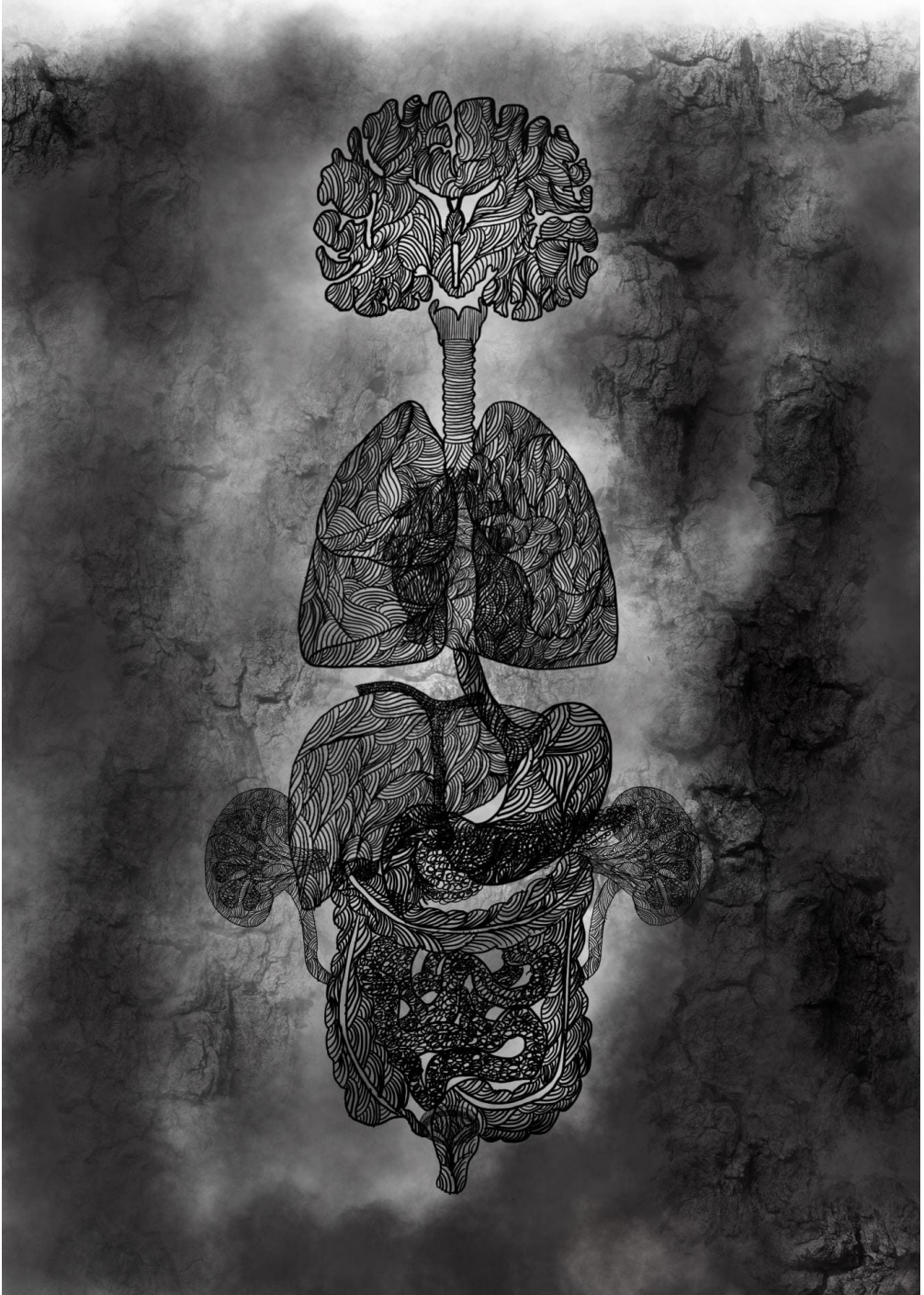


LIFELINES



Dartmouth
GEISEL SCHOOL OF
MEDICINE

VOLUME 11 • 2021
UNMASKED

LIFELINES

VOLUME 11

*The Literary and Art Magazine of the
Geisel School of Medicine at Dartmouth*

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Editor-in-Chief

Eren Veziroglu

Managing Editor

Greg Suralik

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Robbie Sikora, Lindsay Partin

Reviewers

Seth Ramin

Chloe Malave

Micaela Dickinson

Katherine Amano

Maria Malik

Angela Lee

Faculty Advisor

Shawn O'Leary

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about **lifelines**

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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THE OFFICE of
DIVERSITY, INCLUSION &
COMMUNITY ENGAGEMENT

*To Sai Li, MD
Writer, healer*

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foreword

To Our Readers:

Our editorial and review team have curated a diverse selection of content from authors around the United States who share their insight into what it means to be a human experiencing and delivering medicine.

From over two hundred submissions, we initially filtered for relevance to the overarching mission of the journal which is to be a thread winding through all those who have been touched by the medical experience, and to weave a literary tapestry that connects healthcare providers and patients through narratives in medicine. Then, each person on our review team chose two to three submissions which strongly resonated with them out of a pool of ten to fifteen submissions based on measures of originality and creativity, overall quality, and relevance to the theme and journal.

In this special issue of *Lifelines*, which was produced in the midst of the COVID-19 pandemic, the editors feature an exploration into the theme, “unmasked.”

At this point, over a year into the pandemic, it is neither controversial nor new to say that COVID-19 has tested the world. A number of pieces in this issue directly address the challenges we have faced in the midst of COVID-19 and the uncertainties that have arisen as we attempt to emerge from it.

But as we combed through the submissions, we found ourselves asking: what does it mean to “un-mask”? There is the increasingly-relevant experience of taking your cloth mask off once you reach a space where you feel safe from the hidden threat that currently defines our lives. But we were surprised to see the many directions that our submissions took when interpreting this theme.

We found that “unmasked” manifested in this issue by pulling the curtain back to expose medicine through a number of different lenses, such as managing opposing ideologies, navigating illness, processing grief, confronting death and dying, the path to becoming a medical practitioner, aging, healthcare costs, legacy and memory, mental health, and specifically, COVID.

On behalf of the *Lifelines* team and the Geisel School of Medicine at Dartmouth, we hope you enjoy this edition.

Sincerely,

Eren Veziroglu, Alice Liu, & Greg Suralik

Editors
Geisel School of Medicine at Dartmouth, Class of 2024

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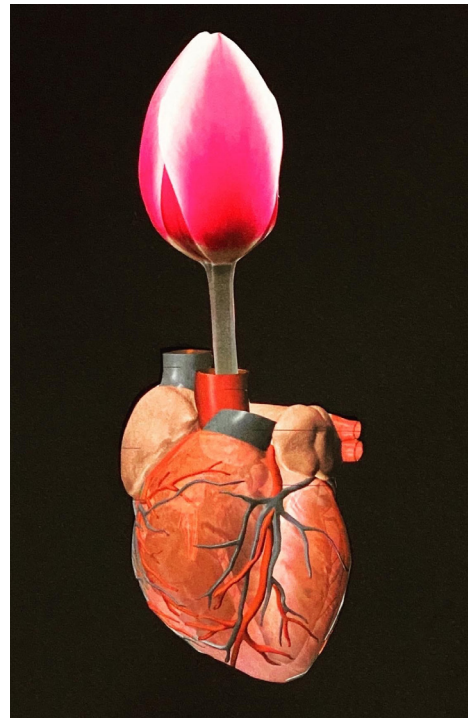
Question rewsnA

Kavya Puchhalapalli

- It's all about perspective

I have lost my passion!
And I do not believe that
I made the right decision
As I very well know with all my heart that
Medicine is not for me
Why would I ever think that
I have exactly what it takes
To be a physician
What I need
Passion, compassion, devotion
I have no more
There will never be a day when
I wake up with zest
With the thought of taking care of my patient
Why... Is it worth it? I ask myself
Medical training brought
The pressure, the fatigue, the insecurity
This is the question I ask everyday
Is this where I wanted to end up?

(Now read from bottom up)



Artwork Courtesy of Laura Tafe, *Hope*

A Technician's Window

Kellie Diodato

Claustrophobia is stuck inside an MRI Machine,
a cacophonous, far below zero torture tube.
I could cry, but they'd never hear me scream.

I first learned this lesson at fifteen,
when doctors dyed my stomach a blue hue for a "better" view,
claustrophobia is stuck inside an MRI Machine.

Swallowed whole by the wicked in-between,
I twitched and thrashed inside contrived magnetic solitude.
I could cry, but they'd never hear me scream.

This time, I thought I'd slip myself some Dramamine.
I'd sleep, then—my eyes wouldn't find those laughing, electric loops.
Claustrophobia is stuck inside an MRI Machine.

I am in my coffin, now. I think in extremes
to self-pacify, to temper my ill-tempered brood.
I could cry, but they'd never hear me scream.

Only my technician could see
what brought me here. It's a waiting game,
and there's nothing sweet about the Interlude.
Claustrophobia is stuck inside an MRI Machine,
I could cry, but they'd never hear me scream.

My Father Converses With Heaven

Ruth Zwald

It was in those last months
after you celebrated your 100th birthday that you began
the questions about heaven -

How will I find my way?

You asked it of your wife as the two of you dwell in the simplicity of morning coffee
and she told you to look for your guardian angel
because Lord knows you have one

like that time the silo auger swung and knocked you out
and there was that day a fire threatened the barn
and then there was that spring when the creek flooded and you had to rescue cows.

