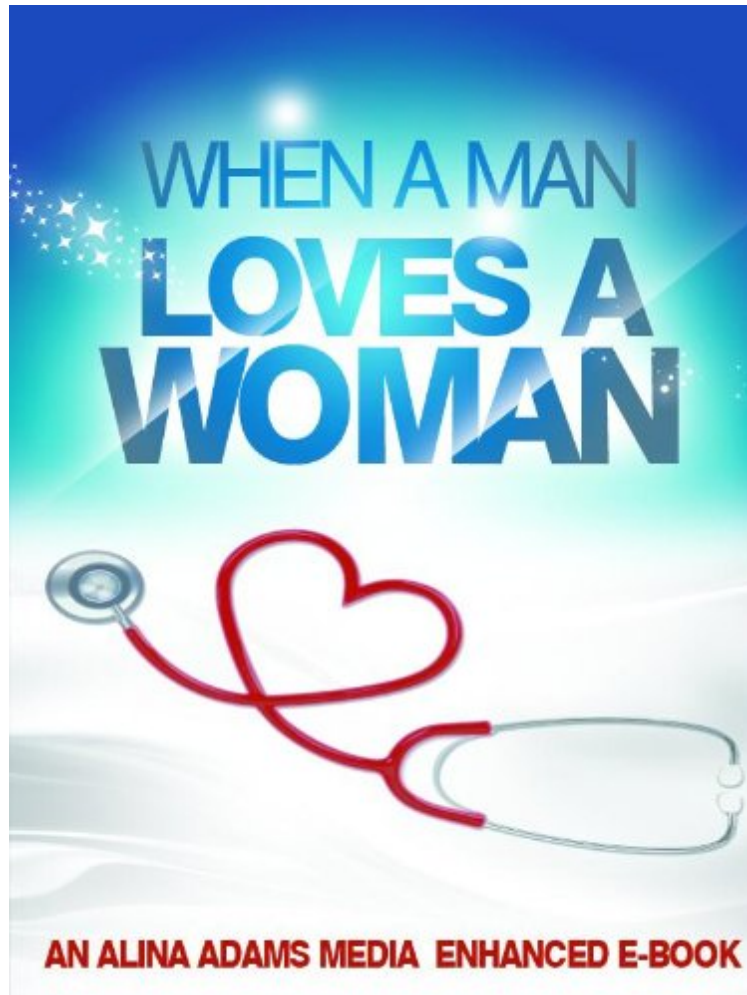


[Mobile pdf] When a Man Loves a Woman: Enhanced Multimedia Edition (English Edition)

When a Man Loves a Woman: Enhanced Multimedia Edition (English Edition)

Von Alina Adams

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Von Alina Adams : When a Man Loves a Woman: Enhanced Multimedia Edition (English Edition) before purchasing it in order to gage whether or not it would be worth my time, and all praised When a Man Loves a Woman: Enhanced Multimedia Edition (English Edition):

KundenrezensionenHilfreichste Kundenrezensionen0 von 0 Kunden fanden die folgende Rezension hilfreich. I loved this work...a lotVon Ein KundeDuring the early eighties, James Elliot and Deborah Brody became best friends as they attended medical school together. James secretly loves Deborah, who remains faithfully devoted to her understanding husband Max, a commodity trader.In 2000, both work at Los Angeles Valley Hospital. Elliot runs the renowned pediatric trauma medicine department while Brody heads up the Pediatric Neurosurgery Department. They remain

