

WILD ONIONS

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HUMOR IN MEDICINE

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Wild Onions XXIV 2010

The title of our journal has raised a good deal of speculation. The wild onion is a common garden-variety weed, a hardy plant that grows almost anywhere and tends to spring up in unexpected places throughout the woods and fields and roadsides in this part of the country. It blossoms into an unusual purple flower and its underground bulb, if tasted, yields a pungent, spicy flavor. The wild onion is a symbol of the commonplace yet surprising beauty that is living and growing around us all the time, the spice that though uncultivated, unexpectedly thrives and – if we only take time to notice – enhances life.

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Wild Onions XXIV 2010

Wild Onions is an annual publication funded by The Doctors Kienle Center for Humanistic Medicine, Pennsylvania State University College of Medicine. It is a journal of poetry, prose, photography, and visual art created by members of the entire Hershey Medical Center community.

Entries are selected on the basis of artistic merit, representation of the broad diversity of the medical community, and recognition of the interplay between science and creativity that is essential to medicine as a human endeavor.

Faculty and staff—both clinical and non-clinical—patients, families, students, and volunteers are invited to submit original (not previously published) literary or artistic work on all topics. Photography or drawings may be submitted in either black and white or color format. All entries may be submitted to the Department of Humanities or electronically via wildonions@hmc.psu.edu. For an unbiased selection process, we ask that identifying information (author's name, relationship to Milton S. Hershey Medical Center, mailing address, and telephone number) be listed on a separate sheet of paper and sent along with the entry. If you wish to have your entry returned, please include a self-addressed envelope.

No portion of the journal may be reproduced by any process or technique without consent of the author. All submissions, inquiries, and requests for authors and current or past issues of *Wild Onions* can be directed to Managing Editor, Department of Humanities, H134, Penn State University College of Medicine, 500 University Drive, Hershey, PA 17033.

The aim of The Kienle Center is to advance the appreciation, knowledge, and practice of humane and humanistic medicine, defined as health care that is sympathetic, compassionate, and effective. *Wild Onions* serves this goal by encouraging literary and artistic work that seeks to describe and understand, with empathy, the experiences of giving and receiving health care.

Activities of The Doctors Kienle Center for Humanistic Medicine include:

The Kienle Service Grant, co-sponsored with the International Health Interest Group, for medical students engaged in volunteer work with underserved patients.

The Doctors Kienle Lectureship, which brings national leaders in humane medicine to Hershey Medical Center.

The Experience of Care Project, which teaches medical students through participant-observation studies.

The Doctors Kienle Prizes in literature, art, and photography.

The Galleries Within, an exhibit of biomedical art.

The Doctors Kienle Collection, materials concerning humanistic medical practice (located in the Harrell Library).

The Student Humanitarian Award, co-sponsored with The Association of Faculty and Friends, for a medical student.

The Mary Louise Witmer Jones Humanitarian Award, given annually to an outstanding resident.

The Nurse's Humanitarian Award, in honor of Lawrence F. Kienle, M.D.

Humanism in Medicine Awards, co-sponsored with The Arnold P. Gold Foundation, for a graduating medical student and for a faculty member.

The Kienle Cultural Series, a series of presentations in the arts and humanities.

Patient Portraits, photography exhibit by Joseph Gascho, M.D.

Introduction

John E. Neely, M.D.

Professor, Pediatrics, Humanities, and Family & Community Medicine

I am pleased to be the guest editor of *Wild Onions* 2010. The special theme of this issue is humor, but you will find a variety of subjects included. It is interesting that the very word “humor” has so many meanings. We thought of it here in the context of jokes and medicine, but it could just as easily have been thought of as the essences that flow through the body (as in the four humors of ancient Greek medicine). The very word “humor” sounds so much like “human.” This is the essence of the content of *Wild Onions*: works of art that represent—even flow through—our humanity. Medicine and the human condition are integrally entwined.

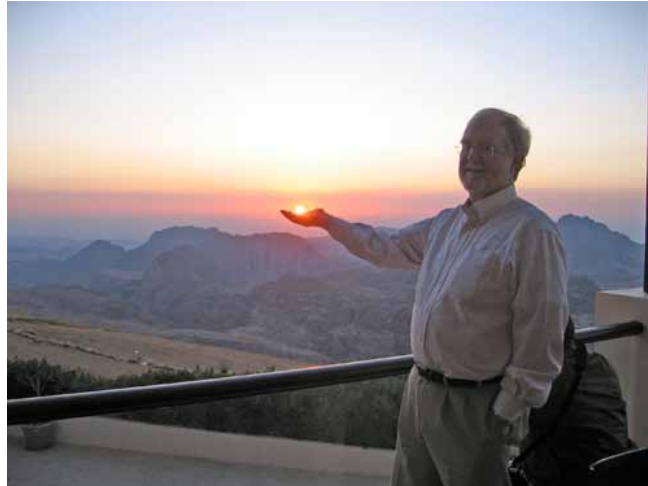
Those of us in medicine for a long time recall the origins of the SOAP note. This has become the standard way to write a note about a patient:

Subjective, Objective, Assessment, Plan. The Subjective portion was intended to record the patient’s story “in his/her own words.” I was somewhat surprised last year when one of my students noted they were taught to put the Subjective portion in the third person (“the patient complained of abdominal pain of two weeks duration,” not “I have had pain in my stomach for two weeks”). The student was told that this made the note more scientific. This anecdote, I believe, points to one of the core concerns about today’s medicine and why I feel so strongly that all levels of medical education should include the Humanities. In the name of science and “evidence-based medicine” we run the risk of losing a human connection with our patients.

For most of my career I have been a pediatrician. If you reviewed my patient records you would find several interesting things, although I have also found them to be useful in the adult world. First, I always note personal issues that my patient has even though they are not necessarily immediately related to the problem of the day. “What grade are you in?” or “What is your teacher’s name?” or (my favorite) “Does anyone get into trouble in class?” The latter nearly always gets an animated reply: “Oh yes! Johnny is always getting out of his seat!” Imagine how my little patient feels the next time he or she comes in and I ask if Mrs. Miller is still a nice teacher or if Johnny is still acting up. It’s a personal connection. A way to know I care about my patient’s actual life.

Often I share jokes—nearly always second-grade groaners. At the next visit my patient usually comes back grinning ear-to-ear as I walk into the room because he or she is now bursting to share a joke with me. I once got a homemade book proudly presented by a patient whose class had assembled a whole joke book just for me. My patients nearly always have serious, sometimes terminal illnesses. But jokes or personal inquiries are a way to maintain a sense of life and caring. Patients want to know you are with them for the journey, no matter the outcome.

Humor comes in all forms in medicine but I think the main purpose of jokes, in the end, is to enhance the human experience. The writings, drawings, and photos in the pages that follow are personal windows into life. So I welcome you to take in the offerings you are about to experience. No joke!





Humor in Medicine

Welcome to this year's Special Section of *Wild Onions*

"Through humor, you can soften some of the worst blows that life delivers. And once you find laughter, no matter how painful your situation might be, you can survive it."

-Bill Cosby

Being in the hospital is serious business. After all, no one comes for the ambiance or cuisine. But often it is in the most serious and dire situations when we need to laugh the most. At times, one worries about the appropriateness of being light-hearted or witty in such a traditionally austere environment. The truth is, no disease occurs in a vacuum and life does not cease to exist for patients, their families or their caregivers. In the end, part of being human (perhaps the best part) is our innate ability to smile, laugh, and be happy in some of our most trying times. Whether it is a patient who sees the irony in her illness or a medical student cartooning a stressful rotation, there is humor everywhere in the hospital, and we feel incredibly fortunate to have chronicled some of these experiences in journal form. As editors, we were simply amazed at the creative, uplifting and just plain hilarious entries we received this year. We hope you enjoy the special section and this edition of *Wild Onions* as much as we enjoyed putting it together.

Most Sincerely,
Shilpa and Tarik



As senior editors we would like to especially thank our friend and managing editor, Deb Tomazin. Without her superior artistic vision and outstanding graphic design skills this magazine would simply be impossible. You are the person who puts it all together. Thank you so much Deb!



Shilpa Sawardekar is a fourth-year medical student from State College, PA. After spending much of her childhood abroad, Shilpa received her Bachelor of Science degree from Penn State. Shilpa flies around on a broom and engages in casting magic spells much like Harry Potter (a Shilpa favorite). When not battling evil, she enjoys photography, reading and television/movies. Shilpa is also fond of gangster rap, 22-inch spinners and keeping it real. She has been an intricate part of *Wild Onions* since her first year as a medical student. Without Shilpa, this year's *Wild Onions* would not have been possible. Her amazing work ethic and creativity will make her an outstanding doctor. And wizard.

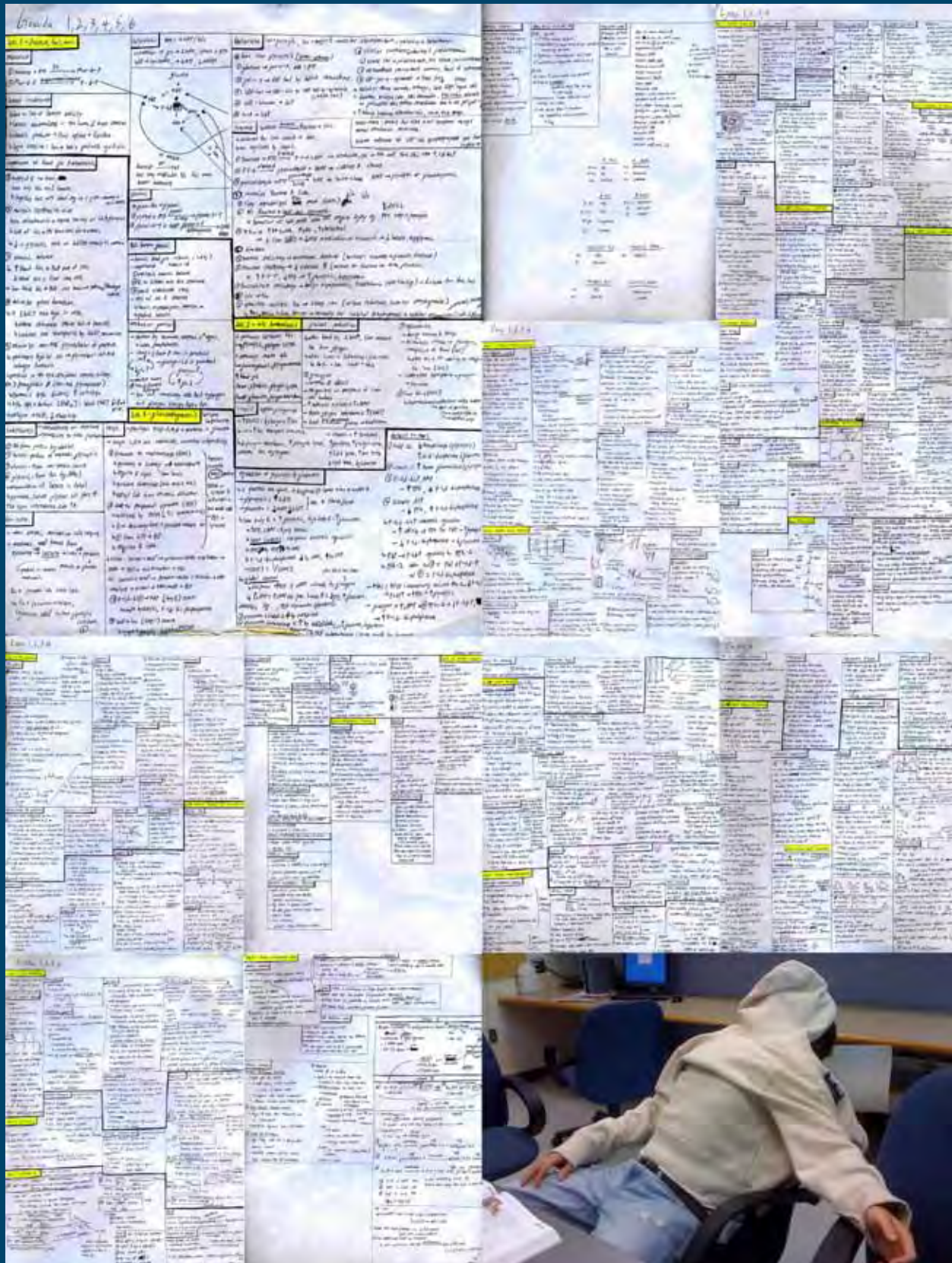
This biography is certified 100% true and written by her co-editor Tarik Ibrahim.

