Take Heart

by J_Baillier

Summary

John is thoroughly frustrated with his administrative duties and longing for a change and a bit of adventure. He signs up for a second tour in Afghanistan, leaving Sherlock behind.

Notes

Finally, finally, finally I get to bring these boys back! Be warned, though, there is angst headed this way. More of it than in the previous instalments of this series.

A quick recap: in this 'verse, John has been to Afghanistan once before as an army doc (before he met Sherlock), and he came back unharmed from that tour.
“There’s just a little more danger
And the slightest remark
It goes a little bit deeper
And gets a little more dark
– Nothing But Thieves

"It’s just for a couple of months," John placates him.

"Isn’t the maximum recruitment age for the Armed Forces currently 33? Why would they want someone who’s old? Didn’t you get enough of it on your last deployment?" John had done a stint in Afghanistan about a year before they had met. Sherlock would never have guessed that he’d want to go back there.

John laughs to hide the fact that he’s mildly insulted. They’ve been together long enough for Sherlock to have learned to spot these things. "I’m only forty, and it’s not a regular deployment but a special project called Operation Garridebs. They’re training locals to run the Kabul Military Hospital again, and they need someone with surgical logistic admin experience to run a subproject and to survey what sort of equipment would need to be brought in since most of it was looted."

"You have administrative duties here. Why would you want to go to Afghanistan for that?"

"What we do here is becoming pretty much run-of-the-mill when it comes to my OR hours, and I don’t get half as many of them as I’d like. They say they’ll let me do call at Camp Bastion’s Trauma unit. I need a change, Sherlock."

"You’ve already decided, haven’t you." Sherlock drops onto the sofa and sighs.

John is pinching his nose, as though there’s another unpleasant announcement he wants to make. "And while I’m gone, just— please behave. I don’t want to come back and instantly need to fix all your messes."

Sherlock’s head whips around to glare at John. "What messes? I’ve not had a single patient complaint since last year. The two medical students you forced me to endure at the outpatient clinic did not give any negative comments in their feedback."

_He thinks I can’t manage without him_, Sherlock realises. The thought is highly condescending and makes him want to really pick a fight but he refrains. This is just more of the same of how John has been lately – tired, crotchety, snapping at anything and everything he thinks Sherlock is being an idiot about, and he’s the one who gets to decide how such idiocy is defined.

A tense silence prevails, until some of the tension drains from John’s shoulders. "Look, I know we haven’t been apart since, well, we got together. We can manage, yeah?"

_If he thinks I’ll fall apart if he’s not here to scrutinise everything I do, he can think again._

He doesn’t want John to go, but maybe, just maybe this cloud might have some sort of a silver lining.
That silver lining is taking an awfully long time to materialise, if it ever will. John has been gone for a week, and Sherlock hasn't really adjusted to that fact. Taking the Tube to work instead of being driven there by John exhausts him before his workday even starts by overwhelming him with sensory information. He hates having lunch with anyone else than John, and instead of leaving him alone like they mostly do they now insist that he must need company now that John's in Afghanistan. Sometimes he wonders if John has recruited these people to pester him as some sort of a socialisation lesson.

At home, he keeps forgetting John isn't there. He has one-sided conversations that grind to a halt when his increasingly annoyed demands for a reply stop as he realises what's wrong. He keeps almost making two mugs of tea.

John emails him almost daily, but he doesn't know how to relate to the stories of daily life in Kabul, Kandahar, Ghazni or Herat. John had made the job sound like he'd be staying in Kabul – why is he touring some of the countryside as well? Sherlock tries not to let this amp up his worry – Kabul is hardly safe, either, not even within the confines of the army compounds.

Some of the surgeries John describes do offer some mildly interesting details but since Sherlock isn't there to do anything about them, what's the point? He rarely replies. What could he tell John about his days which wouldn't just be a reminder of everything he wanted to leave behind?

John had gotten a tad emotional the evening when he was due to leave. He'd kissed Sherlock long and hard on the kerb while his taxi already had its meter running. "I'll be back before you know it," John had whispered, clapped a hand on his shoulder, and disappeared into the backseat of the cab. Sherlock remembers thinking it looked like a maw ready to swallow half of his life. Half of him. 'Back before you know it' – such pedestrian nonsense. Sherlock had gone back upstairs, sat in the kitchen with his laptop open but not typing a single word. At midnight, he'd dragged himself to bed for a night of fitful sleep in a bed that felt too empty to be comfortable.

He goes to work. He goes home. They don't spend every minute of their days together, him and John, not even at home. Why does he feel so cast adrift? He used to live alone, for heaven's sake, and he was fine, despite what Mycroft may have to say about those years.

He knows the answer, of course, he just doesn't like thinking about it.

He used to be fine, alone, because back then he didn't know what he was living without.

Movement at the edge of his visual field catches Sherlock's attention just as he's closing the muscle layer on his laminectomy case. He'd prefer not to do these tedious back surgeries at all, but the queues are immense so it's all hands on deck.

He ties a knot, and while the scrub nurse cuts the thread he shifts his gaze just enough to spot two people standing in the hallway outside the theatre, whispering and looking at him. He recognises the other as the Head of Nursing of the OR unit, and soon she picks up the intercom phone. The OR's supervising nurse picks it up, listens nodding and then informs Sherlock that there's someone to see him in the hallway when he's done.

It's no use demanding to know who. If it's someone pointless, he doesn't want to get irritated at this point. If it's someone important, they wouldn't tell him anyway, because a nervous riled-up surgeon is not going to do a good job. Not even him.

There's a strange look on the supervising nurse's face. It's the usual apprehension Sherlock sees
when someone is forced to tell him something he won't like, but there's also a worry there that might point to the matter at hand worrying the supervising nurse as well, as though it somehow involves her. Sherlock wonders why. He hardly knows her, and he's quite certain they don't have a shared social circle.

As he sticks in the local anaesthetic in two neat lines next to the sides of the incision, he spots the supervising nurse leaning close to the anaesthesia nurse, whispering conspiratorially. She blanches.

"There are no secrets in my OR," Sherlock says icily. He doesn’t ask what had been said. He will find out in minutes.

There's still another surgery on his list, so he doesn't bother to remove his cap. Before, he'd always used the disposable ones available at every washing station in the OR, but John had given a specially made one to him for Christmas.

The cap has bees on it. John knows he likes them, appreciates their orderly and purposeful existences. He shifts the cap so that it's symmetrical before he presses the button on the wall to open door to the corridor.

There, his steps halt. Standing in the hallway, looking apologetic and nervous at the same time, is a man in military fatigues, accompanied by Sherlock's sombre-looking big brother.

John.

"….envoy hit by IED and ambushed…"

John.

"…gunshot wound…."

John.

"…severe blood loss…"

"…I still have contacts at Porton Down, Sherlock, so there's spot for you on a military plane out to Kabul in two hours…"

John!

Chapter End Notes

Cover image for this part of the series.

Moodboard:
take heart

OPP 243

by J. Baillier
They try to ask Sherlock for authorisation when he storms through doors with 'restricted access' painted onto them, try to stop him, but he shouts, stares them down, marches through without hesitation. He peers in doorways, trespasses audaciously, searches frantically until he finds someone who recognises the name he is repeating like a mantra.

John Watson.

He doesn't remember a single minute of his flight from Brize Norton to Kabul. From there, a helicopter bringing in supplies and replacement troops had been his transport to Camp Bastion – an immense military base northwest of the city of Lashkar Gah in the heart of the chaotic Helmand Province.

The hospital of the camp looks better than he would have anticipated. Cleaner. Only one cockroach. This is a military-run tertiary trauma centre, the only one in the country, and manned by experienced surgeons and battle-hardened medics. John is lucky to have been brought here, except that he's not lucky at all.

The young woman dressed in combat fatigues who had recognised the name Sherlock had been shouting leads him through crowded halls to something distantly resembling an HDU unit. She looks to be of Cuban descent, and that's all Sherlock has the patience for right now. He can't let his brain overanalyse everything he sees and hears, lest he loses focus on the only important thing right now.

The heat is almost unbearable, and Sherlock's dress shirt is already drenched with sweat. A distant prayer call floats in through a glassless window frame, adding to the overwhelming cacophony of noise and sunlight and human smells. If panic and worry weren't flooding him with cold, anchoring adrenaline, he'd be tempted to hide in a utility closet and clamp his hands on his ears to stop the painful assault on his senses.

The floors are new – grey plastic carpeting– but everything else looks as though the place has seen better days. He focuses on the sound of his own steps, grateful for the brutal speed the young woman is walking. There's no time to dither.

They stop, cut a sharp corner to the right. The slide of metal rings attached to a curtain separating beds at a ward pierces his consciousness like the sound of a shotgun. Then, he's frozen in his tracks, blinking frantically to banish the burning, heavy tears already running down his cheek. He's shaking, and he doesn't understand why, because John is right there, in front of him now, looking at him. Looking at him.

Not unconscious, not dead, alive, awake. Not dead.

An old, banged-up vitals monitor on a wooden shelf above John's head blinks with the uneven current in the unreliable electrical grid of a country at war. Blood pressure 100/70, pulse 120/minute which is quite high, oxygen saturation 93%. No oxygen. Why is there no oxygen? Why hasn't he paid attention to John's boring car lectures about the modern thinking when it comes to the indications of supplemental oxygen?

Why did he let John come here? Why didn't he say something, for God's sake! He should have thrown something at the wall, said things like over my dead body.

