

2011

# Wild Onions

XXV



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# Wild Onions XXV 2011

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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Submissions due by February 1 of each  
calendar year



# Wild Onions XXV 2011

*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](mailto: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 featured in *Wild Onions*.

*The Galleries Within*, an exhibit of biomedical art.

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

*The Medical Student Humanitarian Award*, co-sponsored with The Association of Faculty and Friends.

*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*, a photography exhibit by Joseph Gascho, M.D.



Welcome

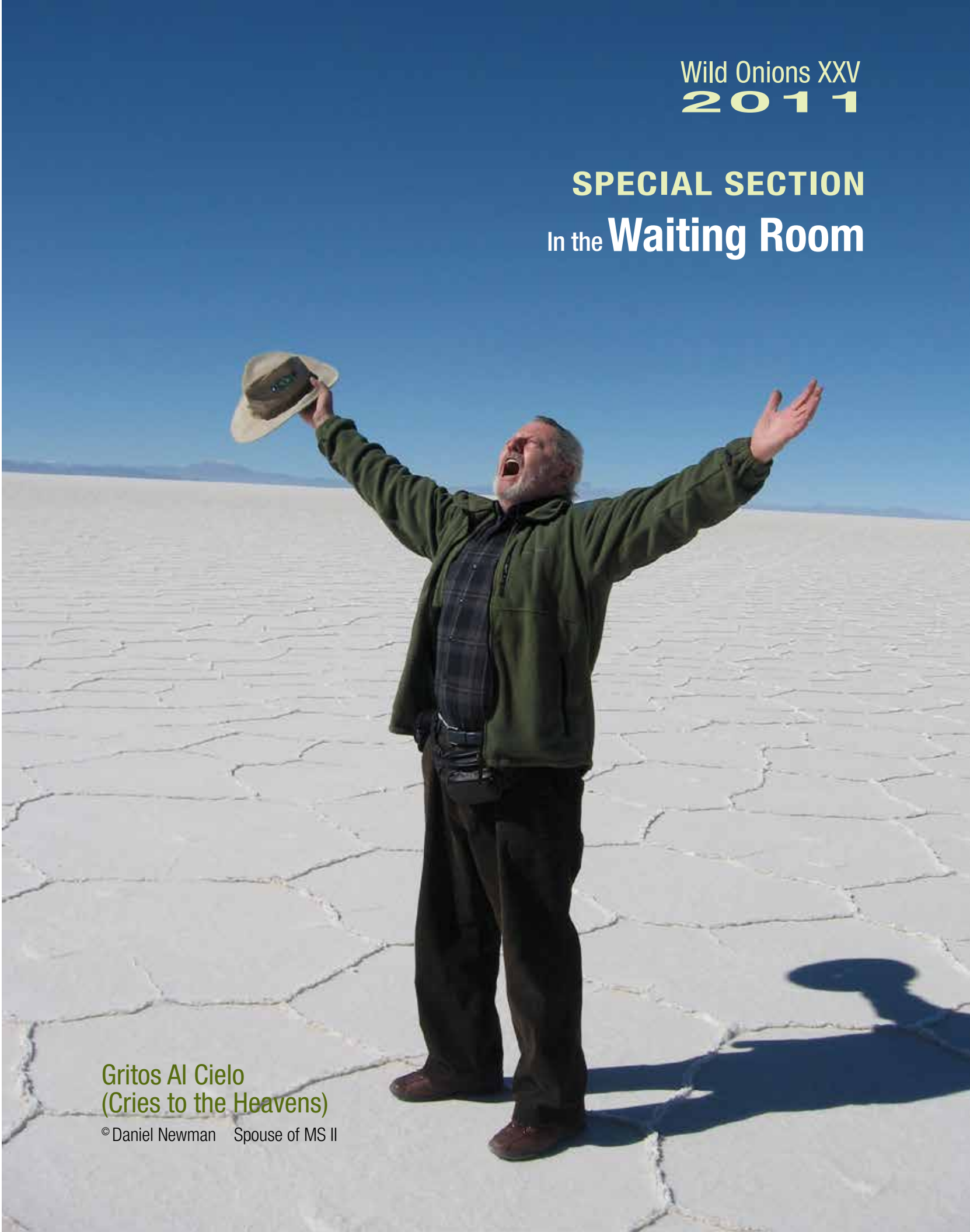
Waiting can mean anticipation or it can mean suffering. Whether for an appointment, test results, a cure, better treatment, or even, a better healthcare system, waiting seems to take forever. Once the wait is over, we move on to the next thing. Along the journey, however, there are times to pause, think, and savor the moment. These moments provide an opportunity to make sense of our striving and to know each other. Viewing the world through others' eyes gives us perspective and builds empathy; broadening our scope helps us to see options that were not previously apparent. The wait can be transforming if we use it well.

This collection of art and literature, *Wild Onions*, is a tool for transforming us. It gives us, its creators and its readers, a place to gather and share our human perspective. Whether you peruse its pages in your spare time, read it as a distraction, or search each entry to find an author or artist you know, this publication serves as a meeting place to share the triumphs and tragedies we encounter every day. We – as patients, families, staff, nurses, doctors and students – are the healthcare system, and in the end, it is our humanity that makes the system succeed or fail. As long as it remains imperfect, people will have to be creative, thoughtful, and patient as we try to make it better. As we wait for whatever comes next, the moments we spend contemplating the world are critical. Those moments are our chance to achieve understanding beyond ourselves and to reach beyond the next event. Use your wait well.



**Elizabeth Sinz, M.D.**  
Professor of Anesthesiology & Neurosurgery  
Associate Dean for Simulation  
Director of Patient Safety Simulation  
Director, Penn State Hershey Clinical Simulation Center  
Associate Science Editor, AHA

SPECIAL SECTION  
In the **Waiting Room**



**Gritos Al Cielo  
(Cries to the Heavens)**

©Daniel Newman Spouse of MS II



Chemistry within waiting rooms is heated and volatile, yet invisible, compartmentalized and bottled up -- a world of crowded loneliness and unexplored anxieties. Determined to lift the proverbial silence of waiting rooms around the hospital, like lifting a lid off a pot to allow the steam of expression and emotion to escape and then capturing it as words and images on a page, we dedicate this year's special section of *Wild Onions* as "In the Waiting Room."

In an effort to solicit candid and intimate submissions, fresh with the commonly potent experience of waiting rooms, we placed submission boxes in waiting rooms throughout the hospital and personally encouraged patients to pen their works while they waited. These submissions, along with other works on the subject, make up this year's special section of the journal.

We hope that reading this will help you see the individuals within the crowd and explore their anxious faces. Whenever you are asked to wait, when making others wait, when breaking news to or merely observing others waiting, recalling this special section and then acting with an added measure of compassion will be the hidden harvest we hope to reap.

Most Sincerely,  
Vimal Desai and Clay Hess



## Senior co-editors



**Vimal Desai's** gravitation towards the humanities stems from his diverse upbringing. It was a melting pot of Vedic philosophy, east African hospitality, Catholic grace, and Islamic peace. Born in Asmara, Eritrea during a revolution, his parents moved to Los Angeles in hopes of a better future. Throughout his life Vimal has been fortunate to meet prominent leaders -- from Mother Teresa to His Holiness the Dalai Lama -- whose touch has inspired his journey. After completing his molecular biology degree at UCLA, he attended Tattvagnan Vidhyapith, an institute inspired by Pandurang Shastri Athavale. Here he studied a vast spectrum of philosophy, literature, metaphysics, and world religions that have defined the human condition, something Vimal hopes to improve through his practice of medicine.



**Clayton Hess**, a southern-California native, graduated from Brigham Young University (Provo, UT) *cum laude*, receiving a Bachelor of Arts degree in Humanities with an English emphasis. He chose Penn State for his medical education in large part due to its humanities-focused curriculum, and he prizes how it helps him to "walk with kings, [but never lose] the common touch." (Rudyard Kipling). For prospectively monitoring distress in radiation-treated cancer patients, Clay was awarded the K. Danner Clouser Student Research Endowment. He aspires to provide patient-satisfying care for those with cancer, perform quality-of-life and ethics-related research, and advocate for integrity- and charity-based decision-making within his chosen specialty, Radiation Oncology.

## Hopeful

© Betty Terry Visitor in the Waiting Room

There's not much for me to say  
I thank God I am here today  
Waiting to see the doctor isn't the same  
I guess not I'm in pain  
Trying to clear my head, that's all  
I decided to write this poem  
Sitting here fighting my fear  
It's good to know there's people who care  
Looking around at all the faces I see,  
They all look like me  
Hopeful

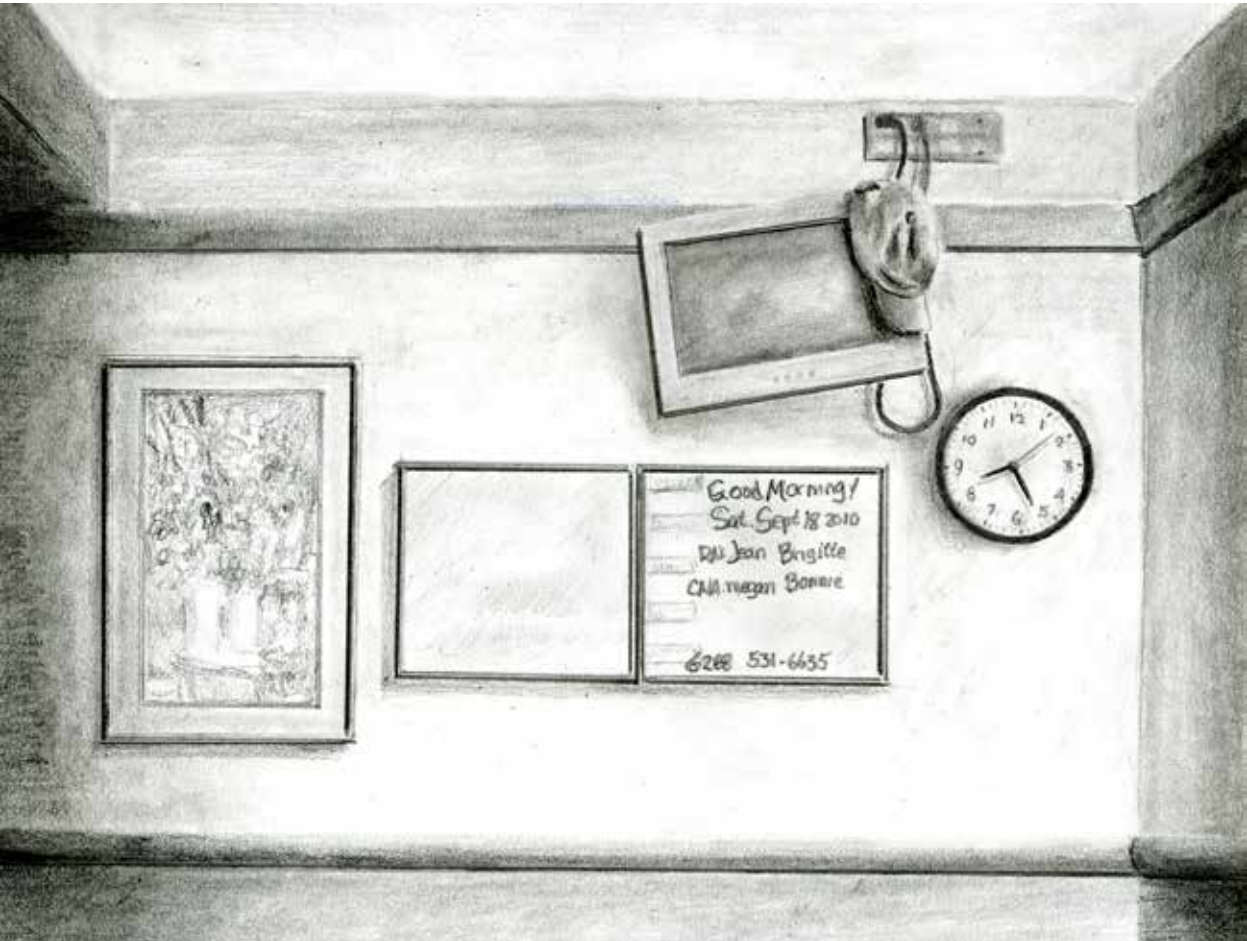
## In My Waiting Room

© Kimberly Rush MS I

Window panes the only  
barrier to an infinite sea,  
like a giant aquarium  
spanning indefinitely.  
I sigh.  
  
In tranquil blues  
A whale shark goes by.  
Elegant turns  
of manta rays in airless flight.  
Tickled sediments  
our only sense of time.  
  
Just space  
this sweet passage of mine  
drifting along in the whale shark's wake.  
Do not call me back,  
just let me wait

## September 18<sup>th</sup> – View from Bed

© Dennis Martin Patient







## Who's Next? © Gordon Kauffman, M.D. Departments of Surgery and Humanities

## In The Waiting Room

© Sigmund J. David (Siggy) Organ Transplant Patient

Those few minutes  
While you wait

You wonder  
Is your problem

Serious

Your mind roams

You see  
Patients

Come & go

Are they as sick  
As you feel?

