

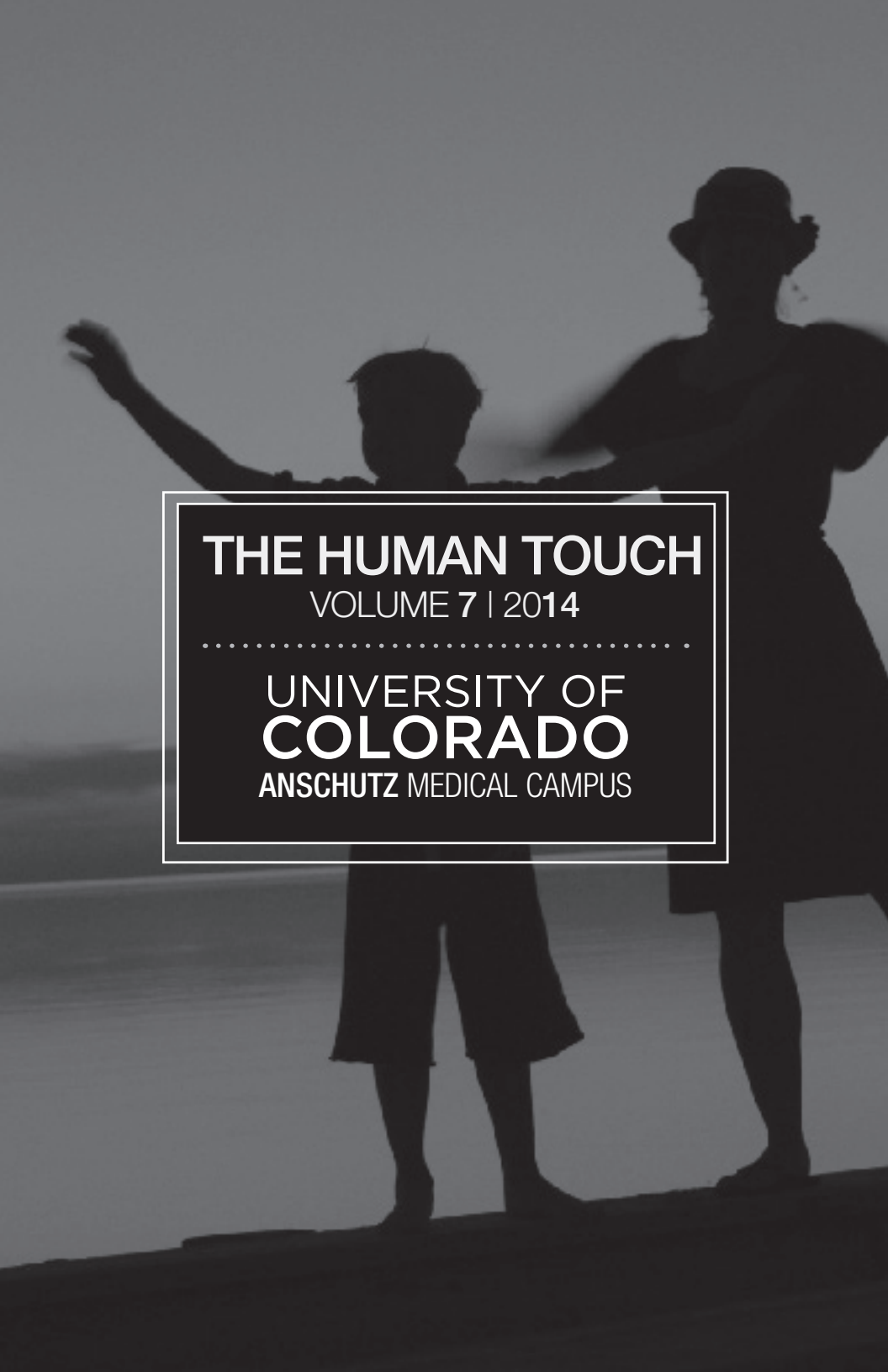
THE HUMAN TOUCH

VOLUME 7 | 2014

A JOURNAL OF
POETRY, PROSE
& VISUAL ART



UNIVERSITY OF
COLORADO
ANSCHUTZ MEDICAL CAMPUS

A black and white photograph showing the silhouettes of a child and an adult standing on a beach, looking out at the ocean. The child is on the left, with their right arm raised. The adult is on the right, wearing a hat. The background is a soft, hazy view of the sea and sky.

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The Human Touch

Volume 7 • 2014

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Preface

Volume 7 • 2014

.....

Welcome to The Human Touch 2014—the annual anthology of prose, poetry, graphic art and photography created and contributed by the students, staff, faculty, alumni and friends of the University of Colorado Anschutz Medical Campus.

Since the E-revolution, editors, writers and readers have alternately panicked, lamented, warned or blustered about the future of the literary and arts magazine. An established creative pillar and cultural linchpin of American society since the 19th century, the medium has evolved from micro-run letter presses to digital-only platforms, but it has stood the test of time and proven its mettle. Even today, against all odds and dire predictions, literary and arts magazines are not only surviving but also thriving whether they are beautifully bound or held together by a staple and a prayer.

With this, the seventh volume of imaginative work, The Human Touch is also standing the test of time and proving its mettle. I am amazed at the rich variety and artistic complexity of the materials contained within these pages, and I hope that readers will be as moved and as inspired.

I am especially grateful to Dr. Henry Claman for his unwavering commitment and incredible generosity to the Arts and Humanities in Healthcare Program whose mission it is to realize the universal appeal of the arts and humanities and their power to connect student and teacher, patient and professional, citizen and artist, benefactor and institution. The Human Touch serves as both a tangible and beautiful means of making such connections.

On behalf of the editorial board, I want to thank and congratulate our 2014 Editors-in-Chief, Sara Parke and Lauren King, who graduate from the School of Medicine in May. They have made important and lasting contributions to the editorial and publication process of THT and have been a joy with whom to work.

Therese (Tess) Jones, PhD

Director, Arts and Humanities in Healthcare Program

.....

“Five Stages” of Processing a Needle-Stick Exposure

MICHAEL FRANK

.....

1. Shock

First comes shock. *What the hell was that? Did I just feel something sharp? No, it just scratched the surface. That doesn't really count. Does it?* My mind is frantic. Ms. Harris rolls onto her still-ballooned belly and clamors, “Oh my! I feel like you took 30 pounds off me! Thank you! Thank you so much! All that fluid in my belly was terrible!”

2. Shame

Next comes shame. *I can't believe I touched the end of that needle! How could I do this? What an idiot! It's all my fault.* Shame fills me like a dozen screaming voices, and fingers pointing at me. They disparage me. The gravity is heavier, and I am pushed down. I feel small, scared and lonely. It is frigid and dark, except for a lone light casting shadows beneath me. If only I had been more careful. If only I was smarter.

I reach out because people before me have taught me the value of companionship. I am in the concrete stairwell now with my classmate: “That sucks man! You gotta tell somebody and get tested” . For a while, I try to rationalize “the stick.” I think of my wife, who I must go home and tell. I find a quiet desk and call the “OUCH Line.”

3. Despair

Then despair weighs down on me. *Will I leave my wife behind? What will she give up everything to care for my hepatitis C? Will I get cancer? I've worked so, so hard to become a doctor, and now I will no longer be able to practice. What a waste.*

Elevator music fills my ear from the telephone, which sharply contrasts my inner turmoil. *Will I be able to see my friends as much? What about cycling, running? What about my family? Maybe I will be able to go and be with my parents. But will I leave Becky behind? What will I look like with ascites?*

Veins all over my abdomen! I can't think of it! How will I change? What about my dreams of working with the poor and fighting for justice? I can't take it!

"Excuse me sir," a nurse snaps me from this trance, "you're sittin' in the drug desk. I just need to use this computer for a sec." I give her permission. *Can't you see my mind is on fire, and I may lose everything!* I slide over to give her some space. *I was meant for something more. Please don't take it away from me now!* My thoughts are interrupted as a friendly, calm voice comes on the line as the OUCH Line representative begins to ask his questions.

4. Identity Crisis

An identity crisis begins to brew. Truly, this is the core of my despair. I have known myself to always be perseverant and strong, both physically and emotionally, but now I may have inoculated myself with a virus that I am powerless against. Powerless. Me? I feel bare and exposed, more vulnerable than I've felt in a long time. *Is there a treatment for hepatitis C? Why can't I remember?* For some moments, I believe that I am no longer healthy; it destroys my understanding of who I am. A long, profound internal silence ensues between my diminished identity and me. Am I fundamentally different now that I could be sick?

5. Hope

And then hope finally lights a path forward. My colleagues check back in. They share stories about their "sticks," and we laugh, restoring some of my humanity -- the part I lost when I became "sick."

They remind me that probability is well in my favor. "Mike, your stick is so low-risk that you wouldn't be able to calculate a positive number!" They arm me with the reassurance that I will give to my wife later that night.

I begin to wait for my follow-up appointments, holding onto the knowledge that probability is on my side.

continued on next page

“Five Stages” of Processing a Needle-Stick Exposure

[Continued]

Reflections

Reflecting on my brief moments of despair and the fundamental change to my identity that “sickness” caused is educational. I have realized that even though I can talk about “empathy”, sit and listen to patients as a medical student, and allow myself to consider their suffering, I essentially know nothing about the realities of being sick. I don’t know what it is like to have the security of health and the promise of a future stripped from me.

After my needle stick, I can only begin to anticipate the series of emotions that a patient with a new and serious diagnosis may experience -- shock, shame, immense despair, identity crisis. I can, however, hope to offer my insight and authentic companionship on my patient’s journey.

Through this experience, I have also learned that when I encounter a patient who lives day-after-day with a chronic illness, I cannot say, “I know what you mean.” I must approach them with humility, as if I am walking on sacred ground. Afterall, the patient is the one who must live with courage in the midst of uncertainty. That way of living is something to be honored.

Even though I recognize that my knowledge of illness is limited, I know what I must do: I must sit and listen *wholeheartedly*. I must share in the suffering with my patients. I will offer them what medicine can, and when it cannot offer much, I will offer them my care. I must have the strength to love. It is my commitment. It is my vocation. This is how I will be a healer.

A needle-stick can teach a lot.

.....

They Fail and in Falling

PAUL DARBY

.....

Leaves, lives, lovers,
Fail or fall and in falling,
Strip bare the essentials:
Crinkled bark, rooted to earth
(Bark once hidden by summer's wealth)
Exposing fear of cold to come,
Skin that will wrinkle,
Dying light,
Hope unfulfilled.

One can dream as we all do.
Beneath the scattered leaves,
In the muck and maw,
Sharp toothed and jarring,
Clear signs reveal permanence.
Though words spilled from bitter mouths
Litter the ground like shards of glass,
There will always be the movement of pale cotton against soft skin,
The sound of laughing as bodies entwine,
The tapping of a stellar jay's beak against hard glass,
While we breathe in the fragrance of lavender.

.....

Death Comes for You

LAUREN ROLES

.....

I feel your frustration. It buffets me as I step through the door, a thousand tiny stings of the sandstorm that rages in your mind, in your room. This room you've slept in for a month now, with the blinking lights and hollow persistent pips of the machinery around you slowing melding into your skin. You'll never be free of them. This is something you feel and I feel it too. I can see it in your eyes, feel it in your breath – in the expanding and shrinking of your belly and trembling of your wasted limbs.

Death is in this room. But this is not his burning-hot, biting-bullet, sudden-heart-stopping, blood-in-brain-bursting incarnation. Oh, no. This is slow-disease-wasting, last-sands-of-hourglass-falling, slowly-creeping-frost. He comes for you. And you know.

The wasted creature that lies before me belays the woman that you once were. Eyes that have seen everything. Feet flattened from walking, moving, always working, always going. Hands that were busy, busy, busy, helping. Hips that bore children and pendulous breasts that once nursed them. You were once life itself to them. Now your son is a giant sitting next to you and it beggars the mind to conceive that your tiny shrunken frame must have pushed, pushed, pushed him into the world.

I feel your frustration. Day after day it evolves into a wild thing inside you. This is where the wild things are*! Your fear, your hope, your expectations, your frustrations. They are wild and fierce and I have no words to tame them. You do not blame me. You've stood in my shoes in your younger days and know that I would move mountains for you, as you no doubt moved them for those you once looked down upon in beeping, chirping, rumbling, annoying hospital beds.

But this is no mountain. This is a planet of a problem. This is Pluto – planetoid renegade refusing to submit to the order that governs the rest. So though we

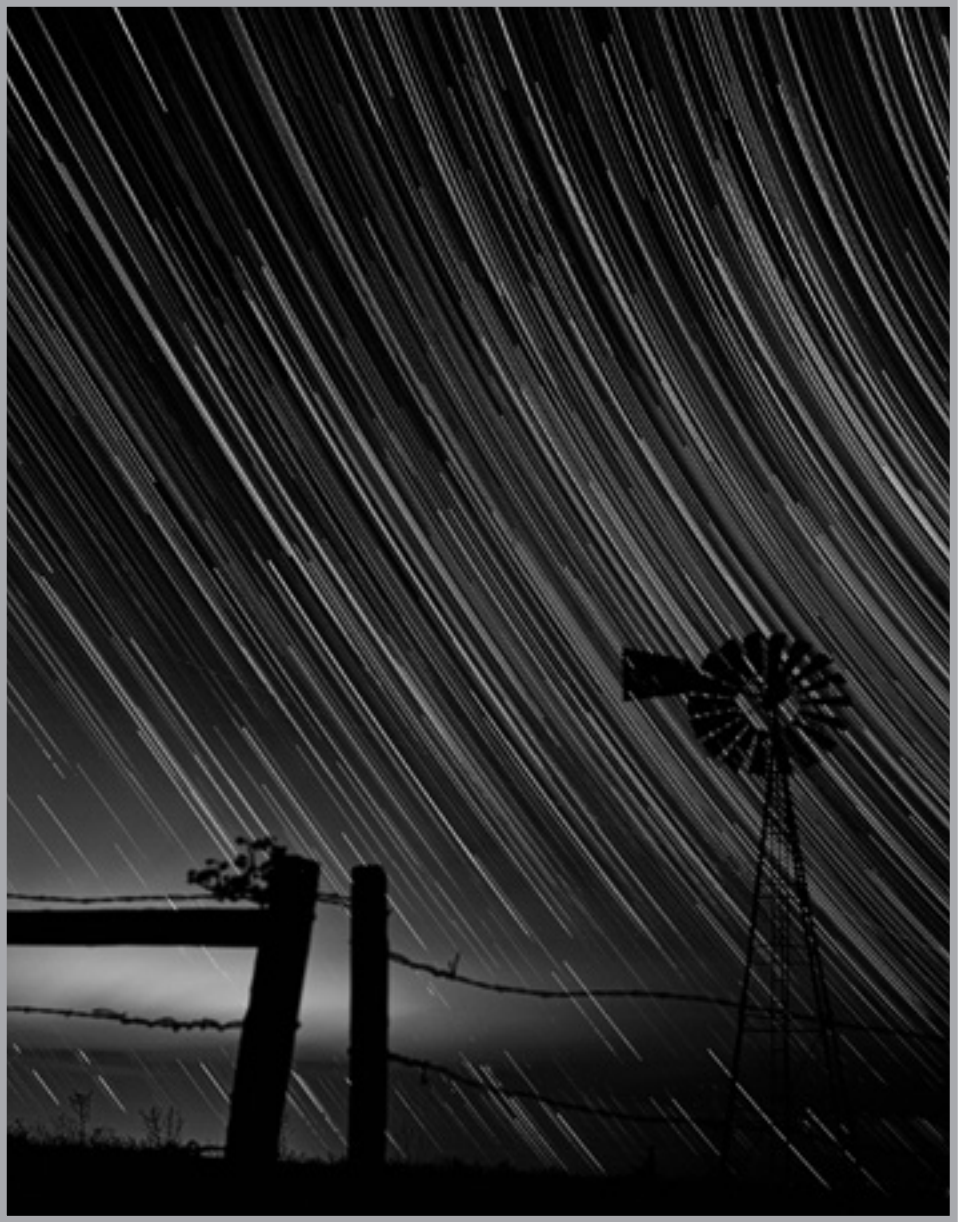
push together, you and I, we move nothing, change nothing, and instead are both flung out into some wild orbit.

There is a tension between us now, as if we push and pull each other. I feel your frustration and I meet it with my own. Outside your room, you are a clinical mystery – something exotic and strange and new. I can forget that you are still you. I make you into something sterile. But in your room, I am helpless before what ails you and it eats me alive as surely as it eats you.

Death is in this room. He comes for you. And you know. And I know too.

.....

** Yes, this is a reference to the incredible Maurice Sendak, who first taught me that the wild things live within us.*



Star Trails Over The Prairie | JENNIFER KEMP

.....

ELEGY FOR CHAD

KEVIN BUNNELL

.....

They say you are tired
Limp from a fight you did not start
And no one knows how to stop.
I grieve among the grieverers...

Because you will never know
That "tired" is the way you feel
After hiking across the mountains.

Because "balloon" will never mean for you
A distention of bright colors
Tied to your wrist to prevent
The serious infant tears of loss.

And because no one will be able to tell you
That "green" really means a spear of new life
Springing from the earth.

I grieve among the grieverers...

Because the touch of rough male hands
You know now
Will never be repeated on the playing field.

Because you will never know
That the loving cradling touches
Of the women who grieve for you now
Are like the caresses of a lover.

I will grieve among the grieverers.

.....

Flood Watch

LYNNE FOX

.....

The water tosses trucks like toys
Twists homes
Washes away the evidence of memories

It leaves a new silvery wetland pool
Where birds circle and glide
The silver lining from gray, dark days

.....



Frailty

GEORGE HO, JR.

.....

frailty begets frailty
senses dim, capacities
wane, organs fail

tented skin wrinkles
furrows deepen
botox helps but a little while

weakened sphincter
bladder overflows
with sneeze or laugh

hardened valves
trickling flow to cool extremities
arteries narrowed, veins collapsed

joints contract
muscles atrophy, bones break
ravages of life

the brain shrinks...
memory loss not remembered
atrophy irreversible

calories without delight
nutrition no longer sustains
feeding serves what purpose?

Love no longer shared
Love not recognized, inexorable
decline welcomes an end

stop eating, stop
drinking...merciful ending
of suffering

.....

Last Day at Work

GEORGE HO, JR.

.....

On the eve of my last day at work, January 30, 2013, I saw my last patient before my retirement. He has psoriatic arthritis and is responding to methotrexate treatment without need for a biologic agent at this time. I think we do help people with arthritic problems. Many people suffer from arthritis and Rheumatologists diagnose their problems and manage them to alleviate symptoms and prevent joint damage. Much progress in understanding the disease processes and the treatment options had been made during my career. I received my MD degree in 1972 and became board certified in Internal Medicine in 1975 and in Rheumatology in 1978.

What a journey it has been. Forty years of being a doctor, a healer, a professional. The lives I have touched and changed, for the better or the worse. Mostly for the better, I hope. All coming to an end. A new career starts and the next chapter is perhaps the last. Retirement is the name and how to survive it is the game. It will end in the final phase of life called death. How death will come is anybody's guess. I am looking at perhaps another twenty to thirty years or more based on my family history of longevity and other healthy life-style factors. I hope I don't "fail" retirement.

Bittersweet is the best description of how I feel as the finality of a career is at the doorstep and knocking on the door. I am certain I made the correct decision to retire. To get out at the peak of my competency. Part of the fun of life is the twists and turns it takes to arrive at the destination, the paths we choose as we come to a fork in the road. What if I had taken the other path, would I have been better off or worse off? Ah, Monday morning quarterbacking. Hindsight may be 20/20 but the same outcome is not necessarily the best outcome for everyone. What's right for me may be a mistake for another. At the end of the day, it is how content I am that matters.