John says Sherlock's name, slurs a little. He's pale; his skin looks clammy, his arm is in a sling, the head of the bed raised to a nearly sitting position.
Sherlock reaches out, then retracts his hand. John raises his own feebly from the horrible, coarse woollen blanket. Why does he have such thing when it's so scorchingly hot inside?

A fan is whirring on the window sill. Sherlock is tempted to shove it off the open window because the sound is irritating and it's obviously doing nothing.

"Hi," John says, pinches his eyes shut for a moment, then refocuses his gaze. It's still glassy. He looks like he's high. Morphine, most likely.

"They shot you," Sherlock accuses because it's the only thing that comes to mind.

John had never promised he'd be safe. He had never told Sherlock nothing could happen to him. Sherlock had just assumed. Stupid.

John manages a smile but it's tight and hollow and disgusting, and it's not the way he's supposed to smile at Sherlock. "Yeah."

Sherlock grits his teeth and sits down on the edge of the bed because there isn't a chair available. He shoves the horrible blanket away from his thigh. Who knows, how many have died in this place, curled up in it.

John grips his fingers around Sherlock's wrist. There's a dry, flaky bloodstain near his thumb. Normally, Sherlock would worry about contagion a little, would wonder if it's John's or someone else's, but right now, he doesn't care. He doesn't care as long as this is real.

"The driver died," John says, "I couldn't help, I couldn't get up---" he's looking past Sherlock now, lost in a memory.

"They shot you in the shoulder. Of course, you couldn't help anyone else." You idiot. You fucking idiot why did you leave me in London. There's nothing for you here.

"How'd you get here?"

"Mycroft. He knows some general or other."

John doesn't ask for further details. Instead, he presses the call button tied to the side rail of his bed. Soon, the nurse who had brought Sherlock in appears, and there's a negotiation about pain levels. John's IV gets injected with something, and soon he begins slurring his words again.

"Love," John says, and "don't worry", which is stupid because those two concepts are utterly incompatible.

Most likely thanks to Mycroft's military contacts, he gets a cot in an office in the admin section of the hospital instead of being assigned a bunk somewhere further away in the small town-sized stronghold of the military camp. Upon seeing it, Sherlock realises that Administrative building is a fancy name for a rickety extra wing slapped onto the side of the hospital.

The office turns out to belong to John. It's empty save for a laptop, John's clothes and other gear and some outdated medical textbooks, and blissfully quiet. The officer escorting him seems curious about him, and Sherlock wonders how honest John has been about his life in London while stationed here. He could pretend to be anything and anyone, reinvent himself. The army is hardly a haven of tolerance, so he can't help wondering whether any of John's colleagues know who he even is.

He puts his jacket on the cot which has obviously been John's bed as well. Since he's on a special assignment, he hasn't had to sleep down in the barracks, either.

Sherlock switches on the ceiling lamp, nods to the officer who gives a salute and retreats to the
hall. Soon, retreating footsteps mark his departure. The building seems empty, save for Sherlock and he realises why – it's Saturday already. Flying over several time zones have distorted his sense of the date.

There's a photo tacked to the cork board next to the desk. It's an answer to the question whether John has kept their relationship completely secret.

He hasn't. In the photo – taken at a charity function last year – John's arm is draped around his shoulder, and he's kissing Sherlock on the cheek with a smirk. It's one of their favourite photos; Sherlock's, because he loves the sight of John in an evening jacket and John's because he says he loves Sherlock's endearingly put-upon expression.

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Sherlock makes himself useful. The usual bureaucratic hurdles of who has the right to participate in patient care are easily circumvented in the chaos of a country in war, even in a coalition military hospital. There are plenty of traumatic brain injuries he's asked to consult on since the hospital only has two neurosurgeons – one who's currently on leave and another, a moody Frenchman, seems to have been in Afghanistan for far too long to have kept up with the latest developments in the field.

He begins to understand why a surgeon or an anaesthetist would want to come here to work. They're at more liberty to improvise since the greatest fear is not litigation or an arbitrary complaint from patients with unreasonable expectations, but death and failure to fix an acute emergency. It's simple; back to the basics of medicine and surgery. It's also brutal. It's even beautiful in the moments when Sherlock manages to forget that John almost died. It gets easier as days go by to not think about it, but he still does, at least for 23.67 hours per day.

He helps out at the hospital, does what he can. Not because he wants to, but because sitting with John is difficult and he's not an orthopaedist and if he could do a better job fixing the torn tendons and the wrecked brachial plexus he would, but he's from the wrong surgical speciality, so he's useless.

Today, they've invited him to a case conference about a patient who is much more his division.

"No point in a decompressive craniectomy, unless you want him to stare at the ceiling at a care home for the rest of his life hooked up to a respirator. Look at the brain stem infarction," he says sternly when asked about his opinion after the imaging results have been reviewed.

Did someone try to do this to John, to condemn him as a dying patient, a hopeless case, practically already deceased, when he had nearly bled out on the roadside?

After the conference, he declines an offer for lunch at the Camp Bastion mess hall. He goes to John instead.

A worn paperback lies on the ratty blanket today, only a few pages read. John is dozing with the head of the bed raised to nearly ninety degrees. He says the shoulder hurts more when he lies down.

There's a bag of saline hanging from the IV pole with a red sticker slapped on it, denominating that something has been added to it. Antibiotics; not very broad spectrum. An invisible fist clenches around Sherlock's throat, and he grabs the paper chart from the receptacle at the foot of the bed. No computer-based patient records here – not in a country where electricity is so unreliable, and anything electronic would be a very hot item for thieves and IED-makers.

The only new development in John's condition is a slight fever that comes and goes. Lab work is otherwise unremarkable aside from John's haemoglobin level still being around 85. The trigger level for RBCs is often eighty for a healthy adult, and here, where safe blood products are worth their weight in gold and more, it might be even lower.
All in all, the antibiotics appear to be a means to err on the side of caution rather than an intervention. John had complained in one of his emails that the camp wasn't getting all the medical gear they were requesting, and the problem was particularly significant when it came to antibiotics. What if there is an infection, and it gets worse?

John opens his eyes, squints in the bright sunlight from the window. "Sherlock?"

Sherlock grabs the chair he had finagled from a waiting area and put it right next to the bed, clutching John's hand in his own. This is his favourite moment of the day, now, a reassurance of flesh and blood that this will end – that they'll go home, go back to their proper, real lives. That this is just an alternate dimension, a wrinkle in time that has temporarily taken over reality.

John crosses his fingers with his, grimacing as he shifts on the bed.

Sherlock thinks about London, of King's College, of the smell of fresh coffee in their kitchen. Of their bed with its crisp, cool sheets, the warmth of John pressing him down into the mattress, his head on John's chest, listening to a steady heartbeat.

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Maybe it's the stress and the foreign normal flora of bacteria. Maybe it's food poisoning. It hits suddenly during the night, and in the morning Sherlock can't even manage to drag himself up to report to the sergeant who has been assigned to keep an eye on him during his stay. The man comes by an hour later, and after surveying the scene he disappears, to be replaced with John's nurse – Officer Vasquez – sometime later. She brings him Gatorade, bottled water and biscuits, and tells him to call her Carmela just like John does.

From then on, she visits twice a day, keeping him stocked with fluids and easily palatable food and bringing in the latest news about John. She also makes sure they get at least one phone conversation a day.

John is worried about him. This isn't the way it should be. John is always the one looking after him, but now he can't be there when it's John who's actually and properly under the weather.

On the second evening of curling up on the creaky cot, still so exhausted and ill that he can't even stand up straight, a satellite phone is brought to him with a call from Mycroft. He doesn't particularly want to talk to his brother, but at least it'll be a distraction from the relentless stomach cramps. Hearing the voice of someone he knows is, admittedly, welcome. Talking to John when he's in this state will only make him worry more, and that's unacceptable.

He complains about the antibiotics situation to Mycroft, since he's Big Pharma, after all. He'd been reassured by an internist that the ones John is currently on should be very sufficient, but what if there's another complication and no better drugs are available? It must be a cost issue. The newer, fancier stuff is pricey until the patents wear off. Someone in the military requisitions office who understands less about medicine than the average cactus has probably nixed parts of orders solely based on cost.

Unsurprisingly, Mycroft somehow deduces that he's not well. "If you need me to attend in person, I'm sure I could arrange---" Mycroft starts, after listening to him rambling incoherently about everything that's been going on. Sherlock hears him typing in the background, already surveying options. Strategizing. Pushing pawns into place. This is what his brother excels at, and what has helped him weasel his way to one of the top positions in the pharmaceutical industry: making use of his vast network of connections to make things happen. Even though he's a civilian as well, Sherlock has no doubt he'd touch soil on Bastion within 24 hours if Sherlock asked him to.

He won't.

Instead, he manages a half-convincing dismissal of the suggestion that his brother hops on a plane. It would mean giving up. It would mean defeat. It would mean that John's prediction would have
been right – that he couldn't even look after himself, let alone the both of them.

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Dust swirls in the air when he finally draws open the curtains of the office. He's unsteady on his feet, but he knows he has to make his way to the nearest mess hall and eat something. If he has to even look at another banana or Carr's water biscuit, he's going to throw up out of sheer frustration and boredom.

Even cooped up in the admin building, it has been impossible to forget where he is. Mortar fire, distant gunshots and shouting is a constant feature of the nightly soundscape, and helicopters and planes leave and land all day and night long. Even though Camp Bastion is the size of Reading and surrounded by thirty-foot walls with razor wire and housing an admirable number of trained soldiers, the awareness that they're in hostile territory a long way from home creates a constant state of alert. It's a bit like being on call in London, really – anything could happen at any time.

