

LIFELINES

VOLUME 10

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ARTIST SPOTLIGHT p. 32

Nazanin Moghbeli



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LIFELINES

VOLUME 10

*A Literary and Art Journal of the
Geisel School of Medicine at Dartmouth*

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*To Sai Li, MD
Writer, healer*

aboutlifelines

Lifelines is a print journal for literature and art in medicine. The journal was founded in 2002 by Sai Li (MED'06) and established with the publication of the first issue in Fall 2004. Subsequently, the journal was published annually. Lifelines has featured work by Guggenheim Fellows, winners of the William Carlos Williams Poetry Competition, physicians, patients, medical students, faculty, and undergraduates, as well as from new authors and artists. The journal is open to all.



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foreword

“Go, little book”
—Robert Louis Stevenson

Readers,

These stories dwell on life and its disturbances. They are scenes of loss and love, failure and strength, suffering and renewal. Some have happened, others were dreamt up, a few made real. All come from an unflinching attention to our own living.

The first *Lifelines* was published in 2004 by students of Dartmouth Medical School to bridge the experiences of all who walk the journey of healing. Sai Li, then a first-year medical student, first pitched the idea of creating a journal of literature and art, a “literary collage,” which could cut through the humdrum and routines of medical practice by enlarging and deepening case study into narrative. Years later, in the very building where it all began, the three of us find ourselves carrying the flame of Li’s mission to address the role of stories in medicine.

This tenth edition celebrates submissions from the Upper Connecticut River Valley and far beyond. Journalled here are original works of art, poetry, prose, and literary nonfiction from the eyes of patients, their loved ones, and their doctors.

May these words find you in safety in these uncertain times.

Sincerely,



Diana Lee



Colin McLeish



Renisa Ramnath

Editors-in-Chief
Geisel School of Medicine at Dartmouth, Class of 2022

LIFELINES

Against the Fear of Writing a Real Poem

Matthew Freeman

I have to put in a work order
for my wretched
refrigerator, my blinds are dirty
and terrible, I've got
to go buy some ramen noodles:
it's not the time for visions!

You run into all these people
who are so afraid of actually saying something.
So I say: everything I wear
was given to me. If I sell a book
I'm going to get a couple slices.
My two main proclinations
are flight and electricity.

I have this muse no one would believe.
She addresses herself to all forms of power.
She takes apart the structure that contains reality.

Oh, I was so bold in the autumn, in love
with everything. I tackled my coach,
I loved the smell of erasers,
I climbed trees, I skinned my knees.

But today I met with my lovely case manager
and after the fullness I went out back
and I accidentally broke an ashtray
so I stealthily went and stole one from Cicero's
and then I heard thunder
and the trees got so loud
and the sky was mean and cruel
and I could not sleep so I got up and got dressed
and slyly took that ashtray back.

Big Toe

Andrew Crawford

If toes grew on trees,
 I'd chose a nice plump one
 and slap it on the stump.
 It wouldn't hurt,
 no feelings now
 but lonesome burning
 shooting up the stalks of legs
 to disappear
 in a tingling twinkle, forgotten amid
 sighs and aches and carbohydrate counts.
 Sometimes I look down
 to remind myself
 that there are still feet
 slapping earth.
 I don't often look up.
 Then I'd remember they don't grow on trees—
 wishes
 or toes.

Doctor-Impatient Relationship

Gerard Sarnat

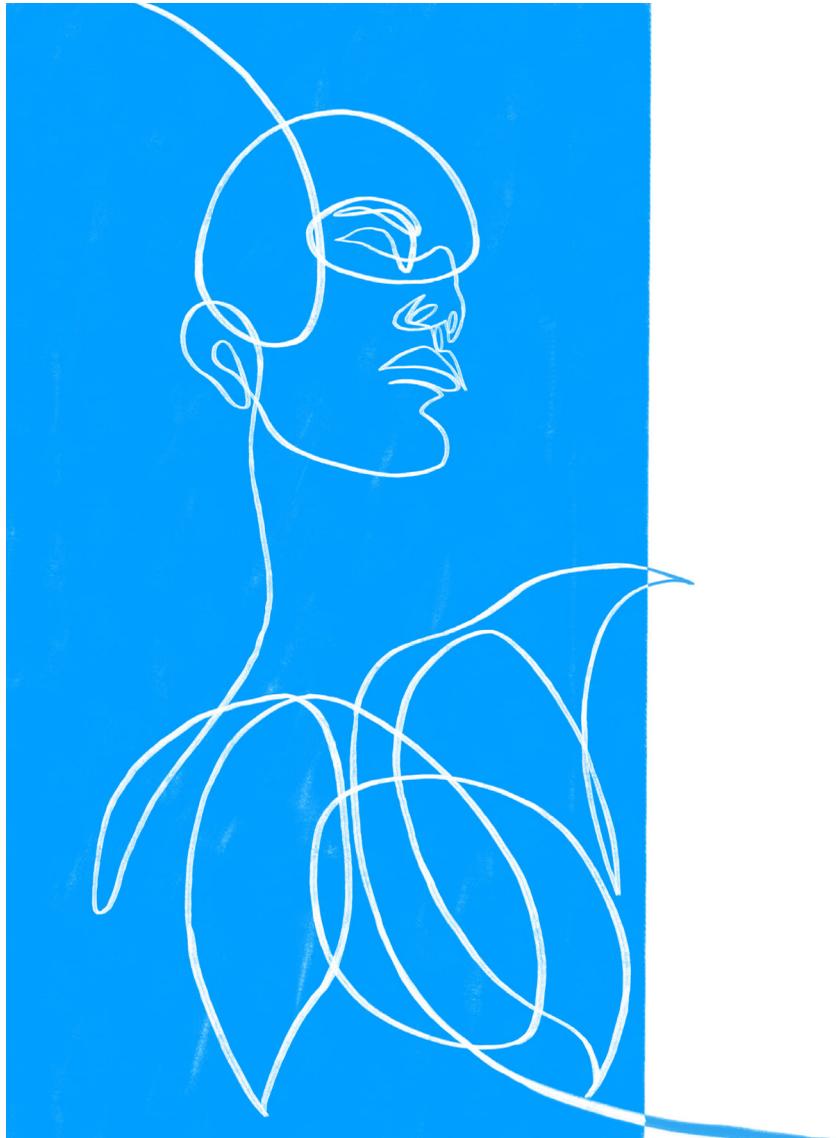
Boston Brahmin wannabe from tasseled loafers up to tortoiseshell glasses, my attending physician as I began internship at The Mecca's Beth Israel Hospital during the Gerald Ford interregnum between Nixon and Carter, known as the doc's doc for terse bedside manner yet magical clinical skills.

Despite being Jewish, he attended Boston Latin, graduated summa from Harvard's college and attended its med school before training at Bellevue then pioneering the defibrillator plus pacemaker for which Dr. Z's called Father of Modern Electrocardiac Therapy.

For some truly unfathomable reason, the meticulous iconic figure cottoned to me which resulted in my working alone with him in the cardiology lab where he cardioverted his private patients who'd developed perilous arrhythmias not controllable by usual pharmacologic means.

Maybe two weeks into the rotation, Paul (as he said I could refer to him thusly if we were absolutely alone) granted moi the privilege of applying the electric paddles to a psychiatrist whose atrial fibrillation was running wild: I asked whether the patient had already been anticoagulated.

That, of course, was normal prophylaxis done in advance so no emboli dislodged and traveled from heart to brain -- Dr. Zoll had established the protocol -- but Paul answered, *No he's real antsy to get back to work* -- after which the shrink blacked out with massive strokes -- survived in a nursing home with malpractice lawyers at his side.



Breathe

Alex Dai

Headspace

Anastasia Fairchok

Canvas sky,
true blue like feathers on a
jay
or delicate petals on a
stem.

Back damp from dew
I lay beneath an ocean in the
air
and count clouds, birds,
airplanes.

contrail
tails metal whales in the
sky
stark white paintbrushed lines
while geese fly by.

I want to hop onboard.
Experience my life from way up
above.
What would I see if I were an eye
thirty-eight hundred feet
high?

Life
tethered to the
ground
is like a song with no sound,
a body with no soul.

The wind shifts and
erases my plane-made
portrait.
The dew is damp and I am
disappearing.

Out in Yakima

Mark Crimmins

It was in Spokane, at a hospital downtown. I was there by his bedside. He wasn't going to make it, and he knew with all the weight of that terrible knowing. For a few visits he bore it stoically, but then, the last time I saw him, his voice cracked as he thanked me for visiting. His chin sank to his chest. For a few minutes, he was convulsed with sobs. All the weight of his expired mortality fell on him at once in an avalanche of grief. It was a while before he could speak. With some effort he pushed a hand off the side of the bed for me to hold and I took it. Then he spoke.

"Look at me—look at me here. Dying. Alone. Penniless." His words were punctuated with great heaving gulps of air. It was difficult to know if they were caused by sadness or the pain of the disease. "Look at me..."

He couldn't continue. Then he pulled an old photograph from under his pillow and held it out to me. It was almost as though he was so weak it took some effort to hold the tiny Polaroid. After some sighing he managed to dredge up a few more words as I took it from him.

"Look. Look at this."

I looked at the picture. It was a young boy, golden haired, standing under a laburnum tree in sunlight. One hand on his hip, he smiled as he squinted into the camera, a little man.

"Me," he whispered. "Can you imagine? Can you imagine that's me?"

I looked at the sad man slumped on the hospital bed before me. There was no resemblance whatsoever between the boy in the picture and the wreck he had become. I remembered a line from Shakespeare and realized I needed to lie.

"It's you," I said. "Oh, it's you all right."

I handed the picture back and he cradled it in his hand. He took a deep breath.

"Yes," he said, "it's me. Out in Yakima. Summer of 1930. I didn't even know we were poor. Not a care in the world. Look at me now."

I looked at him. I realized I would always remember this moment.

"Look at me now," he repeated. Can you imagine if I'd known? He had difficulty getting the terrible words out, but he had to have his say. I understood that clearly now. "If I'd known how I'd end up fifty years later? No friends. No family. No possessions. Lying here. A charity case. First I lost the one lung. I didn't quit. I couldn't. Then the other lung became riddled with the disease. I can't bring myself to say the word. The name. It's like the number of the beast. A curse. But this is me.

This is what I've become. I figured maybe if I could bring myself to say this stuff to you it would help somehow. Maybe it could do some good. I barely know you. God sent you to my bedside. That much I know."

I looked at him and he looked at me. It was silent in the room. Out on the avenue outside the window a truck honked his horn. Baarp! Baarp! The river of traffic. The Spokane River. The River of life. All were flowing on towards oblivion.

"Look," he said. "I want to ask you a favour."

With considerable effort he reached over to the bedside table. His hand was trembling as he opened the drawer. He took the Gideon's Bible from inside the drawer and handed it to me. Somewhere past the middle a torn corner of a newspaper page served as a bookmark.

"Open it," he said. The book opened to the Gospel of Matthew, Sixth Chapter.

A section of text had been blocked off with shaky pencil lines. "The Lord's Prayer," he said. "Will you read it to me?"

I said I would.

He brushed a hand across his face, lay back on his pillows, and closed his eyes. His right hand lay open with the picture resting on his palm. Slowly, careful to make no mistakes, and in as good a voice as I could manage, I read the passage to him. After the first few clauses, he nodded his head to the familiar rhythms of the Elizabethan phrases. He kept his eyes closed. manage, I read the passage to him.

When I was finished he lay still, his breathing regular now. He had fallen asleep. Quietly, ever so quietly, I put the Bible back in the drawer. I sat there in silence for a long time, watching his chest rise and fall. The picture slipped from his fingers as his hands relaxed, but I managed to place it back in his palm and curve his fingers around its edges without waking him. My mind drifted a little and I thought about the Yakima Valley. Its beauty and austerity. When my mind drifted back into the room I realized his chest was no longer rising. I went and got the nurse.

That was when I was eighteen and doing a bit of community service for a high school project. Benny Jenks was supposed to be with me but he'd chickened out at the last minute. Like everybody else, he was uncomfortable with death. Strangely enough, I soon forgot all about the man with the photo. The boy from out in Yakima. More than thirty years went by without me remembering him at all. Then one day, while I was just daydreaming, the scene came back to me and I saw the man as he lay on his bed in his final repose, still and stark as a sarcophagus.



Branches

Alette Frank

End of Life

Charles Marquardt

There shouldn't have been anyone standing outside his door; arms crossed and leaning against the door jam. Most of the light in the corridor came from inside his room, forming a wedge on the ground where faded half-shadows moved back and forth – the kind of shadows you make when you only cover one bulb in a bright room. When she turned towards me, I recognized her. I would see her notes on our patients when she worked nights. It's still strange when I see other teams of doctors talking to 'my' patients or when I read their notes. I never saw any one else talk to Mr. Pynchon, but someone gave him a pillow in the shape of a heart to hold when he coughed and I was jealous of that. If he'd asked I could have given it to him. I even looked up the Spanish for pillow afterwards just in case. But he didn't ask because he couldn't speak well since the stroke, and when he did, he asked for water, and I couldn't give him that.

