until someday in the future when the damn enema nozzle was deflated and removed.

Nurse Amy began rubbing my now bulging stomach, which felt good, but wasn't going to provide me any real relief whatsoever. All she had to do was reach back and turn the deflation valve.

Nurse Suzanne busied herself by emptying and stowing the enema bag and other items that had been used during the procedure.

Neither of the nurses seemed to be in any particular hurry to offer any real solution to my urgent need, and the problem at hand.

I felt as though I was about to explode!

It seemed like days, perhaps weeks, passed with no relief.

Eventually I heard Nurse Suzanne place something on the chaise-lounge behind me. It was metal, and it clanked as she set it down. I somehow knew that it was an old-fashioned bedpan. I have no idea where she might have gotten a truly antique item such as this. Perhaps she had robbed a museum someplace.

I think it was the sweetest sound that I have ever heard.

"Do you think one will be sufficient for him?" I heard Nurse Amy ask Nurse Suzanne.

"Well, he was supposed to be on clear liquids for the past forty-eight hours."

"But you didn't do that. Did you?" she said directly to me.

"No Nurse Suzanne." I responded. Seriously dreading the thought that this whole process might be repeated, perhaps even multiple times!

I couldn't even imagine what it would be like to have this process repeated.

"I didn't know..." I stated to explain.

"You didn't bother to follow your instructions, or ask to find out what you should have done!" Nurse Suzanne interrupted, Obviously not caring to hear my perfectly valid excuse.

"Well, I'm not going to waste my time washing the shit out of somebody like him." She said to Nurse Amy.

"We'll go with this one, and if he has problems later on, it's his own fault!"

Don't they teach 'Bedside manner' in nursing school any more?

Soon both nurses grabbed me, one under each shoulder, and helped to lift me onto the chase-lounge and the bedpan.

I still had spasms, and was severely cramping, but somehow, now seated on the bedpan, I knew the end to this was closer at hand than it had been only moments ago.

Still, both of the nurses wandered around performing menial little tasks and ignoring my urgent need for release.

Finally, Nurse Suzanne reached behind me. I barely heard the hiss of air escaping from the opened valve when all of a sudden the enema nozzle slid out of my butt, almost of it's own accord. This was immediately followed by a torrent of liquid.

It felt as though my whole body was deflating as the liquid drained from my ass.

As the flow gradually subsided I looked up. Nurse Amy was standing there with her stethoscope around her neck. A long plastic tube that resembled the plastic tubing that they use to carry air into fish tanks to make all of those little bubbles dangled from her hand.

One end of this tube had what appeared to be a rounded closed end, with small holes placed in the side of the tube near that end. Apparently, at least I hoped, it hadn't been obtained from a pet store that sold aquarium supplies.

I somehow knew instinctively that whatever she planned to do with that tubing would not be to my liking.

"Doctor Smith has ordered a Nasogastric intubation to be performed to keep you hydrated." Nurse Amy informed me, as if I should understand what she was saying. Fortunately for me she translated that into English. "We're going to insert this nasogastric tube, Sometimes referred to as an NG-tube, though your nose and down into your stomach." She continued. "Don't worry, it won't hurt at all."

I think all doctors and nurses almost unconsciously repeat that last phrase, which is really a medical term which in regular English means 'Get ready to bite the bullet, cause here it comes!'

I had still not fully recovered from the enema, as little spurts of liquid that had apparently worked their way deep into my bowels were still finding their way out of my rectum and into the bedpan. It was both humiliating and distracting to have Nurse Amy standing there while this happened.

Nurse Amy seemed to take all of this in stride, and paid little attention to my discomfort and perhaps even got some enjoyment out of my humiliation.

Nurse Suzanne continued to clean up remnants from my enema as Nurse Amy performed her tasks. Nurse Suzanne was now washing that dreadful enema nozzle in what smelled like a strong disinfectant solution.

"We'd better keep this handy." She said to Nurse Amy. "We might need it again, if for nothing other than discipline." She said.



Since I was also right there in the room within easy earshot, it seemed prudent to take that as a warning. I have little doubt that it was intended as such.

Nurse Amy held one end of the tube that she was holding, near the tip of my nose. She ran the hose back and draped it over my ear, and then continued pulling it down towards my chest. She briefly searched to locate the base of my sternum or breastbone retrieving a pen that she happened to have handy, and making a mark on the tube at that point.

"We need to measure the distance from your nostril to your xiphoid process or xiphosternum." Nurse Amy explained as she measured the tube. "That way we know it's in the right place when we insert it. Your metasternum is right about here." She informed me, poking me in the chest. "The average length for an adult is around 22 to 26 inches." Nurse Amy quoted from memory as though she were reading it straight out of a textbook.

It didn't thrill me at all to learn that she fully intended to shove more than two feet of plastic aquarium air hose tubing into my nose!

It looked to me as though she was measuring yards of tubing. Far more than I wanted her to shove up my nose anyway. Not that I really wanted her to do this at all. Unfortunately, my willingness to participate didn't really seem to be at question here.

Nurse Amy was firm but gentle as she reached under my chin and pushed my head back. She gently pushed the end of the tube into my right nostril. I didn't like this idea at all and moved my head to inhibit her further progress. Still gently she grabbed my chin more forcefully to hold my head still as she continued threading the tube up my nostril. I could feel the tube pass through my sinus cavity.

"That's passing through your pyriform sinuses. It will head downward when it reaches your arytenoids cartilage." Nurse Amy confirmed as continued forcing the tube up into my nose.

I really didn't know what my pyriform sinuses, or other things were, but I still didn't like the idea of Nurse Amy shoving a plastic tube through them.

Nurse Amy continued as though she were reading directly from one of her textbooks as she lapsed into a stream of medical jargon. "Upon reaching the oropharynx, the nasogastric tube should be rotated through 180 degrees bringing its tip up against the posterior pharyngeal wall. This then allows the tip to be kept closely applied to the posterior pharyngeal wall, encouraging it to enter the esophagus."

I wasn't sure that I understood all of that, but Nurse Amy continued undaunted.

Nurse Suzanne appeared, and handed me a small glass filled with what appeared to be water.

"It might help the tube go down your throat if you take a drink." She advised, as though I could take a drink with Nurse Amy holding my head up as she was.

Before I had a chance to be more concerned about my sinuses or drinking the water I felt a tickling sensation as the tube entered the back of my throat. I began a sort-of gagging cough as the tube entered my throat.

In response to this Nurse Amy immediately took up a mantra of "SwallowSwallowSwallow, Take-a-drink, SwallowSwallowSwallow..." she released the pressure that had been holding my head back so that it was now possible for me to take small sips of water as she did this, but she still relentlessly continued shoving the damn tube up my nose.

The tube continued its passage through my throat. I didn't like that feeling one bit, but my gagging reflex response did seem to lessen somewhat once the tube had continued its way through my throat.

I could feel the tube winding it's way down my gullet as it continued its way toward my stomach.

Eventually Nurse Amy stopped shoving the miles of tubing into my nose. "There, that wasn't so bad was it?" she inquired rhetorically as she placed a piece of adhesive tape onto the tip of my nose and around the tube holding it in place.

'It was horrible' I thought, not thinking that I could, or wanted to talk with this

huge uncomfortable obstruction passing through the back of my throat.

Nurse Suzanne now handed a huge hypodermic syringe to Nurse Amy. Fortunately, I noted that there was no needle attached to the syringe.

Nurse Amy pulled the plunger back partially filling the syringe with air before attaching it to the end of the long length of tubing still hanging from my nostril. She then placed the stethoscope in her ears, and placed the other end over my breastbone, or whatever else she had called it. As she did so, she gently depressed the plunger of the syringe. I could feel air bubble up from the tube buried deep inside me. Nurse Amy must have heard this through her stethoscope and appeared to be pleased at the sound.

"That confirms that it's in the right place in your stomach, and hasn't gone down into your lungs." Nurse Amy informed me. "Just to be sure we'll draw out a little gastric fluid to be absolutely sure." She informed me as she drew back on the syringes plunger. Some fluid traveled down the tube with a small amount entering the syringe. She disconnected the syringe and spread a small amount of the cloudy, fluid with an almost yellow/greenish tinge onto a test strip, which she happened to have handy. The test paper immediately changed color, which seemed to make Nurse Amy very happy.