Four days later, John is moved to the general surgical bed ward. It's a large, open space with twenty beds, and there's no way Sherlock could stay the night there with him just as he couldn't at the HDU.

When he can't sleep, which seems like a permanent state now, he goes to see John at night. He takes care to be quiet in order to give him and the other patients their rest. He sits by the bed and keeps vigil, resisting the urge to run his palm along John's arm, to lace fingers together like they often do at home just before sleep steals him away. The nurses don't try to chase him out, probably because there are no official visiting hours at Bastion, and they know he's a surgeon. Sometimes, the distancing prestige it gives him is useful. Mostly, it just alienates people.

John has nightmares, and he's jumpy about sudden sounds. Sherlock knows an army psychologist has met up with him as part of the preparations for discharge. Sherlock had tried to ask John about the appointment and but got the cold shoulder. He also gets ignored and subjected to one-syllable complaints when he helps John with something he can't manage with just one functional arm. Apart from the first day, John hasn't brought up the subject of what had happened when the IED had gone off, and insurgents had surrounded their envoy. Maybe his dismissal of John's guilt over not being able to help others had ruined his chances of being the person in whom John would confide. He's not good at these sorts of things. John believes he could learn, and he has, but it will never come intuitively to him, what others mean and want and assume and need. Not like it does to John, who seems to be able to read what he feels on his face, no matter how hard he tries to hide it all from everyone else. All he can read from John's face these days is a withdrawn dullness, a sense of waiting for something that will never come.

No one knows yet, what the long-term damage is. Sherlock has made a vow to find the best shoulder surgeon he can find when they get home to have a look at John if he's willing. Sherlock suspects he might not be. It's not logical or sensible, how John is behaving.

He borrows – well, alright, temporarily steals – a satellite phone from the hospital A&E so that he can call an orthopaedic surgeon he went to medical school with. Nerve damage is difficult to image, and there's no telling yet how well the ruptured tendons in John's shoulder will heal, but this much is certain, based on what the local trauma surgeon had seen and from John's current symptoms: the brachial plexus, meaning the convergence of upper limb and shoulder nerves, has been affected. No nerve has been cut, but the kinetic energy from the bullet travelling through the nearby tissues has given the radial nerve in particular quite a beating. Sherlock keeps his tone cold and calm as they discuss physical therapy, nerve grafting and spinal imaging, but when the line clicks off, he drops the phone on the floor from his trembling fingers. He can't tell any of this to John. Nobody knows anything for sure, yet.

He grunts in frustration, swiping the side of his palm across his closed lid to flick of the moisture threatening to gather there, and storms off to the surgical wing to see if there's something neurosurgical going on there that he could distract himself with.
Rescarch the conditions and facilities at the now-abandoned Camp Bastion was, unsurprisingly, difficult. Apologies to those who have actually been there – I have probably painted a bleaker picture of the situation there than what the reality was.

The Muse is relentless. This series will be continued with at least two more stories after Take Heart. I can't think of a better way to thank you all lovely folks who continue to enjoy the company of these incarnations of John and Sherlock than to give you more. All my recent giddy raving and squeeing on tumblr are the results of having an indecent amount of fun editing this and drafting the next instalment.

Thank you to relentless beta Seven, my wonderful cheerleaders ASilverGirl and AnyaWen and fellow author The_Moss_Stomper who called me a gigantic vortex of whump.
Belonging

Chapter Notes

I am humbled and honoured by how many fellow sherlockians have expressed their continued love and enthusiasm for this 'verse. There will be at least two more parts in this series after Take Heart.

My angst auditor, AnyaWen, and my tireless beta, 7PercentSolution, ought to get medals for their services.

The first time John wanders out of the Bastion hospital is to attend a memorial service for those who died in the attack that nearly cost his life. His arm is in a sling to take the pressure off his shoulder; he's still slow and hazy with morphine, and even acquiesces to holding on to Sherlock's arm until they step out into the dusty light outside.

It takes them nearly half an hour to cross the short distance from the hospital to the main assembly square. John had refused transport, saying he needs to stretch his legs. During the one kilometre walk, Sherlock is tempted a dozen times to insist he sits down or that they go back to the hospital, but John is adamant; his good shoulder is squared back, his whole form tense, his mouth a stubborn, angry line. He's an argument waiting to happen, so Sherlock keeps quiet. Occasionally, his hand hovers close to the small of John's back or underneath his good arm, but he keeps his distance. It's obvious John doesn't want to be seen needing assistance in public. There are his fellow soldiers.

The sun is setting as they take seats in the dry wind blowing across the square. The camp seems quieter than usual, and so does John. Sherlock expects him to react, perhaps to shed a few tears, to want to talk to people, for people to want to talk to him, but something about him keeps people away. He sits silently through the short ceremony, eyes mostly fixed on the four photos of the deceased placed on a table.

Sherlock is grateful that there are no lead caskets to stare at. They will have been flown home already.

He has never understood the need for these ceremonies, this theatrics. If John were in one of those photos, he wouldn't give a toss whether his fellow soldiers stood in a quiet parade in this Godforsaken desert. It wouldn't make one bit of difference to the fact that John's life would have been over. Both their lives would have been over.

Survivor's guilt is what experts say is often experienced in times like these. Pointless. John had no role in assigning life and death to those who simply happened to be in the wrong place at the wrong time. Sherlock suddenly realises he doesn't know who had helped John and delivered him to safety. Guilt is pointless, but gratitude is sometimes called for, even though that person may have just been doing their duty.

After the ceremony, John stands up, exchanges a few words with the general overseeing the proceedings. Sherlock politely stays back, feeling like an intruder. Then, John looks up at him, and Sherlock crosses the distance between the tent he'd been standing next to and John so that they could begin the walk back to the hospital.

When they stop at a kiosk tent to pick up a bottle of water, Sherlock plucks up the courage to mention that he'd been thinking about finding out who had evacuated John and made sure he got back to Bastion in one piece.
To his surprise, John tells him in no uncertain terms that he shouldn't seek that person out. "I've thanked them. You don't get what it's like in here, so it's not your business to go around talking to people. You can have your bit of adventure travel--", John pauses, his eyes roving over the sight of his partner.

Sherlock is wearing one of John's white T-shirts and a pair of borrowed combat uniform trousers finagled from somewhere by Carmela since he had arrived with nothing but the suit he'd worn to work.

"Don't think this place runs the way you're used to," John says, and there's a clear warning in his tone. "I know you, and you're going to make an arse out of yourself if you start strutting about the place thinking you're something because you operate on people."

The venom in John's voice is unexpected and sharp. Sherlock's steps falter, and he can't help blinking nervously as he tries to understand what revelation John is chasing here – what it is that he wants Sherlock to understand.

'I like him,' Carmela had said to him about John. 'He's not an arsehole like some of the other doctors here.'

Is this prickly demeanour simply John still being the way he is when he's here being an army doctor, and not at home with Sherlock? Or, is this something else? How could one deduce the difference, and would he know how to react to either of these scenarios?

John finally realises Sherlock has lingered behind and stops, turning to face him. "You look ridiculous," he says, and there should be a gentle, loving tease in his tone but all Sherlock hears is exhaustion and disapproval.

Sherlock could say the same. Why on Earth is John's admittedly very fancy sling bright neon orange? His hair is a mess, he has lost weight, and he doesn't look the way he usually does, not in any way. He looks like an imposter, a villain wearing John's skin. Why does John feel the need to chew him up like this? Sherlock came all the way here because he thought he'd be needed – he hadn't even stopped to think what he was actually going to do once he got here. Wouldn't John have done the same in his stead – done all that he could to get to him as soon as possible?

Of course, he feels ridiculous in these clothes, walking among people who actually belong in this place, people who have chosen to come here. He's not John; he's not an army doctor – that goes without saying – but does that make him something John looks down on, suddenly? Has he trespassed on John's territory?

Does John think him privileged, protected, effete – a liability?

"I didn't have time to pack," Sherlock says, carefully keeping the edge out of his voice. "This is all they have available here," he explains, spreading his arms towards the ground as though presenting himself. "I can't exactly go shopping for a suit." They shoot Englishmen here. John, of all people, should know that.

"It'll be dark soon. Let's head back," John prompts, shaking his head. "I'm dying for a cup of tea."

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Two days later, John is discharged. He limps when they leave the hospital, and the moment Sherlock notices that he marches John right back in through the A&E entrance to have his leg checked.

There must be an injury that's been missed. Incompetent idiots.

After three hours of poking and prodding, CTs and orthopaedic consults, the verdict is that there's nothing wrong with John's leg, except for everything that has happened since he ducked his head into a taxi outside their apartment and left London for this place. Left Sherlock. Left their life because he wanted something else, at least for a while.
John sits on the cot in his now former office and watches while Sherlock packs his things. There isn't a lot of them. All his army gear will be left behind, of course. He seems reluctant to place his service pistol in the packing box, although his duties haven't exactly required him to use it all that much. Whenever Sherlock asks whether he wants to leave an item behind, he says yes, as though he's trying to avoid taking to London any reminders of his time here.

Sherlock doesn't think there's any shame in being injured in the line of duty. He knows John is being recommended for a service medal, and John had told him he was going to decline. "I didn't do anything but survive. I didn't do anything useful at all when it happened. It's bullshit," he'd told Sherlock. That had been one of the only occasions he has actually talked about what had happened.