When I got to the door, she said something comforting. At least I took it from her face that it was comforting, but I wasn't listening. There were eight or so people crowded around the bed and two nurses leaning against the crash cart. The conversation was calm but never casual, mixing orders about who would be next to do compressions with speculation about the credit card crisis caused by the cafeteria tills. There was a lack of fluidity to the conversation that belong there – it should be that way. At the end of my career, after a life of patients lost and saved, I hope I am never able to be truly nonchalant about death. Through all the bodies, I saw his vein-scored feet for the first time without their yellow, stippled hospital socks on. They looked so very frail and so very still, with the controlled violence of resuscitation all around. After half an hour or so, everything just stopped.

Equipment was packed up, and this group of people with sweaty scrubs and homes to go to

wandered off down the corridor. The room was almost empty when I looked up at the window. The darkness outside created a mirror where I could see Mr. Pynchon's face. It was the first time I saw him without his glasses, and he looked so very, very different.

Kate and I liked to watch the sunrise over Chicago as we walked between the towers of the hospital. If a patient was on the seventh floor, all the better. Still panting from the stairs, we would comment on the colors and our own timing; always too early or too late. When we were late, the walkway would heat up like a greenhouse. When we were early, sometimes there were still a few stars. One morning it poured rain so hard we could barely make out the trees in the park across the street, but it wasn't raining the morning Mr. Pynchon died. I don't remember the sunrise from that morning, nor much else of what happened that day. I remember Caressa came to check on me and I said everything was fine, because it was, but I didn't say that I think she took him off the list too quickly. Kate checked on me too, and I know Sean would have if he had slept in the past four days. When I started writing this two weeks ago my dad asked what I was doing. I said I was writing an essay about someone I cared for who had died. He didn't say anything, so I asked if he would read it when I was done.

According to him, I'm better at this kind of thing so he couldn't have helped much anyway.

I keep thinking I want to write ten pages about Mr. Pynchon, but there's not much to say. Nor did I say much in this short essay but rather cobbled together the remnants of memories I find personally significant. His death was jarring, but unexpected only to me. I think about him most days, with the heart shaped pillow in his lap and his goldfish bowl glasses, and how all he wanted was water. That image of him will never change.

The Morphinist

Stewart Massad

Dr. Delisle came in the next Saturday, rounding. One of his partner's patients was in a private corner room with tall windows full of late summer sun and maples' heavy green shade.

He walked in reading the chart: Delores Christofor, 79, from this side of Esperance, diagnosed less than a year ago with biliary cancer metastatic to liver and nodes: inoperable, according to the Albany surgeon who'd operated. After she'd come home, Dobson had treated her with chemotherapy that yielded a 40% tumor shrinkage lasting four months but leaving her bald. Colitis that the therapy provoked kept her hospitalized for weeks. Second line drugs briefly arrested tumor regrowth but exhausted her marrow. Third line agents showing promise in colon and breast cancer had left her with acne but failed to halt progression, despite costing \$34,000 per injection. Now she was admitted with back pain and inanition.

White sheets, two folded white towels, a white hospital gown with faded flowers, white enamel walls. Mr. Christofor sat up in his beige recliner: snowy brows over gray irises ringed white with age. When Dr. Delisle introduced himself, Christofor wrung his hand, would not let go. Mrs. Christofor herself was semiconscious, moaning, tossing. The room smelled of melena and Clostridium.

"How long has she been like this?" Dr. Delisle asked.

"Since Thursday," said Christofor, scowling, as if everyone should know.

Dr. Delisle went to the bedside. Saline solution hung by empty bags of red cells and vancomycin. Mrs. Christofor looked up at him with orange eyes. Cracked lips whispered words he couldn't hear. Her wasted right hand, all skin, tendon, and bone, clenched the rail as she

rocked herself. Her left hand clutched the gown half hiding her scaphoid belly. It had come off her left shoulder; her left breast hung out, skin slack, nipple chapped, the breast itself shriveled away. Dr. Delisle tied the gown behind her bony neck.

"Here," he said, "you'll feel better soon." He slipped fingers under her left hand and felt the liver mass, took the stethoscope from his coat pocket and listened to rhonchi in her chest.

"She's in such pain." Mr. Christofor's hands worked against themselves.

"Yes." Dr. Delisle felt her forehead, the way he had when his children were small: no fever, only furrows of pain.

"Isn't there anything you can do? Dr. Dobson had said . . ."

"Yes. Dr. Dobson." He pressed a red call button. The ward clerk answered the intercom. "Get me Mrs. Christofor's nurse, please."

When the nurse came, he ordered a bag of morphine solution.

"What concentration?" He told her. "What rate?" He told her. She stared. He nodded.

"I'll take responsibility."

They went to the nursing station. She made him enter the orders. A red flag came up on-screen. He clicked on the override. Then she went to the drug cart to mix the solution and flush the tubing. He went back to the room and held Mrs. Christofor's wrist. Her pulse was racing. She looked at him with the dumb appeal of the lost. He set her hand down on the sheet and sat across from Mr. Christofor.

"Can't you help her?"

"Patience."

The nurse had brought the morphine bag. They traded glances. He nodded. She hung it, threaded the line through the pump, began the

infusion, hurried out.

Dr. Delisle watched the morphine. Minutes passed. He looked out the window. Cars passed. A young woman in an orange blouse climbed the hill. Another woman passed, leading a child by the hand. He turned back to the husband.

"Mr. Christofor. Your wife is dying."

"What? No. Dr. Dobson said . . ." He looked at the door, as if Dobson might walk in and rescue him from this conversation. "We were hoping . . . Our granddaughter graduates from college in May."

"Mr. Christofor, your wife has advanced chemorefractory cholangiocarcinoma. Her liver's failed--you can see the jaundice in her eyes. Cancer's eating into her spine. She's bleeding into her colon from colitis we can't clear. Her bone marrow's too blasted by chemotherapy to recover."

Christofor did not answer. He looked out the big window toward one red leaf on a green maple tree.

Mrs. Christofor released the bedrail. The fist gripping her gown relaxed. She began to snore.

"I can break her pain with morphine, Mr. Christofor. But it may shorten her life. Did you ever talk to her about dying? About what she'd want if it came?"

Christofor snapped back to attention. "Dr. Dobson said there could be more treatments. We had hope. We didn't discuss such things."

Dr. Delisle sighed. "OK. Looking at this differently, if she were to die from her cancer, do you know how she'd want to go? Would she want to try resuscitation? Electric shocks? Chest compressions? A ventilator?"

"Oh, none of that. No artificial life support. She had a friend with breast cancer, weeks in intensive care at St. Pete's in Albany. We visited. It was terrible. But we were hoping . . ."

Dr. Delisle stood. "I'll write orders to say that."

He went off to see others: misery incarcerated. He tried to relieve what he could. Then he

went back to see Mrs. Christofor. She lay relaxed, staring sightless at the ceiling. He took her hand again; fingers clutched his like an infant's.

"Mrs. Christofor?" Her gaze shifted toward him, eyes searching. He imagined she saw him. "How's your pain?" She dropped his hand and moaned again, turning her face away.

Dr. Delisle went out and wrote orders to raise the infusion rate. He did chartwork in his office for another hour. Then he went back. He took her hand again, called her name once more. She did not answer.

"She seems more peaceful."

Mr. Christofor scowled. He went up to his wife. He called her name. She only snored. He stroked her arm. She did not respond. He turned to Dr. Delisle. "What have you done?"

Dr. Delisle put his thumb on the infusion pump's power switch. "I can stop. In ten minutes her pain will be where it was."

Mr. Christofor sat in the recliner. The air sighed out of the cushion. He put his face in his hands. "No."

The night nurse called twice to say that Mrs. Christofor had become agitated, her pain worse; he ordered the morphine infusion rate raised. When Dr. Delisle visited Sunday morning, she was breathing irregularly. Then he went to stand with his wife at church and listened to the priest explain how everything was God's plan. In the afternoon, Mrs. Christofor died. He went in to fill out papers. The dead woman was laid out under crisp sheets in a fresh gown. The smell was gone. Through an open window came the scent of wind off the Adirondacks.

Mr. Christofor was gone too. But when Dr. Delisle went out he saw him on a bench under the circle of maples inside the drive, still and alone in the shade of deep green leaves, one tipped with red. For a moment, Dr. Delisle thought to approach but had nothing to say. Instead he went home and planted his wife's chrysanthemums along their drive.

All Storms

Marjorie Moorhead

We met before the Internet!
Before it was carried in every pocket,
consulted for every question.
Dying of a disease without cure, denied
basic means for survival, convinced
this deprivation precluded romantic love.

And, there you appeared. So unlikely!
Medicine improved; death sentence amended.
We embraced. Came into balance;
filled in each other's halves. Wholeness
brought a child,
and then, his brother.

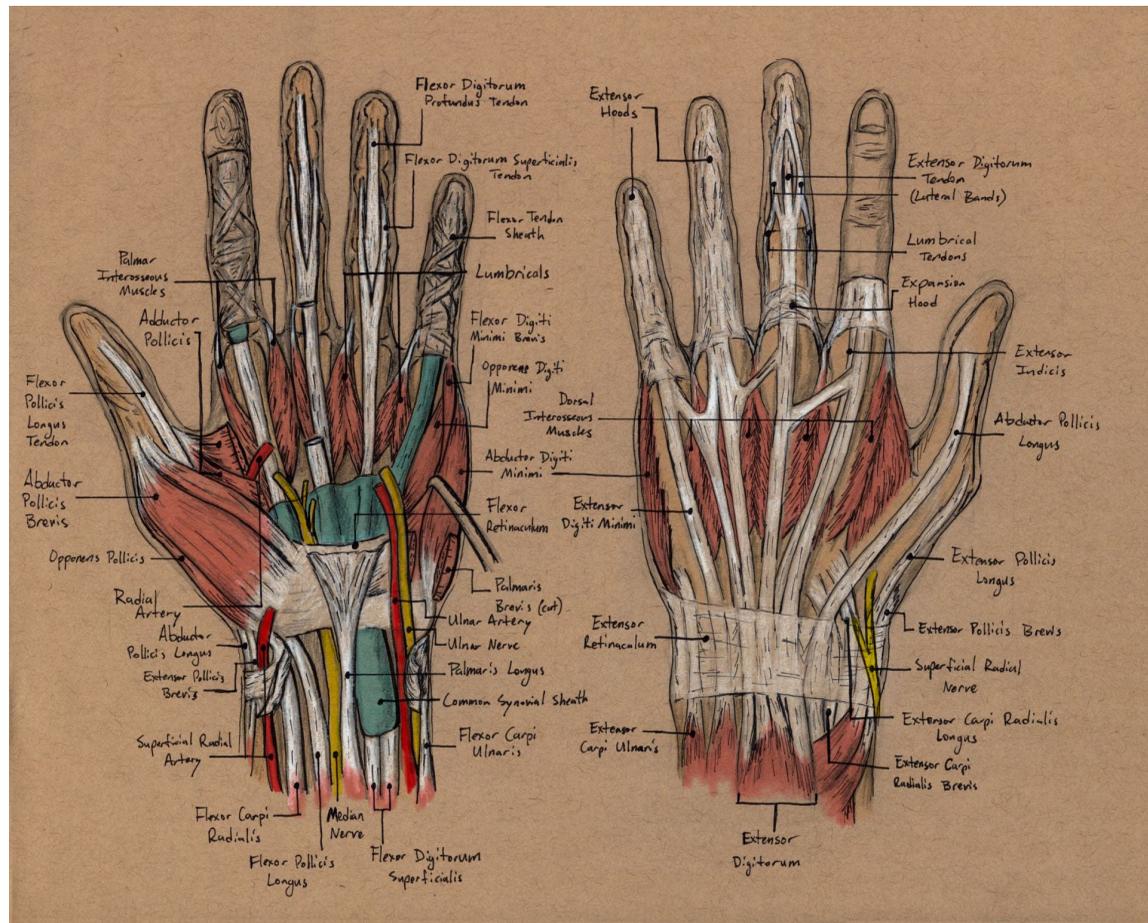
How could it be we've grown old together!
Parented, shared families' sagas. Cultivated
talents and imperfection. Not clear
if we'll navigate every rocky road. Wind blows
from all direction. Keep hold my hand, and I'll clasp
yours...maybe we'll weather all storms.

Because you lifted me from barren desert,
and held me until I could grow,
because I let you do so,
do I request that you remain?
Touchstone. Pillar. Forever.
Is this fair to wonder?



Untitled

Stephen Plume



Actions and Origins

Alex Dai

Hair Tie

Emma Neish

We placed an arterial line to more accurately measure your blood pressure so your brain aneurysm wouldn't rupture when they cracked your skull. As I held an ultrasound probe to your bloody wrist you said to me,

"Oh, I should probably take this out..." as you gestured to your hair tie wrapped around your thick blond ponytail.