Tarik Ibrahim is a fourth-year medical student who was born and raised in Detroit with serious (some might say excessive) pride in all things Michigan. He spends the majority of his time following various Detroit and Michigan State sports teams, working on his fitness, reading monumental books like *The Fountainhead*, and on occasion even studying. His artistic eye and "get-it-done" attitude were invaluable in putting this journal together. I feel like a cooler person just by associating with him. Later this year he will be moving to Chicago to become a neurosurgeon (gasp!). I will call him whenever I have a headache. He better pick up.

This biography is certified 100% true and written by his co-editor Shilpa Sawardekar.

This Is What You Should Know for a CMBMP Exam

© Nick Ahn MS I



The Wild, Wacky World of Menus

© Lynelle David Patient

“Welcome to the Wild, Wacky World of Menus.
To continue this conversation in English, say “English”
For French, repeat “le francais”, and
For Spanish, please yell “Español!!”
(pause)

Thank you. Your choice is irrelevant.
I will continue in English.

To speak to Pax, Rusty, or Daisy,
please bark into the phone NOW..
(pause)

For Mindee, Jazz, Jasmine, Judah,
Or any of the other feline members of the family,
Don't bother.
They won't come to the phone anyway.
You know cats.

There are a few human residents here.
To speak with any of them,
Please enter your age, date of birth,
Nine digit social security number,
Home phone, cell phone and fax numbers,
Land, sea or ship-to-shore numbers (with area codes),
Separating each entry with a BURP..
(pause)

If you happen to succeed,
Press “pound”.
(LONG pause...)

Congratulations!

You are almost there
Now, to verify your identity,
We will also need
A sample of your blood for DNA testing.

First, please prick your finger
With the nearest sharp object.
If you are calling from
The new Y-phone
(up-to-date patches ARE required),
Simply squeeze one drop of blood
Directly into the slot marked “DNA”.

If you are NOT using a Y-phone,
You will have to call back
From any qualified,
Certified,
DNA Verification Telephone Device.
(pause) (pause) (pause)

“I'm sorry,
You have made an invalid entry.
Good-bye”
(click)

The Simple Life

© Donald E. Martin, M.D. Department of Anesthesiology





Salta

© Daniel Newman
Friend of Medical Student

For Rent

© Mariel Herbert MS II

One-room apartment: cozy, warm and wet, without bothersome natural light. The current tenant, who has lived here for the past nine months, will be moving out within the next five hours (or so). Friendly management likes to talk to you constantly throughout your stay, whether you wish them to or not. The landlady enjoys singing in a purely amateur capacity. Lullabies are her favorites; she is slightly tone-deaf. Food is also included! All meals are organic, and packed with vitamins and minerals, unless the landlady is craving cheeseburgers with pickles. At times you might feel that the walls are closing in on you, but do not be alarmed. People are just being curious. Please be aware that this womb does not come with a view.



Four Seasons of Medical School

© Shilpa Sawardekar MS IV



Past Medical History

© Jessica Lake MS I

My crazy story starts before age five.
Soon you will wonder how I'm still alive
It started in year one when I turned blue
For future clumsiness, perhaps a clue?

Severe lack of oxygen to the brain
Set forth a chain of events I'll explain.
A toddler ran me over at age two
To the medical world, my grand debut.

A broken leg was the first cast for me
From my toes all the way up to my knee.
Next was my arm at the young age of four
Stood on a chair and fell hard to the floor.

Twice before five head stitches were needed
One was my fault, my balance impeded.
The second was caused by my brother Drew
Doll carriages are not for people, true?

Also while four—this one is hard to beat—
Was hit by a car while crossing the street.
For three long days in a coma I lay
The medics saved me; for my life they prayed.

Me and a campfire, can you guess what's next?
You're right I fell in; I too am perplexed.
I should have been locked in a padded room
Since accidents started right from the womb!

Next there was a bike mishap at age nine.
I hit my head again but now I'm fine
My memory lapsed and still to this day
I don't know what happened; it's a bit gray.

Hit and run? Or as my mom likes to add
Did I hit a parked car...I'm not that bad?
A broken foot, an occasional sprain
Car accidents, a close call with a train!

This is my life, could it be just a phase
The broken bones and myself all ablaze.
I would like to think I'm better today
But I just broke a toe to my dismay.

My resolution is set for this year
To avoid injury, how is unclear.
I will do my best but if I cannot
I'm at a hospital, the perfect spot!

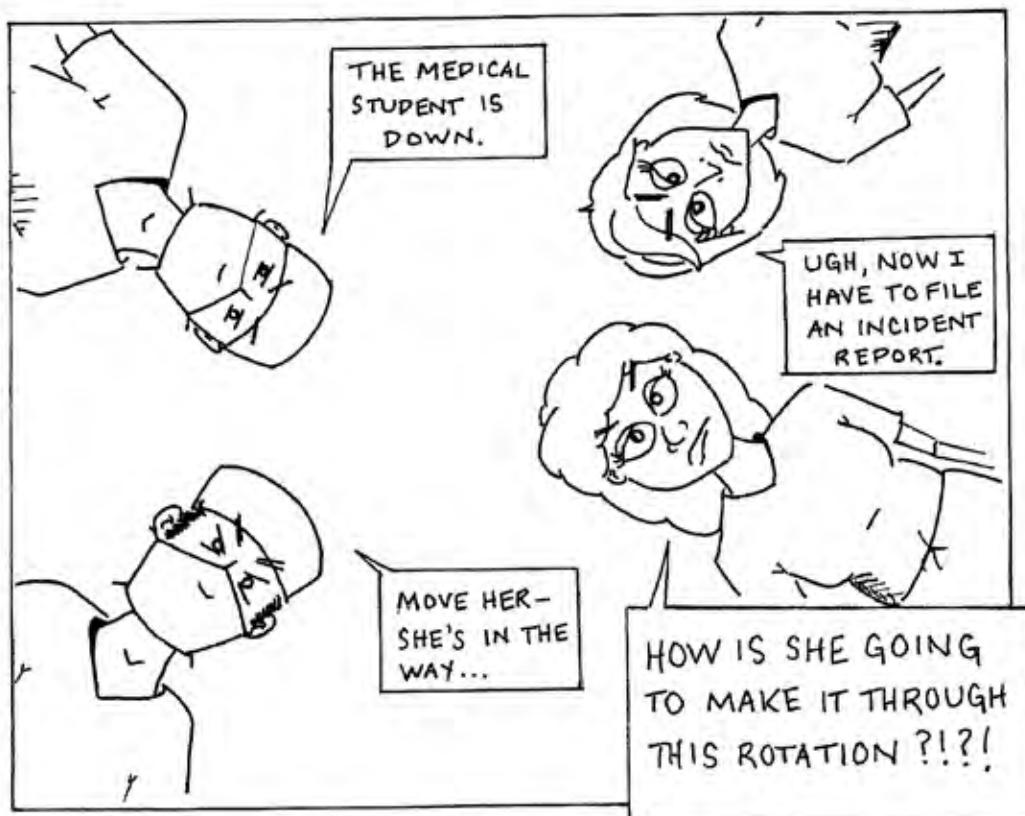
To be continued...



© Pamela Wagar MS I

Humor in Medicine

©Erin Murata MS IV



Full-Term Delivery

© J. O. Ballard, M.D.

Departments of Humanities and Medicine

Somewhere
in a morphine haze
jackhammer blasts
batter my back,
craggy boulders burst.
Searing white pain
promises
this stone's birth.

Diabetes: In a Lighter Vein

© Ananya Das Staff

Department of Orthopaedics & Rehabilitation

Honey, I can't call you 'honey' anymore
or you won't be any good for me,
I can't call you my sweetheart,
Sweet-n-Low heart it shall be.

I can't call you sugar
as I prick my fingers all day,
I hope you do not mind
if I call you *Splenda* today!

You are sweeter than *Equal*,
as sweet as *Nutrasweet* can be -
You are my favorite person in the world
because you come labeled sugar-free!

Things Kids Say

© Sigmund David Patient

I told my daughter we did not have much time
To spend at the carnival—only twenty minutes.
She replied, "That is a lot.
Twenty minutes is the time we get for recess."



Unaccustomed As We Are

© Roger Ford Patient

Winners of The Doctors Kienle Competition in Literature

Prizes are awarded yearly to authors of prose or verse works that are considered to be of exceptional artistic and humanistic merit. An outside judge determines awards, which range from \$100 to \$300. This year's judge for the Kienle Competition in Literature is Harold Schweizer, Ph.D.. Dr. Schweizer is the author of *Suffering and the Remedy of Art* (1997) and numerous articles; his new book, *On Waiting*, was published in 2008. Since then he has been working on a volume of poetry entitled *The Book of Stones and Angels*, parts of which have been published in *American Poetry Review*, *The New Orleans Review*, *The Cincinnati Review*, and other venues. Dr. Schweizer is John P. Crozer Professor of English Literature at Bucknell University.

First Place

Doing Nothing

© Benjamin Heatwole MS IV

The resident exited the woman's room with a checklist: set up an appointment with the oncologist, take a second look at the pathology report, and order more tests. All day, I had followed him around, listened to discussions, and asked questions. Every patient had a teaching point, something to learn. There were dozens of indications for surgery, nonsurgical options, and disease processes discussed—I do not remember any of those points. All I remember about that day took place in ten minutes.

They didn't teach us about this in two years of medical school. We had learned all manner of medical knowledge—anatomy, physiology, biochemistry. We had classes on how to interact with patients and gather information. We read literature and discussed humanism in the medical field. We were trained to answer questions.