A helicopter flight transporting some higher officials to a summit takes them from Camp Bastion to Islamabad. No point in going to the British base in Kabul, since the security situation there has deteriorated and the only hotel that had kept its doors open to foreign nationals has temporarily shut down.

After Afghanistan, Pakistan feels like a haven of calm and safety.

Sherlock deposits John at the hotel Mycroft had arranged, then marches to reception. It takes little time to arrange a translator and a driver, and Sherlock requests to be taken to a souq. It's not recommended that Westerners venture to that part of town, but Sherlock doesn't care – the translator had insisted that this is where the best local artisans reside. This will be a small sacrifice in personal safety compared to John's stay in Camp Bastion.

From a shop on a quiet side street manned by a courteous older man, Sherlock buys a beautiful cane carved out of dark wood. It's decorated with a snake that circles the cane like a vine, which reminds him of the Rod of Asclepius and the Caduceus, symbols the medical profession had adopted at some time.

John accepts the gift without a word.

Instead of a military plane, they fly home in the first class of a commercial Aeroflot flight to Heathrow via Moscow, courtesy of Mycroft. John doesn't need a bed or a trolley – he says he can actually rest better sitting up.

Neither of them has slept much during the past two weeks – Sherlock hasn't slept properly since John had left London. Pain and nightmares slice John's sleep into hour-long slivers, and worry and unease keep Sherlock's slumber so light he wakes up every time John does.

He doesn't know what to do when John starts hyperventilating and talking in his sleep. He'd tried waking him up once, only barely escaping a right hook. Before Sherlock had even registered what was happening, they'd then ended up on the floor, John sitting atop his thighs with his fingers curling around Sherlock's throat, eyes unseeing with panic and alarm until Sherlock managed to call out his name enough times.

John had scrambled to his feet, eyes wide with shock and shame. He'd retreated to the bathroom, locked the door. Sherlock had told him everything was fine, pleaded for him to say something through the door but there had been no reply.

A nerve-racking hour later, John had returned to bed without a word and turned to face the opposite direction. Sherlock had gently placed a palm on his side, but John hadn't taken his hand like he usually does. Sherlock doubts John had slept a single minute that night, but he had succumbed eventually, the exhaustion of being constantly so stressed out by everything finally
wearing him down.

*It's alright,* he wants to tell John, but he has no authority to say that, does he? It doesn't matter if he had poured over a hundred articles about combat fatigue and PTSD in the business corner of the hotel: he doesn't *know,* hasn't *experienced* what John has gone through, so any advice or reassurance he might come up with can be dismissed by saying he doesn't know what he's talking about.

At least all those articles say that things usually get easier as time passes and life returns to normal. They'll soon be in London. They'll go back to work, have meals together, watch TV, go out. He will listen if John wants to talk, he will be present.

As they descend high above the barren sandy highlands, John surprises Sherlock by letting slip the mask of calm, slightly disgruntled indifference he has held onto for days now during the daytime.

He realises the cane is still in the hotel wardrobe. John hasn't used it once. The limp comes and goes. Sometimes, John seems to forget about it. *There's nothing physically wrong with his leg,* the head of orthopaedics at Bastion had told Sherlock when John was out of earshot. *Conversion symptoms are not uncommon with those injured in the battlefield. I think he should have been referred to one of our psych specialists for follow-up anyway, even if you hadn't come in with the limp."

Conversion symptoms. John will never accept such a notion. He'd protest that he's not some Victorian hysteric. Sherlock realises he can never suggest such a possibility to him; he'd clam up instantly.

"I know surgeons think anaesthetists are either lazy bums or failed surgeon-wannabes. What does that make a has-been anaesthetist, then?" John asks him. His bitter tone makes it obvious that this is a rhetorical question.

"You're not a has-been," Sherlock replies. *Intubation hardly requires exceptional dexterity,* he nearly adds but then realises there are plenty of anaesthetic procedures requiring stable, precise motor control of upper limbs. He has watched John skilfully perform ultrasound-assisted nerve blocks, insert infusion ports into central veins with very little perfusion, making the procedure riskier than usual. He has watched John cannulate needle-thin fine veins in the heads of premature babies smaller than milk cartons.

He curls his fingers around John's neck and pulls his forehead against his shoulder.

In the distance, visible through the plane window, some of the highest mountains on the planet such as Nanga Parbat loom far below them. Sherlock can't wait to put as much distance as he can between John and this place.
Sorry

Chapter Notes
See the end of the chapter for notes

London. Home.

Safety.

Normality. Or is it?

Sherlock goes back to work. John goes to physical therapy, until he doesn't.

Sherlock finds a calling card for a military-recommended psychotherapist ripped in half and dropped in the kitchen bin.

John stops leaving the house and starts downing his oxycodone tablets with cheap scotch. Sherlock is forced to admit to himself that he doesn't know what to do.

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Neither of them is exactly a morning person. Now, Sherlock downright hates sitting down at the breakfast table. Every morning, John sits by the kitchen island, glaring at him as though he's committing a mortal sin by going to work while he stays behind.

Sherlock used to enjoy having coffee together, planning the day, sneaking a kiss before John would grab the car keys. That moment with just the two of them there always seemed to ground him, calm him down, dissipate the nervous energy that anticipated the day's challenges in the OR.

Instead of having that – how can John not miss it, too? – he stands, mute and pale and useless, and all the clichétd things he could try saying plaster his tongue to his palate. It's a foul film of his inadequacy that makes him taste blood and regret all day.

John won't let him see the gunshot wound, which must be well on its way to healing by now. Not even in bed. He sleeps with a T-shirt on. He also won't let Sherlock see what little therapy exercises he's doing if any. He keeps all that secret, as though it is part of another life on which he has decided to close the door.

"What have you got on today?" John asks on a Thursday morning. His tone is a dare: throw it in my face, see if you like the consequences.

"A teaching round and some paperwork," Sherlock lies. What he's actually doing is a glioblastoma removal, the likes of which would usually make him excited and nervous in a good way. The localisation of it is exquisite: right frontal lobe unilateral lesion with a chance to remove the whole thing. Of course, the tumour type is so malignant that it tends to slither almost invisible tendrils into the surrounding brain tissue – Sherlock has sometimes described it as the Portuguese-Man-Of-War of brain tumours in the scarce lectures he has been forced to give to medical students. This case presents a chance not many adult glioblastoma patients have: it might be curable with the right combination of surgery, medications and radiation.

John has often been his anaesthetist for these cases, often arranging his clinical days around Sherlock's more challenging operations. It wasn't just a matter of wanting to spend time together; John is a senior neuroanaesthetist, and Sherlock knows that he is good. He's also not intimidated by Sherlock's OR persona. Being with John may have softened him up a bit when it's just the two of them present, but some habits he's had to learn in order to survive with his confidence intact, he hasn't been able to shake.
Maybe he doesn't even want to. Why would he want to reveal a softer underbelly for others to poke at? What would be the benefit? He's put up with plenty enough shit from his colleagues and other staff, fellow students and family members and relatives in his lifetime to want to protect himself.

When it comes to John, however, his armour is made of wet cardboard.

"We're out of toast," Sherlock suggests in a tone so perky he startles and disgusts himself with it. "You could maybe pick up my dry cleaning as well?"

Wrong, wrong, wrong! his brain screeches, and he doesn't even know why. John keeps misinterpreting everything he says like the devil reading the Bible. His brain nearly trips over itself trying to work out the likeliest insulting thing John could derive from an innocent suggestion to get out of the house and buy food. Could it be deconstructed as Sherlock thinking that it's the most useful thing he can do right now? Could John decide that it's an assumption that he's akin to a maid now since he's not fit to be a doctor?

He is fit to be a doctor. Why isn't he being one?

Sherlock braces for a fight, deciding that it's better that John blows off steam now, instead of letting this thing fester until Sherlock gets home because the explosion will be worse then.

He waits, presses his thighs against the back of a chair. Waits.

John heaves himself up from his chair. The sash of his bathrobe comes loose, and he doesn't fix it. He goes to the living room, drops down onto an armchair, clicks on the television but doesn't change the channel even though it's just advertisements that come on.

Sherlock leaves the kitchen, recovers his Oyster card from the top drawer in the foyer and spares one more glance at the back of John's head, visible over the back of the chair.

It would have been better if John had yelled at him, somehow. Anger would have meant that it mattered, what he said, and why it annoyed John.

He'd rather be yelled at than to be invisible.

-Mycroft is in town. He insists on lunch and poking about Sherlock's emotional state. For once, the guilt he heaps upon Sherlock for not keeping in touch with their parents barely irritates him. There are more important things going on right now than his brother's pedestrian ideas of proper social conduct."

"Any Christmas plans?" Mycroft asks, brows crouching towards the forkful of Salad Nicoise he's scrutinising as though he expects it to burst into flames. Sherlock had insisted on lunch at the hospital since he only has a short window of time available before he's due in theatre. And, also because it's funny watching his snooty brother having to put up with the meagre offerings of the hospital cafeteria. No Michelin stars here.

"Not my priority," Sherlock replies disinterestedly. He knows he should eat, and the minestrone is actually passable – even the King's lunch ladies sometimes strike gold accidentally – but his stomach clenches at the thought of food. He hates it when his hands start shaking from hypoglycaemia during an operation, and he's forced to request that juice be brought it with a straw that can be stuck under his mask. It's highly embarrassing, so he really should eat, but scraping up an appetite has been difficult lately.