They have family--  
Loved ones

Who also may

Depend  
On them  
You wonder  
About the results  
Of your previous lab work

And the significance  
Of the numbers

Not quite  
High or low

There is  
So much confusion:  
Are you healthy?  
Are you normal?

You always wonder  
About some

Of these things  
As you leave  
The office  
We all know  
One day  
We will die  
And pretend  
As if  
It will never happen  
And you act surprised  
When your body  
Starts  
To break down  
(and the others around you  
also pretend you will  
Or should  
Live forever)  
All this waiting

## Petulant Chair

© Jodi L. Bossler Wife of Randall Bossler, Jr. MS II

As I sink into the pseudo-leather seat,  
the chair hisses its same protest:  
a mutiny against the hundreds of bodies before mine,  
who await the next step, the next room, the next face.  
My chair is part of a room where one waits;  
it is a holding place that affords moderate comfort and floatation.  
The blue slate of the wall mixes with calculated décor,  
making the entire room weakly chic and desolate.  
There hangs an art photo opposite  
and it mocks my chair...  
promising a winter landscape of twiggy snow and drifting spaces.  
If the chair was able,  
it would jump into that wintry world,  
land in those woods, onto that quaint path,  
support a bird instead of a waiting body,  
become a sled and activate, move forward and downhill  
in a wild rush of energy and purpose  
that can only be imagined in extreme detail  
when one is forced to wait.



## Forest Conference

© Susan Oscilowski  
Tech Assistant/Standardized Patient  
Simulation Center

## Waiting for News

© Angela L. Sedun Mother of Pediatric Patient

Blissful memories  
Hang in the balance.  
Spring, come again.

## Waiting Room Thoughts

© Diane Thiboutot, M.D.  
Department of Dermatology  
and Mother of MS IV

Who waits for thoughts?  
Doctors design rooms for this,  
But why?  
Thoughts just come, invited or not.  
To be welcomed, or not.  
Who is the critic that makes these calls?  
Is it you or is it the thought?



## Honduran Couple Waiting for Doctor

© Sarah Emily Smith MS I





### Waiting for a Key

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

### Diagnosis Dread

©Sarah Summer Shaffer Patient

It was late one Monday evening.  
I could tell something was wrong.  
Things did not seem normal.  
Panic began to run coldly through my veins.

I decided to wait until the next morning to get it checked.  
On the way there, my stomach began to turn.  
I felt nothing less than nauseous.  
Concerned; worried; anticipating the worst.

As I sat in the empty waiting room,  
Questions flashed through my mind.  
It was like an old-fashioned movie reel.  
Why didn't I listen and respond to the warning signs sooner?

The magazines are ancient with articles missing.  
The side tables are covered in a thin layer of dust.  
I tap my foot anxiously on the stained tiled floor.  
The air smells thick and stale.

Waiting... waiting... waiting...  
Fearing the unknown results.  
Hours have passed.  
The clock continues ticking.

Suddenly I hear a man's voice.  
Shocked that I had fallen asleep.  
I wake to find him standing in front of me.  
I look into his eyes with hesitation.

With sincere compassion in his words,  
He gives me the diagnosis,  
"You need to replace your engine."  
Oh, the pain to my bank account will be severe.

### The Course of Compassion

©Heather King Patient Representative

I brought my six-month-old son in for surgery in December. He was to have an outpatient procedure – not really anything that could be considered life threatening. But the thought of handing my precious baby over to people I did not know so that they could essentially injure him in order to make him better – this horrified me.

We arrived at 6 a.m., my husband, my baby and I. I don't remember much of what went on pre-operatively, but I remember walking down the long hallway leading from the Same Day Unit to the OR's. I remember seeing the green-clad OR/Anesthesiology personnel walking ahead of us as they allowed me to carry my baby boy to a certain point. Then one of them turned around and told me to kiss my boy, and that they would take good care of him. After they carried him around the corner, I turned to my husband and cried. I was so afraid of the unknowns – would he be OK with anesthesia? Would he be afraid? Would they make a mistake and hurt him? It was so overwhelming!

My husband and I went to the waiting room to do our time. I had brought magazines to occupy my hands and my mind. I knew I couldn't concentrate enough to read a book, so I settled for looking at the glossy images staring up at me from People Magazine. We had been told the surgery would take about an hour. So at the hour mark, I became hyper-

attuned to any and all activity going on in or near the waiting room. Each nurse that came in got a pleading look from me. Each time the phone rang, I jumped. Our wait turned into two hours, then three with no update. I was beside myself, though I was trying very hard not to lose my grip. Finally somewhere between hour three and four a nurse came to get me and took me to the PACU where I would be able to hold my baby as he awoke from anesthesia. All had gone well; he was fine and we took him home that day.

When I look back on that day and remember how it felt to me to not know what was happening with my son, how completely stricken I felt, how nothing was entering or exiting my brain except prayers, I am filled with a renewed awareness and empathy for the patients and family members I see every day in our surgical waiting rooms. When I receive calls from families who are so upset by what seems like a triviality initially, I remember how everything that happened to me that day was amplified by the mere fact that I was stressed and scared. Tears lurked at the edges of my eyes, ready to spill over at good news OR bad news. I see these people every day and it would be so easy to become callous, to forget how I felt in the same circumstances. God grant me the grace to always be grateful and never lose compassion.



### From the Parking Lot

© Mohammad Bader MS I



## Her Smile

© Caroline Buckley  
Daughter of Barbara Ostrov, M.D.  
Pediatric Rheumatology

Tick. Tick. Tick.

He hated that stupid clock. Its constant sound reminding him how real the situation was, how much he wanted to go backwards and change things so this awful occurrence never even had a chance of happening. But there he was, sitting silently in the waiting room, nervous and scared and tired and shaking.

According to the clock, he'd been sitting for about five hours. Looking around the room at all the other worried faces, he briefly wondered if they'd been there as long. His mind wandered along: was their situation as dire as his? Would they be out of here before him? Would their faces show relief...or regret?

Although he was looking straight ahead, all he could see was her face. Although there was a small television mumbling quietly, he could only hear her voice. Although his hands were clasped together and he knew the cracked skin couldn't be hers...she was all he felt.

Sighing only made his head feel heavier, but he didn't know what to do. He had no answers to too many questions. Every time a nurse walked by he would anxiously raise his head, and she would either walk away or say another name. He wanted, so desperately, for her to say that familiar name, then take him to see her with a small, comforting smile on her face. He needed it. This time, however, when she stepped into the small room full of sad faces, an ignored television, and empty bags from snack machines, the name she spoke rang in his ears. He stood up. She looked at him and motioned him to follow. He did.

Stepping into the room, the nurse started speaking in medical terms; to him it might as well have been a foreign tongue. All he could focus on was the figure lying on the bed in front of him.

She looked over at him and smiled her small, comforting smile.



## A Moment in Time (Slips)

© Daniel R. George, Ph.D.  
Department of Humanities

*Medical students commonly encounter persons with dementia in clinical settings as "patients" presenting with discrete cognitive, functional, and behavioral problems. In April 2010, my fourth-year students flipped the script and made four visits to the locked "memory support" unit at Country Meadows Retirement Community, located just east of the Medical Center. There, as guests, they joined residents in a group-based creative storytelling project called TimeSlips. Students facilitated these sessions, drawing out rich, whimsical narratives from residents, deepening relationships, and ultimately developing creative final projects based on the content generated by these elders -- persons who, in nearby medical settings, might otherwise have been regarded as "Alzheimer's victims." This is a photo taken during one of our many trips to Country Meadows.*

## Waiting

© Joseph Gascho, M.D.  
Division of Cardiology

Eighteen months  
for him to come home  
left leg blown off  
Five seconds  
to bound up the stairs  
after the shot  
Twenty minutes  
for the screaming white wagon  
Two hours  
to find out  
if  
Four days  
to lower the box  
into the ground  
Forever  
to figure out  
why

## No Way to Go

© Dean M. Necimi Visitor in the Waiting Room

Grandmother knew this day would come.  
Death's a fact, my child, she told me when I was young.  
Sadness and anger, as they arise,  
You must let them pass.  
For years our people have dealt with loss:  
The shuttling of the spirit to another world.  
When my time comes no one shall fret,  
For the strength we seek is all around.  
Fire in the earth, my feet on the ground,  
And love from my family, as all draw near.

Now within these doors I feel quite down.  
You taught me well, so do not fear.  
I am not sad, Grandma, to see you go.  
It's just that, my waiting room, it shouldn't be here.

## Waiting

© Michael J. Green, M.D., M.S. Departments of Internal Medicine and Humanities





Untitled

©William A. Pasukinis  
Visitor in the Waiting Room

On January 1, at 11:30 a.m., our 15-year old son had an accident with a saw, whereby the possibility existed that he could lose a finger. We spent three hours in a local upstate emergency room and were told he would be taken by ambulance to another upstate medical center. However, we were also informed that there was, unbelievably, no surgeon on call at the hospital who could attempt a corrective surgery.

It was then that we opted to make the two-hour trip to the Hershey Medical Center. We were greeted with smiling faces and helpful and professional personnel. The emergency room nurses on duty at 5:00 p.m. on January 1 were the best we have ever experienced. I know they have probably seen hundreds of such cases, but this was our first, and it was our son's finger that would be lost. They were empathetic, very professional, and sensitive, and they made us feel secure in our decision to come to Hershey. Our surgeon was also extremely courteous and professional. He answered all our questions and displayed a genuine interest in our son's condition and our family's concerns. We could not have wished for a happier ending in what started out as a tragic day.

Thank You From My Heart

© Mark Barber  
Visitor in the Waiting Room

I found my experience to be much more pleasant than expected. The staff were very nice, friendly, and helpful. The tracking system the Medical Center has in place is outstanding. I felt like I was on top of my wife's surgery from start to finish. The doctors all the way down to admissions were wonderful. The only thing I can say is Hershey/Penn State is the only place I will consider having any type of procedure (ever).

Thank you very much for taking care of the person that means the world to me, my wife.



©Gabrielle Yerke Age 11 Drawn in the Waiting Room

The Doctors Kienle Center for Humanistic Medicine

AWARDS  
SECTION



Uprooted  
(Triptych)

© Angela L. Sedun  
Mother of  
Pediatric 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 Lisa Roney, Ph.D.. Dr. Roney is the author of *Sweet Invisible Body: Reflections on a Life with Diabetes* (1999) and is associate professor of English at the University of Central Florida. Her short stories, essays, poems, and articles of cultural analysis about health and disability issues have appeared in such publications as *Harper’s*, *Inside Higher Ed*, *Red Rock Review*, *Writing on the Edge*, *The Healing Muse*, *So to Speak*, and *The Sycamore Review*. She is currently working on a new book that combines memoir and social commentary about getting married at the age of 49.

### First Place

#### Hard to Say

©Scott Winner, M.D. Department of Radiology

I was 24 years old when I interviewed for admission to medical school. I wore a black suit, carried a leather notebook and had acne.

“What makes a good doctor?” the interviewer asked.

“Lifelong curiosity and education. Medicine changes and physicians have to keep learning throughout their careers,” I replied.

“What kinds of things do good doctors need to learn?

“Things change in medicine. Doctors have to keep up with new treatments and procedures to serve their patients well.”

“Anything else?” she asked.

“Hard to say.” I paused and broke a sweat. “What do you mean?”

“I mean just what I said. Do you think you’ll need to learn anything else to be a good doctor?”

“What else is there?” I asked.

I am a third year medical student on the trauma service. We are called to see a young man who has been shot in the head. When we arrive, he is dead. His hair is caked with blood and there is a large gash in the back of his head. The Chief Resident asks me to clean off the guy’s scalp and sew up the wound. I don’t understand why.

“Why should I sew up his head?” I ask. “He’s not bleeding anymore; he’s dead.”

“Perfect patient to learn on, Stud. Practice your suturing and page me when you’re done,” the Chief replies.

I find everything I need to do the job: towels, soap, scissors, suture, tweezers and forceps. I try to scrub the wound, but his head wobbles back and forth. I brace his forehead with my left hand and scrub with my right, which works well. Red soapy water and clots drip onto the floor. I pat his scalp dry with a clean towel. I pick up the scissors and tweezers and trim the edges of the wound, cutting away small bits of fat, hair and skin. His head looks clean and the wound is nicely prepped. I open the sutures and pick up the curved needle with the forceps. His hair makes a crinkling sound as I squeeze the edge of the wound with the tweezers. I punch the needle through one side of the wound, then the other, and pull the skin closed. I tie a two-hand square knot. I repeat the procedure and practice a variety of knots. I have one suture to go and the wound is almost closed. It looks much better. A nurse interrupts me.

“How much longer are you going to be? His mother is in the waiting room. She wants to come see him,” she says.

“His mother wants to see him here?” I ask.

“It’s her son. How much longer?”

“Give me two minutes.”