You listened, squinting to see
but your stubborn skepticism
left a furrow on your soul.

It was in those last weeks
after you celebrated your 101st birthday and
no cows no crops to worry over

only the slowing
of your breathing
and your blue eyes whispering to me

Am I dying?

Yes.
Oh how you love this earth and every season
passing. Often enough in the past years you tell me

I would do it all over again - life is so interesting.

It was in those last days
as those who love you most come
and tell stories of what they remember and they leave

(cont.)

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back to their own stories
while you drift in a place where the sun
no longer warms your bones.

How do I?

It was in those last moments when the twilight
is silent, that I pick up the memoir you had written
reaching for the deeper comfort of your own words.

I read aloud coming to this story - before
electricity, before your sister died from influenza, before your family lost the farm
during the depression. It is winter. You are eight.

You get home from school as dusk settles
heading to the drafty barn where your father
(you were always so close to your dad)

was milking the handful of cows.
Finishing your chore of hand pumping the water
from the cistern to the cattle trough

you lie in the warm hay
in the dark of the barn and fall asleep to the melody
of the milking, of your father.

When your dad wakes you he takes down
the lantern hanging from the barn hook casting long shadows
over the two of you as you walk back to the house.

You remember every detail. Oh papa
I sigh through my whispering blue eyes
that's how you find your way.

Just lie down in the hay and sleep -
your dad will come and gently wake you -
take down the lantern -

together you will walk through the dark -
till you reach the house -
where everyone is waiting.

Sliding Scales

Beau McGinley

I used to joke about what I would say to my grandchildren when they asked me with wide eyes what it was like... like what it was *really* like, in the summer of 2020. The joke was that fresh off of a year of clinical duties, all we did was sleep in, write research papers, and drink whiteclaws. Like the flavored sparkling water with booze in them? Anyways, for a student in their mid 20s, the pandemic at times looked a lot like exercise, sunsets, and music. But to a lot of the world, 2020 was full of strife. Pain, division, and anger flooded every medium of communication, depicting with broad strokes and inflammatory campaign slogans a world in which music and sunsets certainly did not exist, and guess what: I believed it. We all did. Waitamminute..what about me? My reality wasn't real enough?

This clausal paradox perfectly illustrates the source of much internal conflict for so many of us. In the summer of 2020 the world became binary, black and white. In that meadiasphere everyone was a politician, and absolute truths existed, and o by the way, everyone was sure of them. And I wasn't the only person distressed by this, I swear. How often did you hear reminders to take care of yourself and turn your [fill in the blank] off? I hope my grandchildren can find a way out of that reality; a better way than what we ever thought of. Until then, we'll have to make due with my idea - sliding scales.

A sliding scale is simple. You take two opposing ideas, for example Romantic vs. realist, or celery vs. peanut butter or obstructive airway disease vs. restrictive airway disease. Maybe disregard the last one. You put these two ideas on a line,

facing each other. Then you take your slider, your pointer, your mouse, your finger, whatever it is, and you put it on the line. Where on the line? Well that's for you to decide, acting as "an aperture through which the universe is observing itself." That is, wherever you feel the situation dictates.

Voila! Allasudden, you're looking right at something that communicates your reality and allows for the existence of *both opposing ideas*. Moreover, these scales represent your reality at one point in time. You can change your slider again if you didn't like the first placement, or you just took a nap, or you had to cut down a tree behind your house that you grew up under, or the Lakers won an NBA championship. The point is, these models also recognize that your view can *change over time*.

What these sliding scales perform is a weighted average. A representation of your view/opinion/truth that is an average of the different opposing influences or ideas that (partially) define those views. While this sounds complicated, you and I as human beings calculate these weighted averages many times every second we are awake. For example, if you're deciding what to eat for dinner, you may not like fish, but your date with those blue eyes is pescatarian. You might, depending on how much you enjoy blue eyes, like fish more than you have in the past. You may, in that moment, buy the fish!

In fact, the artificial intelligence that is predicting what music you might like to hear and unlocking your phone with your face and driving cars is built on something called "convoluted neural networks" or "deep

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learning networks.” These programs function in the same way we believe the human brain works, and they perform one calculation over and over again. You’ll never guess what that calculation is. A weighted average.

All of this to say: the subjective realities of those around us matter. A lot. What was going on in the summer of 2020 and what is still going on is important. Very. And in the times when the stakes are the highest, humans cling the tightest to their own beliefs. Unfortunately, there are a lot of humans

down here with a lot of different beliefs, and when these things clash, the results can be harmful; to our relationships, to our physical safety, to the well-being of our increasingly global society, and maybe even the future of the human race for cryin’ out loud. But I believe we can fix things with an idea. A small idea. I believe we can change our actions and our world if we remember the Romantics, and the sunsets, and the music, and the blue eyes. I believe we can change the world if we remember the sliding scales. □



Artwork Courtesy of Meghan Peterson, *Lady Amherst*

Borborygmus

Melissa Huddleston

There's a familiar feeling, that deep abdominal rumble
Churning and turning, as fluid and gases mix and tumble
It's just borborygmus, the intestinal muscles contracting
Some sphincters start clenching while others are relaxing
You know how to calm the grumble, satisfy your hunger
But avoid the foods you enjoyed when you were younger
You approach the refrigerator, and that's when it hits you
This is not borborygmus, it's the dreaded "stomach flu!"
It's taken you by surprise, so to the bathroom you retreat
Trying to decide the culprit, that suspiciously red meat?
Could it have been prevented, what should you have done?
No matter now, the invisible contaminant has already won
An explosive escape, the pathogen hopes to reach others
The first wave brings relief, then you're struck by another
As your bowels empty, you make a new life commitment
A vegan lifestyle will be your self-prescribed treatment
But right now surviving this terrible bout seems uncertain
You're weak and exhausted, dehydrated, and really hurtin'
After what seems an eternity, a change finally takes place
You have the strength to get off the ground, lift your face
For hours you've been kneeling before the porcelain bowl
As you drained your physical contents, offered up your soul
But you are the victor, for a moment you feel humbled, meek
You decide to reward yourself with the sushi from last week



Safe Passage

Laura Tafe

Learn How to Clean Your House Like a 1950s Housewife

Julia Robitaille

It lingers in the air
for four – no,
eight hours afterward, and on surfaces it can
exist for days, depending on the surface, of course -
4 hours on copper, 3 days on plastic, 4 on wood, 5 on metal,
days on glass, and on paper it can vary from minutes to hours to days -
Food, water, fabric, shoes,
Counters, tables, handles, toilets, all -
We must
Keep Surfaces Clean

Disinfect all surfaces after touching
Disinfect hands and avoid
touching
Of your face and others
whenever possible
happy birthday your hands with soap and water
and wipe down the soles of your shoes
Hinder all the ways,
All the ways
Through which the little most conspicuous things, they
can permeate your white body

after contact with the infected
or suspected infected
(for safety assume they're all infected)
Drink the bleach!

dizzying long-term effects
include but are not limited to
difficulty breathing
fear, anxiety, isolation from ones we loved
i cant breathe -

But never mix ammonia with household cleanser
Shoot up! lyse 'em -ol

(cont.)

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*Bolster your defenses
With quickie kleening products
& heroes like Mr. Clean,
Ajax, Palmolive
A tub of bleach,
O, tub of truth,
Twisted by knaves
you must
clean, to be safe - to be sane, like
bleach in-your-veins and
Windex-on-your-windowpane sane
To escape being slain
by your inner fears,
a hostage to your microscopic tears*

Of this - this self-assembling body
Of not-body,
Half-living, Half-alive, never dead but never alive because
It was never live
Production of massive macrophage cytokinetic storm
Capable of mass infection
hidden in the crevices
in shadows
of your mind

We incarcerate the blind, disseminate the wicked
to stop the spread
Stop the spread and flatten the soul,
a foul odor -
Pests for pesticide
Insects for insecticide
Abomination; it's a nation of vaccination, chloroquine -
Genocide

When did
The capacity
To breathe and to remember
Become objects of the state

But we can't forget
What was never ours
No matter how hard you try
It's a shame you can't
Sanitize the past with UV light

Lara and the Flood

R. Michelle Schmidt

Grief can come at you like a flood; it can be sudden and catastrophic, like my city after the hurricane. Or it can be slow and insidious with the water slowly rising; you don't realize you are drowning till your head is almost completely under water. On August 19th, our city flooded and on August 20th, my cousin Lara died unexpectedly, one day shy of her 49th birthday. Losing her in the midst of a natural disaster has caused me more personal damage than the actual storm. At the time of Lara's death, I tried to shelve my sadness. But the loss kept seeping in over the floor boards and through the cracks in the walls. Before I knew it, I was completely under water and I couldn't see the surface.

Throughout the hurricane, our house had remained a dry and electrically intact island, and once the water receded, I felt the need to atone for my fortune. I was eager to rip out sheetrock, work in the temporary clinic at the convention center or help colleagues find housing. I had recruited my entire family to do good deeds. But on the morning of August 20th, I could not have anticipated how my life was about to change. I stepped out of the shower and with my towel still wrapped around me, my husband delivered the following news; my cousin Lara had collapsed and died about 2 hours earlier. His words thudded onto the floor in front of me and I plowed through them. The hurricane's destruction surrounded me and I could not hear that Lara was suddenly gone.