"That strip changes color with a PH range of 1.5 to 3.5 which indicates stomach acid. Other body fluids won't cause it to change color." Explained Nurse Amy.

At least for the time being the tube was plugged and forgotten. At least the nurses forgot it. It would have been rather difficult for me to forget about it, as there was still about a yard of tubing dangling from my nose.

Once again the nurses departed for more equipment.

They soon returned, each carrying a stepladder. Nurse Suzanne also carried perhaps a six-foot, two by four board. They erected a ladder on either side of me, and placed the board on the top between the two ladders. A rope hoist mechanism was attached to the board over my head. The other end of the hoist was fastened around my chest and under my shoulders. Clearly this device was to be used to lift me.

I had to give the women credit. They must have thought this whole process through quite thoroughly, coming up with some ingenious solutions to each problem that they had encountered substituting non-hospital equipment as necessary when the proper devices were not readily at hand.

Indeed I was hoisted into what might best be described as a 'Standing' position, although my legs were, of course, still folded and crossed lotus style below me. This left me dangling somewhat, and 'Standing' on my splayed knees as it were.

By now the occasional spurts of liquid and other debris that had periodically made their way down from the innards of my bowels and into the bedpan had lessened.

While Nurse Suzanne removed and emptied the bedpan, Nurse Amy cleaned me up using what still smelled like a strong disinfectant solution from the basin that had been used to clean that horrible enema nozzle. Nurse Amy took great care to insure that all of my exposed private parts were indeed clean and disinfected.

It wasn't long before both nurses were again busy, each with a roll of cotton batting bandage.

The hoist held my casted arms up away from my body, and the weight of the cast on my still folded legs held them down. I could manage hardly any movement as I had been hoisted into a rigid vertical position stretching the central part of my body.

My entire torso from the existing cast entombing my legs to just below my shoulders where the hoist was attached, was covered with the cotton batting bandages. This process was accomplished rather quickly with one nurse starting from the top and working downward while the other nurse started at my legs and worked upward.

When they met in the middle with their bandages they started over, this time with the variously colored fiberglass casting bandages.

Once again the fiberglass bandages hardened quickly. They had left two, not very large holes in the lower part of my cast. One hole had been left in the

front exposing my genitals. The other hole had been left for easy access to my rear. Curiously, there were also two smaller holes leaving my nipples exposed.

I was left to hang for a short time while this new cast fully hardened, and the nurses prepared for the next phase.

When Nurse Amy lowered the hoist my weight settled more onto my legs and lower body. As the upward tension of the hoist was released my torso settled into the new cast filling any minute empty space that had been left. The cast now felt like a corset, being very tight and confining. I was pretty much balanced on the chaise-lounge. It seemed to take little effort for the nurses to balance my rigidly casted body while the hoist sling was moved down over the now hardened cast. The hoist was then raised slightly, not to lift me, but to provide upward tension to maintain me in an upright position.

Once the hoist had been repositioned the nurses went back to work casting the remaining part of my exposed upper body. This last portion of cast connected the torso cast with the cast on my arms. It continued up to my chin and neck, holding my head in a rigid upright position. When they were finished, other than the previously mentioned holes, the only part of my body that was not covered with cast was my head.

"We have another little treat for you." Announced Nurse Suzanne as she approached carrying what appeared to be a sealed white plastic tray that obviously contained some sort of sterile medical stuff.

Once again, I had no idea what she was talking about, or what she had in mind. But I was sure that whatever it was, I wouldn't like it!

"You'll probably have trouble getting to the bathroom with that thing on." She began.

What? Was she kidding? I could barely blink my eyelids in this cast. Moving even a toe was almost out of the question!

"So we got you this neat little catheter thingy," she continued.

I wasn't sure what she was up to. 'Catheter' didn't sound like Greek or even Latin. She seemed to be speaking plain English. I don't even think you can find

the term 'Thingy' in a medical dictionary.

"It will keep you from peeing all over yourself." She concluded.

By now both nurses were seated in front of me.

I couldn't see much of what was happening because the cast rigidly held my neck up and prevented me from tilting my head down to see what they were doing. Nevertheless, I was getting the general idea of what was going on.

By now both nurses had donned a fresh clean pair of surgical gloves. The package had been opened and whatever it contained had been laid out in front of me.

One of the nurses had taken my now fully erect penis into her hands, and was once again cleaning it and the surrounding area with some sort of antiseptic solution.

"This is a 'Foley' catheter." Announced Nurse Amy. As if I should know what she was talking about, or should perhaps be pleased or impressed that it had a fancy proper name.

"See, it's got a little balloon on the end. Once it's inserted we'll inflate the balloon with a little sterile water to keep it in place." She held up a rubber tube so that I could see that indeed it had perhaps a pea-sized balloon-like bulge just below its tip. I noticed that the other end separated into two tubes. One would apparently be used to inflate, and hopefully eventually deflate, that little balloon. Like the enema nozzle, once the balloon was inflated the device would be locked into position within me. The other tube provided a direct open path to the other end so that once it was inserted into the bladder urine could flow unobstructed out through that opening.

I knew where these women intended to put this thing, and looking at the size, particularly the diameter of the rubber tube, there is no way I wanted any part of this experiment.

Of course, the women seemed to have the attitude that this was just a minor thing. To them this was just another normal procedure that should be no big deal.

Of course, no woman has ever had one of these things shoved up her penis!

Unfortunately, once again, my willingness to participate in this endeavor had not been called into question and I found myself in a poor position to resist.

The women went to work on their project. As I stated earlier, with my head immobilized I couldn't really watch the proceedings, which may well have been a good thing, but I could certainly feel them.

One of the women took my penis in her hand and held it firmly as she began pressing the catheter tube against my urethra opening. After some fumbling and several false starts she gradually managed to push the catheter into the urethra. Once she managed to get it started she simply held the penis firmly in one hand and pushed in the catheter tube with the other. The tube slid slowly into my body. This process apparently did not hurt her one bit, although I can't say that I felt exactly the same way.

I could feel the catheter within my body as it made its way up my urethra, through the surrounding prostate, and finally push its way through the sphincter muscle that normally controls urine flow from the bladder into the urethra.

While I wasn't screaming in pain, it wasn't exactly a pleasant feeling either. I made a mental note not to allow them do this to me again.

"Here it comes." I heard Nurse Amy exclaim. She was obviously referring to the flow of urine that would leak out through the tube as the catheter entered my bladder.

"Ok, Push it in two more inches, and then inflate the balloon." Said Nurse Suzanne.

I could feel them continuing to move things about, but couldn't be sure exactly what was happening down there.

Finally the balloon must have been inflated within me as I heard Nurse Suzanne say "Ok, now gently pull it back until you feel some resistance when the balloon seats against the neck of the bladder."

I could feel some tugging on the tube as this procedure was completed.

"Good, just connect it to the collection bag and we're done." Said Nurse Amy.

With the catheter in place I had the feeling that I was constantly peeing. In a sense, I suppose I was. Of course, I had no control over this. It was definitely a strange and somewhat unsettling feeling.

"We've got just one more job left to do," said Nurse Suzanne as both nurses approached me once more carrying the now familiar rolls of bandages. The problem, as I saw it, was that there was only one part of my body left to cover with a cast, and I really didn't want my head to be put in a cast.

Once again I found that my willingness to participate had not been questioned, and I was in no position to defend myself. Soon my head was carefully wrapped in the soft cotton batting bandages.

This time around, instead of using the familiar fiberglass cast bandage they were using the older style plaster bandage.

Casts today are made of either the older style plaster material, or the newer style fiberglass material. Both materials are still in widespread use, and both have their advantages.

Fiberglass bandage consists of a coarse fiberglass mesh material, which is impregnated with a resin-bonding agent that is activated to harden in the presence of water.

These bandages fully harden relatively quickly over a period of maybe fifteen minutes. The fiberglass material is porous like a window screen, allowing air to flow through.

Once hardened fiberglass is impervious to water.

This fiberglass material is also slightly lighter than plaster.

Fiberglass bandages are available in a wide variety of vivid colors.



Plaster casts are usually formed from cotton like gauze, which is impregnated with a plaster like binder, much like the plaster used to patch walls in homes, or Plaster of Paris.

This binder is activated with water, which expands to form a solid impermeable layer. It takes somewhat longer than fiberglass to slowly harden.

Since this material is not porous it takes considerable time (Days) to fully dry. Once they are applied plaster casts should not be exposed to water.