I place the needle in the sharps container and throw the other supplies in the trash. I grab a towel, get on my knees, and clean the blood off the floor. I lift his head and wipe off the gurney. I see some blood on his ear and quickly clean it off. I gently pull the sheet up to his shoulders and smooth the wrinkles. He looks good. My two minutes are up. I walk over to the nurse’s station and stand there, not sure where to go or what to do. I hear the automatic doors open and look to my left. I see the young man’s mother. I watch her eyes scan the room. I see her face change as she recognizes her son. She moves towards him. She quivers. She twists. She places her hand on the side of his head and chants about how beautiful he is. And the gash is invisible. And there is no blood on his ear.

#### Judge’s Comments:

This very moving story recounts how a physician remembers the time when, as a medical student, he had approached the suturing of a dead man’s skull as mere skills practice, but found himself glad instead that he had made the young man’s body more presentable for his grieving mother. Although describing a dramatic situation, the story is understated, and it emphasizes the way that memory may echo through the years. The third-year medical student who sutures understands “what else” it takes to be a good doctor, something he could not have begun to understand three years earlier when he interviewed for medical school; the mature physician, looking back on both these periods in his life, understands more still, as he reflects on his own development. This story shows how so often the things that seem to have no obvious medical benefit—even things that seem to be done in vain--may be very important.

### Second Place

#### Collective Anonymous: Sketches from the Emergency Waiting Room

©Derek Reighard MS I

Exhausted copies of *Newsweek* keep me company here, amid the sad silk flowers and acanthine tangle of my unkempt hair.

The real news is that there isn’t any, at least not yet, though the hour grows impossibly old. I’ve watched a dozen or so medics, bleary-eyed somnambulists, wander through this waiting room, their movements liquid and erratic like underwater pinball.

*Sleep is a test*, they’ll say, *and only the losers acquiesce*.

Pausing for an instant, I survey the human architecture of this space, an air-conditioned refuge for transient souls:

- An old man snores beneath a newspaper blanket, talking in his sleep about a war that may or may not have occurred.
- A recent widow, inconsolable, holds her husband’s scarf in a vice-grip, reciting *Hail Marys* and *Our Fathers* at breakneck speed.
- A fidgeting girl, pigtails and all, picks at her chicken pox until they bleed like late-June strawberries.

This disparate group is my new family, and the suspense of waiting holds us together like a fibrin meshwork in an ever-expanding clot.

As my head wars with my neck to remain upright, I see an apparent godsend. Someone’s made coffee thick as La Brea tar, and I probe its murky depths for mastodon bones before taking my first sip. I’m not fossilized, not yet anyhow, and I elbow Sleep in his pillowgy gut.

The details of my own story feel unimportant.

I might be awaiting news of my father, heart attack victim at age 50; or news regarding my ailing partner, whose hellish fevers and headaches have kept us both awake for three nights straight; or perhaps the prognosis of my best friend, whose thin frame suffered a spontaneous pneumothorax while driving to school one unsuspecting morning.

What matters most are the intangibles, the silken nets that catch us when Disaster strikes, rearing its toothy head and daring us to fall apart completely.

There are tires floating in the Susquehanna and smoke plumes rising above Hershey’s candy skyline. There are fires in Hell, red balloons in Heaven and uncomfortable chairs in Purgatory.

And there is certainty that life goes on. Because it has to.

Judge’s Comments:

This author uses nuanced and complex description and strong metaphors to create a vivid portrait of the emergency room. The copies of *Newsweek* are “exhausted” like the people waiting, and a girl “picks at her chicken pox until they bleed like late-June strawberries.” This is a place that we can see and hear and feel. The narrator connects strongly to the patients he sees, acknowledging that we are all in this together, that there is sadness, finality, and hope waiting for all of us.

Third Place

After the Office Visit

© James Thomas Patient

One tissue--wipe the eyes, the runny nose, and--  
Should I toss it? Don’t like waste.  
Maybe use it one more time.  
The “sensation” is here again.  
Just slight. Not to worry.  
Clean up the kitchen--two steps to the garbage:  
If I take all this from the bar, I can make it in one trip.  
Efficiency. Make each step count.  
There it is again.  
Not to worry. (The stents were years ago.)  
60-40. Good odds?  
One more trip to find out.

Judge’s Comments:

This poem captures with subtlety and grace the uncetainty inhabited by the chronically ill patient while at home. Every detail is called into question; every slightly odd sensation could augur a serious problem. There is a sense here of the person outside the illness (doesn’t like waste), but it shows how every moment of his life is invaded by anxiety and waiting. The last line makes great use of double meaning – the “one more trip” may be to the garbage can, to the doctor’s office, to the hospital, or to the edge of fear.

Honorable Mention

Allegheny General, 2005

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

“I’m sorry.” Unlike her head and hands, her eyes were ill-trained for giving news like this. Communicate clearly, be precise.  
A teenage boy and his sister, a wife resisting her own imaginings—open-casket, crucifix in hand, nieces in floral dresses—a black-cassocked man sat in the waiting room outside the ICU. He was young, uncomfortable—but trying hard to be adequate. This was his training.  
He opened his Psalter, haltingly searching for the one psalm that would make everything right. His fingers flipped too quickly; all ceremony was lost. Steady. Deliberate movement. Try again. He began: “In you, O Lord, I have taken refuge, let me never be put to shame.”  
Bellevue, Northside, Pittsburgh. He was no more a priest than a doctor. At least a doctor, a custodian could assess and act on knowable things like disease, dystrophy, the various states of anatomical catastrophe.  
Theophany, January, snow. What was he waiting for? A moving experience? A crisis? What could he possibly bring to the waiting room but a Psalter, a shadow of the message: Even this will be redeemed.  
His voice carried on: “Though you have made me see troubles, many and bitter, you will restore my life again.” The boy looked down, hands tightening. The sister leant toward the woman. “From the depths of the earth, you will bring me up.”  
The Psalter closed. He sighed, stayed a moment longer, mouthed “I’m sorry” and left, convinced training like this might break him long before ordination. The woman—at once, relieved and surprised—heard herself voice lightly, *Amen*.

Judge’s Comments:

A young priest attempts, in this poem, to comfort a grieving family, although he isn’t quite up to the job and his attempts are awkward. However, the brief pause in the wife’s fearful imaginings of her husband’s funeral, in the momentary reading of a Bible verse, brings the family back together and gives the woman a moment of peace. The unexpected but natural ending makes us see the work of the clergy in a new light.



## 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 JT Waldman, a comic book illustrator and interaction designer based in Philadelphia. A graduate of the University of Michigan, his illustrative work has exhibited in New York City, Miami, Baltimore, San Francisco, and Washington DC. Best known for his graphic novel adaptation of the biblical *Book of Esther*, JT also contributed to two books that detail the intersection of comic books and Judaism, *From Krakow to Krypton* and *The Jewish Graphic Novel*. JT is currently completing a graphic novel he began in collaboration with the late Harvey Pekar in 2007. To learn more about JT and his work go to [www.JTWaldman.com](http://www.JTWaldman.com).

### First Place

#### Stranded

© Jesse Blank MS I



#### Judge's Comments:

*Stranded* is a textbook example of the seductive power of spirals and diagonal compositions. Even with its complicated structures and central focus, this photograph manages to keep the eye gliding across its surface in pirouettes. The combination of clear and blurry points with architectural and abstract forms makes this image both familiar and foreign. The wheelchair may be stranded by the snow, but the movement within this piece is anything but immobile.

## Second Place

#### Inebriates

© Roger Ford Patient



#### Judge's Comments:

"*Inebriates*" is a puzzling image that demands attention. Like a mash-up of *Animal Planet* and Thomas Eakin's masterpiece *The Gross Clinic*, this macro photo of bees dissecting a fruit is both grotesque and mesmerizing. The warmth of the high-contrast light in the background furthers the ephemeral nature of this photo. There is something very sweet and dangerous about this photograph, a juxtaposition of ideas that makes this image so powerful.



## Third Place

### Medical Clinic - Haiti 2010

© J. Spence Reid, M.D. Department of Orthopaedics and Rehabilitation



#### Judge's Comments:

The warped perspective created by the fish-eye lens in *Medical Clinic* gives the viewer only an inkling of the devastation of last year's earthquake in Haiti. The snippets of the corners of things, from the corner of sky to the yellow edges of the placard on the wall, points to the things left out of this picture--most notably, the rest of the medical equipment that goes with this chair and the adults to accompany the three children depicted in the image. The generally muted colors with punches of vivid hue also remind me of the work of Zoe Strauss.

## Honorable Mention

### Boo!

© Michael J. Green, M.D., M.S.  
Departments of Internal Medicine and Humanities



#### Judge's Comments:

This photograph is chock-full of whimsy and fun. The punched up colors in Photoshop add to the staged but cute cavalcade of costumed children. From the fairy and ipod to the tie-dyed twins, the gestures and faces capture the excitement and sweet joy of childhood innocence.