The lecture on lymphoma had been just shy of a year ago. I had been in the back of the lecture hall half paying attention and half checking my email, while hearing three simultaneous conversations of gossip and weekend escapades. Later, I would review the lecture on my own, in between glancing at people walking past to the beat of the internet radio station blaring in my headphones. Which things were they likely to test on? How can I differentiate between the subtypes of this neoplastic disease? Questions needed an answer and knowledge needed to be gained amidst audio overload from people traffic, Pandora online, and the fan on my computer that was certain to take flight soon.

The clinic exam rooms usually had the loud hum of fluorescent lighting echoing off the sterile white walls and beige laminated flooring. The office was busy with many patients, residents, and students milling around and seeking guidance from the attending physician. Today, that sound was muted by something else that I had not fully experienced before. By a strict definition, it is the absence of audible sound waves; as I discovered, it encompasses so much more. The space between this young woman and me was filled with silence.

The silence paralyzed me so that I could not leave the room even though I was supposed to follow the resident. It was drawing me toward her side of the room and pushing me towards the door at the same time. My eyes were uncontrollably forced from the floor in front of me to her eyes, to her left supraclavicular scar, to the box of tissues on the countertop. My lips, tightly pursed, bore an expressional attempt at empathy mixed with inexperience and doubt.

Silence had an opposite effect on my mind: my thoughts were uninhibited by external disruption. Prognosis in Hodgkin's is good. Did she even think this was a possible outcome of the biopsy? Hopefully it is an early stage. Does she have any kids? She looks upset. Should I put my hand on her shoulder? Does she want me to say anything? What is initial treatment? What must she be thinking?

I am uncomfortable and I have nothing to offer. If she had questions, I could try to answer. If she needed to call someone, I could get her a phone. I am willing to go anywhere, say anything, do anything. . . do something. I have practiced doing and I have practiced talking. I have not practiced this.

I cannot hold my tongue back, and I quietly repeat the likelihood of remission. I am about to transition into asking about her support systems, the familiar territory of a social history. She counters by repeating rhetorically, "I don't feel sick, and now I have cancer?" I rack my brain for a way to put a positive spin on the situation. What does she need to hear me say? I do not want to say the wrong thing again, so I retreat back into the silence.

Another minute passes and I notice a change in her posture. Elbows have been lifted from the arms of her chair, and now her hands are on her knees, starting to support her upper body weight as she begins to get up. Her gaze is now fixed and focused on the door behind me. With a confidence of voice that seemed to surprise even her, she relayed that she would be okay. Then added "Thank you."

I wanted to ask why she thanked me. I had done everything wrong. I was nervous instead of calm, did not provide her with useful information, just sat there as a seemingly helpless presence. I felt that I could not leave this patient alone after hearing her diagnosis, but what had I done? After years of doing work amidst distractions, I got my first lesson in an equally important skill—doing nothing in silence.

Judge's Comments:

In this poignant, brief narrative medical practitioners are urged to be consciously present to a patient rather than merely to perform a function. The author succeeds in conveying how difficult it is to learn to be silent, how medical training focuses almost exclusively on doing rather than being, and how a person's proximity to another may lead to a deeper sense of empathy than verbal communication. What is particularly moving in this piece is that in the mere "ten minutes" of the young doctor's encounter with the patient, years of medical training suddenly appear in a different light. This is a useful and inspiring text for caregivers and medical practitioners alike.

Second Place

The Last Best Vidalia

© Judy Schaefer, R.N.

Member of the Doctors Kienle Center for Humanistic Medicine

We get into these conversations –
 private ones that cautiously circle
 experiences like peeling an onion
 –those large round Vidalias
 The striations, a bell, a sound
 that peals through the Pennsylvania valley
 A taste clear and as pure as water,
 once past the thin brown skin.
 Now late July and I hoard
 this last Vidalia on the low rung
 shelf in silent cool refrigeration:
 Cut small slices to top a salad
 Steal chunks directly to my mouth
 Crisp as apple, sweet as talk
 of gradual revelation
 opening across a flat Georgia field.

Judge's Comments:

This poem compares the layered “gradual revelation[s]” of private conversations to the “peeling [of] an onion.” The description of the process of peeling and the sound of the peeling bell, whose shape recalls the onion’s form, result in what seem to be sudden disclosures in the middle of the poem: “A taste clear and as pure as water.” The pleasures of such verbal communications are heightened by the cultivation of silence represented in the “silent cool refrigeration” of the onion. Only at the end of the poem, when the revelations open “across a flat Georgia field,” do we realize that this might be a telephone communication with a person from Pennsylvania. Distance, in other words, does not prevent deep, communal understanding.

Third Place

4 YO Wisdom

© Brittney Irey MS IV

Ward B, 5th door on the left. A Broadway star’s dressing room.
 She wore a gold princess dress. Crown pushed up on a pink bandana.
 Violet hues against pale skin,
 Ashen circles,
 Her remaining hair
 On the pillowcase.
 Her biggest challenge: oversized Cinderella slippers on an uncooperative stage.
 “I wish I could take all this away.”
 “Your magic wand isn’t real, Mommy.”
 I kept my head down, eyes on the drain. Wet paper towel in dry hands.

Judge's Comments:

The four-year-old (4 YO) girl in this poem performs, in the desperate guise of a fairy tale character, her hope in healing, while each short line in the middle of the poem concisely reveals how doomed the outcome of her illness will be. The little girl seems to realize that neither her own magic of “Ashen circles” (the dark circles under her eyes and also an allusion to the Cinderella fairy tale) or her mother’s magic (which we hear in her whispered, “I wish I could take all this away”) is working for her. The abrupt shift in perspective just before the final line is what really distinguishes this poem. Here, we suddenly share the feelings of awkwardness and embarrassment of the medical student through whose eyes we have been witnessing this intimate moment between a gravely ill daughter and the mother who can do nothing to cure her.

Honorable Mention

Continental Drift and Other Matters

©Anthony K. Sedun Son of Yvonne Sedun, R.N. Pain Clinic

The mountains along the 81 corridor noticed nothing
of our courtship. Two hour drives—often after school—and the trips
back home, usually late at night, between fog and fatigue,
snow and the stars, just to see you again.

They didn't budge or bow when we married in Scranton in June.
Although, I think we gave the priest at St. Mary's a near heart attack.
I guess the stress of us was too much for him. Remember?
You saw him at the hospital. He never did send a card, even.

The mountains stirred only superficially with the seasons.
Not for us, or the birth of our first child.
I can't imagine they'll be different in March when our second is born.

The earth is a quiet, curious thing when it comes to the movement of men.
Men matter, but mostly to men. Even without the words to notice them,
the earth spins and shifts, respire and records its own milestones.

And yet, these are the markers defining each age in the ongoing geology
of our lives. Though none may come to know us or our children,
though the land lives on noticing nothing of our grandeur,
our love has changed the way I see the mountains and understand
continental drift, the Sphinx, baseboard heating,
and other matters.

Judge's Comments:

In this fine-drawn poetic meditation on the indifference of the material world towards human hopes of significance and "grandeur," the author nevertheless finds consolation in the thought of "the ongoing geology / of our lives" and a sense of stoic courage in the solidity and continuity of "matters." Although not directly related to a medical context, this poem quietly urges us to pay attention to the earth's "milestones" and "markers" by which we experience our fragile, finite lives.

Honorable Mention

When Walking Felt Like Waltzing

© Jennifer Chun MS IV

hand holding wrinkled hand
a background of white
like fifty-three years before,
when walking felt like waltzing
two lives melded in to one
again becoming separate

eyes reflecting eyes
no words are spoken
silence expresses all
a lowered bed rail
slide in to close warmth

heart against heart
a familiar place
my dear, stay
just a little longer

Judge's Comments:

With great lyric intensity, this free verse poem considers the painful separation of “two lives melded in to one” at the time of dying. The juxtaposition of white bed sheet and the memory of a white wedding dress from a lifetime ago results in a stillness and finality that are moving and poignant—all the more because of the sparseness of the language of this poem. The scene depicted in this short lyric reminds us of the silent and profound resonance between two people who realize their imminent separation, a private communion invisible to our gaze except for the poet’s preserving it in time.

Winners of The Doctors Kienle Competition in Photography

Prizes are awarded yearly to photographers and visual artists whose works are considered to be of exceptional artistic and humanistic merit. This year's judge is Gene VanDyke, Ed.D.. Dr. VanDyke is the initiating founder of the Susquehanna Art Museum in Harrisburg, PA and has served as Chief of the Division of Arts and Sciences for the PA Department of Education. Author of various art and educational articles and an exhibiting artist, his paintings, fibers and jewelry have been exhibited in numerous galleries and national juried exhibitions. Dr. VanDyke is currently Associate Professor of Art at Messiah College, where he teaches studio courses and has developed both the undergraduate and graduate programs in art education.

First Place

La Paz

© Riva Das MS II



Judge's Comments:

Aptly capturing the three divisions of space—foreground, mid-ground and background—*La Paz* fulfills the formal requirements of classic art. The strong blue hue in the sky balances and grounds the intricate quilt-like pattern of the buildings and the rooftops. The snow-topped mountains easily create a strong focal point, subsequently leading us to the whites in the buildings and the smaller circular group of rooftops just slightly below that snow cap. Though not France, these rooftops could easily have inspired Cezanne and his Mont Sainte-Victoire paintings or Thiebaud's San Francisco scenes. Even untitled this landscape would speak to us of Bolivia: its color, its buildings and its powerful mountains.

Second Place

Stinson Beach California

© Amy Ni MS I



Judge's Comments:

Stinson Beach, California is another photograph that exemplifies the formal elements and principles of art. Capitalizing on a broad range of values, shades and tints, this piece makes the viewer want to shade her/his eyes from the bright light and its contrast. The captured motion is extraordinary. The seagull's wings lead us to the warmly-dressed running child. The child's motion as s/he runs up the beach and the waterline itself lead us to the horizon and back to the seagulls in a continuous motion. This type of design and motion can also be seen in many great works of art by landscape painters throughout the centuries.

Third Place

Center City Pittsburgh

© Roger Ford Patient



Judge's Comments:

Just a little over a half-century ago, Pittsburgh was a city covered in dirt from the steel mills. Residents daily washed this dirt from their porches and sidewalks. This contemporary photograph offers a new view of *Center City Pittsburgh* as synonymous with technology and robotic development, a city graced with outstanding institutions of research and education, and a city filled with major art museums, contemporary galleries, symphonies, dance, theatres, science museums, sports complexes, exquisite restaurants and more. The colors at once attest to a sleek and busy metropolitan hub. The rhythmic feel of the columns on the brick building lead our eye to the downtown. The nicely segmented thirds of the photographs enhance the depth and balance of the image.

Honorable Mention

Innocence, Rajasthan, India

© Arunganshu Das, Ph.D.