"I can hold onto it and give it to your daughter when you're out of surgery." Still holding the bloody probe with my other hand I loosened your ponytail and gently pulled off your hair tie. "I'll keep it right here in my pocket for you. I know how precious these things are."

"Especially when you're at the gym and want to put your hair back!"

"I know, that's the worst." I wiped off drops of blood from the ultrasound and tucked the hair tie into my pocket.

They wheeled you to the OR.

There they screwed Mayfield clamps into your scalp and your shiny hair fell in disarray around your face. I felt the circular outline of your hair tie in my back pocket. The familiar buzz of the hair trimmer whirred as locks of blonde fell to the floor. They pulled more of it from your head, clump by clump revealing a neatly shorn strip of skin. Iodine prep, skin incision, scalp retraction - the drill whined. They cut through the dura, and gently parting the left and right lobes of your brain, revealed a quivering white bulge that was your MCA.

Everyone held their breath. If it burst, we would stop your heart with the little vial of adenosine standing at the ready.

But we didn't.

They clipped the mass, secured your tissue, sewed the dura, screwed your skull, stapled the

scalp, washed your skin and bandaged the incision. The only evidence that something had occurred was the red tinge gradually seeping further down your hair.

You awoke from anesthesia in a daze and tearful. I handed the hair tie to your nurse,

"This is her's - she wanted me to hang onto it during surgery."

Our eyes twinkled with humor - acknowledging both the triviality and profundity of such a request.

As I head back downstairs, I think of you - when your hair has grown back thick and shiny - reaching for that hair tie as you march again toward the gym.

To Yi-Nai (Grand-Aunt)

Richard Wu

This is what Yi-Nai remembers:
 Standing with you on American (Texan) soil
 And holding your hand,
 When you are just a toddler
 And don't know how to play mahjong yet
 And are still learning

to walk.

Yi-Nai tells you
 To step

with one foot

before the other –

Left –

right –

left –

Her footsteps kissing the ground
 Alongside yours.

This is what you remember:

You are already a college student
 And you sit beside the bed,
 Yi-Nai's hand in yours,
 As she lies there

in a coma

in the hospital ICU

Somewhere in Shanghai.

Yi-Nai is surrounded

By machines

beeping

Intermittently,

And tubes running in

and out

Of her body,

And you can smell

The muddled scent

Of disinfectant with flowers.

You are still a toddler

But now you let go

of Yi-Nai's hand

of Yi-Nai's hand

And then you are

Running –

almost flying –

across the park

To go kiss

A pretty girl.

You let go of Yi-Nai's hand

When the ICU nurse says,

Your time is up.

You tell Yi-Nai,

*I'll see you next time,
 when you get better.*

You tell Yi-Nai,

*And then we'll play
 another game.*

But you don't know

If you will have

A next time, another game.

This is what both you and Yi-Nai remember:

Bygone summer days –

Sweating in the Shanghai heat,

Below the creak of the spinning ceiling fan,

Above a clattering sea

Of mahjong tiles being

shuffled

On the wooden kitchen table.

You and Yi-Nai

Would stack those tiles

one

by

one

For the next

Game of mahjong.

What I wish I said before

Amal Cheema

Your laughter filled the hallway,
as did that forest waterfall:
overflowing, so carelessly.

Mortar and pestle crushed tomato and chili.
Drunken motorcycles flew under night's sky.
You, at the front—hand held high.

Your laughter tinged with pain, as beer
and smoke seeped out of
Frankenstein wrung stitches.

When I left the rainy city, I liked
The idea of you smiling, somewhere
far and cage-less by the Java sea.

But sutures and scars encircled you:
a crab carving out your soft throat,
Digging for a thyroid and old life.

Your left eye no longer blinked—
Has it closed now?
You're dead now.

You told me not to cry for you.
In my absence, in your absence,
what comfort you gave.



The Couple

Stephen Plume

The Tumor Board

Ben Harstine

Round the table
Sit one by one
We talk we vote
Another decision done
Sixty-five and sick
Tumor load too large

Surgery? No.
Chemo? No.
Radiation No.
It must be time to go on.

Next.

Eighty-seven
A tumor again
One more shot
Hope not lost
Decisions begin

Waiting

Savanna Scott Leslie

Agnes sits in a worn hospital chair. With her good hand, she thumbs the yellow foam poking out through a hole in the green leatherette. She squirms, but she can't make herself comfortable without using her sore arm, so she gives up. She watches her son.

Robert is pacing back and forth in front of the triage nurse's station. Even in the fluorescent light, even against a backdrop of beige walls and faded posters, he looks washed out. He has inherited her jowls, Agnes thinks, and something else besides—a sharpness about the temples that becomes more audacious the farther his hairline retreats. He reminds her of the last traces of snow in a parking lot, the way it discolours and thins out before shrinking into itself. In other respects, however, Robert hasn't changed. His neck still juts forward so that his head sticks out in front of his body like the prow of a ship. He still tucks his T-shirts into his jeans.

"You try telling her when she's in one of her moods," he's saying. She can hear him easily over the waiting room's low chatter. She knows the other patients can too, and she hopes they can see the little device he has jammed into his ear so that he can talk on the phone with a subtlety his stentorian voice belies.

"I don't care. I don't care. I don't care, Sandra." He totters on the verge of mirthless laughter the way he always does when he's angry.

In these moments, Agnes thinks, her son most closely resembles his father.

"Then be here. You can take her if she's determined to keep hurting herself. Trying to—no. No, in fact I'm the *only one* who gets an answer."

Agnes winces. She closes her eyes and pours her focus into a mental exercise, imagining a field of purple flowers and a warm breeze. Not a

single insect disturbs her as she sits by a stream. She conjures a hammock, and then a picnic basket.

"I'm *telling* you," Robert whines, and Agnes abandons her favourite mental scenery. Instead she pictures every syllable shooting like a dart from Robert's mouth before clattering uselessly against the Plexiglas window surrounding the triage nurse. The words pile up on the floor, inert.

"Agnes," says a bright voice. The old woman's eyes open halfway, screwed up against the harsh light and the torturous pain in her wrist. A wide-hipped, red-haired woman is staring from behind an aluminum clipboard. "Agnes Sez—Sesh—Sheck—"

"Czesny," Agnes says. She rubs the palm of her good hand over her eyes.

The other woman's teeth reveal themselves in a static, professional smile. "Uh-huh," she says, the lips unmoving. Her cardigan is the feeble yellow of hollandaise sauce. "Now, Agnes. You want to go through those doors, past the vending machine, and *all* the way to the end of the hall. Pass some tiny rooms with curtains, and on the left you find a place to take a seat. Okay?" She finishes with a brisk nod. Her lips snap back over her teeth.

As Agnes tries to make sense of the directions, the orderly squeaks away on plush neon running shoes.

#

Still on the phone with his sister, Robert has wandered back to the entrance. He cranes his neck to peer through the sliding doors and out into the parking lot. His Lincoln is three rows out, and already, a Ford and a Pontiac have slithered in beside it. He loosens his collar with the crook of a finger. The late morning sun is

melting all the snow he didn't have a chance to brush off the car.

Though he can't see them, he can feel the rivulets snaking their way down the windshield. He imagines them gnawing like lampreys at the seams of the hood and the fuel tank, turning the body to rust. The phone does nothing to dull Sandra's shrill voice. She is a mosquito whining in his ear. He cuts her diatribe short.

"She's only gone and bruised something. She does it on purpose. No. No, she does. She does and I'll tell you why." He has to speak up to hear himself over his sister's mewling. "I tell you she knows what she's doing. Oh, exactly. She knows. I swear I'll—it's nothing. It's just a bruise. I'm telling you. Just being stupid. All there's—all there's to it." The doors glide open to admit a dark man in a paramedic uniform and a knife of February air that cuts through Robert's clothes. The man's black jacket, littered with insignia, strains against his shoulders. The heels of his boots brush against stained carpets and then scuff softly around the corner.

"You're thinking like her. Yes, you are. Just exactly like her," Robert says. And then, with the click of a button on his earpiece, he ends the call. He spares the car a final glance and checks his watch before following the paramedic back to Urgent Care. He tallies up the minutes since he and his mother arrived here and stores them away like receipts.

When he finds her, she's standing in front of the vending machine, looking left and right like a child afraid to cross the street. She clutches her wrist against her chest and frowns tragically. Robert is, by now, accustomed to the Pierrot routine, but he still hasn't gotten used to seeing her like this. Her hair stands up at uncouth angles, and her quilted jacket couldn't possibly zip up around the convex body she has come to inhabit.

When they finally fix on him, her eyes are as wide as a puppy's.

"What's this?" he asks.

"'Past the vending machine,' she said, 'and then—'"

"Who said, ma?"

"The lady. The—what does it matter? 'Past the vending machine,' but I—"

He speaks slowly, patiently, for her benefit. He even smiles, beatific. "Let's go past the vending machine, then, you silly thing."

He pushes open a heavy green door and holds it while she shuffles through. Mistrust and suspicion contort her mouth and the thin eyebrows that linger below the forehead's translucent expanse. She draws her steps out so that each one is more protracted than the last.

#

Now Agnes follows her son down the hall to a second waiting area with the same shabby chairs as the first. She wonders who designed this maze of unending hallways. Robert sits down in the room's far corner, leaning against a counter and inspecting the stainless steel instruments that someone has laid out on what looks like a cafeteria tray. Agnes wrestles for control of her breathing as she makes her way past the empty seats toward her son. By the time she reaches the adjacent seat, she's panting like a winded bulldog.

"Come on, ma. Get this show on the road." Robert seems to be speaking for the enjoyment of a tidily dressed woman who had sat, sensibly, in the closest chair to the door. Her dark hair shines purple around the edges, creating a sombre halo. She makes a show of studying her long, square-cut nails. A gold pendant hangs out over her turtleneck like bunting.

Finally Agnes begins lowering herself into the chair. She hugs her bad arm in close against her body and lets her weight fall back into the thin cushion. Robert mumbles something. He raps the side of her knee with the back of his hand.

Across from Agnes sits a pair of young people. A boy and a girl, they have the same dirty blond hair, the boy's shaggy and the girl's gath-

ered up in the rough approximation of a braid. They could almost be siblings, Agnes thinks, except that they're leaning in close, and the boy's hands are stacked on top of the girl's. His shirt is speckled all over with rust-coloured stains. The girl's snow boots reach almost to her knees, ending in a triumph of grey fur.

Robert goes on talking. Agnes can't tell whether he's speaking to her or the earpiece, but it doesn't matter. His pale eyes are fixed on a plastic water bottle that he passes from hand to hand. She lets the whole taxing bulk of him go indistinct. She watches the curtained rooms across the hall. A long, low groan is coming from one of the hidden cells. It rises and falls like a muted siren until a man in turquoise scrubs parts the curtains with thespian grandeur and sticks his head in. He's thin and reedy, with arms and legs so narrow they seem liable to snap. He looks nothing like any doctor Agnes has ever seen before, yet the red-haired orderly with the aluminum clipboard follows closely on his heels.

"Don't tell me that's the doctor," Agnes says to nobody in particular. "Doesn't know his ass from his ankles but they want us to see *him*?"

There's a puff of laughter from the square-nailed woman, but Robert cuts Agnes's own wry chuckle short. Right away she knows she has down something to upset him. He leans in so close that she can feel his breath on her cheek.

"Now why would you say a thing like that?" he whispers. "Stupid, stupid, stupid."

The woman starts inspecting her nails again. A stinging warmth starts to burn across Agnes's cheek. It circles her neck before trickling down her spine.

Robert leans back, sighing, and reverts to his habitual molasses tone. "You can't be saying that, ma. I keep telling you. You can't go around saying things like that."

#

Robert tries to humour his mother, who only gets crankier the longer they wait. He gets her

to explain again what happened that morning. Lifting cases of pop, she says. He reminds her she can't expect to do these things anymore, that she needs help. She only shakes her head with a child's stubborn resolve.

"I'll get you another girl, a proper housekeeper. With her own sprays and soaps and things."

"What girl?" She's really sulking now, hunching forward over her sore arm. "What do I need a girl for?"

"'What do I need a girl for?'" he teases. When he pats the back of her hand, he can feel the taut veins. "Because you do, ma. You want to keep the house, don't you?"

"Don't joke about that."

He holds up his hands in a *don't shoot* gesture. "It needs to be clean, ma. It can't go on this way."

For a long time they sit in silence and he lets his words sink in. Eventually a nurse summons the scruffy boy, and his girlfriend goes with him. A plump woman in heart-patterned scrubs wheels an empty gurney down the hall.

"I'm getting you a girl. She'll come once a week, and that's final."

His mother starts to protest again but he spares them both the old rigmarole.

"I'm getting one, you'll be nice this time, and that's all there is to it."

At last the doctor comes, a string-bean of a man with close-cropped black hair and a tremendous beak of a nose. His dark eyes shine as she tells him what happened. Robert notices she's suddenly capable of sweeping callisthenics with the injured arm, and gone are all traces of antipathy. Instead she plays up her personal tragedy. When the doctor's long fingers tap and squeeze the corpulent wrist, his mother's face scrunches up in a pantomime of agony.