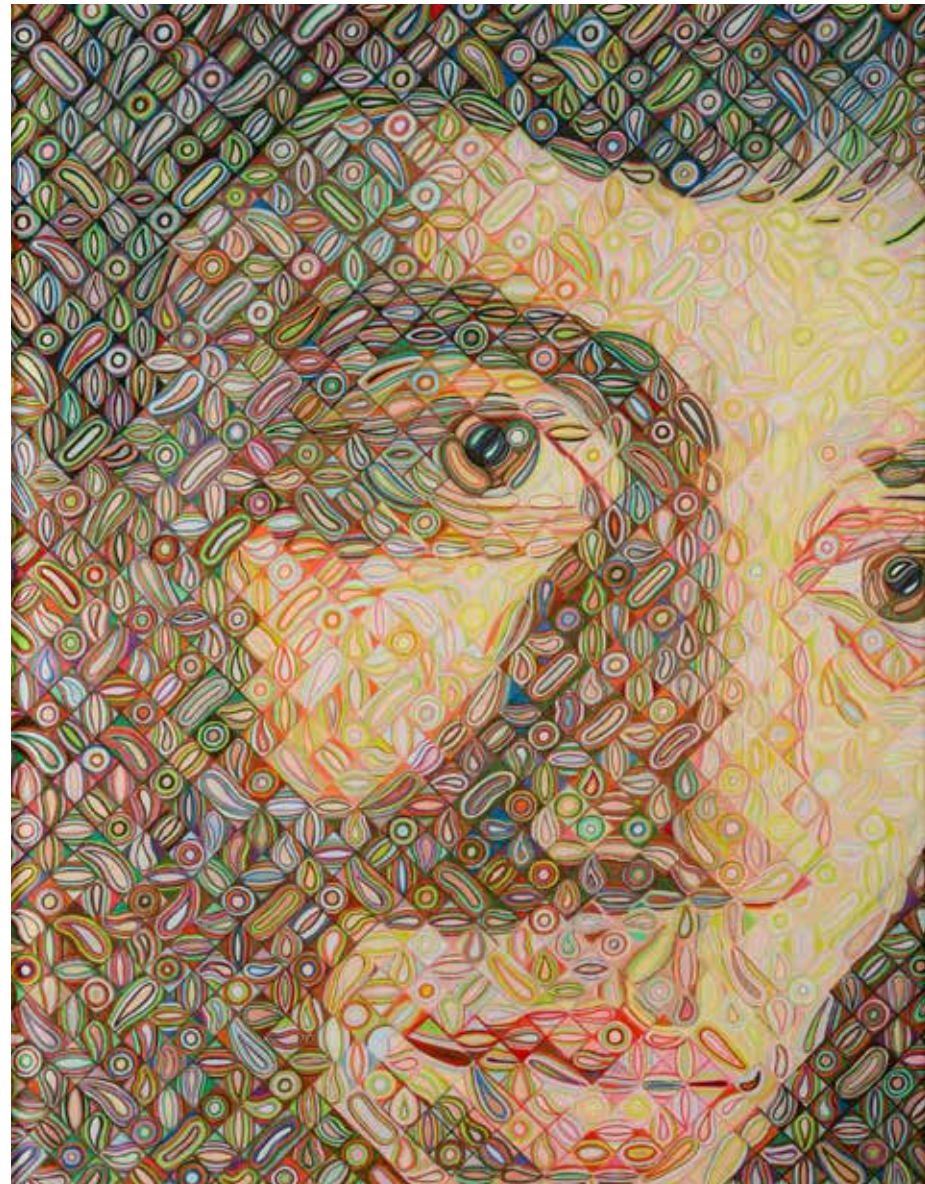


## Winners of The Doctors Kienle Competition in Art

### First Place

#### Self Portrait

©Daniel R. George, Ph.D. Department of Humanities



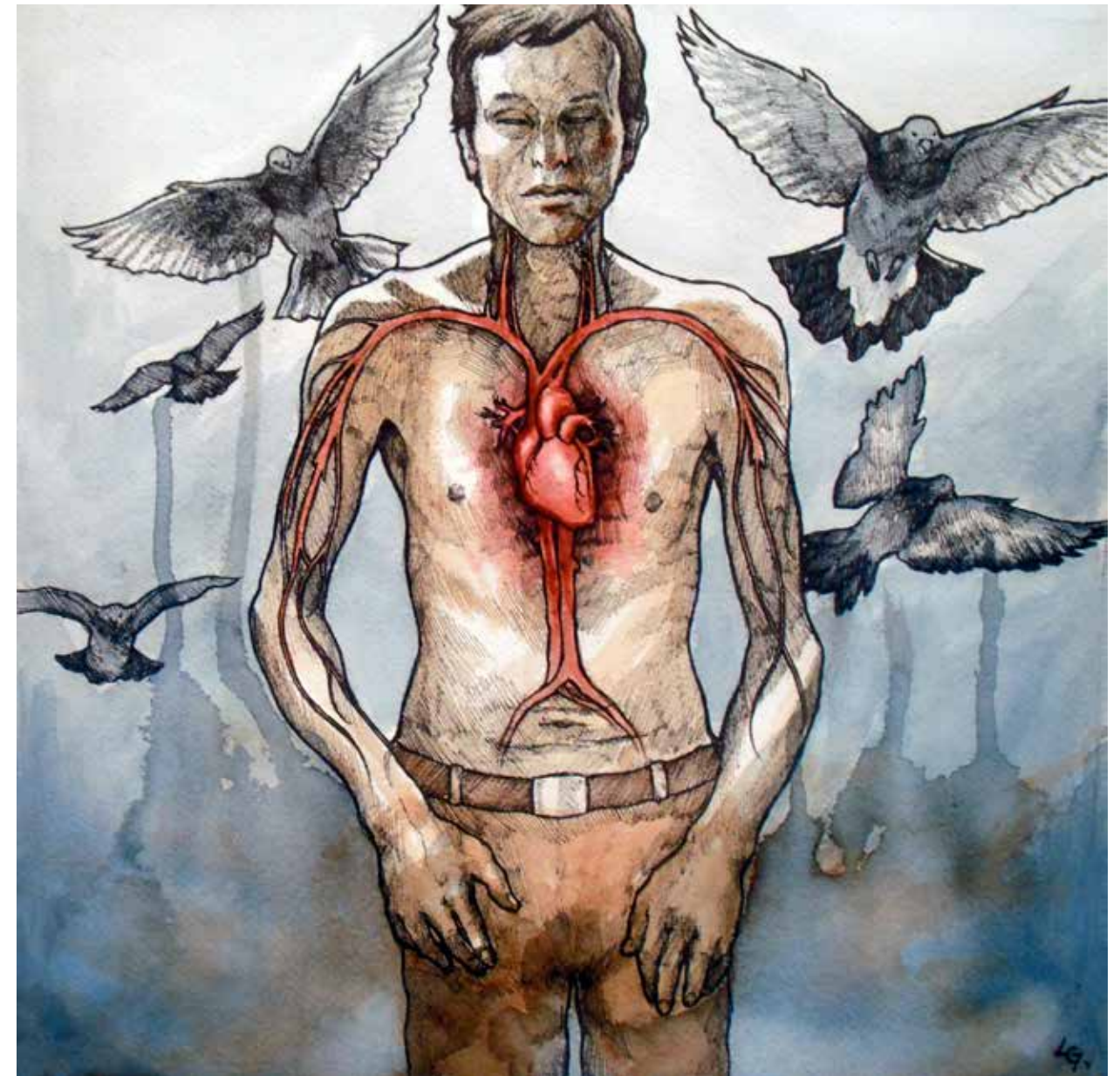
#### Judge's Comments:

Precision in art and science reveals not just a knack for craftsmanship but alludes to something more liminal beyond verbal description. Although this painting quotes heavily from Chuck Close, I still found myself intrigued by the patient consideration of color, cellular fragments, and range in tonal values. Like a cover of an old song belted out with concise clarity, this work pays tribute to the original while also standing on its own merit.

### Second Place

#### La Curación

©Lisandro Gonzalez Son of Mario D. Gonzalez, M.D. Cardiac Electrophysiology



#### Judge's Comments:

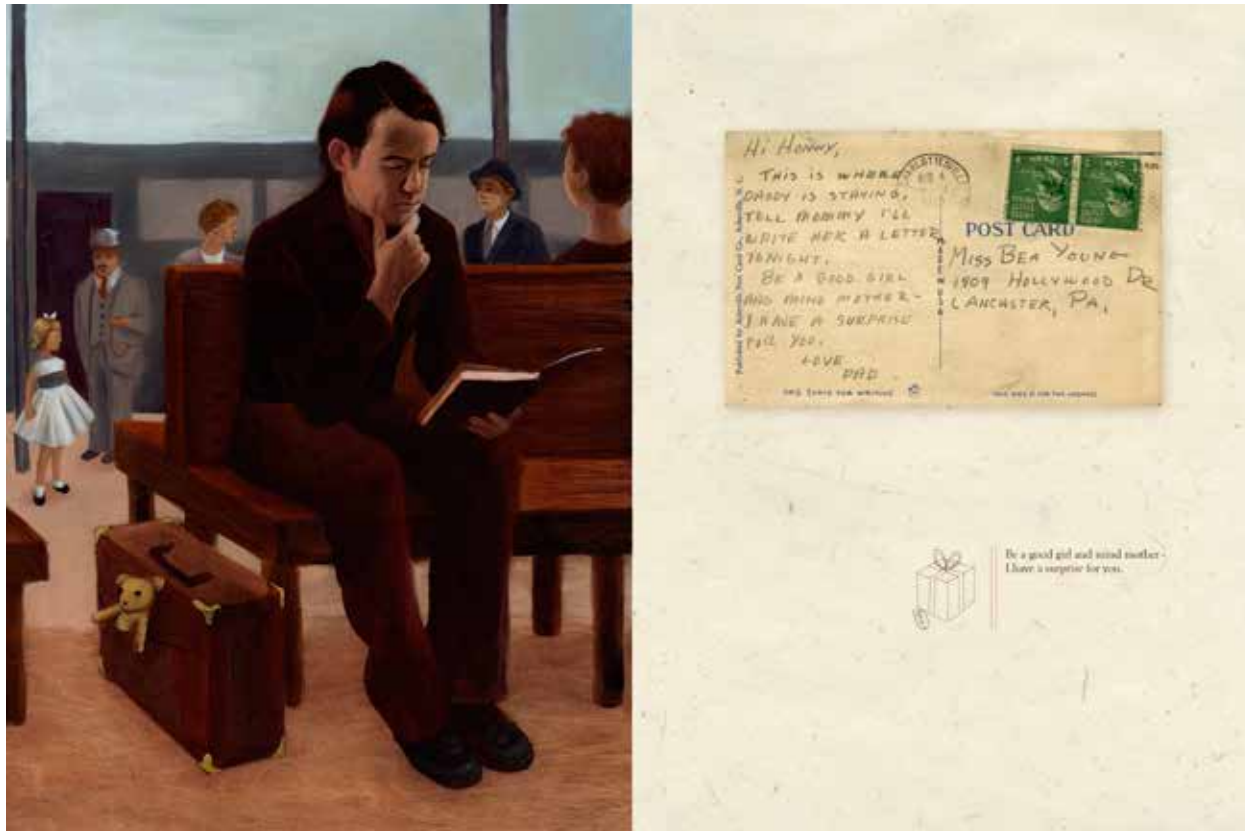
*La Curación* is powerful illustrative work with an enigmatic narrative. The blue/brown palette establishes a somber tone while creating a feel of urban blight without any depiction of a building. The watercolor drips descending from pigeons, often associated with vectors of disease, and the meditative yet strained expression of the central figure, with his exposed heart and vascular system, suggest that maybe he is the carrier of the disease. With a mysterious title like "The Cure" this could be the cover of many dystopian comic books that have come out in recent years.



## Third Place

### Going Home

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



#### Judge's Comments:

*Going Home* is another image with robust narrative qualities. Although I found the pairing of the postcard and the painting redundant, I appreciated the artist's attempt to braid together meaning using text and image. With the teddy bear tucked in a suitcase, the train conductor and his pocket watch, the exaggerated focus on the girl and the man quietly reading, I had plenty of information to ponder. Simple yet complex, textured yet flat, this image has lots to tell.

## Honorable Mention

### Pennsylvania Farm Scene

© Taylor Olmsted MS II



#### Judge's Comments:

With a clearly delineated foreground, mid-ground, and background, this landscape painting effectively creates the illusion of depth. The diagonally vanishing picket fences help too. I most enjoy the sense of light and shadow in this piece, whether it's the yellow glow of the fields or the dark shade under the trees. *Pennsylvania Farm Scene* succinctly captures the fresh and vibrant feel of rural Pennsylvania.



## SELECTED WORKS

When dealing with life, the mind reacts in different ways. Some express their deepest struggles through a given emotion; others suppress their thoughts only to muster an uncanny strength. But each person in healthcare--whether it is the provider, the patient or the supporter--fights to maintain dignity. Pain and death are often called the most atrocious and dreadful aspects of life. However some, often those who have faced them, say they provide a window into understanding the secrets of human dignity. These eloquent poetic verses, vivid prose, timeless snapshots, and liberating brush strokes are their most accurate definitions.

## Opportunity

© Heather Bowers MS II

## Pause Mode

© Blake Chin-Lee MS III

"This is Blake Chin-Lee C-H-I-N HYPHEN L-E-E 3rd year medical student dictating Palliative Care consults."

"First patient, CB is an 86 year old female with a past medical history..."

\*pause mode\*

I am standing in a room. A frail woman is sitting up in a bed. She is exhausted. Every breath is like a slow climb up a mountain; every spoken word a fight against a crashing wave. I try to speak to her. She speaks. Her words are soft and muffled. I do not understand. I lean closer. \*pause mode\* There is love in the room. Great-grandchildren fill the walls with laughter. They almost run in to me. I say "excuse me" and smile. They smile back. They run off again. \*pause mode\* The daughter stands by the counter. She is watching her mother with a gaze in deep reflection, or maybe she is just lost in thought. The granddaughter sits next to her grandmother. She is trying to hold back her tears. The son-in-law asks me a question. I answer, while holding back my own tears.

\*beep\*

"...significant for COPD, coronary artery disease, atrial fibrillation and presumed lung cancer."

---

"Second patient, KB is a 45 year old female with..."

\*pause mode\*

There is silence. We talk in hushed tones not because we are afraid to wake her, but because the silence demands it. Only the beeping of the various machines punctuate our conversation. Unlike us, the numerous machines do not respect such demands. \*pause mode\* IVs, tubes and catheters spew out from beneath her gown. They flow like tendrils coursing the contours of her body. I try to trace each one from their destination to their end. Somehow, I always get lost. \*pause mode\* I know "he" is in the room. I can see "him" in the blackening slowly crawling up her fingers. I can feel "him" in the cold touch of her hands. "He" is here, waiting. There is nothing we can do.

\*beep\*

"...a past medical history significant for polysubstance abuse and long-standing DM."

---

"Third patient, SB is an 81 year old male with..."

\*pause mode\*

He is lying in bed. Breaths are rapid, like a swiftly meandering stream. But he is feeling OK. He pauses to catch his breath, but he does not feel short of breath. Next time I will have to pay closer attention to his eyes. I think, for a moment, I saw fear. \*pause mode\* His wife sits in a corner of the ED room. We ask him about her. They have been married 1½ years. He promised her 10 years. He says he is not going to disappoint her; he says he is not going to let her down. He is a fighter. He always was. \*pause mode\* He is quite the charmer with the ladies. I ask him for a tip. "Always get the last word in," he says, "yes dear."

\*beep\*

"...a past medical history significant for bladder cancer s/p bilateral nephrostomy and radical cystoprostatectomy."

---

"Last dictation, BC is a 25 year old male with..."

\*pause mode\*

## Tropical Therapy

© Ha Pham Patient's Son





The Duel

©Bradford Kim MS III

The two effete eyelids are in a match  
against the click without a bull to aid.  
Relentless manner, poised, each side to spring  
a violent fight--unyielding coup de grâce.  
The eyes stretch out against a heavy load.  
A twitching pull that teases and wears the mind,  
hands rise to rub and calm the nervous tick  
to soothe a small moment and gather vim.  
A tick, a tock, a click--the bell will ring.  
Unfocused eyes seek out the taunting clock,  
in fear of what the arms of time shall read;  
the lids contract to squeeze the shudder out.

House Call

©Elisabeth Hyde MS IV

I got the call on morning rounds today:  
A new patient with tightness in his chest.  
They gave him drugs to take the pain away;  
It helped the heart but did not help the rest.  
He asked me why, and how, and what this meant.  
He counted years of fitness and watchful diet.  
He spoke of love and faith and time well spent.  
The same disease was how his father died.  
Tomorrow they will open up his chest,  
Sew in new pipes to help his heart perfuse.  
He waits 'til then with angst, his body tense.  
He asks me how to break the frightening news.  
I give him words to tell the story right:  
“Don’t fret Dad, please. Just get some rest tonight.”