This plaster material is available in your choice of white, although food coloring can be added to the water to provide an array of pastel colors.

Although it is not often seen, plaster and fiberglass cast material can be used side by side, or in combination as was being done on me.

I soon realized that one disadvantage of the plaster bandage when used to encase a head is that it does not transfer sound well.

Fiberglass bandage being quite porous would allow sound to penetrate rather well, but the plaster seemed to block most of the outside sounds.

Sounds produced inside the cast however, like the sound of my breathing, or perhaps the sound of chewing, not that I was likely to be doing much chewing on anything, seemed to be amplified, and echoed within my head.

When I spoke, or uttered any other sound it too seemed to echo within the cast helmet.

Perhaps this factored into the nurses choice of materials for my encasement.

Numerous holes were provided in my head cast.

First of all, there was a hole under my nose to facilitate breathing, and to allow an exit for the aquarium air hose-like device, which Nurse Amy had inserted through my nose and into my stomach, and still protruded, from my nose.

There was a rather smallish hole for my mouth. I came to realize that this was really of adequate size, since I would be fed through the tube in my nose, and

this hole was simply a secondary path for breathing, and talking. Although for some reason I doubted that I would be allowed to do much talking.

Finally, there were two eyeholes. These holes were round and seemed to be rather smallish for eyeholes.

I'm not sure if it was an accident, or by design, however these eyeholes did considerably restrict my vision.

They totally blocked my peripheral vision, both side to side, and up and down.

They also restricted my field of view in such a way that each eye received a totally separate field of view with no overlap. Thus what my right eye could see was totally different from what my left eye could see. This took some getting used to. I needed to either close one eye, or mentally ignore the vision from one eye while concentrating on what I saw from the other. This wasn't as hard as it sounds, but my vision definitely wasn't what it had been before they had started!

Of course, the fact that I could not move my head the slightest in any direction also had considerable influence on what I could, or couldn't see.

No holes had been provided over or near my ears to allow sound to enter. I wasn't deaf, but couldn't hear well, and I had absolutely no sense of what direction the sounds I did hear came from.

Nurse Suzanne arrived with a tall bar stool and an electric fan. She placed the bar stool to my side, just out of my field of view, and then set the fan on top of the stool. She aimed the airflow directly at my head.

"There, I do hope that that will help to dry that plaster cast significantly during the night" she explained. "They do take so long to thoroughly dry, and I would really like it to be at least mostly dry for class tomorrow." She said this as though I would be held accountable for ensuring that the cast dried properly.

By now both of the nurses had wandered off, picking up remaining bits and pieces of stuff that was still lying around. Of course, each roll of the cast bandages had come in it's own wrapper designed to keep moisture from

getting to it and causing it to harden during shipment and storage. They had used more than a few of these to encase my entire body. As a result there was quite a pile of wrappers to dispose of.

My view of what was happening was rather limited, but I did catch glimpses of the nurses as they occasionally passed through one or the other of my two separate fields of vision.

"It's dinner time." Announced Nurse Suzanne.

I suddenly realized that she was standing in front of me smiling and holding up what appeared to be an IV bag filled with some sort of off-colored liquid. She reached over and pulled the makeshift IV pole into my field of view, hanging the bag on the pole. She then reached toward me and retrieved the plastic aquarium tube that still protruded from my nose and had been dangling in front of me. She connected the tube from my nose to the bag and adjusted the flow of liquid to a rather fast and steady drip.

"Yum!" she said. "That's good stuff. It has all the nutrients you will need. We can feed you like that almost indefinitely" Nurse Suzanne assured me.

Of course it totally bypassed my mouth and was delivered directly to my stomach, so I couldn't taste a thing. From the unappetizing looks of the stuff I didn't feel all too badly about that.

By this time it had gotten rather late. I had no way of knowing what time it actually was since there was no clock within my view. Snug within my cast, the passage of time was becoming harder to judge.

We had a rather comfortable couch for sleeping, and the nurses decided that they would take turns sleeping on the couch so that they would be near, and within earshot of the patient should he need some sort of assistance, or if they might be needed elsewhere wherever that might be.

Nurse Suzanne had drawn the first shift on the couch. I couldn't see her, since the couch was not within my field of view. Everyone said good night. The lights were turned off, and the room became very quiet.

I would have watched the remainder of my dinner drip into my feeding tube,

but the room was too dark to see that happen, so with few other choices for entertainment, I just watched the darkness.

At some point during the night I must have somehow drifted off to sleep, because I awoke with a start.

By the time I awoke both of the nurses were up and awake.

I could smell coffee brewing.

Nurse Amy appeared within my field of vision. She carried a large bottle of apple juice, which she used to fill my feeding bag, which, now empty, had remained where it had been hung last night.

I busied myself by watching my breakfast drip into my feeding tube while the nurses ate their breakfast. I could smell bacon, and envisioned a breakfast of eggs, bacon, hash browns, and toast. Alas, for me the tasteless constant drip would have to suffice.

"So how's it goin' big guy?" Nurse Suzanne had stepped into my field of view.

"Today is your big day." She informed me. Kasandra and a few of the other girls will be by later to help pack you off to school with us." She continued.

"Oh, by the way, before they get here there are a few rules your going to have to learn."

A few rules? I thought!

"First of all, there's no talking unless it's absolutely necessary, or if you're asked a direct question. And then you use as few words as possible. Understand?" She paused so that I could utter an affirmation, which echoed within my cast-entombed head.

"You address everyone as Doctor or Nurse, followed by their name, and you'd better learn each of those names quickly! If it's school faculty it's doctor. Students are Nurses. If your not sure it's most likely Doctor. Got it?" Again there was a pause for my positive response.

"Finally, you're very happy to be in that cast, and you'll gladly stay in it for as long as necessary, and that means a month or more if we decide on that." She informed me, without a pause for a response this time.

"Oh yah, I almost forgot. We have provided a little incentive for you to remember all of that." She held up a small device that looked almost like a remote to lock or unlock an automobile, and pressed a button on it.

I felt a definite and distinct vibration near the small of my back.

"That's a warning." She said. "If you get one of those you can expect this to follow if you don't behave."

She pressed another button on the device.

Unfortunately, I never got to see what would happen because at that very moment I think a bolt of lightning struck the house!

My body jumped, or rather tried to jump what would have been at least ten feet. Of course, the cast held it rigid and wouldn't allow any movement whatsoever.

It took a few minutes for the spasms to subside enough for me to even realize where, or even who I was.

"That was a five on a scale of ten." She informed me, so think about what you say and do.

"If we don't get an 'A' on this project because of you, I'll press that button until smoke comes out of that cast!" She promised.

I was still recovering from being hit with the lightning bolt, but I was sure that 'Smoke' coming out of the cast, if it weren't already doing so, would not be good!

By now most of the apple juice had dripped into my feeding tube. Nurse Amy came by with another bottle of some sort of liquid and refilled the IV bag that was connected to my feeding tube.

The nurses scurried around picking things up and putting them away, moving things about, and generally getting ready for... Whatever.

After a while the doorbell rang and a gaggle of young ladies entered the house. It was difficult for me to tell just how many of them there were with my limited vision.

They all crowded around me to see what had been done to me.

Since they all seemed to be talking at once I was unable to follow any individual conversation. All I could hear was the general roar of their talking.

One bit of conversation that I did hear clearly was between Nurse Amy and another unidentified nurse, who was saying, "Awww, isn't that cute. You even put a tube in his little thingy there." I had little doubt that she was referring to the catheter that I knew dangled from the end of my still fully exposed penis. "Did he give you any trouble when you put it in?" she enquired.

"No," replied Nurse Amy. "He just sat there like a lamb, and let us do it."

Somehow, I think if I had been asked, I would have told that story a little differently! Perhaps pointing out that at the time only my head had remained uncovered; or rather uncasted, and I had barely been able to move even that.

Before long it was decided that it was time to go to school.

Kasandra had apparently brought a van, in which I was to be transported.

The nurses, with the help of many of the other women began to prepare me for transport.

My feeding tube was disconnected from the now mostly empty IV bag. A stopper was inserted in its end so that nothing would drip out, and it was left to dangle in front of me.

Likewise, Nurse Amy disconnected my catheter from its collection bag, which now contained an abundance of urine. "I'll just plug this one too." I heard nurse Amy say, as I felt her moving about around my privates. "He'll be fine like that until we get to school."

