



On the cover:

**Calm Winter Evening**

Mary Corrigan Stjern

Community

Pastel painting

*First Place, Art*

## **From the Editors:**

Albert Einstein said, "The most beautiful experience we can have is the mysterious. It is the fundamental emotion that stands at the cradle of true art and true science. Whoever does not know it and can no longer wonder, no longer marvel, is as good as dead, and his eyes are dimmed."

SIU School of Medicine has a history of dedication to and support of creativity and artistic talent. For 24 years, SIU School of Medicine has proudly presented a compilation of artistic pieces we call SCOPE. This publication gives the students, staff and community an opportunity to showcase skills that may traditionally appear to lie outside the realm of medicine. In fact, many have argued that the practice of medicine is both an art and a science. The ability to create art is believed to be a gift rather than a learned skill. No matter what your passion may be, regardless of type, one would argue you must learn the basic principles prior to successfully practicing these skills.

Through SCOPE, we celebrate the members of the SIU community that possess talent, dedication, creativity and the courage to share their pieces with all of us. We would like to thank all those who submitted pieces for this year's edition as well as all the students and faculty who have collaborated in this effort. We hope you enjoy the 24<sup>th</sup> edition of SCOPE and leave you with this final quote from Sir William Osler. "While medicine is to be your vocation, or calling, see to it that you have also an avocation – some intellectual pastime which may serve to keep you in touch with the world of art, of science, or of letters."

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## ***First Place Poetry***

### **The Dead Man in Question**

Christine Todd, MD, class of 1993 & associate professor  
of medical humanities & internal medicine

In the earliest days of the mysterious plague  
my boss got sick and died of it.  
The people who called in with condolences  
were polite and refrained from asking.

Only one woman bothered to protest the news.  
"I saw him on his way to work just the other day,"  
to which I replied, "I know."  
"You couldn't possibly," she said, and hung up.

I knew that voice. Me, age nine,  
locked in my room after I'd fallen off my bike  
and opened up the skin on my knee.  
Through the keyhole my father was trying to tell me  
he knew how much I hurt.

The dead man in question knew it was coming.  
He gave up drink and he gave up boys but  
he didn't give up his secret. That last Christmas, colleagues  
sent him bottles of champagne, imagining a big winter fire  
at his house and laughter there with friends.

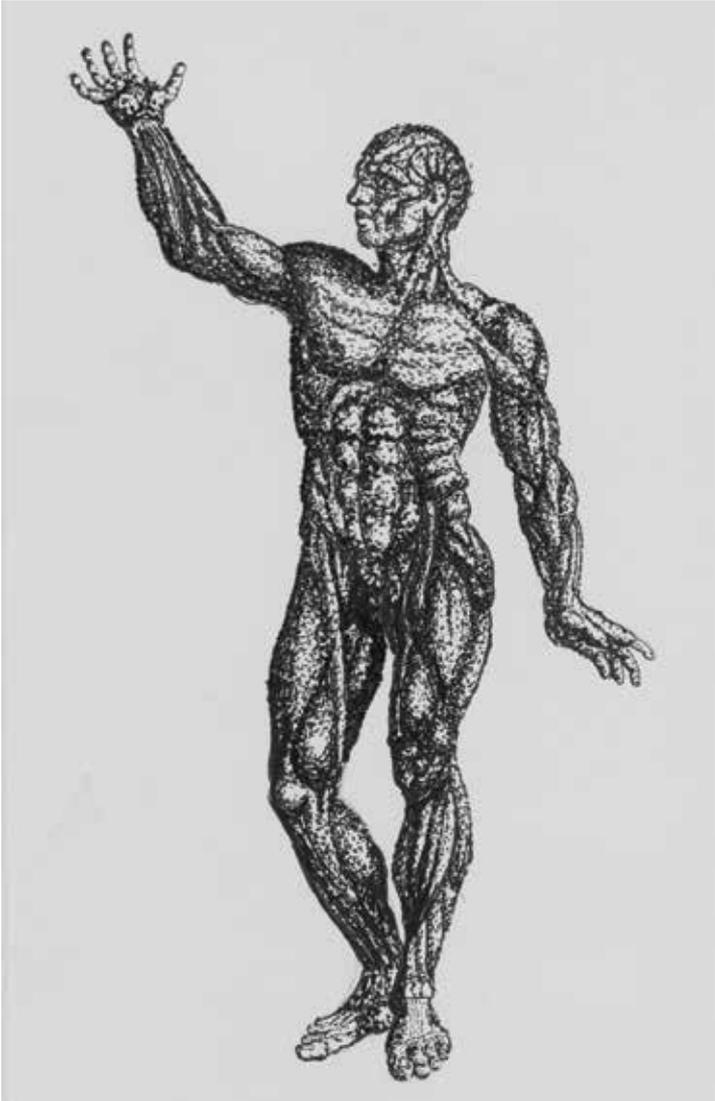
We found the bottles still wrapped when we cleaned out his office,  
Festive, glimmering reproaches under his desk.

I took some bottles home and opened one to find  
the champagne inside had turned vinegar.  
My phone rang as I lined the bottles up on  
the windowsill. Someone who just had to ask wants to know:  
Is it true what I hear that he died of?

Out my window I can see the buildings of the city  
gray, hunkered down, heading for battle.  
The bottles stand guard, fragile and dangerous,  
hope turned acid. I will never be brave enough to touch them.  
I will never throw them out.

**Anatomical Picture of a Man Looking Fabulous While Holding an Invisible Tray**, pen & ink

Joe Clemons, MSIV



## **Book of Life**

John Grace, MD, class of 2000

I nibbled on a corner page,  
And tore it with my teeth.

I nodded with a false brigade,  
Of sword in empty sheath.

I novelled 'yond the quorum made,  
Before I set beneath.

I knew upon the story laid,  
A soul and soul's bequeath.