Bicycle Parked in  
Eternity’s Spot

©Roger Ford Patient

Symbol

©Jonathan Chu MS III

The white coat signifies many things.  
The white coat is a credential that one wears. When I wear my white coat, my patient--a waitress at a local restaurant--hangs upon my every word as I explain how her diabetes affects her heart and kidneys, readily lifts her shirt for the cardiac and abdominal exams, and has absolute trust in my unskilled hands as I percuss for her liver and spleen. That night, when I am out to dinner with my friends, wearing a t-shirt and jeans, another waitress is examining my driver’s license, surprised that I am old enough to drink alcohol.  
The white coat is a bandolier, taut with the weight of the instruments of our profession. My stethoscope and reflex hammer go in the right outer pocket, my casebook in the left outer pocket, the article on sepsis for today’s journal club in another, chicken-scratch notes on my patients are crammed in yet another, and of course, in the breast pocket I fit the small essentials: a Maxwell’s guide, a mini-vision chart, tongue depressors, EKG calipers, and a collection of pens from which the residents pilfer. Fully loaded, the coat has a weight that is reassuring, and also substantial enough to make my shoulders ache over the course of the day.  
The white coat is a fomite for disease transmission. Though the stark white color gives the impression of antisepsis, in reality it carries the rhinovirus of the attending who sneezed on me during morning rounds, the Staphylococcus aureus of the patient in contact isolation, the Escherichia coli from the ostomy bag I handled earlier, and the who-knows-what from the adorable pediatric patient who tugged at my coat-tails after picking his nose.  
The white coat is a blanket. During a small break between OR cases, I sneak to the library, sprawl onto one of the couches, set the alarm on my pager, drape the white coat over my shoulders, pull it up to my chin, and then close my eyes to steal a few minutes of sleep.  
The white coat is armor. Its austerity makes small children shrink away in fear, causes enough anxiety in adults to make blood pressure jump ten or twenty millimeters of mercury. My colleagues and I snap to attention when confronted by anyone with a white coat longer than ours. When my patient’s family asks difficult questions about his cancer, I cross my arms and shrink back into the coat as my attending struggles to answer; I stare at the floor and attempt to hide behind that same cold austerity, as if it could somehow deflect their grief and desperation, as if it could somehow protect me from my own emotions.  
The white coat may be a bit archaic, yes, but it will forever be an indelible icon in the medical culture. As one of my colleagues put it, “We wear it because it tells people what we are.”  
When I return home from the medical center, I throw it carelessly over a chair. Usually, I forget about it for the remainder of the night, but sometimes I find myself pausing to look at it, to reflect, for my white coat is not only a reminder of another day at the hospital yet to come, but also a reminder of who I am, of who I am becoming.



Bloom

©Jonathan Chu MS III



Refreshing

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





Faith in Haiti - January 2010

© J. Spence Reid, M.D. Department of Orthopaedics and Rehabilitation

Dr. Doctor’s Developmental Dilemma

©Kaynan Doctor, M.D. Pediatric Resident

2 months is cooing with a social smile; she’ll lift up her head and look past the midline.  
4 months is rolling from front to back, looking when called and aiming to grab.  
6 is for sitting with a raking grasp; when strangers are near he’ll cry and gasp.  
9 is for standing with dad nearby, picking up beads and saying bye-bye.  
12 is for walking and pincer grasp too, calling for mama and copying you.  
15 is moonwalking, using a cup, yelling more words and pointing up.  
18 is kicking and following cues, naming his toes and stacking 4 cubes.  
24 months and building 6 blocks, climbing up steps and removing her socks.  
3 years old, what a feat! Tricycles, circles and brushing his teeth.  
At 4 it’s your turn in cooperative play, counting 10 numbers and hopping today!  
Let’s tie up this rhyme as we get to age 5; she’s done up her laces and is immunized!

Adventure and Exploration

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



Payment Delayed

© Anne Tantum  
Former Employee of Continuing Education

It is 1948. We’re going to visit Dr. Biddle’s office.  
It’s in one side of that big white house with the porch on Main Street across from the barber shop. He’s one of the four general practitioners in town. Office hours are posted on the door: 9 – 11; 1- 4; 7 – 9. No office hours Wednesday & Saturday evenings or Sunday. He makes his house calls after hours.  
Inside, the waiting room is lined with dark-stained Windsor chairs. *Life* and *Look* magazines lie on the coffee table in the corner. Someone has dropped a tissue onto the linoleum floor by the coat rack.  
Behind the waiting room door, there’s a small interview room with a big desk and a couple of chairs. The treatment room in the back has an examining table and a sterilizer that runs every night, filled with the day’s dirty needles and syringes. In the corner, the doctor has a brand new fluoroscope – it is the only one in town. Wide-mouth bottles filled with pills and capsules line a set of shelves. Dr. Biddle dispenses them in small envelopes.

The doctor may not be in because it is a few minutes after four o’clock.  
In the waiting room, a woman with a large brown bag is sitting in a chair. The doctor’s wife has heard the door and has come to investigate. The woman in the chair insists on seeing Dr. Biddle. His wife explains that he’s sleeping – getting a nap before evening office hours. “He was up all night on a house call - delivering a baby - and I don’t want to wake him,” she explains. “May I help you?”  
The woman gets louder, “I do not want to talk to you. I want to talk to the doctor.”  
‘May I ask what this is in regard to?’ the wife asks. “No, it is a private matter,” the woman rasps.  
Reluctantly, Mrs. Biddle wakes her husband. She knows he’s exhausted. He dresses, putting on his starched white shirt and tie, and heads downstairs into the waiting room.  
The woman with the brown bag stands up as he enters. “Hi, Doc,” she says. “Remember last time I was here? I couldn’t pay you. Well, today I can. Here are some fresh green beans.”  
Yawn. Another day, another dol.... payment.





Out West  
© Lindsay Smith MS I

Failure of Heart

© Elisabeth Hyde MS IV

He left AMA last week, mad. Now he stumbles towards the door, breathless, his brown ponytail stuck to the faded, clammy tee shirt. His feet bloated wineskins, his legs swollen like casks. With clenched fists and desperate eyes, he looks at the nurse who lost his slippers last time he was here. Brand new, \$24.99.

My Secret

© Tory Miksiewicz MS I

As I swallow my daily cocktail of promise,  
I remember my routine with dread.  
The gym calls my name, but my body is unwilling.  
Class is not an option if I fall back into bed.  
My peers see a brighter future full of hope,  
But I can only see the ominous decision at hand.  
Should I take cover in my room until tomorrow,  
Or attack the day and take a stand?  
  
Courage gets me out the door,  
But fleeting is the feeling.  
I sit in the back of a lecture pondering:  
Does anyone here really know the meaning of healing?  
Could you treat my illness without judgment,  
And listen to my many frustrations?  
Do you know that you've made me uncomfortable?  
Ironically, in health-related conversations.  
  
My secret isn't a secret if you ask,  
But ignorance is bliss for some in this town.  
I'll continue living moment-by-moment, cherishing my time,  
And embracing the ups and downs.

Masks

© Ananya Das  
Administrative Support Assistant  
Department of Orthopaedics & Rehabilitation

She has taken to wearing masks now....  
  
She didn't always wear them.  
They seared her face  
when she first wore them,  
alien, stiff and cumbersome,  
hiding her from the world.  
  
But now they are a part of her  
and feel like a second skin.  
Her mind no longer  
revolts when she wears them,  
her face no longer aches.

Everyone sees her collection of masks.  
They have forgotten what she looks like  
and so has she.

Girl Unrecognizable

© Rollyn Ornstein, M.D.  
Department of Pediatrics

Girl Unrecognizable  
Waiting on line at the hospital Starbucks  
Oh, that must be her!  
Face bloated by the steroids  
Head bald under a wool cap  
Port jutting from her chest wall  
I don't really recognize her now  
But her parents look familiar  
Two years ago, she had body image concerns  
She was being bullied at school for being fat  
And now she's a teenage girl  
Fighting cancer  
A far worse bully  
Or maybe not  
The way teens interpret things  
Perhaps cancer is easier to fight  
90% cure rate at five years  
I can't say that for anorexia nervosa  
It seems much harder to put an end to bullying  
Than Hodgkin's lymphoma  
What a crazy world we live in  
Funny, she's waiting with her mom  
Smiling and laughing  
Two years ago, she sat in my office  
Crying.



Tears

© Ariana lantosca Age 15  
Daughter of Mark lantosca, M.D.  
Department of Neurosurgery



Little Blue

© Dan Shapiro, Ph.D.  
Department of Humanities





Pure Joy © Natalie Dogal MS I

## Orange Creature

©Emily Paul Age 8  
Granddaughter of John Neely, M.D., F.A.A.P., A.B.I.H.M.  
Departments of Pediatrics, Humanities and  
Family & Community Medicine

An orange creature,  
seeing the world.  
Its eyes opening for the first time,  
as it smells the world,  
and smiles at everyone.  
Halloween 2010

## One Miracle On Mother's Day

©Sigmund J. David (Siggy)  
Patient  
My daughter's note said, "I love you, Mom."  
First she had struggled with her sounds--  
Then her letters.  
We read her aloud  
So many books.  
At some point,  
The sounds, letters  
And then words  
Appeared.  
Sometimes  
Miracles only happen  
In secret places.

## Alphabet Soup

©Xiaowei (Bill) Su MS II

I see a child  
Playing in the Cancer Center  
Holding a balloon  
"Get well!"  
Who is it for?  
Grandma, uncle, cousin, brother?  
Will he remember?  
He tugs on the balloon, smiles.  
I wonder if he's hungry;  
It's cold – he wouldn't mind some soup.  
RB, Ras, Myc...  
Does he like alphabet soup?  
And if he had it,  
Could he make sense of it all?  
APC, p53, PTEN...  
So much to digest.  
If he does remember  
Why he came with his balloon  
In the dread January whitefrost  
What else could he spell?  
Years from now...  
D-I-S-C-O-V-E-R-Y?  
Today a distant lingering...  
C-U-R-E?  
Now he is running behind me  
Where is he going?  
Bounding towards the future?  
Quickly, I get out of his way.



## Safe

©Angela L. Sedun  
Mother of Pediatric Patient



Dedication to a Healer

© John Neely, M.D., F.A.A.P., A.B.I.H.M.  
Departments of Pediatrics, Humanities, and Family & Community Medicine

They say I have leukemia, I hear it's something rare.  
I really don't know what it is, but Mom and Dad seem scared.  
I'm going to the clinic now, I'm going to be better now,  
. . . Because Janiece is there.  
  
I'm going to the clinic, and I'm feeling kinda sick.  
My stomach's in a knot and I might need a needle stick.  
I've only one thing to demand, I need someone to hold my hand,  
. . . I'm glad Janiece is there!  
  
The clinic is the place to go,  
Where I can be myself, you know,  
I'm missing school and all my friends,  
And will my treatments ever end?  
My Mom still loves me with no hair,  
But I have a new friend who cares,  
. . . Because Janiece is there.  
  
I went to clinic yesterday, I went in with my Dad.  
Janiece is now retiring, and everyone was sad.  
I don't know what "retire" is, but something I can tell you is,  
. . . I'll miss Janiece's care.

*Janiece Crovella was a Child Life Specialist in the Pediatric Oncology Clinic at Penn State Children's Hospital from 1994 until her retirement in October 2010. She was a stalwart defender of the needs of children in their healing process. She was a friend and support to all who knew her. Janiece passed away on January 14, 2011 after a long illness.*

Unseen Admirer

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



Distorted Mirror Image

© Sarah Summer Shaffer Patient

Thin legs  
Fragile fingers  
Parched lips  
A skeleton covered in a layer of skin as sheer as a sheet  
  
She looks in the mirror once more  
Only to see a reflection of tear-stained cheeks  
Only to see a fat monster glaring her in the eyes  
The voice rings through the room again,  
"You ugly girl. Don't you see you will never be beautiful?"  
  
With nothing inside her stomach...  
An empty hole...  
She falls to the ground with only enough strength to lean  
against the wall and weep  
  
Looking to the ceiling in the bathroom  
She can't catch her breath  
Gripping her hair  
She screams out in anguish  
  
The only thing she is able to control is what she puts  
past her lips  
She holds onto this with all she has  
  
The scale is her best friend  
Only finding hope in the small numbers that show  
on the display  
  
Blind to her destructive path  
Every breath is one closer to her last

The Doctor Grows Up

© Elizabeth Sinz, M.D.  
Department of Anesthesiology

There once was a doctor from there  
Who cured folks with hardly a care  
Since they weren't acquainted  
His work was not tainted  
With feelings or empathy shared  
  
One day came a patient well known  
Whose illness did cause him to groan  
The doctor was reeling  
With all sorts of feelings  
That never before he had owned



Sunset by the River

© N.S. Jatavallabhula  
Chief Resident in Neurosurgery



Old Algiers

© Bradford Kim MS III



Impediments

© Steph Sullivan MS IV

White hospital walls surround me  
I am proud among the uniforms  
Courage, compassion, and love quicken my step  
Today I'll make a difference  
  
Different medicine, different thoughts  
A mistake, a misstep with consequences  
Just make it to the stairwell  
There I can find refuge  
  
I started with hello, but the day wore on  
Exhaustion sets in at night, isolation, hunger  
The criticism of the day relived  
All I can do now is be polite  
  
White hospital walls surround me  
Alone now, the lesions of the day fade the smile  
My best intentions brought me here, impediments cloud the view

Carving a Space

© Jodi L. Bossler  
Wife of Randall Bossler, Jr. MS II

I panic  
when I remember  
that it will be only three, short months  
until he is here.  
I must carve out a niche  
in an avalanche,  
build him a fresh nest of blue cotton  
and the softest things that I can gather.  
The reality is:  
my life is hardly ever new or clean,  
that my possessions are piled everywhere,  
that dirt lives with me, joyfully,  
and I hope he can abide it.  
I will make a home for him in the overflow,  
amidst the chaos;  
piled high on blue pillows and fluff  
between my girlhood dolls:  
this one, real child.

