

Lifelines 2008

# Lifelines

## 2008

A Dartmouth Medical School Literary and Art Journal

Cindy Nu Chai  
*Editor-in-Chief*

Laura L. Ordway  
*Assistant Editor*

James W. Thomas  
Patricio B. Roman  
*Editors, Artwork and Photography*

Heather Anderson  
Chun-Yu Lee  
*Design and Layout*

Aimee Peck  
Isida Byku  
*PR & Distribution*

Shawn O'Leary  
*Administrative Advisor*

Lori Alvord, MD  
Joseph O'Donnell, MD  
*Faculty Advisors*

*Editorial Board:*

Chris Audu  
Elissa Furutani  
Abi Kukoyi  
Dieu Thi Nguyen  
Dr. Rick Mansfield  
Dr. Phyllis Katz  
Isida Byku  
Thomas D. Kowalczyk  
Chun-Yu Lee  
Brandon E. Libby  
Anthony E. Velasquez  
Zachary M. Bodnar  
Derick N. Jenkins



# About the Cover

Andy Thomas is a second year medical student at Northwestern Feinberg School of Medicine. He was born in 1983 and is originally from Salt Lake City, Utah. Andy currently lives in Chicago with his wife Alexandra. No matter how he tried, art always eluded him as a child. Two years ago, he took a photography class that opened up a new avenue to create art. While he sees medicine as his career path, photography is one of his favorite pastimes. It is a way to document places he sees, people he meets, and the amazing detail in the world around him.

“I have seen how powerful pictures can be to evoke emotion and convey a message. I am interested in international health and remember the first time that I saw a presentation with pictures of a war torn community in Africa. The pictures gave me a glimpse of what the people there were going through and made the issues there seem so much more real. I want to take pictures that can tell peoples stories.

This picture was taken on a rock beach in Hana, Maui. A coconut washed up on the beach along a path known as The Kings Highway.”

# From the Editor

I first met Dr. Charlie Boren as a first year medical student at Dartmouth. Dr. Boren was a retired psychiatrist who continued to help with the On-Doctoring courses at DMS during his retirement. His brilliant medical insights were always accompanied by humorous stories from his medical career. In addition, he was always a reliable source of support if ever a student needed help. So of course, he was happy to help me promote Lifelines within his community. I gave him Lifelines 2004 (our first issue), 2005, and 2006 as samples to bring to his community meetings. He read them all, of course. And one day, he even called me on my cell phone to tell me how much he appreciated the short story about the psychiatrist who battled prostate cancer, as he himself was a survivor of prostate cancer.

However, just two days after our phone conversation, I learned the devastating news that Dr. Boren had passed away in a car accident. It was at Dr. Boren's memorial service that I realized how many lives he had touched in his lifetime. Dr. Boren had been a stable force of education at Dartmouth Medical School, and both Dr. and Mrs. Boren were advocates of the arts in medical education and supporters of Lifelines. In this issue of Lifelines, we want to honor Dr. Boren, who will be dearly missed by all of us.

Lifelines is a thread that ties all those who have been touched by the medical experience. In addition to commemorating Dr. Charlie Boren, the 2008 issue also brings hope. In this issue, you will find some amazing art created by children. They are from a program where medical students are paired with children with chronic medical conditions to develop creativity, strength, and self-esteem through art making. Aren't they incredible?

It is our hope that Lifelines will continue to grow and touch many more lives along the way. Enjoy this issue!

Cindy Nu Chai  
*Editor-In-Chief*

# Table of Contents

Untitled	1
<i>Rajesh Ramanathan</i>	
The Rubber Band Man	2
<i>Adam Philip Stern</i>	
In This Place, Poverty Falls	9
<i>Michael Lee Johnson</i>	
Living History	11
<i>Dr. Richard Mansfield</i>	
Concession	16
<i>Nichole Boisvert</i>	
So Tired - Photograph	17
<i>Andy Thomas</i>	
Wylie - Pencil Drawing	18
<i>James Thomas</i>	
Behuinin - Photograph	19
<i>James Thomas</i>	
Secluded Alley - Photograph	20
<i>Katherine Kosman</i>	
Upper Valley Autumn - Photograph	21
<i>Tom Kowalczyk</i>	
Celestial Flight - Photograph	22
<i>Tom Kowalczyk</i>	

Child Waits Outside Exam - Photograph <i>Katherine Kosman</i>	23
Untitled - Photograph <i>Ryan Stehr</i>	24
Center Stage - Acrylic on canvas <i>Cindy Nu Chai</i>	25
Untitled - Acrylic on Paper <i>Samantha and Isabel Estes</i>	26
Lushoto Boy - Photograph <i>Aimee Peck</i>	27
Untitled - Acrylic on Paper <i>Lyndsay Zaslav</i>	28
Curiosity - Photograph <i>Brandon Libby</i>	29
Mother and Cubs - Photograph <i>Brandon Libby</i>	30
Splatter Fall - Acrylic on canvas <i>Cindy Nu Chai</i>	31
Untitled - Photograph <i>Chun-Yu Lee</i>	32
Forked at Itasca <i>Michael Lee Johnson</i>	33
Myself and I <i>Roy Shifrin</i>	35

An Ode to a Patient	36
<i>Dr. Jeffrey Allen Cohen</i>	
Fool's Future	37
<i>Ahmed Bouzid</i>	
Scientific Proof	40
<i>Linda F. Piotrowski</i>	
Gone Fishin'	41
<i>Dr. Richard Mansfield</i>	
The Rules of the Road	43
<i>Michelle Panik</i>	
You Think You are You	51
<i>Roy Shifrin</i>	

## Untitled

I am overtaken  
by a dehumanizing din of ratios and odds,  
that shroud my individual being, manipulating  
my unique essence into a numb pattern,  
to be duly parsed  
into the reductionist's formulary.  
For hope, I call for the doctor -  
silently praying the artist answers.

*Rajesh Ramanthan*



## The Rubber Band Man

Adam Philip Stern

Mylo whimpers and tugs down on the covers with his mouth. He wants a walk, and he wants it now. Seven hours of sleep be damned. Oren musters just enough strength to gaze over at his wife on the other side of the bed. She's out cold, or at least pretending to be out cold so she won't have to take Mylo for his walk. As Oren is about to concede defeat and get out of bed, Mylo decides to casually saunter outside the room. For twenty seconds, Oren smiles, pleasantly relieved that the dog has decided to cut him some slack. And then he hears it. *Bleghaeh*. That noise can mean only one thing: Mylo has just vomited in the front hall closet. Of all possible destinations for his retch, Mylo always chooses the same location inside this very small and dimly lit closet making it very difficult for anyone to notice the mess, nevermind clean it up. As if punishment for hours of obedience lessons, Mylo has instilled in Oren an almost perpetual fear and listening for the sound of his upset stomach. With a renewed sense of urgency, Oren leaps out of bed, knowing he has to clean up Mylo's mess before the mangy mutt tries to eat it. Cramped inside the tiny closet, Oren scrubs and spritzes and scrubs some more. Mylo looks at him as though he is wondering what he is doing. After all, Mylo just marked that spot. The dog wonders if now that his owner is awake he'll be taken for a walk. A hunt would be even better.

“Go lay down, Mylo. We're not going anywhere. Not before my coffee anyway.”

Oren finishes cleaning up Mylo's mess and brews the coffee just in time for Hope to emerge from her slumber rubbing her eyes. The boy, Geoffrey, is not far behind looking a lot like his mother this morning. Neither one wants to be awake at this hour, and they're not shy about voicing it in body language and guttural grunts and moans. Oren finds these objections to early morning life irritating, and prides himself on being more stoic than they are despite his vast desire to return to bed at this juncture. He's already finished reading *The Times* by 8AM and is out the door ten minutes later after wishing Geoffrey a good day at



school and kissing Hope's clammy forehead. His commute is short. The office is located in a converted sunroom on the far side of the living room. Patients enter from the side of the house and exit through a door in the back, never running into each other. Oren often amuses himself with the thought that they're food entering the body of his office. They are digested inside and sent on their way without ever encountering the next meal. Oren notices that he has been making quasi-preposterous analogies more often in recent weeks and wonders what, if any, unconscious significance there is. He decides that if there were any, and he were able to uncover it so easily by himself without psychotherapy, it wouldn't be of much significance anyway.

Oren's second to last patient of the day is Yasmine, someone he sees twice each week. When she enters the office, Oren is consistently struck by the aroma she carries. He chastises himself each time for becoming aroma-struck after so many encounters, but nevertheless continues to ponder what brand Yasmine wears and if Hope would like it. Then he chastises himself for associating his patient and wife, at which point he sits down across from Yasmine and begins the session. Oren's chair is upholstered in faux-black leather; he wanted something classy to exude strength and professionalism, but he knew although she would never say anything, Hope would condemn his choice of real leather as an act of bovine genocide. Most patients assume it's real leather, and only one has ever directly asked Oren.

"No. I mean, yes, it is," he replied. Feeling the patient's eyes burn into him he finally settles on something closer to the truth. "It's real faux leather."

That patient's therapy concluded within two months.

His current patient is much more attached to her therapy.

"How are you today, Yasmine?"

As she begins to answer, Oren's pager buzzes. The pager is used for psychiatric emergencies only and seldom interrupts a session as it does now.

"Yasmine, I'm sorry."

"Go ahead."

"I will only be a moment. We'll make it up at the end of the session, okay?"



Yasmine nods agreeably, and Oren exits to call the hospital in privacy. Upon his return he sees Yasmine hunched over his desk reading her own file. He sighs loud enough for her to hear.

“What the hell is this, Oren?”

“We’ve talked about this, and I would appreciate it if you would call me Dr. Burnett.”

“You’re going to say that to me now, Oren? While I’m reading what you really think of me?” She shouts holding up her file.

“Please sit,” Oren says motioning back to the couch.

She does, and he explains that the file is a medical log and interpretation of her sessions and nothing more.

“Borderline, Oren. I’m borderline? Borderline what?”

He sighs again.

“Don’t sigh, Oren. It’s not becoming, like it’s such a pain having to explain things to me. You know, sometimes you really don’t know how to deal with people at all,” she shouts as her eyes well up.

“Yasmine, do you know who pays for our sessions?”