I have no regrets. If I had to do it over again, I don't think I would have done it any differently. All my moves have been calculated and weighed carefully. What

has been a true blessing are the various options and opportunities I have had opened to me such that I could change paths if the road I was on did not lead to my desired destination. Five moves geographically, New York (NY), Providence (RI), Cedar Rapids (IA), Greenville (NC) and Denver (CO) and seven different, overlapping situations (Veterans Administration, private practice, academic practice, teaching, group practice, clinical research and finally Kaiser).

Here I am, at another fork in the road. I will follow Yogi Berra's advice: when you come to a fork on the road, take it! Here's to the next few decades of my life. I will take it one year at a time with my fingers crossed and will work hard to succeed as I had the past forty plus years of work.

Last day at work on January 31, 2013. No patients scheduled. Turn in my Kaiser badge, hospital ID, keys, beeper and internet access key. Get a receipt from my administrator. I feel naked.

I remember in 1973 going to sleep on the last day of internship and waking up as a resident in Internal Medicine the next morning. I will go to sleep tonight in 2013 having turned in my badges and credentials as a card carrying physician and wake up tomorrow as a civilian, senior citizen with my AARP card, Medicare card and receive Social Security through direct deposit to my bank.

I deleted the contents of my work computer after downloading the documents I wanted to save onto a jump drive. My office has been cleared of all my possessions and ready to receive the next occupant. My replacement doctor has been going through orientation for the past several weeks. She was too respectful to occupy the emptied office while I was still physically present on the premises. My office remained unoccupied most of the day. But tomorrow, it will be her office.

continued on next page

Last Day at Work [Continued]

I helped our office staff pick up take-out lunches to celebrate our receptionist's birthday in February. Turkey, stuffing with gravy, green beans and Jalapeño cornbread. I ate the entire plate plus the birthday cake.

From 2 to 4 PM, retirement cake for anyone who stopped by to say goodbye in a basement conference room. Three nurse administrators during my five and one-half years tenure in the Kaiser Rheumatology Department came by to the reception. We reminisced and laughed a lot. One young man who is a Spanish interpreter and another young lady who processes insurance forms stopped by to say goodbye. They told me I was a kind doctor who listened and cared for my patients. I thanked them for helping me take care for my patients. A few of my colleagues in Rheumatology took time from their busy schedules to say farewell, wish me well and have a piece of cake.

Final goodbyes arrived at 4:30 PM on the fourth floor Rheumatology Department. Tears, hugs, kisses, sadness and joy, brief awkwardness interlaced with deep gratitude and appreciation followed and my retirement was finalized. I descended to the third level of the basement parking garage as an employee for the last time. I will not return to work tomorrow morning.

The next phase of my life begins and I look forward to a new start.

.....



The Road to Somewhere | HUY PHAN

.....

Reflection

CAMRI WOLF

.....

Reflection is nothing without a reference. No one will ever see a clear picture without finding their perfect mirror. Wandering the wards and navigating the new world of clinical years, all third-year students need something with which to reflect upon. Something pure, something honest, and something that is ubiquitous.

For me, the reflective surfaces were on the faces of all of my patients.

I saw a current version of myself in the young, healthy 24-year-old woman at the family medicine clinic, simply looking for reassurance.

I saw myself mourning in the tearful face of a granddaughter learning of her loved one's illness, wondering what her next steps will be and how she will go on from here.

I saw my dreams in the glowing smile and embrace of a brand new mother and her infant, looking at a promising new life.

I saw my helplessness in the confused stare of a delirious senior, resisting my attempts to bring him clarity.

I saw my future marriage in the couple of 64 years holding hands while one of them went into surgery, fearful but still side by side.

I saw my goals for the future while watching interactions between my attendings and their patients, seemingly flawless work with overwhelming appreciation.

I saw someone who I'm afraid to become in the angry, burnt-out surgeon who spent little time with his patients, simply trying to push through another exhausting day.

I saw myself hoping for healing in an old woman with an unknown mass, praying together that it didn't carry a poor prognosis.

These mirrors were everywhere, readily available, and nothing but honest.
The long days blurred by, but the reflections stayed with me.

At home after a long day, the bathroom mirror told me nothing. This mirror was too still, too quiet, too cold. It couldn't smile, cry, dream, or laugh But I still could. My patients' emotions resonated within me and helped me get a clearer picture of myself.

I found strength I didn't know I had, along with every possible virtue from each patient. Their reflections were forgiving, they were empowering, they were beautiful.

Some may claim that physicians are supposed to be able to disconnect, to use a different type of mirror. But I don't think I will; I don't think I want to. I hope that I continue to navigate the world of medicine with my patients' faces guiding me through. I don't want to forget them.

That mirror will not be easily fixed or replaced.

And there may be more than seven years of misfortune should it ever break.

.....



Resilience

DANIEL LOLLAR

.....

She wrote Pain on her body
Because it was the only place
It would fit,
And then she did it again,
Marking treason with two-inch
Totems of deep, fine scar
felt only by the unbelievers.

In India, the repentant
Write God in blue ink
Until it covers their sins and their losses
Whole limbs, faces, torsos covered
In two inch lines of prayer:
"Rahm, Rahm, Rahm"

I admire the bravery of making
Suffering public, calling your
Ghosts into immediate, permanent
Being; the strength to carry the
Faces of your wounders on your
Body, like some people wear Saints.

.....



Furaha | **HALEY SMITH**

.....



Friendship Under Uncle Wilbur's Fountain | LARRY ALLEN

.....



Hammock in Peru | JESSICA BOAT

.....



The Little Things in Nature | HUY PHAN
.....

Home

LYNNE FOX

.....

The homeless
sleep in our chairs
bathe in our sinks
store their possessions in corners
and hope they will be there when they return
I discuss this with a cross-town colleague
both sad to share a common problem
Conversation steers from general to specific
A woman, our age, but more worn
we see her regularly
She follows the rules carefully
eager to stay
but shy
avoiding hellos
Finding our libraries a safe place
a quiet refuge
My colleague says "I offered her a ride home one day"
Accepting the offer, she did not go to a shelter
She went to my Library

.....

Through a Glass Darkly

HELENA WINSTON

.....

I was about to go home. It was the third week of general surgery and my eyes were tired. I had been up since 4 am and now it was 7:30 in the evening, and I was entirely ready to make an appropriately-timed exit and slip into the night. The door had opened and all I had to do was ease through the crack. My attendings had left. My chief had gone. They'd said "leave." Soon I'd get some warm dinner and ease into my warm bed.

The resident who'd been acting like a 5-year-old, throwing temper tantrums at the beep of a page, spewing vitriol at whomever happened to be in his path at the random moment, had decided to be conciliatory. "If you are around, there's probably going to be an organ procurement later tonight. It would be worth seeing. I saw one once; it is the best illustration of anatomy you'll ever see because you don't have to preserve anything. They're super rare." I was hesitant. I didn't trust him. Was he genuinely pointing out an opportunity or was this some sort of trick whose significance I couldn't fathom? "Thank you for letting me know," I said. "I appreciate it."

I paced back and forth. Go home. Don't go home. Home is good. And if I don't leave, I'll end up having to stay the night because by the time I get home, it will be time to turn around. And I'm awful when I'm tired. But maybe this is a good opportunity to see something I'll never see again. Once in a lifetime. Fine. I'll just stay. Just do it. Stop whining. (I told myself.)

The end of the Intensive Care Unit: There was an odd conglomerate of people milling about in front of a closed glass ICU door. 2 men in suits, 1 chaplain, 4 nurses, 5 people in scrubs, and 3 people with clipboards. They were nervous, and excited. They were waiting—trying to look like they weren't there, but most certainly being very there, under the bright lights. My eyes squinted through the fluorescent bulbs. Most were white. The people, I mean, were white.

I didn't notice that at first. I could see a large group of Latino men, women, and children behind the dark door. Or rather, I mostly could see their silhouettes.

I walked up to the group outside the room and inquired. "I'm a medical student... do you think I might be able to observe the organ procurement?" The young blonde woman was thrilled. "I'll see if I can get you permission!" She wanted to get people interested in donation. This was her life, connecting lives, being there at the end of one and enabling the prolongation of others. She would only be in the in-between.

"So what is going to happen?" I felt silly. "What does procurement mean?" I didn't understand the context. It's organ harvesting, but that's not said, because it sounds bad. Procurement is more safe and gentle. In fact, what does it mean? They were going to take the heart, liver, kidneys, and maybe the pancreas. It wasn't going to be safe or gentle. The body was going to be dismembered and it was going to die.

He's already dead. It's just a vessel.

Except it's all still functioning. Which is why it can be used.

"What's your role?" I asked the young woman.

We've done all the tests and done all the paperwork. He's ready. This is a big deal. He's 18, and he's healthy. We can procure a lot. She said. If everything looks good once they get in there, four or five people will get transplants tonight or tomorrow.

"Tonight?" We've already made the calls. They're coming in right now. Now is the moment.

Procurement. I thought it meant get something for someone, but just to be sure, I looked it up. "The act or process of procuring [more downplaying and evasion, even by the dictionary.] Especially the obtaining of military supplies by a government." What?! What was the government doing in this kid's body? Wait, it's just a word.

continued on next page

Through A Glass Darkly [Continued]

I heard a wail and words in Spanish. I felt silly again. Why had I taken French?

You can go in, the blonde woman said. I'm glad you want to see this. It's a good thing to do. First it was an anatomy opportunity, but now it was the right thing to do. I was beginning to feel a little wrong.

The young man was 18 and had driven himself to the hospital after having been shot. But something had gone wrong and now he was dead. Brain dead. "The family's in there saying goodbye." Oh.

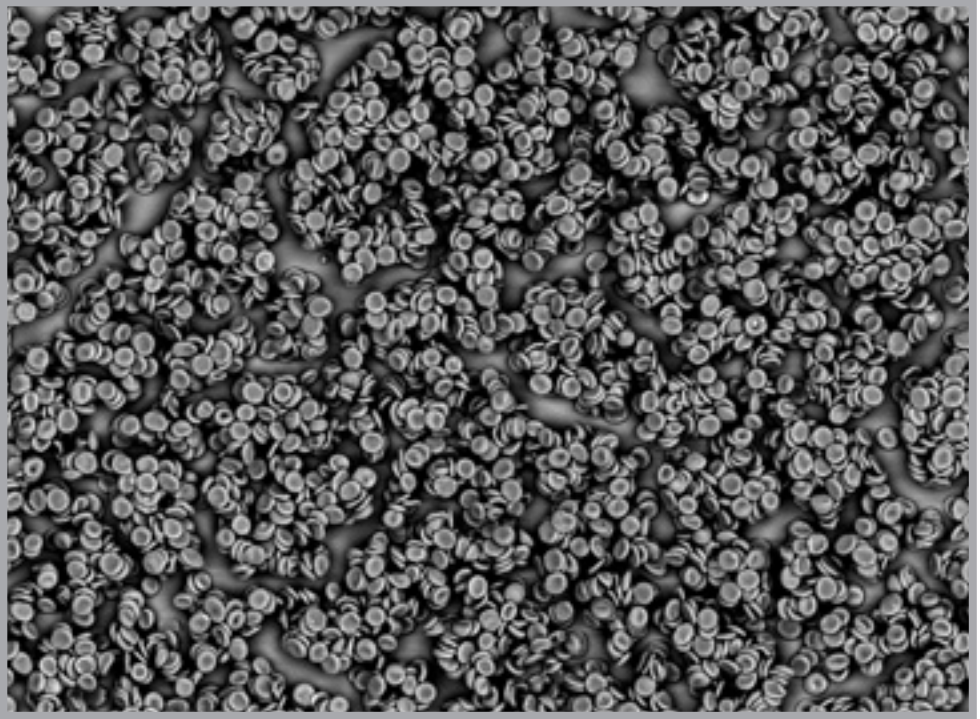
The door opened, the light shone in, but nothing seemed any clearer. The kid looked 30, not 17. And he was breathing, and peeing, but he was dead. I wasn't sure where to stand, and since the family was turning left, I thought I'd stand to the right so as not to obstruct their funeral procession down the ICU hall. But the mother turned right, and she was speaking to me in Spanish and she hugged me and I hugged her back. That felt wrong. What had she said? What if it was important? Why had she hugged me? The chaplain was right there. I said, "I'm sorry." In English.

They were gone, and the menagerie of doctors and administrators poured in. "They forgot this rosary with a cross!" someone said. It was plastic and metallic purple and tied to the patient's bed. It was like a party favor. "I think maybe they wanted it go with him." I said, but I don't think anyone heard, and maybe it had been forgotten, I couldn't see. We left it on somehow though.

Who was he? Who were these people? I don't know, and I won't know. Just like the people who got the transplants don't know. He was gone before we got there. His were gifts without his knowing or his consent. I was a taker of knowledge, just as the recipients were takers of organs. We are all users sometimes. We are not bad people, we just intersect, and we press against one another in small moments. Each taking or giving.

I did not want to write a paper about him, because I did not know him. Nor did I want to write about what I learned, because whatever I gained, he and his family lost so much more. What I wish for is for the honor of glimpsing, although it will always be darkly, Others as well as Ourselves.

.....



Blood Maze | RYAN GOFFREDI

.....

Fighting for Humanity in Healthcare - The Case of Ms. Diego

ROBERT FLICK

.....
“Ms. Diego’s up next - our 29 year old back for another round.”

My attending closes her eyes, clearing her mind. Whole seconds pass. Nurses and techs in blue scrubs bustle past, wheeling blood pressure monitors and IV stands. The long row of dialysis machines emits a soft purr as they siphon off toxic byproducts of metabolism that our patients’ kidneys long ago stopped filtering. The morning sun peeks through the Denver skyline, its harsh glare throwing sharp angles of light across our row of patients.

Didi nods. I begin:

“Ms. Diego is a 29 year old Hispanic female presenting for emergency dialysis with a history of end stage renal disease. She feels ‘itchy’ and experienced heart palpitations and paroxysmal bleeding. Last hemodialysis 7 days ago...”

I don’t mention that her undocumented immigration status keeps her from accessing dialysis once every other day, like most patients. Didi knows.

“Past medical history significant for end stage renal disease, hyperphosphatemia, secondary hyperparathyroidism, hypertension, normocytic anemia, narcolepsy, depression...”

I skip social history; Didi knows about the run-ins with immigration, the failed attempts to dialyze in Mexico. She knows about Ms. Diego’s two young sons, forced to live with abusive family members since her illness kept her from working and caring for her family. She knows that she is seeking foster care.

“Labs show life-threatening hyperkalemia and azotemia, hyponatremia, hyperphosphatemia...”

Life-threatening - I’m proud of my trick. After all, if it’s not documented as life-threatening, my patient doesn’t get the dialysis she needs.

“My plan is to initiate stat hemodialysis; we’ll hospitalize overnight and check labs in the AM. Problem number two is hyperparathyroidism secondary to

hyperphosphatemia. Definitive therapy is regular dialysis, however this is impossible..."

Medical school taught me renal osteodystrophy comes next. Dysfunctional kidneys prevent her body from absorbing calcium, so the parathyroid glands go to work, secreting potent hormones signaling osteoclasts to get busy dissolving the body's largest calcium reserve - her bones - to feed the starving body. Then come the unexpected fractures.

"...problem number six is normocytic anemia secondary to end stage renal disease. She's uremic with a history of paroxysmal bleeding and increased clotting times, reflecting uremia-induced platelet dysfunction. Definitive treatment is regular hemodialysis..."

Another list of acute interventions that will accomplish little. Definitive therapies - regular dialysis, kidney transplantation - are prohibited here.

I finish my presentation and catch my breath. Didi's eyes are lowered. The meditative dialytic purr fills the silence.

"All right, let's see her."

We sit down with Ms. Diego. The sickly smell of ammonia - normally excreted in urine, now concentrated in her body to dangerous levels - blankets the cramped curtained space. Her ashen face remains expressionless as Didi holds her hand and asks questions.

Her depression has worsened; she nods slowly as we discuss up-titrating her antidepressant. A hint of a smile passes across her face when we mention she's sick enough to merit dialysis. She tells us about the night sweats and chills, the easy bruising, the nausea and lack of appetite. Then Didi goes off script.

"How are the boys?" Didi asks, lowering her head to meet Ms. Diego's eyes.

"The boys..." Ms. Diego gazes blankly out the window behind me.

"...the boys..." Her voice cracks and then she's gone, sobbing into cupped hands,

continued on next page

Fighting for Humanity in Healthcare— The Case of Ms. Diego [Continued]

shoulders heaving in grief. I shoot to my feet and awkwardly knock over my chair, frantically looking for tissues as Didi rubs her arm and comforts her.

Her two sons are living with a foster family. With nothing left to live for, she plans on spending one last Christmas with them and then - at age 29 - to stop dialysis and enter hospice.

As providers, we are prevented by the politics of immigration from providing humane care, and patients like Ms. Diego die painful, unnecessary deaths. We're told it's too costly, yet operational research shows it's more than three times as expensive to provide emergency dialysis instead of the regular therapy most patients get. It's not cheap to manage the complicated sequelae that is all but guaranteed by allowing a treatable disease to progress to its terrible conclusion on a weekly basis.

Of course, this ignores the staggering violation of basic human rights wrought by denying patients preventive care for a treatable condition. Nor does it acknowledge the devastating toll on providers, forced to treat peripheral sequelae instead of the disease, watching patients come back week after week, sicker each time, their faith in leading a healthy life eroded a little more. Ms. Diego's story represents not only a shameful failure of our health care system, but active harm inflicted on patients by prohibiting providers to take meaningful action; in short, a forced violation of what every physician learns the first day of medical school, "primum non nocere," but only for the insured, it appears.

Didi's eyes are glassy as we rise to leave. She'll soon sign the orders to dialyze, and we'll begin the careful art of caring for a patient our system considers "illegal," unworthy of preventive care. We'll titrate her medications, consult the nephrologists, and convince social workers join our fight for this patient. We'll see her again next week - ashen and azotemic and dangerously sick - and discuss her care and the next steps. Long after I return to class, they'll do whatever it takes to honor her last wish of a comfortable, dignified death. For when you're tasked as a healer, you fight for your patients without regard for their immigration, socioeconomic, or legal status

I pause to look back before leaving the room. Ms. Diego's eyes are closed as a tech in blue scrubs preps her for dialysis - just in time, as always - then the door closes, and we're off to the next patient.

.....
Robert Flick's essay, "Fighting For Humanity in Healthcare—the Case of Ms. Diego," won 2nd Place in the 2014 Society for Humanism in Medicine Annual Writing Contest co-sponsored by the Arts and Humanities in Healthcare Program and Life Quality Institute.

Give

JULIE CARPENTER

.....

If I walk down Na Prikope
I see your hand
just beyond where it is I can reach
just so far do I bend and give
enough just to satisfy
something unseen
and I think there will be
time and time enough
to walk back and back
and give again

give up whatever I have
in my pocket to give
and place into the fingerless hand
the currency of accelerated time
that is
before I am reaching
What I want to see is the unseen
and on the street corner
I have not given enough
to your paralyzed right side
and when my heart is already unseen
I have not broken my pride enough

to give you
my hand

.....

X on Me

KRISTEN DALY

.....

Dust to dust mumbles the priest;
yet shouldn't it be liquid to liquid?
As Timothy says, "I'm being poured out like a libation."
Isn't that what is happening to my lungs?
They are being resorbed like a fetus which died too soon.

Tubercles on my insides too,
and maybe onto my spine.
I don't want to be a hunchback,
But already I'm a monster.

You must come every day they say.
You must swallow and puke.
The pills will burn you and make you sick.
They will turn your skin to ash so you look like
The vovó shuffling down the street, clothes hanging.

I am so skinny.
My bones push into the mattress at night.
My insides leak, I can't build up.
I should be plump and pretty.
I should be kissing boys and going to school.