Empty Spaces

© Julie Baird Wife of David Baird, MS IV

They had been cleaning out the back bedroom all day. He had balked at the idea at first. There were still four months to go. It wasn't as if the mess was going anywhere. But she had insisted. It was time to get things ready. So their Saturday was filled like the garbage bags they hauled out to the dumpsters. Boxes of old clothing and used Tupperware were piled into the corner for Goodwill. Camping gear, cans of Campbell's soup, and boxes of Fruity Pebbles were all shifted around like one contorted chess game. Pieces were moving, but nothing was removed. But miraculously, slowly the shelves began to empty. Space emerged. He noticed her look around the room, hands on her hips and a small smile of satisfaction framing her face, and yet—there was a trace of something more. A line had formed around the corner of her lip. A disconcerted wrinkle.  
“What's wrong?” he asked.  
“Nothing,” she responded.  
“Are you worried about getting things ready?”  
“No. It'll be all right. We still have time to get everything set.”

“I thought I was allowed to stay with her?” he asked, panic rising in his voice.  
“Under the usual circumstances, you are. But in this case, sir, we need you to leave immediately.”  
“But what if—”

“We will come to get you as soon as we can, sir,” the nurse responded. “You won't be left in the dark. Someone will come to inform you of the progress periodically. Your wife will be fine. Please, follow me.” With a final squeeze of his wife's hand, he followed the nurse down the convoluted corridor. Patient beds were strewn down the sides of the hallway. The IV stands that looked like crosses loomed down on him. Doctors walked past, brusquely brushing past his shoulder. Then there was air. The corridor expanded into a wide room. Sofas and chairs were perched around partitions of walls and windows. Pinks and greens. He noticed that they were all pinks and greens.

“Here, Mr. Connelly, have a seat here. You'll be perfectly comfortable and we'll come to update you as soon as we can. Try to set your mind at ease. I'm sure your wife will be fine.”  
The nurse's words echoed his wife's from earlier that day. She said she was fine. She told him all was well.

She assured him that she was just tired.  
“I just need to lie down,” she breathed. “I think she must have moved. I'm having such a hard time breathing. I just need to rest.”  
He sat down with her. He rubbed her feet with his thumbs. This always seemed to calm her down. She was on her feet most of the day, everyday, and they were a prime complaint. She smiled with her eyes closed, taking large breaths and blowing them out slowly through her mouth. The rhythmic rise and fall of her chest lulled her to sleep. He stopped rubbing and set her feet down gently. Taking a blanket from the corner closet, he draped it over her. She would be better when she woke up.

He sat staring at the fake plant by his side. The plastic tubing that created the veins of the foliage was riddled with dust and dirt. His eyes traced the detailing on the “leaves” again and again. Up, over, around, down. Up, over, around, down. The monotony was broken by the voices of others—waiting. He noticed them for the first time. It seemed to him that he was the only one in that space, despite the partitions. As quickly as the thought had come, he realized what a foolish assumption that had been. Of course there were others—his wife was not the only one in the hospital. Two women were closest to him. They spoke to each other, almost out of habit, barely listening to what the other had to say.

“These things are just standard procedure. You know that they do these types of things every day. Nothing to be concerned about. You just watch too much television.”  
“I hope that they remember we're here. I think they may have forgotten. Perhaps I should go find someone and ask.”

“The other day I was reading about something just like this and—”  
Their conversation muted as he turned his head away. A young woman sat across from him. Her legs were crossed, and she flipped absently through the pages of a magazine. Occasionally she would pause, the page suspended in the air between her finger and thumb, before releasing it with a jerk of her wrist. Her hair was pulled up and out of her face, and she bounced her leg while she browsed. She appeared to be waiting alone, like him. But for nothing serious, he concluded. Her face was too relaxed.

Pebble in the Sand

© Praveen Grover Brother of Indu Sinha Department of Biochemistry & Molecular Biology





Two chairs away from the girl an older man sat with his arms folded across his chest and his chin slumped down to his sternum. His fine grey hair was parted at the side and his lower lip protruded outward, reminding him of a pouting child. The man’s eyes fluttered open occasionally, jerking his head upward.

“Mr. Connelly?” He jumped as he heard his name and rose to his feet. A young looking doctor motioned him forward. “Please follow me.” The space behind him was swallowed into the shallow corridor, but he was not sorry to leave the room. He trotted to keep up with the quick pace of the physician, asking questions along the way. “We tried to stop the labor,” the physician began, “but it has become necessary for your wife to deliver.”

“Deliver?” he questioned, “She’s only 21 weeks.” “You won’t have much time to—to spend together.”

“What are you saying?” The doctor stopped walking and turned to face him. His eyes looked tired. “It’s important that you take the time that you have with your baby.”

He walked into the room, taking small steps compared to the strides he needed to get down the hallway. His wife was propped up in bed, perspiration beaded her forehead. She tried to smile, but it morphed into a pained grimace. He reached for her hand, and she grasped his tightly. “I’m so sorry,” came a strained whisper.

“Don’t say that,” he replied, “You’re doing great.” He wanted to believe that everything was normal. She woke up that afternoon in pain—severe cramping. That can happen, they had heard. She may just be dehydrated. He filled her water glass again and again with chilled water. After the fourth glass, she shook her head in protest. She was hydrated enough. But the pain only increased. He stroked her head as she squeezed her eyes shut and clenched her jaw. Eventually the pain became too much for him to

watch. It was time to go to the hospital. She didn’t want to. He had to convince her at first. He supported her as they walked down the stairs and out to their car. Her hands felt clammy inside of his. She never had warm hands. It was then that he began to admit that things were not normal.

He held his baby as delicately as he could. She was so small. So perfect. He couldn’t stop gazing at her eyelashes. It seemed remarkable to him that she should have eyelashes. And fingernails. They seemed like such minor things compared to a working heart. And yet here they were, little eyelashes framing her minute eyes and tiny fingernails on each and every finger. He counted them. One by one.

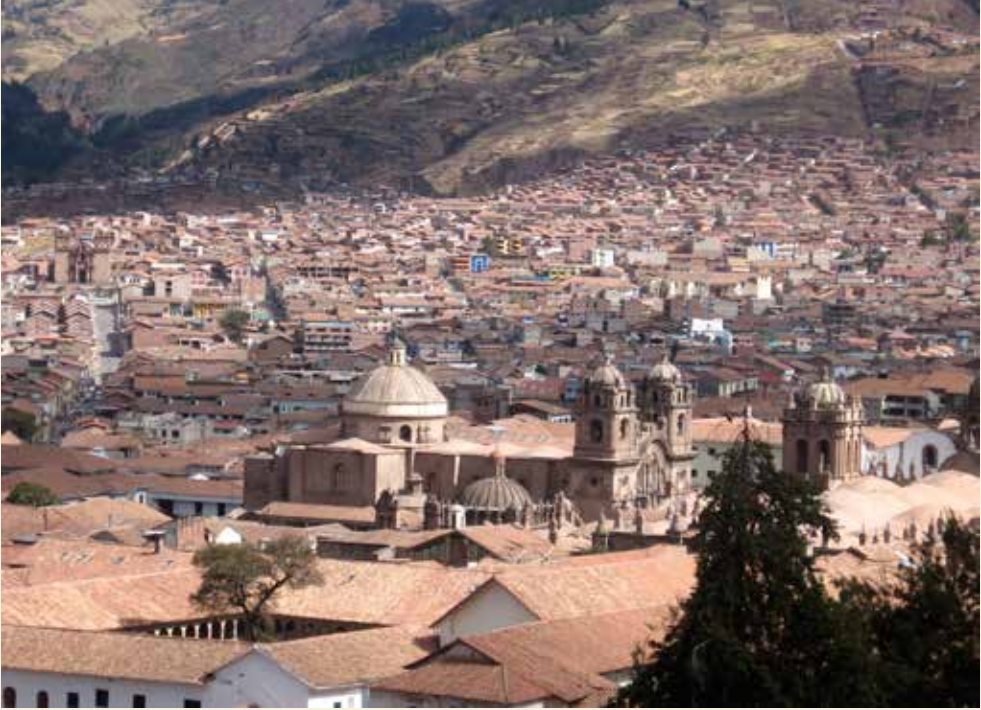
He and his wife took turns holding her. Marveling over how small she was. She was just barely bigger than his hands. He had to memorize her. Her face, her hands, her feet. He didn’t dare blink. He held her hand on the corner of one of his fingers. 42 minutes later, her strong heart stopped. And so, it seemed in that instant, did his.

It began to beat again—in starts and stops. It had stopped dead for the first few months, but slowly life’s blood began to pump back into it. There were moments where it was back to its full functioning. A strong beat. And there were still times where it slowed again, effort put forth into each and every thump. It was in these moments that he realized that he was trying to force her memory out. When he allowed her to enter his mind freely and leave when she was ready, his heart was steady. It was only when he was trying to forget that his heart began to slow.

She had looked like her mother. She had had her profile. He would try to catch his wife from the side, while she was cooking, perhaps, or getting ready in the morning. He would look at her and remember. And he felt his heart beating again.

Lake Powell, Utah

©Lindsay Smith MS I



Rooftops of Cusco 2009

©Daniel Newman Spouse of MS II

Remembering Croesus

©Xiaowei (Bill) Su MS II

Solon! Solon! Solon!  
The words of Croesus, the Lydian king  
As the flames advanced  
Closer atop the executioner’s pyre.  
His empire vanquished  
And the conqueror Cyrus  
Persian ruler, triumphant  
Watching from the gilded throne.  
But these words give Cyrus pause;  
Cyrus, shrewd and learned  
Who is this Solon?  
What God is he whom Croesus calls in death?  
“My liege, Solon is a man  
An Athenian who visited Croesus  
At the height of empire  
Who told him Fortune is fickle.  
Count no man happy until he be dead”  
Solon had warned.  
This moves Cyrus  
Croesus and I are one and the same  
At the mercy of time and chance  
Who differ only by name.  
Save him!  
His words have pierced my being.

Water! Water! Water!  
The words of my patient  
His lungs wracked with emphysema  
His cough filling the room.  
Frail, gaunt and emaciated  
He stares deep into my eyes  
The last time I was healthy, doctor?  
Must be at least ten years.  
And suddenly I remember Croesus  
This man and I are one and the same  
At the mercy of time and chance  
Who differ only by name.  
His fingers, ulnar deviated, barely moving  
May well be mine  
As could his gaze  
Filled with the wasted exhaustion of waiting  
I look again into his eyes  
And see only myself staring.  
What’s the matter, doctor?  
You’re fidgeting with that stethoscope  
And my attention returns  
As I continue the history, my mind cries  
Save him!  
His words have pierced my being.



The Odor of Love

©Elizabeth Sinz, M.D.  
Department of Anesthesiology

Seeping into his clothes, his bed, his chair  
We have become accustomed to it, still  
It stings the nostrils as we first enter  
His space, which used to be ours  
  
Demanding to be noticed, wishing to be heard  
Wanting control again, like before:  
When he was him and we were his and  
all was well.

Ernest

©Mariel Herbert MS III

The dapper gentleman adjusts his diaper.

San Fran Man

© Eldhose Thekkethottiyil MS II



As a Poet I Fear Little

© Linda Amos  
Wife of Liver Transplant Patient

The threat of dementia  
    When words and vowels  
        And rhythm and rhyme  
            Will desert me.  
  
The threat of arthritis  
    When it worsens and I can  
        No longer put pen to paper  
            making my hands useless to me.  
  
The threat of death  
    When I can no longer wish upon a star,  
        Write my dreams down on paper,  
            Or kiss your lips, once more.  
  
As I poet, I fear little  
    Especially not the empty words of a critic!

On Having

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

“Think of your ovaries like wine glasses,” he said, coolly with calmness rehearsed.  
The rest of the visit felt empty, routine. Referrals and consults, his tests and mine.  
No matter how many times I hear them say otherwise, I’ve failed.  
The parking lot, the long drive home—seasons of sadness rolled in.  
  
You should have taken more notes, prepared more questions,  
researched more sites before inevitability arrived.  
  
Having. Sex. Kids. Faith. Having. Better Homes  
& Gardens. The LRB. Joyce on the nightstand.  
Mucus charts. EPTs. Tissue boxes in every room.  
  
Saturday, January, the backyard still drifted with snow.  
A Blackhawk from the nearby Guard base throttles overhead.  
The hooks and slopes of shadows from the county’s second largest Mulberry  
tree shift along their tethered base.  
  