From our very existence 49 years ago, Lara and I had been thrown together. Two months after my birth, my mom and I were sent to live in San Francisco with her older brother

and his wife and their 3-month old baby, Lara. No one else wanted us; an unwed teen mother and her illegitimate child. My aunt and uncle opened their home and Lara and I were forever bound in a type of closeness that transcended our understanding. I knew her and she knew me. Our relationship was held together with a lifetime of memories; she was my person. Because of raising kids, work and other responsibilities, we put off the trip that she and I had been promising ourselves for the past 20 years. In May of this year, for Mother's Day, we finally did it; we went to the beach for 6 days with her sister and our mothers. Without internet connection, we talked, laughed and played games. Little did we know it would be our first-ever and last-ever, annual trip to the beach.

On the day Lara died, I had volunteered to care for the baby of an ER resident while she and her husband looked for a rental home. Her laundry spun in my washer and dryer as I processed what my husband had just told me. Inconceivably, I thought to myself that Lara had chosen an inconvenient time to die. At that precise moment, I resented her. The hurricane had been dramatic enough, with its 13 trillion gallons of water and its decimation of lives. Being trapped in my house for 4 days with the constant news-reel of devastation had a huge impact. My only way to work through this trauma was to participate in the relief efforts and Lara's death interfered with that. How was I supposed to grieve for my city and face the larger, more personal crisis of losing my cousin, the sister I never had.

What happened next is similar to the times that I've turned on the water to fill our pool

and forgotten to turn it off. The pool overflows into the street and our water bill reflects the oversight. That morning, August 20th, I turned on a faucet in my mind and walked away. The consequences were bad. I could see the damage caused by my flooded mind, but I couldn't stop the water from rising.

In the days that followed the hurricane, before Lara's funeral, I had 2 tasks; to process the loss that had affected my city and to grieve my cousin's death. In retrospect, my only job should have been to mourn for my cousin, but the aftermath of the hurricane could not be ignored. While I systematically filed through every photo album, box and electronic file of photos attempting to recreate our entire existence together, I baked 20 dozen Nestle Tollhouse cookies and delivered them to fire stations. All night I poured through thousands of photographs and all day, to the extent that my mind would allow me, I'd give half-hearted attempts to help those in need. I couldn't see it, but I was the one who needed help. During this time, I didn't shed a single tear. I was too busy with my tubes of mass-produced cookie dough and anonymous firemen and photo-documenting memories as I ignored my husband and my children.

After the funeral, I started to get physical manifestations of my unprocessed sadness; first, my head itched like crazy. For a solid 2 weeks, I just kept scratching my scalp like a dog with fleas. I could not concentrate; in clinic, I listened as an intern presented a patient to me. He mentioned a drug routinely used in asthma and I argued about its appropriateness. Finally, he pulled out his smart phone and showed me I was wrong. I barely had the mental capacity to brush my teeth and I had the responsibility of teaching medicine residents and treating sick patients. At home, I became more compulsive in my actions, to the neglect of cooking, cleaning and caring for my children. For the past decade, a

dozen balls of fuzzy yarn had sat intertwined at the bottom of my closet and every night I sat on the sofa and unraveled the yarn. It was as though once I untangled the yarn I'd have untangled the mess in my head. Because of the flood, my children started school two weeks late and during that time, I didn't know where they were, what they ate or when they went to sleep. One Friday night, after I had freed about 2 balls of yarn, I realized I had no idea the whereabouts of my 13-year old daughter. I asked her 16-year old brother to track her down. It was my job to look after my daughter, not my son's but I couldn't get off the sofa. She and a friend were watching a scary movie at a boy's house. My son assumed the role of the parent that night and knocked on the door, introduced himself to the parents, retrieved his sister and brought her home. In the recesses of my mind I knew that it was my job but I didn't care. I also knew that my 13-year old daughter shouldn't be at the home of some random boy at 10:30 on a Friday night, but it was too much to be present and involved.

I did finally unravel all of the yarn. The colors are bright and beautiful and the textures are varied. I bought a glass apothecary's jar in which to display them. Lara was always that ray of sunshine in my life and I decorated my den with colors as bold and warm and radiant as her personality. A friend and I went for coffee and she told me to forgive myself for retroactively parenting. She also gave me a hall pass to extend some grace to myself. She suggested we start a walk-jog program; not actually running together but accountable to each other. Initially, I'd walk for 2 minutes and then jog for one minute and I'd do this for 30 minutes, barely breathing the entire time. It was only our promises of shaming each other and the last vestiges of sheer will that got me out the door. As the ratio flipped and I started jogging for longer intervals of time, the cloud

started to lift from my field of vision. By the time I was jogging for 15 consecutive minutes I could see the sun beginning to shine. It's like the further and faster I go, the closer I get to heaven.

My story with Lara has been like a book or a movie that ends too soon. I wish the audience could choose an alternate ending. My mom goes to a church whose pastor just lost his wife of 54 years. In his first sermon after her death, he told his congregation he'd retreated to an island for several months. When she told me that, I cried because that's where I've been; on my own island, not working and concentrating on me. After the hurricane and upon her death, my world flooded literally and figuratively. Slowly I started to tread water till I could get to my island. Just like the days following the hurricane, the flood waters surrounding me eventually receded. The grief is still with me and I know it will never leave, but maybe one day it will be more familiar. Sometimes I still shake my fist at God, wondering how he allows I miss Lara every day, but I'm no longer drowning and I'm still standing on dry ground. □

Marbles

Kellie Diodato

There's a lump in my left breast,
wedged between the congealing fat and muscle.
The pain is subtle, but I found it.
Upon discovery, the memory of my grandmother resurrects.
She taught me how to play marbles,
how to knuckle down, how to knock the pesky mib
out of the circle and to savor it, a trophy well-earned.
The game, my Balkan powder keg, used to seethe with pressure:
a fretful little girl on a playground full of boys
who played for keepsies. They'd aim for my tidal pink marble,
stash it away in their grubby pants pockets, and wait for my tearful kapow.
I imagine my grandmother's scrutiny, her arms crossed,
her brow cocked: a real German woman
wouldn't let a man snatch her marbles so easily.
In the Sonographer's waiting room a film plays,
a war scene. An American man sits deadpan in a trench,
drenched in his own blood. He's lost his leg in battle
but doesn't have the will to find it.
Later, as I lie on the examination table,
the sonographer huffs that he can't find the lump.
I close my eyes, envision the circle my grandmother
fashioned with yarn upon the living room carpet,
the plus sign she lined with marbles.
Practice makes perfect, she used to say.
My chest, the arena: I unearth the pesky mib,
press my knuckle against my breast,
and teach him how, teach him where to aim the shooter.
He stares hungrily at the monitor,
and it clicks as quickly as the chemo killed my grandmother,
only men play for keepsies. Women have greater gambles to indulge.
I'll let him have this, but first I demand that he turn the screen towards me.
I want to know the color of the marble.



Behind The Mask

Sanjana Sundara Raj Sreenath

In the Hospital

Don Herzberg

There is a stillness to a body
no longer breathing, a stillness
so solid it seems not even light
can escape – a stillness
on the verge of movement
that will never come.

How is it possible to pass from life
to death and leave behind a body
so familiar it cannot be recognized?
How do you speak to this phantom
who only minutes ago had asked
for water, complained about the sore
on his hip? I remember him
moving his fingers in the air
as he spoke – an echo of broad gestures
he made only a few days ago.

His life dwindled slowly but quickly
enough to watch and still sense
the missing parts of movements
he no longer made, the stillness
that stays locked in place
where a person once lived.

Witness

Alexandra DeFelice

The hollowness of hospital halls at
 oh-four-hundred is hallowed and I saw you
 like a witness at the gallows, you sat before that
 professional man in his seafoam scrubs and disposable cornflower cap
 like a paper crown around his head, his ears
 (like a noose around someone dear
 to you) for I saw your face—your fear—and the space
 between you and him, I was tempted to draw near
 (draw you into my arms) discover the harm
 that his words were bringing to that restless thing inside your chest
 help you count your breaths
 as the news comes dripping down
 (I saw it crush you) the snapping sound
 as the condemned neck breaks (as the body convulses and quakes)

and I was awake—walking through the lobby, stumbling by your odyssey
 because I can't stand the sight of it the
 weight of it the plastic badge that graces my clavicle is too
 valuable, nearly blessed, and I worry I won't do my
 best—

I was awake when I saw you, that
 crisp caramel coat on your rigid shoulders, your
 tense spine, your weary eyeline searching his face for a sign
 leaning like a lilting ship, brimming with it all, giving
 into these consecrated halls, about to let something too real slip
 out—or violently pour—flood the white tile floor, crash and roar
 all the way to the ambulance bay, to the elevators patient and gray
 in their dutiful silence—I saw you there like a sinner about to pray—
 and I haven't forgotten how you froze at the edge of that warm chair, how
 still he stood, how gentle he looked but he didn't dare
 destroy the air between (how close we never get) I bet
 he did everything right yet
 I walked into that twenty-degree night, left
 you behind—

(cont.)

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and I feed by the bursting anatomy lab light
drink from diagrams so detailed and bright
practice palpating bony landmark sites
grow beneath the weight of that coat, short and white,
(day after day) I ask and recite
I rest and I stir and I draw and I write

but I still haven't forgotten—I still can't quite shake
that scene as I pace these sacrosanct
halls, crisp and clean (I'm always too awake)—

I still can't shake
it off (my lips were chapped)
and I'm still bothered by the light
(the halls too white)
I'm still stricken by the sight
(my hands were raw)
of that night when I saw
you.