close friends, though Deborah still loves Max. However, the unthinkable occurs when Max suddenly dies from a heart attack. Elliot supports his best friend through her grief, but one night they lose it and make love. While she wants to return to being buddies, he wants her to be his bosom buddy forever. *WHEN A MAN LOVES A WOMAN* is an entertaining contemporary romance that centers on friendship between the genders. The lead characters drive the story line as their strong friendship turns into a passionate love. Though the two doctors are a charming couple, Max is the rare character that gains reader respect. He not only approves his spouse's friendship with Elliot; he encourages it because he trusts her with every cell in his body. Alina Adams provides readers with an enjoyable medical romance that will send the audience seeking *ANNIE'S WILD RIDE*. Harriet Klausner 0 von 0 Kunden fanden die folgende Rezension hilfreich. A tremendously talented writer, BUT the book needs polishing Von Ein Kunde I was torn, oh so torn, on what grade to give this book. It's really 4 1/2 stars for me. On the one hand, Ms. Adams is incredibly fresh, imaginative and unique. Her characters are grownups, and do truly original things like build card houses or fly nonstop to nowhere while grieving. She also has a talent for imagery and especially metaphors, for example: "the people in the window were like the negatives of a photograph, ghostly visages who merely looked like the two of them." I loved the characters, the plot, and the relationship in this book, and I truly believe Ms. Adams has the potential to become one of the best romance writers in the genre, as great as Laura Kinsale, Patricia Gaffney or Judith Ivory, but with a contemporary flair. HOWEVER...THIS book doesn't live up to its potential not because of any big problems but because of a hundred little ones that could easily have been fixed. One, thing, that drove, me, absolutely, bonkers, was, all the, *UNNECESSARY COMMAS*, in this, book. Examples: p. 148: "And, by the way, Elliott, please remember, you never... But, you are..." or "Then, I say, let him try." This is a problem not just with dialogue but with description as well. The infestation of commas breaks up the rhythm constantly. Sentences that are otherwise great stumble and hesitate, stop and start, with, ur, um, uh, uncertainty - on practically every page, and often immediately before the last word in the sentence when dramatic impact is essential. There are also unneeded hyphens in what should be single words, like (p.159)"jump-start" and "break-dance." And the book contains copyediting and grammatical mistakes, such as (p. 176) "The passionate details of four months ago had long been encrusted with the guilt and recrimination and chaos that had followed in ITS wake." In this sentence "its" refers to "passionate details," and should therefore be "THEIR wake." Unnecessary sentences explain and spell out things we already know and don't need to be TOLD because Adams has already done a wonderful job of *SHOWING* them. I was irritated by the number of single-sentence paragraphs; this technique is dramatic only when used sparingly, and the overuse here undercut the tension of the story. Repetitions sometimes had this effect as well. Though Adams is absolutely gifted with metaphors, occasionally she uses one that creates a jarring image and other times the image is great but the analogy itself illogical; for example "her skin prickling like flower buds at first spring," doesn't work because buds don't prickle. In some scenes key details are inexplicably missing - Adams describes the tables at a crowded restaurant, but never mentions the cuisine or the decor. She forgets the international millennial festivities in a 1999 New Year's Eve telecast. On the other hand, she makes terrific use of song lyric details in a karaoke scene. This book had all the big things in place - characters, plot, description. I loved a million things about it. But it was all the little things that could have so easily been cleaned up in the editing phase that will keep me from recommending it to my non-romance reading friends as an example of a well-crafted romance. I still recommend it to every romance reader, though. Not even one out of a hundred romance writers writing today are as talented as this writer, and if she can add quality control to her other achievements, her books will easily be among the very best this genre has to offer. 0 von 0 Kunden fanden die folgende Rezension hilfreich. Pure romance story Von ladybug10 Can friendship become love? That is the question for Doctors James Elliot and Deborah Brody. They've known each other since their freshman year of medical school, and though they characterize themselves as friends, in many ways they are more like siblings who have together weathered the trials of that institutional family substitute called The Medical Profession. Twenty years into their relationship, Deb is suddenly widowed, and the delicate balance between them abruptly changes. Elliot (they can't call each other by their given names - too intimate, perhaps?) has never married, Brody is suddenly available, and neither one of them seems able to negotiate the overwhelming possibility that they might actually love each other as man and woman. The strength of this book lies in Alina Adams' written dialog and character development. There is no big suspense or mystery subplot, and not a lot of technical medical narrative - just the halting and sometimes painfully realistic unfolding of a relationship between two people who are very cerebral and who long ago had to learn how to suppress feelings and spontaneity in the service of their profession. In this respect, it's a romance in its purest form, and if you are used to a lot of action in your stories, you may find this one a little more challenging to read. It's a story that can't be read in one sitting because it's too intense, and at times, I had to put it down to take a breather. However, I found I couldn't abandon it. Brody and Elliot stuck to me like cockleburrs, and I had to find out what they were going to do about their dilemma. These characters are not starry-eyed and suddenly smitten; instead, there is a fairly pervasive sexual tension between them throughout the book. This story is also different in that the characters are older and more experienced than is usual in this genre - both are in their early 40's and entering the height of their professional achievement. AA's book reminds us that love blooms at any age and in the most unanticipated places - a really nice

story.