Marriage. Long shadows. Multiple miscarriages. Southern exposure.  
Family planning. Planting garden. A bottle  
left out in the snow.

New Diagnosis

©Julie Uspal MS III

four days in and I am telling him what he fears most:  
the bone marrow does not look good  
it’s what we expected: blasts and blasts and blasts  
slow down: my Dad doesn’t even know what a blast is  
neither did I two years ago  
now, I don’t know much, but I know enough:  
Auer rods are unmistakable  
  
I shift under the weight of the whitecoat  
a bookstore jammed in the pockets  
but there’s no manual for this  
no way to wipe away the moment, wipe the marrow clear  
  
I want to throw my arms around him  
change the story:  
remember that little shop on the way home from the bay--  
pizza so good we forgot about our sunburn?  
remember playing chess by the campfire--  
just enough light to witness the fall of a dynasty?  
remember biking along the canals last summer?  
  
he clears his throat and I remember:  
this is just my patient  
this is not my dad  
this man is not my father  
thank God this man is not my father –  
  
the moment is brief  
I remember: he’s someone else’s



Mindful Moment

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



Reflections of  
Madison’s Montpelier

©Michele Morrissey  
Financial Liason  
Financial Services



The Easiest Way Through  
This is the Hard Way

© Dwayne Morris Staff  
Medical Office Associate Training Program

A man doesn't leave  
After vowing to stay  
When his world caves in  
He kneels down to pray  
Before the mountain ever moves  
He's given God praise  
And the easiest way through this  
Is the hard way

Hearts will break  
In this world we know  
Tears like rain  
Overflow  
We're broken  
And we're beautiful  
All in the same way  
And the easiest way through this  
Is the hard way

Post Seizure MRI

© Joseph Gascho, M.D.  
Division of Cardiology

When your turn 21,  
fling open the door  
or hand the skeleton key  
to whomever you want  
but  
it should be  
illegal at 2  
to stick you  
into that big magnet  
so Big Brother  
can get inside  
your beautiful head.



Concussed

© Kyle Lewis MS I



Baghdad Physician  
with Wounded Marine

© Jonathan Chu MS III

Lie-Down Comic

© Mariel Herbert MS III

When I told you that joke about the turtle and the snail, you laughed so hard that you bled around your stitches, a red flower blossomed beneath the gauze on your cheek. The whole thing fascinated the ten-year-old me so much that I refused to visit you for four whole days. I didn't even tell Mom what happened--that I hurt you. The next time I ventured inside your hospital room, you weren't doing well. You didn't even wake up. The busy monitors seemed more alive than you were. Mom called it one of your "bad days." I sat next to her on that scratchy blue chair while she held your hand and cried. The last time I saw you, I was worried you would yell at me for what I did; I deserved it. But you didn't. Instead you told me a story about a giraffe who thought he was a lion. And the local lionesses were so offended by his confusion that they made the unfortunate giraffe their next meal. By the time you got to the last line: "Never let the pride go to your head," I was giggling so much that I forgot all about you being sick. When I asked Mom if it would be okay if I told the joke at your funeral, she hugged me for a good three minutes.

The other day I recounted the punny tale of the arrogant giraffe to my daughter. I wish her grandfather could have told it to her first.

The Conversation

© James Thomas Patient

Who do you talk to about dying?  
Nobody's been there.  
Nobody's done that.  
There ought to be an expert, somewhere.  
There are doctors and preachers,  
Philosophers and counselors  
Professors, astrologers and vets,  
But they don't know.  
Some think they do.  
But they don't. Not really.  
They just speculate.  
So who do you ask about dying?  
Speculation about the unknowable can lead to despair.  
This I know  
I've been there.



Curtain of Light

© Brenda Kluhsman, Ph.D.  
Department of Public Health Sciences





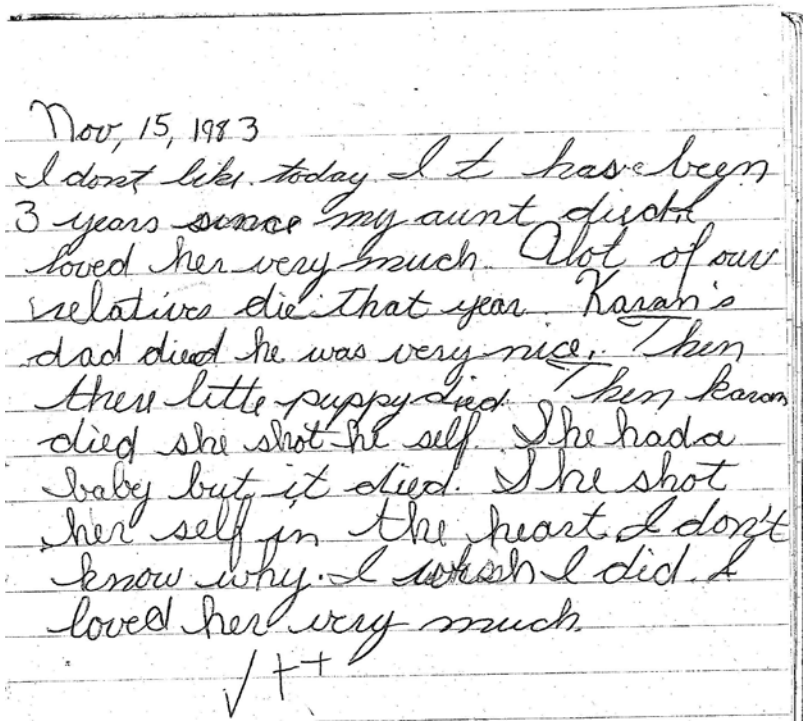
## Untitled

© Taylor Olmsted MS II

On November 15, 1981  
Karen Reed took her  
own life. I was nine  
years old at the time of  
her death.

This is my 6<sup>th</sup> grade  
journal entry from  
November 15, 1983;  
two years after Karen's  
death.

The question of why,  
asked by an eleven  
year old girl, is the  
same question I ask as  
a thirty-eight year old  
woman.



## Why Karen?

© Jody R. McCullough Department of Public Health Sciences

## Dignitas

© Nicolai Wohns MS II

In a cloud of exhaustion the train pulls into the station. The doors slide to the side, meeting the crowded platform full of mothers and girlfriends and children jostling for a clear vantage of their loved ones spilling from the door one by one like chickens from a narrow coop. The sun, still low in the sky, peeks through the slots in the station roof. Rigid from the long night ride in artificial illumination, you stretch, raising a hand to block the morning sun, but you realize the futility of the act and lower your hand. You stare at the sun and the sun stares back.

The night ride wasn't easy, a passage common enough, but this time your quota for hardship is full. You're ready to be done. Now, once you're finally stationary you drop from the train breathing a sigh, but your deliverance is drowned by the push of passengers, and you're reminded of the unbearable absence of breathable air.

Coming out of the crowd, there's a man in a gray wool suit holding a small piece of paper with your name on it. He raises his hand in greeting and leans forward to catch your eye. "I'm glad you're here," you manage to say reaching the man. He nods, "Now that everything is in order are you sure you'd like to continue?"

The man motions toward the parking lot. "How was the train ride? Did you get any sleep?" "The lights in the carriage were blinding," you say. "I couldn't see the stars for my reflection."

His car is waiting. Leather seats, water bottles, boxes of white tissue. A sweat of rain pervades the interior like a mountain forest after a downpour.

And then we arrive in front of a smart-looking apartment building. You get out, and as you cross the narrow street the uneven lay of cobblestones buffets the soles of your feet. The stones look recently washed in strips, shiny and clean where the cars run; even the gutters are clean. The air is light and crisp as if never inhaled. The sky is blue and full, the sun shining sideways as if saying, "Behold, the world."

The man opens the door of the building and enters, beckoning in. You mount the staircase until the door with DIGNITAS written on a plaque. The man shows you in and closes the door.

"Here it is," says the man. The apartment is sparsely decorated with a large window opening onto the city. The lake, shimmering in the morning light, is visible to the right.

The man motions to the plush seat by the window. You lower yourself gently into it and breath out until your interior and exterior reach equilibrium, an equilibrium that sinks you lower and lower into the plush. The train ride tired you. A lifetime of renewal and fatigue pulls on your body.

The man walks out of the room, returning immediately with a glass of water. Out of a cabinet he removes a small vial and empties it into the glass, watching the two colorless liquids mix, twisting and contorting around each other. He places the glass on the side table next to the window. "The doctor's forms are all in order. Now are you sure you'd like to continue?"

Your fingers wrap around the glass, cold with its fluid, and outside the sun shines on the still lake, and trolleys snake up and down the street like old couples slowly navigating a corridor. Below, a boy and a girl walk hand in hand. Their gait is so youthful in its moxie that the street scene becomes hopelessly infused with a seductive nectar of vitality, one that lures the innocent into a room with no exit and clouds the view with a mist of impossible dreams. The boy stops and with his hand around the girl's waist pulls her close. He whispers in her ear and they dive together into an endless embrace.

Back in your plush seat and the empty room you see the man in gray, and he looks at you sitting in a cloud of dust and the colorless liquid in your hand. You put the glass to your lips, close your eyes and let the poisonous drink chill the back of your throat. It coats your throat, then esophagus, then gut and you can feel your arms and legs not feeling your arms and legs. And the air in the apartment suddenly wanes thin and frigid, lifting dust particles that grow in prominence like waxing moons. And your mind stumbles back to the apartment, to the gray scratching wool of the man's suit, to the life you've just about finished, a burnt day-old-pizza-crust-of-a-life lying still after the delicious part is gone. Gone and you're ready to go, fantastic visions of color-wheels and city lights, the purple surge of passion in youth and its measured companion in aging brown, and the blurred majesty of sunflower fields, memories eddying, spilling like neglected spaghetti water boiling over in protest. Boiling dust in colorless liquid. Boiling leather seats and tissues. Trains stop and breathe. Sputter.

And as you lean your head to look over the city one last time, you are blinded by the glory of the morning sun, dead in the dusty seat by the window.



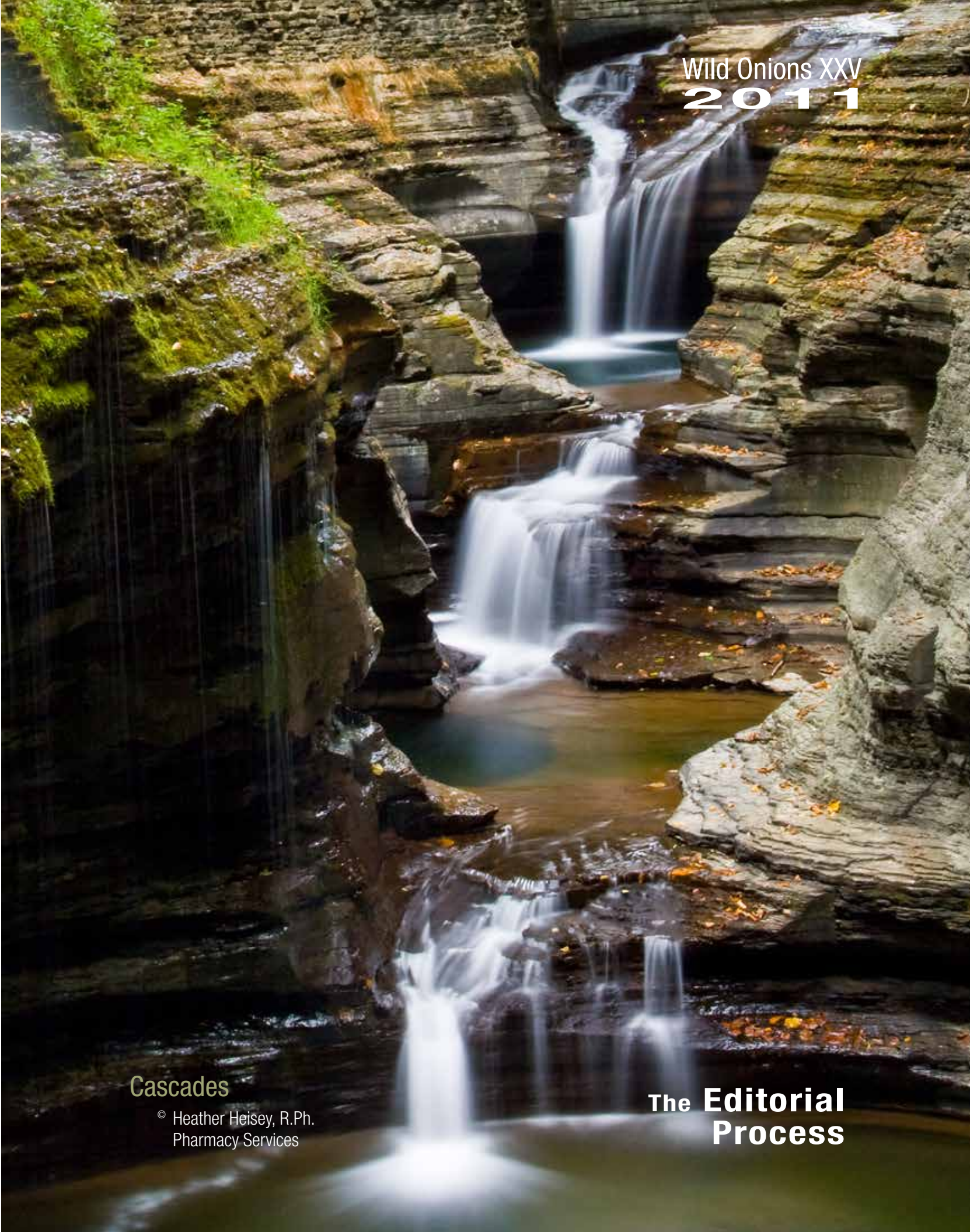
The Presence of Her Absence

© Judy Schaefer  
Member of The Doctors Kienle Center for Humanistic Medicine

Her absence is like a fast growing evergreen  
planted too close to the house  
Growing strong and straight  
it becomes a weight supporting beam.  
Soft tips brushing against the window at the slightest breeze  
Fronds whisking the shingles and the eaves at the smallest gust  
Fine sharp needles filtering the blaze of August sun  
Dark fingered shadows reordering winter's constellations  
Resetting the stars  
Reshaping the moon  
A tap root deep into solid ground,  
her absence at once acute and ancient

Memory

© Heather Bowers MS II



Cascades

© Heather Heisey, R.Ph.  
Pharmacy Services

The Editorial  
Process



# Student Managing Editors

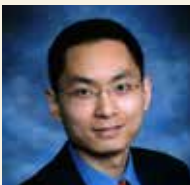
The “student managing editor” position is new to *Wild Onions* this year. Two student editors per medical school class were chosen to act as representatives for and recruiters/coordinators of their respective classmates. We thank them for their efforts, which greatly facilitated the senior co-editors’ strivings for efficiency and timeliness in the preparation of the magazine.