The doctor's voice is as soft as a woman's. "Okay, Agnes. I'm not liking how that wrist looks. Most probably it is a sprain. What we'll do is an X-ray in case the bone here is cracked."

She nods meekly. Robert runs the tip of his

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tongue along the front of his teeth. He knows that a break is exactly what she's hoping for. Coming home with a cast and a pill vial, expecting medals and honours like some casualty of war—that would be her triumph.

“What is important here is not to push yourself,” the doctor continues. His straight eyebrows seem to sit right on top of his eyelids. “You feel sore, you stop what you're doing, you rest. Okay? You stop when it hurts and you won't have a problem, won't need to see me again.”

His eyes crinkle up in a smile and she grins right back up at him. Robert hates how she basks in strangers' attention like a lizard in the sun.

“Do you have a hammer?” Robert asks.

“I'm sorry?” The doctor seems to notice Robert for the first time.

“A hammer, I said. You'll need one to get that into her thick skull.”

The doctor barks a quick laugh before he goes.

#

By the time she's back in her seat, Agnes wishes they hadn't done the X-rays, which had required more waiting and more trudging around between departments. Today she was meant to be home with the grandkids. She had bought the pop especially for them—never mind what Sandra thought of refined sugars. She had even bought a grocery store cake with dreamy swirls of icing. But then she'd gone and hurt herself carrying the wide case of cans in from the car. Who could say when Sandra would bring the children around again? Everything had been spoiled.

The young woman with the fur boots has come back alone. She looks smaller without his arm to cling to. Really she's a tiny scrap of a thing, Agnes thinks, the way she herself had been. The young woman watches the nurses with anxious, darting eyes, and Agnes recalls the sweet suffering of love like a song she's forgotten the words to.

“The waiting is awful,” Agnes says to the young woman. Robert groans, but the girl takes her hand away from her mouth. For a while they exchange small talk—the weather, the hospital, the X-rays, the health cards with the pictures that you have to go in and replace.

Agnes leans forward, still careful to protect her sore arm. She feels drawn to this young lady whose nose isn't glued to her mobile phone and whose fresh face eschews the cliché of makeup. Despite the years that yawn between them, the girl is present in the way Agnes herself is present. She's clever and bright, Agnes is sure.

“We'll starve at this rate,” Agnes says. “Think we'll be all done soon?”

“Jeez, ma. I don't know,” Robert cuts in. “Are you used to short waits at the fucking hospital?” His laughter is as dry and low as his father's. For a moment Agnes studies the floor, moss-green tiles streaked with white.

The young woman overlooks Agnes's son. She says, “You've got the X-rays done already, and that's the long part.”

Agnes nods. She has decided she likes the girl's hair after all, more bohemian than untidy.

“You tell me,” Robert says to his earpiece. “Thought we'd be in and out, no waiting. Can you believe it? I know. Said to her, ‘That's how it normally goes for you, does it? That's how it normally goes?’” Another chuckle, and then the warmth creeps down Agnes's spine. “Oh, I told her. Yes. Told her we'd get another girl. No excuses this time. Not optional, I said.”

“Robert, listen to me for once in your life. I am not having another stranger in my house.”

The words had sprung out of her of their own volition. Agnes herself is taken aback. For a moment it's as though a great pressure has been lifted, as if she's suddenly breached the surface of a vast ocean and filled aching lungs with breath. Then Robert smacks his plastic bottle into the side of her head, and the clarity shatters as quickly as it had come.

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“Don't you start,” he says, fingers still curling around the bottle. Agnes notices that the hairs between his knuckles have turned a brittle grey.

“That young lady is disgusted with you,” she says.

Robert picks his earpiece off the floor and leans back, casually inspecting the device. “That's funny,” he says. “She hasn't said a thing.”

The girl's eyes meet Agnes's one more time. Then they fix themselves dully on the fur at the tops of her boots.

58 Units

David Rink

25 years old and 58 units.
Does the hospital even have that many?

20 weeks, anencephaly;
“Uncomplicated” outpatient D&E;
In PACU, turning blue,
ED-bound, intubate,
OR now;
Transfuse;
Shock, DIC, subarachnoid, ECMO.

We did this.

How can we help if everything we do can hurt?
How can we help?
Can we help?

76 years old and falling.
Does she really need to be here?

Orthostatic;
Florinef, midodrine, droxidopa;
Still falling,
And BP rising;
No focal deficits;
Permissive;
Now focal deficits.

We did this.
How can we help if everything we do can hurt?
How can we help?
Can we help?

Hi, I’m going to be your doctor.
Can I be your doctor?
Stop talking to yourself.

Bleeding, infection, and damage to surrounding structures.
Risks and benefits discussed.
Whose risks? What benefits?
Mistakes, errors, imperfection, and hubris
Are the human side of medicine.

I’m human.
Can I do this?

We’re human.
Can we do this?

We did this.

Bedside Manner

Grace Bellstein

So you want to be a doctor? It's what they all love to ask you your first day, walking in with oversized scrubs and a goofy smile. You still see a pediatrician but you nod and respond, *cardiovascular surgery, I hope*. Just another verification that you know what you're talking about. The nurses are nice — to the point where you start to question whether it's their real personalities or not — wearing their Donald Duck matching scrub sets and greeting even the crabbiest of patients with the utmost concern. You wonder how you could do it, day in and day out, getting called "girl" by everyone over fifty and the charming, graying doctor that always asks them to fetch him this or that. But they all do, and they seem to enjoy it. You wonder if that pesky cliché adults always tell you, that work doesn't feel hard when you love doing it, can really be true.

Finally, you meet him. Stepping into his office in perhaps the most awkward way possible, you sit down next to him as he methodically looks over charts and places sloppy signatures on imaging requests. He's nice enough, offering you tidbits of information to keep yourself amused. *But oh, you're so young*, he mentions. *I've been practicing three times longer than you've been living*. Hotness swells up inside you, and you're not entirely sure why. He's right, after all. And you're eager to prove to him that you really are worth the exhaustion. You point out right where the arrhythmia is on the EKG, before he tells you, and ask questions with large technical terms in them, just out of curiosity. Bradycardia. Tachycardia. Aortic dissection. The familiar, yet entirely foreign syllables swirl around your mind as you sit there, the heart-shaped clock beating away the seconds, the lengthy minutes.

Sometimes you marvel at this strange practice, walking in to see ailing patients right behind him like a baby duck parading after her mother. None of them think twice about it, nodding to acknowledge you, asking what the kids do for fun these days. In some of them, you can almost see their younger selves, frolicking around carelessly with little regard for these dense, painful years of their life. *Diet and exercise. Have you been taking your blood pressure? We've gotta get that cholesterol down. Do you know how much you weigh?* It's as if the fear that crosses their eyes, the deep sighs of recognition are the same for all of them, prompted by a monotonous spiel of vaguely judgmental questions. You wonder if you'll be like this when you get older, chronic back pain and a heart that just can't seem to do right by you. Somehow, you appreciate the run you went on earlier even more than before, vowing to do it more often while you still can.

You're surprised when you can be helpful, patients stumbling over a word or elaborating on some grievance about their phone, their laptop, their lawnmower. Your replies are short, kind, delivered matter-of-factly. One of them asks if they allow you to talk in here. Truthfully, you respond that you don't have much to add. You're learning. It feels wrong to delegitimize yourself like that, but you do anyway because you have thirty more days of this to do. And you know, deep down, that this ever-evolving field of life and death really will be your passion. You can barely imagine yourself when you'll finally have finished all the years of school, internship, residency. But, no, that shouldn't deter you. Anything important is worth working for.

You start to recognize certain traits, faster than you would've imagined. Smokers always seem to have an uncertainty, an anxiousness about being bored, being idle. One constantly brings up that millennials actually believe that the moon landing was faked. It seems like an excuse to mention the most exciting years of his life, describing exactly what he remembered doing at that very moment with a satisfied grin. Suddenly, everything about this — caring for people — starts to take on a deeper significance, seeing how each of these patients has something they care about more than anyone could imagine — their new Labrador puppies, their children, their embarrassing retail shopping compulsion.

In his downtime, the doctor is respectful, offering you advice about his career in medicine. *You know*, he cautions you, *most women in this profession end up making a choice. Family or career. You need to figure out where your priorities lie*. Sometimes it's hard for you to confront choices like this, knowing there's some truth in that very real division of time.

He smiles back at you when the patients call you sweetheart, when all you've done is listen, smile, politely respond. In a way, you start to realize that might be more what medicine is all about — ordinary people feeling like someone cares about them enough to listen.

The days are long and you feel your feet start to ache from all the standing. You lean against the wall sometimes, careful to not look too relaxed, or accidentally hit any light switches. You know that you'd be the one to do something like that. Sometimes, he lets you listen through the stethoscope, the world tuned out as you hear that rhythmic opening and shutting of valves. *Glug-glug. Glug-glug*. You hear leaky hearts, ones that beat too fast, tired ones, fibrillating ones. You try to imagine the real heart — all its smooth, pocketed muscle and forceful channels of blood. How could something so intimate, the very symbol of love itself, betray us?

It doesn't seem fair, seeing the ghastly mani-

festations of congenital problems, the tendency of the arteries to slowly, steadily give themselves into decay. Lists of medications as long as the Magna Carta. Shots, pills, therapies, treadmill tests, fluids, sketches. All to understand, to harness what seems to be a timeless curse of corporate burnout.

Too much fat. Too much sugar. Too much cholesterol. There always seems to be a different culprit for the aching, stabbing pains. *But life beats on*, his words ring in your ears, *we do everything we can*. He's not perfect and neither are you. But there's something special about all the years of his life he's spent caring for these people, idiosyncrasies and all. You wonder if you could ever do it, what it means for the rest of your life. But something inside calls you, a raw, visceral curiosity to understand life, to have the power to better it for even a few people. And you decide, obstacles or not, one day you'll walk into your office to a pair of gleaming eyes just like yours and smile, gently, knowing everything you've done to get here is worth it.

RUPTURE

ARTIST SPOTLIGHT NAZANIN MOGHBELI

Nazanin is an Iranian-American artist and cardiologist. She grew up in Iran during the turbulent years of the Islamic Revolution and war with Iraq. In Iran, she studied Persian calligraphy, miniature painting, and music. In her art, Nazanin grapples with her dual identities as an Iranian and American to shed light on what happens when what seems disparate

comes together.

In her practice, Nazanin is the director of the Cardiac Care Unit at Einstein Medical Center. She draws on the relationships with her patients, many of whom are critically ill, as well as their diagnostic imagery, for inspiration in the studio.

SERIES



Cor by Nazanin Moghbeli

A line can be made by words on a page, ink flowing from where the nib of a pen makes contact with paper, or *blood flowing in an artery*. A line can reveal the electrical current in the heart, can tell me if the heart is beating normally, if someone is alive, dying, or dead.

Line is also flow. It can be continuous flow on paper, making thick strong lines, or continuous flow in the body of the healthy circulation of blood. Line can also be interrupted or ruptured, breaking up shapes or even, in the case of blood flow, causing a heart attack. The body itself becomes a drawing, and our ECGs and angiograms are lines that translate the flow of blood and electricity from the body directly onto paper or a moving image.

This series of drawings pays reverence to this intersection of the complex meaning of lines and forms that flow when our bodies are whole and rupture when our bodies are broken. Lines of words, calligraphy, and blood flow all mirror each other in the world that I straddle.

**RCA**

Nazanin Moghbeli



Ruptured Diagonal
Nazanin Moghbeli



Rupture 4
Nazanin Moghbeli



Rupture 1
Nazanin Moghbeli



Rupture 3
Nazanin Moghbeli

IEWS FROM THE STRITCH no.1



The First “Stritch Skimm”
 Weekly Comic
 Michelle Seu

First Rotation: I would laugh if I weren't so mad

Anjali Jaiman

Sometimes I want to run in the hospital. I want to run down the hallway passed all the rooms. Down the corridor where there is no privacy, and all the heads will poke out of all the rooms behind all of the curtains.

Why is that doctor running down the hallway her arms are full of needles? I'm not a doctor yet, I yell over my shoulder. What is the emergency down our hallway? Which curtain in which room which code? I should run out of this hospital down the street to my bicycle down Nostrand right on Church Avenue past the stew shop and the Indian grocery and the Mexican Grocery and then the Tajik grocery. Make a left at the bus stop, and past the laundromat and the car wash and the place they sell dirt. Make a right at that gas station. End of the block. Up the stairs, open the door, into my room and shut.

That's not where I am going. I am running to you. Because you don't speak English and I don't think anyone told you that you are going to die here. Because you are deaf and I don't think anyone knows you are rotting from the inside because on a scale of 1 to 10 how much pain are you in? Because you have not had a shower in three years and you just want to feel the sun and the wind on your face. Because you haven't eaten in a week waiting to be cut up but no one wants to do it, and someone said you had “reserves” of soft tissue, its a service not to feed you because you are so fat. No one has time to scrub your back. You have gaping hole in your ass, blood in your belly, water in your lungs in your heart. Because there is not enough time and not enough hands. It only takes 5 minutes to drown and no one is watching.