It's part of everything else that's wrong, in a way that's difficult to put into words. It's hard to describe it as anything else than a shadow, a presence that follows him; a constant sense of dread that drags down his bones, kills his appetite and steals away his sleep. Work nearly feels like a Johnless haven right now, but that's just the thing – he shouldn't need one.
“You’d be most welcome to come to Zurich, the two of you. My housekeeper does an excellent roast turkey, and you could squeeze in a few days of skiing. I might even join you on the slopes.”

Mycroft has never been the athletic one, but being hauled up a mountain in a lift and then sliding down is within reason even for his lifestyle-rounded midsection.

A realisation hits: Christmas. Four months from now. Will the two of them even be—- how will things—-

Sherlock stands up. "I need to get ready. They must be already inducing anaesthesia."

Mycroft pats his lips for a ridiculous amount of time with the paper napkin. "Let me know in advance – the offer stands. As you know, Mummy and Father will be in the States so there will be no traditional gathering in Sussex this year.”

Sherlock hums noncommittally and hurries to the OR floor. Thankfully, the washing area just outside theatre number six is empty, and the window blinds that would make him visible to the surgical team are closed. He tries to force his breathing to calm down as he lets warm water trickle through his soapy fingers.

He needs to get his mind off John – there is a patient on the table he needs to focus on. It's his scalpel against the invading army of malignant cells. Nothing outside of what he sees in the eyepieces of his microscope can exist. There can be no apprehension, no doubt, no confusion as to who has the answers and who runs the show.

The theatre door swings open, the sound of it hitting the side wall of the washing area like a gunshot in his ears.

John.

He flinches and turns, wide-eyed, to stare at Michael, the supervising nurse.

"We're ready for you," he announces proudly. "Good timing."

Michael holds the door open for him, and he strides in, hands held up above his waistline. He fixes his gaze on the images pulled up on the screen, traces the lines of the tumour made visible by contrast medium, surveys the landscape of the brain's healthy structures, reconfirms in his mind his planned entry angle.

The anaesthetist – not John – wraps his hands around the patient's chin, fingers gripping the intubation tube like a vice. He then oversees the patient being moved upwards on the table so that Sherlock's assisting surgeon can attach a metal frame to her head to keep it absolutely immobile.

All Sherlock needs to do is to slip into his sterile gown, slide his fingers into the gloves held open by the scrub nurse, and get to work, once the patient's head has been washed with antiseptic and draped.

He makes the mistake of glancing at the readings on the vitals monitor which have been brought up on a wall screen.

A memory slithers in, uninvited and jarring: the readings on the monitor above John's head at Camp Bastion when Sherlock had first walked in and seen the carnage. He briefly closes his eyes, willing the images to disappear.

In order to do his job with absolute focus under the theatre lights, he needs to not think of himself, or the fact that that this woman on the table has someone out there who feels exactly as Sherlock had felt when he’d been told that the person who he loves most of all is possibly dying.

Get it together, you idiot.

"Music, please," he says harshly. He usually requests his playlist only after he has opened the passageway to the area of the brain or spine to be fixed, but today it's obvious that things are not
as they usually are.

The eager, somewhat competent trainee he has borrowed from Anderson for this, has finished attaching the Sugita frame. "That look alright to you, Doctor Holmes?"

He nods. Haydn's symphony number 96, *Le Miracle*, begins streaming in from the wall speakers.

He can do this. He *must*.

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That night, they might be lying next to each other, but they are effectively sleeping alone, and Sherlock can't take it anymore.

He wants to tell John about today's surgery without tasting a sourness in John's replies when he pretends to listen and to be interested enough to ask questions. He wants to share the triumph of having been able to remove the tumour, or being able to *fix* Mrs Lehman, to give her a chance to go back to her life after this nightmare of hospitals and tests and recovery.

John has that chance, too, a chance to go back to their old life, but he isn't taking it. The thought makes Sherlock angry.

He misses John. He misses the version of John who slaps his bottom and who shifts close to him in the morning with his erection nudging Sherlock in the stomach. He misses the casual kisses, the I-did-too-much-paperwork shoulder massages. He misses the John who doesn't look at him like he's something the cat dragged in. These days he is barely allowed to look at his partner without a 'what?!' being angrily directed at him.

John thinks he keeps staring because he thinks John is broken. In reality, he's drinking in the sight of John because it's all he's allowed, now.

He's certain they're both still awake, though it's close to one in the morning.

Their recently changed sheets are too stiff, and Sherlock is cold. He turns to his side which brings him into a spooning position. John mutters something unintelligible and readjusts his hips a bit. Sherlock reaches his arm across his torso under the duvet, fingers sliding down his groin – he's wearing pants, but they've slid down a bit. Sherlock is not really aroused, not really thinking about sex, but every time they've fought or Sherlock has been in an exceptionally bad mood, they find each other again like this. When enough words have been spent, this is how they reconnect – tracing familiar lines, letting shared pleasure smooth the last edges of conflict and confusion away.

God, Sherlock misses it so much that tears are prickling at the edges of his eyes. He curls his fingers around the top of John's iliac crest, strokes his thumb back and forth along the soft fabric there. He presses his cheek between John's shoulder blades, curving his spine so that their height difference won't prevent him from having as much of John's back against his body as possible.

John hums somewhat appreciatively, and Sherlock briefly raises himself to lean on his elbow to kiss his bicep. His fingertips find John's hair which feels coarse – much harsher in texture than it had been before Afghanistan. Sherlock makes a mental note to insist on a consultation with his own hairdresser regarding a suitable product to fix this.

He finds he has calmed down, and loneliness has now given space to a familiar sort of flutter at the bottom of his stomach. For a moment, he believes that things might be getting better. That they can fix this, that it's already been fixed, that this is all they need – time together. He decides to call Lestrade about some unused leave he has stacked up. There's a big general surgical conference happening in town this week which means lots of temporary OR closures and thus fewer things to do at work.

Emboldened by his nicely formulating plan, Sherlock snuffs out the last of his hesitation and grinds his hips against John's buttocks. He then slides his fingers deeper under the elastic of John's
Suddenly, John's hand snatches his away and places it on his arm. *Chaste. Dismissive.*

"Not in the mood, sorry," John tells him quietly. He sounds tired and distracted.

"It's fine," Sherlock mutters. He doesn't mean a single syllable.

Suddenly he hates the feeling of John's arm under his palm. Does John really want to do even that? Is it a consolation prize?

"Just go to sleep, will you, it's bloody late," John's raspy whisper orders. Sherlock tries to pretend that it hadn't sounded as cold as it had.

*Go away* is what John could have said, instead. It's just as well.

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"Look, I'm sorry about last night," John says, leaning on the kitchen table and gathers crumbs from it onto his palm. He had once remarked to Sherlock that he doesn't like glass tables because one can see the fingerprints on them easily. John doesn't like cleaning, but he likes cleanliness. John didn't like Afghanistan, but he doesn't want his old life now, either.

John doesn't know what he wants, not anymore.

Sherlock wants to say it's fine, that it's *all fine*, but his throat is dry and he can barely swallow.

"I'm just---- my mind's a thousand miles away from all that right now, sorry," John says, and he must mean it quite literally.

What is *all that*? Is it sex? The two of them? Everything related to Sherlock?

"How do other people do this?" John wonders bitterly, then takes a bite out of his toast.

Sherlock looks up from his mug of tea, alarmed and blinking frantically as his brain scrambles to decipher what on earth John means. How do people... what? Apologise? Recover from injuries? Have sex?

*Break up?*

"How the hell do doctors come back here to work? People out there, outside of the Western world have nothing, but here we've got posh people complaining about waiting times for breast reductions and not getting their cholesterol prescriptions renewed at A&E."

"Big Pharma should be doing more. I complained to Mycroft about how the hospital at Camp Bastion wasn't getting the antibiotics it needed," Sherlock offers.

John scoffs. "As though that's going to help the locals. They don't even have access to safe water, and you know as well as I do that those antibiotics are going to be used on some kid from Manchester who signed up for service because he thought the war was going to be as much fun as in his video games."

"Aren't there support groups for doctors returning to the UK after working in developing countries?" Sherlock suggests. He doesn't know how to relate to what John is saying. Sherlock very much enjoys having well-trained staff, sterile equipment, a reliable electrical grid and any instrument and piece of gear he needs, at his disposal. How could anything be better or work more enjoyable in countries where a proper healthcare system has completely collapsed or never really existed at all?

Of course, he understands on a surface level the motivation of some doctors to work with Medicins Sans Frontieres, the Red Cross and the lot – such work can offer freedom from
bureaucracy, a chance to see cases the likes of which are rare in the west and an opportunity to put stress handling and organisational skills to a test in a high stakes environment. Still, he doesn't get what is so wrong with their work and their life here that John felt he needed to get away.

John snorts. "A bloody support group is not going to change what it's like to be a doctor in Britain."

"Well, it doesn't exactly sound as though it was that much more fun in Afghanistan!" Sherlock snarls and storms off to their bedroom to get his jacket and overnight bag. He's on call again, and he finds himself hoping that he'll be kept in the OR all night.

A week later, all John does is, for lack of a better word, sulk. At home. All day. His upper extremity function is not getting better as fast as he would have wanted it to, but it's fine, really, as far as Sherlock can tell. He must have been doing at least some exercises, and his performance level must already be quite adequate for his current work duties.

"There's no reason why you shouldn't be able to go back to work after your sick leave ends," Sherlock points out, wanting to be supportive over a Chinese takeaway dinner.

John used to cook when he had time off. Not so much anymore. He should be able to, considering his level of recovery.