The hoist was lowered, and I was laid back onto the chaise lounge.

The two by four board was removed from its perch on top of the stepladders, and the ladders were folded and stowed away to wherever they had been stored.

I was happy to see that a sheet was thrown over the body of my cast, hiding my private parts, and providing me with some modesty.

A number of women now stood on both sides of my chaise-lounge. Each found a handhold, and hoisted me, still lying on the chaise-lounge aloft.

The parade managed to squeeze its way through the front door and deposit me into Kasandra's awaiting van. Many of the women piled into the van around me.

Within minutes we were off headed for the school.

The trip to school, as might be expected, was rather uneventful. The women chattered constantly among themselves. I was able to pick out a few meaningless individual words and phrases, but mostly what I heard was just the din of overall conversations.

We arrived at the school safely. Most of the women piled out of the van as soon as it came to rest in its parking spot.

More women appeared from wherever, along with a real hospital-type gurney. I was quickly hoisted by as many women as could crowd around me, and I was placed on the gurney.

Of course, as this operation proceeded, the sheet that had covered me in the van slid off, and was left in the van. After everyone had gotten a good look, and after many good chuckles at my situation, another sheet was found and placed over my lower cast.

I was then wheeled into the building and into the classroom. I seemed to be like a magnet, picking up more women, and even a few men along the way.

Once we arrived in the classroom a real IV pole appeared, along with an IV bag filled with clear liquid. This was attached to my feeding tube, and the flow was adjusted to a steady drip.

Likewise, a drainage bag for my catheter appeared. Of course, rather than just reaching under the sheet to retrieve the end of the catheter tube, Nurse Suzanne had to remove the sheet altogether to let the assembled masses see all of my private parts, and the details of how they were now plumbed to either plastic or rubber tubes.

The sheet was hastily replaced as what appeared to be the class instructor entered the room. About half of the multitude disappeared out the door, while the remaining crowd parted to allow access for the instructor.

I briefly felt a now familiar but now much dreaded vibration near the small of my back. Even if it were a remote one, there was no way that I was going to take any chance that the previous lightening strike, and those vibrations were somehow connected!

"Well, I see we have a new patient this morning" observed the instructor as he strode up to my gurney.

"Good morning doctor" I ventured a greeting, hoping that I wasn't overstepping my bounds.

"Oh, I'm not a doctor." He informed me. "I'm just Fred, the class instructor."

'Oh shit,' I thought. 'Now what do I call him? It was supposed to be either Doctor or Nurse.'

"So I see that they have you all nicely casted up. How are you doing in there?" he inquired.

I decided to be safe, and ignore his real title, or lack thereof. He was a doctor to me.

"I'm doing just fine instructor doctor Fred. It's nice and comfortable in here. I'd like to shake your hand, but as you can see, I'm a little indisposed at the moment."



"Well, I'm glad to hear that." He responded. "Let me get the class started, and I'll get back to you as soon as I can."

"Thank you instructor doctor Fred. Take your time. I'm not going anywhere." I hoped I wasn't over doing it.

Instructor doctor Fred disappeared from my view and proceeded to conduct his class. Apparently, at least for the time being it was to be business as usual for him.

With my limited hearing I couldn't really make out what the class was about all I could hear was his indistinct talking in the background. I busied myself with looking at the ceiling tiles, which was about all that was within my two separate fields of view while lying on my back on the gurney. All of the tiles seemed to be correctly installed, but I checked again to be sure.

It seemed like a long time, but eventually instructor doctor Fred finished up his lecture, and he, followed by the class headed back to examine the patient, In other words, me.

"So, let's take a look here and see what kind of job they did on you." He said as he started examining the cast. "That's certainly a uniquely colorful cast." He observed.

If I thought the nurses used a lot of medical words, this guy knew them all. He gave my solid exoskeleton a thorough examination. He took out a marker that he carried and made a number of marks and notations on the cast. He examined what he could see of my catheter, and probed some around what he could reach of my pelvic region. Of course, he also examined what he could see of my feeding tube, which was mostly just the tube dangling out of the my cast entombed nose. It was difficult to understand what he was saying. Not only because I couldn't hear him well, but because of all the medical terminology he used. He had, and made a lot of comments.

Instructor doctor Fred noticed the rather small eyeholes in my head cast, and I think he said they should have been considerably lager.

Once again I felt vibrations when instructor doctor Fred asked about my

vision and how well I could see out of the cast. I assured him that I could see just fine, and was perfectly happy with the way that I could see. I have no doubt that he knew that I was lying, but he seemed to accept what I had to say without comment. Perhaps he knew, or at least had some idea as to what my nurses were up to, and was willing to let them have their fun and get away with it.

In other words, it didn't seem to matter to him what kind of debauchery the women were up to, as long as the cast met his specifications.

For a while I was fearful that there might soon be smoke coming out of my cast, just on the general principle of what he was saying. Eventually, he broke into more of a plain English, and what I heard sounded encouraging. In the end I think he said that the nurses had done a good job and would receive at least a passing grade.

What a relief! Now I could get out of this thing and start my extended weekend!

"Ok. You can take him in the back to the casting lab and saw him out of this." Instructor doctor Fred told the nurses.

"Well, sir," began Nurse Suzanne, "I'd like to take him home like that so I can show him to my mom and dad. They haven't seen much of my school work before, and they didn't get a chance to see him this morning."

"I'd like to show him to mine too." Interjected Nurse Amy.

'Oh shit!' I thought. 'Now I'm going to be paraded all over creation to see everybody's relatives! I'll never get out of this thing. What was that she said about a month or more?'

"Well, I guess that'd be ok." Responded instructor doctor Fred. "It's a little unusual, but I don't see any harm in it. How do you feel about that?" he asked me. "Are you Ok to spend a little more time in there?"

Once again I felt the dreaded vibrations near the small of my back.

"Oh yes, Instructor Doctor Fred. I'm doing just fine in here." I said. "I'm very

comfortable. I can wait as long as they want to let me out," as I prayed for the lightning not to strike me again.

"Well, Ok then. Take him home, and don't leave him in there to long." He cautioned. "He does need to get out and move around to get his circulation going."

With that, the class was over. I was now free to start my weekend. Well, I was if I intended to spend it in a full body cast and unable to move any part of my body other than my tongue!

Instructor doctor Fred headed out of the classroom, and I was once again surrounded by a bunch of girls uh, make that fully-grown women. All of them seemed to be talking and none of them seemed to be listening to anything at all. Well, I guess that's what fully-grown women mostly do anyway.

The IV bag connected to my feeding tube had been empty for some time by now anyway. This time it was left connected to the feeding tube, which was still threaded into my nose. The bag was simply removed from the IV pole and dropped onto the chest of my cast.

The collection bag attached to my catheter was disconnected, and the catheter was plugged and left to dangle from my still fully exposed penis.

The sheet that had covered me had been stowed under the gurney, and fully exposed, I was now wheeled through the building to Kasandra's awaiting van.

Once again I was totally surrounded by women as they picked me up off of the stretcher and loaded me into the van.

The van was rather warm inside, as it had been sitting in the hot sun all morning.

Nevertheless, many of the women loaded themselves into the back of the van with me for the ride home.

Although it was empty someone took the IV bag, which was still connected to my feeding tube, and hung it on a hook, which was up near the ceiling of the van. Someone else produced a bottle of water and poured it into the bag.

Of course for this trip I ended up lying on top of the sheet that was supposed to be covering me. I could have hardly been surprised when several of the women ended up fondling my private parts. In fact, by the time we arrived at our next destination this activity had pretty much become the game of choice.

I began to review what I knew about the male reproductive system. To begin with, the urethra is a tube that carries urine from the bladder to its terminal opening at the end of the penis. The urethra is elastic and flexible. When a proper size catheter is inserted, it stretches the urethra so that there is a seal between the outside of the catheter tube and the urethra. If the catheter is too small urine can leak out between its outside wall and the urethra. Seminal fluid (Sperm or semen) also flows down the urethra. When a man ejaculates several other organs are called into action. Hidden internally, the prostate silently runs the show. At the proper time the prostate calls to the balls (Testicles or gonads) to send up some sperm, which they produce and store. The vas deferens is the tube, which carries the sperm from the testicles to the prostate. In the prostate the sperm are mixed with other nourishing and lubricating fluids and at ejaculation time, are injected into the urethra from the prostate at its connection just below the bladder.