Penn State Hershey Cancer Institute, Department of Biochemistry and Molecular Biology



Judge's Comments:

Innocence, Rajasthan, India instantly causes us to enjoy the wonderful textures and colors within the photograph. The strong textures are highly contrasting to the softness of the young girl's cheeks and arms. As one of the few non-geometric items in the photograph, the young girl in the beautiful turquoise dress emerges as the focal point. Her gaze encourages us to wonder more about her life and the condition of her living and learning environments.

Winners of The Doctors Kienle Competition in Art

First Place

Jurassic Walk

© Jeannette Landis Daughter of Susan Landis, C.R.N.P. Department of Anesthesiology



Judge's Comments:

The outstanding composition of this image keeps the viewers' interest nicely within the work of the art. The red leads our eye to circulate around the painting. While we do so, we observe the varied images and types of dinosaurs. The trainer's size reinforces the great difference between the animals' size and his size. The artist's choice to simplify the background space with a marbled texture ensures that our focus remains on the primary figures in the foreground.

Second Place

Lonely Bench

© Rubaina Zaman MS I



Judge's Comments:

The bench invites us to enter this painting and to sit a while to enjoy the autumn colors and the contrast of sunlight and shadows. This piece reminds us of places we have enjoyed and look forward to going again. The painterly quality of the work is reminiscent of the impressionist painters that the American public has so long admired. A strong focal point and triangular composition attest to the artist's adherence to the formal aspects of art.

Third Place

Focus

© Taylor Olmsted MS II

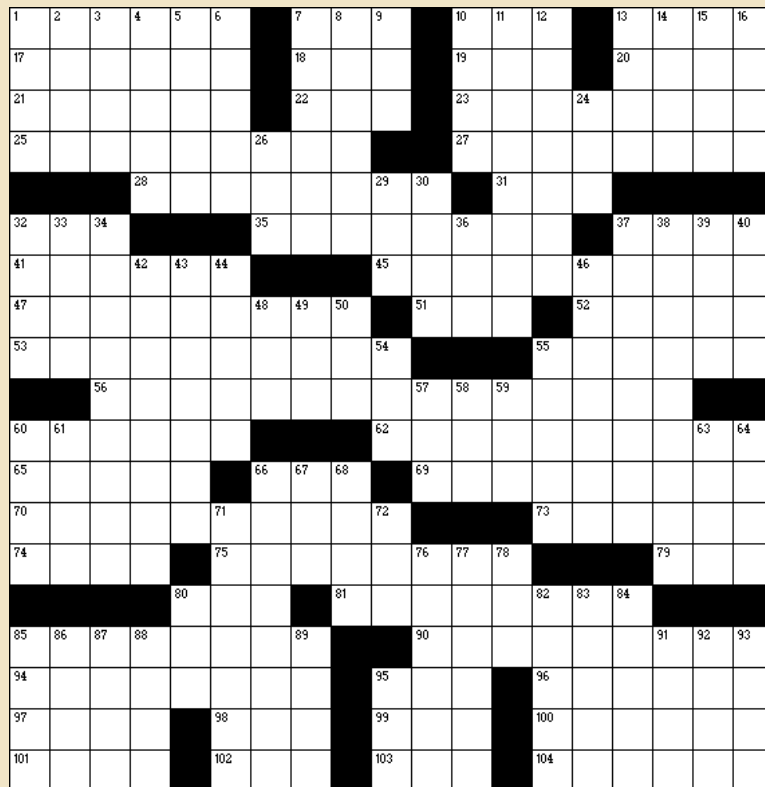


Judge's Comments:

A good painter often invents a way to apply paint in a painterly manner. This is true of this artist and this work. The use of cool colors hints at the cool temperatures in a typical operating room. As a group, cool colors tend to recede and become less important in a work of art. The artist capitalizes on this principle by introducing warm colors where she wants us to focus: on the surgeons' faces and hands. The artist has also captured the quality of the strong, glaring lights and the highlights and shadows they create.

There's so much that's new around here....

© Barbara E. Ostrov, M.D. Department of Pediatrics



Across

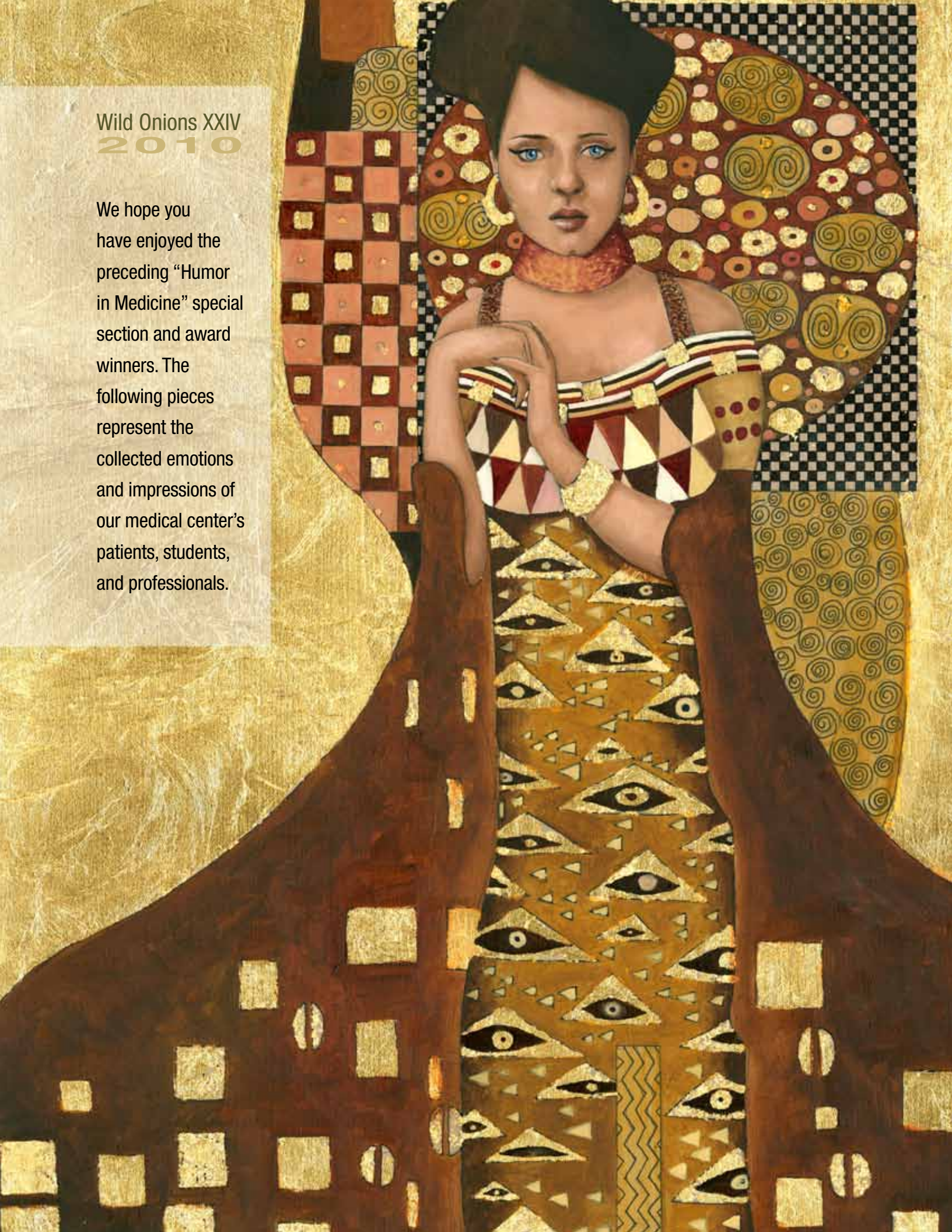
1. ID for Fido
7. Towards the rear of the boat
10. Ship prefix
13. Sod
17. Car decorative metal
18. Large classroom on the 3rd and 4th floors
19. Curly, Larry and ____
20. Arrow poison
21. Gangsta's Paradise singer
22. Part of a journey
23. Pure, clean
25. The newest building going up on campus
27. The newest building going up on campus
28. Portions
31. One of the coronary arteries, for short
32. Brief snooze
35. Determines a sector of a circle
37. Jacob's brother
41. Needed annually with your inspection
45. Newly reopened area for primary care on campus
47. Assistive device for a bad ankle and knee
51. Pig's place
52. Microwave in the electromagnetic spectrum
53. As sooty ____
55. Flowering shrub in the rose family
56. One of the newest buildings on campus
60. Agree to a salary
62. Tang Dynasty crypt feature
65. Generally accepted principle

66. Radius and ulna
 69. One of the newest renovated and enlarged areas on campus
 70. One of the newest places to park, with 100. across
 73. Website to find places to eat in Manhattan
 74. French angel
 75. Renown physicist
 79. Toledo to Pittsburgh dir.
 80. Strong personality
 81. Attributed to
 85. Newly renovated and combined unit, with 94. across
 90. Newly named entrance to the east campus
 94. See 85 across
 95. Offspring
 96. African lemur
 97. Nick and Nora's dog
 98. Cote d'Azur town
 99. ____ shirt
 100. See 70 across
 101. Org. leaders
 102. Reap
 103. Sum up
 104. Russian poet, and husband of Isadora Duncan
- ## Down
1. The year Charlemagne was crowned Emperor
 2. Worried, surprised interjection
 3. Investing term
 4. Payments on the interstate
 5. Chemical containing nitrogen

6. Captain Von Trapp's name
7. Completely fresh
8. California city in the San Joaquin Valley
9. Childhood running game
10. "Put some ____ into it"
11. Greek organization
12. ____ waves
13. Swamp cyrilla huckleberry
14. See 85 across
15. Actress Sofer
16. Touch
24. Hot-tub
26. ED practitioner
29. US corporation that 1st produced air bags for cars
30. Brothers of the first fraternity formed in the southern US
32. US university sports oversight org.
33. Org. for colleges of jurisprudence
34. Method of preparing for a movie role
36. Nov. 1st, 2009 required this clock change
37. Antagonize
38. Extras
39. French cloth measure
40. Meat grading org.
42. PS Hoffman played him
43. IOU in Spain
44. Actress Singh, star of Once Upon a Time in India
46. ____ as a toddler
48. Pub drink
49. Expense-employee meas.
50. Business computing program for modernizing systems
54. Attenders of ESL classes
55. Firm, as when lecturing to a child
57. Eye
58. ____-o-Shanter
59. Native suffix
60. Org. to prevent mistreatment of animals
61. Turkish name meaning saint
63. Disorder dx in those with severe reactions to the environment
64. Computer memory amount
66. Small plane crash in Mexico
67. ____ Tin Tin
68. Phoenix neighbor
71. Entertains
72. Kgs, for ex
76. Repeated
77. Pressed, as pants
78. Bite
80. Pesticide abbr.
82. Tan color
83. St. Vincent Millay and namesakes
84. Record producer of West Coast G-funk
85. Air duct system in buildings
86. Simplify
87. In regard to
88. Cert. electronics
89. Actress Barrymore
91. Persia
92. Frequent stylist to the stars, Lona
93. Garden of ____
95. Train terminal abbr.