"Sherlock---"

"Thankfully your job entails as much admin as you can spare the time, for so even if you cannot do all the OR work you used to---"

"I didn't go to bloody Afghanistan because I'm so fond of office work."

"Even if you decided that going back to your current position is not for you, I have plenty of funds to allow you to just---"

"Jesus Christ, would you listen to yourself!"

"You don't really even have to work; I can easily take care of the both of us."

"Fuck you, Sherlock."

Chapter End Notes

I have no idea about the actual quality of King's College cafeteria food.
Their colleagues don't know how to approach the subject of John's injury. The anaesthetists keep their distance but at least send a Get Well -card, since John is one of their own; the surgeons treat the matter as though a gunshot wound is contagious. *Wouldn't trade places with him*, *at least anaesthesia can accommodate that sort of thing* are among the hallway comments Sherlock accidentally hears.

Their colleagues and other staff do ask Sherlock, out of courtesy, how John is doing. He doesn't share details, doesn't expose John to those idiots. Some of them may have taught him to operate on people, but John had taught him how to help people – how to bridge the gap between being the object of fear and a target of respect. John is the one he owes a debt to, and it seems logical that he wouldn't want his convalescence broadcast around. Sherlock doesn't know what he would want their colleagues to do or not do. He doesn't really want them to approach John, but it makes him feel powerless and frustrated and envious to hear their half-hearted sympathy and their polite concern since he's the one who has to go home and face the wreckage.

He isn't good at reading people, but there is a particular message that comes through loud and clear when they all look at him and talk about what has happened to John: *it's not fair because they think Sherlock is not half the doctor John is.*

Guilt chokes Sherlock's windpipe raw when he catches himself thinking that he's glad the injury didn't happen to him. John is right: he's selfish, inhumane and lacking in empathy if he can think such things. If he lost surgery, would the remaining good things in his life be enough to sustain him? He likes to think that having John would be enough, somehow.

John seems to be quite certain he has lost his ability to do anaesthesia, and Sherlock doesn't understand why. He seems to be doing fine.

If the worst-case scenario somehow becomes a reality and John has to change specialities or retire, can Sherlock be enough for him to stay happy? Has he ever been enough, since John went to Afghanistan in the first place? He wouldn't trade places with John. John wouldn't want him to. John wouldn't wish this on his worst enemy because that's the sort of man he is. There had been signs that John had thought he was ridiculous coming to Afghanistan in the first place, which makes Sherlock doubt that he's ever going to be the sort of man John thinks as his equal.

He doesn't believe it, not entirely, that John would have left to get away from him, but the three-month tour of duty could have just been a starting point if the sniper's bullet hadn't intervened. Where would John be, if they weren't together? Would he have left King's and London behind, as he had once before, and tried to build a new life somewhere else instead of a short stint abroad with the stone of Sherlock hanging around his neck?

He would follow John anywhere, but would John ever ask him to do that?

Last week, at a weak moment, he had actually stammered through the question of whether John had left because he was unhappy with their relationship.

*Not everything is always about you, you bloody idiot,* John had snarled at him. *Knowing you, it does make sense that when I get shot, you somehow think you get to wallow in self-pity.*

Sherlock had retreated to the bathroom, ran himself a bath. Eventually, John had knocked on the door. Sherlock hadn't replied anything.

*I didn't go to get away from you,* John had told him through the door.

Sherlock had slid down in their large clawfoot bathtub so that the water had flooded his ears and drowned out whatever else John might have taken thirty minutes and obviously some more whiskey to pluck up the courage to tell him.
Two weeks later, Sherlock sits in the dark in John’s office. John is still on sick leave, although he won't tell Sherlock why exactly. Sherlock is quite certain he could now easily perform his duties.

He shifts in John’s creaky office chair, and his elbow knocks a mug filled with pens to the floor. He gathers the items and shoves them into a drawer.

All of his own long-overdue paperwork has been sorted. He has gone through tomorrow’s list of patients twice. He has checked and double-checked the patient records written by the registrar covering the ward this week. There's nothing on at A&E.

It's late, but he doesn't want to go home, so he watches car lights sweeping across the ceiling in abstract patterns.

He's less than himself. Diminished. He doesn't fit into his life anymore because John's anger fills all of the empty spaces in it. Even when he's not yelling or flinging sarcasm it's still there – barely contained, directed at anything and everyone.

Footsteps in the hallway make him look to the doorway.

Lestrade.

"I half thought this place was haunted. What the hell are you doing sitting here in the dark?"

"Thinking."

"About what?"

Sherlock draws a deep breath. Work has been a relief these past few weeks, the OR days consoling in their predictability, and even the outpatient clinic he usually hates has provided some distraction.

At home, he can’t breathe because everything he does is wrong.

He doesn't reply to his boss' question. John doesn't like him discussing their home life at work.

"How's John?" Lestrade asks. The man is not John's boss – it's actually vice versa, but he is a much more senior colleague than either John or Sherlock, and he's known John for years. His concern has been genuine throughout this ordeal. Right now, it makes Sherlock feel exposed and brittle.

"He's regained upper limb abduction above ninety degrees, and it looks like the numbness in the radial nerve dermatome is now completely gone," he explains, hoping this will be enough to close the case.

Lestrade drops into the chair across the table from him. "Good, that's good. I knew he’d put in the work and get back on his feet."

There's nothing wrong with John's feet. When he's angry, he forgets that he's supposed to have a bad leg. It's obviously psychosomatic, but when Sherlock had pointed this out, John's reply had been a mug half-filled with tea hitting the kitchen wall. When John is drunk enough, he stops limping.

"That's not what I meant, though," Lestrade adds. "How is he, really? I can't get a straight answer out of him as to when we can expect him back."

"That's up to him and vocational health."
"And, it's not just him I'm worried about," the older neurosurgeon says pointedly.

Sherlock's head snaps up. "Why?"

"My best and moodiest neurosurgeon has stopped complaining about being assigned bourgeois spinal surgery unworthy of his time and talent, and now I find him moping in his partner's office in the dark. You've been so well-behaved and quiet lately that people are really starting to notice."

"Shouldn't you be happy, then, since you and John have always insisted I'm a complete pain to boss around?" Sherlock retorts back with little enthusiasm.

"What's going on, Sherlock?"

He swallows, a tightness in his heart. He has never been good at this sort of thing, dissecting his feelings or interpreting the emotions of others. "The limitations John's shoulder injury might cause in the long term can be managed with rehabilitation and the tailoring of his clinical duties. He no longer needs pain medication apart from some nights. There really is no cause for concern." He wonders who exactly he's trying to convince.

John is fine, but the two of them aren't. They don't have sex. John doesn't want him to see the scar. They sleep in the same bed, but he's so lonely it hurts like he's the limb that has been mauled by a bullet.

John went to Afghanistan, and he never came back.

Suddenly, it's too much. Sherlock stands up and pushes the chair away with the backs of his knees. He means to leave, to find a quiet bathroom to calm down in, but Lestrade stops him, grabbing his shoulders with a vice-like grip of his fingers. "Sherlock."

"It's not alright, none of it's alright," Sherlock manages to get out before the sudden, racking sobs take over.

Lestrade's hug is so tight he can barely breathe. "I'm so sorry, lad," he tells Sherlock quietly.

It's the first sorry Sherlock can actually believe. The first one that doesn't feel infuriatingly fake.

It's just a word. It doesn't fix anything. Sherlock wonders if he could possibly be more useless than this: he's sobbing his boss' shirt wet because he doesn't want to go home.

"We'll sort it out, I promise," Lestrade says when Sherlock manages to get his breathing somewhat under control and pulls back. "I promise. Have a walk around the building, get a cab and go home. Don't think about any of it tonight. Give John some space and try to sleep. We'll work it out together."

Sherlock nods and buttons his jacket, its familiar, tight fit encasing him like a safety harness.

It's good to have someone on his side because there's a chasm in his life that's getting wider and wider and John is standing on the opposite side of it.

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The following morning Lestrade drops by at their flat without prior announcement.

It's a Saturday. John is wearing the same bathrobe he's been in for a week.

Sherlock refrains from clearing out the empty bottles. He wants Lestrade to see them. He wants someone to see.

He retreats to the bedroom and closes the door while Lestrade sits John down on the sofa and gives him some lecture. Sherlock doesn't want to hear the details of it, doesn't want to hear the words he should have found and used instead of being silent or contrary, or falsely encouraging,
John yells a bit. It might be good because Sherlock realises he hasn't even done much of that during the past few days. Yelling is better than the silence that hangs like a suffocating smog in the flat and makes Sherlock want to merge into the sofa cushions so that neither of them would have to put up with the fact their existences have somehow stopped fitting together.

Then, John gets so loud that his words can be easily heard through the door: "I went to Afghanistan because I didn't feel like I had a sodding career, and not only did it not fix that, it fucking ruined it!"

Greg’s reply is too quiet to make sense of through the door.

To Sherlock, there is nothing surprising about John's statement – he could have told Lestrade as much. The real problem – the one much harder to fix than ruined tendons or broken bones – is that he is convinced that John blames him, somehow. Blames him for not going through what John went through, for not having the understanding awarded by suffering through what he has, and by experiencing life on the battlefield. Maybe a part of him envies and even hates Sherlock for something neither of them quite understands. John would probably regain most, if not all, of his skills and his dexterity if he focused on the rehabilitation, but instead, he's already grieving. Is he grieving, most of all, the chance to break free of the life he had felt had become stagnant?