The reason all this was important to me was that I was well aware that I had a catheter inserted. With the women having fun playing with my private parts there was now a danger that I might get excited and ejaculate. Indeed some of the women seemed to have this possibility in mind. Of course, with the catheter in place my urethra was effectively plugged, and this couldn't happen! Or maybe it couldn't happen, and if it did it would probably be quite painful! In any case I decided that I didn't want to find out what would happen! All I could do was to quickly focus my attention on anything other than what the women were doing to me.

Speaking of our next destination, it wasn't either home, or Nurse Suzanne's mom's house, but rather a strip mall parking lot.

The women parked the van and almost everyone got out. Nurse Susanne then came into my field of view. "We really don't want you making a fuss, or a lot of noise while we're in there shopping." Nurse Suzanne informed me. She held up a little device with several buttons on it. "There are two controllers for your little friend." She said. "This one is sound activated." She told me. "I'll

switch it to warning so that I can demonstrate." She pushed a little button, and then flipped a little switch on the device. She then held the device up near her mouth and softly, almost whispering said, "Testing." The device near the small of my back began its vibrations. She then flipped the switch again. "Let's see, I think we'll set it to maybe a six this time. So you'd best remain quiet." She said as she pushed another button and again flipped the switch. She then carefully set the device down out of my view, but I could tell that it was sitting on my chest, just under my chin where it would pick up every little sound that I made. With that Nurse Suzanne got out of the van and quietly closed the door.

I lay there almost afraid to breathe.

The windows were closed, and the doors were locked. The sun was beating down on the van. It wasn't long before it once again got rather warm inside the van. I began to perspire. It was becoming rather uncomfortable inside my fiberglass prison.

Unable to move I was certainly held captive.

I considered that I would have to yell rather loudly to be heard by a passer by, or anyone outside the van, but nearby. That, of course, was out of the question with that little remote monitoring my every sound.

With no way whatsoever of telling time it seemed like forever before the women returned.

Nurse Suzanne quietly entered the van retrieved, and switched off the device that she had left me in charge of.

Then all of the other women piled into the van. They all carried bags of groceries and other unidentified items.

"I bought you an energy drink" one of the girls proclaimed. She popped the can open and poured it's contents into the now nearly empty IV bag, which was attached to my feeding tube. She then adjusted the flow to a much faster drip, just short of a steady stream. At least for the time being I couldn't tell the difference between anything that had been poured into that bag since it all bypassed my taste buds and went directly to my stomach.

I couldn't help but replay a scene from the movie 'Catch 22' in my head, where two nurses went to check on a patient. One nurse checked the patient's feeding tube bag, which was empty. The other checked his urine collection bag, which was full. They simply traded bags. Of course, I too was in a similar situation, and seriously hoped that my nurses hadn't seen that movie.

At the moment I had nothing to worry about in that area, as my catheter had been plugged, and I had no urine collection bag. I was beginning to wish that that were not the case, as I was starting to feel that my bladder was filling. The need wasn't yet urgent, but I knew that over time it would grow. With the catheter in place there was no way that I could get relief from this unless the catheter was once again unplugged and my bladder allowed to drain.

Once again we were off, hopefully headed for home this time.

After a short drive the van pulled into my home driveway. The nurses piled out of the van, this time taking the chaise-lounge and me with them. We must have made quite a sight, as bags of groceries and other sundry items had been stacked on top of me for the trip into the house.

Several carloads of women had arrived at the house before us. It was clear that they were setting up for a party. Several folding tables had been erected, and a number of folding chairs had materialized.

The tarpaulin that had protected the rug from spills of casting material during my encasement, or perhaps even splatters from my enema had also now been removed and stowed.

"Let's put him on the chair over here" suggested Nurse Amy, who appeared to now be in charge of the entertainment committee. She indicated the wooden chair with the makeshift IV pole. "That way he can see what's going on."

The nurses complied, lifting me off of the chaise-lounge, and standing me, legs still folded onto the wooden chair. Several bungee cords appeared, and were used to fasten my encased body to the back of the chair so that I wouldn't fall or slide off.

Since I was unable to move within my fiberglass shell, my center of gravity never changed. Once I was placed someplace I was truly an inanimate object,

much like a bag of groceries, I was unlikely to move or fall unless acted upon by other outside forces.

Nevertheless, I have no doubt that falling while encased in a full body cast would not be a good thing since there would be nothing that one could do to break the fall.

The chaise-lounge was then stowed for later use.

The now empty IV bag that had followed me home, still attached to the feeding tube, was re-hung on the makeshift IV pole. Once again it was filled with some sort of liquid and the flow readjusted to a nice steady drip.

All the while, a circle of nurses had surrounded me. The crowd thickened as Nurse Amy arrived and sat herself on a stool in front of me. After donning a pair of surgical gloves from a box that had been placed under my chair she took the still plugged catheter into her hands.

"You won't be needing this for a while." She said.

She placed a plastic hospital basin in my crotch area, held my penis over it, and removed the plug from the catheter. Urine flowed freely into the basin, and I immediately felt relief from my full bladder.

Next she inserted a hypodermic syringe into the other rubber tube and drew out the few CC's of sterile water that had inflated the balloon within my bladder. She was now, with a gentle tug, able to slide the catheter out of me. I can't say that I was sorry to see it being removed.

Of course, it would have been nice if there hadn't been a crowd of women watching the procedure.

The women actually cheered as the catheter left my body!

I must admit that this considerably added to my embarrassment.

I was sure that I was blushing bright red inside my shell, although fortunately for me, nobody else could see that.

Nurse Suzanne appeared carrying a freestanding oval full-length mirror that she had retrieved from our bedroom. She placed the mirror several feet in front of me. Several times she inquired as to how I could see myself, as I directed her to adjust it so that I could get the best view of myself.

Through all of this excitement I had noticed a small group of nurses that was huddling together in the background. Actually, my attention had been drawn to them because by chance, they had been lined up behind the mirror that Nurse Suzanne had placed for me.

These nurses seemed to be quite engrossed in an animated discussion about something that must have been rather interesting to them, as they seemed to be quite excited about whatever it was they were discussing.

Now that Nurse Suzanne had finished placing the mirror for me she was quickly summoned to join that group of nurses. Nurse Suzanne spoke with these nurses briefly before they all filed into the kitchen behind her.

It wasn't long before this pod of nurses returned. They were quickly joined by many of the other nurses, who up to this time had not been included in whatever it was that they had been up to. I couldn't help but wonder what it was that they were so excited about.

It wasn't surprising that I didn't have to wonder for long.

Nurse Suzanne approached carrying two glasses. Curiously, one of the glasses was empty. The other was only partially full, and contained some sort of cloudy liquid.

Nurse Suzanne retrieved the IV bag that was attached to my feeding tube and dumped its remaining contents into the empty glass. She then re-hung the bag and dumped the cloudy liquid into it. She adjusted the flow to a full steady stream.

"You may be wondering what all the fuss was about, and what I just put in your feed bag." Nurse Suzanne began.

"We have a real treat for you today." She announced. "One of the nurses, who shall remain nameless." Everyone turned to look at one particular nurse, who



was blushing quite vividly. "Has brought you a dose of Sildenafil citrate. You may recognize that as the drug Revatio, which is sometimes called Viagra. I have crushed and ground up the tablet so that it could be dissolved in some water for its easy administration. I'm sure that you will soon be enjoying its effects. You might want to thank that nurse for bringing you such a fine gift."

At that moment I once again felt the dreaded vibrations near the small of my back.

"Thank you unidentified nurse, for being so thoughtful, and for bringing me such a fine gift." I announced to the crowd in general. Hoping that that would be sufficient to prevent another lightning strike.

A slight chuckle arose from the crowd as everyone once again turned to look at that one particular unidentified woman.

By now the IV bag attached to my feeding tube was once again empty. Nurse Suzanne dumped the liquid that she had previously drained from it back into the bag. She then adjusted the flow back to a more normal steady drip.

For a while the crowd thinned out. At least, my crowd of spectators thinned. A few of the women hung around, as though they expected my penis to instantly become solidly erect the minute the medication entered my body.

Food was served on the other end of the room, and that drew some of the gawkers away.

Conversations erupted, and the party continued on. After a while, I noticed that I was, for some unknown reason, drawing a circular crowd again.

Suddenly, I noticed that one particular girl well, make that a rather attractive, fully-grown young woman; that the crowd was urging forward.

