

When Dreams Come True

by [Peter Glassman](#) (September 2024)



The Psychiatrist (Jose Perez)

Dr Paul Norman told his psychiatrist, "Dr. Cynthia, I can

recall many of my dreams coming true.”

Dr. Cynthia Trudel tented her fingers and responded, “It’s okay to call me Dr. Cynthia. However, I’m still going to call you Paul. Using your medical title is a distraction. It’s bad enough you tell me about your medical cases. I am, after all, a physician, and your dreams of giving anesthesia to a patient in your dreams and having the dream turn into reality are most challenging to my specialty.”

Norman smiled, “I just want to discover why this happens to me.”

Trudel returned the smile, “Your medical workup showed that you don’t have any physical or mental defect that might be responsible.” She paused and held eye contact. “I have occasionally used a paranormal approach to cases such as yours.”

Norman raised his eyebrows. “Paranormal ... like someone with a crystal ball sense of what life is about. Does he have only one eye like the mythical Cyclops?”

Trudel rubbed her chin with two fingers of her right hand. “Of course not. The Cyclops was, as you say, a mythical figure.”

Norman leaned forward, “So what makes him so special?”

“Dr. Phloem Quasal, a PhD in Psychology, recognizes his ability to interpret dreams accurately in those who also possess the same asset that you have. He has proven this in many cases, such as yours.”

Norman shifted uneasily in his padded chair, “Does this mean he can cure me?”

“Cure?” Trudel folded her hands, “No, but you can learn to live with it. He’ll give you back a normal quality of life.”

“I don’t know what a ‘normal’ quality of life is.”

"Life is different for each of us. He'll delve into yours and your situation. Remembering your dreams will not be scary anymore." Trudel sighed, "You should give him a try."

"Dr. Cynthia, if this Dr. Quasal can do that, I'll be satisfied. How and when do we start?"

Norman arrived at the door to Dr. Quasal's office. The lettering on the frosted glass declared, "Dr. Phloem Quasal, Psychology and Sleep Medicine." Norman mused that Quasal's first-floor office prevented depressed patients from a suicidal window leap. A comely red-haired receptionist looked up from her laptop screen.

"I'm Dr. Paul Norman. I have an appointment at two with Dr. Quasal."

She smiled, showing pearly teeth, and worked her keyboard while looking at the screen. "Yes, Dr. Norman, you can go right in after you sign this insurance form."

Quasal sat behind a dark vintage mahogany desk. His elbows rested on a stained blotter, and an arthritic right index finger motioned Norman forward to sit in a shabby parlor chair with stuffing protruding from both its arms. Quasal smiled, "Welcome, Dr. Norman. I prefer we use first names. You can use my nickname, Phlo. That's Phlo with a Ph and not Flo with an F."

Norman sat, his eyes locked on the man's blue irises ringed with white circles. Arcus Senilis, he thought. Phlo must be at least in his seventies.

Phlo placed his hands on an opened file folder. "I studied the notes of my colleague who referred you here. Before we start, I have a question: Have you ever read Freud's book 'Interpretation of Dreams?'"

"Yes, I have." Norman hesitated, "I couldn't relate to anything in his writings."

"Of course not. Freud claims dream content comes after some life experience. Your situation is the reverse."

Phlo took a deep breath and gulped from a small water bottle, "I'm not going to ask you about your childhood or anything like that, Paul. Physically, you're normal. Mentally, you experience anxiety over your imagined problem."

Norman raised his eyebrows, "It's not imagined, but it is a problem. So where do we begin?"

"I want you to relate the most recent dream that morphed into reality in as much detail as possible." Phlo raised his index finger, "Incidentally, how many dreams that repeated themselves as real-life experiences have you had?"

Norman folded his hands, "They're too numerous to count. They were never bothersome until I began my anesthesiology specialty several years ago."

Phlo leaned back in his creaky antique high-back desk chair, "Very well, please begin when you had supper that night."

"Do you want to know what I ate?"

"Please."

Norman adjusted his legs and rested his elbows on the shaggy chair arms. "My wife, me, and the two children had a fulfilling pasta dinner. She cleaned up and turned the TV on. I went to the bedroom and turned on my laptop. I looked at the surgical schedule for the next day. I was assigned to only two cases. The first case was a 48-year-old woman with a brain tumor. Brain surgical cases usually take over four hours and require at least an hour of preparation under anesthesia

before surgery can commence. It takes another hour to stabilize the patient in the recovery room and more time to admit her to the Intensive Care Unit.”

Phlo folded his arms and gave an affirmative nod.

Norman continued, “The patient’s name was Gertrude Zenga. She insisted I call her ‘Gert’ but never ‘Gertie.’ Her symptoms were those of severe right-sided headache and occasional vomiting without any warning. Her skull X-rays showed a three-centimeter round mass just under the right side of the skull on top of the covering of the brain. Further imaging studies confirmed it was a benign meningioma. It looked like a smooth golf ball in the MRI photos. These tumors are lethal as they grow and put pressure on the brain. The surgery is usually uncomplicated, with a rare occurrence of bleeding or cardiac rhythm disturbance if excessive pressure on the brain occurs. I must watch the surgeon to advise if he is being heavy-handed to avoid this. Also, any irrigation fluid has to be at body temperature. Cold solutions can also cause cardiac disturbances. Everyone in the OR has to be alert.”

Norman paused for a drink of water. “I examined the lady and found she was otherwise a healthy middle-aged patient. After informing her of the anesthesia she would be receiving, we talked of her family and exchanged pleasantries.” Norman sighed, “After, I finished recalling our pre-op interview. I went to bed.”