KurzbeschreibungEver since their medical school days, James Elliot and Deborah Brody have been best friends and colleagues. Deborah has been married for the past 20 years to Max, but no one understands her like Elliot. Tragedy strikes when Max dies of a heart attack. Deb is emotionally shattered. Elliot comforts her as best he can, but comfort unexpectedly leads to a night of passion. Elliot has been in love with Deb since college, but he never would have acted had Max still been alive. Deb is guilt-stricken over what happened. Their emotional dilemma is complicated by a budget crisis at the hospital. Events may set these two on opposite sides of a divide. Can their long-time friendship turn into love? Alina Adams returns with a profound and emotionally wrenching tale of love and loss. WHEN A MAN LOVES A WOMAN will bring both a tear to your eye and a smile to your heart.- ROMANTIC TIMES MAGAZINE"When A Man Loves A Woman" is an unsentimental story of love, healing, and friendship that moves me to tears more than once. It is also amazing in its realistic portrayal of a woman tearing up in guilt. Deb has taken her husband as well as James for granted, and now that Max is gone, she sees how selfish she has been and start flaying herself in guilt. How she slowly comes to terms with herself makes wonderful and uplifting reading. Who says doctors can't be good lovers? In this story, doctors rule. In a time when contemporary romances seem to be nothing more than cowboy-sheriff-protects-city-girl-bent-on-beating-the-biological-clock fluff, to read a story with real emotional conflicts with real characters from an author who doesn't take the easy way out with predictable characterizations is indeed a wonderful pleasure to be savored.What matters most in this book are the characters and their relationship. The conflict that almost tears Brody and Elliot apart strikes me as completely believable. It is compounded of Brodys fears and insecurities and Elliots pride and his own fears. I suppose some readers may fault some of Brodys actions, some of her responses. But even when I found her behavior ill-considered, I understood where she was coming from. This is the mark of a good author.Elliot is an incredible hero in many ways. He has put his needs in the background to maintain a friendship that was important to him, but once the obstacle to his love is gone, he is almost at a loss. He truly wants to love Brody, but cannot let her continue to use him. He wants and deserves more. The feelings of both these characters are poignant and painful, and the resolution brought a tear to my eye. In a way, this book was like some visits to the doctor's office, uncomfortable and frustrating at times, but ultimately, a positive experience. By the time you close the book, you'll have a pretty clean bill of mental health.Alina Adams is the author of the New York Times best-seller Oakdale Confidential, and the co-author of the best-selling Jonathans Story (with Julia London). She wrote the Figure Skating Mystery series (Murder on Ice, On Thin Ice, Axel of Evil, Death Drop and Skate Crime) for Berkley Prime Crime. The enhanced multimedia edition of When a Man Loves a Woman features all the text of the original 2000 DELL release, as well as links to music to compliment each chapter. 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Dr. James Elliot was waiting on the brilliantly sunny roof of Los Angeles Valley Hospital even before the chopper, carrying his eight-year-old Caucasian male victim of a fall from a seventh-floor window, landed on the helipad. When the doors opened, Elliot was the first to reach the gurney. He smiled reassuringly at the boy with the plastic collar clamped around his neck, before firing off a succession of questions at the paramedics who'd brought him in, all the while running alongside the gurney on its way to the Code Room. Once inside the Code Room, Elliot allowed Jeff Greenwood, a Second-Year resident, to take over the initial examination. Valley was a teaching hospital, after all. They were big on the learn-by-doing method. And all the residents rotating through the Pediatric Emergency Room were supposed to learn from Dr. Elliot. He may have been only forty-three years old, but in the eyes of the residents, he was the Grand Old Man of Pediatric Trauma Medicine. Elliot hypothesized that was because, before he showed up, no one actually believed something so specific should be a specialty. The medical establishment figured that what worked in Adult Trauma should function just as well with kids. And then they wondered why the mortality rate was so much greater among children. Creating a trauma unit especially for the under-eighteen contingent opened a lot of eyes, triggered a mountain of journal articles, and earned Elliot a nationwide reputation as the specialist in his field. Tongue firmly in cheek, Elliot told anyone who asked that his extensive experience was the reason for the "Old" in "Grand Old Man of Pediatric Trauma Medicine." It wasn't the gray he periodically noticed streaking his otherwise raven-black, curly hair. Because, save that, Elliot was in the same shape he'd been in college, when playing semipro hockey helped foot the medical-school bills. These days, however, he stuck to a set exercise schedule--mostly because of the physical demands of his profession. In Emergency Medicine, every second counted. When Elliot wasn't sprinting toward a patient, he was slicing a human chest open practically with his bare hands, or standing for hours, plugging bullet holes gushing from a drive-by shooting victim. If Elliot wasn't in perfect shape, his patients risked suffering for it. Just like the patients risked suffering when their attending physician was only a Second-Year resident, still wet behind the ears. That's why, when Jeff Greenwood, in his haste to check out the ABC's of elemental trauma--airway, breathing, circulation--overlooked the harsh scratchiness in the little boy's voice as just the result of hoarse crying, rather than a potential lung problem, Elliot stepped in. He called for an X ray, followed by blood gas. The numbers he got moments later from the lab confirmed his fears: a collapsed lung. With a twitch of his finger, Elliot signaled for the thoracotomy tray. He stretched on his surgical gloves, reached for the syringe of anesthetizing lidocaine, and inserted the needle between his patient's fourth and fifth ribs. Their boy had stopped crying. The collapsed lung was making it painfully impossible. He squirmed and struggled inside his restraints, but had yet to utter a word. That disturbed Elliot. Most kids would have been cursing him out quite colorfully by now. He liked it that way. Screaming kids were kids with the will to live. It was the quiet ones that made a Pediatric Trauma Surgeon's heart beat faster. Still, his immediate priority was the collapsed lung. Elliot asked for a scalpel, and made an incision beside the pinprick left by his needle. He stuck his finger into the hole to keep it open and prevent it from bleeding, then asked for the chest tube. Mouth slit in concentration, Elliot threaded the clear, plastic tube past his finger, into the surgical wound. He kept pushing until large, pink bubbles began burping into the tube. Pink bubbles. Not red. Not bloody. Thank God. The lung was working again. Score one for the good guys. Elliot turned to his patient. "Say something for me, kiddo." The child just stared back, blankly. Not a good thing. But at the moment, not a primary thing. With the lung crisis out of the way, Elliot and Jeff completed the rest of their exam, patching up each critical injury as they went along, in order of severity, and double-checking that the boy was stabilized. Finally, at the end of a very long morning, they turned their attention to his baffling muteness. Unfortunately, as far as they could see, there was no physical cause for it. Which, under no circumstances, meant that there was actually no physical cause for it. It just meant they couldn't see it. Greenwood suggested to Elliot, "Maybe we should ask Dr. Brody in for a consult." Deborah Brody was their Chief of Pediatric Neurosurgery, and an expert in juvenile neurological injuries. She'd been with the hospital for eight years, ever since Elliot, after half a decade of phone calls, had convinced her to leave her boring post in San Francisco for a place that really saw some action. Elliot told Jeff, "Good idea. Brody's in today. Go ahead and page her." "Actually, Dr. Elliot"--Jeff massaged an X ray between two of his fingers, leaving a smudge on the file--"I was hoping you could do it. See, I . . . Frankly, sir, she scares the hell out of me." Elliot didn't try to disguise his smile. In all seriousness, he observed, "She'll be happy to hear that." "I know," Greenwood said. Elliot dialed Brody's pager number and recorded a message. While they waited for her to arrive, Jeff asked, "You and Dr. Brody, you two go back a really long way, right?" "Twenty years," Elliot said. Then,