It appeared that she was reluctant to do whatever was being asked of her. I couldn't help but wonder what might be in store for me, and her.

After repeated gentle pushes, urges, and words of encouragement from the crowd she stepped forward.

She reached down under my chair and donned a pair of surgical gloves.

"I've never done this before." She said to me, almost apologetically, and nearly inaudibly.

She seated herself upon a stool, which had been left next to my chair.

Again with encouraging urgings from the crowd she timidly reached forward and took my penis into her grasp, giving it several half-hearted squeezes.

Someone threw a condom toward us. She retrieved it with her free hand, and used her teeth to rip open the package.

Now if that one single gesture isn't enough to turn a guy on, I don't have any idea what is.

She didn't seem to have any idea as to how to proceed with the next step.

It was almost like a baseball game, with a barrage of suggestions and advice emanating from the crowd.

After a while she seemed to get the idea.

It took several fumbled attempts before she got the slippery lubricated condom stretched over my now fully erect penis enough that it would stay on. She was then able to roll the rest of it down the remaining portion of my shaft.

There was more coaching from the crowd.

From some undisclosed location she retrieved a tube of lubricant, and spread a generous amount over her fingers, which were already well lubricated from the condom.

Again, she received more coaching from the crowd.

With one hand still wrapped around my penis She turned almost beet red as she slowly reached behind me.

I felt her well-lubricated fingers search for, and find my rear entry.

I hope this doesn't hurt you." She almost whispered.

With a gentle push she was inside with one finger.

She searched around my innards with her finger.

Eventually, she found what she had been looking for. My prostate gland!

I already had an erection, but when she hit that spot my penis attained hardness as never before.

Gently, she rubbed and massaged my prostate, while she also squeezed and massaged my penis.

I couldn't help myself. Within seconds I ejaculated into the condom.

The crowd, which was watching all of this intently, gave a rousing cheer as my cum spurted into, and filled the condom!

My angel of mercy again turned almost as beet red as I was sure I was inside of my fiberglass cocoon.

Another obviously more experienced young lady now joined us as the first young lady withdrew her finger from my ass.

The new arrival carefully showed her how to remove the condom from my still very sensitive, and fully erect penis without spilling any of its precious contents.

She showed it to the other young lady turning it mostly inside out, but being careful not to loose any of the precious fluids, which I had deposited inside.

The two women conferred for a moment.

Suddenly, the new arrival reached up and grabbed my right nipple, which had been made available through a hole that had been left in my cast.

In one fluid motion she savagely squeezed and twisted that nipple.

The instant I opened my mouth to scream the cum-filled condom was shoved inside my mouth. The condom was now inside out with her finger inside. Of course, the full load of cum that had previously been inside the condom was now being spread around inside my mouth.

Once she was sure that the cum had thoroughly coated the inside of my mouth she withdrew the now empty condom.

This whole process had taken only seconds to complete.

"Swallow." Came the clear and decisive command!

My mind, which was clearly not prepared for this obeyed, and without another thought I swallowed!

"And that's how it's done." I heard her say to the still blushing younger lady.

Following this incident the circle of onlookers once again thinned. While the party continued.

After a short while, another one of the ladies approached carrying a glass of red wine.

"Well," she said, "It looks as though nobody has thought to get you a dink." She reached over and poured the wine into the IV bag attached to my feeding tube. She then adjusted the flow to a more rapid, almost steady flow.

I wasn't sure if wine was supposed to be administered in this manner, but I was hardly in a position to argue with her.

During the evening several of the other nurses also arrived proffering glasses of either red or white wine, which they generously poured into my IV bag keeping it constantly filled.

Even though I couldn't taste it, it wasn't long before I began to feel the effects of the wine.

We have a grandfather clock in our living room, which chimes each quarter

hour, and bongs an appropriate number of bongs for each hour.

It might be a coincidence, but I mention this mostly because hindsight seems to be 20/20.

While the first young lady was accosting me, I recall hearing the clock strike the top of the hour with its bongs. At the time I thought nothing of this as it simply marked the passage of time.

I began to notice that each time it approached the top of the hour a circular crowd would gather around me.

One of the ladies would step forward and perform the same ritual that the timid young lady had performed as the clock struck the hour.

I'm sure that the crowd had chosen the timid first young lady. However there seems to have been some sort of drawing or lottery system to select the succeeding young ladies.

I was being milked for my sperm every hour, on the hour, and what I produced was being fed back to me!

The first time this happened it was wonderful.

The second time was great too.

By the third time I was amazed that I had anything left to ejaculate.

And so it went. Four, five, even six times I was forced to perform.

Eventually, as hard as my body was made to try, there was just nothing left for me to ejaculate. Nevertheless, my body was forced to go through the motions.

With my prostate being massaged as it was there was no way for me to 'Hold back' or prevent myself from ejaculating. My body continued to be made to go through the motions being forced to perform beyond all reasonable limits, even if there were no resources for it to perform with.

Each ejaculation, or attempted one, produced a rousing cheer from the

gathered crowd of nurses.

Of course, each time I was forced to consume whatever fruits of my ejaculations that my body produced.

Consider it recycling, if you will.

I later learned that apparently there had been a prize for the lady who had forced me to cum closest to the clock striking the hour.

The party continued through the afternoon, but eventually by late evening began to wind down. Many not quite so sober nurses headed home. Hopefully being given rides from the more sober ones.

Many of the women had been thoughtful about helping to clean the house of debris from the party before they had left for home themselves.

By the time everyone had left for home the house really looked rather clean and tidy. Nevertheless, Nurse Suzanne and Nurse Amy busied themselves making the place spotless.

Once again the IV bag attached to my feeding tube was filled and the flow was set to a rather slow drip before the ladies headed off to bed.

Nurse Amy had been relegated to couch duty this evening.

"Don't be afraid to call and wake me if you need anything." She said as she tucked her self in for the night.

The next thing I knew I was awakened by a pressure in my bladder. I needed to pee.

Not knowing what else to do I called to Nurse Amy.

I called several times before she was awakened.

"What is it?" She said, sounding as though she was still half asleep, which she probably was.

"I really need to pee." I said.

"Oh." She said, and for a moment I thought she was going to roll over and go back to sleep.

"We forgot to replace your catheter." She observed as she dragged herself out of bed.

"I really don't want one." I confessed.

"Yes, but you really need one." She argued.

Deep down, I knew she was right. I had a plastic tube which almost constantly delivered a steady flow of liquids directly into my stomach. Logically, there would be an almost steady flow of liquids out of my body as well. That drainage tube had been removed so that I could be accosted and violated in other ways, and now it needed to be replaced.

Nurse Amy soon appeared carrying a sealed plastic box similar to the one they had used previously.

"Let's get this over with." She said.

Without further ado she donned a pair of surgical gloves and began cleaning my penis and pubic area with what certainly smelled like a strong antiseptic.

My penis quickly came to a full erection.

"I would have thought that you would have had enough for now." She said with a chuckle as she observed my erection.

"I think it has a mind of it's own." I said. "It just likes attractive women."

She had obviously learned from performing this procedure the previous day. She held my now erect penis in one hand, as she deftly threaded the catheter into my urethra. I felt the tube quickly make its way through my body. It was soon spurting an uncontrolled stream of urine into the plastic basin that Nurse Amy had prepared for it to drain into.

"I guess you did have to go," she said as she observed the volume of urine in the tray.

Once the flow subsided she pushed the catheter in slightly farther inflated the balloon by injecting sterile water into the second tube.

She then gave a gentle tug to seat the catheter in my bladder.

"There." She said as she connected the catheter tube to a collection bag. You should be all set for the night. I don't want to hear another peep out of you.

I'm sure she said that only half jokingly.

She refilled the IV bag attached to my feeding tube before going back to bed.

It occurred to me to be thankful that Nurse Amy refilled my feeding bag from a bottle that she had retrieved out of the refrigerator, rather than emptying the basin of collected urine into it.

While that would have been really gross, to be honest, I might not have known the difference since there was no taste associated with what was directed directly into my stomach.

I was once again left to study the darkness of the room.

I awoke to the smell of fresh brewed coffee and breakfast cooking. It smelled delicious!

Nurse Suzanne soon stepped into my field of view.

"Ah, you're awake." She observed. "It's sometimes hard to tell with you all bundled up in that thing." She noted.