After some time, there's a knock on the bedroom door. Sherlock is startled, and he pivots on his heel, patting his jacket sleeves in the throes of an anxious compulsion requiring a nervous tick to exorcise.

"Sherlock? Come have some tea," Lestrade says after opening the door a sliver.

Sherlock tries to read in his tone all the things that have been said, tries to rip out the knowledge of whether any of it will help, tries to desperately deduce if John is now furious at him for bringing their senior colleague into the situation.

He follows Lestrade into the kitchen. "It's going to take time," Lestrade tells him in a low voice before they are within John's earshot.

"It already has," Sherlock snaps back. He doesn't even know where the sudden anger has come from.

He's surprised to find that John is making the tea, using his good arm to support his bad one – not bad but injured, recovering, Sherlock sternly corrects himself. He is doing things slowly to avoid spilling anything as he fills three mugs.

John hasn't made tea or cooked or done anything else remotely chore-like since they've been home.

*What did you say to him?* Sherlock wants to demand of Lestrade. *What did you say to him that I couldn't?* He bites his tongue and lets the taste of coppery blood drown out the words in his head. It's premature and naively optimistic to think this conversation changes anything.

"I was in a car accident when I was just out of registrar training," Lestrade explains to Sherlock. "I thought I’d lost the chance to be a surgeon. It was hell getting back in the saddle. We talked a bit about that, didn't we?" he eyes John carefully, his tone stern and knowing.

John nods. He's still avoiding Sherlock's gaze.

That night, a warm hand finds Sherlock's under the duvet and doesn't let go.

"I'm sorry," John whispers. "I love you so much. Everything's gone to hell, but I love you." His
"I don't see how those are connected," Sherlock admits, shifting under the bedding so that he can enclose John's hand inside both of his palms. He feels protective, fearful and strange.

"I was waiting for you to say it, 'I told you so'. I was waiting for you to say that I was an idiot who did this to himself."

Sherlock scrambles to a sitting position, letting go of his grip and frowning at John in the dark so hard that he's bound to sprain something. "I don't understand. You didn't shoot yourself."

"But I made the decision to leave. You didn't like the idea, and nobody at work probably gets it, either, and now you all look at me as though I got what I deserved."

The statement is unfair. How would John know how people would look at him because he hasn't set foot at King's College a single time after coming home?

Sherlock wiggles his toes under the duvet and shoves one against John's calf, eliciting a yelp.

"God, have you got any peripheral circulation at all?" John asks, but there's a bit of his usual gentle tease in the tone. He entraps Sherlock's feet between his ankles.

John hasn't talked to him like this for--- for a long time. "I can't pretend to be any sort of an expert in human nature, but I most certainly do not think like that, and if somebody does then I'd be very willing to punch their lights out," Sherlock announces.

John actually laughs. The sound tingles down Sherlock's spine in the dark, and it feels like it's been years since he heard it last.

"I'm too tired to think," John says. "We'll talk tomorrow."

Sherlock closes his eyes, focuses on the feeling of John's knees bracketing his legs and their fingers joined together. As much as he tries, he can't entirely keep away the realisation that John's smile is still broken, and they are still where they were before he left. It would be tempting to believe that things may have taken a tentative step towards normal, but he's never been an optimist.

He turns to his side, slides his hand onto John's stomach and tries to will himself to sleep.
In the morning, John seems lost in thought as he fries eggs in the kitchen. Sherlock wonders if it's their conversation from last night that has him preoccupied.

After tossing and turning for hours, Sherlock had managed to push it to the back of his mind, deciding that he shouldn't put too much stock in it. Things could still go wrong. This could just be a last-ditch effort by John to keep liking him.

John leans his palms on the kitchen counter, hangs his head for a moment, then plates the two portions of eggs and turns off the stove. Sherlock quickly slides into a chair before John puts the plates down. John hates it when he's serving food, and Sherlock lets it get cold before coming to the table.

He's quite certain he should address last night's conversation to broadcast its importance, and his commitment to continuing it, even if he doesn't know how. What John had said about expecting Sherlock to say *I told you so*, to try to prove that the whole deployment was a stupid idea to start with, seems strange. Why would he want to be berated? Isn't it enough that he got injured? Why the self-flagellation? It's not his fault the convoy was hit. He could have just as easily come home safe. Why does he seem to *want* Sherlock to judge him?

In the cold light of morning, it should be easier to treat facts as facts, to push away sentiment than in the dark of the bedroom at night.

"So, was it worth it?" Sherlock asks, keeping his tone neutral. "Apart from getting shot---" he grits his teeth because it still feels like being stabbed himself, acknowledging that it happened, that John had nearly died. Still, he can't quite bring himself to blame the man for it.

John lets out a hollow laugh. "It's not like nobody ever gets hurt out there, so getting shot is not exactly an impossible outcome." He sounds defensive.

"Did you get out of that deployment what you wanted?" Sherlock reiterates.

"Well, I didn't even finish my tour."

"That's not what I meant. Did you find what you went looking for? A bit of change? A chance to do your job without all this bloody bureaucracy? A chance to hone your skills, to test your abilities to work under duress? An opportunity to see the kinds of injuries we don't get here? To widen your skills back to what they were right out of specialty training? Did it make you feel like you still have all the options in the world to do what you want?"

John's silence is *loud*, somehow. "I had no idea you... understood all that."

"You didn't go there to spite me. You just needed more, just like I sometimes needed... *more*, before I met you."

"Are you seriously comparing Afghanistan to drugs?"

"Maybe."

John lets out a slightly ragged sigh. "You may be right."

"So, I reiterate: did you find what you needed out there?"

"I don't know. Maybe," John says, and this time he doesn't take a lot of time to work out his answer. He sounds a bit distant, as though remembering something.
"Then nobody has the right to judge you."

"As you said, I have options. It's a whole different thing, though, whether I'm in a situation where I can reasonable make use of those options. It's going to be the same shit waiting for me at work."

"It was always going to be the same shit waiting for you at work when you got back," Sherlock argues.

He has a nagging feeling that there's more to this having options thing that John is saying out loud. Did he enjoy being single? Or not being tied down by anything or anyone? Sherlock knows about his army nickname: Three Continents Watson. He'd overheard it when they'd met up with some of John's army comrades from his previous deployment. That had been a horrible evening. Sherlock had mostly stayed silent, pretended to enjoy the grotty pub, and the pint of beer one of the men had insisted he should try. At least John hadn't hesitated to introduce him as his partner – they've been together long enough that he's had plenty of practice revealing to people he's bisexual. Still, the army can't be the most tolerant of places.

John gives him an exasperated glance and pushes away his plate, now empty. It seems that army life has re-educated him in the art of eating fast. "I just don't know who the fuck I am. I know that even less now than I did before I left. You're the surgeon, the star, the prodigy, the one who invents brilliant stuff. What am I? A paper pusher? Sherlock Holmes' significant other? I never had a plan, you know, I never set myself these goals, and now there are no milestones to reach at all. Is this what is left for me, the best that I can do?"

Sherlock wipes his mouth and places the napkin on the table. He recalls what he had been thinking the night before. Last night, he may have been intoxicatingly happy that they no longer felt miles apart, but that had only lasted for a moment, and he is nevertheless terribly worried about the reasons why John had felt the need to leave everything behind for a while, including him. How can it be John who doesn't know who he is, where he belongs, what he's good at? It's Sherlock who has always been the outcast, the one whose abilities everyone always questioned, who belonged nowhere and with no one. John saved his career, saved him from a lifetime of loneliness, showed him that he could learn and do better and connect with others. How could John sit here and tell he's the one who's lost?

He looks up, fixes John with the look of determination he knows he must gather right now because apparently, he needs to have enough of it for the both of them. "I know who you are. I may be the surgeon who the patient thanks afterwards, but without you, I'd be useless. I am the precision instrument, but you're the life support system. When I operate, I'm blind to everything but the surgical field. It's bullshit that the surgeon is the only one holding someone's life in their hands – if the patient never even reaches the OR alive, then the only one operating on them will be a pathologist. We could amass a room full of trophies and research awards and accolades, but we're not doctors without our patients, and every one of them who survives is a triumph the likes of which most people never get to experience. I may appear to enjoy the peripheral things about building a career, but that's not what this is about, deep down. What draws me in is the brain in front of me, the one I can operate on, the one I can fix, and I can't do that without you. So what, if some of your time is spent ensuring that the unit runs smoothly? You still get to do what we were trained for, and unlike your juniors, you get to pick the best and the most demanding cases."

John looks sceptical still.

Maybe Sherlock has used too many sentences starting with "I"? How does he make John understand, that the most important thing is the here and now of what they do in the OR, and it doesn't matter one bit in which hospital, in which country they do it? "Sure, I may fix the problem the patient has, but you give me the time and the resources to do that. You're the oxygen in the lungs, the clotting factors in the blood, the blood pressure that stays high enough to reach beyond the borders of the injured brain. You must know why anaesthesia as a field was born – It was because the required knowledge base and the skill level reached so high that surgeons had no chance in hell to learn all that and to learn how to operate, let alone do both things at once. We need you. I need you, most of all because when I know you're there, I believe in myself more.
You have my back, John, and I have yours."