***Third Place Art***

**Heralds of Spring: Wild Turkeys**, colored pencil

James Vincent Thomalla, MD, class of 1979



**Winter's Gate**, digital photography  
Mark Gordon, community



## **Caution at the Crossing**

Barry Swanson, community

The dark and weathered face  
Of the school crossing guard  
Nestled in his stocking cap  
On a raw October afternoon

Caught my eye  
As I passed by,  
As always, in a hurry  
Speeding along in a half-crazed flurry.

The bridge had long since disappeared  
In my rearview mirror.  
Home now, oh so near.  
The children stood frozen, no sense of fear.

The light signaled stop, don't go.  
A lesson from long ago  
Emerged through my memory loss.  
"Look both ways before you cross."

Important to recall the sage  
Crossing guard's warning at any age.  
An adage true enough  
Wise advice – good stuff.

What we were taught  
Lingers on in a single thought  
With a single caveat,  
As we seek what should be sought.

Don't just look as you flee,  
But rather, see  
Both sides, as you cross cautiously  
Observing life and its mystery.

## ***Second Place Prose***

### **Appreciation**

James Vincent Thomalla, MD, class of 1979

When I first met Cleo I knew he was of the greatest American generation long before Tom Brokaw coined the term. He reminded me of my father in many ways... a man who left his young wife to fight in a far-off war; came back to provide for and raise a family who in turn provided for and raised families. He was not prideful or boastful and you knew where you stood with him. He was a good man.

He was diagnosed with metastatic prostate cancer and over the course of our relationship he played out all the treatment option cards that were then available.... castration: "Just cut my nuts off, Doc, I'm not using them anyway." .... radiation: "My wife says I glow in the dark now!" and finally blood transfusions: "I really feel like Dracula now." Through it all even when he was in pain the strength of his character always showed through. He knew his end was approaching but he faced it like the man he had always been: He looked it straight in the face and didn't flinch. He did what he was supposed to do.

Our clinic visits would have been depressing for both of us had it not been for his love of hunting and fishing and the time we spent telling each other stories. He loved the fact that I put up pictures of my own hunting and fishing adventures on the walls of my exam rooms. "Haven't you done anything recently, these are the same ones as last visit!" We talked about the things that really only sportsmen can share. His greatest love was fishing for muskies on the Black River. "Oh they are smart and they'll tear your tackle to hell." My medical assistant would frequently page me to let me know that we were now 30 minutes or more behind schedule.

During one of his office visits in late summer he asked how much time he had left. Surprisingly, it took me by surprise. I had always been honest with him but we didn't dwell on specifics.

"Well, Cleo, I think we are looking at months now."

"That's what I was figuring. Not too much longer. Well, I was thinking that I wanted to sell you my musky lures and I was thinking a hundred dollars would be fair to ask."

"Sell them? Hell Cleo, you won't be around to spend it. Why don't you just give them to me? I think that's a better offer."

"No, if I just give them to you, you won't appreciate them. Nope, a hundred dollars, cash. A one hundred dollar bill. I'll bet there are 50 lures in that box. You just need to keep me alive long enough so I can get back here one more time and bring 'em with me."

We struck the deal with a handshake and sure as his word two weeks later when I came into the exam room he had a two-toned blue Plano tackle box sitting on the floor in

front of the table. "That damn thing is heavy. Had to have one of your doormen lug it up here for me."

I lifted it up off the floor and put it on the exam table. He was right; it was heavy and well cared for despite being well used. He had used a label maker and in a black strip on the lid was my name, "J.V. Thomalla" and on the side in a red strip, "Muskie's". I reached for my wallet and started to pay him but he had already started to open the box. "See I told you it would be worth the cost!" And he was right. I felt like Lord Carnarvon or Howard Carter as they first peered inside King Tut's tomb, "I see wonderful things."

There neatly arranged in the tackle box's cork-lined cubicles were row after row of classic musky lures: C.C. Roberts Mud Puppies, Heddon Flaptails, Pflueger Globes... short and long bodied, Rapalas of all sizes. Even a Suick. "I hate those damn things; they'll rip the guts out of your reel. Too much resistance." The Holy Grail of musky fishing lures, but more! Braided fishing line in unopened original boxes from the '50's; a hand gaff; leaders and hooks and bobbers all created for catching muskies.

"Whoa, Cleo, this is way cool stuff. I mean this is classic musky tackle. I don't think a hundred dollars is anywhere near enough..."

"Yep, this is primo gear. None of that plastic shit that they started making in the '60's, these are all wood lures. The real deal!"

We started picking thru the lures and they all had a story: "I caught three 20 pounders on that black Flaptail in one day. Look how the body has all those teeth marks on it. Good thing it was made out of wood. That Mud Puppy got swallowed by a musky that broke off the line, but I caught it again a week later." So many stories; so many lures. My medical assistant is now paging me.

"Well, Cleo, I have to go but thank you so much for entrusting this to me, even though I had to pay for it."

"You're welcome and I hope you catch some great fish with all this junk." I looked up from the box to maybe catch him wiping a tear from the corner of his eye.

"I'll see you in a couple weeks. Don't over exert yourself and we'll check your blood count in a few days."

"Gotcha, Doc."