Wild Onions XXIV
2010

We hope you have enjoyed the preceding "Humor in Medicine" special section and award winners. The following pieces represent the collected emotions and impressions of our medical center's patients, students, and professionals.



Little Cat Feet

© Xiaowei (Bill) Su MS I

I read a poem the other day
Sandbug? No, Sandburg penned the verse,
“The fog comes on little cat feet.”
What memories it stirred.

I wish my illness had come
On little cat feet,
Tiptoeing gracefully,
Curling up beside me, purring, twinkly-eyed.

A furry ball perhaps,
Settling in to play,
Tickle under its chin,
And whisk! Skirting away.

No, my illness came
On Ogre toes,
Crashing through thicket and dale,
Oh! What a start he made.

And what a silly, clumsy fellow,
Knocking over end-tables,
My grandmother’s good china too!
Rude, uninvited guest – I was expecting other company!

How I avoided him,
Left not-so-subtle hints,
But he’d found me,
Wanted to stay for tea.

How puzzled the doctors seemed,
When they asked how I broke my bones,
“It’s easy with Ogres for company,” I’d said,
They thought I meant my husband, the poor dear.

And the days that stretched into months,
And months into years, and years into...
Well, a fortnight past eternity it seemed.
By then he’d settled right in, figured out the coffeemaker, too.

And I still remember,
With chills down my spine,
What darkness came,
Him, plump as a pot roast, me, wasting away...

Colors faded, sunsets and roses now ashen gray,
And my cheeks sunken,
My hands, gaunt and trembling,
And my eyes... please! Don’t turn away!

And when did that Ogre up and leave me?
I must be getting old, I can’t seem to place it,
Did I defeat him somehow?
No, although it’s fun to pretend to be heroic.

Oh! Yes, it’s getting clearer now,
When he left he wasn’t so much an Ogre any more,
I’d gotten used to his company,
He liked a pinch of marmalade with his scones.

Or perhaps he was the same Ogre,
Perhaps I was the one that outgrew him,
I just seem to remember,
The day he left, on little cat feet, skirting away.

Previous Page:

A Tribute to Klimt’s Adele

© Jeannette Landis
Daughter of Susan Landis, C.R.N.P.
Department of Anesthesiology

My Passage to Serenity

© Brandon Oberweis MS IV



Sign Out

©Kari Kulp MS IV

This patient
Is my patient.
Today I must let him go
And trust him to your hands

I know that you will
Be kind,
Do your best

But tonight I will worry
That your best
Is not good enough
For him

Dr. Jim Hegarty

©Abigail Podany MS III

"Be careful about always jumping on the next big thing in medicine; at one point the next big thing was lobotomies." -- Dr. Jim Hegarty

In my second year of medical school, I was always hesitant about descending to the front of the class after lectures to ask questions of the professors. I only did it once, after Dr. Hegarty's lecture about I-forget-what. Something about him made him approachable, carrying his wisdom as a light cloud rather than an insurmountable pillar. And so that moment remains frozen in time in my mind: a professor smiling down on a timid medical student as she asked what was probably a silly question after an otherwise routine lecture.



Through the Glass

©Susan Landis, C.R.N.P.
Department of Anesthesiology

12:15 am

© Mirjana Jojic MS IV

11:35 pm – Flashes of green and blue hospital scrubs whizzed past my eyes as rain droplets drenched the white sweater shivering with me. Standing outside the emergency room entrance, I knew that three hours earlier I'd come here for experience, enlightenment, and to fulfill my rotation requirement. Now I could only think of home.

Home, with my own bed and its sheets that weren't crisp, but wrinkled from when I whipped about, furiously fighting off 6 am patient rounds. Home, where coiled spaghetti dripped with red, chunky meat sauce and... "Med student, come back in!" My mouth-watering thoughts interrupted by a nurse, I traipsed into the emergency room.

11:55 pm – As the third hip fracture patient of the night was rolled in, my shoulders slumped and a disappointed breath fizzed from my lips. When I volunteered for the emergency room, I expected gory hospital scenes to jerk me from my sheltered ideas of medicine. Instead, I was chained to a fence of stethoscopes and scalpels. The most exciting event of the night had been when Dr. Davis tripped over a crash cart. I'd been in the bathroom.

All night I'd seen painful catheter insertions, skateboarding injuries, and an intoxicated female with an embarrassing body piercing. These weren't enough. I didn't feel inspired to be a doctor. I felt inspired to take a shower. Just as I'd made up my mind to dash into the rain and put on a public display of nudity with intensely antibacterial soap, someone started dying.

12:05 am – "Male in his forties. Cardiac arrest. CPR initiated." The sentence fragments crackling through the radio were all it took. In milliseconds, the hospital staff went on full alert. Defcon 5 was initiated. The crash cart, my aforementioned source of amusement, transformed into a macabre symbol of survival. I was petrified. Anticipation and remorse weighed down my intestines like a tire swing would a skinny branch. I'd hoped for this, but now that it was happening, I lost hope.

12:13 am - Shouts separated by intermittent gasps were all I heard as the patient was wheeled into Room 10. I watched, and self-doubt and anxiety jabbed my stomach. I'd only planned a glimpse of the action, but curiosity ruled and hauled me behind the curtain, situating me between three flustered paramedics. "Are you an EMT?" a bearded man asked me suspiciously. "Medical student," I replied confidently. "Take over and practice your CPR." The paramedic motioned to the greenish-blue man on the stretcher whose complexion was complemented by the surrounding scrubs. My eyes momentarily followed the paramedic's thumb and then returned to his face. "No," I said, nodding. The man coaxed, but "No" was persistent. Finally, it no longer mattered.

12:15 am - "Time of death – 12:15am."

12:15:10 am - No breathing. No moving. No thinking. In that moment, my emotions sagged and my soul wrinkled. I stood stoic as they covered the man's head with a white sheet. Doctors in white coats recorded his final stats. The white curtain was drawn around his bed and the glass door gently shut on his corpse. I was alone.

12:19 am - It took a few minutes, following the formalities of mortality, for my body to realize my brain was still functioning and I'd been deserted by the hospital staff. I vaguely recall someone asking if I was OK and patting my shoulder with a white glove. No one knew I'd never been to a funeral, nor that this was the first time I'd seen someone's heart stop pumping life.

I shivered from the shock and left death in Room 10. I spent the rest of the night enveloped in a fog that wrestled further events from my memory and slinked them into the ensuing early morning hours. Finally, at 3 am, I said goodbye to the night crew and left.

3:05 am – Even though I'd walked in from the same storm merely eight hours ago, I walked out a different person. Before, death had been an ethereal force only as real as the concept of time; now, it was as solid as the drenched pavement leading to the parking lots. I could feel it beneath my feet, slippery and gray, warning me to worry less and care more. It winked from the bright yellow lanterns, reminding me to smile and laugh like each time was the first. It swayed in the dark green pine trees, whispering that the future began today, and that each passing second was another to live.

As I floated through the darkness, death gave me breath, sight and faith. And as I licked the salty droplets that, until then, had blended with the rain on my lips, I understood. Death gave me life.

Late-Night Rendezvous

© Carrie Rimel, R.N. Department of Emergency Medicine

The lights are dimmed, the atmosphere peaceful and calm as she speaks in the night: “Why, that’s so nice.... Yes, I agree.... Did the storm come yet?” The conversation continues into the wee hours of the morning, yet she doesn’t seem to tire. She laughs like she’s a young woman again. Her conversations never wane and only pause when I walk into her room to ask her if she feels alright. And looking up from the wall, my patient smiles and says, “Yes, I feel just fine. Did the storm come yet?” I tell her it did not, remind her to get some sleep, and walk out of the room as she continues her intimate conversation with nobody in particular.



Candyman

© Seth Ilgenfritz MS IV

- S:** 30 year old diabetic male. Refuses insulin.
- O:** Harley Davidson tattoo. Once proud, now shriveled. Skeletal face. Distended gut. Bones etched in full detail. Each muscle fully exposed beneath parchment skin.
- A:** Years of pride and misunderstanding exact cruel revenge.
- P:** Nothing left to live on but sugar coated bones and cigarettes.

The Menu

© Benjamin Heatwole MS IV

Chicken.

Flavored by free range life

A safe choice, easily prepared

4125

Pasta.

Sun-dried garnish at the side

Large portion, a challenge to complete

4127

Combination platter.

Can be split between two

Ribs, slowly smoked

A bit messy for some

Beef, well aged

Thick cut

Steak knife necessary

4129 A/B

Nightly special.

Jambalaya, fixed by head chef

Compounded flavors

Simmered in salient stock

Limited time only

ICU 19

Death Cart

© Joseph Gascho, M.D.

Department of Cardiology

It came from room 6115,

This gurney

Covered with a white sheet

Draping down two feet,

Pushed by a man wearing green scrubs.

Those who don't know,

Hurrying to see sick Uncle Harry,

Are surprised to see

What looks like

An empty cart

Rolling down the hall.

We know.

We don't stop and salute

As perhaps we should.

We think

Of riderless horses

Clopping down Pennsylvania Avenue.



Incoming

© Stacey Clardy, M.D., Ph.D. Neurology Resident

The Back Garden

© Seth Ilgenfritz MS IV

A lush and verdant garden in straight rows
Is a place filled with functional beauty.
Cultivated with care, each plant knows its place
A refuge to walk through each cool evening.
Later in spring weeds beginning to thrive
Sending down to the dark deep rooted plans
Surreptitious tendrils strangling life
Burning and tingling, struggling to stand
The weeds grew up quickly, order askew
They must be destroyed no matter the price
Pulling and hacking as weeds are removed
The tender spinal cord is sacrificed.
The tumor is banished, the battle done
Legs lie senseless, walking days are gone.

Funny

© John Messmer, M.D.
Department of Family
& Community Medicine

It's funny
To see you here again,
As though God hasn't had
Enough of the little trick
He's played.

It's funny
That you lost your hair;
Less trouble in the morning.
Nice selection of hats.
No kidding.