Norman swallowed some water. Phlo remained silent. Norman continued, “When I met Gert in the prep room before going into the OR, I started a large-bore IV and attached blood pressure, pulse, oxygen, carbon dioxide, and temperature monitors. The neurosurgeon, Dr. Mungo Fritz, arrived and greeted Gert. He motioned me to go outside the room with him. Fritz was a bombastic person away from his patients. He grabbed my shoulder.”

Fritz grimaced, "Norman, get moving. I have another case across town. You anesthesia people are so goddamn slow. Hurry up and put her to sleep."

Norman paused, "Phlo, most surgeons are like this. They consider themselves the master of the OR. In truth, the patient's well-being becomes mine once anesthesia is induced."

"Once Gert was asleep and positioned for the surgery, the scrub nurse sterilized the operative field and draped the sterile area. Dr. Fritz came in looking at the wall clock."

Fritz shouted, "Come on, everyone, let's get going. Get those instruments ready. He looked at the patient's X-ray on the wall illuminator."

"At this point, most surgeons will face the anesthesiologist and ask, 'Is the patient ready for the incision, Doctor?'"

"Fritz didn't; he grabbed the scalpel from the scrub nurse and made a curved incision."

"Fritz shouted for gauze sponges and the electrocautery to stem the bleeding. Next came the drill boring through the skull. There was more bleeding, which was stopped with bone wax. The tumor was exposed. It didn't look like a white golf ball like on the X-ray. It was dark pink, wrapped with shiny pulsating arteries and bulging dark veins."

"I began to hyperventilate Gert's lungs to decrease brain blood flow and lower the pressure in the tumor's vessels. Fritz moved quickly. He moved much too quickly and tore into a web of tumor arteries. Blood squirted up to the OR light and immediately filled the operative field, obscuring all tissues."

"Fritz shouted. 'Damn, Norman, we have a massive hemorrhage up here. Start giving her some blood.'"

"The OR circulator nurse glared at Fritz, 'You refused to have blood ordered. You said meningiomas never require blood in your experience.'

"Fritz was sweating. 'For God's sake, get some blood up here.'"

"I sent down a specimen for typing. That takes about twenty minutes. In the meantime, Fritz couldn't see the source of the bleeding. The monitors started with their alarms. First was the pulse rate as it accelerated; next came the low blood pressure beeping; and lastly came the cardiac arrest steady scream.

"We started CPR, but it only increased the blood loss. Adrenalin, IV fluids and other medications failed to maintain her circulation. Mrs Gertrude Zenga was dead."

"Fritz tore off his rubber gloves. Fritz bellowed, 'You people should have had blood ready. You're all the cause of this. I have another case across town.' He left."

Norman stopped. He was sweating. He stared at Phlo.

Phlo wrote in the file notes and leaned forward, "So Gert, the patient, died, and you feel guilt beyond belief."

"No, no, Phlo, she didn't die. I was ready."

Phlo smiled, "I know, Dr. Norman. You had two large-bore IVs and eight units of blood in the OR. The surgeon gave you grief over this, but you ignored him. You also had medications ready to drop Gert's blood pressure, which enabled Fritz to identify the bleeding source. The surgery was a success, and Gert is alive and stable in the ICU post-op bed."

Norman swallowed hard, "What! How could you know this? I never told anyone else the details of that dream."

“Paul, there’s an old saying that applies to our situation here: ‘It takes one to know one.’”

“What do you mean?”

Phlo stood up and went to Norman, “Last night after I read Dr. Cynthia’s file on you, I went to bed. I dreamed of our interview. I remembered everything you said today. I’d heard it in my dream.”

Norman felt relieved, “So what do we ... I ... do about this?”

Phlo looked down and smiled, “Consider our situation a gift, not a curse. You saved Gert’s life because of your dream. Have you not saved others? Have you not prevented untoward events that occurred in your dreams?”

“Yes.”

“Nothing is written about people like us, Paul. Paranormal phenomena are scoffed at in the real world. So, we accept it and hope to turn disasters into favorable outcomes.”

Norman leaned forward, “Do you have other patients like us?”

“I’ve organized such a group of twenty-two people. We meet twice a month and exchange experiences. Our operative words are acceptance and gratitude. God has put us on earth for goodness. We are not freaks. Our brains operate on a different level than others. I hope you’ll join us.”

Norman leaned back with folded hands. “You mean I have to go on living with such dreams and worry that I can fix things when I wake up?”

Phlo smiled, producing facial age wrinkles, “Not at all, Paul. Our group consists of diverse individuals. We have a dentist, a restaurant owner, one policeman, and now three doctors, including you. The others range from a cab driver, a lawyer, and other lay people.” The smile disappeared, “We all change

adverse dream events carrying over into the real world. Paul, the anxiety we once agonized over disappears by revealing our dreams to each other. The Rabbi in our membership feels what we have is of divine origin. Join us, and your quality of life will be comfortable and fulfilling.”

Two months later, Norman met with Dr. Cynthia Trudel. “Dr. Cynthia, thank you for referring me to Dr. Quasal.” Norman described how his new life of frustration had become one of satisfaction.

“Paul, we all have our place on this earth. You were trying to understand yours.”

“Dr. Cynthia, it took your knowing who might help me. I’m grateful to you and Dr. Quasal.”

“Paul, I’m merely a psychiatrist acting like a traffic cop. I pointed you in the right direction, that’s all.”

Norman grinned, “Well, I guess a power greater than myself led me to find you.”

Dr. Cynthia smiled, “Medicine is, at best, a vague science. Unexplained phenomena like yours led to the postulation of God’s existence. It still happens and always will. The world accepts this.”

Norman smiled back, “And now I accept it as a part of living.” He stood up, “Thanks again, and it doesn’t bother me that I know in advance that tomorrow’s Super Bowl game will be devastating for the New York Giants. I can’t do anything about that, but so what.”

They both laughed.

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