“What does it matter who pays?”

“I’m trying to explain something. Bear with me.”

“My insurance covers some of it, I guess.”

“Right. Well, insurance companies tend not to pay for everything. In fact, they’re somewhat childish and will only pay for things with titles. Hard and fast diagnoses. Do you understand? Your file describes you as a woman with borderline personality disorder because you exhibit five of the nine diagnostic criteria and it means you will be able to afford therapy. It doesn’t make you *borderline* anything.”

Yasmine’s somewhat calmed by his explanation, and decides to abruptly change the topic of conversation.

“I’m moving overseas for a while.”

“Hmm?”

“I’m taking an adventure somewhere. A life adventure. I’ll book my



flights as soon as we finish here. So I'm sorry, but I'll have to cancel our next appointments."

"How many appointments, Yasmine?"

"I don't know. However long I'll be gone, I guess. Maybe a year."

"You're going away for a year now? When did you decide this? Just now?"

She nods but then tenses up.

"No. I've been thinking about it for some time. I need to get out of here. You know? Just leave them all behind."

"Them?"

"The people around me. My problems. All of it."

Oren sits quietly absorbing the outburst, letting it sink in while simultaneously allowing Yasmine to ponder her own impracticality. Sitting silently speaks far louder for Oren than if he were to condemn her rash decisions or tell her *why* she acts the way she does. Using silence, Oren makes sure Yasmine comes to those realizations on her own, so as not to feel like they've been pushed upon her by an authority sitting across from her. Within twenty seconds, she begins to tear up, having already come to the rational conclusion that answers are not across oceans. Running away will not solve her problems.

Oren offers her a tissue and the session continues for half an hour before time is up.

"I need to make appointments for the next six months, and I would like to know in advance what we'll be talking about for the next several sessions," she says defiantly.

It is a mechanism of control for Yasmine; if she locks down her time slot for six months, Oren will not have the opportunity to abandon her.

"That's not the way it works, Yasmine. You know that. Scheduling is one month at a time, and you and I both direct the subject matter as we proceed. But don't worry, your time slot won't be given away. It's yours for as long as you're my patient."

"This is stupid, Oren. If you'll save my time slot, why won't you just write me into the book for the next six months?"



“There are rules, Yasmine. They may seem silly to you but I can’t bend them to the needs of each patient.”

She is livid but knows she won’t convince him. They say goodbye for three days, and Oren dictates notes about the session. Only a few minutes after Yasmine leaves, Oren’s last patient of the day arrives. Oren is so exhausted by this time that he subtly pinches himself every few minutes to remain awake and appear interested. When the session ends, he tidies up the office and does paperwork for half an hour. Then he exits the office through the back and into the yard. He continues around the house and through the front door. It’s a tradition he started years ago in order to remind himself of his patient’s perspective as well as ending the work day off with a breath of fresh air and a cool breeze. On rainy evenings, the tradition is conveniently forgotten.

Oren enters the front hall and greets Mylo. There is a chew toy on the floor so old and worn out that it no longer squeaks as it once did. It is essentially a smelly rubber incubator for dog-borne microbes. Oren picks it up and begins to make his way to the trash bin.

“This toy’s no good anymore, Mylo. I’m going to throw it out.”

But Mylo barks and whimpers and runs around the room frantically. Oren has taken something that doesn’t belong to him.

“Fine, you dumb mutt. You want it? Here you go.” he yells, angrily throwing the ball with severe force across the room and down the basement staircase. Unsure why, Oren suddenly experiences a mental flash of Yasmine furiously decrying the contents of her file after improperly accessing it. He shakes off the image and continues toward the kitchen.

At dinner, Geoffrey tells a story about being chosen first to play kickball during recess. Oren congratulates him and asks him to tell him something else about school.

“What about?”

“You know. School work. Assignments. Subjects. Whatever.”

Geoffrey answers succinctly and has lost the vibrancy which propped him up during his kickball story.



“Any homework tonight?”

He nods.

“Have you done it yet?”

“No.”

“When do you think you’ll do it?”

“I don’t know,” Geoffrey says, suddenly very interested in his dinner.

“Right after dinner?”

“I want to watch something on TV after dinner.”

“After that then?”

“Maybe, I don’t know.”

“Definitely before bed though, right? Right, Geoffrey? Before bed?”

“I don’t know, Dad! God. I’ll do it when I want to.”

Geoffrey slams his fork down and runs out of the kitchen, leaving Hope staring at Oren gritting his teeth.

Several hours later, Oren putters into bed while Hope reads the most recent Jodi Picoult book which has been recently recommended by her favorite morning talk show host. She is fifteen pages in when Oren puts a hand on her leg and kisses her neck.

“We should go on vacation. Next week. Geoffrey hasn’t been to Disney since he was four. I bet he doesn’t even remember it anymore.”

She ignores him and squirms just slightly – only enough for Oren to get the message.

“Why not?” Oren asks furiously.

“I’m reading right now, Oren.”

“Come on, Hope. You’re not even ten pages into that book. And they’re all the same. You know what’s going to happen.”

“No, I don’t know what’s going to happen. Don’t belittle Jodi.” She pauses and says quieter, “or me.”

“I’m not belittling you.” Changing tone, Oren seeks another way in. “I love you, and I think we need a vacation.”

“We can’t go away right now, Oren. You know that. Geoffrey’s in the



middle of school. I'm finally getting rolling with my new project, and you'd have to find someone to cover your patients. Not going to happen! We'll go away over Christmas break, like we had planned. To my parents, not to Disney."

Oren nods and shakes his head simultaneously, leaving him looking somewhat deranged. Hope smiles politely back at him and turns to the next page in her book.

Collapsing back to the bed in a huff, Oren reaches to set the alarm, knowing full well he'll be awakened by his four legged confidant well before it has a chance to go off. Closing his eyes, Oren's mind races, examining the events of the day. His focus vacillates between his patients and his family. Yasmine's file and Mylo's ball. Her schedule and Geoffrey's homework. Escapism and vacation. Parallels and reciprocities begin to become clear, and he laments his inability to avoid self-analysis. As he begins to doze, he breathes a sigh of relief, though, knowing he has just barely managed to endure another day without completely breaking. A quiet sleep will restore him. His mood improves, and by the time morning arrives he is fully ready to face the world again.



## In This Place, Poverty Falls

In this place night falls with Linda.  
Wrinkled life, wrinkled wishes  
race across her face.

Torment bristles with each morning;  
nailed to a cross within her house,  
Linda lives.

Everything is a cycle,  
a charity or gifts.

Poverty is an odor,  
it is a smell her  
nose itches with.

In the yard, poverty grass,  
near the old car, poverty grass.

Poverty tastes like copper  
metal on her tongue.

On her this journey with no applause,  
no gas, Nicor shut that off.

No money honey, laziness shut that off.  
Her house is full of bills & debris.

With no relief a few dollars  
shrink in her hand harmlessly.

Rest, wait in welfare lines,  
manipulate the coin machines  
and the local pharmacy drug store.

Electric heaters keep the old house  
warm and the multiple pets alive.

The microwave heats the plastic  
salad bowl filled with water  
for sponge baths.



The left over water mixes with hydrogen  
peroxide that brushes her teeth.  
Her body pale and spirits bail out with pills.  
Groceries are checks  
Nourished by food stamps.  
Walls come closer in at night.  
The wind outside roars  
with stolen property inside.  
Dreary days, step  
into depression's chamber;  
a slice of her mourning  
pronounces her dead.

*Michael Lee Johnson*



## Living History

*Dr. Richard Mansfield*

I was in the CCU – coronary care unit; only several months since I had graduated from medical school. If you’ve never been in one, it’s a busy, exciting, scary, feels-like-your-heart-is-in-a-perpetual-freefall kind of place. At least that’s the way it was for me. I felt like a soldier on the front lines, my job was to keep my head down and follow orders. It was up to someone else to figure out what was going on. The attending cardiologist always walked in with his head held high – like a general riding into camp. The doors to the CCU would open automatically when he entered – actually – they opened automatically for anyone who pushed the button, but somehow it seemed more majestic when he came through. And no matter what happened in the CCU, he never seemed surprised. He got tense, excited, barked orders – but he was never surprised. He seemed one step ahead of the game, and a good four or five steps ahead of me – but he was out of step this time...

There were several patients that I will never forget from the CCU. One of them was Mrs. Johnson. At least that’s what I’ll call her, I remember her face and what she said to me during her stay in the CCU – But truthfully I don’t remember her name.

Mrs. Johnson was seventy-two, and had been treated at home for a pneumonia that had lasted weeks and never seemed to clear. Finally her family brought her to our hospital to see what else could be done. When I met her she didn’t seem that sick; she was a nice grandmotherly lady who peppered her speech frequently with “please” and “thank-you” and more than occasionally an “honestly, I don’t know what all the fuss is about!” But she was being transferred to the CCU as a precaution. It turned out she was in congestive heart failure, and no one was sure why – so she was being placed in intensive care for close monitoring.

For the first day I didn’t have to do much for her. I checked in on her a few times. I don’t think she asked for more than a blanket from me the whole day. During this time, the “generals” discussed their strategy for her. An



echocardiogram raised questions of pulmonary hypertension. The option of a cardiac catheterization was on the table.

I know now that sometime during that first night was the beginning of the end. Though at the time, I don't think anyone could have known. In fact, it wouldn't be for days that I would understand what had happened.

I greeted her on the morning of her second hospital day. "Good morning, Mrs. Johnson."

"Oh Hi! I'm so glad you're here." She greeted me extending her arms towards me – as if my presence was such an unexpected pleasure.

"How are you today?" I asked.

"I need to find my parents. Can you help me?" She wasn't looking at me. My stomach sank. She was delirious, a common complication for the elderly under the duress of illness and stress of the CCU.

"Do you know where you are?" I asked the standard questions.

"Why, the World's Fair, of course! Isn't this exciting? But I've lost my parents, will you help me find them?"

"Mrs. Johnson, where is the World's Fair?" I asked cautiously.

"Why, Chicago, of course!"

"Do you know what year it is?"

"1933!" And as far as I know, she spent the rest of the day at the World's Fair in Chicago, 1933. It took her several hours to find her parents, but she did. And I think she enjoyed herself.