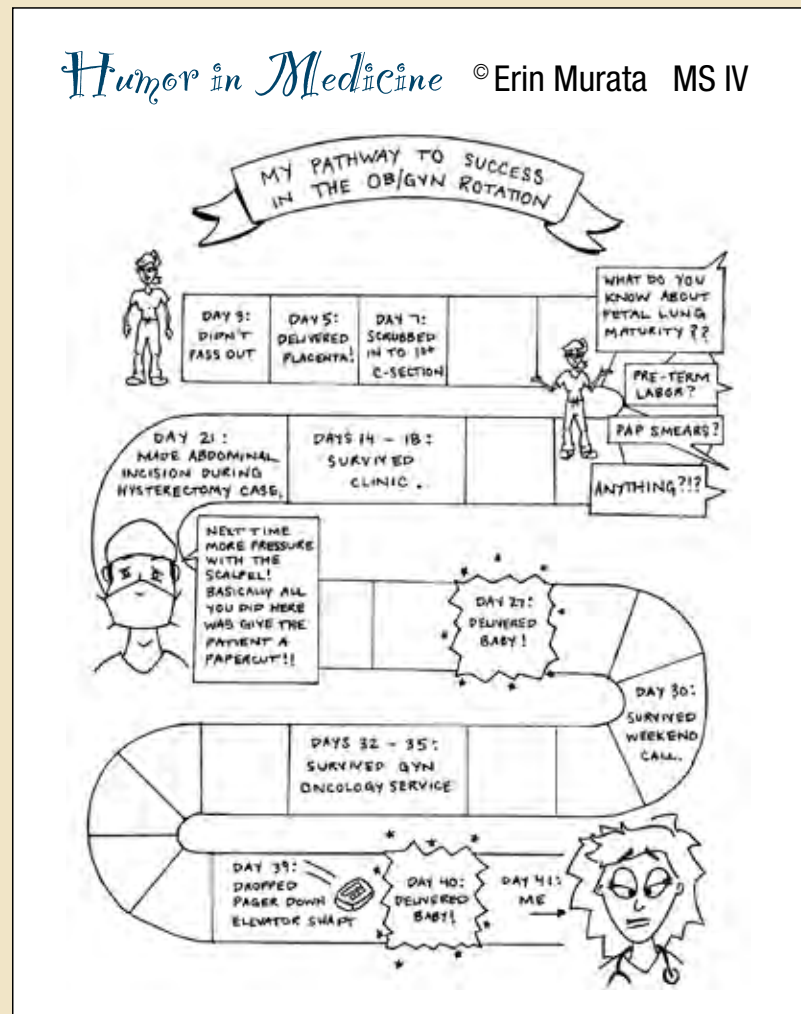
It's funny
How no one worries
That you eat too much
These days. The old wardrobe
Fits again.

It's funny,
Because of all the ones
I have witnessed in your
Situation before, you alone
Get the joke.

It's funny
Since you know the punch line:
No one gets out alive
After all. After you,
If you please.

It's funny.
You prepared for it
Your whole life, this
Denouement to come,
And yet

It's funny
That although you've
Explained it to me time
And again, I still don't
Get it.



In The Trap of OCD

(Obsessive-Compulsive Disorder)

© Sarah Summer Shaffer Age 15 Patient

Doing something simple
Turns into a big project
You leave a room
And have to check to
Make sure everything is in its right place
The thought of something going wrong haunts you
What if it isn't perfect?
I'm a failure you tell yourself

Your obsession becomes so overpowering in your life
You check things constantly
Repeatedly running what you did through your head
It doesn't let go
It continues to get worse
To the point where it takes up hours of your day

Your compulsiveness ruins your life
You start to avoid going anywhere
In fear that someone will think you are weird
Because you keep repeating yourself
What if someone finds out?
You are scared
Anxiety overtakes you

You wash your hands over and over again
You feel unclean if you don't
The germs you could catch
The bacteria that you may contract

You are frightened of something being imperfect
Worried about someone finding out
Terrified of touching something uncleanly

When will you come to reality?
No one is perfect
We all have our struggles and weaknesses
Don't let this control you

Untitled

© Ariana Iantosca Age 14
Daughter of Mark Iantosca, M.D.
Department of Neurosurgery



Spring Sunshine

© Donald Martin, M.D.
Department of Anesthesiology





Walking Her Sheep

© Meagan Horst MS I

Relationships

© Roseanne Lamoreaux, R.N.

Department of Hematology/Oncology

They were like two trains on parallel tracks
on a remarkable rail system.

Although headed in the same direction,
the landscape on the left was
not always the same picture
as the one on the right.

In the beginning, in their early years together,
the shared zone was looked upon with
hesitation, doubt, and much suspicion.
However, as one year evolved into another,
they came to have a respectful understanding,
as they journeyed side by side, mile after mile

At times (more than they can now recall),
the port side was filled with menacing clouds,
rain – at times, hail – and high winds.
While there was only sunshine, wispy clouds
and calm on the starboard side –
or, vice versa.

Nevertheless,
It was the common area,
the constant between the trains,
the faithful section they always shared,
with the identical view year after year,
which cemented their friendship forever.

Untitled

© David Dudek MS II

Morning's dew reflects highnoon in prisms most refract'ry
Myriad trails unfurl their hails
—friendly fronds fall, flip, freeze, flop—
as a hymn of warmest welcom'ry.

To the west, I then see:
a path-like thing ... my recipe.
My warm heart swells relievedly,
beat-beat-begging—human plangency:
“Come woe! come strife! ‘r seas’nal prosper’ty;
I’ve one life’s span to encounter thee;
What fool does so ungratefully?”
[pau-au-sing-Pon-non-derously]
“Amor fati. Amor fati!”



Sick Lion

© Jody Bossler Wife of Randall Bossler, MS I

When he is sick,
the broken back
laid flat on our bed,
I do not feel so guilty
as I open his drawer,
searching through white socks
to claim his Hanes underwear
that I quickly pull on,
for I am now Queen and King,
Mother and Father,
servant and caretaker.
I am the all-powerful Oz---
that is, until
he can muster up the strength
to overtake me
and regain his throne.

Icy Trees at Dusk

© Kelly Chambers, C.R.N.A.
Department of Anesthesiology

Three Score and Ten

© James Thomas Patient

Three-score and ten have come and gone,
The game is near its end.
What purpose has it served thus far,
And is match point the end?

How can I know if what I've done
Has earned a winning score,
Or must I play another set
To make just one point more?

And can I say with surety,
I'd do it all the same,
And can I face match point once more
And know I've won the game?

Three-score and ten have come and gone,
My life is near its end.
What purpose has it served thus far,
And is its end, THE end?

And can I say with surety
I've done the best I can
And can I face death eye to eye
Unbending, man to man?



Patrick

© Andrew Hulme MS I

“Not Patrick again,” I thought as I read the patient name on top of my lab sheet. I was working as a phlebotomist between college and medical school, and the job often involved visiting nursing homes to draw blood samples. Even though I had become quite smooth at venipuncture, most patients dreaded seeing my basket of needles and test tubes. Many grumbled harmlessly, but only a few resisted.

Patrick was one of the least cooperative patients in this particular nursing home, most likely related to his moderate dementia. I estimated that twice a month his doctors ordered a hemoglobin and hematocrit test, which was how often I would need to obtain a small tube of his blood. With Patrick, this task usually required assistance. One or two nurses would physically restrain him from yelling and flailing as I violated his arm with my needle. This was simply how I was taught to approach the situation, and admittedly it was a quick solution to the problem.

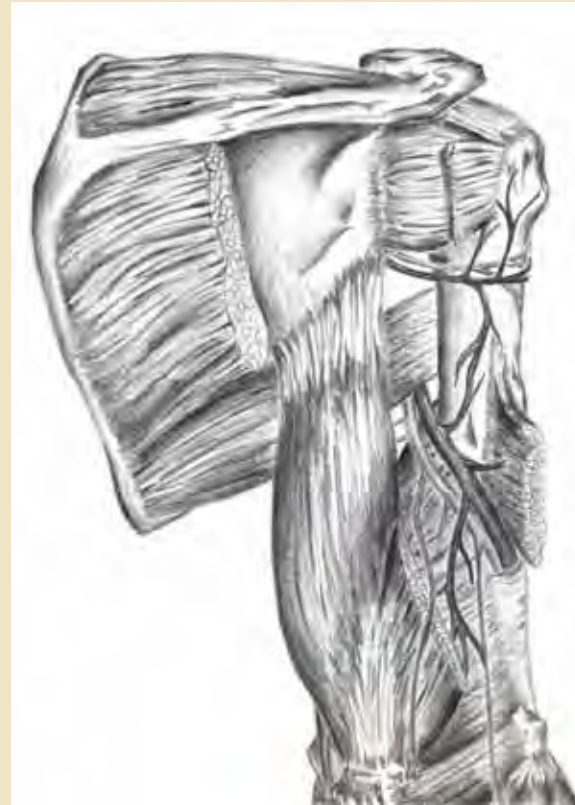
There were only two things I understood about Patrick. First, he loved to disagree. If I asked him to willingly let me draw his blood, the immediate answer was no. If I told him he looked very nice, he thought he looked hideous. My up was his down, his black was my white. Secondly, Patrick always felt he needed help. He would ask me to help him fluff his pillows or help him drink a glass of water. Although he was capable of some of these tasks, I was certain that he was not taking advantage of my generous assistance. Rather, ‘help’ seemed to be an unconscious obsession of his. One time, Patrick had asked for help and when I inquired as to how I could aid him, he answered, “I don’t know, just help me.”

This particular day was very near the end of my employment and most likely the last time I would ever see Patrick. Feeling a bit audacious and empathetic towards his usual treatment, I devised an alternate plan of attack. Briskly entering his room alone and with an urgent tone of voice, I declared “Patrick! I think you need help!”

“Yes” was Patrick’s delayed and only reply. We stared at each other, both with questioning eyes. I had clearly caught him off guard, but he had also surprised me by, for once, agreeing with me.

“Please give me your arm. I need it to help you,” I said. Slowly and uncertainly, Patrick stretched out his right arm. “Now let me tie a tourniquet around your arm, to help you,” I continued. At this point he perhaps remembered the usual ranting and restraint, and briefly drew away. Undaunted I continued to coax him, ending every sentence with my new magic phrase. “I need to feel for a vein Patrick, to help you.” We progressed in this manner gradually but peacefully, and soon the procedure was over before either of us knew what had really happened.

Feeling a mixture of pride and bewilderment, I left clutching Patrick’s test tube as if it were full of liquid gold. I took a deep breath, glanced at my long list of patients still waiting for blood work, and continued down the hall to the next room.



Profunda Brachii and Radial Nerve

© Jonathan Chu MS II



Bare

© Kunal Domakonda MS IV

Mississippi Fog

© Judy Schaefer, R.N. Member of The Doctors
Kienle Center for Humanistic Medicine

Basking in the muggy dew of the garden this morning
Rest but stay awake the nurse said

I meditate, float with Huck and Jim on a raft

I says pow! Jis' as loud as I could yell

Can't tell between river and shore, floating

Elvis and the Dorsey Show

I miss Elvis like I never thought I would

Who is the king?

What year is it?

Sweat, black leather, and that grin

Lust, hip, hop and roll and rock

and Elvis, the essence of hot

She never budge

I remember Huck and Jim – *I bust out a-cryin'*

Crushed against a raw prism of innocence

No compass or windshield for the fog

Where are you?

Alert and oriented times...

My head hurts, still, hungers for sleep

Never thought I would miss Elvis

Can't tell between the river and the shore, floating

Slipping south of Cairo

My car totaled, ram, slam, early this morning, mam

Rest but stay awake, alert, the nurse said

Each brain cell strains—begs for a rock and roll lullaby

Head Trauma

© Jonathan Chu MS II

Before my injury

I rarely pondered the mysteries of

Memory, thought, and consciousness.

After my injury

I couldn't stop obsessing about

The miraculous neural network

That allows one to make the

External world

Internal—

The enigmatic collection of synapses

That is the very basis of one's being,

The seat of the soul.