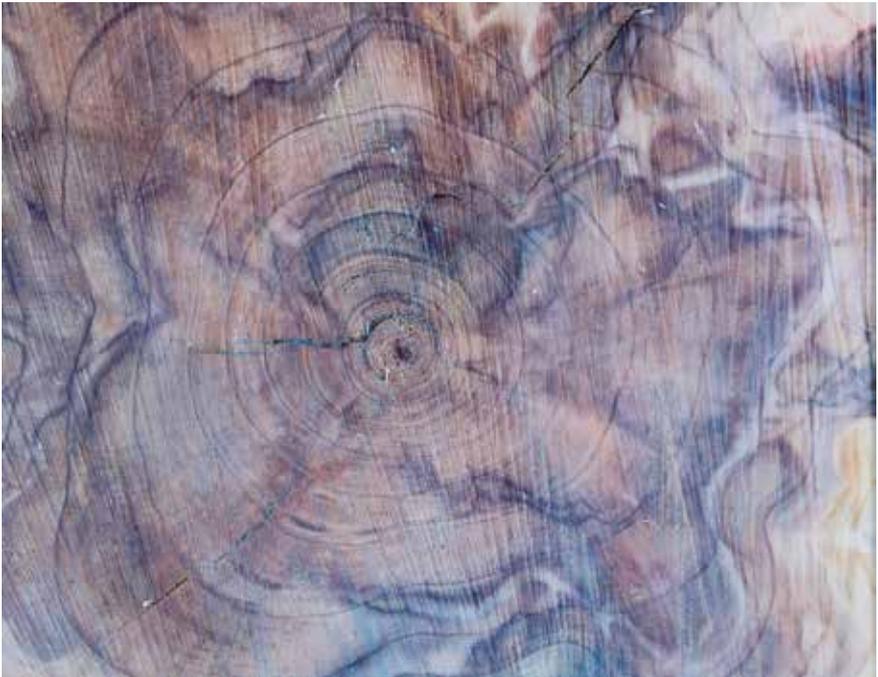
I never saw Cleo again. He succumbed to the prostate cancer about six weeks later, too weak to make the trip over from his home in Black River Falls. The lures remained undisturbed for those six weeks as well as another three months until in mid-February on a snowy frigid day I decided to sit down and go through the "Muskie's" box to review the

## **Appreciation *continued***

treasure I had purchased. I had the same rush of excitement as I had the first time I laid eyes on all those beauties. So much history here. . . .hey what's that. Tucked under one of the cork liners I caught the glimpse of a small folded piece of paper about the size of a match book. I had not seen it previously but it had to have been there. I unfolded the paper and typewritten across the folded slip . . . ."I hope you have as much fun with this stuff as I did." I chuckled at his joke. What a neat old guy to be sure. I went through all the stacked trays admiring the collection I had inherited. And finally on the bottom of the box tucked into one of the corners I discovered another folded piece of paper. I slowly opened the slip wondering what apparition I might see this time. . . . . ."Just try to get your hundred dollars back."

**Bald Cypress, Abstract 1**, digital photography

Glen Aylward, PhD, professor emeritus, pediatrics & psychology



## ***First Place Prose***

### **Night Call**

Andrianna Stephens, MSIII

The moon was full. Subsequently, so was the ED. Rose Santori sat in her office looking at the ED chart as if it were a scoreboard. Six psych patients. Six possible hours. Zero chances of sleep. She sighed. It was going to be a long night. Her eyes drifted, closing. BEEP! BEEP! Great. It was her pager, and of course, it was the ED. She returned the call. "Dr. Santori here, I was paged?"

"Rose, sorry to bother you but there is an unusual patient here. We think they could use further psychiatric evaluation." It was Dr. Lee.

"What's the story, Jake?" "....." There was a long pause. Rose could practically hear crickets coming through the phone.

"Rose, you wouldn't believe me if I told you. I really think you should come down," he finally stated. Dr. Santori sighed in frustration. Long night couldn't begin to describe her feelings.

"I would really appreciate something, Jake. I can't go in blindsided." She breathed every word, trying her hardest to hide her frustration. There was another long pause but finally Jake began to speak.

"The patient is a 30-year-old male. He checked himself in saying he was suicidal. When I went to see him he stated that the stars are aligning and the darkness is coming. He asked me to join him. Power, beauty, and everything I desire is waiting." Here we go, she thought. At least tonight will be interesting.

"What's his medical status? Is there any suspicion for drug use?" she asked.

Jake practically cried out on the other end of the phone. "Rose, I am begging you, please." Rose sighed.

"I'll be down in 15. What's the patient's name?"

"Thank you. Liam Melton." She hung up the phone. She knew no matter what the story was she would eventually have to go down. But something was just off. Her hair stood on the back of her neck. Sure the patient could have a drug-induced psychosis. Or maybe he was schizotypal. This wasn't unusual for a psychiatry resident to encounter. The ED resident's attitude was what disturbed her. He begged her. He was scared, more than usual. He was hiding something. Maybe it's the "Super Moon," she thought. Superstitions were never her thing but it seemed the moon did something to people. All her craziest cases were on a full moon. She tried to look up the patient's information but this was his first time at the hospital. Dr. Santori then made her way to the ED. When she arrived it was unusually eerie. It was quiet and everything seemed to move in slow motion. Everyone was in a daze. Except Jake. He ran to Rose.

"Thank God. He's in room 22." Jake ran off before she could ask any other questions. She looked at room 22. For some reason she thought of *The Shining* with the little boy on the tricycle and the horrifying twins he encountered in the hall. I might have to commit

myself to the psych ward, she thought, and started towards the door. After what seemed like an eternity, she arrived. She knocked, walked in, and saw Liam sitting there. Silent. Smiling. Waiting. Rose thought there was a stench in the air but the patient's hygiene was appropriate. He was in jeans and a black Walking Dead tee. He had long, dirty blonde hair and beautiful, entrancing blue eyes. Those eyes stared at her for a second, unwavering.

A creepy smile widened on his face as he said, "Hello, Dr. Santori."

Rose paused, "Have we met Liam?"

"No, they told me you would be coming."

"Who did, Liam?"

"That is not important. What is important is that you see." He sat and stared calmly as if he was omniscient. The smirk never left his face.

"Do you know why you're here, Liam?" Rose asked. She was all psychiatrist at this point. She studied every move, every twitch, took in every word Liam offered her.

"To bring darkness. To offer your wildest dreams. Let me guess you want a husband, a mansion, to not talk to me right now." He winked his eye and looked as if he was piercing her soul.

"What's the darkness?" she asked ignoring his analysis.