Artwork Courtesy of Lydia Prokosch, *Former Segregated Wards (Interior)*



Artwork Courtesy of Christianna Kreiss , *Disrupted III*

Unmasked

Sarah Marion

Unmasked

Is either to expose yourself
Make vulnerable to the spiked enemy
No smaller than a cell protein
Or reveal the new era
Of phase four clinical trials
Vaccinations and indoor dining
The pandemic a distant memory
Not a fond one, nor favorite
But transformative nonetheless.

Prey to Fallacy

Pollara Cobb

Hearts melt at the glimpse of his innocent honey-colored eyes
His playful chocolate curls softly frame his plump jovial face just as a lion's mane
Shy of seven months of age, Zi roars mighty when hungry or simply craving affection
Milk to soothe his borborygmi, hold him closely and sway while softly humming a lullaby
Soon enough, this fussy cub is fast asleep

Skin the color of cinnamon, transiently with a blue-purple hue at the drop of his spO2
His nurse hastens to his room
His skin spontaneously warms as his oxygen saturation rises
“You just never know with these porcelain babies,” she says
Strong yet fragile, Zi lays on his crib — awaiting his second heart surgery for his tricuspid atresia

Zi's room remained bare — no family photos plastered on the walls or gaudy balloons in every corner
His family rarely saw him and left no trace of their presence, as if they were a figment of imagination
“No good mother could ever leave her sick child alone,” the overwhelming buzz of concerned staff

Unbeknownst, Zi is the youngest of five to a mother single handedly trying to make ends meet
Minimum wage job. SNAP gone in a snap. No reliable transportation.
Four other children vulnerable without her
And miles away in a hospital crib, her ailing baby alone
Hands tied. Ankles shackled. Helpless. Powerless.
Unable to save her child in a situation beyond her control
Mother, how could you prove hearsay wrong when you, yourself, are barely afloat?
Medical providers, how could you support this family in need when your assumptions have trapped you
Just as flies caught on a spider web, prey to fallacy

Every Sunday morning just before the morning dew dissipates, I visited this young cub in his lair
Played with his bouncy chocolate curly hair
Held him closely and swayed while softly humming his favorite lullaby until the inevitable sunset

Wires crisscross, tubes in and out his little body
Machines beeped and hummed. Distance voices. All a conglomeration of noises.
The dripping sound of his IV was deafening compared to the sound of his heartbeat
Zi fought an arduous battle for his life in the ICU after a complicated second heart surgery

His bright honey-colored eyes have now dulled
His cinnamon skin dusked
And his mighty roar silenced
Never alone, his memory lives on
A glorious warrior

I'm Not the Saint I Thought I Was

Apshara Ravichandran

When a person is rushed through the ER doors with hands pressing down on a dripping gunshot wound, they will be treated no matter what offensive tattoos are found plastered on their chest. When someone leers at the primary care office receptionist and comments on her skirt, they will still leave in half an hour with a refill prescription for atorvastatin clutched in their paws. Labs are carefully reviewed for people sedated, intubated in the ICU without knowing who in the outside world may love them or hate them. For better or for worse, medical professionals treat the bodies of those who need us without thought to how we feel about the humans who inhabit those bodies.

In psychiatry, it feels different; the thoughts and actions and feelings and souls of the people inside those bodies are the targets of treatment. I take to heart our lectures about unconditional positive regard, the therapeutic alliance; these erudite, academic terms mean to my fresh, MS3 ears- that I get to *like* my patients. I jump at the chance to see 20 year old patients struggling with bipolar disorder, I cautiously tag along to speak with teens after incomplete suicide attempts. And I care about them, I empathize with them all, and deeply, deeply, truly, I know I'm on this side of the hair-thin line that divides patients and providers but could tip over at any time. As could any of us.

We get a new consult mid-morning. It's a kid just a few months younger than me, with a childhood history of reported psychosis, bipolar, Asperger's, and parental emotional abuse. He had begun using drugs very young and had recently "gotten clean" by switching from heroin to alcohol. He is in the hospital

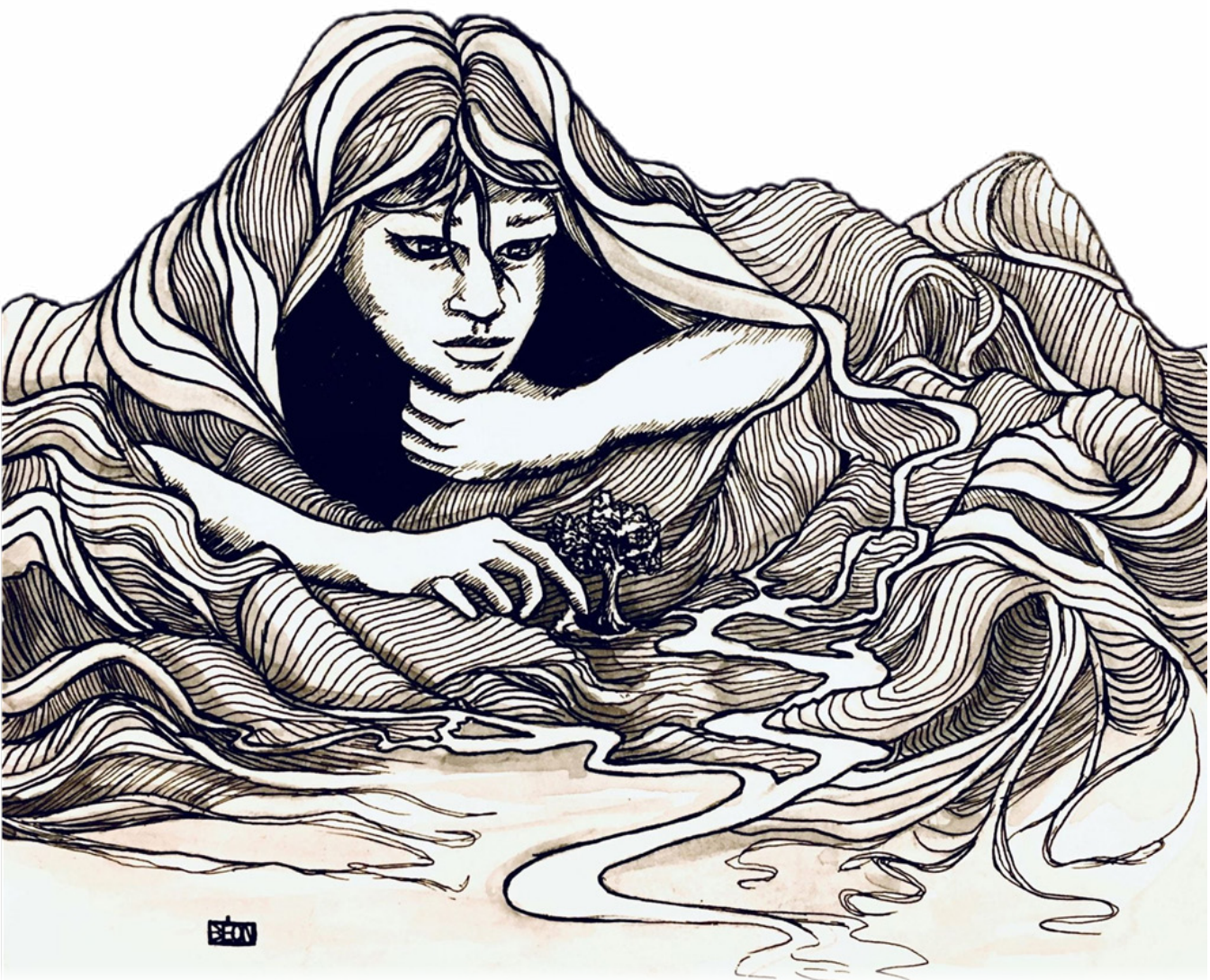
for traumatic injuries after a motor vehicle accident. To me, he was the victim of a series of unfortunate circumstances- not the least being a string of haphazard diagnoses from doctors who had no idea what to make of him.

He is generally pleasant, with a blunted affect and a steadfastly neutral tone. During our initial history, he tells us that he has a legal history, but insists he can't remember what it was for: "Um, I was in jail for a while. I don't know why." We ask about family and he tells us that he snapped his family dog's neck at 8 years old and that he misses his mom in the same breath. I call his mother to get more collateral information. She fills in the gaps: he started fires when he was a kid, he was kicked out of kindergarten for fighting with other kids, he was started on a heavy duty antipsychotic in first grade, and he was hospitalized multiple times for suicidal and homicidal ideations.

At this point, we are looking at a textbook anti-social picture; I still feel more curious than concerned. My mind starts to drift, knowing there aren't any particularly effective treatments for ASPD, when his mother reveals a piece of information that fundamentally changes the way I see the lonely, prostrate, thin, bandaged young man in the hospital bed: his most recent legal allegations were for pedophilia. "He knows what he's in trouble for, he's bullshitting you," she scoffs. "And if it's true, which I genuinely don't know, he *should* go to jail." I don't know what to say- what to think- so I thank her for her time and start my note. He is discharged that same day with outpatient alcohol cessation follow up.