And so after my injury

I couldn't help but wonder if I had

Lost part of myself,

Though the thought terrified me.

Here's what I realize now:

Every word,

Every idea,

Every precious experience,

Your entire life,

Is gathered and held weightless

Within your calvaria.

Do not take this for granted.

Do not forget this.

Sunset Age 62

© Joseph Gascho, M.D. Department of Cardiology



Picture This

© Susan Landis, C.R.N.P.
Department of Anesthesiology

She had flawless, translucent skin. A tumble of brilliant, blond curls was reluctantly tucked into the gossamer blue surgical cap. Pale azure eyes looked up into mine with complete trust as I quickly spirit her away from her mother. Wistfully, the mother watched her little girl in the arms of a stranger who soon will render her beautiful daughter unconscious. In a short interval, the child will be anesthetized while her parent is banished to the waiting area.

In the confines of the surgical operating room we are welcomed by the surgical tech. "I brought that picture you wanted to see." He was on his way to a Halloween party and had stopped to see a pediatric patient who had been in his care. That patient's mother snapped the photograph he now held out to show me. Brian, his massive, ebony, college football body was splendidly showcased in the delicate pink tutu. "Look!" The child's wide blue eyes shone as I shared the photo.

Later, positioned carefully into her mother's lap in the recovery room, she woke, comfortable and secure. Her mother, reconnecting with her daughter asks, "What was it like? What do you remember?"

"The big, giant, black man in the pink ballerina dress," she replied.

"Oh sweetie," her mother said, folding the warm blanket around her little girl as she brushed a wayward curl from the soft curve of her cheek. That was only the anesthesia playing tricks on your imagination.



Azure Majesty

© Gordon Kauffman, M.D.
Departments of Surgery and Humanities

The Mixed Blessing

© John Botti, M.D.; Jeanne M. Miklos, R.D.M.S.; Jonna Pierce, R.D.M.S.; Kristi Klauger, R.D.M.S.
Department of Obstetrics and Gynecology

How long you've practiced
Doesn't matter when snow comes
Giving bad news to parents.

Pretty face images
Belie deeper damage
That can't be fixed.

Still, you show them what's right,
The good fingers and hands
Before the broken heart.



Chain Bridge in Budapest

© Kelly Chambers, C.R.N.A. Department of Anesthesiology



On Looking Up

©Robert Webber Patient

When Suzanne was making the transition from training wheels to what she called a “big girl’s bike,” I remember loping along beside her, a hand on the seat, trying to help her gain her balance. But it wasn’t going very well. The handlebars swung from side to side, the front wheel swerved perilously. She was getting discouraged. Then it came to me. “Suz, you’re looking down at your front wheel. Look up! Focus on that sign at the end of the street.” Cautiously she lifted her head and at once, as if by magic, the wheel straightened out, balance was achieved, and she was soon mastering mobility on a big girl’s bike. One more little life transition accomplished.

Fast-forward thirty-some years. Suzanne, now the competent woman, happens to be visiting shortly after I am beginning my own little transition to a power chair. So we go for a “stroll” (she strides, I roll) around the neighborhood. But it doesn’t go too well. The sidewalks are narrow and the joystick has a mind of its own. I’m weaving side to side, scared to death I’ll run off the paving and take a dangerous nosedive. Finally, after watching me several times, and having to come to a complete stop to reposition the chair, Suzanne says, with all the tact she can muster, “You know Dad, maybe if you looked up, say at that sign down there, instead of focusing on what’s right in front of you, you might be able to drive straighter.” And of course I did.

As a person with a progressive neuromuscular disease, I’m practicing looking up. Now there is looking up I don’t want to do. I don’t want to look ahead into the future, into my future that is. Oh, I try to make responsible life plans and do what I can to create the conditions for as much independence as possible. But I’ve decided there are specific losses and diminutions I’d rather not know about before their time. Why worry about a future I can’t control? Also, I don’t want to keep my chin up in Pollyanna-like denial of the reality of my situation. For me, facing reality squarely is the beginning of not being trapped in it.

Here’s the kind of looking up I aspire to. I want to look beyond my physical limitations to the goodness that enfolds my life. Instead of spending energy fearing the future, I want to receive the present moment as the gift that it is. And I want to look around, grateful for the love that surrounds me in family and friends, caregivers and medical team. In a nutshell, I want to pay attention, as poet Mary Oliver says:

Instructions for Living a Life:

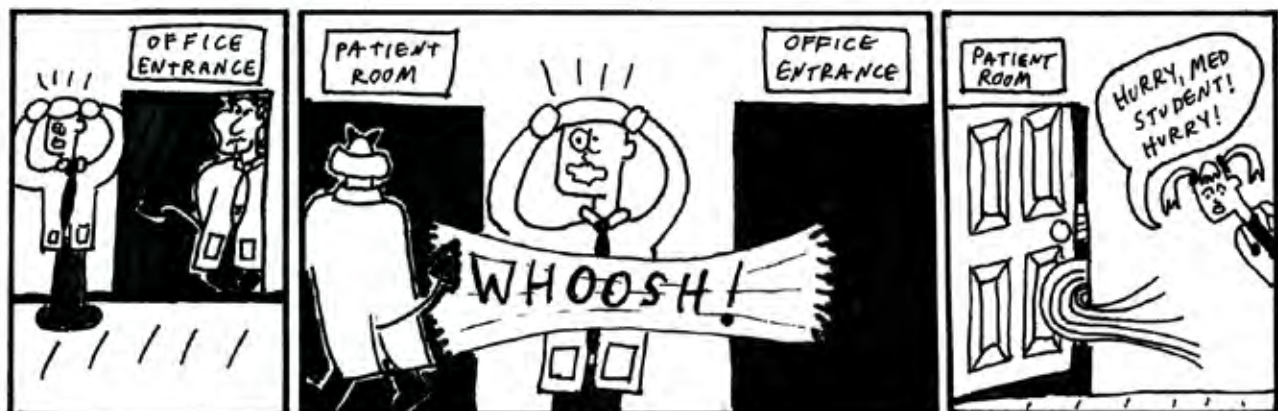
Pay attention.

Be astonished.

Tell about it.

Humor in Medicine

©Michael Pitzer MS IV



You Want To Know Something?

© Carolyn Buckley Age 15 Daughter of Barbara Ostrov, M.D. Department of Pediatrics

He always started the same way, and she knew what was to come. He would talk and talk and talk. And she had no choice but to listen. It's not as if she would answer him, and he knew that. He just started talking.

It wasn't as if he'd just started talking off the bat. No, she had asked a question or made a comment at some point. Unfortunately she couldn't recall what it was. It was all a thing of the past, along with her patience and attention. His voice droned on monotonously as she sat there, wondering when he'd allow her to leave. And she wondered, why wait for his permission? He didn't own her; he didn't control her. It was her choice to stay and listen to his ramblings, so why did she?

It was simple: occasionally she learned something interesting. She wouldn't admit it to anyone (she'd barely admit it to herself), but every few minutes a few words would come out that really caught her attention. A fact about life, maybe some tips for how she handled money. It could even be cooking instructions, when she imagined the randomness of his tangents. But that big, puffy cloud had such a thin silver lining, she didn't think it was worth it.

He was right about himself: he knew a lot. And most of what he said was probably true. But she couldn't help but subtly hint at her absolute boredom; she'd twirl her hair, spin in her seat, play with the pens on his desk. Anything to try and make him see that she could be doing other things. She couldn't just up and leave; that would be rude. But he could tell her to leave, and she'd keep hinting at that until he let her.

"Maybe," she thought, "someday I'll do this to him. I'll just keep talking and talking about something he didn't care to know about, and he'll see it from my point of view." She could almost smile at the thought, giving him a taste of his own medicine. Believe it or not, she knew things, too, and he could probably learn from her almost as much as she could learn from him. She smirked while he continued to ramble. She didn't even know what he was talking about anymore.

One day, he stopped talking. It wasn't intentional, of that she was sure. He paused for only a few moments, which captured her attention, and he stood up quickly. Before she even had time to ask what was wrong, he plummeted to the floor. She didn't know what was happening; she called for help. Luckily, help came in time.

Even after a few days of him lying in the hospital bed asleep, she was sitting in the chair next to him. "We don't know if he's going to wake up," the doctors told her. She refused to cry until they were one hundred percent sure of his fate. She was there day and night while his breathing got slower and raspier. She knew what was happening, and she didn't know how to take it.

She grabbed his hand and held on tight, wrapping her slender fingers around his larger hand. His skin was cold, she'd expected that, but a shiver ran down her spine nonetheless. After a few seconds, she came to complete terms with what was happening: he was dying. She let the tears slide down her face, and her body shook in sync with her sobs. She couldn't imagine life without him.

A few minutes passed and she squeezed his hand again before standing up. It'd been a few hours since she last walked, but she stumbled towards the door. And just as she was reaching for the knob, a loud cough fell onto her ears. She turned around, shock evident on her face, to see his eyes open slightly, and his mouth holding a weak smile.

"You want to know something?" he asked quietly.

She stepped back towards him and grabbed his hand again. "Yeah, I do."

Quiet Beside the Storm

© Pamela Wagar MS I

The familiar sound of fracture,
Listening while not wanting to hear.
It is my sleeping shadow.
Splintered wood sounds to the ear.

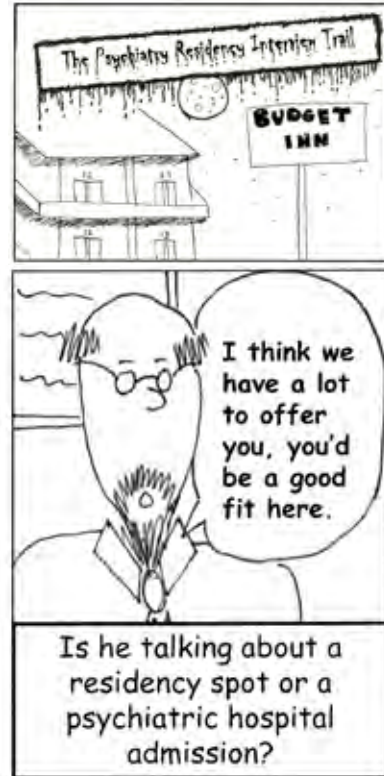
Partnered with its surge of pain,
to make its presence known.
Haunts much like a looming storm,
as it threatens every bone.

Striving to keep the tempest at bay,
alas... it rears its ugly head.
The dormant hazard silent inside,
sends a quake throughout instead.

The shock and hurt echoes within,
heart chasing in angry reply.
The surrounding place begins to spin,
awaiting the gale to die.

Slowly the menace slumbers once more,
healing begins to take course.
Knowing the sound will revisit one day,
fearing the next fracture is worse...

Humor in Medicine



© Stamatis Zeris MS IV

Exodus

© Lara Rosenwasser MS I



Kristen and Angie

©Melanie Comito, M.D. Penn State Children's Hospital

"Mom, can you take me up to the hospital to see Angie?"

I am so tired. I have been at the hospital at work all day. Going into the hospital this evening is the last thing on my mind.