My only energy spent on going every day.
By bus and bus and foot, trying not to cough,
Not to scare my fellow passengers.
I'm adhering they say. Good girl.
But what for? Is it worth the energy?

In eighteen months we will see they say.
When my youth is gone and I'm old and grey.
Help me. Something work!
I can't go on like this.

.....

The Spy-der

BROOKE BREDBECK

.....

Spread eagle
and eyes-ing me,
Eight eyes fixed
on my two
playing
peek-a-boo.

Vulnerable belly exposed –
you tremble,
pray me not
come closer.

You spy me –
I you

Let's call a truce
'tween us two.

.....

Epiphany

SAMMIE ROBERTS

.....

We in the world of healthcare landed here because we saw something beautiful and chased it. Tonight, however, I am in the midst of the busiest year of medical school; I've put fifty-three hours into the work-week already and have two days more to go; I am tired. I had hoped to write an essay with a completely new idea about humanism in medicine, one that introduces a unique perspective bordering on epiphany. I am afraid that my words will sound like just another third-year medical student reaching the same conclusions that third-year medical students reach every year. Something about how important it is to really listen to our patients; how a compassionate word or a gentle touch can make a world of difference; how ultimately, if we allow it, our patients do more for us than we do for them. True, but trite.

Nonetheless, I do have rich memories from this week; they are true and colorful and close. Today, at the nurses' station, I saw a lovely orchid, blossomed with bold white and accented with plum-colored hues. The orchid lived in a patient's room for five days until she died. I know because I cared for her. The orchid arrived in the hands of her husband of fifty-three years. He came with their two adult children. The daughter had beautiful dark eyes. I saw her eyes before I saw my patient's eyes, because my patient was very sick when she arrived, and she mostly kept her eyes closed. On the second day, the patient opened her eyes when I said her name. They were the same beautiful dark eyes.

My patient was often restless, attempting to stand and to alleviate her constant back pain. This created a tricky situation because she was too weak to stand alone, and on restrictions due to fall risk. Her husband joked sweetly about how she had always been stubborn, how she had always been the one in charge -- a strong, independent woman. Now, her expression was always pained or stern. Except once: her son was supporting her as she stood, moaning softly; her nurse was trying to get her back into bed, and my supervising intern was explaining to her husband for the umpteenth time that we did not have enough information to predict her prognosis. I was hovering in the background. She looked up at me, and smiled. I was pierced. I flattered myself by

pretending that she had smiled at me because she had looked up and seen a pretty young woman smiling at her.

I was gone the day she died. My supervising intern told me about it second-hand. The patient was bleeding from her mouth near the end, and her family members were traumatized. Her grandson began hyperventilating, and my supervising intern couldn't get the right symptomatic treatments up to our floor because patients don't usually die here.

I remember the framed pictures that her husband brought to be placed around her bed. She and her husband are standing in the snow. He is holding two small dogs, and she is holding the halter of her horse, who is standing behind her. Another dog is with them, too, and he is wearing a red coat. The other pictures are of the adult children. In the pictures, they are school-aged. But there is the daughter with the beautiful dark eyes.

There is an epiphany in here somewhere, but I am not going to be able to condense it into a sentence. It has something to do with the striking similarity between my patient and her daughter. Something to do with the moment that our eyes met and she smiled. Something to do with my patient and her husband standing in the snow with their beloved animals. Something beautiful.

.....



To What Lies Next

GRAYSON HUBEN

.....

The doctor has gone
friends and family have left,
as have you
to what lies next.

Your spirit separated
some time ago,
from this life we know
to what lies next.
You have gone ahead

to prepare a place,
for us who follow
to what lies next.

And comfort may be found
while we remain,
healing from an ancient text
hope for what lies next.

.....

University Haikus

JEFF DRUCK

.....

Triple threat? No way
Teach, research and patient care
It's academics

Students think knowledge
Is defined and testable
There's no quiz for life

.....



Meditations on Going Blind

MARY D. POOLE

.....

1. Senses

I touch her hair and feel soft curls cascading down her back.

I cannot see the girl.

I shake his hand. His grip is firm. I welcome his warm hug.

I cannot see the man.

I smell bacon, fresh brewed coffee, scent of spice is in the air.

I cannot see the cook.

I taste the soup with curry, and choose chocolate ice cream cone.

I cannot see the waiter.

I hear the shouts and clapping, marching bands, whistles and horns.

I cannot see the clowns.

I touch. I smell. I taste. I hear.

Four out of five isn't so bad.

2. Before

I came alone. I know the way.

I've been here many times before.

Dusk is creeping slowly toward the dark.

My map a spider's web of lines and dots.

I see an "S", turn right from east to south and wander on.

But maybe it was "5", so I turn back.

I dare not ask a blur that has no face.

Sir or Ma'am? I cannot say.

I am lost. I do not know the way.

I cannot find the place I knew before.

3. Going Blind

Far off mountain topped with snow
Or sun reflects on rock and stone?
Sky soft blue fades into grey
Ghost shapes appear, then glide away.
Green patch on hill, with flecks of brown
A trunk or splintered branch poised to fall down?
Movement barely noted—bird in flight,
A distant plane or children's kite?
More likely, floater in my eye.

4. My Photo Album

I see your faces in the photo album of my memory.
Just one alone, sometimes a group. My album's full.
I mostly look at happy times, when all of us were young.
To see again the babies, toddlers, Grandparents' Days at schools,
Dance recitals, concerts, games, performances and graduations.
I browse through weddings, reunions, each family gathering.
I take some foreign trips again and visit far-off places.
Europe, Asia, Africa and every U.S. state.
Some photos are not happy, showing sadness, sickness, death.
No one but I see sorrow, disappointment, and regret
because there were no cameras to record them at the time.
I do not linger there, but I remember.
Photo albums on the shelf just gather dust.
I cannot see the pictures on my picture wall.
But I have more than walls or books can hold,
The photos in the album of my memory.

.....

How Little We Knew

KEVIN BUNNELL

.....

How little we knew of mud and stones.
The honey bee—ranging far—
knew more than we.

Then we learned what bee knew.

Rain arrived at this desert home
And we welcomed it.

Now we know-- more than bee.
For we have seen the Amazon--
At fullest flow.

She tumbled and crashed
into the heart of us--
Doing a devil's dance--
Flinging her dark arms,
Smashing us with mud and stones--

Then she moved on--
Caring not a whit for us.

.....

Three Haikus

HENRY N. CLAMAN

.....

nature red in tooth
and claw is pale and quiet
when compared to us

what to advise a
fearful aspiring poet?
go on - -

break a line

my home is lovely
yet the truest blue is just
a doorknob away

.....



Lemon Sorbet

LINDSAY HEUSER

.....

“You know, he’s really upset with you for interrupting his sorbet earlier.”

I looked up from my computer and realized that the ICU nurse was addressing me.

“What? You mean, Mr. G?”

“Yeah, he’s not happy about what you did this morning.”

I stared at her, somewhat dumbfounded.

Mr. G was the team “peach,” as my intern dubbed him, a man with disdain running through his veins and a tongue sharper than a razor’s edge. He was a long-term alcoholic with pitting edema, a belly more distended than the tightest of drums, and a disposition like an icicle. He made no attempts to hide his dislike of our team and for the hospital at large. He rolled his eyes, and spoke in terse utterances - complain, complain, complain. He was uncomfortable and angry. You did not have to be around Mr. G long to understand that this was a man with a lifetime of regrets. This was a man at his very end.

Of course, Mr. G was my patient. For some reason, I thought that if I just treaded lightly, all would be well. I have always been easy to get along with, after all. I would smile and be courteous in my interactions and he would tolerate me, the annoying medical student who made him repeat exams when he didn’t feel like it. That sounded reasonable, right? Not too much to ask. For the first couple of days after his admission, all seemed to be going well. He grumbled at me when I came in during the mornings, but really did nothing more.

But now he was upset with me? Because of sorbet? Because I had requested that he stop eating his lemon sorbet for a minute while I listen to his heart and lungs?

I pondered the situation for a minute. I hadn’t even thought twice when I made the request. I did my usual song and dance. Smiled and said, “It’ll only be for a minute. I promise!” Did my exam and left the room, thinking nothing of it. Was I being insensitive? Was he being ridiculous? What was this? I’d never had upset a patient before. *I don’t upset people.*

The resident approached me, “So I heard about Mr. G and the sorbet. You really shouldn’t worry about it. He’s an old, cranky man. I promise it’s not you. It’s him. Forget about it.”

Later that afternoon, I read the note that Palliative Care had left after visiting Mr. G. I halted when I saw the phrase “lemon sorbet” toward the end of the note. I moved in closer to the computer.

“The patient requests that he be allowed to eat his lemon sorbet without any interruptions from his health care team.”

I paused. Now the entire palliative care team knew about my lemon sorbet incident? Uninterrupted lemon sorbet was one of his final requests?! I was embarrassed. I was angry. I was upset. Had I been pushy when requesting that he put down his sorbet? I imagine that I could have come back in a few minutes after he had finished eating, but I was in a rush to get done with my pre-rounding.

I had sacrificed his comfort on behalf of my stubborn determination to accomplish my morning tasks. Efficiency, after all, is the name of the game in medicine. Succumbing to the lemon sorbet demand and sacrificing efficiency is not part of the list of competencies that traditionally earns you Honors.

And yet...

There was something more to this. Mr. G was at the end of his life and simply wanted to be treated with respect. It had all seemed so silly to me, this big fuss over sorbet. Of course, that’s easy to think when you’re 26 and death isn’t nipping at your heels. Lemon sorbet is a thing to be had next summer, some other summer. Mr. G had no more summers.

I dared to presume that I understood the value of lemon sorbet in a man’s life and equated it with my own. Who really knows what memories a lemon sorbet can hold? It could be an entire lifetime’s worth. All I had to do was ask and listen.

I stepped away from my computer. Humility is a big part of doctoring. Much bigger than I could have ever imagined. I strode over to Mr. G’s room. I paused. Swallowing my pride, I knocked on the door and walked in the room. I spotted the empty lemon sorbet carton out of the corner of my eye.

“Mr. G,” I began. “I’d like to apologize...”

.....

Notes on a First Clinical Experience or, “Tighten the Diapers, Love Thy Pancreas”

HAYLEY WHITE

.....

Hello, my name is Hayley, and I am your student nurse today.

Hand hygiene, hand hygiene

Can I have your name and date of birth?

Hand hygiene

Are you in any pain right now?

Hand hygiene

Great, I'm just going to take some quick vital signs and do a basic assessment.

Hand hygiene, hand hygiene

Unfortunately, this is where the script ends on our first day of nursing clinicals, when the care for real patients with real illnesses is put into our eager (and immaculate!) hands. They forget to tell you, however, that you will then proceed to fumble around on a new electronic vitals machine you have never used, discover the impossibility of graceful glove application when your hands are 8-layers deep in hand sanitizer, and learn that when you accidentally set off your patient's bed alarm, the room will inexplicably and instantaneously fill with 6-10 sprinting nurses, waging war against patient falls and student egos.

“Oh, hey guys...”

You come to comprehend that the 70+ year-old woman who has spent the night with your 70+ year-old post-op man is his mistress, not his wife, despite your verbal assumptions to the contrary. You're proud of your very first exam, until you hear the words “it's okay, cold hands mean a warm heart” tremble from your ~~victim~~-patient. Working with mannequins in the simulation lab has poorly prepared you to bring enough towels to care for your patient's very first incontinence of stool. Luckily, it has prepared you for creative problem solving... with packets of 4x4 gauze...from your pocket. You take pleasure in your very first demonstration of that primordial, Darwinian nurse instinct—medical supply

hoarding. And just like that, you are good at something. You are a squirrel! You are THE squirrel. Also like a squirrel, you appear to lack opposable thumbs, as it takes you over 20 minutes to fix your patient's TV. It only has 3 buttons and you used to work in an IT office. Florence Nightingale would be ashamed.

You then walk into your patient's room and forget to foam your hands outside, so reach for the sanitizer inside the room. Only that it turns out to be soap. And the sink is not working. So you must go into the bathroom and casually wash your hands, all under the curious observation of your patient. EXCUSE ME FOR A SECOND, I JUST HAVE TO WASH MY HANDS OVER HERE—NO BIG DEAL—SOMETIMES I JUST LIKE TO USE THE SOAP YOU SEE.

....everything is under control.

Slowly, though, the day moves forward; you conquer the vitals machine and befriend your patient and your mind begins to adjust to the solemn reality that there is nowhere on the floor for students to obtain caffeinated beverages. Your patient calls you out on your unease, "Stop being so nervous. I'm just an old man with cancer, are you going to do anything worse to me than cancer?"

And...poof! Just like that, the invisible wall between us, a wall that at least I perceived...was gone.

We laughed. I relaxed. I changed his bed. We took turns badmouthing cancer. His candor allowed me to step out of the role I had been trying to pretend I knew and climb back into myself. We had a great afternoon together and I learned about his family and his travels. I learned how, a year before, he had been climbing mountains, and about his frustration, now, at barely being able to get out of bed. He hadn't been to any doctors in 50 years, and now he felt his future hanging on their words. I helped him back and forth to his chair and bed and on walks around the unit, only one of which reached a very public climax which I will call The Great Adult Diaper Descent of 2013. Chuckling back to the room as I sheepishly held up the wayward garment like a bridesmaid clutching a train, he

continued on next page

Notes on a First Clinical Experience or,
“Tighten The Diapers, Love Thy Pancreas” [Continued]

asked, “Did I get ‘em?” “Get who?” “The surgeons! Did I moon ‘em? They took part of my pancreas you know.” “Oh yes, I think you got them sir. I’m very sorry about that.” “It was a pretty good pancreas, I thought.” “I believe you.”

Visions of how my own ornery, affable grandfather might have behaved in such a situation swam in front of me, jerking at familiar emotions and filling me with gratitude for his levity. *Note to Self: tighten the diapers, love thy pancreas.*

At the end of a humbling first clinical, which felt at times a thrill, at others a resplendent disaster, I returned to the room to say goodbye with the vague notion that I should somehow simultaneously thank the patient and apologize to him. Somewhere in the midst of my “It’s been a privilege to’s...” and “thanks for your patience for’s...”, my patient waved me to be quiet. “You took me on my longest walk yet, got me to watch the Broncos, and you whacked my IV pole on that TV at least 4 times. We have been counting! This is by far the most entertaining day. I feel great! And we are all learning.”

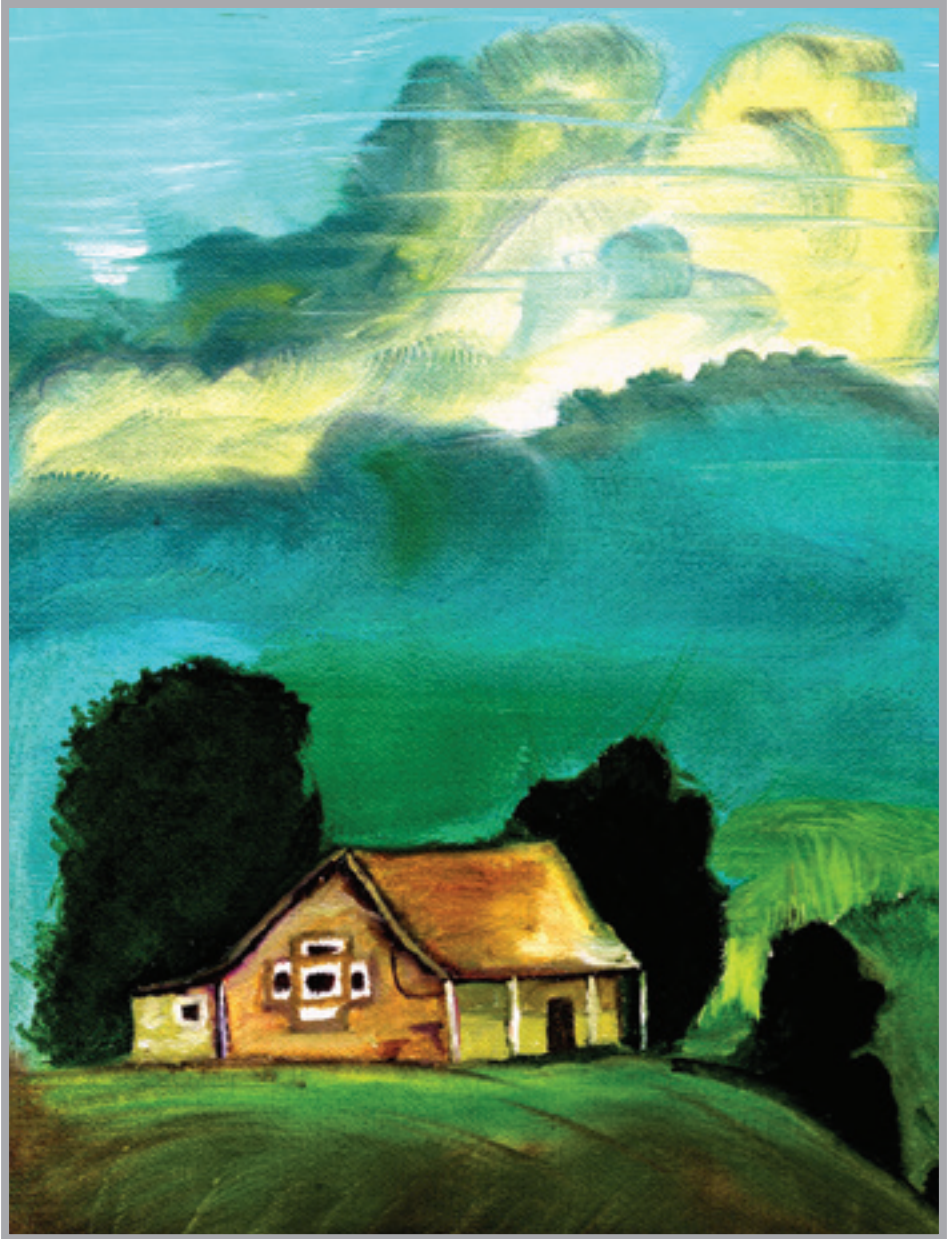
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Family Traditions: Dusk on Pemlico Sound | LARRY ALLEN

.....



Calm Before the Storm | RYAN D'SOUZA

.....



Grow Where Planted | CAROLYN BREMER

.....



Solitude | ANJALI DHURANDHAR

.....

The Squatter

KAUSER PARVEEN

.....

[Inspired by Heather Seymour]

I call it "the squatter"
It came into my life,
It came into my body
Uninvited,
But with intent.
Gradually,
Trying to destroy
All in its path
It made me put my life on temporary hold.
I couldn't stop,
And watch it invade my life.
This squatter will not own me.
It will be here temporarily
This squatter called cancer.

.....

Memories of the Past

JEANNETTE GUERRASIO

.....

I saw her in the hardware store.
Her face, I knew it well.
I had seen it scream and cry,
Then rejoice, after going through hell.

She didn't notice me at first,
Standing further down the aisle.
Thinking of her and her husband,
I got distracted for a while.

At last, I picked up a light fixture,
Turned around and she was gone.
Around the corner her eye caught mine.
She had the biggest smile on.

A cautious baby clung to her side
He was all dressed and wrapped in blue.
She looked down at him and said, "Caleb,
This medical student delivered you."

.....

Postpartum Depression

MARTHA LEVINE

.....

Fertile, full of promise, sacred in the world, when are you due?

Now I am nothing but an empty vessel.

Of course what was full must empty...

What is the matter with you? Snap out of it already!

Yet the unapproved, sadness remains.

Perhaps because it was the end of an era? Never to be repeated?

So much contradiction to focus on loss in the face of so much gain.

Solitude in a room full of party goers.

Shamed by grief when everyone else is celebrating.

