Darkroom Tech

by Fred Osuna

Entering that darkroom is like slipping through the barrel of a rifle. I step into the chamber, pull the black galvanized metal door shut behind me and lean into the revolving door. The castor rollers rattle and the rubber around the door panel releases with a whoosh, and I am through to the safe darkness of that room. It is quiet as a tomb, comfortable as a womb. I have fallen out of the gun barrel into my own silent midnight.

On the outside, it's noisy. Terry's come in late, he's come in through the emergency room, and he's animated about the long line in their waiting area. He's getting loud, his arms are waving. One by one, the other techs wander off to exam rooms to rifle through paperwork and prepare for the coming wave. By default, Terry gets the room furthest from the ER, the room where the chief resident sends the oddest cases, that room which we call "The Dungeon." During the hospital late shift, odd cases show up that we never see in the daytime: bullet wounds, knifings, hematomas in places that one couldn't get from just falling down a flight of stairs. There will be no routine radiological exams, no mammograms, no broken bones from bicycles. Tonight we'll see the underbelly of the community and the evidence of how they live, and tomorrow they will have gone back into hiding.

I wait in my room. The red lights above each film drop have all come on. The technicians slide their film cartridges into the drop at regular intervals and I get to work. I move through the dark, Zenlike, my hands going where they need to out of habit. I am Gollum under the mountain, a mole, I am fast and efficient, I am in control. I refill the cartridges, then slip them back toward the techs. When I hear them busy with patients and equipment, I slide out through the chamber and clip the developed films onto the light boxes hanging from the office walls. Then I return to work, to my quiet dark room.

When the shift is nearly over, I clean my space with the lights off. I lean against the counter, sipping coffee. Outside the hospital, the

sun is beginning to rise. Outside my room, the radiology techs are discussing the woman with the cockroach eggs in her sinus cavity, the man irretractably coupled with a vacuum cleaner. I have released the lock on the darkroom door and a fine border of white fluorescence sneaks its way across the toes of my boots. I leave after the last of them has gone, and I take the backways and frontage roads home to avoid the crawling columns of cars on the highway.