"Now Rose, let's cut the shrinking please. You can't offer me anything. I already have it. Let me help you." His smirk disappeared. His blue eyes turned dark. Rose slowly moved toward the door. Chaos filled the hallway. The stench grew around her. What kind of Super Moon was this? "Come finish talking, do your exam, or face the wrath." Liam stated, his voice much colder. A flicker of track marks on his arm caught Rose's eye. She stayed by the door. "Tsk. Tsk. Dr. Santori. You are safe as long as you listen. Here, let me show you." Everything calmed. The hazy feeling overwhelmed the atmosphere once again. The stench dissipated. The track marks were gone. Rose sat there dazed. She thought maybe she was hallucinating. Rose took a deep breath and returned her focus to her patient.

"Well, Liam, I am a psychiatrist. I need to ask you questions. It's kind of what I do."

Liam smiled eerily but outstretched his hands as if conceding and stated "Ask away." Rose ran through her routine psychiatric history. Liam was mentally intact. There were no signs of mania, schizophrenia, or personality disorders. His judgement, insight, memory, and cognitive function were impeccable. He was just delusional. He spoke of darkness, power, and beauty. He was conniving and manipulative. Rose felt as if she was being hypnotized. The more he talked, the further she was dragged into a trance. For the second time today she felt she was the one who needed psychiatric care. Was he antisocial? He sure had charisma. Rose was boggled.

## **Night Call *continued***

“I need to do a physical exam now, Liam.”

“Do what you need, Doctor.” A stench engulfed her nose as she walked closer to Liam. However, he was clean and well kept. There were no visual signs of poor hygiene. Yet the smell grew stronger. She held her breath, took her stethoscope and placed it on his chest. Silence. Ugh stupid notch is placed the wrong way, she thought as she tapped the stethoscope to make sure it was placed correctly. A deadly sound filled her ears: The stethoscope was working. Weird. She placed the stethoscope back on his chest. There were no heart sounds present. She attempted to listen to his abdomen: no bowel sounds. She listened to his lungs: There were no sounds despite him taking deep breaths. She examined his skin: There were no signs of the marks she thought she had seen before. Rose paused, puzzled. Liam noticed, his smile crept back on his face once again. “Do you believe now? Will you come to the darkness?” He stared with piercing blue eyes full of hope. Rose’s face paled. She slowly moved back to the door. Liam saw her attempting to get away, his smile faded and his eyes grew dark. Chaos erupted in the hallways. The stench grew. Glass broke. People screamed and ran outside of the room. Liam looked at Rose as if she was prey. Rose didn’t know where to go. “I’m disappointed, Dr. Santori.” Liam’s appearance started to change. His flesh decomposed. Track marks reappeared on his arms more defined. His face rapidly deteriorated; visible bone outlined his eye sockets. His nose halved, no cartilage remained. Hair matted to his skull. The stench was overpowering. Dr. Santori slid on the door to the floor, terrified and trying not to regurgitate her dinner.

She gasped and began to speak, “You’re. . . .”, but it was too late. Liam smiled and attacked.

**Dawn**, pastel painting  
Mary Corrigan Stjern, community



## ***Second Place Poetry***

### **Kintsukuroi\***

Asmita Dhukhwa, graduate student of pharmacology

Feebled, stumbled and my existence crumbled

Fell a big fall,

Broken and shattered

Lost a part of me when scattered.

Useless and worthless

There I lay

For the night to gently pass away.

Bright beam of sunlight struck my eyes;

This morning felt different!

Tender me is now tenacious,

Gracious and precious.

I'm repaired, I'm fixed,

My pieces joined together by a golden mix.

I sparkle and shimmer

Those cracks now glimmer.

What I thought was sunlight,

Was the gleam of my golden armor.

My scars healed and sealed

Now aureate,

Like a Luminaire, I illuminate!

\*Japanese art of mending broken pottery using lacquer resin laced with gold or silver.

**Tree Limbs**, watercolor painting  
Lacey Rokita, MSI



## The Greatest Contagion of All

Tony Miksanek, MD, class of 1980

For six straight nights, Jake woke from restless sleep drenched in sweat. The salty water pooled on the center of his chest and formed little puddles that filled his right and left antecubital fossae. Jake perspired so much that he had to get out of bed and change his T-shirt.

"You're soaked again," his wife whispered. Amanda snuggled up against Jake, instinctively drawn to the warmth he radiated. She was usually a sound sleeper. He must have woken her during his tossing and turning. Jake and Amanda had been married for nearly two years and were convinced that they knew everything there was to know about each other.

"Maybe you should see a doctor," Amanda mumbled. She rolled over on her stomach and quickly fell back to sleep.

Sweating – even lots of it – wasn't the kind of thing that merited a visit to the doctor. It didn't seem like such a big deal. Jake figured it would eventually pass. Besides, he didn't exactly trust MD's. They liked to order loads of tests and prescribe pills. Jake wasn't one for taking medicine – not even vitamins or Tylenol.

Still, he didn't exactly feel one hundred percent fine. Lately he was a little draggy. Maybe not as hungry as usual. He figured it was probably stress. He had plenty on his mind. Money was always tight. His job at the prison was hard, and he worried about his own safety while at work. And then there was Amanda. She was pushing to have a baby. Jake wasn't sure the time was right. He liked kids and wouldn't mind having two or three of his own someday, but just not now. Amanda was twenty-two and he was a year older. There was plenty of time ahead to start a family.

Jake changed his brand of antiperspirant. It was advertised as strong stuff and formulated especially for men. After a couple of days of use, there was zero improvement. The sweating spells had not taken a single night off. He gave in to Googling "night sweats in men" and learned there were a ton of possible causes - medications, overactive thyroid, weird infections, cancer, anxiety. Some of those things made him nervous. As much as he dreaded the thought of seeing a doctor, it was time to get some relief. And some peace of mind.

Jake didn't have a regular MD. Amanda's doctor was a gynecologist so that wasn't an option. He got out the phone book and called a few doctors' offices in the area. Each time Jake explained why he needed to be seen, no one would give a "new" patient an appointment any sooner than three to four weeks for a complaint as simple as excessive sweating. He took the first available appointment with a doctor he had never heard of. And Jake waited.