On day three, the Generals came through flanked by us residents and interns. "We need to do the catheterization today to find out what's wrong with your heart. There are risks to this procedure. Do you understand, Mrs. Johnson?"

"Oh yes, that will be fine." She said pleasantly

The attending cardiologist turned to his sergeant at arms – the cardiology fellow, "Have her sign the consent and have her on the table at 9:00 am."

"I don't think she understands," I offered meekly. And the ranks parted to give me access to the General. I turned to Mrs. Johnson instead, "Mrs. Johnson, can you tell me where you are?"



“I came to look for my brother, he moved to Milwaukee. I knew it was a bad idea. Now he’s missing. Something bad has happened. I just know it. I’ve got to find him!”

The cardiologist looked frustrated, “Have her son sign the consent, and have her on the table by 9:00 AM.” And that was it. This poor lady had lost her mind and the effect was no greater than the inconvenience of a signature.

I met her son later that morning. I asked about her brother. “Why?” He gave me a curious and startled look. I told him what she had said. He gave a sad sigh, “He was killed in 1957. Shot in the head actually. Always been a mystery. He moved to Milwaukee for a woman. Everyone felt she took him from the family. My mother always thought something bad was going on – but I guess we’ll never know.”

Things got worse for Mrs. Johnson. It had been discovered that she had extensive blood clots forming in a number of her major veins. She was still delirious. I saw her again the next morning. “Do you know what year it is?” I asked.

“Ahh, ... ’88? ... ’90?” she answered. Well, off by a couple of years is better than being off by a couple of generations. ... I guess. “Is my family coming to see me?” She asked.

“Yes,” I said with care, “They’ve been here every day to see you.”

“Oh, I didn’t know that.” She frowned. “Have you finished your assignment?”

My assignment? I didn’t ask this time.

The Generals had decided on an aggressive approach – a pulmonary arteriogram with locally directed thrombolytics – to break up the blood clots.

“Yes, I understand.” She said.

I didn’t believe her. “Do you know where you are?” I asked.

“Yes, room eleven in the CCU.”

I was surprised, “Do you know what the y-“

“Yes, 1998, and its Tuesday.” She laughed at me like I was her grandson



playing a child's game with her – and she was doing nothing more than playing along to humor me.

“Wow, you're back – you've been pretty confused these last few days,” I said. She just shrugged.

That afternoon, Mrs. Johnson went to the interventional suite and I went to my regular outpatient clinic. I returned to the CCU that evening; Mrs. Johnson didn't. One of the residents stopped me, “Did you hear? Mrs. Johnson died.” Matter of factly.

Died? But she had seemed so much better this morning. “What happened?”

“Don't know – she died on the table, before they even started the procedure, and they couldn't get her back.” And that was it. She was gone. Her family was gone. No good-byes.

It's remarkable what we can and can't do. We expect to read EKG's to detect changes in the heart rhythm to within 0.04 seconds. Enzymes in the blood will tell us if heart damage has occurred, echocardiograms will tell us which part of the heart is under attack, a catheterization will find the clot in the artery that is causing the problem. But an entire life can flash before our eyes and go unnoticed.

Mrs. Johnson, born in 1926. Thrilled to have been at the World's Fair in Chicago, 1933. She didn't understand the Great Depression then that seemed to haunt her parents. But the World's Fair was magnificent and seemed to lift her parents back to happiness. She remembers sliding down the Magic Mountain Fairy Castle in the children's area – it was here that she thought she lost her parents. But they were simply out of sight – and they were soon reunited.

Her brother was four years younger than she was. A class clown at a young age and a troublemaker when he was older. He was James Dean's contemporary – he searched hard for a reason to be a *rebel without a cause*. He ran from his father at eighteen, and ran from the law after that. She always had a soft spot for him – even when everyone else had hardened their hearts. As to who shot him she really doesn't know, and no one else will either.

She spent her most recent years, before her retiring, as a high school



history teacher. That doesn't surprise me. She is living history. People say your life will flash before your eyes before you die. It took more than three days for her life to flash before ours. And though we measured her heart beats in hundredths of a second, we missed the 72 years that were made up by those heart beats. I wish I had watched more closely – and I wish I could have said good-bye.



## Concession

How can I pray?  
What words are there for a God  
who removes lives on a whim  
and floods one land while  
in another, cracked soils gasp for a single drop?  
Potbellied children cry out,  
insatiated.  
Obesity becomes epidemic.  
What justice exists  
in the creation of such fragile beauty,  
in the ease in which we are granted permission  
to destroy it?

And yet, when the opulent moon  
bursts from the curtain of night,  
my breath catches.  
My words, uttered softly—  
Oh God.