I had a dream last night that I was swimming

in the hallways and I swam into your room and you asked me if I had watched that movie yet. The one in which Adam Sandler is an Israeli barber. I said no not yet, but I'll bring you a cup of ice because you like the Ensure on the rocks and you haven't had an appetite since you jumped out of that 6 story building and broke all of your bones.

Isn't every room here an emergency? But we move like we are underwater. The hospital is a pair of lungs that are filled with water and no one can breath. We are waiting waiting hearing our hearts beating manically in our ears until they stop because there is no more oxygen left.

We don't visit him, notes 2x per week. He has been here for 1,569 days. He can't leave. I can hear you standing outside of my room gossiping about me but the doctors never come in. There isn't enough time. Put in the order. The nurse is giving medications, she can't get it now she has 12 patients to see. There is no time. We are doing the best we can given the circumstances. Out of supplies. They don't have anywhere else to go. She has been waiting for transport for an hour and she died sitting in that chair. Some care is better than no care, no? But isn't that Tuskegee logic?

This morning it was 4:30 am, and there was a lady naked standing by the nursing station. Good morning! Good morning! She followed me as I walked down the hallway quickly but not running. Good morning. I am the boss of this floor come talk to me. I will on my way back--I have to see someone down this hall. Can you check his sugar now and again in an hour? I'm walking quickly back. The boss of the floor is talking to the plants. Hello my children. Good

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morning! I am your aunty. I will take care of you don't worry. I think you need more water.

Can you please slow down. Why didn't you go back to visit him. Now his arm is bubbled and blistered because you didn't check, it should have been central not peripheral and all the vessels and all the hallways closed up, they tightened on themselves and nothing can pass and we are stuck. You didn't check on her and now she is too wet inside and her heart is flooded. You didn't check on her she is sad sad sad, she wants to leave, she doesn't want to leave. This is her home she wants to go home. No one came to talk to her today. It's not like they come every day anyway.

Sometimes I want to stand up in the auditorium and scream. I wonder what they would say if I did. Would they think I've lost my mind. Go straight to CPEP, do not pass Go. There are enough doctors in this room to commit you, we can all sign on the line. I want to scream and say well actually that is not what happened. Well actually you didn't visit her for five days while that purulent smell came out of her opening wound. Look at your notes you copied them down from the day before. Non-tender, non-distended. Well healing scar, midline. That girl needs psychotherapy. That woman is too soft for this. This is just what we do. Sometimes shit happens. Just wait, you'll see, you will get bitter and used up too, just like we all do. You were there when they cut her open and one tear dripped into her guts and multiplied into a lake of shit and blood. If I put a light into her soft body, I would see it shining through because there is only one translucent layer of skin left surrounding all of her vital organs. She is going to die. She is going to die sooner. She will die soon. Well it is a teaching hospital, aren't you glad you got to see necrotizing fasciitis. Good training look at all of the medical problems you get to see. The experience! You can't substitute! Our population is quite special. Very very special. Occam's razor doesn't work with our population. She was very

sick to begin with. In this community it's not just one problem its one hundred. And it's a social work issue anyway.

We aren't dry or clean. Our coats are drenched and dirty. Everywhere there is water. It's all about water. Don't worry your aunty is here. I can't pull you out, but I can hold your hand while you drown.

LIFELINES



Sin, Virtue, ...

Samuel Hernandez

White Walls and Yellow Wallpaper

Mandy Shunnarah

“The medical community is not particularly interested in taking the pain of women seriously.”

— Roxane Gay in *Hunger: A Memoir of (My) Body*

As someone who likes to squeeze the most out of the last few minutes before her alarm goes off, I’m not the type to wake up at 4:30 a.m. But when it felt like a searing hot metal rod was piercing my belly button and coming out my spine, I didn’t have a choice.

The pain was so intense my breath became shallow—almost how asthma has been described to me, as a non-asthmatic—and I couldn’t walk without doubling over to a near-crawl. A cold sweat burst from my pores. The next three hours were spent googling symptoms, which, according to WebMD, could be anything from anxiety to mild constipation to stage four cancer.

However, there was one explanation that sounded exactly like what I was experiencing: *Appendicitis is a medical emergency that almost always requires prompt surgery to remove the appendix. Left untreated, an inflamed appendix will eventually burst, or perforate, spilling infectious materials into the abdominal cavity. This can lead to peritonitis, a serious inflammation of the abdominal cavity’s lining that can be fatal unless it is treated quickly with strong antibiotics.*

This was in the few months after my college graduation, when I was directionless and living at home with my parents in rural Alabama, wondering what to make of myself. So for the next three hours I curled into the fetal position and waited for my mom to wake up to take me to the emergency room.

But that isn’t what happened. She told me to “just take a Tylenol” because she had to go to work. She then suggested I drive myself to the hospital if I “felt so bad,” forgetting I couldn’t walk without hunching over and the hospital

would be a 45-minute drive in morning rush hour traffic. Like many women I have known, my mother is unmoved by physical pain unless she is the one experiencing it. If she has even so much as a migraine, she expects everyone and everything to fall into orbit around her—planets about her stricken sun. She believes women’s pain to be a symptom of melodrama rather than an actual medical emergency. This is how women have been conditioned to view their pain and prioritize harmony and quiet even over their most vital needs.

After no small amount of pleading and attempts at reason, my grandmother came to take me to the ER. Though my grandmother is more empathetic than my mother, I convinced her only by citing the handful of times I’d been to the ER in my life and insisting I wouldn’t be asking if it wasn’t necessary.

Just walking across the hospital parking lot left me clutching my stomach and trying to force myself to breathe normally. At the nurse’s station, despite *me* being the one doubled over, they ask my grandmother if she’s sick. My grandmother tells them no. One nurse looks me up and down and asks, “Are you sick?” As if it’s unfathomable a woman in her early twenties would need medical attention. I wanted to say, “No, I come to the emergency room for fun. This place is a laugh riot.” I wanted to say, “Of course not. This is how I normally walk and breathe.” I wanted to say something so dripping with sarcasm that she’d dash to the break room in tears, with a profound understanding of how ridiculous such a question is. But instead I replied, “Yes.” I even attempted to smile—knowing that smiling through pain is another thing

women are expected to do and praised for when they do it convincingly enough.

“Well, take a seat and we’ll call you,” she said, as if I was just another thing to be dealt with. Another small, annoying task to be crossed off then forgotten—like making rounds, doling out medicine by the milligram, tossing away contaminated latex gloves, and pumping hand sanitizer into her palm.

Some time later, I was brought back to a room and assigned a doctor, who seemed to understand that, yes, I was sick, and no, the symptoms I was experiencing were not a normal state of being. He agreed it sounded like my appendix was the problem and called for a CT scan, which meant dyeing my insides so they could better see how swollen my appendix was. Somehow, the dye injection made me feel like I was wetting myself, which—I was relieved to find—I was not.

Several hours later, the test revealed my appendix was a normal size. No swelling, no upset, no threat of rupture. “If it’s not my appendix, what is it?”

“We don’t know,” the doctor said, shaking his head and looking peeved, as if I made the whole thing up. “We’re going to give you a painkiller and send you home.” And with that, he and his clipboard and his refusal to make eye contact were gone, on to more important things.

A few minutes later, a nurse came in to prepare me for the IV. “Wait a minute,” I said. “You’re giving me a painkiller and we don’t know what’s causing the pain. I want to find out what’s causing it.”

“You don’t want the IV?” she asked incredulously. “I thought you were in pain.”

“I am in pain. That’s why I want to know what’s causing it. If you give me an IV and send me home, how do I know the pain isn’t going to come back the minute the drug wears off?”

“Well, if it still hurts later tonight you can come back,” she told me. As if unemployed recent college graduates have infinite reserves of

health insurance to pay for two ER visits in a single day. She treated me like I was some kindergartner who’d fallen on the playground and gotten a scrape. She, like the doctor before her (and the nurse before him and my mother before her), acted as if the real, physical pain in my abdomen was something I imagined simply because they couldn’t see it on a CT scan or feel it themselves.

“And what are you going to do if I have to come back? Give me another IV and send me on my way? I’m asking you to do your job fully, not just slap a bandaid on me and shove me out the door.”

My grandmother, who was sitting in the chair beside the hospital bed, shushed me, thinking me unreasonable. She is of the traditional view professionals are not to be questioned, as questioning is a sign of disrespect. I added her to the growing list of people who treated me like a child that day.

“We checked your appendix and that wasn’t it, so that’s why we’re giving you the painkiller,” the nurse said glumly. For a profession based on science, the medical establishment, at least in that particular emergency room, is quick to abandon a hypothesis after insufficient testing.

“So what are you checking next? We’ve ruled out my appendix, so what else could it be?”

My grandmother kept tsk-tsk-tsking and muttering “Just be quiet, Amanda,” under her breath. The nurse was silent for a moment as she injected the needle in my forearm and made sure the IV drip was working. She appeared smug my own grandmother seemed to be on her side. The drug hit me almost instantly, numbing the pain and making me sleepy.

“We’re not checking anything else. Just go home, get some rest, and talk to your primary care doctor if the pain comes back,” and she left.

Just go home and get some rest. How often women are told this. Whether the pain is physical, mental, or emotional, rest is the answer. Rest and it’ll all be better in the morning. There’s

nothing wrong with you; you're just tired. Rest, as if the pain in my gut hadn't woken me up in the middle of the night and forced me to abandon all hope of sleep.

As the drug flooded through my veins, I drifted in and out of consciousness. It was mid-afternoon and for the first time since I'd woken up at 4:30 a.m., I didn't feel the searing pain in my stomach and back.

Unmeasured time passed. I'd finally drifted off to sleep when the nurse came in to discharge me. "But we still haven't figured out what caused the pain," I persisted.

"Like I told you, you'll leave here—"

"No," I said, firmly. At least I meant to say it firmly, but my speech was slurred from the effects of the drug. "I came here for help and you're doing the bare minimum. You're acting like because my appendix isn't about to rupture the pain couldn't possibly be caused by something else when there are a million more things that can go wrong in a person's stomach. Didn't you learn that in nursing school?"

"Are you in pain now?" she asked, annoyed.

"No, because you gave me a painkiller."

"If you're not in pain and you're not sick, we can't help you," she said, and turned to leave again. "Visit the nurse's station on your way out."

My grandmother gathered her jacket and stood up, but I didn't move. "Do you need help?" she asked.

"No," I said. "We're not leaving yet."

It was nearly a half an hour later before the nurse came back. "You're still here?" she asked, puzzled.

"Yes. I want more tests run, remember?"

"We need this room and if you don't leave I'm going to have to call security."

"You're threatening to call security because I'm telling you I need more tests? You're telling me you'd have security escort me out because I'm asking you to do your job?"

"Just be quiet, Amanda. That's enough.

They've done all they can do," my grandmother pleaded.

"I can call a psychiatric doctor. They may see some cause to admit you," the nurse suggested.

I begin to understand what they must think when they look at me. A woman delusional, a woman hysterical. A woman using the hospital as her yellow wallpapered room. It is at this point I decide—however irrational, however prideful—I would, actually, rather die than stay in this emergency room. For a moment, just a moment, I entertained the thought of dying and my grandmother taking the nurses and doctors to task for not listening to me. I imagined them all quitting their jobs out of guilt, or being fired for negligence, so they never fatally dismissed anyone else like they did me.

How I wish I were stronger than I am. How I smolder with anger that strength is required of me when I am incapacitated and weak. How I despise the fact women are asked to be strong at the one place they go when their strength has left them. Instead, I stood up, saying, "just fucking admit you don't care what happens to me" and ambled toward the door.

Three years later.

It's early morning and my fiancé, Jon, is tossing and turning in bed. He breathes heavily and bunches the sheets in his fists under his chin.

"What's wrong?"

"It feels like someone just kicked me in the stomach."

We walk through the symptoms. Fever—check. Chills—check. Nausea—check. Pain in the lower right side of the abdomen—check. Tenderness to the touch where the pain is—check. It sounds like appendicitis. He's curled around himself, clutching his stomach and I cannot tell him not to go to the hospital. My fear the doctors and nurses will dismiss him is nothing compared to the fear I have of the appendix bursting in the person I most love.

I hear my grandmother's voice: "Just be quiet, Amanda. Just be quiet, Amanda. Just be quiet."

The pain didn't come back. But no one could have known that at the time. And while, of course, relieved I didn't die or have to have surgery, I found myself avoiding the hospital after that day. I cancelled checkups and physicals and vaccinations and pap smears with minimal notice, citing inescapable work commitments rather than admitting anxiety consumed every thought surrounding the hospital. I began negotiating what care was *really* necessary. I weighed the cost of not knowing. At the expense of my health, I let fear convince me it just wasn't worth it.

