

**Reading Nonfiction Strategically****Making Inferences****Excerpt from “The Case of the Bad Blood” from March 2010’s *Muse*****The Victims**

Late in the day on July 30, 2002, a teenage girl from Georgia was severely injured in a car accident. She was taken to a local emergency department, where staff fought to save her. But nothing they did helped, and on July 31, she died. Her kidneys, heart, and liver were immediately transplanted into four chronically ill people.

All four operations went smoothly. For more than a week, the four patients (two in Georgia and two in Florida) did fine. Then on August 31, the 31-year-old Georgia woman who had received a kidney developed a rash on her chest and neck; three days later, she began to run a fever. On August 18, after a day of backache and diarrhea, she was taken back to Emory University Hospital. The next day, the 38-year-old Georgia man who had gotten the other kidney also developed a moderate fever, along with a severe headache, diarrhea, and muscle aches. Then he went back to the hospital too.

To the mystification of their doctors, both of them got rapidly worse. Fever after an operation suggested that they had an infection; transplant patients take immune-suppressing drugs that would make it easy for an infection to take hold. But antibiotics did not help. Both patients had trouble speaking, became confused, and lapsed into unconsciousness.

The Emory doctors called the surgeons who had operated on the two Florida patients. They did not like what they found. The man who received the heart transplant had never left the hospital. He had spiked a fever on August 12, lost control of the muscles in his legs, and then fallen into a coma. The woman with the liver had fared slightly better: She had just been released that day from the hospital. But she had had weakness, diarrhea, and fever for two weeks. Something was very wrong....