"You seem to have had quite a time, and made quite a spectacle of yourself at the party last night." She said disapprovingly.

"I hear that you had quite a bit to drink, although I'm not sure just how you convinced a bunch of innocent nurses who should know better, to provide you with alcoholic beverages." She continued, as though I were totally at fault.



"It's also rumored that you had several sexual encounters with a number of my friends." She accused. "Poor Justine is such an innocent girl, and you just couldn't leave her alone, could you?" she accusingly questioned.

There was little doubt that she was referring to the timid young lady who had been selected to perform the first. Well you know.

"How about some nice fresh coffee?" asked Nurse Amy, who appeared holding a decanter of dark brown liquid. You'll probably need it after all you had to drink last night. "I've cooled it down with an ice cube so that it won't burn your stomach. Although I probably shouldn't have." She said as she poured the dark colored liquid into the IV bag attached to my feeding tube.

"You're supposed to be on clear liquids, but I suppose this little treat won't hurt. Maybe it'll help with the hangover that you probably have," Added nurse Suzanne.

Unfortunately, the only way I knew it was coffee was by the color, and the fact that I had been told it was. Since it was piped directly into my stomach I couldn't taste a thing.

"I hear you even got poor Amy out of bed last night to fondle you and made her perform your little perversions for you!" accused Nurse Suzanne.

"And don't try to deny any of it, Nurse Suzanne accused. "Because you weren't even smart enough to dispose of the evidence, which is still right here."

She reached down next to me and picked up the wastebasket that had been sitting there.

She pulled out the plastic tray that the catheter and its installation supplies had come in. It was now filled with discarded sundries, which remained from the catheter insertion.

What was left in the basket was a collection of used and abandoned surgical gloves and an incriminating number of now empty, used condoms.

A small bowl containing additional unused condoms still sat under my chair.

My mouth still tasted foul from the semen that I had been forced to consume.

I have to admit, this didn't look good for me!

It seemed bad enough that I was being accused of transgressions that I really had no control over, and which I was sure had been orchestrated by these two women themselves.

Now there were two of them yelling at me!

What was I to say or do?

They had the gist of what had happened last night.

They had even been there to see what had happened for themselves.

But, of course, they had the facts all twisted around and wrong to make me appear most guilty.

I needed these women to cut me out of this damned cast.

If I argued or said something to make them angry I'd never get out!

Not that they didn't sound mad enough already.

On the other hand, I really didn't think I was actually quite as guilty as charged.

I decided to throw myself upon the mercy of the court.

"I'm sorry Nurse Suzanne." I said. "I really didn't mean to cause any trouble I don't know what must have come over me. Please forgive my indiscretions." I apologized. Trying to sound as sincere as I could, even though I didn't really feel that way.

"I'm sorry Nurse Amy. I really didn't mean to disturb your sleep last night. Please forgive me." I didn't want to lay it on too thick, but I did want it to sound as though I was willing to take responsibility for whatever imaginary

transgressions I had been accused of.

"Let's go get our breakfast before it gets stone cold." Decided Nurse Suzanne, ignoring my feigned pleas for leniency.

The two nurses headed off toward the kitchen.

I believe the two nurses were in the process of washing their breakfast dishes when the doorbell rang. I recognized three nurses who had been at the party last night.

"So, how's the patient doing today?" Asked one of the newly arrived nurses.

"He's doing as well as can be expected after participating in the party last night." Said Nurse Amy. "Although I'm not sure that Doctor Smith will be pleased when he finds out about it."

The new arrivals came over and gave me a rather thorough examination anyway. Not that there was all that much of my body that they could actually see and examine.

Except, of course, for my still exposed pubic region.

The day progressed slowly.

A steady stream of nurses paraded through the house throughout the day. Each one seemed to stop and examine my cast and what they could see of me.

It quickly became the custom for each one to place some sort of saying and a signature on my cast, almost as though I were some sort of company birthday or get well card.

Once they had stopped to gawk at me they mostly moved off to congregate amongst themselves.

There seemed to be a rather large gathering during the lunch hour when a group of ladies arrived carrying several large bags of Chinese food, one of my favorites. Of course, I was still restricted to 'Clear liquids', but I was allowed, and even encouraged, to watch the ladies savor their lunch.

Apparently I could no longer be trusted to maintain my diet, so two signs were added. One saying "N.P.O." which I was told was a medical term meaning 'Nil Per Os' and in English meaning to withhold oral foods and fluids from a patient. This was fastened to my chest. Another saying "No alcoholic beverages" was fastened to my feeding tube bag.

A similar occurrence took place around dinnertime. A table was erected within my field of view. Soon a rather large crowd of nurses arrived, each bringing a pot or bowl of something to contribute to a 'Pot luck' dinner.

Nurse Suzanne actually informed me that I would be allowed to retrieve and consume anything that I wanted from the table, although I was not allowed to ask any of the nurses for assistance, or to perform that task for me.

I decided that although that table of food did look rather enticing, that I wouldn't risk leaving my chair, and risk having someone else take my seat with it's great view of the party. I also might accidentally spill some food, possibly soiling my nice clean and colorful body cast. It was safer to satisfy myself with the drip into my feeding tube.

Eventually as it got later the flow of nurses subsided.

The trip to school, followed by the party had made yesterday rather tolerable. With nothing much for me to do, today had indeed been a long and rather boring day.

I had maintained some hope that I would be cut out of my cast, although as the two nurses prepared for bed, it began to look as though that certainly wasn't going to happen today.

It was once again Nurse Suzanne's turn to maintain the patient watch and sleep on the couch tonight.

"I don't want you disturbing me like you did Nurse Amy last night, unless it's a real emergency." She informed me, stressing the word 'Real'.

My urine collection bag was emptied, and the IV bag attached to my feeding tube was refilled and adjusted to a slow drip before the nurses went to bed.

Once again I was left to study the darkness.

I awoke to Sunday morning much as I had the previous days.

The smell of breakfast permeated the house.

This morning the nurses appeared to be in a much more favorable mood, as I apparently had not lapsed into any sort of unacceptable transgression the previous day.

My feeding tube IV bag was filled with apple juice again this morning in keeping with my 'Clear liquids' diet.

The day progressed much as the previous day had, although today the steady trickle of nurses seemed to have dwindled considerably.

The day proceeded even more slowly than the previous day, with few periods of any sort of diversion or anything to really look at. Severe boredom seemed to be the menu for the day.

The two nurses had busied themselves throughout the day with some unidentified project in the kitchen, so I didn't even see much of them except for the occasional times that they either emptied my urine collection bag, or refilled my feeding tube IV bag. By now they knew just how long it would be before each of those needed attention, so most of the time I remained undisturbed for the long periods in between.

Around 4:Pm. I noticed that a few more nurses began arriving.

By 5:Pm. quite a crowd had assembled.

Finally, it seemed that the proper time had arrived. I wasn't sure what for, but I did find myself once again surrounded by nurses.

First Nurse Suzanne disconnected the IV bag that had been connected to my feeding tube. She plugged the tube that was left dangling from my nose, as she did this.

Then Nurse Amy came along and disconnected the urine collection bag from my catheter, giving me the now familiar "You won't be needing this for a while" line.

'Oh Shit! Not again,' I thought. ' I just can't be made to cum that many more times again.' Not that I had any real say whatsoever, in the matter.

Nurse Amy used the syringe to deflate the internal balloon, and gently pulled the catheter out of my body.

A cheer once again arose from the nurses as the device was withdrawn from the end of my penis.

The bungee straps that had been placed to hold me in the chair were carefully removed.

Now that I had been disconnected from all of my tubes, the mass of nurses picked me up and carried me outside onto the deck in the rear of our house.

I was placed lying on my back, on the center of the picnic table that was there.

Someone passed around a box of surgical masks, and everybody took one and put it on.

One of the masks was even taped securely over the nose and mouth openings of my cast.

Suddenly, no less than three nurses appeared, each brandishing a cast saw.

Actually, I recognized one of the tools as having come from my own toolbox. It was simply a saw with a vibrating, rather than a rotating blade.

The same type of saw is used in hospitals to remove casts.

Often hospital saws have vacuum attachments to dispose of any debris, primarily dust, that is produced as the cast is sawed.

Tiny fiberglass or plaster particles can be considered a health hazard. Being outside had somewhat lessened this hazard. Thus the need for surgical masks

was an added precaution.