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How can I, a clinical provider who had just been waxing poetic about how little separates us, judge my patient for his legal history? But on the other hand, how can I *not* judge him for that? I thought I could be impartial, benevolent, unbiased. I thought it would be the easiest thing in the world to *like* my patients. I am supposed to do no harm, I am supposed to hold my patients in unconditional positive regard, and I don't know how to do that for this one. □



Artwork Courtesy of Aberdeen Taylor, *Unearthed*



◀ The Progression of Medicine

Natalie Ivey

I originally painted “The Progression of Medicine” in high school after undergoing a spinal fusion for spondyloisthesis. In the painting, I wanted to depict how medicine had progressed over time to mend what would have been a devastating defect in the past. The yellow lines depict nerves intertwined with muscular thereby creating a spider web at the top of the spine, representing old and outdated medicine that has allowed repair and reconstruction of many conditions that, if uncorrected, could change the course of people’s lives. In high school, I knew this experience was significant but did not realize the cornerstone it represented in my journey to medicine. Every day as I look at this painting while sitting and studying at my desk, I realize that it has evolved to contain a hidden meaning – unmasking my intrigue with medicine. The underlying themes and passions I had placed into this painting had become intertwined with my future self. Looking back, I see my pathway to bioengineering and then medicine, as I remember researching what screws and vertebrae looked like before painting them on the canvas. When reminiscing on this painting, I am grateful that my nerve pain could be alleviated, and I am filled with an appreciation for the miracle of science. Through every glance at this painting, I feel invigorated with the same spirit I felt as a patient who had the helping hand of medicine. I remember why I went into the medical field – to help others overcome pain and pursue their own passions through my own passion for medicine, whose spark lies in this very painting. This painting marked one of the most pivotal moments in my life. It was the seed of inspiration that led and progressed me to medicine. □

A COVID Sonnet

Stephan Elliott

Feeling whole with a splinter in my side,
where is it? Neither skin, nor muscle, nor hip
is the source. Lips covered, mind goes to hide,
and the nagging dulls to a lull, a drip,

but increases when I walk home to you
to see joy as a smile in your cheeks,
a stile by which I escape the view
of hundreds masked, hopeful from week to week.

I know the source, of course! bright shard of our
happiness not accounted for. A gift
stem that feigned as a splinter, a flower,
blooming between earth and Maker, a rift.

Of revealed home hidden from birth, craved since,
living treasures we find are evidence.



Artwork Courtesy of Robert Soohy, *Home Visit*

Living with Pain

Vivian Martin

Living with pain is like living with rain
Tap, tap, tapping while I'm dry inside-
Until a day when my face burns, flames.

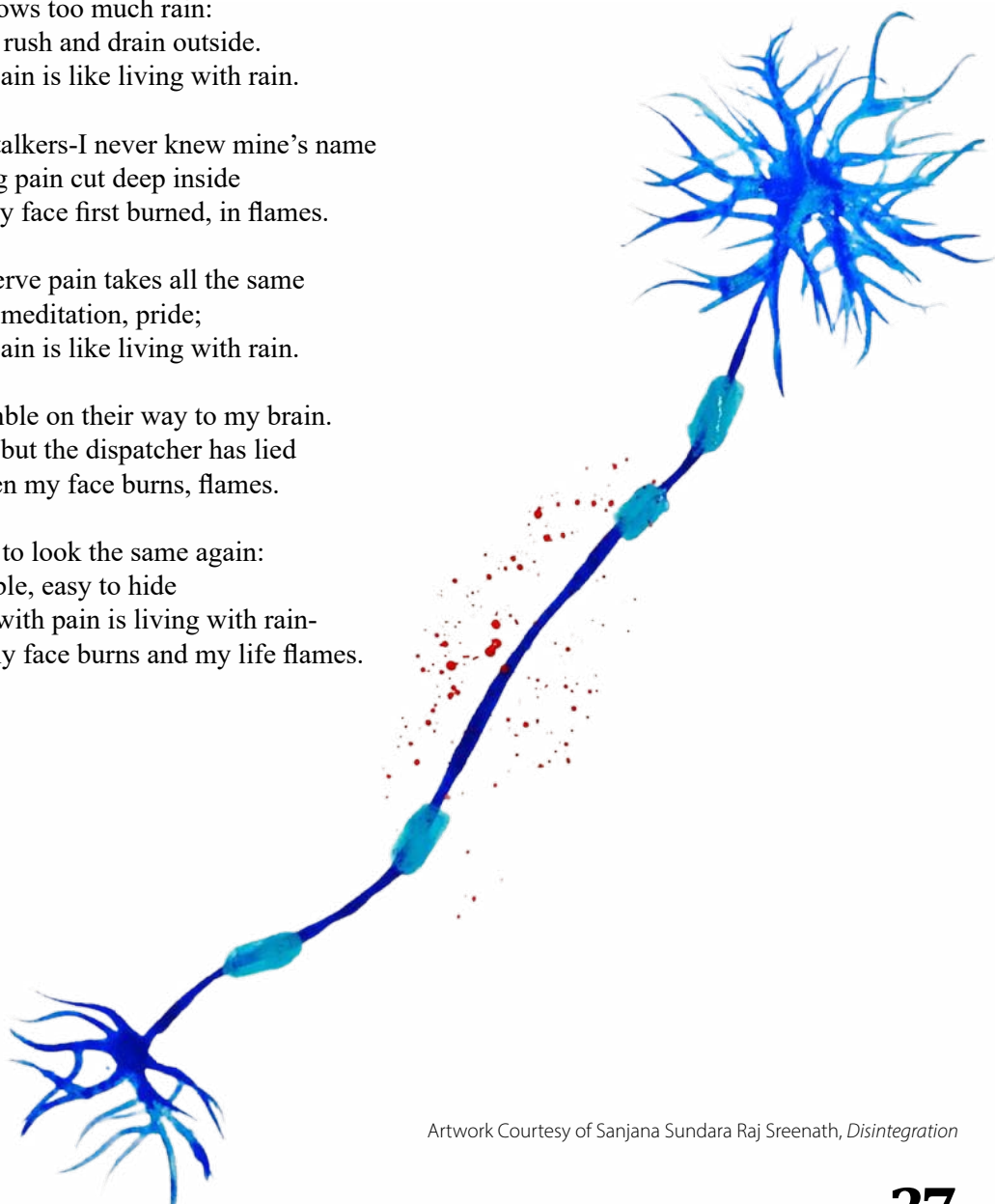
Flooding follows too much rain:
My emotions rush and drain outside.
Living with pain is like living with rain.

Submerged stalkers-I never knew mine's name
Until stabbing pain cut deep inside
On the day my face first burned, in flames.

Trigeminal nerve pain takes all the same
Medications, meditation, pride;
Living with pain is like living with rain.

Signals scramble on their way to my brain.
Sirens shriek but the dispatcher has lied
On a day when my face burns, flames.

Survivors try to look the same again:
Pain is invisible, easy to hide
When living with pain is living with rain-
NOT when my face burns and my life flames.



Artwork Courtesy of Sanjana Sundara Raj Sreenath, *Disintegration*

Something–In the Wind

Ali Abdolsalehi

What kind of noise does the blade of a large kitchen knife make as it repeatedly stabs in between the base of an unsuspecting skull and its former C-1 vertebra? “Atlas” — detached from his world.

I always hear an unnerving synthesizer sound effect in horror movies, but never the sounds of the blood squirting, flesh-tearing, or bones cracking. Perhaps it would sound like walking with wet socks on a marble floor.

The fact is, I get *that feeling* — sometimes. I notice strange noises — sometimes. I say “sometimes” because it seems foolish to say “always,” even if *always* is more truthful. But truthfully, every night, I notice. So many noises, and not all of them merely in my head. As I grew up, *they* would tell me that it was just the house “settling” or the wind howling. I have gotten used to it over time (at least, I tell myself I have). Every evening, slightly different noises but mostly the same conversation with myself. I’m a proper grown-up man. I’m not freaked out by just *any* noise. I hardly notice the raccoons causing mischief on the roof or woodpeckers — well — pecking, I suppose. But tonight, *this night*, in particular, damn it, I know it is different! That sound, as if an echo from Hell, cannot be ignored!

I’ll commence this evening’s solo dialogue and autopsy by playing Devil’s advocate. Obviously, I have no need to worry. Why would I? I mean, I am a dude. A grown man, as I said. I also have nothing of value to be targeted for theft. I’m not worth torturing since I don’t know anything worthy of being a secret in the first place (like the combination to a mysterious wall-safe behind an exotic painting). But in this instance, the ground shook in

a town not known for earthquakes (however, we do have an oddly higher rate of heart attacks).

In the distance, I hear — something. Is it an orchestra of muffled screams? Maybe my neighbors are in danger. I now sit in bed and listen (with my earlobe possibly pressed against the wrong side of a whiskey glass) against the townhouse’s mutual wall. I can feel thuds knocking along the studs. I bet at this very moment, my neighbors are all bound and gagged as they are in the process of being robbed, beaten, raped, and tortured. Or maybe — it’s just the TV — an old Hitchcock film is playing. Although, I have been reading about a series of break-ins in the news, and I just figured it could never happen in my neighborhood. Does that make me an elitist? Or an optimist? Or the next TV news *victim-ist*? A few months ago, I may have lost some credibility, “crying murderer,” but this time, I think I’m onto something!

Perhaps I’ll go outside in the snow and the dark and investigate if my neighbors are okay. But what if they really are in trouble — would I then not place myself in the very same jeopardy? No, I refuse to go down useless! I shall arm myself with a kitchen knife or a decorative sword and hide the weapon behind my back as I knock on their door heroically. I did take Karate in college. Okay, it was meant to be a way to meet some hot babes. But, as it turned out, it was mainly fat sweaty guys who would push their slimy chest hairs into my mouth every time they had me in a chokehold.