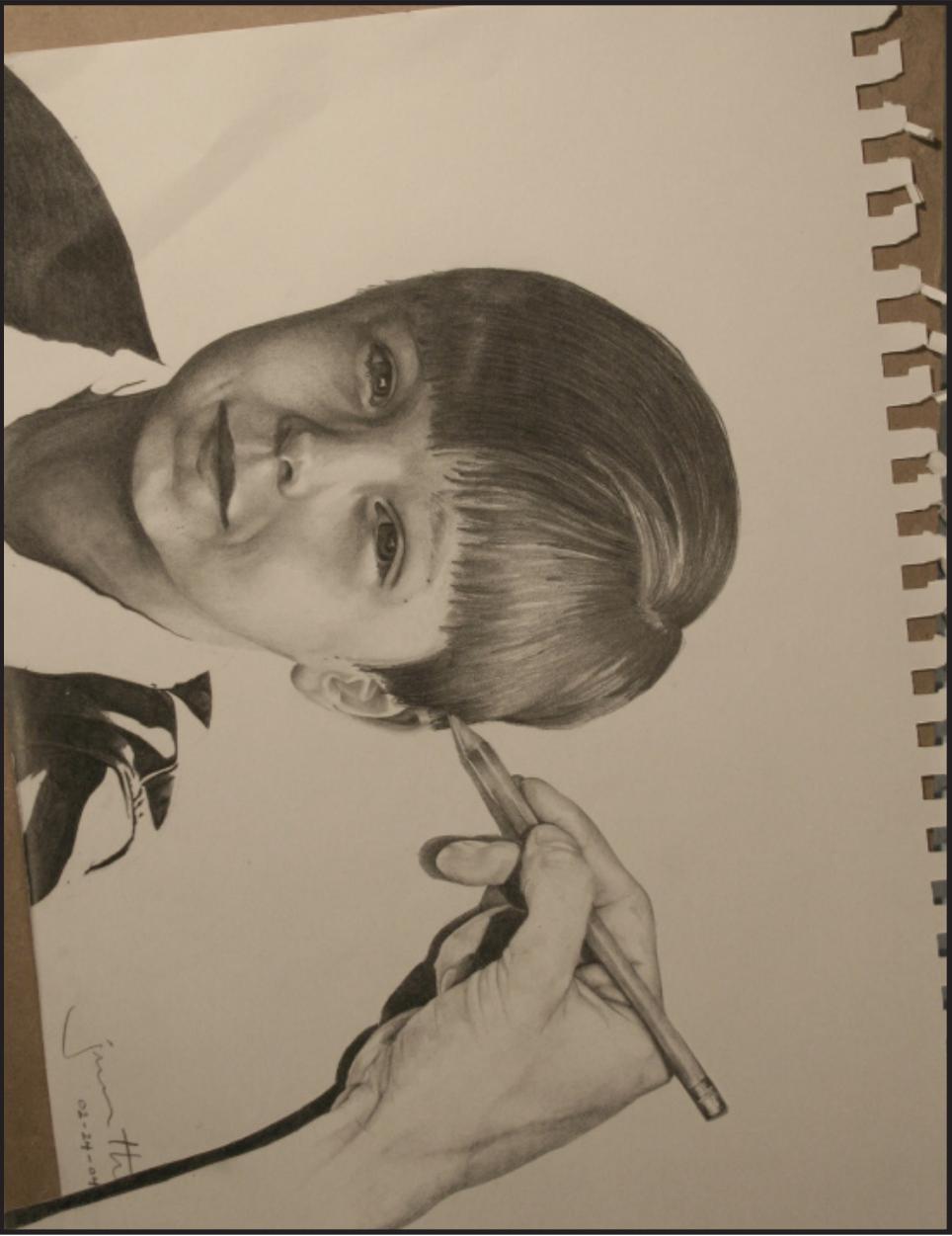
*Nichole Boisvert*





“So Tired” Photograph

*Andy Thomas*



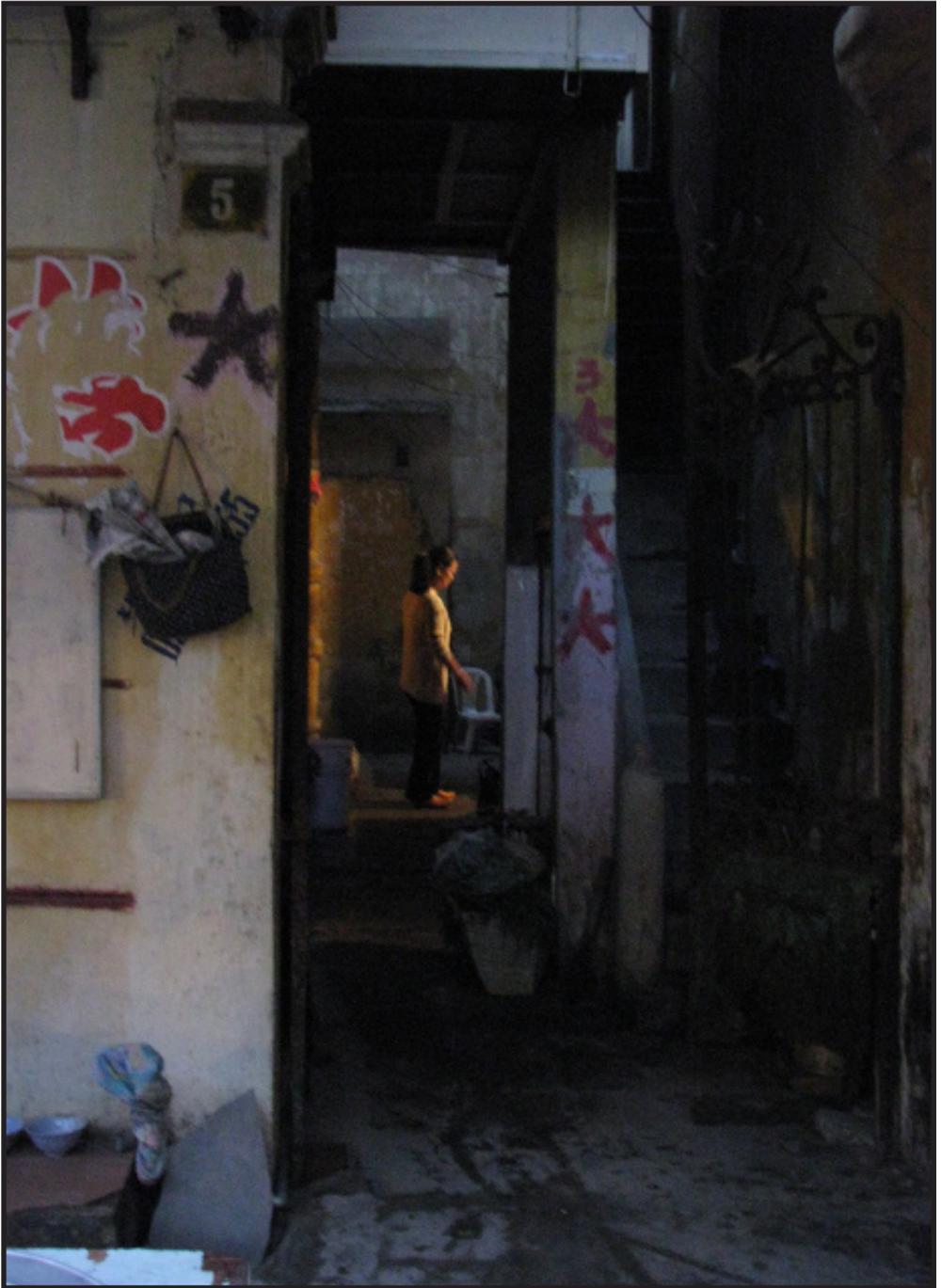
**“Wylie”** Pencil drawing

*James Thomas*



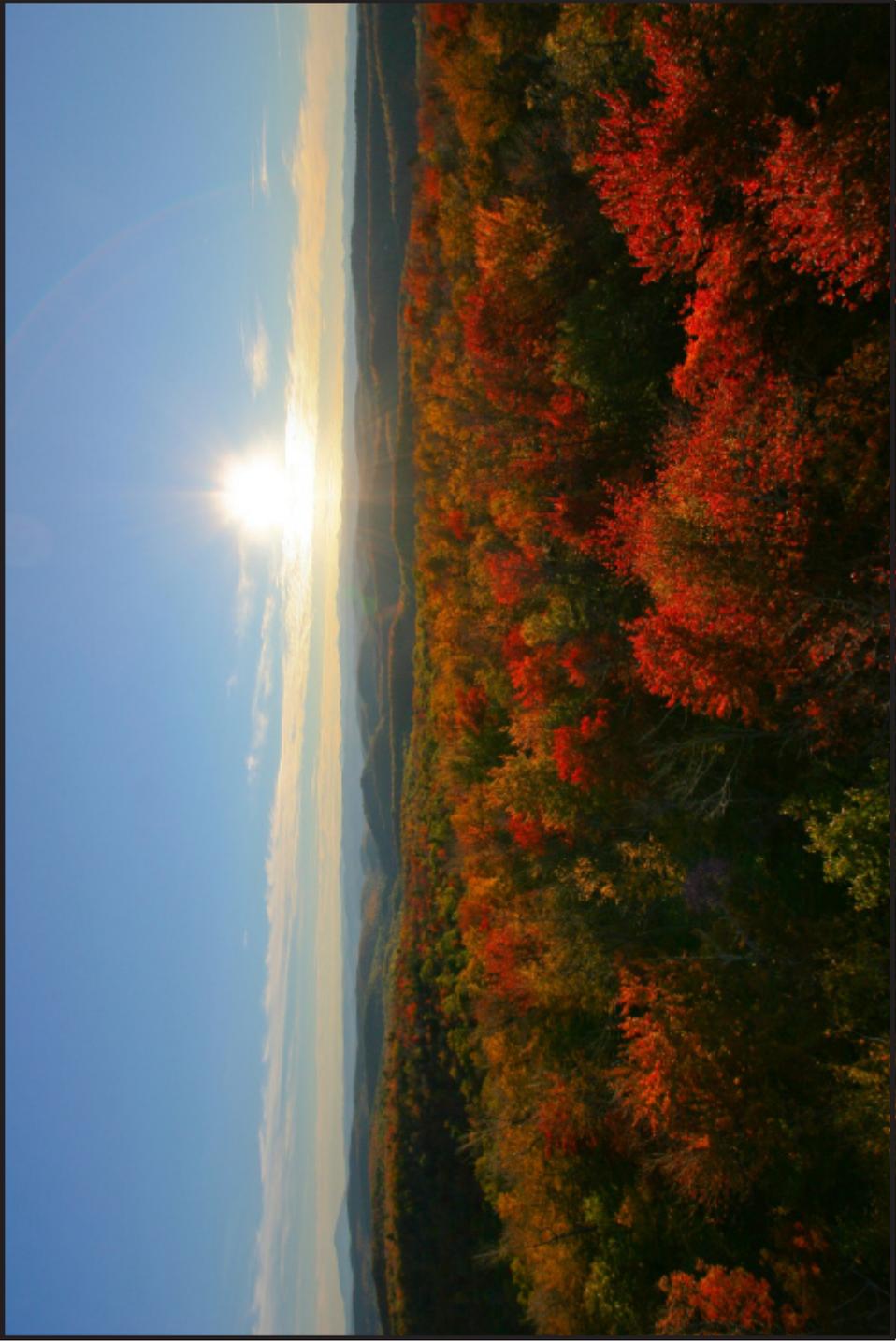
**“Behuimin”** Photograph

*James Thomas*



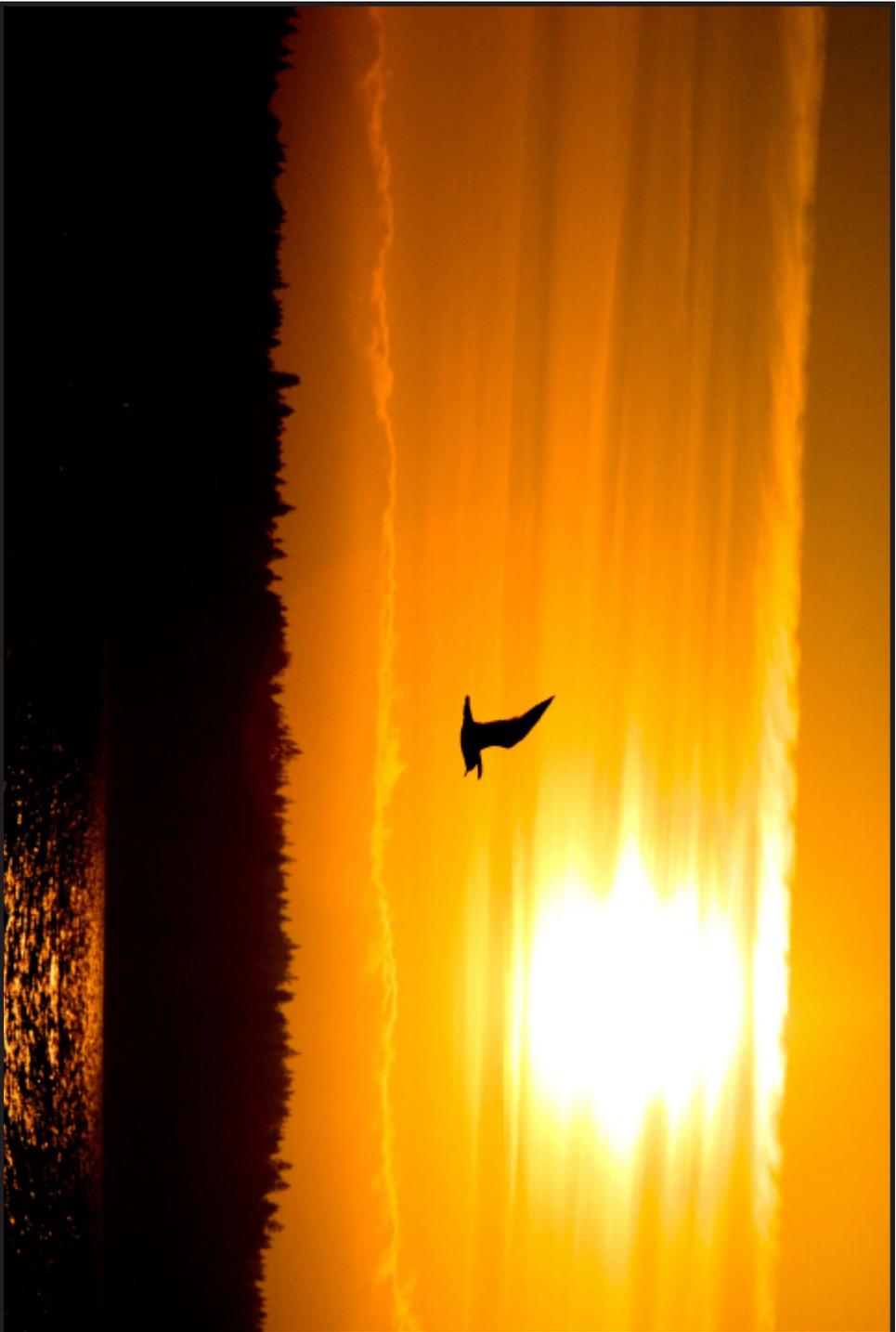
“Secluded Alley” Photograph

*Katherine Kosman*



**“Upper Valley Autumn”** Photograph

*Tom Kowalczyk*



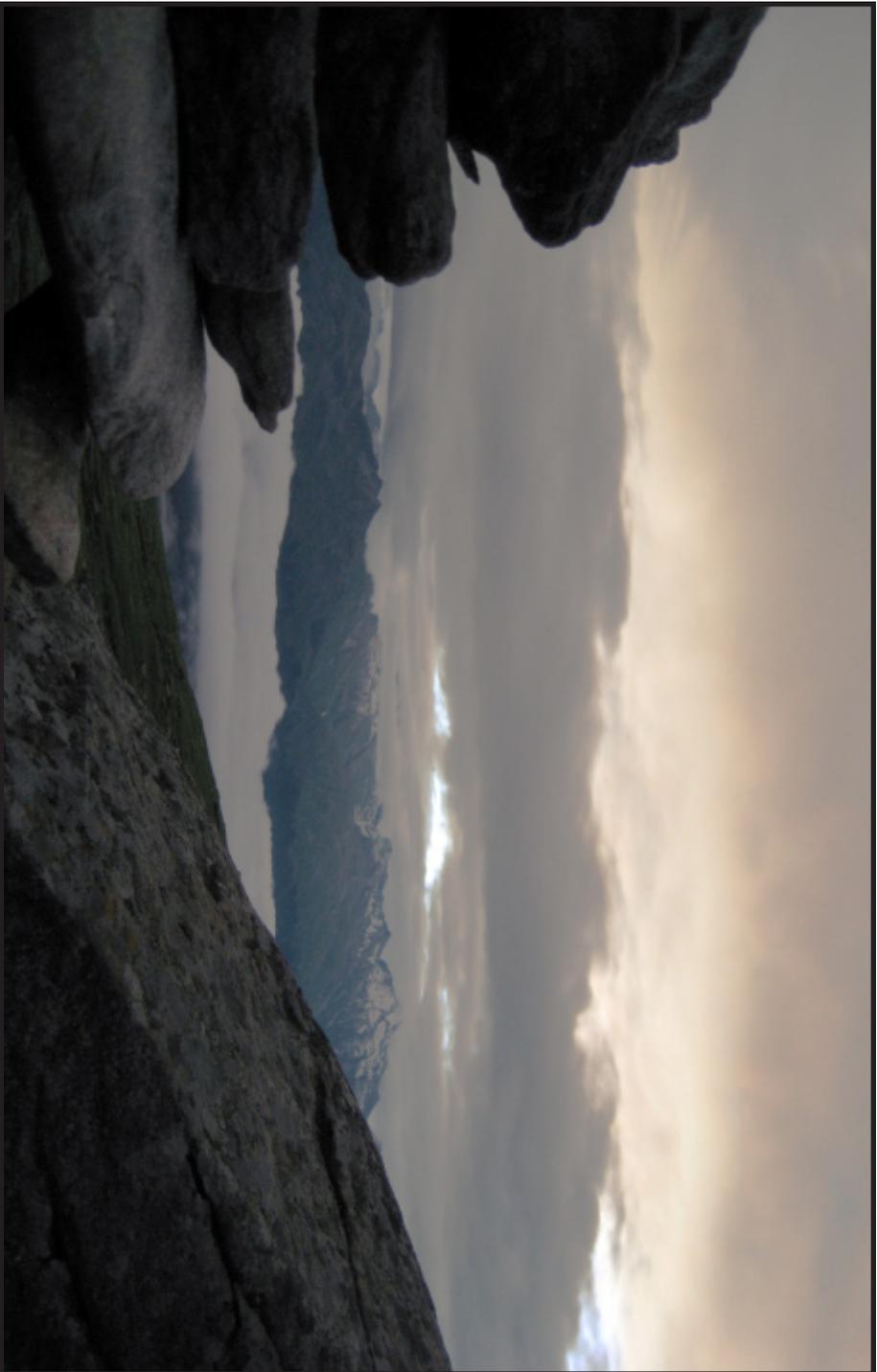
“Celestial Flight” Photograph

*Tom Kowalczyk*



“Child Waits Outside Exam” Photograph

*Katherine Kosman*



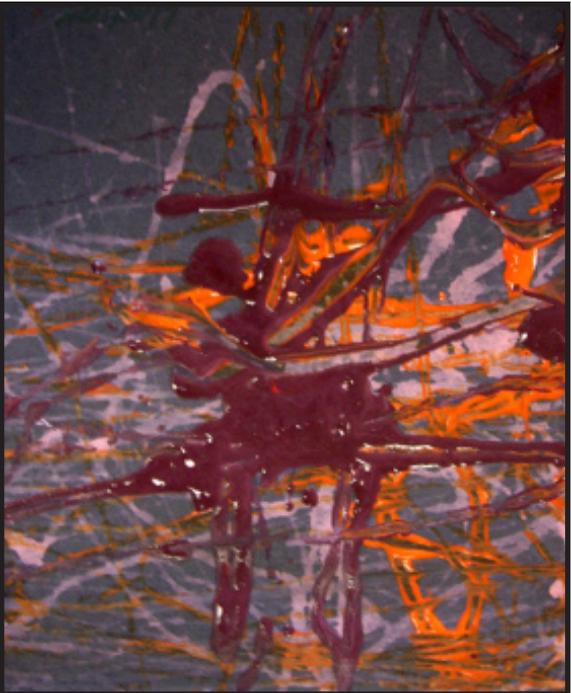
“Untitled” Photograph

*Ryan Stehr*



**“Center Stage”** Acrylic on canvas

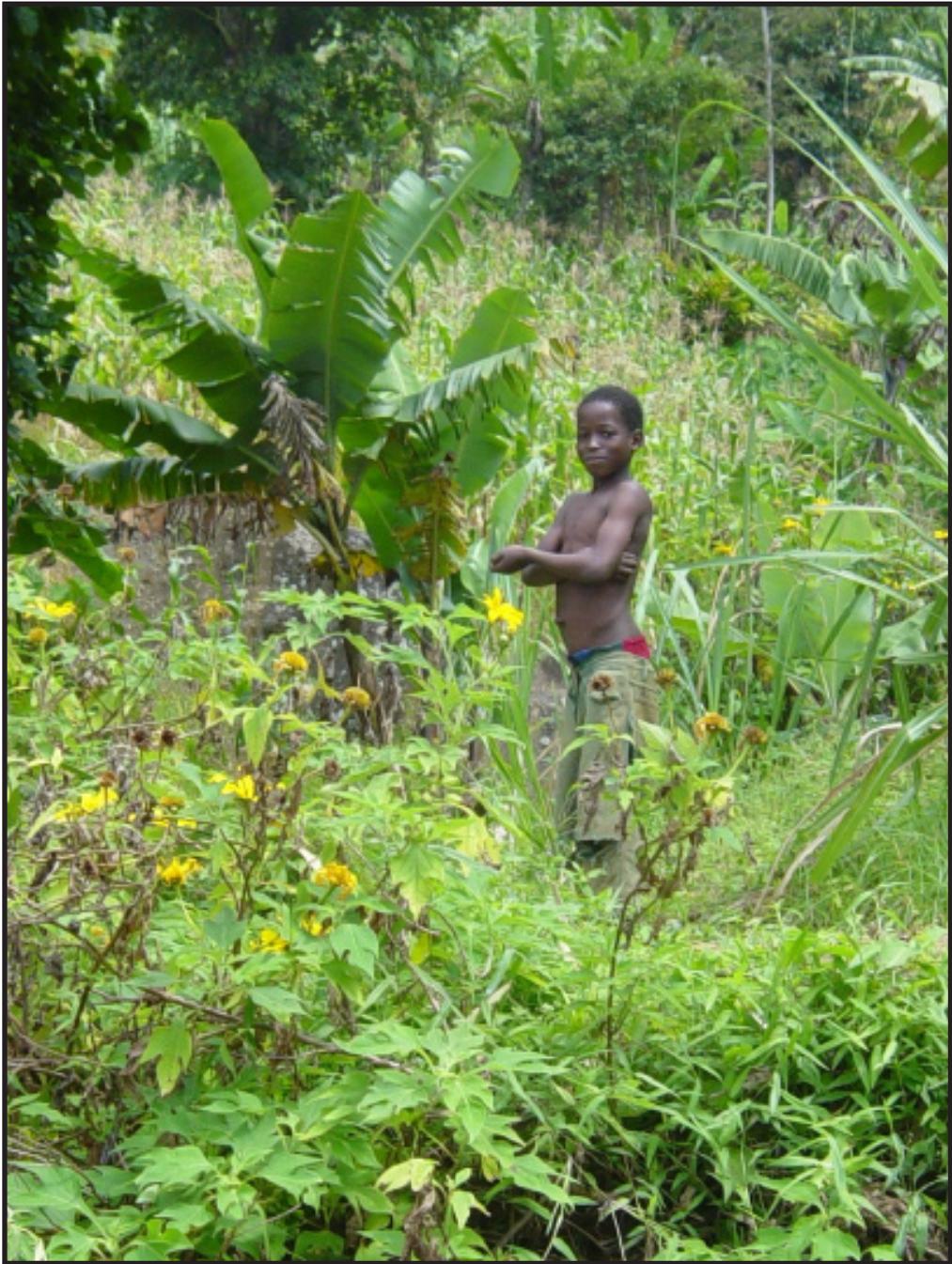
*Cindy Nu Chai*



“Untitled” Untitled on Paper



Samantha Estes, 8 (L), Isobel Estes, 5 (R)



**“Lushoto Boy”** Photograph

*Aimee Peck*



**“Untitled”** Acrylic on Paper

*Lindsay Zaslaw, 3*



**“Curiosity”** Photograph

*Brandon Libby*



“Mother and Cubs” Photograph

Brandon Libby



**“Splatter Fall”** Acrylic on canvas

*Cindy Nu Chai*



“Untitled” Photograph

*Chun-Yu Lee*

## Forked at Itaska

I am so frustrated  
I want to chew  
the dandruff  
out of the internet hair implant  
and dislodge it,  
for a lost love affair I never cared  
about and hardly knew.  
Don't tell me about my sentence structure,  
I am human in these simple words.  
I swear to you I curse.  
Then the ram of my affair falls short  
frustrating my approach to the world  
at my fingertips.  
No Yellow Pages here my love.  
The dial up of my local connection  
is wretched, stuck unincorporated  
in the land I approved to live in,  
monopolized by Comcast the  
robbers of the poor and the humbled.  
All I hear is the rambling of the railroad tracks.  
I grow numb in my deafness faint with my hearing.  
Did I ask for your opinion?  
I am a frustrated foreign camper  
in my own community.  
Of a village I don't live in,  
but I love this local village I lie about.  
I am estranged.  
I tie knots in contradictions



when I travel light and far,  
visit home I long for a journey  
past where I have never been.  
Is this the reason I am lost  
forked in between  
the poet I think I am  
and the working man  
my bills dictate?