Before long, the night sweats and trouble sleeping were joined by something else

– a frequent, irritating cough. He guessed it was probably sinus drainage or allergies. Nothing ever came up when he coughed. It almost felt as if something was stuck in his throat.

When the day of the appointment arrived, Jake left work at lunchtime to get there. While filling out some required forms in the waiting room, he was surprised to feel his heart pounding. After awhile, a nurse came out and led him to an examining room. She asked him a couple of questions then checked his temperature, blood pressure, and pulse.

About twenty-five minutes later, the doctor entered the exam room, introduced himself to Jake, and shook his hand. His voice was soft and handshake firm. The doctor looked old, at least 60, with a deeply creased face, bags beneath his eyes, and thinning gray hair.

“What can I do for you, young man?” the doctor asked.

Jake rattled off his story – nighttime sweating episodes that would not quit, low energy, appetite change, cough – and not once did the doctor interrupt him. The MD listened carefully, even nodding every now and then. When Jake had finished speaking, the doctor questioned him – any fever, weight loss, shortness of breath, spitting up blood, chest pain? The doctor put his stethoscope over Jake’s chest and back, looked at his skin and fingernails, pushed on Jake’s abdomen, and pressed around his neck. And then the old man plopped down on a stainless steel stool and sighed.

“You were wise to come in,” he told Jake. “It’s tuberculosis. TB. I’m almost sure of it. Of course, you’ll need some tests to confirm the diagnosis. We’ll have to notify the Public Health Department and all your personal contacts. You must take antibiotics for six to nine months and finish all of them. Very important. But you’ll be okay.”

Jake did not freak out at the news. By this time, he sensed something was not right with his body. But tuberculosis? TB sounded so ancient. He never knew anyone who had it.

Jake had so many questions. How did he get it? Might it spread to his wife? Would he have to take time off from work? And the tired-looking doctor patiently answered everything he could and admitted when he did not have an answer. That afternoon, Jake had blood drawn, a chest X-ray taken, and an injection of something just under the skin of his left arm. He was given a plastic container to cough some phlegm into.

The entire drive home, Jake kept thinking about how he would break the news to his wife. As he parked the car in front of their small white house, he spotted Amanda in the yard. She was watering flowers. The sunlight seemed to collect on her uncovered head. It made her pretty face glow even more than usual.

## **The Greatest Contagion of All, *continued***

"You look a little pale," she said. "What's the matter, Jake?"

"We need to talk," he replied.

They held hands and sat on the wooden steps in front of the house. At that moment, they needed one another more than any other time in their lives. In that instant, they could not imagine what they had in common. Each of them learned some important news today. Both had a big announcement to make. For Jake, it was the diagnosis of TB. For Amanda, it was the positive result on a home pregnancy test. Each of them was incubating new life. And nine months from now, those biological guests would be gone – evicted from their bodies.

Jake placed his hand on Amanda's abdomen and gently rubbed it. Amanda's hands cuddled her husband's neck.

"We're going to be fine," she whispered in his ear. "Better than fine."

They kissed. They cried. They kissed some more.

Something was now alive and foreign in each of them.

But something that had always been there, deeply rooted, was growing too. Love.

**Old Dude Doing Dude Stuff**, pen & ink

Joe Clemons, MSIV



**Amber Waves: Ideal, South Dakota**, digital photography  
James Vincent Thomalla, MD, class of 1979



## **Language**

Christine Todd, MD, class of 1993 & associate professor  
of medical humanities & internal medicine

William Burroughs said language is a virus from outer space  
And some of us are afflicted in the worst way.  
Attached to phones like lifelines, filling the ether  
late into the night. Feverish, delusional, conversing if necessary  
with blank walls, T.V. screens, empty pages, cats.  
Congregating like lepers in hallways and corners, collecting  
words like new symptoms, transmitting the disease to  
small children, helpless in their cribs.  
Plagued by the inability to keep it to ourselves,  
infected with the idea that if we could just get it right  
we might wake up from our nightly sweat  
into a pale, cool world of silence and understanding.

## Mockingbird's Song

Kathryn Waldyke, MD, assistant professor of physician assistant program

I love the noisy mockingbird.  
I see him nearly every day.  
Before I spot him, oft I've heard  
a bit of what he has to say.

A handsome bird, though prone  
to gloat,  
a jaunty angle to his tail—  
his outfit's like a morning coat,  
gray and so stylish without fail.

Today he might say "Chip! Chip!  
Chip!"  
(he's playing he's a Redbird now)  
but hear his tone is sassy, flip—  
still quite convincing, I'd allow.

I swear one time I heard him  
make  
a stunning, fine rendition of:  
a car alarm—convincing fake!—  
but cars aren't in the tree above.

One warm June day I mowed the  
yard,  
and who but he should come  
along?  
He lighted on the fence, the bard,  
and sang me every single song!

So—like the tanager he'd say:  
a "pik-a-tuk-i-tuk-i-tuk."  
He chortled as a robin may,  
and then went on to try his luck

at cawing like a crow, maybe?  
and whistling blackbird's fife-like  
tones;  
to copy hawk or eagle—"scree!"

and coo the mourning dove's soft  
moans

He copied angry Blue Jay's scoff  
and tried a "chick-a-dee-dee-dee."  
The rooster's song's a little off—  
"cock-a-doodle-doodle," crowed  
he.

Ten or twelve songs, when all was  
done—  
it seemed he could go on all day.  
I think he's missing only one:  
he doesn't mimic what I say.

**Sparrow in the Flowers**, digital photography  
Carol Gordon, faculty in medical library



## **Why I Come to Work**

John Grace, MD, class of 2000

*Alternate Title:*

*Letter to the Next Person Who Tells Me They Have Nothing Left to Offer the World*

Dear Person Who Feels Worthless,

You probably haven't done much lately. You might be letting some things slide. Personal grooming? Fashion sense? House cleaning? Maybe projects are getting done slowly or not at all? And now you're starting to wonder, wonder whether or not you have something to offer the world, starting to question your worth as a human being.