It is a wonder that a single heart can hold two such opposing emotions simultaneously.

Each fighting for dominion.

I am spent. And so, I rock my sweet nursling.

I breathe and focus on the ephemeral moment of bliss that comes from tiny fists hugging your breast.

I force myself to stay present, to quiet my monkey mind.

There is always another time to fret about dark imaginings.

.....

Little Lies

JOHN NEAL

.....

It all started out innocently enough. I didn't want to hurt her feelings. Well, true – but not the whole truth. I also didn't want her thinking badly of me. Also true, but to be honest, I didn't want to admit that I was that petty, that shallow, that brutal. My self-image was at stake. I'm a nice guy – really – sensitive, compassionate. Always have been. Ask anyone.

“Does this dress smell sour to you?” she'd asked.

The sharp vinegar-like aroma of stale sweat wafted over to me. My nose cringed in automatic defense. “Uh, no. I don't smell anything.”

“Hmm.” She sniffed her left pit again, then shrugged, taking my word over her own better judgment.

Was I really going to let her go out in public reeking of *eau de horse piss*? I opened my mouth to say something – what, I don't know. I'd already made my pronouncement and didn't know how to take it back.

She glanced at her watch and picked up her bag. “We'd better scoot; we're going to be late.” Onward to the big gala fundraiser for the hospital. The mayor would be there, the bigwigs and uppity-ups, all the high-society folks she'd been courting for her new business.

No, stop – change your dress – it stinks – you were right. The corollary, of course, was that I was wrong. Or stupid. Or worse, didn't have the balls to tell the truth. A coward. My throat closed up, choking off my confession, the admission that I was one sorry son of a bitch, a spineless wimp too chicken to answer a simple question.

My brain flooded with justifications – we didn't have time for her to choose another dress, and the shoes that went with it, and maybe even a different purse. She'd have to transfer her wallet and keys and all her female stuff – lipstick and emergency tampon and whatnot. It would turn into a big hairy deal and then we'd really be late. And it was important, so important, that we be on time.

As I held the door for her, I caught another whiff of the acrid miasma surrounding her. Oh, God – how could I let her embarrass herself like that in front of her clients and potential customers? The back-stabbing gossip-mongers would have a field-

day. A snide little quip for everyone to chuckle over might even appear in the paper. She'd be ruined.

I stood there like a lummoX as she clicked down the walkway on her shiny high-heels to the car. She turned, frowned. "What's wrong?"

I couldn't find my voice. No words came. My brain was stuck somehow, the defensive limbic lobe overriding the rational neo-cortex. "Uhhh . . ."

She looked at her watch again and started to get that exasperated look on her face. I hated that look. It always made me feel like a blithering idiot – which was how I already felt. I couldn't think of anything else to do, so I pulled the locked door closed behind me. 'The look' disappeared and she stepped around the car to get in the passenger side.

As I trudged down the walk, I thought, maybe there'd be so many people there, they wouldn't be able to tell that the stench was coming from her. Maybe there'd be so many perfumes and colognes, nobody would notice. Maybe they'd all be so drunk they couldn't smell a skunk in a shower stall. Maybe a meteor would hit and wipe out the human race and I wouldn't have to worry about it.

She was already buckling up by the time I slid behind the steering wheel. In the confines of the car, her "fragrance," if you could call it that, was overpowering. She smelled like the cross between battery acid and something dead. How could she not know? Were people really so desensitized to their own scent that they simply tuned out those particular pheromones?

"Uh, sweetheart, um . . ."

"What!" she snapped, checking her supply of business cards. She was one of those people who charged through life without reservation, impatient with wishy-washy dorks like me. For her it was all-or-nothing, one hundred percent, full steam ahead and damn the torpedoes. I admired that about her. I wished I were more like that, not so tied up in doubt and indecision and second-guessing myself.

"About your dress, maybe it is, um, a little rank after all."

She lifted an elbow and tucked her nose. "Why didn't you say so before?"

Why, indeed? In retrospect, I guess it was a habit of hiding, of saying what I

continued on next page

“Little Lies” [Continued]

thought she wanted to hear instead of what I actually thought. And it wasn't just for her – it stretched back to early childhood, of course – doesn't everything? So I had a critical father and a judgmental mother, and older siblings I could never keep up with. A belief that I was never good enough; that everyone else was better, smarter, stronger; that their needs came before my own – always – and that their opinions were always more right than mine. Wah, wah – grow up.

But I'd learned to keep my head down, keep my mouth shut, and try to become invisible. If that failed, just do what they said and be agreeable. Don't rock the boat, don't make a scene. Be nice. It was a survival technique and it worked.

Sure, I might seethe with resentment sometimes, get headaches and ulcers, grind my teeth (so my dentist says), get tired a lot (chronic fatigue, my doctor once diagnosed), get depressed every now and then – but so what? Who was I to complain? Nobody. I was a nobody. My thoughts, my opinions – my life – didn't matter. Just don't offend anyone, and by all means avoid confrontation, and maybe I wouldn't be punished – or worse, be discovered for the worthless piece of crap I knew in my heart-of-hearts that I was. And saying someone stank was offensive, so the automatic protective mechanism kicked in and I denied it. Standard operating procedure, a lifelong pattern, a simple reflex.

However, at the time I had no ready answer and my wife wasn't willing to wait for me to dredge one up. I don't blame her – it could have taken months. And in fact, it did take months, and groups, and professional counseling – later.

“Just go. It's too late to do anything about it now.”

She fumed as I started the car and cautiously pulled out.

“Thanks for making me feel self-conscious,” she said bitingly. She stewed a bit more. “Here I am, trying to appear self-confident and successful.” Her voice quavered.

Oh, jeez – here come the waterworks. I felt like a real asshole.

“My big opportunity.” She dug in her black spangled clutch for a hanky and wiped her eyes. Seeing the mascara on the fabric, she set her jaw. “Turn around. I'm not going.”

“Aw, baby,” I said, flicking on the turn signal. “You can change and, um, we'll just be a little late, that's all.”

She glared at her watch. "They're already seating. The program starts in eighteen minutes."

"Yeah, but . . ."

"Shut up! Don't say another word."

I clamped my teeth together and wheeled the car around.

She started intermittent quaking, little jerks as she tried to suppress sobs. "I worked for two months," she said spastically, "to get an invi-vi-tation."

"I'm sorry, sweetie. But really, so what if we're—"

Whack! She'd hit me, backhand knuckles to my shoulder.

ROAR! It triggered an eruption of rage. I floored the gas pedal. The car surged.

I heard her gasp beside me. I didn't care. Something inside me had snapped. Enough!

"Slow down!" she shrieked.

I kept my foot jammed to the floorboard. The sedan sped faster and faster. Past our home and beyond. The motor revved higher. The vibration added to the thrilling pressure of acceleration. Mailboxes and bushes flashed by.

"Please . . ." She sounded weak, like a deflated balloon.

I didn't care! I saw the corner of a building, a brick building. I aimed for it.

SMASH! Glass shattered. Metal crumpled. So loud. So hard, the impact. Bodies wrenched, slammed, twisted. The world spun, screeching. So loud.

* * *

I'll never walk again, confined as I am to a wheelchair, my back broken in two places. My darling wife was dead before the car stopped moving. And all because of a little fib, the straw that broke the camel's back of decades of little white lies piling up one by one, little denials, little betrayals of my own inner truths. Tiny resentments had gotten stuffed and stored, more and more, pressure building, just waiting to explode. My whole life had been spent seeking everyone's approval instead of standing on my own two feet – which I can't do now in any event – literally. How symbolic is that?

But really, I didn't mean to kill her, despite the verdict of vehicular homicide. After all, I'm a nice guy. Always have been. Ask anyone.

.....

Hand and Brane

MARC RINGEL

.....

He pokes his fingers through a flimsy paper napkin.

"Two of these are you and me," he says.

"Next to each other for now,

in the four dimensions of our finitude."

Then he tears away the paper veil and

Voilà! There's a hand:

Four fingers, one thumb, one palm, n -dimensions.

No self-respecting scientific metaphor

dares these days

be so anthropomorphic.

Mathematicians make brainstraining contortions

to project minimalist glimpses

of branes and strings

onto mere spacetime,

without reference to the hand of God

or the hand of man

or to karma.

I flex and extend,

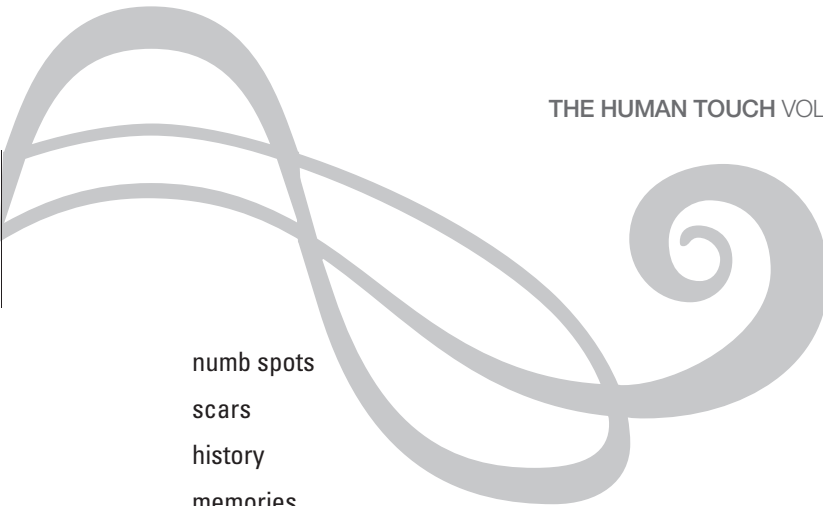
bunch and separate

my fingers,

Each with its own

aches

tightness



numb spots
scars
history
memories
abilities

Attached to a palm

Attached to a body

alive in more dimensions
than my fingers and I can perceive.

Dusky hermetic teachings

from under the earth
from under the napkin

Project shadow animals

cast by the white light of consciousness
(a tiny fraction of the spectrum)

through nimble hands
over neural webs
onto the walls of Plato's Cave
and Lascaux

and Altamira

and everywhere
even the caverns of CERN.

.....

The Tyranny of Instants

JASON WEISS

.....

I went to the top of the nearest tree and wished I could eat it branch by branch and when I had finished, walk the sidewalk and swallow things, even the birds;

My time was ticking down inside my hands and as I hold the clock at peace I see a tall man with a tilted hat standing outside my kitchen window where the towering shrubs grow high enough to filter the sun to a hazy green, as though I were underwater and the man was on the shore of some beach with a volleyball game and barbecue pit and man holding in stomach and boy pounded by surf as his mother called him for a sandwich that he didn't want but had to eat because he hadn't eaten and it was quite hot—much, much, much hotter than it was nearby, where, at the same time, a man was shaving whose brother, several hours earlier, drove his car off a bridge into the rolling water;

I.

A grayish man with the solemn-ish face of a priest holds a hand of wet sand in his mustard hands and shakes it back and forth as though panning for gold by a nineteenth-century river; and if you could see his face, you would see the same pointed determination and frustrated tears that one would see in his long-gone counterpart who lived only for survival and not search-for-meaning as we are privileged and burdened with now; and he feels gone in a cycle of mobile and immobile and younger and older and nice hair and lost hair and cup on a peg-hook and cup fall from a peg-hook and silence and scream; and as his feral scream softens on the air every man around him unplugs ears and starts to walk in shrinking circles because each one knows what made the sound come out and it makes each person faint and tremble;

II.

A girl stares out her bedroom window and draws her painted nails on a never-drawn shade as the car containing the boy she loves stutters to stop; it scrapes one black tire against the gray curb across the pale street from her motionless home; and the boy she watches and the boy that she loves wipes the foggy breath from the windshield in front of him and touches his black hair before twisting the key until the car stops coughing; and though the night is not hot it makes a strange hot sound like

a heavy-breathing girl who stands on the verge of doing something she's been told she never should though she always wanted to without having been told; and when she laughs she laughs so loudly and when she cries she cries so sadly, and when she stands framed for all to see before her unshaded upstairs window, she feels as pointless as a car that someone left in a parking structure because it would actually cost more to retrieve it than to get a new one;

III.

The man with the common eyebrows and common eyes and dressed in tent-like yellow plastic on the banks of the rain-swept wild river looks out across the tumbling muddy water and sees a half-sunk car now cresting, now dropping, now appearing, now invisible, way below the bent-steel bridge overhead; and he wonders if he should take some swift action—"but what if it makes no difference to do it or not?" he mumbles as though no one can hear him—then he knows that every rock, tree, grain of muddy sand, blade of yellow grass, beam of hidden sun, writhing, surfacing worm, and in fact, all of heaven and earth can hear him as clearly as were they all packed inside his head and listening to him at that very moment; and with that thought he strips down to nothing and dives in the river and grabs at the river and his heart goes loud and hard as he approaches the car and he reaches the car and flails at the water and pulls at a puny tuft of hair; and he realizes now what he has is a sad man's weary head gone flush through the foggy windshield and the pulsing flow of river water has made it bob and bob like a human lure; and the savior now just swimmer recoils at the loss of life, and he abruptly feels it right to feel that way; and he lunges and gurgles back to shore and there doubled over and naked and panting he hears a god's "thank you" bounce in his head and he cries out in sadness, and that sadness is triumph;

IV.

His wet-handed tap on the solid-steel door brings a man tired with glasses and head of hair puny and newspaper knifed between flaccid arm and torso; and as the wet-haired one asks "is Nancy ready?" he spins and longs for muttering car cross the street, and he watches the clouds of his breaths in the air as though his mouth could spell words for this passive soft cynic to read like a simple philosophy, which the boy is doing in doing just as he is doing, while the older one assumes a superior stance that he assumes is delivered by long sweeps of time; but the soft man stops; he dives

continued on next page

“The Tyranny of Instants” [Continued]

inside; his sweep-lateral time move goes precipitously vertical; “I live less than a mile from that river,” he thinks, “but I don’t think I’ve really seen it in decades”; the man then remembers his hands smooth and clean, but he cannot remember going from smooth-clean to mottled; so the older man knows he’s had a passenger life and not even a sensate passenger at that, and it pounds on him now and it pounds on him now and it pounds now, and now, and now; time cannot help him any more because here is a person who looks very good and is funny to most and who skis and plays soccer and who’s mobile as hell and adored by the painted-nail girl, who values all those things much while she values her father but little or none; the father feels time sock him and then stutter to stop and to him it’s a sudden but glorious death (rather like plummeting from a great height, he thinks); and he feels scraped by the boy, so by being marked, he’s now marked, and infected somehow because now this instant is all of both of their lives, not just a prep for a later instant or moment when each might just face someone else;

V.

By the side of the river a hydraulic machine drags the deadened car from deep water to thin water to solid shore; and a man in a yellow-plastic suit sees through heaven-blasted blazing eyes a smooth-faced grayish and priest-ish kneeling man about a dozen yards downstream—yes he’s dabbling and playing with the river mud like a feckless child, but that clean feckless face belies the fact that someone has been wronged and his daze is a daze of stunned anguish for his sudden lost brother; nearby, the river-side bustle stirs the sleeping black-haired boy all marbled through with that simple philosophy of enjoying time now and enjoying it now, and now, and now; his stirring stirs too the restless girl with nail polish now chipping away in the backseat of a sticky car that smells like it would smell just then, and as they pull straight and button their matted clothes the girl sparks with distance and the boy with relief and each knows that this sliver of a moment is weight-bearing enough to heft piled eternity; and, not far away, the sun slants at a sturdy home with a black mark on the curb to prove a boy’s car had been there; and after an older one had faced a younger one the older one clung to the arms of his easy but not-so-easy chair as if they alone prevented him from falling; and were he there in his home now to hear the clap of the morning paper on the bricks of his lighted front porch then soon he would be reading dispassionately of his own death in a one-car auto accident wherein a car dove off a bridge into a wild river many feet below.

.....

I Held A Man

LOUIS FITCH

.....

I held a man
while he bled.

I had forgotten
the
shock of the rich red
color,
as my hands' pressure did little
to staunch the
rich crimson pouring out of his
tan, papery skin
across his green
shirt
onto the white flecked
linoleum floor
of the hospital.

White walls,
white floor;
clean,
sterile.

All attempts to cover
the oft repeated inability to stop
the bleeding,
to stop
the pain,
the disease,
the inevitable march we all face
towards an end most of us fear.

In an earlier conversation,
the man had told me he was not scared
of dying:
'Lots of people have done it.'

.....

Consciousness

PHILLIP NICKERSON

.....

It gets lost somewhere on the surgical table –
anesthetically blocked, and then re-enabled.
With solely a brainstem it's fully disabled.
To that unknown shore it embarks when we die.

Was it there in that single cell, quickly dividing?
Did it gradually grow where it is now residing?
In cells or in circuits, who knows where it's hiding?
Does it peer out through the light of the eye?

I suppose that it makes us all that we are.
Most developed of mammals, namers of stars.
From hunting in caves to commuting in cars,
we've thought and we think and we survive.

Was the first thought expected, or was it a surprise?
Can we understand our existence, before our demise?
With faith and with reason we seek and we try,
for we are all conscious, but don't really know why.

.....

The Path

MARY D. POOLE

.....

Each morning as I start my walk,
I have to choose a path.
One is on my right, one left. I often choose the right.
The people that I meet are twins.
I see them walking toward me, side by side
Arms moving, matching footsteps stride by stride.
As they approach, I give a wave, say "Hi."
In synch, they raise right hands and say "Hello."
We pass and all go on our way.

Today the path I choose is left. Again I see the twins.
They're walking toward me, side by side
Arms moving, matching footsteps stride by stride.
As we meet, I give a wave, say "Hi."
In synch they raise right hands and say "Hello."
I wonder why they chose left path today? *

**Answer: There is only one path and only one person is met.
Author is almost blind and has double vision, sees two paths and twins.*

.....

Preparing for Blindness

MARY D. POOLE

.....

I'm not afraid of going blind. At least that's what I say.
A blind friend told me long ago: Get ready for that day.
Replace the bulbs with brighter ones, Email—enlarge the type.
A magnifier at each phone—to get the numbers right.
When you meet folks, each face a blur. A guy, a gal? They look the same.
The way to greet them, to be sure, is just to say "Tell me your name."
When you can't read your daily rags or curl up with a book in bed,
Keep Kindle, i-Pad close at hand and learn to listen, hear instead.

Arranging closet & your clothes. Skirts, pants and matching tops go here
With clothespin, clip a scarf to each, and earrings for each ear.
Choose the palest lipstick and put it on by feel.
Forget mascara. No more blush. Too much just looks unreal.
Your hair will always be so neat. Your wigs are good that way.
Pop one on and, with a smile, you're ready for your day.
Don't feel sorry for yourself. It doesn't help a bit.
Ask for help when needed or when people offer it.
Keep your sense of humor. Don't stay home and brood.
Live life to the fullest, as you craft a cheerful mood.

.....



Grey Matter Muse | JESSICA SMITH

.....



Anschutz Campus Mall - August Morning | GAMINI SIRIWARDANA

.....



It's the Little Things That Matter | JESSICA NETZEL

.....



Resting Figure | ANJALI DHURANDHAR

.....

Walking Picasso

DAWN WHITE

.....

I wear with pride
Wonderful designs of life in art
Piercings and paints
Observed as heathen, dangerous, "savage"
One to beware
Easier to label
I took the plunge
Making my mark
Exposing to the world
Pieces of my soul!
O, those ignorant fools know not
The divine gift
A thousand years of intricate, beautiful art
I say unto to you
Judge not my temple, Neither condemn
For a story it tells
Open your heart and your mind
For the Two Precious Gems I love and hold most dear
Emblazoned and protected by my "black" heart!
Dragons, skulls, fire, and water!
Seeking Balance for her gentle soul
Having courage
Bearing the gifts within
I feel no shame
This is who I am
What would Love do now?
Love me as I am!