*Michael Lee Johnson*



## Myself and I

We said good bye, myself and I,  
To bed until the morning  
Another night to spend apart  
Wouldn't meet again 'til dawning.

I went my way, you to went yours  
Laid out as still as death,  
While I rode wild upon the waves  
Across the ocean's breath.

Your body lying weak and limp,  
While I in dreams awake  
Fought pirates, freed a maiden  
For right and justice sake.

You, your head numb upon the pillow  
Ignored a fallen hero brave,  
Tranquil though I be bound in chains  
And sold to be a slave.

A sleeper's sigh escaped your lips,  
Mine in grimace tightly bound  
I broke my chains, cried out, "Revolt"  
And my comrades rallied round.

Cold and limp hung your hand,  
Mine hot picked up the sword  
And cut a path to freedom

Through a vicious swarming hoard.  
Your eyelids faintly flickered,  
My eyes wide all aflame  
As I in triumphant they carried home  
Through throngs that called our name.

You deaf but to the clock's alarm,  
While I to valor did not shirk  
And so exhausted climbed in bed  
As you awoke for work.

*Roy Shifrin*



## **An ode to a patient**

*Dr. Jeffrey Allen Cohen*

So tonight it is the even day or odd day I don't remember ... I just know I am supposed to give myself the injection ... so is this how it all ends up giving yourself some sort of medication ... I am sure no one knows exactly what the long term effects are ... I heard the ad on TV while I ate the take out dinner: the announcer gravely intoned in a very soft and pleasant voice: "risk of infection anemia diarrhea malignancy" ... I pull up the clear solution in the syringe ... it looks harmless ... and wait ... my left leg has a purple spot ... my right leg has a red spot ... I wait for a divine sign ... nothing happens ... the floor fan drones on ... I start to cry I am not sure why ... maybe it is for all of the lost opportunities in my life : the past life of running in central park, the skiing, the absence of pain, the missed meetings ... the needle barely hurts as I push it deeply into the skin ... the clarity of this act somehow seems ok ... a drop of blood appears as I pull out the needle ... there is no change ... I am not running up to 110th street ... ever again ... and the cells are silent as they divide and divide and divide ... I will be the last to know ... as always ... but please no pity ... they taught me how to do this.



## Fool's Future

Little me and the Big Future  
That I feel  
In the distance  
behind the fog  
I hear it -- barely  
but I hear a drone  
behind the fog  
Or: could it be  
simply the echo of my vanity?  
Sometimes I say, yes  
Sometimes I say, no  
That is how I pass my days  
and how I kill my time  
and my own life  
wondering about the  
drone behind the fog

Others: they live  
They fear and embrace  
They take their vanity to its limit  
to its natural strength  
They fear, but  
they fear only that they fail  
And when one fears failure  
one will succeed -- in time

But do I fear?  
No: I oscillate  
I fear a little  
then I am dauntless



then I am a mouse  
then I am a king  
where should I go?  
what should I do?  
One day I know  
then I forget  
Others: they live  
they make plans and  
then they get angry  
then they get jealous  
then they say: why not me?  
Then they fight  
and they are ruthless  
and they fight and push on  
and battle all those  
who bar their way  
No mercy: it is a fight to the death  
And then: one day  
they are there

But do I fight?  
No: I only resent  
I resent their energy  
and their small plans  
and then I declare myself above them  
then, like now, I laugh at myself  
I am so small, I say  
I only talk to myself and scribble  
What reams of senseless  
things I think of  
and then jot down  
happily



As though I was going  
somewhere  
Ah, yes, but I oscillate:  
today, it will lead nowhere  
tomorrow, I will be king  
that is how it works

Yes -- but even in my scribble I am faint  
why not damn the world and scribble the good fight  
scribble and kick all those who dare to cross your path?  
Yes -- why not?  
But I will fight, one day or two  
and then I will shake my head:  
what a fool!  
I will say  
Yes:  
What a fool.

*Ahmed Bouzid*



## Scientific Proof

A voice said, "There is no scientific proof that God is a man."

*Words Under the Words* by Naomi Shihab Nye

This gives me great comfort  
although I don't put too much stock  
in science.

The world is too full of mystery  
to worry about scientific proof  
of anything.

There are certain things

I don't want to know:

how cats purr

where lightening bugs go in the daytime

why I was lucky enough to see the Northern lights

just how much love a heart can hold

where the music goes when a violin stops playing

how babies learn to laugh.

We rely too much on science  
and not nearly enough  
on awe and wonder.

But I don't think God is a man.  
Love **is** worth dying for  
there's too much pink in a sunset  
and rabbit fur is so, so soft.

Scientific proof or not...  
God's got to be a woman!

*Linda F. Piotrowski*



## Gone Fishin’

Yes, you’re right.  
The door does not quite fit.  
I will oil the squeak – lickety-split.  
And so goes the usual toils  
of folding clean clothes  
and cleaning sinks soiled.

But what about love and death or lies and sex;  
Or lives that end in innocence?  
Their cries are captured in daily papers  
Recycled and silenced while clearing our tables.

What if I let go? And I mean really let go.  
If I no longer cared about fast food fares  
And the squaring away of mundane daily affairs  
And went down *stares* to lowly souls unaware?

Could I catch someone’s heart? Ha! – wouldn’t that give you a start!  
Fancy bringing it home like a fisherman’s prize;  
smack it down on the table as a feast for your eyes.  
“Fillet o’ *soul*” I could say, “I saved this one before he faded away.”

Clean him of his addictions, tell him he’s normal despite his afflictions;  
Then send him swimming on his way,  
maybe find his dreams in another stream on some other day.  
Ahh, but our dishes would get backed up, and the grass would need to be cut;  
So despite my soul-filling wishings –  
I’ll go back to the back room where the chores need my finishing.



But perhaps we ought to think about finding some time –  
time to go fishing. Seems such a simple wish - really  
But please don't fail – it's important to me,  
For as you'll come to *sea*, at the end of this *tail*-

*I am the Fish.*

*Dr. Richard Mansfield*



## The Rules of the Road

*Michelle Panik*

If a new set of bike wheels didn't take two months to fabricate, Jeannie would have rammed the Ford F-150. The truck had cut her off with a left-hand turn—in a construction zone, no less—then pattered along below the posted limit.

Among her training partners, Jeannie was the risk-taker. In the middle of a 50-miler, after she'd blown through a red light or turned left from a through lane, someone would mention her medical insurance. "What's that deductible again, Jeannie?" Or, "You're the only person who needs a health plan with collision." The maneuvers might be unconventional but not, Jeannie thought, unsafe; she was a cyclist who took liberties with the rules of the road. The fact that she was a physician didn't make her hyper-cautious.

Her reaction to the truck wouldn't normally be so extreme—distracted driver or not—if she hadn't been riding home from an exceptionally difficult hospital shift. Not only was it her first one back after being cleared of medical negligence, it had ended with a particularly complex case. An eight-year-old girl had been admitted with flu-like symptoms, a stiff neck, skin rash, and confusion. After initial tests, Jeannie knew she was dealing with a classic case of bacterial meningitis. But then the father pulled her aside, and she learned the situation was anything but normal.

"My wife wasn't exactly truthful back there. Kara's been like this for two weeks, not two days." Gordon explained his wife had been taking their daughter to a Church-approved spiritual healer because their religion didn't believe in medical science.

Jeannie asked why she'd changed her mind and come to the hospital.

"I forced it. I think Beth's scared. We're separated, and she had insisted on handling these types of issues—we have another child, a son, at home. *Her* home. But this time I had to intervene." He was a thin man on a slightly short frame, and wore a polo shirt with slacks.



After a battery of tests Kara lay, listless, in a hospital bed while the staff interpreted the results and her parents bickered in the hall. Jeannie decided against initiating a dialogue with Beth; she was too busy healing her child to argue the merits of western medicine.

Which is why she was caught completely off guard when Beth found her at Medical Records and said, “I love my daughter.”

Jeannie was reviewing the chart of a patient whom she’d been unable to save. It was the case that had kept her out of the hospital for two months. Her coworkers had been cheerful when she returned—too cheerful, she thought—and Jeannie was relieved for time in Medical Records, where the air was less positively charged.

The patient was a Ph.D. student who’d gone to Mexico for a bargain-priced root canal. His wife explained he was saving for a home, and cut corners wherever possible. By the time Jeannie diagnosed him with cephalic tetanus, the bacteria had spread through his body. It was true she hadn’t followed the rules, but textbook procedure rarely applied in emergency situations. Especially when you were trying to figure out what some medical dilettante had done wrong.

The student’s young widow sued the hospital the same day the hospital launched their own investigation into Jeannie’s actions. She was cleared and allowed to resume working, but it was going to take the court longer to decide. As she looked at the written record of her decisions—diagnostic tests, treatments that seemed to work but then didn’t—Jeannie wondered what more she could have done.

But in the case of this little girl, the mother wanted Jeannie to do less. “I have my reasons,” Beth said, her voice like a brisk wind.

“Pardon?” She looked up from the chart.

“I have my reasons for doing what I do. They’re rooted in absolute faith in God.”

“I would never try to change your beliefs,” Jeannie said.

“My husband thinks this is the right thing for Kara. I don’t agree. But I want her well.”



“We’ll do everything possible for your daughter. But some would consider what you’ve been doing these past two weeks child abuse.” The slap across her face produced more awareness of air movement than pain. “I hope your son never contracts a cold; in your care he could end up dead.”

Beth had both hands mounted on her hips, and leaned in for emphasis. “The grace of God will forgive many things. But what you and all these people here are doing—”

A nurse with hair piled like a tower rushed up. “Dr. Hardaker, we need you in the ICU.” She hurried her off, although Jeannie would have preferred to stay.