I've met a lot of people like you. I've listened to them as a psychiatrist. People come to see me when they feel worthless.

"Why should I bother, doctor? Why bother living? What more do I have to offer?"

Two people said these words this very morning.

In the past, I've always given textbook answers.

"You'll see things differently."

"It will get better."

"Think of your family."

And those are good reasons to go on living.

But I have another, more selfish than those. And it's the real reason for me, the reason I urge people forward. It's why I try to pick people up at their lowest and convince them that just being a decent person matters. And sometimes...it matters a lot.

So here is the truth. The real answer. It makes me nauseous to tell it. That's probably why it's taken so long.

Nine years ago I was given the task of watching my three-year-old daughter, Amberly, while my wife went to Winn Dixie. There was nothing special about the task. I'd done it a million times and felt pretty confident in my ability to watch a small child.

My daughter was playing with her toy shopping cart, pushing it over the carpet in front of the television as I stepped into the office to sit down at the computer and quickly check my email.

Suddenly, there was a knock at the door.

A woman was standing there. I think she had brown hair but I don't remember. I do remember she was unkempt, disheveled, and ragged.

The reason I didn't focus on her appearance was because she was holding my daughter's hand. That unravelled me.

How did Amberly get out? How did that woman get her so quickly? What happened? My God! My God! How did this happen? I was hysterical, spinning, dazed with shock.

"Does she live here?" The woman asked. Dazed, I must have nodded because the woman kept talking. "I saw her on the dock across the street. She was staring into the canal, close to the water. I didn't see any adults and I was worried."

I don't know if I responded. I was lost, lost in hard twists of emotions writhing through

my guts.

The woman gently put my daughter's hand into mine and slowly walked out to her car. I don't remember what kind of car it was, but it was old and messy, maybe rusty. It might have been missing a hub cap?

Then she drove away, out of my life forever.

I took Amberly's hand and walked to the outer stairwell. Halfway down the stairs was Amberly's little, red shopping cart, turned over in a menacing display.

My three-year old daughter had snuck out the front door, down the stairs, over the driveway, across the street, through the woods and onto our fishing dock where she was staring down into the water. Then, by some miracle, some stranger was driving by and somehow managed to see her through the heavy underbrush and realize she was alone and in terrible danger.

My daughter should have died that day.

My life should have ended that day.

But some stranger, some stranger with poor grooming and a messy, old car saved my daughter and saved my family.

I never said thank you.

That woman gave me everything. Five minutes of her time, five minutes of just doing a little, changed the course of my existence. Everything good that has come from me and come to me, came from that moment, that instant. It came from a stranger's small kindness.

It's ten years later.

We have that little red shopping cart. But now our house has a security system and a really big fence. My daughter is thirteen. She has two younger brothers.

And I have a life, a life with a beautiful family.

My life should have ended that day and everything since has been a wonderful gift, a gift I didn't deserve from a stranger I barely remember.

But even though I've forgotten her, I've never forgotten what she did or what she gave me.

So I come to work every day, every day since that day and I try to help people who are struggling, people who believe they have nothing to offer.

And I imagine that I'm helping her, helping her to keep on living, being a good person, waiting for that moment, that moment when she's driving through life, that moment when caring a little, just being decent, will be enough to change the course of someone's history.

The only time I get a little upset is when I hear people say they don't matter. . . .

Sincerely,

Someone Whose Life was Saved by a Small Act of Kindness.

Someone Who Sees All of Our Potential Regardless of Circumstance.

## **Walking**

Alyssa Rosek, graduate student in med micro, immunology & cell biology

I walk along this empty road  
Just singing all alone  
No one to treasure these notes I sing  
Each one a precious stone

I walk along this lonely street  
There is no one that I pass  
It's all but been abandoned  
As I walk barefoot in the dead grass

I walk inside this dark forest  
Dead twigs crack under my feet  
It seems that every breath I take  
Is now just obsolete

I walk along this silent beach  
The sand is tinted black  
The dark waves keep on rising and  
I refuse to fall back

I step into the water calm  
My tears meld with the lake  
If this turns out to be a dream  
I hope I never wake

I now walk onto water  
That's now painted with moonlight  
Then suddenly slip into dark  
And drown...  
...but that's all right

**Expectation**, graphite drawing

Yuri Fedorovich, MSIII



**The Helping Hand**, colored pencil  
Amanda Ross, PGY4 plastic surgery





## ***Third Place Prose***

### **Writing It All Down**

Juliet Bradley, MD, class of 1997

*“The funerals keep coming  
more and more of them  
like the traffic signs  
as we approach a city.”*

*—Tomas Tranströmer*

Some time ago, I read a book where one of the characters would make a big fuss about updating his address book at the beginning of every year, decisively scratching out the name of each friend who had died.

That seems much too final to me. Death, of course, is quite final, but erasing people from my address book seems even more final. I have not had a paper address book for many years, but my contacts have survived the transition from the Franklin Planner to the PalmPilot to the iPhone. My gadgets have avoided major memory-eroding data crashes, small mini-strokes of old friends and long-gone romances. Yet I cannot bring myself to press “delete” after someone dies; it seems an inappropriate valedictory to someone who has been important to me, whom I’ve loved.

I don’t mind running into dead people in my contacts list. My grandmothers are both there, and some good friends. I like seeing their old addresses, and their old telephone numbers that I used to know by heart. No, I cannot delete them.

Some of my patients are in my contacts list, patients I have known for years or patients who are really sick. They call my cell phone when they can’t get through to the clinic. But there are other patients who never made it into my personal address book, but who are included in a Word document called “Patients Who Have Died.”

It is probably weird to keep such a Word document, and probably a HIPAA violation. But their lives, and their deaths, hold great meaning for me, and in this EMR-driven era of physician burnout and Meaningful Use, I cling to things that have touched my heart.