.....

Ode to an Intern

AMY NACHT

.....

Watching as you walk through the pregnant doors of the 4th floor.

Confidence stiffened into the collars with starch holding the seams together,
I feel inspired.

If hallways could talk, they would speak to you, in multi-lingual tones, of the
multitudes of events that are splashed on the walls and floors, sifted into the
minds allowing only so much in.

If food could speak, the coffee, chocolate, fancy drinks, pies, cookies, birthday
cupcakes, and salads- it would all tell you of long nights, slow days, screams,
whimpers, cries, laughter, joy, pain, and twilight moments.

Facebook, eHarmony move aside, as emerging physicians rise out from the
entangled cords, the IT, the 5 pagers, the small pieces of paper crammed into
pockets. The phoenix rises from the fire.

Each of you enters and leaves in an individual style. None are not changed. And
I, as observer, and friend, and colleague, am duly impressed with the courage,
the stamina, determination, and brilliance that is born of you.

I watch, I learn, and I witness the transformation. Be it big or small, the
transformation that is you. Be it noticed or not, the transformation that is you.

Believe it or not, there is an imprint left by you, remembered by me.

Running stairs, and fire hot moments. Residency.

Travel swiftly and strong. Carry newness along your side.

Tucked under a wing in flight is always UCH, the stalwart support.

And tucked under a wing in flight is midwifery, and me your friend and supporter.

I will miss you guys.

.....

Through The Doors

JEREMY HUA

.....

I've never seen a man die. There's a first for everything.

Early one morning during my third year rotations, I took on a patient whom I'll refer to as Daniel. Daniel was a hapless 50 year old man, who 30 years prior had been diagnosed with a progressive lung disease. It had been a slow, gradual decline until then, but things had recently taken a rapid turn for the worst.

He had come in with severe shortness of breath, but he was not new to our service. His pulmonary function tests were 30% of normal, and he was immediately placed on BiPAP as had been done many times in the past. When I came by to do my initial evaluation, he was breathing heavily and looked to be in pain. Eyes teary, hair tousled. Air fighting to stay in his chest. Abdomen expanding dangerously with every breath. His back was drenched in sweat, my stethoscope sticking to his skin as I listened to his fibrotic lungs. "I don't want to do this anymore," he whispered quietly, inhaling deeply between words. I was taken aback. He clarified it was the third time that month that he had been in the hospital, and that was three times too many. He was done. Done with it all. No more putting his wife through trouble, no more calling his kids with false alarms. To place his memories, his family, and his legacy above his pain and suffering; it was a moment of clarity for him, and for me. We, as health care providers, talk day after day about helping patients, to do all we can to prolong the tick-tick of one's clock. We intervene into people's lives in order to "heal" them. But here was a man who made the decision to remove the mask, and to place resolution above restoration. I left the room with this news, but outside the room was a sight that hurt me. Daniel's elderly father was hunched over his cane, fighting back tears. His wife was leaning on his back, her makeup smeared, fighting back absolutely nothing at all. To watch your child die, I can't imagine the feeling.

continued on next page

“Through The Doors” [Continued]

We gave the family time to process the news and to make phone calls. When we returned a few hours later, Daniel was now accompanied by his wife and two kids. The scene had changed. There was laughter and smiling, everyone sharing stories of the past. They had all accepted the events to come. On the desk next to Daniel's bed were two six-packs of Left Hand Milk Stout, his all time favorite beer. It surprised me at first to see alcohol in the hospital, it seemed so out of place, and briefly confused me. But then I realized how incredibly amazing it was that the nurses had let this happen. The hospital had a heart, and how great was it for us to be able to provide this, the last request of a man's life. Daniel's wife sat on the bed, holding his hand. She said, "I remember how happy we were on our honeymoon, Bora Bora was so beautiful. I wish we could go back one more time." We watch in awe, as the two of them looked at each other with such love and admiration. There wasn't a dry eye in the house, as the saying goes.

My attending brought me back into the room two hours later. "You need to see what dying looks like." Cheyne-Stokes breathing is a real thing, not just something in textbooks. Daniel would take three quick breaths, and then go for ten seconds with no movement in his chest. Next she told me to notice his hands. They were mottled, spotted with shades of blue. This the same blue that was beginning to spread over his lips. His family sat quietly as he lost awareness. The nurse pushed another dose of morphine. The attending and I left the room. I had no words to say, not even a thank you to her for teaching. It felt wrong, like I was taking advantage of this man's death for my learning. I've been told multiple times that this is just the process of academic medicine and that everyone goes through it. But I guess it doesn't have to feel good. I can say it certainly didn't at that moment.

By 6pm, it was all over. Daniel had died blissfully in a pain-free, hypercapnic dream. We were all exhausted. Physically, emotionally. I had never cried over

a patient before. After my experience with Daniel, I haven't since. But I look back and remember how surreal the whole experience was, because after all the commotion, my attending told me to go home. It had been a long day. On my way to the elevator I ran into Daniel's daughter. She was clutching a pillow and looked like she could have sunk right into the wall. I had never seen eyes so red. She had apparently lost her friend to a car accident the month before, and this was all too much for any human being to take in. It didn't seem fair. I wanted to give her a hug, but knew it would do little to stop the flood of tears. As I stepped in the crowded elevator, it hit me. I was joining the ranks of those who were fortunate to go home, but on that particular day, that still made one less person than had come through the doors that morning.

.....



My Conscience is Clear

SIMON KAMAU

.....

Well, Ngumo doesn't go to school, My children-
Take him along on Sundays; when
He is not herding the neighborhood cows for
A little pay, Me, I pay through the Patron.

Actually I neither know his other names,
Nor what he thinks,
He's always so quiet,
For sure I don't know where he comes from:
But I know the Patron -the man with most cows,
Gets him a place to sleep.

Ngumo is herding for greener pastures,
I hear he was so quiet
These last two days,
Mama says the patron's wife
Has quarreled him,
He's soon replaced – by one
Speaking with the voice of men.

He is 13 years old
Said his name meant *fame*.
He brings in the cows on time - 5PM
And waits for the next assignment.
My wife offers him a cup of tea,

Which he takes behind our kitchen.
He sips his tea quietly.
On good days he gets a snack, as well,
But not so today,
Can't tell whether he had any lunch.
One of these fine days I'll talk to my wife
About treating him better.

My conscience tells me he needs so much,
Yet he asks for nothing.
In fact, my children like him a lot
And receive him so warmly,
One fine day, I will talk to this fellow,
But not now.

.....



Heartbeat: A Poem in Three Parts

LINDSAY HEUSER

.....

The Call

It rings out like an old friend
Familiar place, comforting time,
So unknowing.
It beckons with the usual laughter
and smiles
of conversations
and jokes
and dreams.
Life really.
But not this time.
No, this time it's quasi-life,
the worst of life.
A familiar voice
with words of devastation.
Not death, god no.
Thank god.
It's the in-between
the unknown
the terrifying abyss of uncertainty.
A storm envelops me.
A flash flood fills the deepest depths of my soul
and I'm drowning.

Can't breathe.
Can't think.
Can't feel.

I'm stuck in the mud.
Hands quake, heart shakes, soul breaks.

Why is this happening
and why am I in this place
with these smiles

and I'm hearing this
and I have to go out
and be strong
and not collapse
and scream out under the weight of it all
and explain to them why a river
flows down my cheeks.

Why the storm is written
upon my face.

Why I'm here
and she's there
and I'm fine
and she's not
and no one will understand.

The familiar voice stops
and the words end.

I have no words.

I'm here.

She's there.

Miles apart
always miles apart.

My flesh and blood
holding hands
playing on jungle gyms
racing through grass
waiting for Mom's dinner
early morning Christmas and late night movies
laughing, always laughing.

I need to hear her voice.

Speak please speak.

I need to hear it again.

Promise you'll speak again when I'm there beside you, when I can hear it.

continued on next page

“Heartbeat: A Poem in Three Parts” [Continued]

Anything.

A laugh

A sob

A call.

The Heart

The green line

Dives up and down;

Repeat.

Up and down

Rhythm normal

My heart

Her heart

The constant lub-dub

Beeping of the machine

Reassures.

It's all okay.

Her heart continues on.

My heart beats with hers.

My parent's, too.

We can feel it.

A show of solidarity.

We beat

Together

For her.

A touch to the cold skin.

That's not her skin,

Is it?

It's like death,

Quasi-life again.

Feel my warmth,

Sleeping one.

And take it.

Wake up

And beat onward again.

Heart strong.
Normal, even.
The rhythm
That betrayed you
Is gone now.

We will wait
Beside you
With hope
Always hope.
As long as it takes,
We will wait
Till your eyes open
And your heart beats
No machines attached
No tubes
No wires
Just you
And that heart
constant and strong;
We beat for you.

The Awakening

The river flows
down my face
again.
A wash of blurred colors
and shapes.
The river transformed.
A river of light
and hope
pouring into
an ocean of serenity.
The eyes stir.
The voice quivers.
She's here
again.

continued on next page

“Heartbeat: A Poem in Three Parts” [Continued]

The water is here
again.

The force of life here
again.

The ocean wells up
and bathes me
in its joy.

It gives and it takes
and it ebbs and it flows.

It's here,
this moment.

The blinding light of
hope renewed,
the impossible made possible.

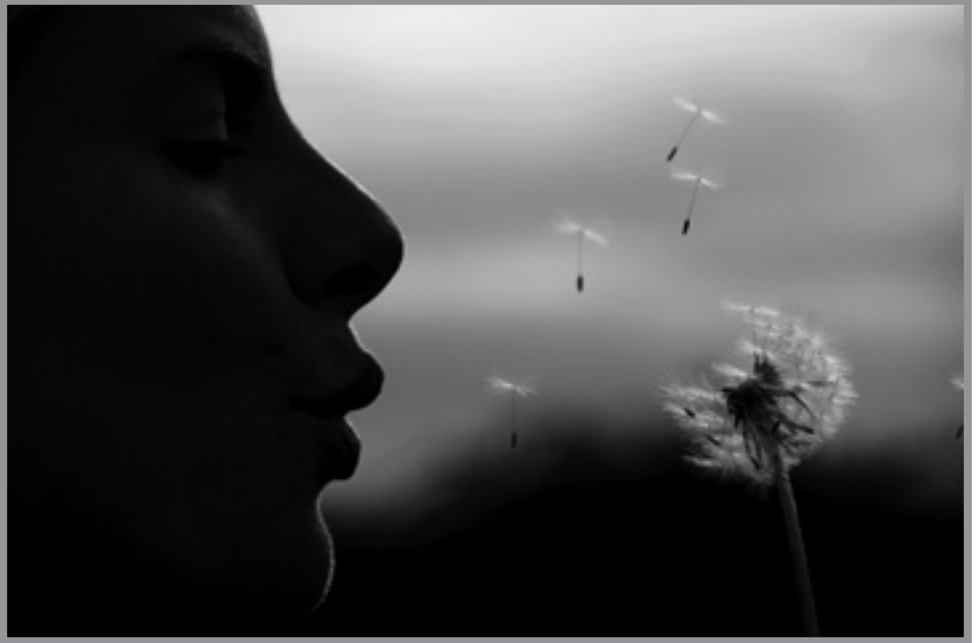
Life affirmed
and not taken.

The heart beats
and the neurons fire
and the eyes blink
and the legs wiggle
and the fingers grasp
and the soul dances.

Our hearts beat
Together.

Alive, yes alive.

.....



Dandelion | COREY WHITLEY

.....

Delirium on the 121 to The Anschutz Medical Campus

STEVEN ROBINSON

.....

I've tenderness for them all
some less than others
because clearly
they've taken a drubbing
where life is concerned
the bus Melville's *Pequod*
running on diesel down Peoria
the microcosm contained
inside these windows
the entire cosmogony
ring worm school kids
pregnant adolescent girls
wheezing 20-year-olds
sclerotic 30-year-olds
crippled 40-year-olds
over west are mountains
where we never go
us dematium riders it is
forever a circuitous journey
south to north north to south
Montbello to Nine Mile

back and bent
again a never ending track furrow
the engine thrums
with cerebral excitement
with childhood restlessness
with adult incoherence
comparatively short course to the
Anschutz Medical Campus
where I disembark
and my body and limbs
assume enormous proportions.

.....



Fido Earns an Honorary Degree

JEANNETTE GUERRASIO

.....

Nobody understands
what it means to be a doctor
like me.

She arrives home late
to find me scratching at the back door,
both with our legs tightly crossed.

We share the same pathetic,
sad eyes of starvation,
while she prepares dinner two hours late.

Long hours, we lie confined
to the warm couch, chewing
through journal after journal,
(sometimes literally).

We whimper from fatigue,
as the day's last progress notes
get charted before climbing into bed.

Our barks sound in unison
as the student loan bill
gets pushed through the mail slot.

She places her stethoscope on my heart,
As we learn to use our instruments and our ears.

Our noses come together,
to diagnose giardia. Mine not hers.

I feel her palpate my bladder,
after surgery when I am retaining.

I tolerate the intrusive otoscope
entering my ears, before being rushed off to the vet for antibiotics.

I lick her face with relief
after studying how a splinter is removed from my paw.

I learn about healing after
she lances my toe abscess and extracts a thorn.

And I watch shamefully from the corner,
as she stitches up the laceration I inflicted on another.

We've sacrificed, studied, and learned,
We've made mistakes and complained,
We've endured and practiced
Together,
Side-by-side on this journey of medicine.

.....

Rabbit's Eating

LESLIE PALACIOS-HELGESON

.....

Hey Annie,
I was just thinking
You know, this feeling
This habit I have

Of pre-mourning
Post-mourning
Re-mourning
Well it's back.

And in this quiet hour
On this crisp, cool night
Much like the time
When we were together

Walking, remember?
And those Spokane earthworms
Lolling around--
We stepped over them

In unison

And, then, when you left
And I didn't know what to do
Or where to go
Or how to breathe

And all I wanted to do
Was find you
And ask you
What to do

Without you
And tonight

I'm sitting
Waiting
Watching

A rabbit is eating
I can hear the crunching
Ginger and precious
How you would love it

And I can't help
But get to thinking
How we talk now
You and me

Or really, only me to you
But how I can read
Your face, your smile.
I know what you'd say
And what I would say back

Well, Annie. Pretty soon
In my years, not yours
I'll be old and grey
And slow, then, you'll say

And you'll be eighteen
And I can't and I won't
Know what to say
Anymore.

You'll be gone
Or maybe, I will.

.....



Shadows in the High Country | GRAYSON HUBEN

.....

Jerusalem Hotel – Winter

HENRY N. CLAMAN

.....

Those who await the Messiah – are still waiting,
but those who predicted snow are justified – with a vengeance.
Large sloppy flakes trying to land heavily on the ground
are whipped 'round by the wind.
Across the street, a palm tree shivers in its white tallit.
Sam, who sells cars on Long Island,
snores sporadically on the sofa.
His wife carries on a bilingual phone call
and then leads him upstairs where he
will undoubtedly be less comfortable.
Outside the front door, slush (never mentioned in the Bible)
awaits the dutiful tourist.
As for the sidewalk, well –
perhaps there is no Hebrew word for snow shovel.

.....



App-ly Health Policy

TERESA SAKRAIDA

.....

Influence by making opportunity

Make the time

Tell the story of patient centered care

With intentionality

Make a difference now

Simplify with information technology

There is an app for that

For the phone and more

Virtually greet your policy maker

In readiness to effect change

Take a moment

Let's eliminate health disparity in chronic illness care

Meaningfully

Touch your screen for Congress

Now

Access your legislative people

And learn who supports the bill

Discover what committees breathe life into it

Influence

Because We are the People too.

.....

Memento

JULIE CARPENTER

.....

I am not sure
how long
it was since she
inhabited this body
or how long she had been gone
I only know
that bullet
into her occipital lobe
through the mouth
dislodged something

she woke up
white sheets
ICU
expecting to be dead
there
were all
the usual faces
her arm and leg
not working

last night I saw the moon rise
a muted orange
in a shower of stars

seventeen years
now no one can tell
except
right thumb and forefinger
permanently curled
memory carried
only there

.....

On Finding a Slim Volume

HENRY N. CLAMAN

.....

(For John Conger, Ph.D.)

I've done it again, John, failing
to pay attention to what seemed
a side issue.

Who knew the Dean wrote poetry,
And if he did –
while managing a medical campus –
how important
it might be?

I found out . . . too late,
that you were a close observer
of the silence of snow, a lover
of the sudden red, who could discover
the shape of your
life laid bare.

I imagine the conversations we might have had,
Forgive me.

.....

*Originally published in THE PHAROS OF ALPHA OMEGA
ALPHA, Autumn, 2013, p.47*



Man Made | CAROLYN BREMER

.....



Colorful Tree and Field | JESSICA BOAT

.....



The Mendelian Anomaly | RYAN D'SOUZA

.....



Paresthesia in Blue | JESSICA SMITH

.....

Mindful Medicine

SARA SCANNELL

.....

Endless patient lists,
placing metal on skin, listen,
listen, as he breathes.

.....



From the Other Side

AMY HOWARD

.....

My roommate glares at my TV. *Esta molesta*, I think to myself. She is always complaining to the nurse about my Mexican soaps, as if I can't understand her, as if I'm not lying 5 feet away. I can hear you! *Puedo entenderse*. I've lived here for 11 years I want to shout. But that requires too much energy. Everything requires too much energy these days.

I look over at my roommate. White, pasty skin, watery eyes with a persistent red tint, her nurse, her family, my nurse... they all fuss over her. Maybe it is my skin? Maybe it's too dark to be pasty, so they don't know how sick I am?

"Nurse?" I call. No response. Can't you hear it? My voice? It's gone; it's so weak, like my body. Can't you tell? I get mad then, which surprises me. I didn't know I still had enough strength to get mad. "*Enfermera!*" I yell, although it comes out more as a strangled cry, which makes me angrier. My voice, like my body before it, is failing me.

She walks over. "What do you need?" "*Quiero hablar con mi doctora*" I say. She shakes her head and addresses the CNA "She does that sometimes. I know that she speaks English".

Sí, I think irritably, and I know that you have Spanish speaking nurses, doctors, and translators, but my translator requests have gone unanswered. I don't know all the words, you talk too fast, but mostly, I just don't trust you.

The nurse talks to my scabs, she rarely meet my eyes, "I don't know what you want." She turns and leaves the room.

I turn back to my soaps, but the scenes swim before my eyes. I'm crying, I realize. Why? I never used to cry. *La medicina*. I blame the drugs they pump into me every half hour and satisfy myself with that. I blame the meds for a lot of things these days. Sometimes I sleep through breakfast and lunch, waking to see long shadows stretch across my room as the sun sets. *La medicina*, I grumble as I quickly check the phone to see if the message-light is blinking. It usually isn't. I've been sick longer than is polite. No one calls anymore.

A familiar pain begins to creep up my legs. I strain to move them, but, as usual, it's futile. Even my own limbs ignore my commands now, in English or Spanish.

A knock on the door, I know who it is. I don't answer. She comes in anyway. She dropped the always-cheerful act a few days back. She wants me gone. It's the dinero. The money's gone and I don't have any more to offer. I remain silent until she leaves, frustrated.

I'm not getting better, in fact I'm getting worse, but they don't know why. No one seems to know anything anymore, not even myself. When did I get here? How did I get here? I think back, fighting the haze of my thoughts.

I remember the empty prescription bottle. I don't know how long it was empty, a week, a month? There it sat, on the bathroom counter, taunting me each morning and evening. "You can't afford to fill me. You know it's only a matter of time. Do you remember the last time..." The psychosis had already begun to sink in, I could feel it at tugging me, pulling me away from reality, but there was nothing I could do. I couldn't pay for a refill; all I could do was wait.