Hopefully, everything is okay, and my presence at the door will be looked upon with

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laughter at a future community association potluck party. My neighbors will surely explain to a small audience how I came armed to the teeth to kill an imaginary foe. It is funny. But will that future audience be laughing with me or at me? Do I wish to be made a fool of — transformed from a hero to a jester? I think not, kind sirs. I think not!

No, *no!* Regardless of the outcome, I must do the right thing! Even if the right thing is violent or dangerous, it's what is necessary. Right? Maybe I'll wear a mask to hedge my bet. Of course, the blood from slaying the "bad guy" will surely stain my unmasked clothes, but this is no time to think of such things.

Wait — is there any way I could be sued for something I do from this point forward? That's messed up! I was only trying to help. Now I am destined to defend my actions in a court of law? I will simply have none of that, good sir or madam. Much obliged.

Why am I obsessing here? This is ridiculous! Pull yourself together, man. And, for the love of Batman, stop talking to yourself!

Okay, let's do this thing! Deep breath!! Game face on!!!

Although — it is exceptionally frigid outside, and they do say that no good deed goes unpunished. And, after all — it could very well just be — *the wind*. □



Artwork Courtesy of Eric Sorensen, *Sunrise* (Bottom) & *Japanese Toolbox* (Right)



The Passion Of
Nina Kaiser

A Review of Systems

Erik Carlson

What if the Review of Systems
was not so rushed
was not so sterile
was not so condescending?

I offer a new Review of Systems
fashioned from the questions
we are too nervous to ask;
too afraid to hear the answers to.

Questions holding answers yearning to be shared.
Questions resting on our hearts.

Who was the last person to tell you that they love you?
Who is your best friend?

What is your most cherished childhood memory?
What does family mean to you?

When was the last time you ate a warm meal?
When was the first time a doctor shamed you?

Where do you feel most at home?
Where do you find the courage to rise out of bed each morning?

Why is the world such a mess?
Why can't we seem to learn from our failures?

How often do you think about your child?
How does a good death look to you?

Do you long to come out to your family?
Do you ever feel alone?

Maybe, the answers aren't too expansive to hold.
Maybe, the answers will demolish unspoken barriers
between patient and physician.

And unfurl into the grace of a beginning,
a new, healing relationship
between equals.

The Leaf Story

Alexandra DeFelice

Over a year ago, more than two months into my medical education, I was admitted to the hospital amidst a new and unexpected health crisis. Soon thereafter I had no choice but to take a leave of absence from medical school, for I had missed too many classes to catch up. The year that followed was its own kind of gruesome, harrowing in more ways than I could have ever expected. I suffered that year: I struggled. And I'll admit that sharing this story has me a little nervous, a little anxious, a little scared—but medicine, in my opinion, boils down to stories, so it is only fitting that I share my own.

And I could write, here, about the bigger, complex lessons I have learned about relationships, about confusion, about trust, uncertainty, appreciation, helplessness, honesty, hope. But of all the stories this experience gifted me to share, there is one that remains for me particularly unique, memorable, and life-changing.

I call it “The Leaf Story.”

When I look back on that fall, I remember the intangibility of my diagnosis, how it felt in one moment grounded and in the next moment illusory—one moment pulling me down like gravity and the next turning me light and transient, as if everything were just a bad dream. I remember how I couldn't quite pin down the repercussions that came along with all that was happening. I remember having so many questions that I couldn't well string together a single one. And as the days grew longer and my aspirations—my life's dreams—were increasingly pulled away, I wondered at my future, at what was in store for me. I remember asking—at first

apprehensively, and later despondently—what was happening to my life, what I was supposed to do, what I could have done (if anything) to have avoided the present situation. I remember the emptiness, the fear, how my Dean and my mentors and my friends and various important-sounding people I had never before met stopped by, first in the ED and later on the floor, and I never quite knew what to say to any of them, because I never quite knew what was going on or what was lying ahead. And most of all, I remember how it all kept rising up until it overwhelmed me and I convinced myself that there was nothing I could do about any of it.

I gave up.

I withdrew from everything going on—from conversation, from visitors, from future plans, from coming to terms with it all. On top of all the intense emotions, I felt like I wasn't being heard, for from my perspective, I had no voice, no future, and no power. Though I was reminded multiple times that my care was as confidential as possible—for example, no medical students were being assigned to my team—and I appreciated such precautions, I also felt torn. I was morphing into a medical pariah: not quite student, not quite patient, and truly quite alone.

The stress ate me away from the inside out, and I soon lost my sense of identity—for my hopes (my confidence, my future, my health) were gone; the people I loved most (my dog, my sister, my parents) were far away; my role in society (medical student, future physician) was up in the air; my college friends were not nearby, and as far as I was concerned, my medical school friends had better things to do

than visit (so every time they stopped by, part of me only felt worse). It would take me months to fully understand the causes and the consequences of everything that was happening, and in the meantime, it was as if someone had yanked away from me the remote to the movie of my life, and before I could wrestle it back, they hit pause, leaving me isolated, stranded, powerless, and confused.

Amidst all the disorientation and all the intensity, I couldn't see through the mess to know when I was reacting appropriately. If something made me respond, I would question why; I would wonder if the emotion were true, and I was cripplingly hesitant to be happy or glad or hopeful or joyful about anything—for I had lost so much, and I was so scared to lose again.

I wasn't dying by any means, but I was suffering in many silent ways. I thought of the palliative care lecture I had heard during medical school orientation, how it was explained that those on their deathbeds focus, more than anything else, on relationships. On community. On *people*. I came to understand, on a deeper level than I would have thought possible, that life really is defined by our interactions with those around us, and that as someone—for example, a patient—experiences increasing suffering, the importance of authentic human interaction also proportionately increases. The sicker and more isolated one is, the more imperative it becomes that they still feel like a person, that they retain their humanity.

Now, my hospitalization was at the end of October. The leaves changed color a little late that year, and the vast majority of trees did not burst into true Autumn foliage until mere days after I was admitted. And it stung, because I had waited so, so long to see those leaves.

For in fact, one of the major factors that went into my choice of medical school was being able to see the Autumn leaves. I hail from

the Deep South, where nearly every tree is an evergreen and Autumn is just an abstract concept—something intangible you hear about in elementary school, a limited-time flavor for pastries and coffee, a societal permission to wear jeans and boots even though it's still eighty-some degrees outside. So as the color-changing had approached, I had shared my anticipation with anyone who would listen, spilling with excitement as I counted the days until the Autumn equinox, overflowing with joyful apprehension as I held the anticipation close—as like a child for Santa, like Jacob for Rachel, like Penelope for Odysseus—I waited.

I waited to see the leaves.

And there I was, just days after my hospitalization began, gazing out the window, holding back tears, trying to suppress the hatred I felt toward the thick, scratched glass that stood, so indifferent, between my helpless hands and those beautiful trees below that I so longed to touch.

That I had waited so long to touch.

It even came up during rounds one day, for I was frustrated with the situation, and I lamented to the team about everything I was missing out on—and everything that was being put on hold. Much of it was readily understandable: straightforward frustrations about school or career or health or family. But to me, the little things were just as important—the leaves were just as painful—because they drove the point home that absolutely everything was falling apart around me, from my desire to practice medicine to my simple, long-held wish to walk among the leaves.

Now, there was an intern on my team whom I will here call Michael*. Michael rarely spoke during rounds, and I wasn't even sure of his name the first few times we interacted one-on-one. Yet when he was the one who came to ask me a question or give me an update or stop by for some other reason, we would end up having a semi-normal conversation by the end

of his errand. This never happened with any other physician I encountered, and I began to suspect that Michael was the only provider on my care team who had not yet begun to lose his/her empathy. I held nothing against those who had—in my mere ten weeks of medical education, we had already been thoroughly warned about this awful and seemingly unavoidable fate—but it was touching that Michael hadn't. I hope he never does.

One day, more than a week into my stay, Michael stopped by alone again to ask a question. I don't remember what question he asked. I don't remember how good or bad I felt when he walked in. I don't remember which particular cycle of worries was tormenting my mind that afternoon.

But I do remember the way Michael paused as he turned toward the door. I remember how he pivoted back to me. I remember the thin, soft navy-blue quarter-zip jacket he was wearing, the health system's logo monogrammed in the corner. I remember how he looked so warm, so comfortable; I remember how it made me think of how chillingly cold it must've been outside—and I remember how it occurred to me that I could not know what it actually felt like outside. I remember how he held his brown clipboard with both hands as he made eye contact. And I remember how he smiled as he said: "I almost brought you a leaf."

I stared at him.

My mouth wanted to move, but I didn't know what to say. Did he mean a real leaf? As in, *the leaves*? As in, *the Autumn leaves* that I had been waiting my whole life to see and hear and touch and walk beneath? As in, *The Amazing Color-Changing Leaves* that I could only see through a window and love from afar, like Rapunzel in her tower gazing at the floating lanterns, like Tantalus in Hades languishing for fruit and water, like the crew of Apollo 13 in their command module staring

at the moon's gleaming surface and all the dead dreams buried within it?

I continued to stare at him, stunned, so he began to explain, gesturing with his hands and his clipboard as he did.