One of those patients is Maria M\_\_\_\_, a sweet older woman with anxiety and hypertension, just a little bit overweight. An herbal weight loss preparation sent her to the intensive care unit with severe pancreatitis. I went to see her there; I held her hand as she seemed to be recovering. It was a shock to find out that she had died. Some weeks after her death, there was a patient on my schedule with the last name of M\_\_\_\_; he turned out to be her husband, Jose, whom I had never met. He knew that his wife had been my patient for years, and he wanted me to help him make sense of her death. I sat and listened to him, and we talked about Maria. I was so very moved that this grief-stricken man had gone through the formality of scheduling an appointment just

to have some of my time and my perspective. I wondered how Maria had described me to him. I didn't want to forget the way that touched my heart, and so I wrote down Maria's name and her story.

Sonia was a grandmother with an infectious smile and laughing eyes; she lost her entire right arm to cancer. She had presented to me with shoulder pain too severe to be arthritis. It turned out to be osteosarcoma; she'd had surgery to disarticulate her whole right arm from her shoulder. It was odd to see her, after the surgery, having known her when she had two arms; something was so obviously unbalanced. But Sonia was able to enjoy her life and her grandchildren for some time more, and she did not suffer much until the very end. After she died, her daughter Veronica knocked on the door of my busy Tuesday morning clinic. She held my head between her two hands, looking straight into my eyes, and then she gave me a long, long kiss on the forehead. "This kiss is from my mother, up in heaven; bless you for everything you have done!"

I don't always have the closure of a warm embrace; sometimes I have Cerner. My electronic medical record system is called Cerner; it sends messages to my inbox when my patients are admitted to or discharged from the hospital. Martha had been my patient for many years; I went to see her in the ICU before she died, but my last interaction with her was when I deleted the Cerner message informing me that she had been discharged from the hospital. To Cerner, a death is the same as a discharge.

I deleted the message, because my inbox is busy, and holding the notification of her "discharge" does not seem to be the best way to honor her memory, her courage, and her resilience. Martha had had rheumatic fever as a child in Mexico; she missed almost all of kindergarten with her illness, and she had spent a great deal of time going to doctors, ever since. Her life was defined by her illness: Two of her heart valves had been replaced; she had heart failure and cardiac cirrhosis and lots of medications. After her husband was deported to Mexico, he begged her to join him, but she worried about being able to receive adequate medical care at their rancho. So she stayed in Chicago, hoping to hold on to life a little bit longer. I am saddened that her death was likely not very peaceful. I want to hold on to her memory, and the story of our relationship, and so I add Martha to my Word document.

Sometimes I am the one to send a message to Cerner. Nineteen-year-old Azucena came in to get her chlamydia treated. Positive chlamydia infections are usually handled by the nurse; I was called back to the exam room because Azucena wanted to talk to me. "My dad died yesterday," she told me, Styrofoam cup of azithromycin in her hand. She knew I'd want to know. Her dad was my patient Manuel, who'd been just 53, and whose diabetes had been uncontrolled for many years. His own father had died from diabetes

## **Writing It All Down *continued***

complications at the age of 58, but Manuel never filled any of the insulin prescriptions that I wrote for him. He didn't want to lose his job as a truck driver. Manuel had been my patient for years, and I am troubled to say goodbye to him in a perfunctory Cerner message. I want to remember his story. He was a kind man who had embraced the role of father for his grandson Gael, born when Azucena was just 14 years old. Gael's father was deported to Honduras and killed there by narcotraficantes while Azucena was still pregnant. Manuel's eyes lit up when he talked about Gael; he'd been so proud to take him to Disneyland last year. And now he is gone. I think about the years I have known him: the double-digit A1cs that he always promised to improve by next visit, his grandson who will grow up without him, and my other patient, his daughter Azucena.

But death comes with administrative tasks, and so I send a Cerner message to our clinic manager: "The patient's daughter reported to me that her father died last night of complications related to a stroke. Please follow the medical records protocol for deceased patients. Thank you."

I wonder if Azucena will come back to me, as a patient; I didn't do a very good job controlling her dad's diabetes; will she trust me to take good care of her and her son? I really hope so. Years ago, back in residency, I took care of an elderly man named Pedro, dying of lung cancer on the inpatient wards. After his death, his wife became my patient. "When I tell my family back in Mexico that you are now my doctor, they know I am in good hands," she smiles to me. And I am touched, and I am grateful, and I write it all down.

**Backwaters of Tennessee River**, pastel painting

Mary Corrigan Stjern, community



## **Stranger in My Memories**

Alyssa Rosek, graduate student med micro, immunology & cell biology

A stranger in my memories  
A lover in my dream  
I have to stay away from you  
We are not as we seem

An unknown in my consciousness  
A yearning in my mind  
I swore I'd break away from you  
Once you left me behind

A veil of mist inside my head  
And yet I'm longing still  
I cannot rid myself of you  
I know I never will

You were the one that I cherished  
The one that I'd die for  
I made sure that I walked away  
Before we both hurt more

And here you still dare plague my mind  
Desire of my soul  
And I shall shatter where I stand  
Just like my heart you stole

**Sunset Inside La Sagrada Familia**, digital photography  
Kevin Hascup, PhD, research associate of neurology



**Garden Path**, pastel painting  
Mary Corrigan Stjern, community



## **The Windmill**

Cynda Strong, community

Once the captive slave and lifeblood to flourishing fields  
It stands abandoned but still the sentry saluting the rising sun and  
fading moon glow.

Atrophied limbs dangle over barbed fence lines dotted with speared  
windswept leaves.

Wobbly stilt legs and remaining rusty blades catch a glimmer of  
sunshine.

In its towering shadow, golden glazed fields littered with remnants of  
vegetation doze in autumn's chill.