Upon learning there was no emergency, Jeannie said, “Do you know what she did to her own little girl?”

The nurse nodded. “But you can’t change her. That’s not what we do.”

“Well maybe a policy change is in order.”

Jeannie climbed the stairwell for 20 minutes, step over methodic step to clear her head. She often found herself in here, lit by sodium-vapor light, when she needed to sort things out.

Jeannie didn’t have children, but had once wanted them. Entering med school with pediatrics in mind, she put herself through by working children’s parties as a clown. She’d twist phallic balloons into things less phallic, perform simple magic tricks, then ride out the front door on a unicycle. One weekend her car broke down and she unicycled to the party. When the finale came she rode out the door and all the way home. This was how she’d come to cycling; the following week she bought a road bike and her car became her weekend driver.

When she and her husband, Al, failed to carry a pregnancy to term, she decided children were a distraction, and focused on what she could do without them. She switched specialties and began an ER residency.

But when she saw Kara, more helpless than other children she treated, Jeannie slipped a pair of shoe booties over her hands, drew shaggy goatees on each, and asked the little girl, “Do you know the story of the Billy Goats Gruff?”

She didn’t mention Kara to Al when she’d reached home. Still in her bike gear and clipping around the tile on metal cleats, she recounted her ride home.



“The driver didn’t so much as look at me. But he knew I was there. They always do that. If they don’t make eye contact, they think they can’t be held responsible.” Jeannie was a tiny woman—95 pounds on a 15-pound bike (and boy could she climb hills)—but she wouldn’t be pushed into the gutter.

Al had a small belly and grey hair he kept in a short, neat ponytail. He worked at the local veteran’s hospital as a speech pathologist, helping those who’d witnessed ineffable things to talk again. Most of his clients had suffered brain damage in combat. A few were disabled in training. All were looking for a voice. A friend from school had developed a successful singing therapy practice that catered to pop stars. But Al preferred to coach those with something to say.

In getting them to speak, he’d learned to listen. So after Jeannie recounted her incident on the road, he offered the following, “Just be careful. It isn’t worth it.”

Jeannie said that she knew, safety first, she knew.

“He wasn’t expecting me to catch him at the stoplight. Did he ever look surprised when I tapped on his window.” Cycling in the fall left her at her destination one sweaty, snotty mess. Al handed her a tissue and she wiped her nose. “You’d think he’d seen a crazy woman, the way he stared.”

\*

Pretending it hadn’t been months since she’d last finished a regular work shift, Jeannie spent her first day off as usual—work around the house with Al, sushi at their favorite spot, and a cathartic bike ride. She met her training partners at the local coffee shop at 7, hydrated with caffeine then rolled out. 10 miles in, once they’d warmed up and left the traffic, Jeannie brought up the driver of the F-150.

“Someone once threw a bag of McDonald’s out their window,” one of her friends said. “I ran over it and fell into another car. Chicken McNuggets sauce everywhere.”

Jeannie was thinking about Kara, wondering if her parents had pulled her from the hospital. If they fought in front of her. And if her condition were still improving. *Why am I thinking so much about this patient?* She wondered. The situation



was difficult, but any more so than the student who'd died trying to provide his wife with a house? A patient's medical history was as complicated as their personal one.

At the end of the bike ride, Jeannie resolved to leave thoughts of her patients, past and present, on the road. At home with Al she was always trying to limit her discussions of work. Though he'd never complain, she knew he couldn't enjoy that type of talk.

So when the hospital chief called that afternoon and said deliberations had begun, Jeannie didn't mention it to Al. Instead, she suggested they re-caulk the window seals. But when they were working in the front and the neighborhood girl wheeled by (in a wheelchair—not on a bicycle—that she'd been put in by cerebral palsy), Kara's story tumbled out of her.

"And I don't know what I'll find tomorrow morning." Jeannie smoothed the white silicon into the joint between pane and glass with a finger, then wiped it on her pants.

"Do the parents allow herbal remedies?" Al asked while pumping caulk into a fresh joint.

"They didn't object to the 500 milligrams of ampicillin, q.i.d."

"You think they'd leave the hospital?"

Her voice was flat. "Could. Anything's possible."

Working in an ER dulled the senses. A fifteen-car pile-up on the local news might as well be a fender-bender, because you saw the gruesome effects first-hand, and had to repair the damage. Compared to what went on in a hospital, the outside world was muted. What the medical profession didn't numb, though, was a person's ability to feel guilt. The fact that the hospital's independent commission had cleared Jeannie did little to improve her sleep. Just because she wasn't negligent didn't mean she'd done everything possible.

\*

The next morning Jeannie stashed her bike in the hospital locker room and *clip-clipped* to the nursing station, where she learned Kara's blood pressure remained low.



Under the bed sheets, the little girl's sleeping body could have been a carpet wrinkle. Jeannie picked up the chart and noticed Beth in the corner, who rose and motioned for Jeannie to follow her into the hall.

"I know," Beth said and jerked her head towards the room. "I know what's on the chart, the complications. But can you understand? I did what I thought was right. Can you understand?" She had a tissue wadded in her hand and used it to wipe her nose.

Online last night, Jeannie had read an article about a young girl who'd died from bone cancer because medical treatment went against her family's religion. The parents were firm in their belief to the end, and upon her death issued a statement about it being God's will. The article added that parents in these situations rarely change their minds.

Jeannie asked Beth what it was she wanted her to understand.

"I believed that healer would save my daughter. I did what I thought was right. Can you understand that?" Her voice was anxious. "Can you?"

Jeannie understood why someone would believe in a spiritual healer: they dispensed religion-approved hope. Except it didn't work. Not that her own success rate was much better; despite state-of-the-art equipment she wasn't able to save that student. And his widow wanted answers. What could she tell her? That she didn't administer a tetanus shot because she mistakenly thought an inconclusive wound culture was negative? To her the rules were only guidelines. Perhaps the student would've fared better under the care of a spiritual healer.

\*

While riding home, Jeannie turned right on a red and had to veer into the gutter to avoid oncoming cars. She managed to stay upright, but flatted out from a piece of glass. Crammed onto the sidewalk, replacing the tube as cars whizzed by, Jeannie was thankful for the flat. That she could continue far enough for her tire to find the glass shard meant her illegal turn hadn't landed her on a car's hood.

At home, Jeannie helped Al barbeque vegetables and fish that they ate on the patio while discussing options for their next vacation—backpacking the Costa Rican jungle or renting an RV.



Jeannie set her fork down. “I know I’ve always said we’re lucky we couldn’t have kids because of the freedom. But do you ever think it wasn’t luck, but God telling us we’re unfit for parenting?”

Al said, “God doesn’t discriminate. Gordon and Beth had a child.”

“Two,” she corrected, then recounted that day’s conversation with Beth. “She said thank you. Not in those words, but—”

She stopped herself, and when Al realized she wouldn’t continue, he nodded. He’d dealt with his share of patients who, depressed by their injuries, had been unable to muster the optimism to thank him. But they could say *something*, and that was enough.

“It’s just that we tried for so long, and things never worked. Maybe I’m not good at sensing clues.” She wondered if one regarding her career in medicine were trying to get through.

\*

Kara’s blood pressure returned to normal the next morning so Jeannie approved her for release. Gordon wasn’t there, but Beth had brought their son, Markie. The boy wore saddle shoes and carried a bag of shelled almonds that he offered—silently, with the baggie hanging off an outstretched arm—to the cute nurses. Jeannie gave Kara a box of shoe covers for her own puppet shows, complete with hand-drawn goatees, that she tucked into a backpack full of hospital gift shop toys.

Jeannie had meant to say something to Beth before they left—precisely what, she didn’t know; most likely it would have been advice for Kara’s continued recovery cloaked in physician-speak—but she’d been called to assist on an epileptic seizure while Beth was signing papers. They were gone when Jeannie returned. The hospital room still had the vestiges of Kara’s brave little self—a half-full milk carton, tangled bed sheets, Kleenex tissues on the bedside table—things Kara didn’t need anymore. Jeannie didn’t need Kara, but she needed others like her—people she could heal. She pulled the sheets taut so a lump wouldn’t be mistaken for the girl.

The chief found Jeannie late in the afternoon and told her a verdict had



been reached. He offered her a lift to the courthouse but she opted to ride.

“You sure? It’s rush hour.”

Because Jeannie worked off-shift, she rarely rode in traffic. But risk was ubiquitous and she was ready for what would come. Jeannie assured the chief that she’d be fine and rolled out of the parking lot with a head-swiveling glance before merging into traffic.



## You Think You are You

You think that you are you - not so you are we,  
We, every cell inside our separate walls inside of you,  
    linked one to another.

It is we, we who work for our own survival,  
    we your flesh, nerve cells, brain and bone.

We have come together building for millions of years  
    you, our machine efficient for ourselves.

We need oxygen, we make you our machine breathe.  
We need nourishment, we make you our machine  
    feel hunger and send you out to find us food.

You are made to care for our survival, we make you  
    leap to avoid the falling branch, hide yourself  
    when the lions roar.

We even weave neurons so you believe yourself godlike  
    when you are just our tool.

It is we, we cells who swam in the first seas and we who  
    swim in this internal one who rule your world.

And when we wish to create another machine we  
    fabricate lust by mixing electricity and  
    chemicals which you call love.

You, our machine, may tend to us well but in the end  
    we always lose interest in you.

You are disposable while we, for a moment through  
    the belly of a worm, move on.

*Roy Shifrin*



# Bios

**Nichole Boisvert** is currently a senior at Marist College in Poughkeepsie, NY, where she is studying biomedical sciences with minors in chemistry and creative writing. Although at times seeming contradictory, she finds that engaging in both disciplines brings balance and sanity, and that the medical experience helps her write stronger poetry and likewise, having a writer's view of the world drives her to better understand patients and people in general. She hopes to eventually become a doctor, with her interests at the moment being oncology and HIV/AIDS. She also plans to keep writing for as long as inspiration will come.

**Ahmed Bouzid** is originally from Algeria. He holds an MS in Computer Science and a PhD in the Philosophy of Science. His life passion is making computers speak and understand plain English. He makes his living as a computer scientist in McLean, Virginia, building such systems.