Now, John looks quite speechless, but Sherlock isn't done yet. Now, comes the hard part. He doesn't say things like this because often it goes horribly wrong, so he'll just have to hope that John understands what he means even if he may fumble a little. "But, let's forget about surgery for a moment. You are not just John-Watson-Consultant-Anaesthetist, you are my John, and I wouldn't be who I am today if it weren't for you. I am a ridiculous person redeemed only by my excellent taste in men, and when you picked me---"

John swallows, lips parted, looking devastated but somehow, it's devastated in a good way. "Sherlock---"

"Shut up, John. If you interrupt me, I will never manage to say this even though I need to. You picked me when you could have had someone arguably more sane, normal and perhaps also female, and that makes me feel like I've achieved something. Not as a surgeon, but as a---" he trails out, so very unsure if what he's saying makes any sense at all. "Sherlock," John tries again, grabs his hand on the table and encloses it into his own palm.

"You saved my career. You went to Afghanistan, twice. You do things I couldn't ever do, because you know I'm much more self-indulgent and much less brave. And, if I need to keep reminding you of that, I will. Because I know who you are, and I love you."

John rises from his chair so fast it rocks slightly on its legs. He wraps his arms around Sherlock and presses his lips to his hairline. "How are you mine?" he whispers, and his voice is wet with tears threatening to fall.

"I do wonder," Sherlock jokes, and John makes a half-hearted attempt to tickle him.

It feels a little easier to breathe, to be, right now. Things are not alright, but a bit of the old John seems to be trying to break through.

John stands up straight, letting his arms drop from hugging Sherlock.

He already misses the warmth of John around him, tempted to step closer and reclaim the embrace. "Why would it matter if I said 'I told you so' or not?" he asks.

John retakes his seat and downs the last of his espresso.

"Why would it help if I enabled your self-flagellation? You're quite good at it on your own." Sherlock worries his lower lip between his teeth. He doesn't want the rest of his espresso; it must've gone cold already.

"As I said, I had no idea you understood or accepted on any level the fact that I went and got myself nearly killed. If you did something idiotic like that, put yourself in danger, I'd be so fucking mad."

Sherlock doesn't quite know what to reply. Has he changed any of John's thinking about the need to blame himself?

God, this is hard, trying to deduce what other people are thinking or feeling.

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A week later, they take a cab to work, since John is a bit apprehensive about driving. He shouldn't be – his shoulder appears admirable rehabilitated. He had had it assessed by a physical therapist handpicked by Sherlock after consulting some orthopaedics specialists.

John is still apprehensive about a lot of things, which is why Sherlock had had a word with
Lestrade over the contents of John's calendar for today. He knows that Greg has insisted and vocational health has recommended that John should seek counseling. Sherlock is certain John will try to avoid making good that that promise. It's obvious the nightmares haven't stopped, he's still easily startled and moody. Sherlock still feels like there's a dark shadow intruding on their relationship – it's hard to pin down its exact nature, but it's there.

He has read up on PTSD. John probably can't fix any of it himself. Sherlock doesn't put too much stock in psychology, but it seems that some therapy methods do have a bit of evidence to back them up. They need an expert, but that'll happen later. Right now, they need to find a new normal.

At the hospital's main lobby, where their paths often diverge as John heads up to the management wing and Sherlock hurries to change into theatre scrubs, he grabs John's sleeve and determinedly leads the way towards the elevator that will take them to the locker rooms.

"We're doing an elective lap chole," Sherlock tells him. "I promised to fill in for the standby general surgeon since we're understaffed, and I'd love to have our best gasman on board."

He hasn't done a laparoscopic cholecystectomy in two years, but he has more than a hundred of fifty of them under his belt from his training days, and the endoscopic things he does within his own speciality are much more demanding.

They really are understaffed, but usually, hell would freeze over before he'd volunteer or anyone would dare to ask him to fill in at the general surgery service since he very much prefers the elegance of brain surgery to digging around in someone's bowels. Today none of his preferences matter because this is about John. Something simple and routine is needed to get him back in the saddle, and it needs to happen sooner rather than later. This case will be a bread-and-butter thing for a consultant anaesthetist in a way that brain surgery could never be. He has decided that it's exactly what John needs.

"You're doing a lap chole?" John chuckles. "This I have to see."

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Twenty minutes later, Sherlock pretends to be reading the patient notes in the corner of the OR while John goes through the WHO surgical checklist and starts an IV in preparation for the anaesthesia induction.

Sherlock had personally made sure that Maddie, John's favourite anaesthesia nurse, a stoic Welsh matron, is on duty. She passes John a set of syringes.

"Any questions, Mrs Harding?" John asks, and the patient shakes her head. "Happy to get rid of that gallbladder?" he jokes, and the woman on the operating table gives him a nervous smile followed by a grimace as the milky, white propofol solution John is injecting into her IV begins stinging as it makes its way through her veins. "Just breathe, this won't take long."

Soon, the patient stops fidgeting and closes her eyes. John starts bag and mask ventilation while Maddie sets the muscle relaxation electrodes on the patient's hand to calibrate.

John hasn't glanced at Sherlock once, which means that Sherlock's hunch about him being a bit nervous about returning to work had been right. Usually, John chats and even jokes around a bit while doing a routine induction. When an anaesthetist appears relaxed and is cracking jokes, things are fine. When they go silent and start bouncing around doing a lot of things at once, something has gone wrong.

The whole team knows what has happened to John. They all know how long he's been out of the game. He's a senior consultant, and he should be able to do this in his sleep, and his shoulder should be fine enough to handle a routine intubation just like he has already managed a routine IV cannulation, but Sherlock knows it's not that simple. The confidence of a doctor in an operative field that requires quick decision-making can be a brittle thing. Sherlock's own concentration and
performance can easily suffer when he's upset, distracted or has had a long holiday. If he's honest with himself, he hasn't been at his best lately. A thought occurs: it's probably the reason why Lestrade had been assigning him to those asinine bread-and-butter spinal cases.

The train-of-four index in the relaxation section of the patient monitor has dropped to zero. John puts aside the mask and the Ambu bag, preparing to intubate. Since he had preoxygenated the patient before induction and bag-mask ventilated her with eighty percent oxygen while waiting for the drugs to kick in, he'll have plenty of minutes to achieve a secured airway.

Maddie glances at Sherlock, and to his surprise, passes him the cardboard emesis basin containing a laryngoscope and a lubricated intubation tube with an air cuff syringe already attached. "Would you like to do the honours?" Maddie asks him and Sherlock nods.

John glances up, hand extended to receive the laryngoscope. He snorts with a smirk. "It's not every day I get you as an assistant."

"Merely making sure you don't cock up your triumphant return," Sherlock teases. It's a risky move, throwing in a bit of humour, but he prays that he has deduced right based on everything he knows about John that this gentle challenge might be enough to abate some of the nervousness.

"Prat," John mutters and slips the laryngoscope into the patient's mouth. Sherlock notices he clamps his arm against his side to balance it, and he is squeezing the laryngoscope so hard his knuckles are turning white.

The seconds it takes for John to advance the instrument deep into the throat of the slim, anatomically reassuringly average and easy-to-ventilate patient Sherlock had cherry-picked, feel like hours. Eventually, John's hand reaches out again while he keeps his gaze locked into the sight that has now opened from the patient's mouth to their trachea through the vocal cords. "Tube, please?"

Sherlock passes him the intubation tube, John threads it through and Maddie steps in to fill the air cuff.

"Twenty-three centimetres from the teeth," John tells Maddie. "I'll listen to the lungs, but I think you can tape it already. Unless Sherlock wants a go at that," he asks with a wink.

"God, no." He's not going to dig around in someone's saliva to fasten the intubation tube in place.

John adjusts the ventilator settings, empties the patient's stomach with a suction tube and then steps back to admire his handiwork.

Sherlock watches him, feeling almost light-headed with relief. *It's going to be alright.*

He has stopped like he's losing pieces of himself every time John refuses to look at him. Things are not fixed, they are not perfect, but it's going to be alright. He's going to make sure of that.

Sherlock knows what it's like not to be certain of the future, to fear that all has been lost due to some stupid decision or serendipity. That's how he'd felt after he had left The National and when he'd been facing a suspension due to drugs from the prestigious private school he'd been sent to.

Being invalided home from Afghanistan is not going to define John. He is the one who helps Sherlock remember that he doesn't have to be defined by his shortcomings, and he wants to return the favour.

"Welcome back, Dr Watson," the scrub nurse tells John with a smile, echoing everyone's sentiments.

She then turns to Sherlock. "Dr Holmes, we're ready for you."
That night, they make love for the first time in months. Finding a position that doesn't put too much strain on John's shoulder takes a bit of negotiating, but it's fine. It's all more than fine. They even end up taking turns topping that night – a rare occurrence, since they tend to be quite set in their preferences. Perhaps they both need to feel a sort of equality right now. Maybe John wants to show himself that he doesn't need to prove anything to anyone, and perhaps Sherlock doesn't want to be the one in charge like he feels he been for the last months. They take things slower than usual, and not just because of John’s injury. They need to take their time tonight, to rediscover each other.

They never stopped being in love; there were just other things in the way.

"It all just got lost in all the commotion," John says and kisses Sherlock so fiercely he nearly bruises a lip after they've collapsed in a sweaty heap on the sheets, spent and fulfilled and not even caring about fetching a flannel anytime soon.

The bullet had torn through John's shoulder, not his heart.

Never his heart, because I have it, Sherlock thinks. I still do. He turns to his side on the cooling sheets, burrows into the space between John's arm and his side. "I have a salient pontine oligodendroglioma on the table tomorrow morning," he tells John, his voice muffled by impending sleep and John's stomach where he has buried his face. "Would you care to join me?"

"Wouldn't miss it for the world."

—— End of Part 5 of "You Go To My Head" ——

Chapter End Notes

Doctors Holmes and Watson will return soon in....
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