They told me I hit someone, a stranger I guess or maybe a neighbor. I don't know. I remember the jail cell though. It was green, an ugly slimy green that filled my nightmares until the medicines calmed me. One day, they tell me, I collapsed in that cell, on that green floor.

I'd like to print out my memory. Maybe imprint it on some film. That way I'd be able to see where the gaps are and eke out meaning from the misty, convoluted segments. I'm tired of someone else telling me my own past.

I play my diagnosis back and forth in my mind, *neuropatía*, neuropathy. It's a senseless word in both languages. It's a fancy placeholder, like so many things its translation is "we don't know".

continued on next page

“From the Other Side” [Continued]

The *fisioterapeuta* arrives and tries, once again, to get me to move my toes. She tells me that I need to practice this every couple hours. She says it will help me, that it will help me walk. Walk? When I can't even move my ankles? Walk? When I can't even wipe my own nose?

I cry then. Overwhelmed by my emotions, drowning in embarrassment, fear, loneliness, and pain. The therapist stares at me for a second, clumsily searching for the right words of comfort, as tears run down my puffy face and gather in droplets on my chin. Inwardly I cringe and brace myself for the inevitable. Here they come, the platitudes I've heard so many times, the groundless assurances and pitying sighs.

I glance up at the young therapist. She shifts uncomfortably, fighting to come up with the proper script. Our eyes meet and her fidgeting subsides instantly. A moment of silent communication and she lowers herself gently onto the side of my bed, pushing aside the tubes nesting beside me. Picking up a tissue she brushes the tears from my chin and embraces me, saying more with the first personal human touch I've experienced in weeks, than she could have in any well-intended, sympathetic monolog. As my eyes dry, I let the warmth in that simple gesture wash over me, a gesture that incorporates so many words but needs no translation.

On the surface nothing has changed. I still face an uphill battle to reclaim my body. Inside, however, that moment changes everything. In that moment I'm no longer alone. Drawing strength from that one moment, I try, once more, to move my toes.

.....
Amy Howard's essay, "From the Other Side," won 3rd Place in the 2014 Society for Humanism in Medicine Annual Writing Contest co-sponsored by the Arts and Humanities in Healthcare Program and Life Quality Institute.

Last Rites of the Farmer

ANNIE MAGGARD

.....

It was almost the end, they said.

Raised arms and open mouth,
he said we had to get things settled,
started talking about digging graves and
planting beans, drawing diagrams of garden plots,
places for wires and stakes, rows of what we should know.
He asked where we were going to put him.

He thought we had answers.
Wax beans? Pole beans? What kind?
Half-runners, we said.
Can't they take me somewhere else to die?

It was too late for that.

There was already the smell of snapping and stringing,
of something that's just stopped growing.
The smell of brown paper bags, of collecting,
then the smell of leaving behind, of warm clods of earth,
of knowing there would not be another summer.

We didn't have any answers.

In the end, raised arms and open mouth,
it looked like he was asking for rain.

.....

Hiding — 15 Years Ago

JEANNETTE GUERRASIO

.....

You had to know somebody,
who knew somebody,
just to get an invitation.
Not an invitation really,
just a time, date, and location.

Off campus,
in a dark room,
late at night,
just before closing,
the gay and lesbian medical student group
converged
on the lowest level of the old city library.

Individuals would appear from
various indistinct corners
And coalesce.

There were six of us.

Steph, who was the first person I had ever outted myself to,
just 2 weeks earlier.

Jon, muscular and bald, reminiscent of the images of Mr. Clean.

Fred, a shy Asian guy, distracted by the attention he was getting from
the guys in this new city.

Rebecca, who had just realized that the guy she had a distant crush on
for the past 2 months was not a guy.

And the kid without a name, who had just permanently exiled himself
from his Utah home and family.

I remember the fear.
Jon and Steph both in
same-sex partnerships
for over 10 years and
“out” in all spheres of their life,
chose the closet once again
during medical school.

We feared social isolation,
diluted opportunities,
unfair evaluations,
biased comments,
discriminatory grades,
inequitable residency selection.

No one knew if the fears
were accurate or legitimate.
We only knew
that there were
no “out” faculty... and that spoke volumes.

.....



Shoe Distribution at Nsambe | ROBERT FLICK

.....

In Addis, Perhaps

SALLY PEACH

.....

in addis, perhaps,
she would own a *bunna bet*,
and serve macchiatos to tourists
for a quarter.
but on these simien slopes,
where men till rocky fields
with bare feet
and donkey whips,
where birds and baboons
share sparse tree space,
where sunrise marks midnight,
and flies dot children like stars,
here she rinses the beans
roasts the beans
grinds the beans
steeps the beans
as the smoke of ceremony dims the hut,
hiding her miscarriages
and grey hairs won early through years
of dirt floors and droughts,
revealing, instead, a woman
who nurses a child
and shoos chickens from the fire,
as with weathered hands
she serves *bunna* to guests
for free.

.....

The Weight We Carry

A 3RD YEAR MEDICAL STUDENT

.....

"I can always tell which doctors have spent a lot of time in hospitals as patients. You've been a patient, right?"

I remember Scott, the intern on my first rotation of third year (surgery), asked me this question in the hospital elevator.

"Well, a little" I replied, thinking back to the time when I accidentally fired a framing nail into my foot and needed surgery. Scott had also been a patient, though for much longer. He seemed compassionate and attuned to both his patients and his medical student.

The elevator opened and we headed out to see a patient, our brief conversation over. I tucked his words into the back of my head, not realizing that he had given me a pearl that would occasionally resurface during subsequent rotations.

Later that summer, my wife began to experience anxiety and erratic right leg movements that we both blew off as dehydration or stress or possibly conversion disorder. She was changing jobs, I was spending long hours on rotations, and our children made it difficult for either of us to rest. Eventually she found time to see a neurologist, and the inevitable work-up revealed what looked like a meningioma. We both thought that if one has to have a brain tumor, a meningioma would be it—they're benign and treatable.

On the night before my wife's surgery, I found her alone in our bedroom with a partially packed suitcase, tearful. I tried to console her saying, "Everything will be OK."

"You don't really know that. I'm tired of people saying things they're not sure of."

She was right. The odds were in her favor, but I couldn't predict the future.

The next morning she gave long hugs to our two children—the kind of hugs you would give if saying goodbye forever. Our two and five-year-olds didn't understand. Then she hugged Cocoa, the border collie she had rescued

from a shelter years ago. Cocoa seemed to sense my wife's tumor before anyone, following my wife everywhere since early spring and always giving her unconditional love. In my wife's will, Cocoa was the one item specifically entrusted to my care.

This was the first time I realized what patients go through before they come to the hospital. In my surgery rotation, procedures were routine parts of the workday, reinforced in my mind as safe by our lack of significant complications. But for each patient there is a pre-hospital story. Patients grieve, not knowing if they will wake up at the end of the day. Thirty-year-old mothers write wills, not with the abstract notion that we will all die sometime, but knowing that they may have already scheduled their time. Or, in the case of brain surgery, maybe the patient will wake up a different person—someone who no longer recognizes her family or someone whom her family can no longer love. Simple procedures are not simple for patients. Or for their families.

"I think it would be best if you spoke with my attending. He's currently at a conference out of town but will call you later to talk about it" a resident told us when we asked about the pathology report. He had been kind to us, and when we pushed, he said my wife had a rare kind of tumor called a hemangiopericytoma that, due to the location, couldn't be fully resected. But the resident wouldn't say much else. Is that why the residents had been avoiding us we wondered? Or was it because my wife was a doctor and the team felt she needed privacy at this teaching hospital?

For two or three days I tried to figure out one question: was this cancer? Nobody had said "cancer" to us, but I read it was a sarcoma. That's cancer, right? I found a few studies involving small numbers of patients and went directly to the Kaplan-Meier curves (these show survival outcomes). In the scheme of intracranial cancers, living five years is good, but when you're in your 30's with

continued on next page

“The Weight We Carry” [Continued]

young children you hope to see grow into adults, five years just isn't enough. Neither is ten or twenty; not that it mattered. Only a handful of study subjects had lived that long. Was it because this cancer killed most of the other patients or because there weren't enough patients to study?

“My tumor was supposed to be benign,” my wife said as we realized she had cancer. I'm not sure when the “C” word was used for the first time by someone outside our family. Perhaps it was after discharge when the hospital called to schedule a dietician visit: “This is what we do whenever anyone receives a cancer diagnosis,” the scheduler said.

As a student I saw cancer patients, but I didn't grasp the pain they carried. For that matter, patients of all sorts, and their families, endure emotional burdens that can break them down at any time. We are fragile, though not always good at showing how so. We live with fear and guilt, with sorrow from seeing our loved ones in pain or from having hurt them by failing to be compassionate and patient. Sometimes we may hug a little longer, and sometimes we may need a little more time to think before speaking because we do not know. We do not know when we won't be able to see our loved ones anymore, but we do know it could happen any time. And this knowledge sometimes makes it difficult to think about other things.

Could it be that the people who understand patients best are those who have also suffered; people like my surgery intern Scott? He gave me a pearl that I hold a little tighter now. Without planning or desire, I have moved from outside observer to family member of a suffering patient. I tell myself: “This will make me a better person.” A former cancer patient told me: “You are already a good person.” She knew just what to say.

.....

I Said 'I Do' and I Did

ROSA RODRIGUEZ

.....

I asked her to marry me, we both said "I do"
I left her alone with our child
A one year old boy I longed to know
For a war that lasted quite a while
I feared I would not see them any more
The war was won and I returned
We raised one more child
And lived together - learning and growing
I held her hand differently every day-
To kiss my beautiful woman every night
And every time, I met her eyes in her gaze
And learned the new ways that light-
Each of the sixty-one years I spent by her side
But the day she surrendered to cancer
Diagnosed in her lungs - a deep breath we took
For we knew, at our age, our lungs cannot win this fight
It would soon take the last breath of our intimate nights-
That kept us young and bright and nice
But I had more than a life to thank her for
I took care of her every need-for I said, "I do"
I said "I do" and I did.
I did stay with her as I promised
For my promise was not to be hid
Instead nurtured and blossomed it did
I loved her- I always will
And I said "I do" - because I wanted her dearly
I said "I do" because I knew I would always fill-
Her heart with love, a love that rid away all her fears
So embrace what you say with what you do
Is all the advice I can give you two

.....

Lessons

EMILY MORENO

.....

I have seen hundreds of electrocardiograms. Printed out on red paper, white paper, photocopied in handouts, on tests, in books.

Automaticity, Depolarization, Flutter.

I have seen Electrocardiograms displayed on portable monitors, computer screens, in hospital rooms, gripped in hands, crumpled in trashcans. I have taken monitors on hiking trails, on boats, seen them covered in blood. I have placed leads on old men, deceased persons, babies. I have seen EKG strips flourished with signatures, sent for second opinions, rolled up in pockets.

Idiojunctional, Idioventricular, Intermittant.

The jagged and curved lines tell a story, with direction, rate, rhythm. They can tell of axis, hypertrophy, infarction. You measure the lines, the boxes, interpret them, read them, document them.

The strip can display flat lines...

Asystole.

Receptors, Repolarization, Rotation, Rapid phase, Reverse.

Normal cycles are comprised of waves and complexes: p waves, t waves, QRS. The impulse of the myocytes- action potentials- sending voltage to leads which dutifully record activity on the boxed paper, the interpreted paper. Hidden waves, enlarged waves, absent waves.

Shock, Stenosis, Strain, Sick Sinus, Sodium, Segment.

Contraction of atria, contraction of ventricles,
and again.

Monitors beep, blip, buzz.

Fusion, Foci, Fascicular.

A diagnosis! AV block, Paroxysmal Ventricular Tachycardia, Atrial Flutter, Torsades de Pointes, Junctional Bigeminy.

You look at standard leads I, II, III. Augmented leads aVR, aVL, aVF. Chest leads V1, V2, V3, V4, V5, V6.

LVH, RBBB, SVT, AV, PEA, PAT, MVP, PAC, PJB, MAT.

It doesn't prepare you. The electrocardiogram, EKG, ECG. It does not prepare you for the day that your mother tells you that her heart has been racing, feeling *funny*. You cannot measure, count, interpret your reaction. It has no rhythm, no diagnosis. It cannot be sent for an expert opinion, it cannot be labeled with an interpretation.

You feel a mixture of confidence and pride at showing off your medical knowledge to your mom, who has never seen the manner that you adopt when speaking to a patient. As you dot her chest with electrodes and pump up the cuff, your hands begin to tremble and your heart itself is racing. *What will the strip show?* You switch on the screen terrified at what the repeating green line will tell.

The realization is like an abrupt collision.

Atrial depolarization, Ventricular depolarization, Ventricular repolarization.

It will not be as simple as documenting "ST elevation" or "prolonged PR interval". These words, so often void of ramifications, of consequences, would now refer to a heart that nurtures you, that loves you. There is no abstraction, no clinical distance, only fear. You hold your breath; you feel your pulse banging in your ears. You smile confidently, clinically, at your mother: "give me a second, let me interpret it".

The experience will take time to process. It will add to your repertoire of medical knowledge. It will teach you a lesson, one that is as important as it is frightening.

continued on next page

“Lessons” [Continued]

Maybe the single most important lesson you can learn, yet one not found in Rapid Interpretations of EKG’s.

The immensity of the role of the provider becomes suddenly clear. Until this point you were confident in your ability to handle situations by distancing yourself from the core of it, from the person behind the patient. It was easier to focus on skills, quantifiable information, checksheets, studies, data. It is now clear that that a person- somebody’s mother? - has put their trust and maybe even life in your hands.

I hope that as a physician, I am able to retain the respect and compassion with which I applied the stickers to my mother’s chest.

.....



My Strength

CRISTINA MOONEY

.....

Dedicated to my mother Cristina Valencia Morales

I used to question what I knew,
Dreams of losing you for years.
Held back by my mistakes,
In a prison of my fears.
Yet when the truth came to light,
You proved to be a source of strength.
Everyone leaned on you for support,
And you held them up at length.
I never truly realized,
The fight I had inside of me.
Until the thought of losing you,
Was entirely too frightening.
Now I pride myself to say,
I'm of the seed of a survivor.
No cancer, no genetics, no disease,
No negativity could reside here.
It was then that I knew,
My strength came from you.
It was then that I realized,
Me being of you was no fluke.
Now I'm more determined,
To be a source of strength for the world.
All because,
I'm your first baby girl.

.....

Twenty-Two

CHELSEA WOLF

.....

Twenty-two times I presented you.

Like a film in slow motion, I remember when you were assigned to me. The bright fluorescent lights glaring at the dingy peach and turquoise ICU curtains. A ventilator ping-ping-pinging incessantly. A cart of barely touched trays of hospital food sitting idly, waiting to be removed. Two overnight nurses chattering on about a recent first date. Me, nodding eagerly at the resident as he told me of your condition, your scans, and your labs, as if I understood what any of those numbers meant. And inside myself, the same reel playing over and over: please don't give him to me, please don't give him to me, please don't give him to me, please.

Knowing what I know now, knowing how my life, my path would be changed because of you, I can't believe that I didn't want you then. And yet two days into the rotation, all I knew of the ICU was a huge, roving mass of white that traipsed each morning from room to room, towering not only over the patient but also the unlucky soul forced to present. I did not want to be that soul pelted with questions and fumbling under the hard glare of the ivory tower personified. So, the reel within me played on: please don't give him to me, please don't give him to me, please don't.

Yet it was as if the universe had another plan for us, and despite my fervent pleas you were assigned to me and I to you. That first night I poured over your records, trying to understand who you were, what you were facing. The next morning, I was in your room for an hour examining you, hearing your soft, strained voice for the first time. And then as the dark morning sky began to lighten and the harsh overhead fluorescence was replaced with the muted natural sun, I was there in front of the white mass; my voice wavering, my hands shaking, I rattled off a seemingly endless list of your medical problems, your medications, your numbers.

Was your creatinine up or down, were your in's greater than your out's or vice versa? I don't know. I don't recall. But what I do remember as clearly as if it was just this morning was the way you looked up at me, nodding, smiling, trusting, as I told this group of strangers in white about you, as I bared your physical being to them. That, and I remember the roughness of the white sheet covering your bloated leg as I held onto you for those five minutes. You supporting me, though I didn't recognize it at the time. You holding me up even though it was supposed to be the other way around.

Twenty-two times I presented you. Twenty-two times I reviewed your morning labs and twenty-two times your evening labs. Twenty-two times I listened to your murmur, to your lungs. I recorded how much you consumed and how much you excreted. I rejoiced as the large bruise on your calf grew smaller, the border slowly retreating from the permanent marker outline that never seemed to fade. I watched in horror as the bruise on your arm grew larger, angrier, harder, causing you to wince in pain each time you tried to move. I knew of the weeping ulcer on your sacrum and of the many tears on your edematous scrotum; your pride cast aside for the time like your worn black shoes in the plastic belongings bag.

Over the weeks, you shared more and more with me. Your little brother killed in front of you. Your faith in God ripped from you in one, horrific moment. Your resolution to never again shed a single tear. Your longing to return to your home on the open plain beneath the boundless sky. Who was I to deserve this great privilege, to know your stories, your fears, your dreams? Who was I to sit beside you, holding your hand, waiting for the surgeon to remove the mass that was steadily choking you? Who was I to be the last one to hear your voice before it was cut out along with the cancer? Me, the one who didn't even want you in the beginning.

continued on next page

“Twenty-Two” [Continued]

I thought I knew you after those twenty-two days. But, it wasn't until the last day, the day I had to say goodbye that I truly came to know you. You could no longer talk, but you held my hand as I, with tears streaming down my face, explained that my time at the hospital was ending, and I would no longer be able to see you. You, once again, supporting me just as you had that very first day in the ICU. In that moment as I held onto you, I came to know your tremendous strength, the strength you so willingly shared.

And no one has ever appeared as strong as you did in the moment that I turned to leave and saw a solitary tear course its way down your unshaven cheek.

.....

Chelsea Wolf's essay, "Twenty-Two," won 1st Place in the 2014 Society for Humanism in Medicine Annual Writing Contest co-sponsored by the Arts and Humanities in Healthcare Program and Life Quality Institute.



Tethered

CHANTEL MITTON

.....

Bound between life and death by the will of the doctor. The monitors
beeped
incessantly,
constantly interrupting what poor sleep I could snatch. Between
the nurses,
the doctor,
the physician's assistant,
the speech, respiratory and physical therapists,
the social worker,
visits from family members,
the x-rays,
CT scans,
blood draws,
finger pricks,
IV changes,
dressing changes,
sponge baths,
and the frequent attention my failing body demanded, I was lucky to catch
half an hour of restless sleep for every four that passed.
Or so I gathered from the clock mounted on the wall across the room.
It kept me at least knowing the time, if not the date. The days had blurred into one
l
o
n
g
nightmare.

continued on next page

“Tethered” [Continued]

I couldn't talk, couldn't even lift my arms from the pillows that attempted, but failed, to keep my arms free from the oozing bedsores that had taken over so many areas of my body. I could feel my body deteriorating.

But there was nothing I could do or say to tell anyone that it was time to let me go.

Every movement was

AGONY.

The sheets felt like sandpaper against my skin. Every motion forced on me felt like it ripped something. Something vital.

But I was mistaken, because obviously tearing something vital would end this.

Wouldn't it?

The lines running out of my body were life lines.

Tethering me to a hellish existence.

When would it end?

My family mentioned to the doctor that maybe they should “pull the plug.”

Let life take its course.

Yes! I screamed.

But no one could hear.

Even if I had the strength to talk, the ventilator could never allow it. Even while it force-fed me oxygen, it suffocated me.

The doctor said there was

“Still hope.”

My family trusted the doctor.

Hope for what? I demanded.

He didn't answer.

My daughter came.

I don't know what she said. Maybe nothing. I think she slept next to my bed, holding my hand.