The one question I kept going back to—that I *keep* coming back to—is this: *how did they know?* I didn't die or, as far as I know, have any lasting effects from that day. But if all they did is rule out one of an infinite number of possibilities, how did they know I would be okay? If my health is a gamble, I should be the one deciding when to throw the dice. To retain at least that modicum of control is to retain some agency, some power. If someone is going to look at my body and decide it's not worth saving, I want to be the one looking in the mirror and making that decision. If I had wanted to die, I wouldn't have gone to the hospital.

How did they know I would be okay, when they did so little to find out? How could they have *known?*

I wait by the phone. It is in times like these when I'm thankful my future in-laws are retired and live within a five minute drive. My mother-in-law-to-be takes her son to the emergency room. At work, I click the home key on my phone every few minutes waiting for updates on Jon.

He tells me they're testing his appendix. I

find myself hoping the problem is his appendix, even with all the complications that would entail, because that's something they're at least willing to entertain the possibility of. No one wishes surgery on their fiancé, but rather the devil you know than the devil you don't—especially when the latter may be knowingly and willingly left unexorcised.

It was a different doctor, a different hospital, a different state. Different, but familiar. I force myself to remember how to breathe.

Epiploic appendagitis is an uncommon, benign, non-surgical, self-limiting inflammatory process of the epiploic appendices. Other, older terms for the process include appendicitis epiploica and appendagitis, but these terms are used less now in order to avoid confusion with acute appendicitis. Epiploic appendices are small, fat-filled sacs or finger-like projections along the surface of the upper and lower colon and rectum. They may become acutely inflamed as a result of torsion (twisting) or venous thrombosis. The inflammation causes pain, often described as sharp or stabbing, located on the left, right, or central regions of the abdomen. There is sometimes nausea and vomiting.

The symptoms may mimic those of acute appendicitis.

My phone rings. It's Jon. His CT scan came back negative. It wasn't his appendix. I hold my breath as he explains epiploic appendagitis, which, despite being in the colon, mimics the symptoms of appendicitis with eerie accuracy. But—with the exception of several hours of appendicitis-level pain—is harmless. A temporary inconvenience.

"They're running some blood work to make sure they're not missing anything, but the doctor said epiploic appendagitis is extremely rare. He says he maybe gets one case a year," he told me.

There are people who go to the hospital

thinking they have appendicitis when it's really epiploic appendagitis. It is a documented phenomenon. However rare, it is fact. I picked at the corners of my yellow wallpaper and rather than seeing what was underneath, my nurses plastered it right back up.

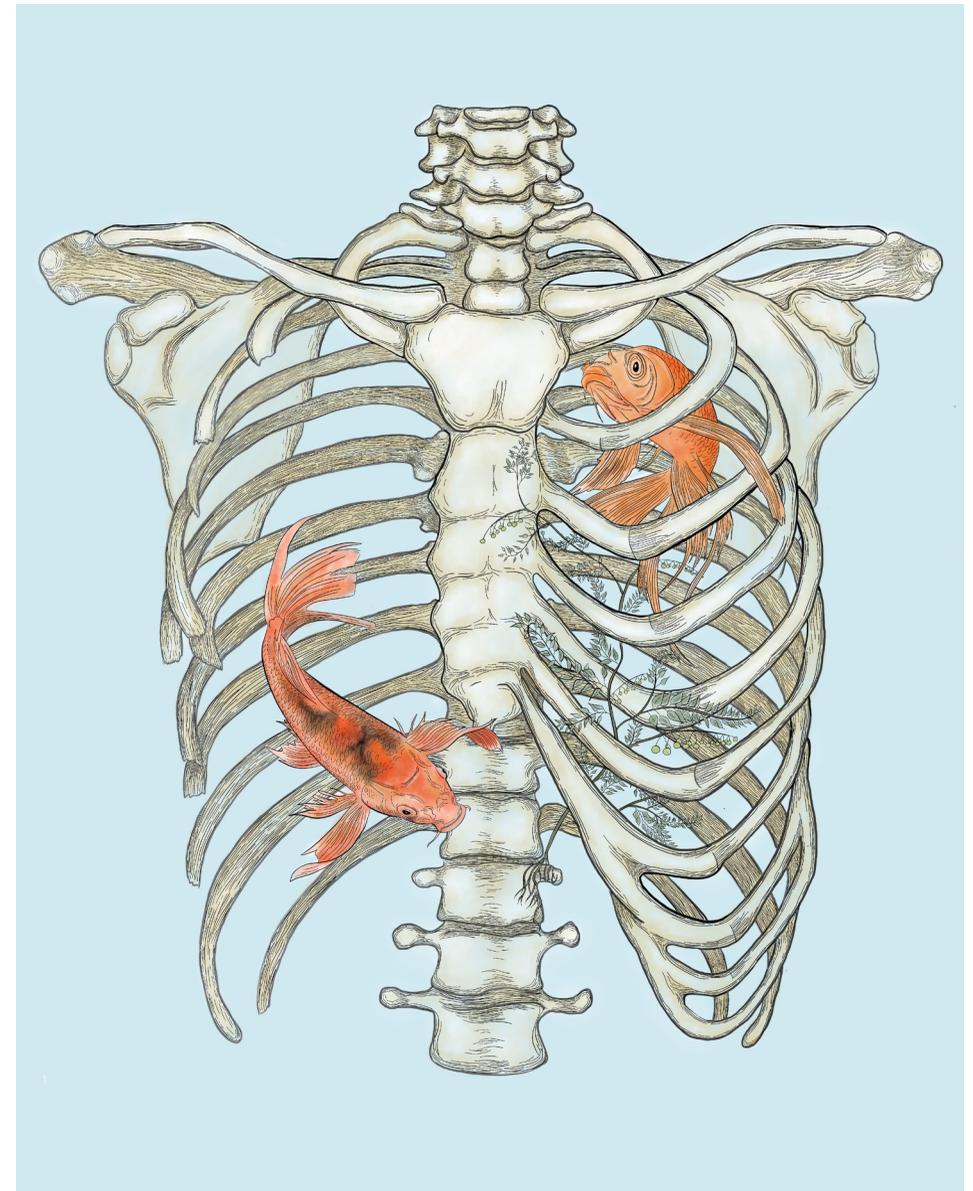
The doctor gave him something for the pain and sent him home. I was grateful they did their due diligence and took the time to explain what it was he likely experienced, yet disheartened I wasn't given the same treatment.

“Just be quiet, Amanda. Just be quiet, Amanda. Just be quiet, Amanda. Just be quiet.”

Just, just, just.

I am the first to claim I'm fine. When I get the flu—as I do every handful of years, like miserable clockwork—I will my body to fight the infection as I tell myself *I'm not sick I'm not sick I'm not sick*. At length, Jon will insist on taking me to the doctor, ignoring my protestations. The doctor will stick a long swab up my nose, what feels like tickling my frontal lobe, and within 15 minutes, declare me in the throes of severe influenza. This doctor will look me in the eye and say, “If you'd come at the first signs of symptoms, we could've prevented it from getting this bad. Don't wait so long next time.”

And I'll press my lips closed and stare empty-eyed into a patch of white wall.



Cage

Charlotte Berry

Prepared

Zachary Schwartz

When I was in middle school, I got grounded. Not for the typical reasons you would expect in a teenager. At that age, the hormones spilling out of my gonads, in cahoots with my Y chromosome, should have created many opportunities for grounding me. But I was not grounded as a punishment for typical teenage hedonism. My father grounded me because I got a sunburn.

I grew up in rural mountains, where sandstone formed an endlessly hard ground, eroded over centuries by countless mountain streams. This hard sandstone prevented the construction of in-ground swimming pools, making them rare. Above-ground pools far outnumbered them. It was the peak of summertime in middle school, so I spent the hot days beside one of these above-ground pools. I earned a sunburn after a week of careless irradiation. Sunburns provide a perfect example of operant conditioning: failure to protect from the sun results in a painful burn. The learned behavior, then, is to apply sunscreen. In those long summer days, I acquired a sunburn painful enough to start the learning process. But my father determined that the burn's constant pain was not an adequate punishment. He saw my pink skin and increased the burn's intrinsic punishment by grounding me. At the time, I did not understand why he wanted to further my misery. Maybe a week of constant pain worsened by any movement would not convince me to use sunscreen. But being grounded might.

Decades removed from this minor event, I gained insight into its importance. Growing up and reflecting on my childhood, I realized that my father is an expert in preparedness. He keeps a bottle of sunscreen in the storage compartment in the driver's side door of his Ford truck. Its

odometer shows over a quarter million miles, each one put there himself. Such a heavily driven vehicle requires some maintenance, and he is always prepared with tools, parts, and an engineer's brain to address most problems. That driver's door storage compartment houses many other useful items: a cleaning kit for glasses, because driving should be performed through clear lenses; a flashlight, useful in the event of a nighttime mishap; napkins from an eclectic mix of fast food restaurants, useful for cleaning any mess; and roadmaps (actually made of paper, not pixels), illustrating routes in our state and those bordering it.

When I finished my undergraduate coursework, I decided to go to medical school, a decision made without substantial reason at the time. Maybe I just liked school; maybe I wanted to make my family proud. Now, as I finish my medical school journey, I finally know why. The reason that I now know why I was grounded for getting a sunburn, the reason I finally understood my personal motivation for attending medical school, and the reason I want to finish stronger than ever, is this: in my final year of medical school, my father was diagnosed with pancreatic cancer.

As my academic autopilot guided me through medical school, I subconsciously fabricated a dangerous understanding of what it means to practice medicine. While I acquired foundational medical knowledge, I assembled a wall. This wall, gilded with facts and physiology and PowerPoint slides, blocked out the ugly, painful aspects of medicine and left me in comfortable shade. The part of medicine I feared most was illness itself. As I continuously learned about disease after disease, I felt that everyone enrolled in a required round of roulette

with their health each day they woke up. The wall of medical knowledge offered protection, forming a false separation between what it meant to be affected by disease and unaffected by disease. I thought that becoming a doctor would secure my location on the shady side of the wall. On the other side lurked the dangers of disease. From my comfortable shade, I would be healthy, and I would help the ill on the other side.

I believed that my white coat offered protection against pathology. My subconscious blissfully lived behind this fake shield, satisfied that by studying disease, by understanding what can go wrong with the human body, it would not be possible for anything to go wrong in me. Indeed, this protection extended beyond just me. I felt that the power of knowledge could, in some sort of horizontal transmission, extend immunity to my family and loved ones. Perhaps I went to medical school so I could protect my family from disease.

With his diagnosis, I lost my immunity. The gilded wall disappeared all at once, exposing me to the painful rays emanating from the other side. I received the news while I was on a rotation in the hospital. Stepping into a quiet hallway, I took a phone call. The pathology was back, and my wall was not strong enough to hold. As I heard the words, my knees lost their strength, and my vocal cords refused to make noise. Suddenly mute and kneeling, the back of my white coat touched the terrazzo floor, quickly joined by burning tears.

With the destruction of the wall, and facing for the first time the fear, disease, and pain on the other side, I lost my trust in medicine. I regretted going to medical school because as the wall collapsed, its bricks of knowledge became perilous projectiles. For that disease, I knew the five-year survival was low. Embarking on a six-year residency, I regretted everything.

In the wake of the diagnosis, my memory replayed scenes that included my father. One re-

run featured the sunburn I sustained in middle school. I realized that my father did not ground me as punishment for getting a sunburn; he grounded me for not being prepared. He navigated life with an exquisite preparedness, as evidenced by his daily routine, his ability to raise a household with two sets of twin boys, and poignantly symbolized by the items found in the storage compartment of the driver's side door of his truck.

In the wake of his diagnosis, my retrospection revealed the most important lesson my father taught me—to be prepared. His diagnosis destroyed my wall, allowing me to see beyond the safe, shady side of medicine I previously knew. He taught me about the aspects of medicine that exist on the other side. Now I see medicine in its completeness—a combination of beauty and sorrow, the same elements that form the human condition. By taking down my wall, he continues to make sure I am prepared. Now I know why, for the past decade, I have stored a bottle of sunscreen in my own car. I will keep it there.



Chronic Illness: Brain Fog

Paula Mendoza &
Jessica Campanile

Day Hospital Revisited

Matthew Freeman

When you're young you think
you're young
and I can be that guy
who always
imagines his death

and it's been sixteen years
since I walked
these cheaply-carpeted halls
where if you ever complained
about a symptom
they'd say get off your pity pot

so for a long time
I went to appointments
thinking no one would believe me
if I told them what was happening

but today I let loose and realize
as I talk to my sweet nurse practitioner
they didn't mean it
they were just filling in for Dad

and I've seen Red explode
and Starla say what the fuck
and Livingstone say they're putting speed in coffee grounds
and everything changes and is the same
and I've seen bartenders bowing

and when I walk out of the nurse's office
there's the old art therapist who tried
to discourage me from writing poems and I shout,
"They're translating my book into Arabic!"