**Dr. Jeffrey Allen Cohen** describes himself as such: "born in Oklahoma...spent my junior year abroad in Scotland...trained in neurology at Mt Sinai (NYC), Mass General and Mayo...been writing short stories and poetry for the last 25 years...enjoy hiking the Appalachian Trail with my black lab."

**Samantha and Isabel Estes**, sisters ages 8 and 5, love art! Samantha is a third grader at the Bernice A. Ray School in Hanover and Isabel is in kindergarten at the Montessori Children's School in Etna. Both enjoy painting, coloring and building with different materials. They loved participating in the winter program put on by the AVA and the Dartmouth Medical students.

**Michael Lee Johnson** lives in Chicago, IL after spending 10 years in Edmonton, Alberta Canada during the Vietnam War era. He is a freelance writer, and poet. He has been published in the USA, Canada, New Zealand, Australia, Scotland, Fiji, Nigeria Africa, India, United Kingdom. Michael Lee Johnson is a member of Poets & Writers, Inc and Directory of American Poets & Fictions Writers: <http://www.pw.org>. He is a member of The Illinois Authors Directory. Illinois Center for the Book: <http://www.illinoiscenterforthebook.org/directory.html> He has published 145 poems in 2007 to date. He is the author of: The Lost

American: From Exile to Freedom. [http://www.iuniverse.com/bookstore/book\\_detail.asp?isbn=0-595-46091-7](http://www.iuniverse.com/bookstore/book_detail.asp?isbn=0-595-46091-7). The book is also listed at Amazon.com, & Barnes & Noble. Visit his website at: <http://poetryman.mysite.com/>. He is now the publisher and editor of Poetic Legacy: <http://www.poetriclegacy.mysite.com/> Poetic Legacy is now open for submissions.

**Katherine Kosman** is beginning her second year at Dartmouth Medical School. After graduating with a degree in Electrical Engineering from Washington University in St. Louis, Katherine spent several years employed and working in company offices near Los Angeles and Boston before beginning her studies in medicine. The featured photographs were taken in Hanoi, Vietnam, where she traveled with a small team of Dartmouth affiliated physicians and surgeons as a first year student at DMS. Led by Dr. Rosen, their hospital work in Vietnam included pediatric surgical care for children with cleft palates, birth deformities, or poorly healed trauma. Katherine is interested in surgery, and hopes to make international volunteer medical work a continued part of her medical education and future career.

**Tom Kowalczyk** is a first year medical student at Dartmouth Medical School. He writes, "I got started with photography a couple of years ago as a way to document my travels. Soon it developed into a full fledged hobby and I began photographing everything from sunsets to little league baseball games. I feel photography is a great way to preserve the scenes of life which may otherwise be forgotten or not fully appreciated."

**Chun-Yu Lee** is a first year DMS medical student who grew up in Hong Kong and Northern California. He decided to pick up the camera after seeing the genius of Ansel Adam and his inspiring work on the American West landscape. In addition to photography, Chun also enjoys hiking through the woods and up mountains, and breathing in the different seasons of New England. This photo is part of a series taken during an excursion to Franconia Notch in Fall of 2007.

**Brandon Libby** is a third year medical student from Brewer, Maine. He was an IDSA fellow during the summer of 2007, and traveled to Tanzania, Africa to work on HIV research. Brandon finds his inspiration through the beauties of nature.

**Rick Mansfield MD MS** serves on the faculty in the primary care Department at the White River Junction VA, and holds an assistant professorship in medicine at the Dartmouth Medical School. For him, the ‘compressed writing’ style that poetry offers can be a way to convey deep meaning in brief clinical notes and a way to focus his own thoughts. His writings have also been published in JAMA, Academic Medicine, and Medical Economics among others.

**Cindy Nu Chai** graduated from UC Berkeley in 2006 with a double major in Art and Molecular & Cell Biology. Art has always been a part of her life and a reaction to everything she encounters. She hopes that artistic endeavors will continue to accompany her throughout her future medical career.

**Michelle Panik** writes, “I have an MFA from the University of Maryland, and an undergraduate degree in Writing and Art History/Criticism from UC San Diego. My fiction currently appears in Stone Table Review and is forthcoming in The Summerset Review.”

**Aimée Peck** is a third year medical student at Dartmouth with an interest in tropical medicine. In the summer of 2007, Aimée traveled to Tanzania with Aaron Edell to film a documentary called “37 Million and Counting” about the parasitic disease Onchocerciasis. While filming at a river in Lushoto, Aimée caught a photograph of this young boy who had paused briefly to watch the commotion.

**Linda F. Piotrowski** is a board certified chaplain who ministers in the Palliative Care Service at Dartmouth Hitchcock Medical Center. She has served as a chaplain for 18 years. Additionally, Linda is a wife, mother and grandmother of two terrific granddaughters. She is an Amherst Writers and Artists affiliate. She facilitates “Writing for Healing” writing groups for cancer patients and survivors at the Norris Cotton Cancer Center.

**Rajesh Ramanathan** currently is a third year Dartmouth Medical School student. He was born in Bangalore, India, and studied Molecular & Cellular Biology and Philosophy at the University of Illinois at Urbana Champaign before joining Dartmouth. Within medicine, he is very interested in integrating medicine into larger initiatives that reduce the burden that growing global inequalities place on individuals and communities. Outside of health and medicine, his interests

include woodworking, sculpture, reading, and the use of poetry as a medium to express ideas, thoughts and feelings.

**Roy Shifrin** was born in New York City. He lived in Europe for many years where he made an international reputation as a sculptor. His monumental bronzes stand in public plazas in Manhattan, Barcelona, West Lebanon, and many other cities. (Web Page at [web.mac.com/royshifrin](http://web.mac.com/royshifrin)). As well as a sculptor he is also a poet. Recently a book containing two hundred of his poems has been published under the title, "A Poet Hanging." He currently lives in Vermont.

**Ryan Stehr** states, "I was born and raised in Oakland, CA. Despite growing up in a city, I developed a love of the outdoors at a young age, and during my high school years, my friends and I became increasingly involved in backpacking and camping trips throughout the Sierra Nevada mountain range. I have always been impressed with the endless beauty Mother Nature delivers to us, and have developed an interest in nature photography in an attempt to capture some of her natural magnificence. This past summer I was lucky enough to participate in a medical service/backpacking trip in the Indian Himalayas. This trek offered up some of the most amazing landscapes I have seen."

**Adam Philip Stern** is a second year medical student at Upstate Medical University in Syracuse, New York. After graduating from Brown University, he began pursuing careers in both medicine and fiction writing. His writing stems from both his real-life experiences and the depths of his inspired imagination. He hopes to use his writing to make him a better doctor and medicine to make him a better writer.

**Andy Thomas** is a first year medical student at Feinberg School of Medicine, Northwestern. Photography is one of his favorite pastimes. It is a way to document places he sees, people he meets, and the amazing detail in the world around him.

**James Thomas** is a first year student at Dartmouth Medical School. He states, "Art has been a significant part of my life from an early age when it was introduced to me by my grandmother. I was trained in all media but I have always been drawn to drawing. I grew up in Salt Lake and I love hiking and

camping in the nearby mountains. My photography developed out of my desire to capture the natural beauty all around me. I continue to develop my art and enjoy the balance it adds to my life.”

**Lindsay Zaslav** is a four-year-old girl with Bloom’s syndrome, a rare genetic disorder characterized by unusually small size, sun-sensitivity, immune deficiency, and an extraordinarily high risk for developing cancer--of any type--beginning early in life. She is spunky and independent, intelligent, socially engaging, and very expressive. Aside from her interests in art, Lindsay’s other activities include gymnastics, dance, and pony-riding.

# Acknowledgments

We would like to thank Dartmouth Medical School and DMS Multicultural Affairs for their continued support.

To Shawn, thanks for your unending encouragement and support.

To Claire Langran and Heather Anderson, many thanks for all your help and guidance throughout the year.

To Timothy Good, thank you so much for maintaining the Lifelines website.

To Kathy Parsonnet, thank you for spreading the word about Lifelines amongst local artists.

To Laura Ordway and James Thomas, thank you for offering to carry the torch into another year.

To Rodwell Mabaera, thank you for all of the countless ways that you have supported and continue to support this journal.

Finally, to our friends within the DMS community who provided a year's worth of emotional support and encouragement – thank you!



# Call for Submissions

Lifelines invites submissions of original and unpublished short stories, non-fiction, poetry, artwork, and photographs. The editorial committee, comprised of students, faculty, and established writers in the nation, will review and select works based on craftsmanship, originality, and content. We welcome multiple submissions from each contributor. Submissions will be accepted year-round. Publications may appear in the Lifelines journal and also on the Lifelines website. All rights revert to author after first publication.

## Submission Guidelines:

Poems must not exceed 500 words. Prose pieces must not exceed 3500 words. We welcome both black-and-white and color artwork and photography.

Please include your name, current address, phone number, and/or email address on all submissions.

We prefer to receive submissions electronically at:

[lifelines@dartmouth.edu](mailto:lifelines@dartmouth.edu)

Submissions can also be sent through the mail to:

Dartmouth Medical School

Attn: Lifelines

Hanover, NH 03755-3833

Please contact us at [lifelines@dartmouth.edu](mailto:lifelines@dartmouth.edu) for further questions or comments or visit us at: [dms.dartmouth.edu/lifelines](http://dms.dartmouth.edu/lifelines)

# Support Lifelines

We envisioned Lifelines to be an open forum for the community: a journal that would grace patients' rooms, doctors' offices, hospital waiting areas, and classrooms, providing their occupants opportunities to pause and reflect on issues of health and illness.

We hope to continue publishing and distributing future issues of Lifelines free of charge, but this will only be possible with your continued monetary support. The Lifelines staff is composed of volunteers from the medical school donating their time to the various aspects of the journal's creation. All of your contributions will be used toward defraying printing costs and minimal operating expenses.

We appreciate donations in any amount. Donors who contribute more than \$100 will be listed in the next issue of the published journal, as well as receive a lifetime subscription to Lifelines. To send donations, or for more information, please contact us at:

Dartmouth Medical School  
Attn: Lifelines Fund  
Hanover, NH 03755-3833  
or  
Lifelines@Dartmouth.edu