because there was nothing else to do for the time being, and because the account came with a moral to young doctors about making snap judgments, he told Jeff about how, when they met on the first day of medical school, Elliot thought Brody was the biggest idiot he'd ever encountered. In retrospect, Elliot still asserted he couldn't be blamed for jumping to such a conclusion. After all, what was he supposed to think, when the woman sitting beside him at the second best medical school in the country couldn't remember her own name? The professor had roll-called, "Brody?" Deborah continued sitting there, hands primly clasped in front of her, blank as could be. It was only after the second "Brody?" that she jumped to self-conscious attention, awkwardly raising one hand in the air to announce, "Oh, that would be me, I guess." A first-class idiot, Elliot decided on the spot. She just had to be sleeping with someone important on the admissions board. And all Elliot had to say about that was, she better be damn incredible in bed, because, on the surface, the chick wasn't much to look at. Oh, sure, she had that all-American thing going for her. Blushing cheeks, peaches-and-cream complexion, big hazel eyes, and gushing chestnut hair that she rolled up in a bun, probably hoping to look more professional. If you liked that sort of thing. Elliot, personally, preferred the more sophisticated type. It wasn't until he and Brody ended up, against his wishes, in the same study group, that Elliot learned the reason for her ditziness on that first day. Deb had gotten married to Max Brody two weeks before the fall quarter started, and medical school was the first time she heard herself called by her new last name. Elliot also learned, a touch to his chagrin, that the young woman sitting beside him was about as far from a first-class idiot as . . . as . . . well, as Elliot himself was. And Elliot was not a man prone to low...