These tools work well on most things to be cut, but they won't cut flesh, which is flexible enough to move with the vibrating blade. Cast material, which is solid and doesn't flex is easily cut.

The thick cotton batting placed under a cast moves with the blade and gives added protection as well.

I had purchased my tool from Harbor Freight Company for \$16. The metal cutting blade that they were using was perhaps \$5 extra. I'm sure that hospital grade saws cost a little more.

Another of the tools, a genuine cast saw, had been borrowed from the school.

The third, similar to mine, had been brought by another nurse.

The three nurses each chose their own specific area, and began sawing through my cast.

The saws made a lot of noise as they gnawed their way through my cast.

It can be a really a scary thing to have a cast cut off.

Even though you know the saw won't cut you skin, with all the noise it's easy to believe that it will slice right through you the same way it obviously cuts through the cast, if they are not careful or if they slip.

You can imagine how it felt having three nurses working on me simultaneously.

I felt like a lobster, or perhaps a turtle, being cracked open for dinner.

Fortunately, they hadn't thoroughly cooked me first.

It took quite some time for the nurses to saw through my cast.

The way my arms and legs had been folded when they were put into the cast made it a little more difficult to cut them out.

Eventually my legs were freed.

My legs were unbelievably stiff, and I could barely move them.

My muscles didn't seem to bother me, but my joints had stiffened up some, and didn't want to move right away.

With the rest of my body still held captive it was difficult to do much about this.

I knew that if I were able to get up and move I would soon be able to work the kinks out of my body.

For the time being I just laid there and tried not to move.

Slowly, more of my body was released from the cast.

The cast on my head had been saved for last.

After a lot of sawing and work on the rest of my body, finally only my head remained encased in the cast.

Nurse Suzanne began cutting at my head cast.

The noise inside the cast as she cut through it was unbelievable!

Fortunately, it didn't take her all that long to cut up one side of my head, and down the other.

The cast was pried apart, and I was finally free.

There had been cheers from the crowd as various parts of the cast had been removed, but now a final rousing cheer arose.

My body was still stiff, and my joints complained as I once again tried to move them.

Fortunately, the more I moved the better I could move.



I had great faith that within a short time I would be back to moving as I had prior to being totally encased within the cast.

Of course, I hadn't exactly been wearing any clothes under the cast.

The light blue hospital gown that I had been issued initially had been left in shreds on the casting room floor as the cast had been applied.

Now, finally free of the cast, I stood as the central figure within a crowd of female nurses, outside, on my back deck, totally naked!

One of the women finally proffered another hospital gown, similar to what I had worn previously. This one was a sort of burgundy color, which had no significance, and made no difference to me. Watched by the crowd of women, I quickly put the clothes on.

There were a couple of snickers from some of the women as I did this, but I figured that this was because I had been naked and was now dressing in front of them.

I was to later learn that these burgundy gowns are issued to hospital psych patients so that they can easily be identified. Naturally, when eventually I was told about this, everyone got a good chuckle at my expense over it.

Once I had been freed from the cast, the main event show was over, and many of the nurses that had been there drifted on home.

Finally, there were about a dozen people left.

I recognized these women as many of my wife's friends.

I was comforted to note that Justine, the girl that did the first. Well, you know. Was among them.

I couldn't help but catch Justine later on when she was free.

"You did just great the other night." I began. "I wanted you to know that I usually don't do that sort of thing on a first date. Or any other time, actually."

"I was so embarrassed!" she responded. "I hope I didn't hurt you."

"Not at all." I consoled her. "You were very gentle. I wouldn't exactly say the same for your friend though!"

Back from the future...

It turned out that my wife and Amy had been preparing a wonderful Thanksgiving-like roast turkey dinner during the day.

Folding tables were used to extend our normal dining room table so that there would be seating for everyone. The table was quickly set, and dinner was served.

After nearly three days of that damned 'Clear liquids' drip, I was more than ready to dig into some solid food.

There was, of course, turkey, stuffing, mashed potatoes, sweet potatoes, corn, peas, cranberry sauce (A staple with the turkey) fresh baked rolls, butter, and almost anything a person could ask for. A typical American thanksgiving dinner, even if it was the end of May.

As if we weren't stuffed enough from dinner, Pie a la mode was served for desert.

My stomach had apparently shrunk during my 'Treatment' and I wasn't able to eat nearly as much as I would have liked. But what I did get down tasted wonderful.

Even better, there would undoubtedly be leftovers for tomorrow.

There was, of course wine served with dinner.

Everyone got a good chuckle out of cautioning me not to drink too much.

It turns out that my two nurses had orchestrated the whole wine incident thingy during my 'Treatment'. The wine that I had been served had been watered down and color-corrected with food coloring. In total I had been

served only one glass of red wine in a number of diluted servings. What I had thought had been white wine had been just a placebo.

Of course, my wife and I do have a loving and trusting relationship. Since she and Amy had orchestrated the whole 'Milking' incident, which poor innocent Justine had been cajoled into starting, there would be no hard feelings or retribution regarding that. What my wife and Amy had expressed in that regard had been entirely an act.

By the way, that sound activated remote was a fake too. I could have screamed my lungs out and the dummy device would have just sat there.

The other remote, on the other hand was quite real. It was part of a shocking dog collar device that the nurses had skillfully incorporated into my cast. Not a nice toy at all!

When I got to work on Monday morning, of course my boss wanted to hear all about my long 'Romantic' weekend. I didn't want to tell him the real truth, so I decided to leave out a few of the facts. He probably wouldn't have believed what had really happened anyway.

"She simply needed some help with her school project with casts." I told him. "It was rather heavy, and she needed help transporting it and taking it in to school."

I simply left out the part that I was the project, and that other people helped her carry me into the school.

I'm not sure that he really bought all of that. He gave me a quizzical look when I told him what I did, but we both knew that the truth was probably more mundane than what he had imagined.

He also knew that I would stick to my story, so the issue was dropped.

I later learned that through the nursing school, the nurses sometimes had access to supplies, such as the ones that had been used over the weekend that the local hospitals had in stock which were near, or past their shelf life expiration dates. The supplies were still good and functional, but could no longer be used on patients. These supplies were perfectly suited for use as

training aids by students. My wife and Amy, both being rather resourceful, and with the school's blessing, had scoured the area to locate the supplies, which they had needed.

As for my involvement in the weekend, it had come as a total surprise to me, and in retrospect, I loved it.

My wife and I sometimes participate in, I guess you might say 'Mild' bondage games, and this could certainly be included among them.

I'm not sure if I'm sorry to say that it is unlikely that we will ever have the resources to repeat such a scenario. Although it might be fun if our roles were reversed!

Since we are 'Switches', I guess I'll just have to get my wife back in some other way.

By the way, if you're in the market for a new widget, call me anytime at 555-1234!



#### Warnings:

I wouldn't feel like a responsible individual if I didn't add a few warnings. Medical play always presents some dangers. Please note that in this fictional story, although they were students, the people involved had at least some training in the use of the equipment and devices used. Play safe, and don't take unnecessary chances with this sort of play.

Sildenafil citrate, Viagra: - At least here in the US. Is a prescription drug, and should be treated as such. Although I don't speak from personal experience, I personally believe that the effects of this drug are highly overrated. I would not recommend the use of this drug without a proper prescription.

Nasogastric tube: - This is a relatively benign device, but still involves a somewhat invasive insertion procedure. The main dangers come from its improper insertion, which should be done by someone with the proper

training. This device is used only for the introduction of liquids, which bypass the mouth and are routed directly to the stomach. Since the mouth contributes little to the digestion of liquids this is still a rather natural process. Since foods containing normal germs routinely enter the digestive tract through the mouth the body is used to dealing with them and there is little chance of infection as long as proper care, and at least standard disinfection practices are followed.

Foley catheter: - This is a more invasive device, which should only be inserted by someone with the proper training. The urethra is designed to close and seal out invading bacteria, which this device may now allow to enter. Great care must be used to keep the hardware, and general area sterile and free from contamination, even following proper insertion, in order to prevent a serious urinary tract infection.

'External' catheters are available, and would be a better practical choice for an application such as this. They look like a condom with a tube at its end. They come in various sizes.

Thanksgiving Dinner: - Enjoy, but beware. There is a danger of eating to much!

Both the Nasogastric tube, and the Foley catheter are available without a prescription, and are available for home use by people who have a medical need for these devices.