But I may have imagined it. She hasn't been to see me in years.
I think it had something to do with a fight we had, once.
Something I did wrong.
Did I send her away?

I can't remember.

Maybe this disease is starting to eat away my mind, too.
I wish it would. Then maybe I could be somewhere else while my body
d
i
s
i
n
t
e
g
r
a
t
e
d.

At least then it could be a nightmare of my own making. Not this one that was forced
on me.

I didn't ask for this.

Does anyone?

I think I heard a patient down the hall sobbing.

What a luxury.

Another patient hobbled past my door.

I could hear the squeak of the walker wheels and the shuffle of her stockinged feet
across the tile floor.

continued on next page

“Tethered” [Continued]

To walk again.
To move on my own at all again!
I know it won't happen in this life.

The doctor came in.
My family came with him.
“We tried,” he said.
“I was so certain it would work.”

I tried to open my eyes.
They refused.
Tried to move my lips.
Didn't even twitch.
The doctor was still speaking.
“There's nothing more I can do.
“I'm sorry.”

Finally.

“I'll give you some time.”

People cried openly,
But I rejoiced.
I would finally be free.

I think I smiled.

.....

The ICU

DANIEL LOLLAR

.....

Before me lay an array of
Numbers, symbols, values,
multi-ranged wave forms, all
Actively dying
Amidst the deepening crescendo of
Alarm bells and voices,
None of them familiar.
I know this to be true:
Blood under pressure doesn't clot
Skin under tension doesn't heal
A heart underfilled doesn't beat
The soul, so hard, so permanent
Yet so dependent on a centimeter of
Artery, a few mutinous platelets,
An unchecked bacterium!
I've read about this over and over, a linear
Process of disease ending with
Inevitable sorrow and predictable violence:
Cells dying in small secret corners
Or performing great mass suicides
One organ at a time. From
Brain to belly to toes, these little
Machines crumble into flat lines
And non-sensical values!
Meanwhile, a vibrant young woman
With a child's eyes and
80 year old skin slips
Gently into the unknown, alone,
While the horizon fighters rest in the
stillness for a moment,
chilled and dirty

.....

You Should Have Kept a Place for Me

EBELE MOGO

.....

Beyond that sunset
when you kept finding ways
to slyly say you wished
our meeting to be
the first of many;
Beyond my smiles
in your new camera --
excited as you were,
to make memories
you never intended to share.
When we said goodbye
I stayed doubts
that it would be a last.
For September would surely
bring you back to me.
The first few days
it was hope of a call,
an email perhaps?
When days turned to weeks
it was goodbye sweet dreams,
almost as good as real.
And when the passing of time
settled the dawn of summer
into its day, then dusk,

I folded dresses away,
and was forced to admit
I had been conned into
another cliché.

The shore is frozen now,
it doesn't reflect the sunset
as well as it once did
to set the scene
for a first kiss.

.....



The Fallen

PAUL DARBY

.....

Once strewn above moon-lit landscapes
 innocent dreams now gather
 as fresh-faced snowflakes
 nestled in the elbows of a leafless elm.

Pregnant with possibility
they seek the promise of safety.
But a bitter wind comes
 and they fall to earth - quietly or not
 landing in rounded clumps
 tiny arms
 trim legs
 shorn off in the crush
 their finite distinctions - exhausted.
Such may be the cost of binding to a solid world.

Still, there is hope to transcend the unyielding grip of winter's sorrow;
Still - the silver play of moonlight on pristine powder.
 Fragile globes of pulsing light
 whisper mouth to ear, while
Stiff bark holds within, what remains of possibility.
Some spring, their lips may utter truths again
Travelling upward as wisps to become
 blossoms and limb-stretched canopies.
We are waiting.
 dear, sweet, lost, dreams

.....

Cut Here

GARLAND CASTAÑEDA

.....

It was an order I had received dozens of times during my surgery rotation. A resident or attending would hold up the free end of a suture or a roll of tape. I would step in and perform the medical student's duty and diligently truncate the item in question. This time, however, the situation was different.

The body before me on the table belonged to someone I had never met. I never saw his face and I never knew his name. I had been called across town to a hospital outside the typical jurisdiction of my university. It was just after midnight and I had been working since 5am. Over the previous couple hours, the men and women around me had systematically eviscerated a man as I watched and held retractors. His liver sat in a stainless steel bowl behind me, and his kidneys occupied two smaller vessels by my side.

The doomed material in question this time was neither tape nor suture. Instead the fellow pointed me towards the inferior vena cava, the largest vein in the human body. In effect he was asking me to kill a man with a tone of voice one would use to order coffee in the lobby we had walked past on our way to the operating room. There was no ceremony. There was no hesitation. A job needed to be done and he thought it best that I should be the one to do it. I took my scissors and I did as he asked. The first cut was deemed insufficient so I quickly added a second as more fresh blood than I ever care to see again poured from the junction between vein and heart. Suction tubes were inserted into the corpse's chest to remove the majority of the five liters of blood that no longer flowed through the circulatory system of this average adult male.

Eventually the heart stopped beating. The anesthesiologist was dismissed, so the lungs stopped inflating and lay collapsed in a hollow space once protected by ribs, muscle and skin. The surgeons continued on with their task, dissecting tissue off the organs and harvesting lymph nodes to send to pathology. There was no pause. There was no reflection. The job was almost done, and it was almost time for me to go.

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“Cut Here” [Continued]

Every once in a while someone will jokingly ask me if I have killed anyone yet during my time in medical school. They assume of course that the answer would be “no.” I don’t always tell them the truth, but the question always takes me back to those wee hours between the fourth and fifth of June. I think about the brain-dead organ donor I killed when it was what I was asked to do. I think about the kind woman who now carries his liver who gets more time to spend with her family. I think about those kidneys hauled away in coolers to find refuge in other nameless men or women.

I finally got home about eight hours later after helping the surgeons place the donor liver in the woman I had seen on rounds the day before. I’m sure the twenty-seven hours I had been awake played a part, but I can’t say I lost any sleep over the night’s events. I had helped save the lives of three people in exchange for a life irreparably damaged by a tragic accident. On paper it makes perfect sense. In practice nothing is ever quite how it seems on paper.

If I am ever asked to do something like this again, I would not refuse but I would hesitate. I would take time to pause and reflect on the deed that needs to be done. The taking of a life is a horrible act in any situation, softened only slightly by sterile fields and scalpel blades. In the most utilitarian of terms, this was a necessary evil and a net gain. I choose to think about the events of that night, in more subtle terms, as a series of heavy steps toward a greater good. I have no regrets about what happened, just a stoic sense of calm. A naiveté had died but a doctor had been born.

.....

The Rain of Radio

ROMANY REDMAN

.....

Drop of water
Drop of pain
Drop of sunshine
Drop of angels eating breakfast
Watching the news
Breaking 'le zapper'
And sulking next to the old radio

It weighs 150 pounds
It's never been lifted
It won't be now
Stream of announcements
Advertisements and death
Advertising death and
The death of advertisements
Someone subtly scootches in their fluffy
Cloud of a chair

And some rain weeps from
The sky
On to the earth below
Dew meeting distant cousins
Rejoicing, shouting, losing consciousness
In a rambunctious jubilee
Of crashing reunion
Then all goes to dust
Into dust

The fungi spores wait patiently
Carefully, timidly altering
One ear towards the heavens
Waiting for another

continued on next page

“The Rain of Radio” [Continued]

Uncomfortable burst of
Terrors from the unmoving radio
Flying amongst the winged

Waiting for a war
War of brothers
Battle of sisters
So they can more readily
Shave their heads
Unfurl their fingertips
Elongate their grasp
On each other and
New territory alike
To colonize and repopulate
In reckless abandon
With speed unknown to
Lowly, lovely spotted hats and sponges

All of the emotions
In a forest of metropoleis
All the while watching
Waiting
For another
Drip
 Drip
 Drop
Drip
 Drip
 Drop
Drip
 Drop
All similar but not the same
Drop of water
Drop of pain
Drop of sunshine
Drop of rain

.....

So Maybe Instead, I'll Just Say Goodbye

COREY WHITLEY

.....

I'm not sure you'll ever forgive me. I'm not even sure you can. I understand. It's different now, you know? Things are so different now. Or, maybe it's me who needs to forgive you? I'm not sure. Maybe it's me that feels something is owed? Owed more than this existence! This life! Or, this type of life.

But, you know it wasn't always like this. Do you even remember? Do you remember when we first met? That morning as an infant. You pushed yourself up at the edge of the ottoman, then smiled at the world, hoping it would acknowledge such a brilliant accomplishment. The coordinated synergy of thought dictating movement. You made that happen! We made that happen! And as time passed we worked on our talents. You told me what to do and I followed suit. Although, I was still young too. Still learning how to harness our power. I made mistakes that led to tears on your face and the tears on my skin. But every day we got stronger. Until before we knew it, we were off and running.

God how I miss those days! Summers spent in the driveway playing one-on-one with your father. He never took it easy on us. He always pushed us. I think that's what made us want it more. And when we beat him for the first time? Remember? That bittersweet joy! You looked back at him with that smile on your face and the sweat on your chest. His head still facing down with his hands on his knees, catching his breath, and realizing that from that point forward something had changed. His emotions torn. His ego wounded by the loss, and still, the pride he felt in witnessing your success. What I would give to be able to play that game again. To strut and laugh like we did that afternoon. The twilight deepening as we walked through the screen door for dinner, his arm around your neck.

Or the feeling you used to get when we'd walk out on the golf course at night. The perfect combination of cool and prickly. Ticklish and soft. The length of the grass finding its way between my toes. The evenness of its texture. The pressing deeper,

continued on next page

“So Maybe Instead, I’ll Just Say Goodbye” [Continued]

to fully feel the firmness below. The indentations slowly disappearing as we moved down the fairway. And somehow, even now those memories seem so close, although I can’t fully recall the actual feeling. The impressions are still there but the sensations seem so foreign. The memories becoming less concrete with the passing of time. Our perceptual indentations disappearing like our footprints in the grass. Moving further away with each passing hour.

And then the accident. I hope you know I don’t blame you for that. Neither of us are to blame, ok? It could have happened to anyone, at any time. There’s no predicting something like that. Just unlucky you know? We’ve dove into pools like that so many times. So many GREAT times. Who knows why this time was different? Why this time you came floating up with your arms motionless at your sides and me, still submerged, lightly brushing against the shallow floor of the pool. When your friends realized that you weren’t joking they jumped in after you. They picked us up and moved us to the side. Thank god they were there. Imagine if they wouldn’t have been. Imagine how it could have been so different. I guess you’ve imagined that a hundred times by now. Maybe more. I have too. And do you remember that girl? What was her name? The one who couldn’t stop crying. You met her just that night. She was so scared. But I know she wasn’t as scared as we were. No one was as scared as we were.

And now here. Here in this chair made of metal, plastic and canvas. Here with a Velcro strap over our waist and our ass hanging through a hole in the seat. The cut out facing to the right. Here now in this bathroom made for us. Made for people like us. Made without tubs or steps. The shower handle placed into the center of the wall where we can reach it. Tile stretching along the floor from the sink to all four corners. Metal flip-down handles at either side of the toilet to give us support. Foam pads to prop me up. A rolling cabinet equipped with all of the necessities. Soap, soft wet wipes, a suppository, a blue and white container of water based lube, straight cath’s, a urinal, gloves, a copy of Sports Illustrated and a container full of alcohol

swabs. And a greeting card from your uncle saying, "Don't ever stop fighting. Don't ever give up." We used to play soccer with his kids when they would visit. Seems like such a long time ago now. It's only been a couple of months and still it seems so long ago. Since we've been like that. Since we've been whole.

But again it isn't anyone's fault. There's no use in blaming. It doesn't solve anything. And I want you to know I would change if I could. Even if we had to start over I would. If we had to go back to the beginning and relearn how to work in unison I would. I want it just as bad as you do. It's not like I have betrayed you. It's not as if I am doing this on purpose. Even though I know that's what you think sometimes. I hope you realize I am still trying too. Every time you will me to move. Every time you wish me to flinch. Every time you beg me to do anything. Any little thing, I am listening. I'm wishing too. But I can't feel your impulses anymore. I can't react to your mind. I can't DO anything!

And I'm sorry! I'm sorry for my weakness. I'm sorry for my weight. Sorry for the impediment I have become. The clumsy anchors tied around your torso. The pale, unfeeling wasted flesh and bone which drag beneath you unresponsive and undeserving of admiration. The constant reminder of your inabilities. The everyday presence of your embarrassment. The manifestation of your shame. I'm sorry I'm still a part of you, yet almost entirely apart FROM you. I serve no purpose anymore. My intended use I can't perform. And my dignity has disappeared with my function.

So there you have it. Maybe I wouldn't forgive me either. I get that. Maybe I wouldn't ever be able to accept our new relationship. I would find it hard to know how to treat something so dead, too. Something so useless. But I hope you know that I will always be yours. No matter how things have changed between us, I will always belong to you. And I realize now that I can't do any more for us. So maybe instead, I'll just say goodbye.

.....

Contributor Biographies

POETRY, PROSE AND VISUAL ART

.....

LARRY ALLEN

Larry Allen splits his professional life between clinical duties in the Section of Advanced Heart Failure and Transplantation and research activities with the Colorado Cardiovascular Outcomes Research Consortium. Off the Anschutz Medical Campus, Dr. Allen loves being in the outdoors with his wife (Renee) and two kids (Zachary 10, Maya 8). He recently placed 2nd in the first annual Sand Creek Photo Contest.

JESSICA BOAT LANDRY

Jessica Boat Landry is a 4th year medical student going into Pediatrics. Her work has previously appeared in The Human Touch.

BROOKE BREDBECK

Brooke is a second year medical student at CU. She has been reading to escape the “real” world since elementary school and is certain that fiction is the only thing that keeps her sane. These are some of her first attempts at writing. Brooke loves being around her wonderful friends and classmates, traveling, SCUBA, and a fierce game of Scrabble.

CAROLYN BREMER

Carolyn Bremer is a student in the Doctor of Physical Therapy program at the Anschutz Medical Campus. She uses photography as a way to interact more personally with the people and environments she encounters.

KEVIN BUNNELL

Kevin Bunnell is a retired medical educator for the Colorado Medical Society and the Health One Hospitals. He was a twenty year member of the Medical School CME Advisory Committee. He has published articles on Liberal Education in physician education. His poetry is a product of retirement.

JULIE CARPENTER

Julie Carpenter has recently retired from 40 years of family practice in Boulder, Colorado. She teaches on the clinical faculty facilitating small groups in PBL and Foundations of Doctoring programs for medical students. She is a graduate of Stanford University and NYU medical school. She has volunteered

as a physician in Haiti and in Tibet for the Surmang Foundation. She has previously published poetry in the *Mountaineer* and the *Gold Hill Calendar*.

GARLAND CASTAÑEDA

Garland is a third year medical student and California native. He is a proud Princeton man and budding GI doc who, as you may be able to infer, wants nothing to do with surgery ever again. This is his first-ever publication, and he has already been fending off kudos from friends, family, and former teachers for several weeks.

HENRY N. CLAMAN

Dr. Claman is a Distinguished Professor of Medicine and Immunology, Emeritus, and founder of the University of Colorado's effort in medical humanities. He received the 2009 Bonfils-Stanton Award in Science/Medicine for his discovery of T cell-B cell collaboration. He is the author of *Jewish Images in the Christian Church*, an analysis of medieval art.

KRISTEN DALY

Kristen Daly is an MPH candidate in Global Health at the Colorado School of Public Health. She holds a doctorate in Communication from the Columbia Journalism School and writes for *Risk Reversal*. Her interests lie at the intersection of technology, media and global health. Her writing has appeared in *Cinema Journal*, *Kinephanos*, *Peace Journal*, *Trail Times* and *Mines Magazine*.

PAUL DARBY

Paul Darby is a Licensed Professional Counselor who works as a therapist for a program affiliated with the School of Medicine in the Substance Abuse Division. He treats soldiers, victims of physical and sexual abuse and families impacted by multi-generational trauma. In addition he has helped communities heal trauma on an international level.

ANJALI DHURANDHAR

Anjali Dhurandhar, MD is Associate Director of the Arts and Humanities in Healthcare Program for the Center for Bioethics and Humanities and Associate Professor in the Department of Medicine at the University of Colorado, Denver. She completed a fellowship in Medical Humanities with a focus on developing curriculum in writing and the visual arts. She edits *Letters to a Third Year Student* for the School of Medicine.

“Contributor Biographies” [Continued]

JEFFREY DRUCK

Dr. Druck is an Associate Professor in the Department of Emergency Medicine. In addition to his clinical work, he serves as one of the associate residency directors for the Emergency Medicine residency program, as well as serving as the director for the Integrated Clinician's Course.

RYAN D'SOUZA

Ryan D'souza is a second-year medical student at the University of Colorado, who aspires to be a cardiologist. He was born in India, and has previously resided in Kuwait, Canada, New York, Connecticut, and presently, Colorado. As a student passionate about research, he currently pursues cardiology research and child abuse prevention research at the Anschutz Campus. He enjoys creating artwork, particularly glass painting and pencil shading, and also likes playing basketball in his spare time.

LOUIS FITCH

Louis Fitch works in dialysis units in Northern Colorado and has done research in the Renal Disease and Hypertension Department on Anschutz Medical Campus. He studied poetry in his undergraduate years and has been passionate about it ever since. Louis has also worked in urban underserved populations working with health advocacy and social justice, causes he hopes to continue as he enters medical school, class of 2018.

ROBBIE FLICK

Robbie Flick is a third year medical student. He is passionate about human rights in health care, and actively pursues operational research on tuberculosis in HIV-affected populations in Malawi.

LYNNE FOX

Lynne M. Fox has been a librarian at the University of Colorado since 1997. She finds the arts are a great respite from the tensions of contemporary life.

MICHAEL FRANK

Michael Frank is a third-year medical student at the University of Colorado School of Medicine. Supported by an affirming community and his loving wife, Becky, he enjoys staying connected to the meaningfulness of his chosen vocation. Mike aspires to provide empathic care to the medically underserved. His work previously appeared on the School of Medicine's Arts & Humanities in Healthcare website.

RYAN GOFFREDI

Ryan Goffredi works as an electron microscopist at Children's Hospital Colorado. He is also currently a graduate student in the Clinical Science program at University of Colorado Anschutz Medical Campus. In the future, Ryan would like to become the scientific director of an electron microscopy laboratory and teach a course on diagnostic ultrastructural pathology.

JEANETTE GUERRASIO

Jeannette Guerrasio, MD is an Associate Professor of Medicine in the Department of General Internal Medicine. While known on campus as a teacher, The Remediator, and a hospitalist, she is also a writer, poet and oboist in the university's orchestra.

LINDSAY HEUSER

Lindsay Heuser is a third year medical student at CU. She has enjoyed creative writing since middle school and hopes to continue it throughout her career as a physician. She anticipates pursuing a career in psychiatry.

GEORGE HO, JR.

George Ho, Jr., M.D. is a retired Rheumatologist and Palliative Care Physician. He spends his time in exercising, reading, writing, photography, volunteering and plans to be a coach in helping the lay person navigate the complicated American health care system. He hopes to stay active and healthy physically, mentally and spiritually.

AMY HOWARD

Amy Howard is a 3rd year doctor of physical therapy student at the University of Colorado. She received her undergraduate degree in Biology at Colorado College. In the future, she hopes to work as a pediatric physical therapist.

JEREMY HUA

Jeremy is a third year medical student at CU. He was born in Seattle where he attended the University of Washington and studied Bioengineering. He hopes to continue enjoying the sunlight that Colorado has to offer, and to one day practice as a hospitalist in a teaching institution.