Don't Fail Me (Lithium)

Alexander Hoogland

Each retch brings the question,
 How much medicine has been lost?
 Is that bitterness stomach acid or pharmaceuticals?
 How will this affect my blood levels,
 Can I still test them? Or are they distorted?
 Stability above all - the discomfort is nominal,
 Only the numbers matter, fluctuations
 Guaranteed to bring disorder, possibly death.
 A change in medication brought this uncertainty,
 (Latuda 40 to 60mg, Lithium still 1200)
 Maybe these symptoms; though my vomiting
 Is not uncommon, it has never before
 Followed dinner; usually exercise.

Toxicity comes easily - five times the normal dose of lithium
 Could be lethal, according to an internet journal
 Twenty years old, and older looking.
 Real numbers obscure - complex or hidden.
 Dangerous knowledge. I will learn it,
 And what then? Can I be trusted with this information?
 Living one day at a time requires faith
 That tomorrow won't bring urges uncontrolled:
 Pathological determination.
 The Long Island gun show isn't until March
 But I already have the bullets I need,
 Supposedly keeping me safe.

Assumptions

Elle Jennings

You look at the chart, trying to decode me.
I'm a sprained ankle,
 The second in a year.
I'm malaise,
 Vague,
 Just not quite right.

“How are you today?” And a smile.
 “*I'm* good.”

And cold,
 But it's not the weather.
 Hungry,
 But not for food.
 Not anymore.

But for the moment.
 The end of all comparison,
 And of coveting what I see.
 When skin no longer crawls.
 And when mirrors don't cut,
 Sharper than any glass.

“On the bright side, you've lost a few!”
 “Oh? Nice.”

Who's the ass,
Me or you?

Pain in America: 10 out of 10

Melissa Huddleston

First sanitize and then knock on the door
 Deep breath, this is what you've been training for
 Yes, please come in, I've been waiting since 10
 Tell me, what is it that has brought you in?
 You're tired, fatigued, and feeling unwell?
 You can't pay the bills, you're living in hell?
 I can't heal you with a pen and a pad
 Access to healthcare, yet you feel so bad?
 This cannot be real, this isn't my dream
 Surely it isn't as bad as it seems?

Medicine heals, it's worked for so many
 But, Doc, treatment costs a pretty penny
 You see, since age 10, I have been obese
 And people judge me based on this disease
 One glance, they think I'm just sedentary
 They don't realize it's hereditary
 I've tried my whole life, controlled my diet
 I've starved myself, and then just kept quiet
 I exercise almost every day
 For relief from this stress I pray and pray

And the color of my skin doesn't help
 But, Doc, these are the cards that I've been dealt
 I'm so sorry, this is all so unfair
 I'm here, I'm with you, and I care, I care
 Let's start with your diet, what do you eat?
 Vegetables, fruit, an occasional treat?
 Doc, where would I find any fresh produce?
 I shop at Quik Stop, what store do you use?
 Publix, Whole Foods, places I can't afford?
 Your cup runneth over, mine never poured

See, it's not just the low quality food
 It's stress from the constant hatred that's spewed
 People only help those who look like them
 And the rest they judge, they hate, they condemn
 I don't feel safe on American streets
 People aiming their eyes and guns at me
 For what reason, I mean, what have I done?
 I don't care about myself but my son
 Growing up in a world where he's hated
 Racism growing, never abated
 When I use food stamps, the looks that I get
 The weight of condemnation and regret
 Why couldn't I have found a better way?
 Better life, better job with better pay
 But instead I fit their stereotype
 About people like me, they get to gripe

But they don't understand how hard I work
 Three different jobs: cashier, server, clerk
 For all of that, what do I have to show?
 A life of disease and decay, so slow
 No, no, it doesn't have to be like that
 We can change what we've built, this habitat
 To deal with this, is not what I learned
 But I won't turn away, you won't be spurned
 Doctor means "teacher," let me fill that role
 Reduce anxiety, the daily toll
 Look, I am here to walk alongside you
 To enjoy a world with some ugly views
 To not let what is bad dilute the good
 To be confident though not understood

It won't be easy, there is no quick fix
 No simple solution, no magic tricks
 Instead it will be a constant battle
 We'll bang on the cage until it rattles
 And change may not come within your lifetime
 But for your son, for your son we must try
 With drugs we consider adverse effects
 This too must be done within politics
 There are currently laws that harm the poor
 Harm those who we should protect and harbor

With such laws we cannot be complacent
 When there is a misdeed, we must face it
 Overturning bad laws will be step one
 If accomplished, we will still not be done
 We will also have to create new rules
 And defend them in front of many fools
 You have a right to feel safe in your home
 Not be in danger because of skin tone
 We must better train all those who bear arms
 Whether civilian, police, no more harm
 We have known about food deserts too long
 To not have made right this evident wrong
 How can we condemn those who don't eat well
 When the healthiest choice is Taco Bell?
 This is a problem across our nation
 Many depend on food from gas stations
 While food is wasted in great abundance
 Because those who waste show great reluctance
 To change their methods and try to cut back
 But we must no longer accept such slack
 I will lead the charge and help fight for you
 We won't change the world but can help a few

I know this is hard, you may want to quit
 But to a better world we must commit
 Medicine is meant to heal not bring pain
 And we must restore this function again
 There is no room for discrimination
 Treat all equal without hesitation
 An epidemic of kindness unloosed
 Pain in America will be reduced



Migraine Headache

Richard Wu

Contracted

Teddy Goetz

I never knew what jagged looked like until
My question about when you seroconverted

Cracked across your face—
A smile instantly catatonic shards.

You don't answer, but plead that
Your daughter must never know.

No one knows.
This is a weight only you and your doctors carry.

And now me.
Or I suppose I just became the latter.

When I check your pupils,
They're already small.

From the pain meds we gave you, or
Practiced prevention of the slightest peek inside your head?

I'm not sure,
And I wish I was taught how to

Listen for loneliness
With the metal around my neck.

I imagine I'd use the diaphragm,
Not the bell,

As I promise discretion
And we breathe together in quiescence.

As soon as the elevator doors ding shut,
I fall back,

Gasping with
Lungs and eyelids,

Not yet accustomed to opening against
The weight I picked up holding your hand.

Four floors up as I step off,
I feel something heavy in my shoe—

Sharp too,
Like an arrowhead,

It begs to be buried,
Like I found it.

Instead I stitch it onto my mental quilt,
Because research shows we sleep best under a little bit of weight.

And I can't imagine the suffocating silence for you,
Dreaming alone.

Snowball

Mary Ann Mayer

If only our animals could live forever.
But they die don't they?

Sometimes on a bed of straw, sometimes in a dark place
between rakes, shovels, bags of grain.

I healed the sick; I fixed everything alive.
Jen, do you remember me, your kid sister?

Remember how we'd only speak
in the garage, at dusk,

when you'd come to feed your rabbits,
your hand-raised Giant Flemish joymusclefluffs?

You'd crane your neck to watch me kneel
with my Buster Brown shoebox

full of medic supplies,
try to splint a cricket's wing, a bird that wouldn't

fly, a daddy-long-legs missing one—
"Get lost" I'd say, "They're mine."

You wanted to touch. You startled to touch.
You wanted to touch.

You needed something alive to hug.
You wanted to love, love hard.

I have one photograph of you hugging Snowball,
stroking his long back & longer ears.

Long live Snowball. And he did.
His thumping foot could break a human wrist.

Free-range rabbit, he outran foxes, hid from raptors,
but there he'd be after school, waiting for you.

Jen, keeper of rabbits.
Only you could lift him back to the safety of the hutch.

You needed something alive to hug.
You wanted to love, love hard.

You wanted to feel breathless; run to it
sprawled in the cool underneath of the porch.

Dad died this winter. In the hour they call,
actively dying, he called your name —

Jen, will you come home to live with us?
Jen, do you still have a key?

I pressed that photograph into his hand.
You, holding Snowball.

He stroked it. I answered for you,
I'm here, Dad. I'm home.

No One Dies Alone

Amal Cheema

White hospital sheets cloaked your body,
Which eroded as the last illness wore you down
To thinness of bones. Gaunt fingers flickered.
Masked breathing: a rasping staccato—

Briny, deep eyes of the unresponsive you
Were oceans on cable TV, so I filled our silence
Narrating sloping mountains, pacing rivers,
Rushing waterfalls, the forthcoming of April's flowers.

(Your breath heaved when I admitted no prospects
In landscape commentary—had our friendship bloomed over laughter?)
I sat bedside, beside yourself for that hour—wanting
To brush matted brown hair from your weathered face.

But rivers weaved through purple terrain, carving time into rock,
Until falling as waterfalls do, until fading into
A rainbow that illuminates, disappearing come dusk:
Like you would do.

Snow fell softly on my walk home. Had you known I was near?
How I wish I could know you: the stranger in your deathbed.

The Child in CPEP

Lindsay Pang

locked doors
bolted chairs
frame cold rooms
that buzz softly
fluorescents bathe us
clarity with walls
and understanding
truth

every chaos
we fix
the internal grief
we listen
the external pain
we extinguish
unsullied, in white
can we deliver you peace?

younger than all the men
than all the women
than all my patients
yet all your scars
infiltrate the arm
some deep, some shallow
an immovable stolid sleeve
outnumber

soft embodiment
fluid movements
warm gaze
let me listen, let me
examine let me
mend let me
inside to retrieve let us
heal

Double-Helix

Teddy Goetz

The hand Max holds as he toddles up belongs to a dimpled smirk,
Propped upon a chin cloaked in a tuft not yet able to become a full beard.
The same gravity-defying curls cascade down their necks,
And when Max dashes to Mom, that hand extends to me instead, and
The twinkle in his eye hints that he similarly doesn't put much stock in rules.

With a jaw line soft enough to be a patient here, I struggle to place him—
He can't be Dad to this three-year-old, with another due next month.
And yet,
He is.

Max's unintelligible chant as he flops onto the exam table prompts the passing of an iPad,
And the room is quickly filled with narration of a Tarzan puzzle,
Punctuated by periodic coughing spells.

Mom rates the Ob/Gyns she's seen by Hogwarts House.
Dad's never read the books,
But she insists he's a Slytherin, regardless of what Pottermore says.
He takes care of his own.

When Mom waddles Max to the bathroom,
Dad asks if I know how much virtual Disney puzzles cost.
\$8 a piece, I learn.
And when their pediatrician touted Similac over Enfamil,
They gave away their WIC,
Because Max would never sacrifice.

He dropped out of college when Max joined their lives—
It was never my thing anyway—he interrupts his own story.
And he likes sales fine.
But damn kids cost a lot.

Yet, when we're waiting for the Motrin to kick in,
He probes about racial risk factors for respiratory infections.
And when I explain interplay of environmental justice and genetic markings of intergenerational trauma,
He becomes the first non-scientist I've ever met to bring up a mouse research study.
And I wonder...

In addition to discharge papers, I send him out with podcast and book recommendations,
Which bring back that dimple,
But not as much as Max's squeal does, when scooped up under his arm.
As they trail out, his other hand holds Mom's.
And I wonder...



Cranial Nerve Explosion

Alex Dai

You Hit a Nerve

Alexandra Fairchok

You told me it would never happen.
I said I had dreams.
You laughed.
Here we are.

The peculiar thing about dreams is, they can also feel like a nightmare.
The dream-mare? medical school.

Despite my youth, my body now displays signs of weakness.
The intellectualization of suffering has an ameliorating effect.

The diagnosis: anxiety.
The cause: environment.
The culprit: my body.
And you... you hit a nerve.

So, let me teach you what I've learned:

- I *Olfactory*
- II *Optic*
- III *Oculomotor*
- IV *Trochlear*
- V *Trigeminal*
- VI *Abducens*
- VII *Facial*
- VIII *Vestibulocochlear*
- IX *Glossopharyngeal*
- X *Vagus*
- XI *Spinal Accessory*
- XII *Hypoglossal*
- XI *Spinal Accessory*
- XII *Hypoglossal*

Odors
and floaters
and eyes that fatigue.
Lids twitching,
teeth grinding—carved granite-lined cheeks.
Nervousness brings on side glances while
facial betrays me. I'm crying, snot seeping, my body delays me.
I'm feeling quite dizzy, can't quiet this SOUND... *you're useless & worthless*- just fall to the
ground.
Foul taste, it invades, tips the top of my tongue. Can't swallow it down. Fear starts to seep back,
gag reflux begun.
My heart, it.beats.fast. "Tachycardic", they say. Chest feels compressed while mind wanders
away.
These shoulders, they creep. Refuse to relax. Inch further. Curve harsher, toward a kyphotic back.
I want to cry out. To SHOUT. Beg someone for help. But this thing called my tongue, it has shrivel-
ed itself.
And this, perhaps, the greatest betrayal of all:
*The voicelessness
disempowerment
of having no
call.*

The funny thing about hit nerves is that they respond.
You hit mine.
It hurt.
Now I'm hitting back...**witness** my success.

Pain too,
is transient.

Foresight

Ian Lambert

“**W**hat, really? That sucks. I get it but...it just sucks.”

She sauntered back down the hallway.