**Jessica Lundgren, MSIII** was born and raised in Du Bois, PA and graduated from Penn State in 2008 with degrees in English and Life Science. She enjoys fly fishing and, no kidding, gets absolutely colossal catches on every expedition. She also enjoys vegetable gardening, knitting, and exaggerating. During her two years as a *Wild Onions* editor, she has loved seeing the wealth of creativity and the passion for literature and the arts that comes out of our community.



**Julie Uspal, MSIII** is from Wyomissing, PA who has always had a keen interest in the humanities, especially contemporary poetry. Prior to medical school, she attended the University of Pittsburgh where she studied biology and English literature. She has had several pieces published in past editions of *Wild Onions* and, as an editor, enjoys sharing in the creativity of each submission and seeing the medical world from so many different voices. While at Penn State, she has also been involved with the student-run clinic for the medically underserved in Harrisburg and has tutored pediatric patients in Hershey.



**Xiaowei (Bill) Su, MS II**, a resident of Connecticut before medical school, immigrated to the United States from Beijing, China. He is currently a second year MD/PhD student and will join the laboratory of Dr. James Connor in the Department of Neurosurgery in July. A biology major in college, he took courses in Shakespeare and Russian literature, and enjoys the works of Hugo, Plath and Charles Rosen. A believer in the importance of literature and the arts in medicine, he also admires the works of Temple Grandin and Kay Jamison, as well as the writings of Albert Schweitzer. He hopes readers enjoy the poetry, prose, artwork and photography included in this edition of *Wild Onions*, and wishes that they engage the mind, bring a smile, and touch the heart.



Born in India and raised in the United Arab Emirates, **Eldhose Thekkethottiyil, MSII** had a multicultural upbringing which he likes to describe as “colorful.” During his school years, even though he excelled academically, his real passion was the arts and he always found effective self-expression in music and acting. After finishing high school in Dubai, Eldhose immigrated to the United States in 2004. His family currently resides in Philadelphia. While attending Temple University, Eldhose majored in Biology and Music. Coming from a family of businessmen, Eldhose is the first one in his family to go into medicine. His hobbies include composing music, traveling, biking, cooking, and photography. One day, Eldhose would like to open up his own café that specializes in South-Indian Coffee/Tea and bakery items.



**Sarah Tisel, MSI**, is passionate about travel and using creative writing as a lens through which to understand cultures and experiences. This summer she will travel to India to participate in the Jamkhet Community Rural Health Project, a project that empowers women in rural communities by training them as primary care providers. She hopes that what she learns about rural health care in the developing world will give her ideas about how to improve public health in disadvantaged segments of the developed world. Sarah also endeavors to better understand the brain through research in neuroscience. Prior to medical school, she spent a year at the National Institutes of Health studying the molecular basis of pain pathways, and she hopes to one day apply research to improve patient care.

**Yehoshua N. Laker, MSI** (that’s yih-hoe-SHOO-uh, Hebrew for Joshua) hails from New York and graduated from Queens College, CUNY, where he double-majored in biology and English. While there, he also copy-edited for the campus newspaper and wrote a personal technology column for some years, and freelanced for a local newspaper. Here in Hershey he’s managed to maintain these interests via *Wild Onions* and *The Forum Periodical* and as his class’s IT Chair. An Orthodox Jew, Yehoshua has a daily Talmud study partner, and also recites the Torah professionally in Harrisburg on weekends. He also loves reading classic literature, especially anything Victorian, keeping up with the news of the day, and discovering better ways to use technology. Yehoshua is particularly appreciative of the opportunities provided by Penn State College of Medicine’s focus on humanism.

# The Editorial Process



If you have ever wondered how submissions are chosen for publication in *Wild Onions*, you are not alone. The magazine is almost entirely student-run with the support of the Department of Humanities. Medical students are responsible for recruiting submissions, placing advertisements, selecting submissions for publication, and assisting in design and layout.

All submissions are made anonymous for judging, then read or viewed by different groups of our student editors who advocate for their choice pieces at our selection meeting. When all pieces have been discussed, the final decision to recommend a piece for publication is made democratically, where the majority rules.



The student editors judging literature read all entries prior to our selection meeting, while those judging artwork see the

submissions displayed on tabletops for the first time on the day of selection.

Those pieces recommended for publication go to the Editor in Chief and the Managing Editor, who add any additional pieces selected by our guest judges. Layout considerations play the last role in determining what is included.

*Wild Onions* staff are dedicated not only to literary excellence but also to giving voice to our medical community by publishing works from all submitting groups (caregivers, patients, family, students, etc.) and by limiting the number of publications by any one author. Selection of award winners is made by guest judges who are professionals in the artistic community, and chosen for the honor because of their achievement and expertise.

In the end, then, *Wild Onions* is judged by both amateurs and professionals in order to maintain a special balance which values the efforts of the majority, and still rewards the extraordinary. Like the wild onion blossom itself, the magazine celebrates expression of simple beauties found in everyday places.



## Student Editors - Art

(left) Arda Hotz MSII, Kimberly Rush MSI, Pamela Wagar MSII, Jonathan Chu MSIII, Sarah Smith MSI



## Student Editors - Literature A

(back row, left) Jesse Blank MSI, David Currie MSI, Shana Gleeson MSIII, Julie Uspal MSIII, Mariel Herbert MSIII, Jessica Lundgren MSIII, Diana Dinh MSII (front row) Winona Houser MSI, Zainul Hasanali MSII, Xiaowei Su MSII, Bethany Edwards MSIV, Julie Hou MSIV. Not pictured: Yehoshua N. Laker MSI, Alana Pietragallo MSIV, Ashley Martin MSII



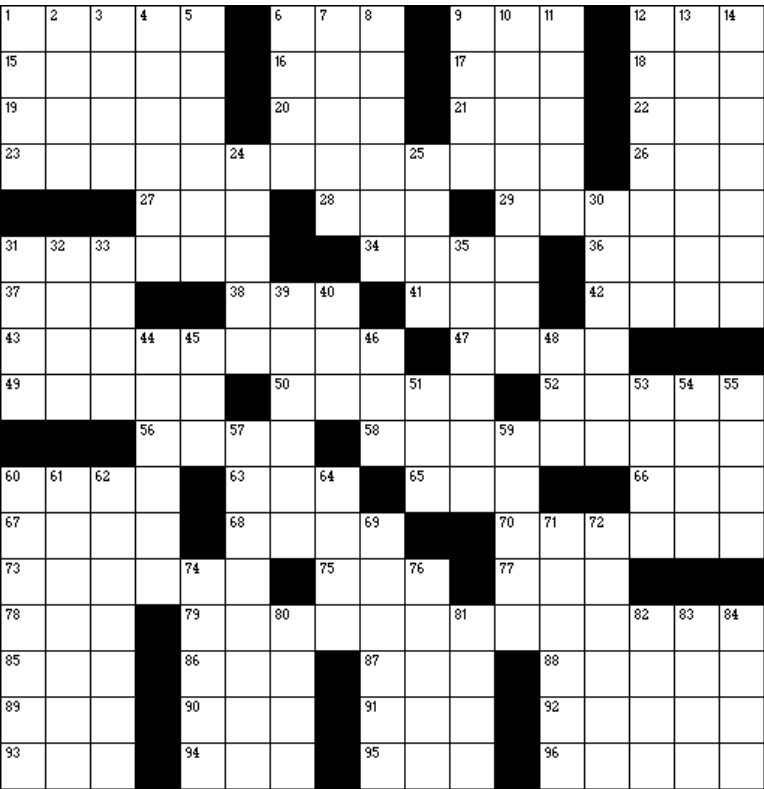
## Student Editors - Literature B

(back row, left) Lisa Toran MSIII, Jessica Lake MSII, Natalie Dogal MSI, Mohammad Bader MSI, Eldhose Thekkethottiyil MSII, Michael Chau MSI (front row) Sarah Tisel MSI, Peter Eyvazzadeh MSI, Kyle Lewis MSI, Ashley Mo MSI



What to do in the waiting room?

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



Across

1. "Sure"

6. Star of a sort

9. Picnic pal

12. Fade

15. "Unto \_\_\_\_ gave five talents..." Matthew 25:15

16. Same: prefix

17. Strive for

18. WE \_\_\_\_! Penn State

19. Zellweger role

20. WAITING ROOM ACTIVITY

21. Chem. suffix

22. Capote nickname

23. WAITING ROOM ACTIVITY

26. Summer camp job, for short

27. New Zealand parrot

28. \_\_\_\_ and Stimpy

29. Haman's nemesis

31. Star Trek weapon

34. Fill up, as with a meal

36. Alternative to Alejandro

37. Ocean creature

38. 1 or 3

41. \_\_\_\_ Bear

42. Baker or roaster

43. WAITING ROOM ACTIVITY

47. Donkey in Dusseldorf

49. WAITING ROOM ACTIVITY

50. WAITING ROOM ACTIVITY
52. Attend

56. Note of a sort

58. WAITING ROOM ACTIVITY

60. Timed walk

63. Unit of energy

65. Call out

66. Had

67. Oversight gov't grp

68. Brief play

70. Bars of metal

73. Shops

75. \_\_\_\_ Miserables

77. Funding agency for painters

78. Hr. part

79. WAITING ROOM ACTIVITY

85. Rapper Platt

86. Egos

87. Minister speech on Sun.

88. WAITING ROOM ACTIVITY

89. Phone co.

90. Air Tahiti \_\_\_\_

91. WAITING ROOM ACTIVITY

92. Substance \_\_\_\_

93. Offspring

94. Cert. roles on military base

95. Trains, on maps

96. Depressed

Down

1. Eur. map abbr

2. Dwarf buffalo

3. WAITING ROOM ACTIVITY

4. Barnyard critters

5. Giggle

6. Deep breath

7. Southwest competitor

8. Kings and Princes

9. Swear

10. Very large shoes

11. High schoolers

12. WAITING ROOM ACTIVITY

13. Subordinate to: French

14. Comics' Jimmy

24. Chocolate substitute

25. Gene parts

30. Drove around

31. Benefits service grp.

32. Cad

33. Wings

35. Common contraction

39. WAITING ROOM ACTIVITY

40. Scooby-\_\_\_\_

44. Put down

45. Copy

46. NYSE stock abbr.

48. Curve in the road

51. Cheer term

53. Therefore, in logic

54. Horn noise

55. Chooses

57. Spilled milk, for example

59. Ogling

60. Marsupials of a type

61. Ski resort and state

62. Clerk's sign at a hotel desk

64. Cover in foil

69. Bully, at times

71. Close

72. Backyard building

74. WAITING ROOM ACTIVITY

76. Tell lies about

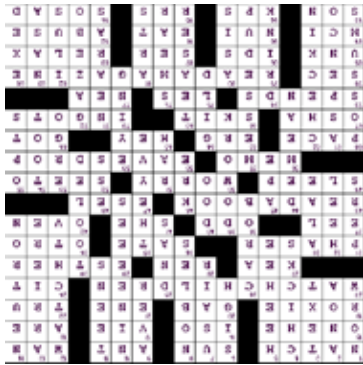
80. Price cut item tag line

81. Fine follower

82. Grandson of Zeus

83. Shuttle org.

84. Crossed off



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