“Contributor Biographies” [Continued]

GRAYSON HUBEN

Grayson Huben is a graduate student in the College of Nursing. In his free time he enjoys landscape photography, hiking, skiing, and cooking with friends. A humble appreciation for the nature world can be seen in the photographic images he captures.

SIMON KAMAU

Simon Kamau works as a Graduate Assistant in the Department of Nursing Sciences, University of Kabianga, Kenya. Simon attended Moi University and is currently pursuing MS i-LEAD (Innovation in Leadership & Administration in Nursing & Healthcare Systems) University of Colorado Denver. He hopes to become a consultant/professor in health care systems management for the East African region. He loves poetry. Some of his publications can be viewed by clicking on the following links: https://www.researchgate.net/profile/Simon_Kamau/publications/, <http://hdl.handle.net/10217/78933>,

JENNIFER KEMP

Jennifer Kemp works as a Professional Research Assistant in the Department of Pediatrics Section of Nutrition. She obtained her M.S. degree in Food Science and Nutrition from Colorado State University. Jennifer measures zinc, iron and phytate levels in samples from various international clinical trials. She first became interested in photography while taking a photojournalism course in high school and has enjoyed photography as a hobby ever since.

MARTHA LEVINE

Martha Levine is a PhD candidate at the College of Nursing. Martha has been a labor and delivery nurse for 19 years and is still in practice. She enjoys a busy family life with her amazing husband David, and 4 wonderful children. Martha hopes to draw attention to the challenges of self-recognition of postpartum depression and support childbearing women.

DANIEL LOLLAR

Daniel Lollar is currently training as a Trauma/ Acute Care Surgery fellow at Denver Health Medical Center and the University of Colorado Hospital. He began writing poetry in Junior High, a tradition he later learned he inherited from his father. This is his first published work.

ANNIE MAGGARD

Annie Maggard is an accelerated BSN student in the College of Nursing at Anschutz. She hails from eastern Kentucky and hopes to return to Appalachia to practice nursing in a rural, underserved setting. She has previous bachelor's and master's degrees in anthropology, with a minor in creative writing. She won the 2007 Flo Gault Student Poetry Prize from Sarabande Books, and her poetry can be found in the 2011 issue of Matter Journal by Wolverine Farm Publishing.

CHANTEL MITTON

Chantel Mitton is a Doctor of Physical Therapy student who will graduate in 2015. Chantel obtained her undergraduate degree in Exercise and Sport Science from the University of Utah. In the future, she hopes to work in an outpatient setting in a rural community. Her essay work won recognition in 2009.

EBELE MOGO

Ebele is a Doctor of Public Health Candidate and also the President of Engage Africa Foundation that aims to bring an end to noncommunicable diseases in Africa. Her poetry has been published in the Kalahari review, Pennwood review, Poetry Potion, Sentinel Nigeria among other publications. She is working on a poetry collection that will be published this summer. Visit www.streetsideconvos.com to follow her on her creative journey.

CRISTINA MOONEY

Cristina Mooney is the Admin Office Manager at the Health Sciences Library. She has been writing poetry, short stories and music since she was 5 years old. She is a native of California and has been a transplant since March 2012. After finding her home here at AMC she has been able to focus her energy on compiling her first book of poetry and studying natural medicine in her spare time.

EMILY MORENO

Emily Moreno, MSPH, MA is a second year medical student at the University of Colorado. She worked in the medical field in various capacities for 12 years prior to attending medical school. While studying Bioethics at the University of Padua, in northern Italy, she was fortunate enough to see the first anatomical theater, built in 1595, and the podium that Galileo lectured from.

“Contributor Biographies” [Continued]

AMY NACHT

Amy Nacht is a Senior Instructor for the University of Colorado College of Nursing and Associate Director for the University Nurse Midwives clinical faculty practice. Amy is completing her MPH at the CSPH and is actively involved in global health projects with the Center for Global Health. Amy is also involved in medical and resident education within the Ob/Gyn department.

JOHN NEAL

John Arthur Neal is the Program Manager for the Colorado Biostatistics Consortium, a unit in the Dept of Biostatistics and Informatics, Colorado School of Public Health. In his spare time, he has written eight novels, several screenplays, and a dozen short stories. One of his stories, “What To Do About Mom,” appeared in *The Human Touch* 2008. Nothing else has been published yet, and he would appreciate any literary contacts.

JESSICA NETZEL

Jessica Netzel is a CU Denver Nurse Midwifery student who is graduating August 2014 with her MS. She has a huge passion for improving maternal and neonatal mortality and quality of care worldwide. Jessica is a United States Air Force scholarship student and will be serving as an active duty officer after graduation. She hopes her picture inspires you to help others, no matter how small the gesture may be.

PHILLIP NICKERSON

Phillip Nickerson is a second year student in the School of Medicine. As a child his parents required that he and his siblings memorize a poem or dramatic passage each week and recite it with appropriate flair at a weekly family gathering. Evidence of this still exists in the form of embarrassing home videos. Phillip would like to work in one of the surgical specialties and hopes to someday write and publish an interesting book (or books!).

LESLIE PALACIOS-HELGESON

Leslie Palacios-Helgeson is a second year medical student at Anschutz. She has had work appear in the Gonzaga University arts anthology *Reflection* as well as in previous editions of *The Human Touch*. Her other creative interests include theatre, knitting and fiber arts. She hopes to go into Obstetrics and Gynecology.

KAUSER PARVEEN

Kauser Parveen is a 2nd year mature nursing student in Mental Health. She has previously worked with voluntary organisations and currently undertakes charity work. She has previously been published in various anthologies, but would like to continue with her poetry as a hobby.

SALLY PEACH

Sally Peach is a third year MD/PhD student in the Molecular Biology Program. Her poem is based on experiences in the mountains of northern Ethiopia, where she travelled after taking USMLE Step One and before starting her PhD research. Without the cheerleading and critiques of Stevie, Sheri, and Warren, her words would probably never find their way to the page.

HUY PHAN

Huy Phan is a first-year medical student at the University of Colorado School of Medicine. After graduating from Stanford University with a B.S. in Biology, Huy spent his gap year working in Quality Improvement at Stanford Hospital and Clinics. Huy enjoys spending his free time playing sports, exploring new places, and perfecting the art of picture-taking. Aside from being a student, Huy is also a freelance photographer with interests in landscape and portrait photography.

MARY D. POOLE

Mary D. Poole moved to Denver after retirement from two careers in healthcare. She served for 16 years as Vice President for Marketing and Development, Southwest Community Health Services, and Executive Director, Presbyterian Healthcare Foundation, Albuquerque, New Mexico, and an additional 10 years as Senior Partner for Research and Studies, Jerold Panas Linzy and Partners, Consultants in Philanthropy, Chicago. Mary began writing poetry after a diagnosis of macular degeneration. Her poetry is included in her memoir, "Before I Forget".

ROMANY REDMAN

Romany Redman is a second year medical student at CU. Before moving to Colorado, Romany worked in a Russian Tuberculosis Hospital and played fiddle in one of the first Irish pub bands of Siberia. Romany strongly believes in the healing power of art as well as the phenomenal capacity of folk traditions such as music and dance to create and support healthy communities.

MARC RINGEL

Marc Ringel is a Senior Clinical Instructor in the Department of Family Medicine. He has considered himself a writer since a family trip to Colorado when he returned to his second grade class in Chicago to write a 24-page essay about his adventure on a Big Chief Writing Tablet. Besides his day job as a family physician and teacher, Marc has been as a commentator on public radio and a columnist for multiple publications.

SAMMIE ROBERTS

Sammie Roberts is a medical student at CU Denver's School of Medicine and plans to pursue a career in ophthalmology. She aspires to never lose sight of beauty in medicine and in the people around her.

STEVEN ROBINSON

Steven Robinson is the Research Manager for the Skin Cancer Biorepository in the Division of Medical Oncology. He has held this position since 2004 and has been writing poems and songs since he can remember.

ROSA RODRIGUEZ

Rosa Rodriguez is an MD/PhD student who is originally from Miami, FL. Her interests are in autoimmune disorders and complement. She has always enjoyed painting, writing poetry, and playing piano.

LAUREN ROLES

Lauren Roles is a fourth year medical student at the University of Colorado, hoping to enter an internal medicine residency next year. She plans for an eventual career in geriatrics. Writing has been a life long passion.

TERESA SAKRAIDA

Teresa Sakraida is a College of Nursing faculty member who studies transitions to self-management and self-management support intervention. Her publications are found in the Western Journal of Nursing Research, Applied Nursing Research, Nursing Research, and Archives of Psychiatric Nursing. Her poetry works previously appeared in the Human Touch in 2009 and 2011.

SARA SCANNELL

Sara Scannell is finishing medical school this year to pursue a career in internal medicine. She comes from an artistic family and considers herself creatively inclined, primarily manifested in singing and songwriting. She also enjoys writing and practicing amateur photography. Her prose and poetry were previously published in her high school literary anthology.

GAMINI SIRIWARDANA

Gamini is a research associate attached to the department of medicine. A self taught 'hobby-artist', he enjoys the Plein-Air style of painting. He believes that every place has a beautiful moment and it is the timing and not the place that is critical in a painting. In addition, a painting of a familiar place brings back memories to many. An artist ought to be able use these values and place them on canvas.

HALEY SMITH

Haley Smith is a first year Physician Assistant student at the University of Colorado Denver. Her work has been featured in art anthologies at her undergraduate institution, Grove City College, and has won multiple awards at high school art competitions. She intends to continue painting alongside her work as a PA and to merge insights from medicine with her art.

JESSICA SMITH

Jessica Smith previously attended CU Boulder and graduated with two degrees: a BA in Integrative Physiology, and a BFA in Studio Arts with Honors. Jessica is currently attending the College of Nursing in her pursuit of a BSN, where her interests within the Arts and Sciences seem to blend perfectly. Following graduation, she hopes to work within the greater metro area in Complimentary and Alternative Medicine, while continuing her love of creating art.

JASON WEISS

Jason Weiss serves as Research Coordinator for the Office of Research and Scholarship in the College of Nursing. He stands a little over six-feet tall (185.5 cm) and weighs a little under 180 pounds (81.5 kg). His blood type is AB-. He spends his free time making his mother happy.

DAWN WHITE

Dawn White works as an Administrative Assistant in the Barbara Davis Center for Childhood Diabetes Adult Clinic and an Editorial Coordinator for a medical journal (Diabetes Technology & Therapeutics). Her poems have previously appeared in Poetry.Com and she is currently writing a collection of erotic poetry.

HAYLEY WHITE

Hayley White is a student in the accelerated BSN program at the CU College of Nursing. Hayley has a background in the niche field of beekeeping-for-elephant-conservation (it's a thing) but aspires to public health nursing, perhaps internationally. Perhaps with a honey business on the side. She enjoys comedy writing and finds no shortage of material working in the health profession.

COREY WHITLEY

Corey Whitley is currently a Bachelors of Nursing student, who works as an Advance Care Partner on the Cardio-Thoracic Intensive Care Unit at University of Colorado Hospital. He enjoys photography and golf, throwing the frisbee with his dog Riley, and traveling around the globe with his wife Renee. Corey can't wait to graduate and begin his career taking care of the countless individuals who continually inspire him every day.

HELENA WINSTON

Helena Winston is a third-year medical student at the University of Colorado School of Medicine. She has published pieces in the AMA's Virtual Mentor and CU Today, as well as artUS. She was formerly Associate Editor at the Guggenheim Museum, New York; taught art history at Pratt Institute, Brooklyn; and received her MPhils in Art History (from the City University of New York Graduate Center) and Material Anthropology (from Oxford University, England).

CAMRI WOLF

Camri Wolf is currently a third year medical student planning to enter a specialty in primary care. Camri is originally from Illinois and attended St. Ambrose University for undergrad where she studied Biology. Creative outlets, including writing, photography, and jewelry design are something she has always enjoyed. She plans to continue these hobbies as she pursues her career in medicine.

CHELSEA WOLF

Chelsea Wolf is a fourth year medical student at the University of Colorado School of Medicine. She will be going into Psychiatry and will begin a residency program in the field this summer. In the future, she hopes to pursue a career in Emergency Psychiatry and Medical Education.



Acknowledgements

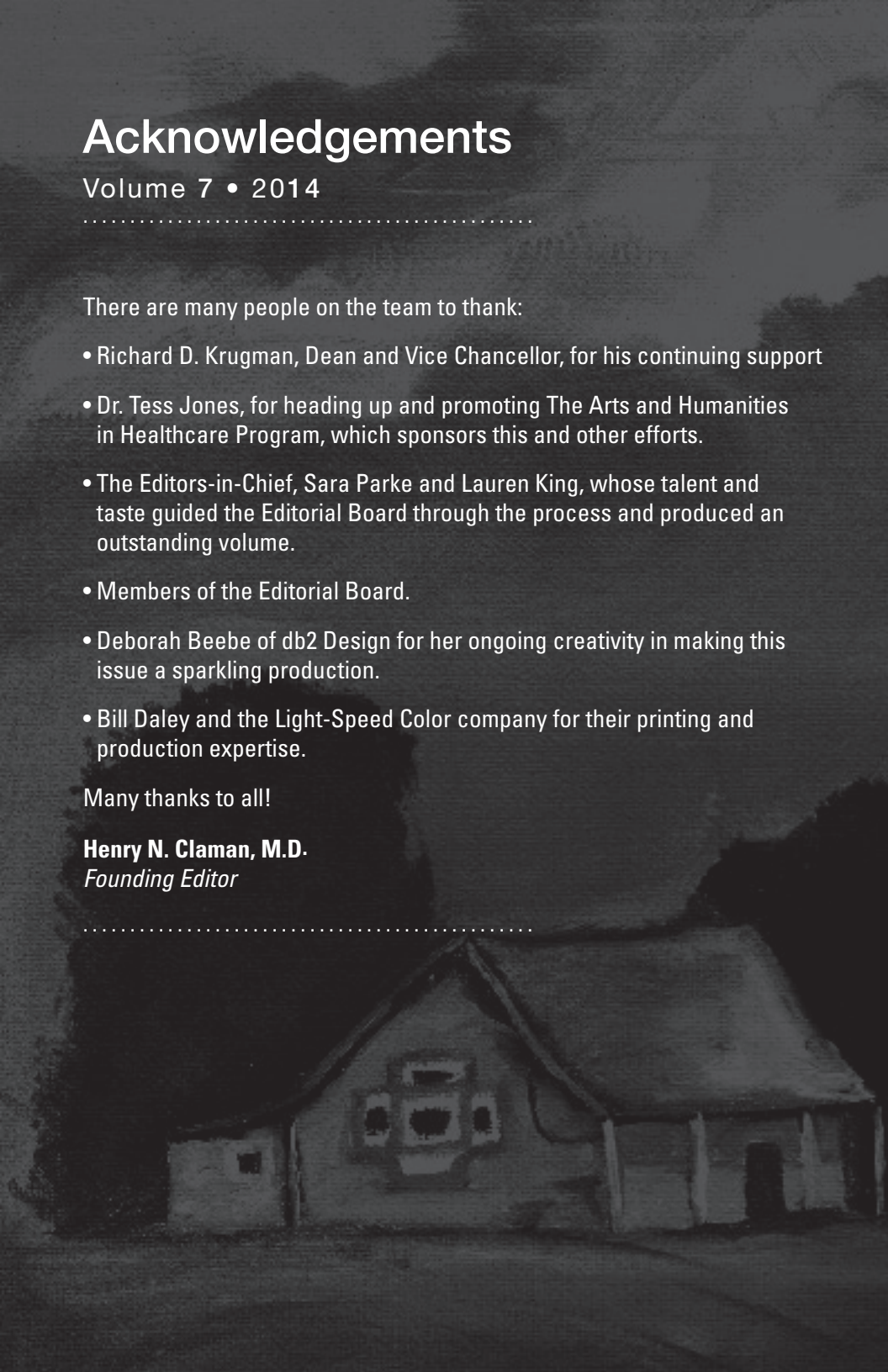
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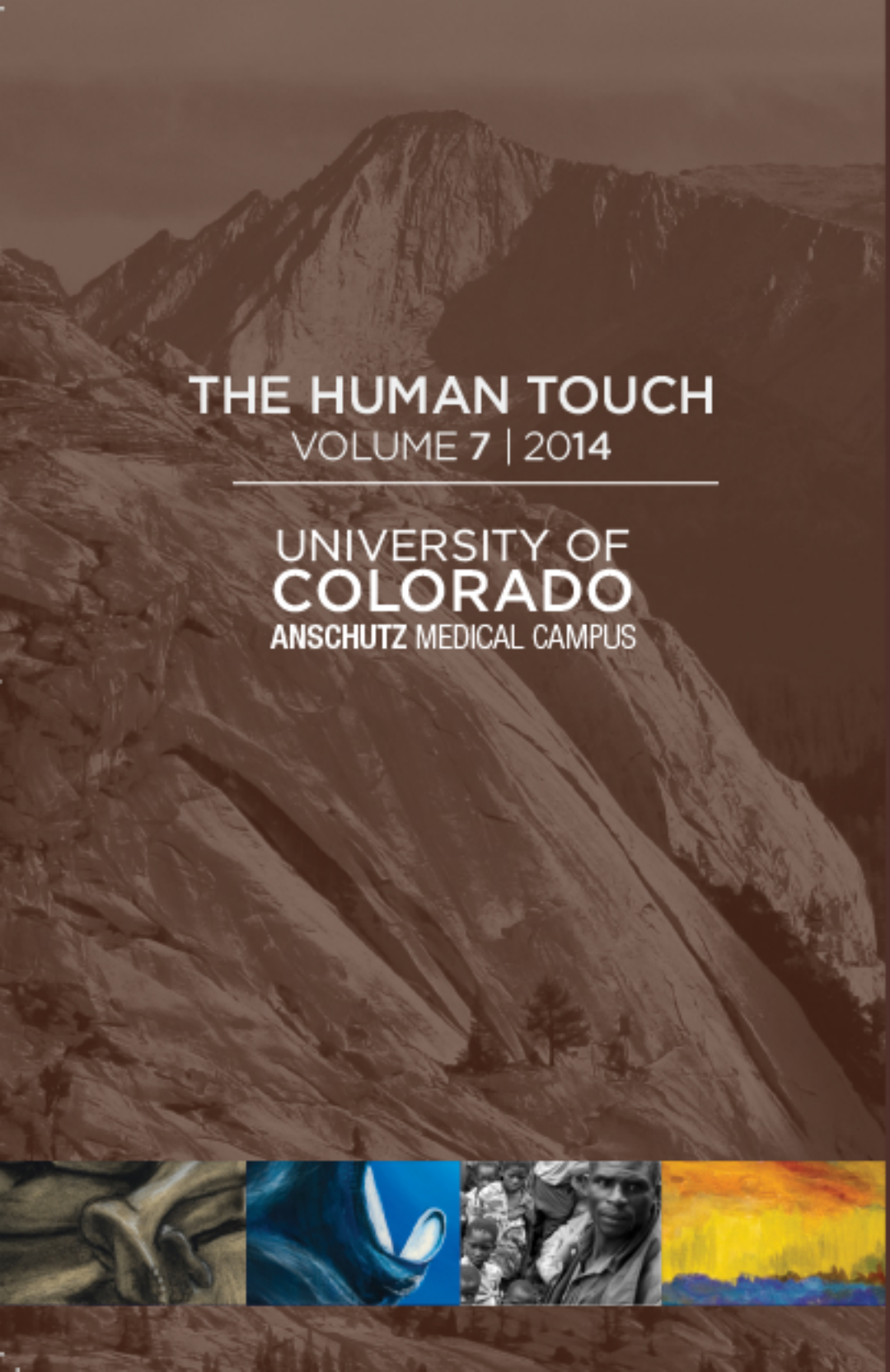
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Henry N. Claman, M.D.
Founding Editor





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