"I was walking, and I saw all the colorful leaves on the ground, and I thought of you, and of how you wanted to see the leaves. And I really, really wanted to pick one up and bring it to you—and I almost did! —I had it in my hand! But then I thought, you know, it's a hospital, and that'd be unsanitary..." he looked at the floor, and I could see that his disappointment and his sadness were real, "... but I really wanted to, and I almost did. I just wanted to let you know: I almost brought you a leaf."

Then he smiled again at me, and he left. I was motionless for a few minutes. Paralyzed. Shocked. Touched. What had just happened?

My head swam as I replayed Michael's words: the way he had spoken to me, the way he had looked at me—like he meant what he was saying, like he simply wanted to see me smile, like he wasn't thinking about where we were or what I was diagnosed with or which medications I was taking, but rather of something he knew about me and my life, about something that might alleviate the current situation, even if just a little. He was the provider and I was the patient, yet he treated me, for just a moment, like nothing more—and nothing less—than a fellow human being.

I thought of his words as I stood there so lost, so empty, so defeated—so scared to feel. I thought of his words, and something inside of me remembered the leaves.

It remembered when I was in Montessori preschool and I painted wooden leaf cut-outs during craft-time and made them every color at once: green as well as orange and red and yellow and brown—back when I was young, not even four, when my favorite color was

happy a color not to absolutely love.

It remembered elementary school when my family evacuated for a hurricane at two-in-the-morning and we drove and drove and I got to witness—so fleetingly—the leaves as we moved further north, as we sped by the fiery leaves in states that were not our home and wondered how many of our windows would break and how many of our pine trees would fall and whether or not our house would flood.

It remembered when I was in middle school and my father convinced me to try pumpkin seeds for the first time and I liked them, and I held a handful while I asked him to tell me about the orange-tinted Autumns and sub-seventy-degree Christmases with which he grew up, and how the memories he recounted made him smile, and I saw firsthand both the pain and the beauty of growing old, of how nostalgia hurts in a healing way.

It remembered high school, when I developed my admiration for Charles Schultz and watched *It's the Great Pumpkin, Charlie Brown* for the first time and pretended not to notice that I was just like Linus waiting for the Great Pumpkin, that I've always been a child-at-heart with a stubborn imagination.

And it remembered organic chemistry lab in college when we studied lycopene and other carotenoids, how I beamed while watching the fractions separate in the column, my eyes wide and sparkling behind my goggles, my mind clinging to the striking fractions that descended through the tube in sweet, special glimpses of a true Autumn.

Michael didn't bring me a leaf, but he did so much more: in that moment, he saw me as more of a person than I did. I may have forgotten who I was, may have relinquished any active participation in the situation, may have given up on myself, but Michael continued to treat me with honesty and dignity. I may have shared my love of the leaves out of frustration or panic or fear or anguish or just

to fill some heavy silence, but even if I didn't mean to be so raw, Michael was listening. Michael didn't know about the preschool crafts or the evacuation or the pumpkin seeds or Linus's vigil or organic chemistry lab, but Michael did realize that the Autumn leaves meant *something* to me. He saw the things that mattered—even if they didn't *medically* matter—and he made me feel, for the first time, heard.

That conversation helped snap me back to myself, shifting my mindset and reminding me who I was and what I wanted out of life, giving me the sentiment and the insight to pull myself together, grounding me to begin fully confronting what was happening. When I saw and heard and touched the Autumn leaves upon my return to medical school, I thought of Michael—of how he still had his empathy, of how he insisted I use his first name because he was “just” an intern, of how he listened to his patient, how he was thorough in his treatment, how he was professional but kind—of how he used his patience and sincerity to see through all the formalities and all the charts and all the data and just treat me like a person, to reach out and help me on a human level when I needed it most.

He was kind, soft-spoken, considerate; he'd remember conversations we'd had earlier today, yesterday, four days ago. He'd come to my room just to check in, stop by, see how I was hanging in there. He was not afraid to smile or frown or just sit with me in a moment of silence letting all the weight of the present situation settle around us—*us*, not me, and some days that would make all the difference: just to feel, for a moment, as if I weren't facing it all alone.

Yet despite all that time and energy he sacrificed on my behalf—resources he, and everyone else, were constantly running low on—despite all that support, the most transformative and helpful thing Michael did

was so much simpler and so much smaller and so seemingly insignificant.

It was “just” a leaf.

And it wasn’t as if everyone else was doing something wrong—no, they were doing everything right; Michael was simply doing everything right in a different way. If practicing medicine were a road trip, everyone else focused on making the best time; Michael, meanwhile, took the scenic route.

Now, over a year later, having since regained so much of what I had lost, I find myself remembering him as a model: I want to be like Michael. I want to be a physician who sincerely cares, who pays attention to every part of the patient, who practices medicine with heart. I want to be competent and hard-working and efficient, but I also want to remember that each and every patient is not only a patient but also a person—and I want to treat them as such.

When we M1s practice patient interviews, I keep getting consistent feedback about my “good” empathy. I hope it’s accurate feedback, and if it is, the truth is that I really don’t have myself to credit if I come across as a particularly empathetic provider. For it’s not what I have done, but what I have received—I’ve been, for better or for worse, on the other side of those conversations, and I know the type of physician I want to be.

And medical school, alongside my hospitalization, has driven home the message to treasure and protect my empathy—for I have heard the warnings within my education, and I have lived through the impact from the other side. The doctor may know the science, but the patient knows the suffering; the doctor might have a perceptive brain, but the patient has a perceptive heart. As I have learned both from a chair in the Auditorium and from a bed in the hospital, the most effective physician is going to make a sincere connection with the patient. The true physician, the best physician,

the one who is going to have the biggest impact—regardless of specialty or prognosis, resume details or research grants—that physician is going to be just as much human as scientist.

Though medical school is teaching me all the biochemistry and all the bacteria and all the beautiful, overwhelming details in-between—though medical school has put my brain to use—it is Michael who has taught me that I need to have both: brain *and* heart. I can mix paints to get specific hues and I can hold a paintbrush the proper way, but if I don’t have the artistic ability, I cannot create anything worthwhile with that paint and that brush. Likewise, I don’t want to be a physician who has a head full of knowledge and a room full of equipment and no *feeling* to balance it out.

I know I’m only a first-year medical student, and I haven’t been on the wards, and I haven’t taken an OSCE yet, and I very much know nothing about medicine. But despite those limitations, I do know the difference that Michael made in my life. I do know what he taught me. And I do believe that every patient has a leaf—I believe that every *person* has a leaf. And if everything I’ve experienced in the past year was just some long, grand, miserable, convoluted way for me to become a better future physician—if the whole exhausting journey was just to hear Michael say those words, and to remember that conversation for years and decades to come—then I’m humbled, I’m grateful, and I’m dedicated to making sure it was not in vain.

Nearly a year-and-a-half ago, I slipped on my white coat for the first time, not knowing that I’d soon have no choice but to take it off. Not realizing that I’d been far too healthy my entire life to really understand what it means to be a good physician. Not suspecting that perhaps one of the best medical educations a person can receive is from the hospital bed. And never guessing that—when I would find

myself losing to the chaos, hollowed out and paralyzed by the fear and the hurt—one of the most meaningful, healing things that anyone could do, as it turns out, would center around a single leaf.

Now, as I grow into my professional role, though my education and my career and my life are, of course, still inundated with uncertainties and setbacks, I know one thing: I want to be someone—whether as student or healthcare provider, as friend or stranger—I want to be someone who finds The Leaf.

And that is why I feel compelled to share this story, for I know what it is to love the leaves.

Maybe you're different, maybe you never really thought the leaves were all that pretty or interesting. Or maybe you treasured the leaves, once, but their colors have since faded. Maybe you've also been a patient—a lost patient, like me, suffering in ways that can't be pinned down on a convenient scale of one-to-ten. Maybe you're rubbing your eyes through residency, feeling overwhelmed by everything you've dreamed so long of achieving; or maybe you've been practicing for five years, for ten years, for twenty or thirty, but you're tired, you're frustrated, you're forgetting why you got that far in the first place.

Or maybe you're like Michael, maybe you find a leaf for every patient; maybe you wouldn't mind a reason to *keep* finding those leaves.

Or maybe, maybe you haven't searched for a leaf in a long time—and maybe now you will.

I hope you will. □

*Michael is a pseudonym



**It's not regret,
but it aches some days**

Miranda Chen

the modern waiting room

Lucy Fu

the silence is sliced by a meow
I startle
might he know?

dad,
I say through the phone
no other words come.

the lump in my throat
stifles the question
are you lonely?
I think I know the answer
I do not wish to hear it.

it brings me no comfort
the smell of my mom's cooking,
blooming through the tense air
the way I know hospital food couldn't
but I hear he likes the pudding
and I hold on close to that.

eyes raw, I will the doctors
to be extra kind, *please*,
and for the first time in months
I curl up in bed
and pray to God.

Stars

Kali Smolen

We have a face that we show the world. And another that is usually seen only by our own eyes when we look into the mirror. For my entire life, I've been working to perfect the face that I show the world. Carefully carving a mask that is enthusiastic, bright, ambitious. This mask has been worn to volunteer events, classes, numerous extracurricular activities, and more. Yet, this mask became more and more difficult to wear as I navigated the early years of my MD-PhD training. It seemingly no longer fit. I had outgrown it. And if 2020 taught me anything, it is that the raw, tired, and enduringly optimistic face beneath my pre-med mask is just as beautiful and capable as the face that "has it all together."