He kissed their kids on the way out the door. Descending in the elevator he thought of her in that dress. “She knows how much I love that dress on her,” he thought with his gaze focused downward. She only wore it on nights she really wanted to impress him. He strode out onto Park avenue and found it bittersweet that he should live his dream while she compromised her plans. 10 years ago yesterday she moved to New York for him, and 9 years ago today they were married. He headed eastward toward the hospital.

“It’s not like I don’t try,” he often contemplated a similar rationalization, “I picked a position with a minimal call-schedule.” He recognized this was a decision he made for himself and benefited her incidentally, but he allowed himself to think it when he knew he disappointed her.

He went up to the lab to change over the washes. He paused at the agitator, he enjoyed the way the brain slices tipped back and forth in unison; everything timed, everything measured. Clean, intentional. Moving to the cabinet to mix more buffer, he realized he was missing a solute. Remembering that Dr. Inseneti lent him a key for instances just like this, he collected the small piece of brass from the bottom of the first aid drawer, along with a cup.

Up on the 9th floor, where they keep the animals and the radioactive materials, he used the key to gain entrance to Dr. Inseneti’s lab and indiscriminately flicked an assortment of the 16 light switches on the wall. “How kind of him to think of me,” he marveled as he sought out the sucrose to borrow from this neighboring laboratory. He always admired Dr. Inseneti’s ability

for foresight.

The sign on the flammables cabinet was the same color as her dress. He tried to ignore it.

CLICK ZIIIIINGG

His eyes darted to the entrance of the dark-room where he saw a glow he hadn’t initially noticed upon entry. Concerned that he had triggered an instrument that someone would otherwise wish un-triggered, he moved toward the glow.

Within the darkroom stood a sole glowing rock, emitting a similar green to that of her eyes in the sun. The rock sat perched upon a small metal half-dome, just about one and one-half heads’ diameter – not unlike a large colander. A thick, black protocol binder sat next to a thick, yellow breaker switch just to the immediate periphery of the colander’s shadow.

He cracked the protocol binder to figure out how to safely power-off the apparatus:

RADIO-CRANIO-CHRONO
SPACE-TIME ALTERNATOR

Dr. Inseneti, et al.

Although this wasn’t his field, he found the protocol surprisingly easy to digest.

“Time travel. This is time travel.” He whispered audibly. His confusion was stifled by his embarrassment when he recognized that he had never asked the good Dr. Inseneti about his research.

His embarrassment was then overtaken by displeasure with his distance from those around him. His wife, his kids, and on top of it the only doctor in the building kind enough to come by his poster at the symposium.

He thought of the compromises his wife had made for him, and how he never made any. He thought back to the one night, his first year in medical school, she was still living in Pittsburgh

and he in Brooklyn.

“...I don’t think I can do this anymore, I think I want to start dating other people...”

CLICK.

The moment after she hung up was the moment he realized he loved her. He called her back, told her he would change, that he would work harder to make time for her. He told her the depth of his profoundly true love, and that if she could find it in her heart to reconsider the move to New York, that he would move in with her and they could start their life properly. He told her he was willing to be her person and that he couldn’t have dreamt of a better person to be his.

He wanted to remind her of this love he had for her; how great it would be if he could bring her a token from the past to show his love; one that might reignite that spark in her heart, and show her that it was still illuminated in his.

“I could bring her the blanket from our first bed” he thought almost immediately. “We shared that blanket through 5 winters, 2 of them without heat in that dingy walkup studio in Crown Heights. She would wrap up in that thing with me when I would come back at all hours during residency. What better way to show her how warmly I still think of her.”

His grin quickly dissipated, “She would never believe that it was the same blanket, I doubt she even remembers what it looks like.”

“Lincoln!” he nearly yelled, “I could go get her Lincoln’s hat!” He remembered that he asked her once who she would have dinner with, if she could sit down with anyone in the world, living or dead, and she said Abraham Lincoln. “Better yet I’ll bring the man back in his entirety! What an incredible anniversary dinner surprise, if I could sashay back in with ol’ honest Abe.” He was getting giddy with the idea. “Hell, she even wrote her thesis on the man.” He paused. “Or...was it Alexander Hamilton?” He vaguely recalled that she had discussed it with him once at length during dinner out, but he was

mostly focused on the menu, and when the server would return with more bread.

His eyes sagged at the sides. His face turned pale and he closed the protocol binder. He exited the darkroom to grab a stool. The waning moon through the window cast light on a stool at the far bench.

Back in the darkroom he positioned himself on the stool under the apparatus, and, as per protocol, slowly fixed the colander to the top of his head. With a deep breath, he closed tight his upward trained eyes and pulled the switch.

“e-hem, hello?”

“Hey, um, I don’t really know how els... I don’t think I can do this anymore, I think I want to start dating other people, is that ok? I just feel like this isn’t going to work and you don’t care to try, which is fine, I really don’t blame you, I just don’t think I can do it anymore.”

“I... I understand. You’re right and... and I’m so, so sorry, I truly am.”

“Alright, well...thanks. I guess I should go.”

“Yeah, ok, me too, goodnig–

CLICK.

He traced the phone back to the wall and pulled the plug.

The Curse

Neha Malhotra

Dear Journal,

I’m so excited to write in you for the first time! It was really exciting when Daddy and Mommy let me pick you out at the store so that I could practice writing.

Here’s something they don’t know- I’m writing for a top secret reason. Someone put a curse on Mommy! Well, nobody told me it was a curse, but I know some magic when I see it. Her hands feel all rough like a snake. I asked her, and she told me she’s feeling a little stiff and tired at the end of the day. That’s a recipe for a curse if I’ve ever heard one. Plus, I’ve read the most books out of anyone in my class. If I don’t know a curse when I see one, no one does!

Yesterday Ms. Becky read us a book about a mean lady with snakes for hair. All she had to do was take one look at someone, and BOOM! They turned into a stone statue!! I asked after read aloud time where the lady with snakes for hair lived. Ms. Becky told me she wasn’t real, but I’m sure that’s not true. After all, she must have gotten Mommy.

So, I know what I have to do. I’m going to break the curse!

Love,
Sophia

Dear Journal,

Today Mac jumped into a puddle on the playground when I was right beside him. It was so mean! He got mud all over me, and right before picture day too. I’m going to get that dang Mac one day.

He even got mud on the ribbon in my hair. Ms. Becky said it would wash out, but I was SO mad. That was my favorite! It took Mommy 10 minutes to tie it into my ponytail this morning. It’s the pink one with an amethyst in the middle (Olivia taught me the name of that stone today. She knows all the gemstones because her Mommy sells crystals on the internet. I want to sell rocks on the internet one day!) I hope Mommy doesn’t get mad at me for the ribbon. Sometimes I think she’s mad, because her face looks like she took a bite out of a lemon. I asked her about it once and she said she wasn’t mad, but that her bones make it hard to smile.

After pictures were done, I went to the library and asked Mr. Powell if he could find me any books about curses. He looked at me kinda sad. I wonder if someone in his family got cursed too. I bet he could help me with this better than anyone if that happened. He gave me a few fairy tale books and a book about wizards. I think this would be valuable research! (Daddy does research for a big

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college, that's how I learned that word. He's got a whole lab and everything, like Bill Nye.)

Dinner was yucky brussel sprouts, but at least we had tomato soup with cheese! I hope those pictures from earlier didn't come out too muddy.

Goodnight!
Sophia

Dear Journal,

We had to do standardized testing today to make sure the teachers have been teaching us properly. Ms. Becky is a really good teacher, so I think it'll turn out alright for her. Last week, because I told her I was bored in math class, she gave me a paper to learn my times tables up til 4! I'm not supposed to learn that until 3rd grade!

I read the books Mr. Powell let me check out of the library. They had the regular stories about curses- Snow White, Rapunzel, Beauty and the Beast. They all needed true love to break, and I know Mommy really loves Daddy. She tells him all the time. I bet this curse is stronger than true love's kiss, and needs something more. It has to be pretty strong. Today, while she was helping me with math homework, her hands were pinched together all weird and she dropped my unicorn pencil twice. They looked like claws. I hope she doesn't turn into a dragon!

I guess I have to do more research, just like Daddy. I asked Mr. Powell for some more books about the lady with the snake hair. Her name is Medusa, which is Greek. Perseus defeated her at the end of the story, so I bet I can too!

Sincerely,
Sophia

P.S The principal gave me a letter for my parents with the word "sincerely" at the end. I looked it up, and now it's so fun to use!

Dear Journal,

I am not looking forward to gym class. We have to run the pacer test tomorrow, and I **HATE** it. I can never get more than 10 laps. I hate being out of breath. I wish it were gymnastics month every month. Then we'd get to walk on balance beams and jump off of boxes and climb a rope.

Mommy took me grocery shopping after school. She wrapped me in 1 hat, 1 scarf, and 2 whole jackets so I'd be warm. Maybe **she** needed two jackets. I looked down at her hands while we were in the store and the finger tips were bright red! I asked her why her fingers were so red, and she said she was cold.

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They were red as a rose and pinched on the shopping cart tight as a balloon string (Ms. Becky taught us about similes and metaphors today. I want to practice as much as I can!) Mommy let me get sour cream and onion chips as a treat. She says I'm her little helper, since I get all the things on the low shelf and she doesn't have to bend down as much.

I'm really excited for tomorrow. We get to learn about Marco Polo in Social Studies. Maybe I could go on an adventure one day like him! Goodnight.

Love,
Sophia

Dear Journal,

Daddy said I could sleep over at Olivia's house today! I am really really really excited, since they never let me sleep over anywhere! Olivia's Mommy picked us up from school. She had a bag with my pajamas and my teddy bear in it. She ordered pizza for us and is letting us eat whatever junk food we want! Olivia is super hyper right now, since her Mommy never lets her eat sugar or "processed foods", whatever those are.

I asked Daddy over the phone why he's letting me sleep over at Olivia's. He said Mommy's chest was hurting a little, so he took her to the doctor. I got really worried. I wondered if the curse had gotten her! Daddy said she'd be fine by tomorrow. Somehow the pizza didn't taste as good after I found out that Mommy was at the Doctor's.

Well, Olivia's Mommy said it would be totally fine. Grown ups know a lot of things, so I'm sure she's right. Now, me and Olivia are going to watch Mulan! We've got our pajamas on and two mugs of hot chocolate. If Mommy were here, it'd be perfect!

My research hasn't found anything about how to break a curse other than true love's kiss. Plus, I can't go on a quest like the heroes anyway. Daddy might get worried if he can't find me in the car-pool line after school tomorrow. If I could just find Medusa, this would be so much easier. You'd think a lady with snakes sticking out of her head would be easier to find, but nooooooo.

Mr. Powell said earlier that he's all out of books for me, and that he hasn't seen Medusa. (He asked me if I wanted to read the Babysitter's Club instead. BLECH.) I guess I'm all out of books now. Maybe I should ask another grown up.

Regards,
Sophia.

P.S. Mommy and Daddy got another letter from the principal. Daddy said it was about how good of a student I am. I learned the word "regards" from it, and it's almost as fun as the word "sincerely".

Dear Journal,

Today is the weekend, so I got to sleep in and then watch cartoons. At breakfast today, Mommy couldn't swallow her orange juice. Daddy made sure she spit it back up, and she's okay now. He said she just drank it down the wrong pipe. I'm not a baby though, I know the curse did that! Daddy looked kind of sad after. Mommy went to go lie down. Daddy told me not to worry, but I can't help it.

I'm scared. What if I can't break the curse in time? I think Mommy is really turning into a statue. What if she turns to stone before I break the curse?!

I had an idea earlier today. Maybe me and Daddy could break the curse together!! We could be like Mulan and Mushu, or Timon and Pumba. He'd be able to figure something out, since he's a grown up! I gotta ask him what he knows about the curse. I'll do it tomorrow.

Regards,
Sophia

Dear Journal,

Now I know for sure that Mommy has been turning to stone. I don't know if there is anything I can do about it. Daddy sat with me right before I went to bed and read me 'The Very Hungry Caterpillar'. I liked it, even though that's kind of baby stuff. I asked him right out there if Mommy is turning to stone, so we could break the curse together. He said yes, "In a sort of way." I don't know what that means, but I think I was right. He also said that I shouldn't worry about it. I guess that means we can't break her curse together. And I can't break her curse alone.

Everyone says I'm too small to help anyone. Maybe that's true because grown ups know so many things I don't. I don't know my times tables past 4, I don't know how many jackets I need before going to the grocery store, and I don't know what kind of science Daddy researches about. I don't know so many things. When I held Mommy's hand the other night, even though it was pinched up like a tree root, she looked so happy I thought she'd pop. Right then, it didn't feel like I couldn't help anyone ever.

Maybe I can't break the curse, but maybe I can help Mommy feel a little better. I'm still really sad about it. Maybe when I'm older, I'll know enough grown up things to break her curse. I hope so.

Love,
Sophia



Fried Egg Nest

Brinda Chellappan

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LIFELINES

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The mission of *Lifelines* is reflected in its name: to be a thread winding amongst all those who have been touched by the medical experience, and to weave a literary tapestry offering the much-needed creative outlet for doctors, medical professionals, and patients alike.