"Please, Mom, I need to visit her."

She looks at me earnestly, with an honest need to see the little girl she befriended. Although Kristen does not know this, Angie will be heading home tomorrow, as there is no more effective therapy.

Angie's mother welcomes Kristen into the room. Angie is very tired and ill appearing. "Angie, you have a friend here to see you."

Angie opens her eyes and sees her visitor. "Is that Kristen? Is she here to see me?" In an instance she wakes up fully and sits up in bed. "Mom, where are my crayons, get my books – Kristen is here."

Together they each get a page to color and share the crayons. Angie starts telling Kristen her good news – she is going home.

Tell me about your home, Angie. "I have a room that I share with Kayla, my sister. Sometimes Kayla can be a pain, but mostly I love her."

"When I go home, my mom is going to take me to the mall and we will shop together."

"When I feel better, I am going to go to Disney World and be a princess."

"Tomorrow, my mom and I are going to bake a cake for my grandma. It is her birthday and I get to help because I will be home."

The more she talks about home and her dreams, the more animated she becomes. She doesn't appear ill; she doesn't appear to be in pain. She is just a little girl visiting with a friend.

The whole time, Angie and Kristen color their pictures, using every different color and admiring each other's work.

"I am so glad you are here Kristen. I love you so much." She then writes Kristen's name on her picture and smothers it with kisses and hugs.

The pictures are complete. Angie is tired and Kristen needs to go home. They exchange hugs. "I love you Kristen. Will you come and see me the next time I come and visit".

"Yes, Angie, always."



The Missing Link

©Sigmund David Patient

I am definitely going to do something
With this monstrosity
I call my beard.
People keep asking me
If I am related to
The wild man of Borneo.
I keep denying it.
But the questions keep coming:
Don't you trip on it?
How can you eat with it?
Is that yesterday's supper?

Insults. Insults.
It all started innocently.
I ran out of razor blades.
The prices kept going up.
I thought I would economize.
So here I am—covered with hair.
I've gone through dozens of combs.
I can no longer see past my tangles.
My beard has taken a life of its own.

Attempts with scissors continue to fail.
Perhaps I will join the circus.
I don't know how much longer
I can stand this abuse.
When I get in an elevator,
People move immediately away from me—
Even in a crowded one.
People are afraid to face the "Missing Link".
I am going to find H.G. Wells' time machine
And join the cavemen!

Hopeful

©Dwayne Morris Staff
Outpatient Services

I'm hopeful to be the first one
To read the things you write
To understand your darkness
And get swept up in your light
And when you write the hard words
That wrestle with your sleep
I'll hold you until the morning
Where a brand new day you'll greet

I'm hopeful we'll climb a mountain
With a never-ending trail
And camp out underneath the stars
And talk until our eyes fail
And when we see the sunrise
I'll take you by the hand
And you'll know at that very moment
God loves you through this man

Open Window

©Susan Landis, C.R.N.P.
Department of Anesthesiology



The Quiet Pathway

© Rubaina Zaman MS I



Another Winter

© Blake Chin-Lee MS II

Another winter;
Dreams fade into hibernation.
Morning dew turns to frozen tears.
Scattered petals and leaves
Lie limp in the horizontal sun.
There are moons within the wilting flowers;
Vibrant tones waning to November skies.

Warm breaths are a commodity.
Warm hands a treasured talent.
An errant touch, a wistful gaze
Fends off Winter's game.
Our subtle whispers keep the soul ablaze.

Laughter filled with spilled hot chocolate.
Stories in a huddled round.
Voices dance off of Christmas music.
Another winter has come around.

Gone

© Lauren Hale MS III

Where do I go from here, how do I move on from this place,
What do I have to do, to never forget your face?
Why does it seem so hard, to let go of this pain,
Why do I hear your voice, over again and again?

But you're gone, and you're never coming back,
Yet every day, I find myself keeping track,
Of every minute, every second that passes without you,
You're not really gone, please tell me it's not true.

Where can I find you, please tell me I'll go there,
What must I do, to show you that I care?
Why does the thought of you still pierce my heart in two,
Why did I have to lose someone I loved as much as you?

But now I find myself, and I'm standing all alone,
And I try to look for you, but all I do is roam.
I know the years will pass, and lead me far from here,
But I don't want to take those steps, I still want you near.

Where did my heart go? I feel like I'm floating into space.
What did I do to make you leave from this place?
Why can't I seem to stop these painful tears,
Why aren't you here, to chase away my fears?

But I know that you can't ever come back again,
And I know that it's useless for me to pretend.
Yet I forget again, and think you're not gone,
Because I just can't hurt this way, tell me is that so wrong?

But now I'll say goodbye, and put my love to rest,
And I won't ever love the same, not when I've had the best.
Please hear me when I whisper softly I love you,
I know you're gone, but in my heart it'll never be true.

My Children's Story

© Lydia Holcomb Patient

Once upon a time, a girl met a boy.
Their hearts filled with love; they were overjoyed.

A couple years passed; they decided to wed.
Their marital vows to each other said.

Quite contented they were—laughing, loving and kissing,
But as time went on, they knew something was missing.

As two they were happy, but felt three would be best.
But as time would show, they'd be put to the test.

They waited and waited; they prayed and they prayed.
Then God sent His blessing—an angel He'd made!

Oh happy day when at last they were three,
A boy, girl and baby—what more could there be?

But God had in store a plan oh so much bigger,
Something the couple could never have figured!

When the girl grew a belly, she wanted to see
What was inside... "WHAT?... The doctor said
THREE???"

Three little heartbeats were wrapped up inside.
When they heard the news they laughed, and they cried:

"How will we manage? What will we do?"

They prayed to God, knowing He'd help them through.

They waited and waited; they prayed and they prayed.
As God gave them strength, they weren't as afraid.

Her belly got bigger; her belly got wider.
Soon the babies decided they'd not stay inside her.

At just 23 weeks, to the hospital went
The boy and the girl and the three heaven-sent.

The doctors proclaimed, "They're coming today!"
The couple looked at each other and thought, "No way!"

The three were delivered alive, but not well.
How would this turn out? Only time would tell.

The prognosis was grim; such small babies are doomed.
Yet praying for miracles, hope started to bloom.

The hospital staff all worked at a pace
That would put Nascar drivers all to disgrace.

Such care and such love put into these three boys
That the sight of them now brings big tears of sweet joy!

Born just over one pound, they were tiny and frail.
Today, over four pounds, they look big as a whale!

They're growing, they're thriving; the couple thanks God.
Some hills they'll still climb, but they're beating the odds!

Now at ten weeks of age, they've a story to share,
Of a great big God and great medical care.

And all of God's angels in heaven will tell
Of our three little miracles: Josiah, Caleb and Gabriel.

Open Hands

© Lara Rosenwasser MS I



Ancient Willow

© Brittany Irey MS IV

Hands intertwined,
wisdom passed down.
Weathered wrinkles,
Softness of innocence.
Old and young protected,
within a sanctuary of branches.

From silent gliding,
to sighing creeks.
Her head held high
through waging winds,
and suffocating snow.
The magnificent weeping willow,
Echoes years of triumph.

Drooping branches, shriveling leaves,
subtle vulnerability,
or a life of many seasons.
Creases of her bark, rings of her trunk,
marks of experience,
stories of a lifetime.

The world continues,
oblivious to her whispers.
Watching and listening,
towering above the rest.

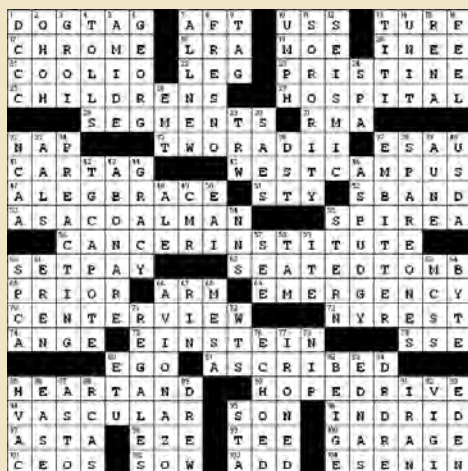
Though fewer birds fill her branches.



750 years

© Gordon Kauffman, M.D.
Departments of Surgery and Humanities

Answer Key to Puzzle on page 24



Terror in Reinberger Hall

© Danny George, Ph.D.
Department of Humanities

A terrorist has boarded a plane,
And television pundits fulminate
Into the carpeted sitting room
In Reinberger Hall.

Four women sit listening
As the plot is dissected;
Soon, each falls asleep,
And the television goes dark.

Countless words have raged,
And fallen here—
A momentary static gleam,
Now sightless as dust.

Market swoons and recessions,
The daily frantic pulse of the Dow,
Have found in this space
A calming.

The horrors of each cataclysm
Washed in like a tempest;
Yet even the heaviest sediments
Receded with the morning's tide.

Declarations of war and victory,
So muscular and severe,
Decomposed beside the memory
Of yesterday's lunch.

Rising sea levels and fading empires,
Sums of death and disease,
Lost their fearful arc
In the fold of moments.

Tonight, as midnight falls,
Life throbs far away;
Panic works through its infinite channels,
Nesting in many minds.

Yet when the sun rises tomorrow,
The terrorist will have failed.
For fear finds fallow soil
In Reinberger Hall.

The Breeze

© Bradford Kim MS II

The wind began strong—
tunneling through a sunlight-spotted road.
The verdant branches beamed at it,
and pushed it along.

Inhaled into the woods—
stumbling above and below the sharp branches,
faintly leaning against towels tightly strung
to the tree branches above.

Exhaled through the rose bushes—
failing to elevate the fallen, color-fading petals,
and swirling into a ball,
it hesitantly continues.

Gasped over the mountainous boulder—
crawling to the top, with each clenched grip,
through the finely cut grass
without anything left for another gust.



Fall ABC's

© Juanita Evans, M.D.
Pathology Resident

Recommendation

© Paul Smith
Husband of Diane Smith
Anatomic Pathology

"Get over it," you say.
Nope. No air under water.
It's like losing a leg—
You learn to acclimate
But you can't learn
To be whole ever again,
When you will never be whole.

Oh, you can get used to it
Like often, you can sort of
Get used to being something else,
But it's not like changing your job.

How can you get used to it
When every stone or rock,
Every branch, every leaf,
Every sun, every cloud,
Every warmth and every cold
Is keenly measured
And surgically assessed—
Not by loss or accommodation
But by arid incompleteness.

You are forced, painfully, to change
And become truly a new thing.
The metamorphosis is unwelcome
And unapproved.
You can get on the bus
But if there's no place to sit
You have to stand.

I know you care
Your compassion is real and felt
Despite involuntary expectation.

But I'm not exactly regenerated,
I am no longer the same person—
Not diminished, simply trying to learn.

I guess we'll have to
Just get over it.

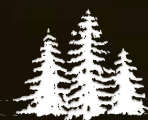
Church in San Juan, Puerto Rico

© Amy Ni MS I



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The Doctors Kienle Center for Humanistic Medicine

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