On a recent winter day, I lay upon the snow-covered ground behind my house. Staring at the sky full of stars above me, I remembered being a little girl looking up at Orion. Each star in that famous constellation was a member of my family: Mom, dad, my brother, our dogs, my horse, my adopted grandmothers, my uncle, and several best friends. In the constellation, we all existed together harmoniously. Floating quietly above the earth forever. Over time, some of those people left earth. But they still exist up there. Sometimes I talk to them as if they are still here. So much of my life choices have been to make them proud. Have I done that?

It wasn't until I stood at the edge of a cliff in the nearby mountains this past summer and thought, "what if I jumped?" That small and fleeting thought scared me tremendously. For the first time, I asked myself, "am I making you proud, Kali?" I had not truly looked into

myself before graduate school. I had been on a treadmill, running towards the goal of becoming a physician scientist. As I engaged in deep dialogue with my houseplants during the COVID lockdown, I finally thought about why I am pursuing this grueling path. The word connection kept coming into my mind. I am doing this to cultivate connection with my patients, myself, and the microscopic workings of this world. There are days when I wonder why I'm doing this. Where I can barely get myself out of bed. Where every letter written in the lab notebook feels like a struggle. But there are days when I get a clear western blot. Where I explain something to a patient and help them understand their illness better. Where I walk through the woods in awe of the privilege that I have to be involved in some of the most vulnerable and intimate moments of human life. And I can see myself doing nothing else.

We are all stars. Moving constantly around our own true norths. Sometimes we are obscured by clouds. Other times, we shine bright in clear skies at our own unique intensities. One bright star is nothing compared to the extravagance of thousands of lights making up constellations and galaxies. Together is better.

□

Chocolate and Orange Trees

Aberdeen Taylor

I pass my father pieces of tangerine
while he drives me to college
in the winter as if to ask,
“do they remind you of home?”
They’re small and have traveled far,
but are sweet nonetheless.

Thirty years is an era but
I know he always remembers
the orange tree he fell from
and badly broke his arm,
the chocolate *his* father ground
to make their morning tea because

some aches never let you forget
their promise for your future—
I’ll find my father standing in his grove
of chocolate and orange trees,
smiling at his growing things
as he smiles at us now.

My sisters will have
sunflowers and spearmint each:
my brothers will take
blueberries and lemongrass,
and I the left-hither-to dust
on the palms of all of us.

My mother will go with him,
leave the cold country that
cursed and praised his
color, speech and thought,
because she’s strong northern oak
and she can thrive anywhere.

I’ll find my father standing by
his brightly growing things,
all my brothers and sisters
mother and I
laughing under
chocolate and orange trees.

Pointy Kisses

Alexandra Fairchok

My favorite kiss is a pointy one.

The type that takes lots of love to make.
The kind that halts any further harm.
The one that needles in my arm.

Harsh murmurs; vaccines cause:

Autism.

Worry about heavy metal; a different black sabbath.

Microchips.

Or fears of infertility; my body my choice.

Rumors. Pseudoscience. Google doc.

Doctor.

Please get your vaccine.

Patient.

I have my freedoms.

Hospitalized.

The drip. The beep. The code.
The death.

Medicine changes.

Yet still;

My favorite kiss is a pointy one.

Covid Complications: Uninsured

Ali Abdolsalehi

A young man kneels,
praying for his fiancé's life
in an overcrowded corner
of the hospital waiting room.

He uses his blue cotton mask
to wipe his tears, as he does not know
what the immediate future
holds for him and the love of his life.

There are tests to be done,
as more doctors are called to her room —
more whispers in Latin.
An unknown future looms — awaiting diagnosis.

He starts worrying more anxiously and fervently
about his own pre-existing condition,
for he is unaware of how much of the total bill,
the engagement ring will cover.

Slay the Dragon

R. Michelle Schmidt

you have 8 different medications to take each day.
three of them you take twice a day
two of them you take three times a day
three of them you take once a day

you put all of your pills in a pill box hoping this helps you remember to take your medicine. you set your alarm on your iPhone; 7 am, noon, 5 pm. even with your reminders, you forget. maybe 4 out of 7 days you take all of your medicine. maybe

elective surgery. non-emergent, sure, elective - not the best definition. for the past decade, my mother-in-law's humerus and clavicle have rubbed together without the benefit of cartilage. it's an uncomfortable existence but taking care of her aging husband delayed repair. electing to have the latter portion of your humerus sawed off and replaced with a metal ball and rod isn't the same as electing a political candidate. surgeons do not communicate well. they operate well. performing the surgery and preparing a patient for surgical recovery aren't mutually inclusive. hit your left shoulder with a mallet several times, tie your left arm behind your back and walk around for 8 weeks. seriously, do this. and follow a complicated medication regimen. and mourn the loss of your husband. and button your shirt. and wipe your bottom. and tie your shoes. and wash your hair. and open a jar of peanut butter. I forgot, your right shoulder has the same problem as your left. you haven't elected to have this shoulder fixed yet. you have one good shoulder but it's not functional and you have one bad shoulder and it's not functional either.

add 15 to 30. 45 years old comes at you like a freight train off its tracks. 18 to 30 is devoted to college, getting into medical school, surviving medical school, determining a medical specialty, applying to residency, matching, surviving residency. maybe you'll meet someone. there. Is. so. much. information. and you have to know it all RIGHT NOW. seriously, like RIGHT NOW. if you don't there will be someone hungrier than you who'll gobble up your place in the pecking order, not to mention the HUMILIATION. you spend about a decade living like a salmon swimming upstream and you have no money.

30 to 40 you are getting comfortable in your own skin. you make some money. you get married. or you don't get married. you have kids or you don't have kids. you are FINALLY AN ADULT. you get a mortgage and a nice car. it's a different kind of residency. it's the residency of life. you are a young professional full of eagerness. NOTHING will ever get in your way. unlike those who have gone before you, your path will be unmarred and you will slay the dragon. until your parent gets sick or you get diagnosed with that illness you diagnose your patients with or you struggle with infertility or alcoholism or debt. all those years of setting goals and then attaining

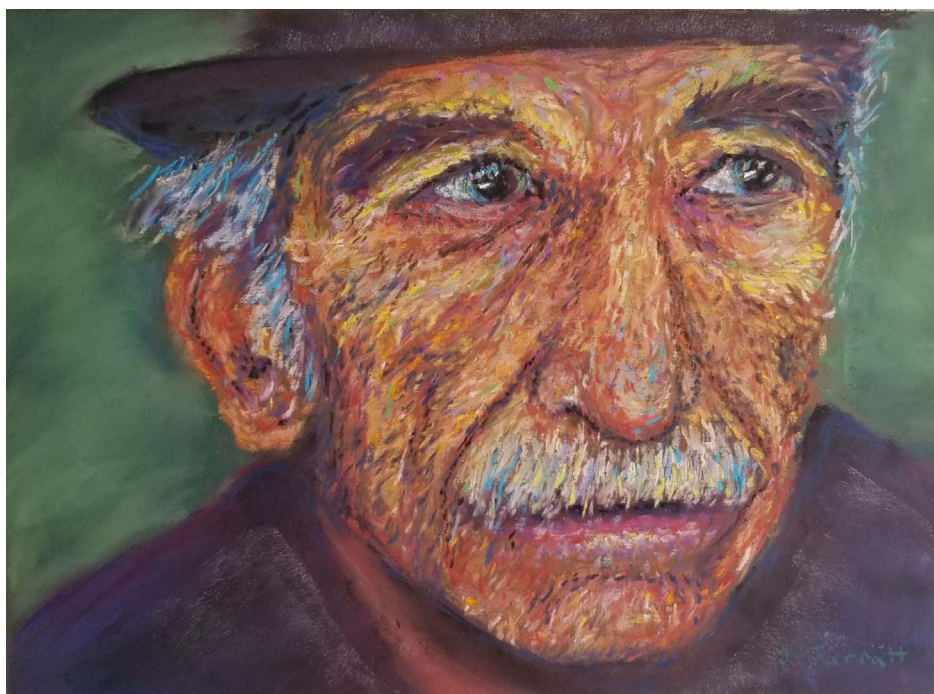
LIFELINES

your goals, the years where you have the illusion of controlling your own destiny, they are starting to fade into the past. you get depressed because you feel like a failure. “I should be able to control this situation!” but you can’t. you never could.

one day you wake up and middle age has crept up on you like a creeper. it’s long, boney fingers come poking at your neck, icy and unwelcome. you see your date of birth and you are now older than many of your patients. how did my neck get those redundancies? your nose resembles your grandmother’s; the family beak. when you were young and beautiful no one told you that you’d develop hideous bunions. you redo the math. you add 20 to 30 and FIFTY. no. fucking. way.

the marriage vows get real. in sickness and in health. when your parents get sick. when your kids get sick. when you max out your credit cards. when you get sick. when your spouse gets sick. when more than one of these things happen on the same day and you still have to go to work and make lunches and make dinner and go to the grocery store and pick up the dry cleaning and give the dog her heart worm medicine and fold your clothes.

don’t blink. you don’t get a mulligan. really, I mean it, don’t blink. don’t get worked up about stuff that doesn’t matter. it’s important to know the studies and the evidence but listen first. listen to what is not being said. be wise. that 46-year old lady or 62-year old man or 78-year old grandma or 87-year old grandpa was 28 years old 10 minutes ago and life happened in the meantime. life is still happening. listen.



Artwork Courtesy of LynnMarie Jarratt, *Remember the Elders*

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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.