## **Nativity Scene**

Sarah Johnson, community

Mother made me Mary  
in the church play. The first Saturday  
of rehearsal, I wasn't listening to her  
directions; my body pulsed softly  
in a new way. I said my first line

to the angel, and in our exchange I thought  
my intestines had burst new veins  
until a slight drip of liquid slipped  
from me; my pelvic bones ached,  
and my mother was busy moving the animals.

I went to the bathroom stiffly and opened my pants  
to bright crimson lacing my khakis. I knew  
what this was. I had heard about it;  
I left and went to the altar where Joseph waited  
for my lines.

**Aspiration**, graphite drawing  
Yuri Fedorovich, MSIII



**What Was That?**, pencil drawing

Jo Powers, staff in medical humanities



## **HPV Misadventure**

Kathryn Waldyke, MD, assistant professor in physician assistant program

Warts  
on my feet,  
after fifty—  
Seriously?

Hurt  
when I walk,  
which I must do  
Regularly

Twelve  
years old when  
last I went through,  
Annoyingly

Salve  
twice each day,  
paint it on—ew  
Plantariously

Youth  
revisits  
in few ways, why  
Verrucously?

***Second Place Art***

**Made a Bet That Someone Would Lose the Election,  
Now I Have To Make a Poster,** acrylic painting

Joe Clemons, MSIV



## **The Writer's Family**

Christine Todd, MD, class of 1993 and associate professor  
of medical humanities and internal medicine

### I. Halloween, 4th Grade

I enter the contest for best ghost story,  
write out the tale my mother tells me at night  
about walking home though the dark in the woods  
hearing footsteps rustling behind her, matching hers  
step for step.

(It turns out to be a deer, more frightened of her than she of it.)

We sit costumed and crosslegged, awaiting cupcakes  
when the teacher announces the winner, which is me, and as I stand up  
to get the little gold trophy with the plaque that says  
FIRST PLACE WRITING  
Jenny Schriener shouts out: "That's not her story. She's a liar. That's her  
Mom's story."  
Nobody looks me in the eye for the rest of the day.

I confess my sin to my older brother.  
"Duh, that's what writers do, they tell other people's stories," he says,  
rolls his eyes. "4th grade is for idiots."

A liar or a writer, I consider, fingering the plaque on the trophy.  
It slides out of its slot, shiny metal on one side and engraved,  
a rough grain on the other, and blank.

### II. Library Books

I read them too fast and keep them too long.  
I only check them out and I never bring them back,  
Hoarding, stacking, lying, racking up fines.

The librarian complains to my mother  
in line at the grocery store, humiliates her,  
asks her what's wrong with me.

## The Writer's Family *continued*

Back home she is flushed with rage because  
I have no answer for who I am, even after we fight and  
the edge of the trophy she pulls off my bedroom shelf

lashes my head and I am brought bleeding to the pharmacy  
for consultation. "She hit her head on the corner of a table."  
This lie is what this liar deserves.

### III. The Phone Call From San Francisco

It might be on purpose  
that my best friends are historians.  
I cling close to these women  
who strain every memory I voice, every  
story I tell, every confession  
for embellishments.  
Whose sentences start acidly with "Actually,"  
and who call me up one winter morning  
because they are together at a conference  
in San Francisco and are striding down  
Market Street for coffee.  
"We've been discussing you," they say,  
breathless and gleeful,  
"and talking about all the lies that you tell."

### IV. Fact-Bound Citizens of Earth

Man cannot fly.  
But what if I lie and say we can  
and on one of these clear blue days  
we let the winds of my terrible deceit lift us up above  
the cold hard stone of fact?  
The severe, strategical straight road, paved by Romans in  
I won't say when, because whatever I say  
you will correct me.

But can you just look for one minute  
at the lay of the rolling, yielding green land  
and imagine for one minute  
that the horizon holds a mighty blue ocean of understanding  
and can you shield your eyes from the harsh  
brilliant glint that shines off  
the little plastic trophy  
which I obtained through fraudulent means  
but which nevertheless faithfully holds  
everything I know about love.

## **Dividing the Bubble Nebula**

Sarah Johnson, community

Globulous thing webbed in watery blue  
tells you, yes, this is birth, but this cloud  
is also death. Hurricane

of stellar wind whips the star  
left-center, its soft orchid core  
blooming. You want to see God

in this image but instead picture  
zygote beneath a microscope,  
cell membrane softly vibrating

and you think all things must  
move like this, the moment  
in between breaths, once

the chest has emptied  
and the body knows something  
is coming—it almost quivers.

**Radiant Rain**, acrylic on canvas  
Amber Schwertman, community



## **The Weight of the World**

Ann Augspurger, staff in education and curriculum

When I am born, the doctor, he said  
She's a wee one at two pounds, way too small, arrived too soon  
The staff, they said that I'd never go home  
(Babies that small just didn't survive back in the year '64)

But on I press  
Determined I am  
Could fit in a shoebox, my mom would say, constantly spitting up  
formula from a can  
White dot in my pupil the only thing that shows up on the exam

Mighty and sprightly, I continue to grow,  
Wearing a light blue jumper on the first day of school  
With blue horned rimmed glasses in attempt to fix my lazy eye  
Older sisters make fun of me—those glasses why oh why?

Later in sixth grade comes puberty earlier than most  
Not so small anymore, now I'm robust

My mom and I leave home and move across state lines  
I'm not accepted in my new junior high and long for my comfortable,  
small hometown  
I'm not the wee one anymore, not by a longshot  
Food now my closest friend and confidant

I go on to high school, I'm awkward and timid  
I seem to have fun, at least in band (but not without being bullied and  
hated)  
By the time I graduate, I had found Tab diet cola  
I start to lose weight, but sometimes Ding Dongs and pop tarts, they  
still console me

Then comes college and I am out on my own  
Say goodbye to the dysfunction and all of the fighting  
I am nervous and active and the pounds seem to lighten  
My dad worries I'm a bit too thin, kind of like I was the day I was born

So life is lived, it seems from one extreme to the other  
Nowhere to hide, shouts my estranged friend, the mirror

Determination from birth, it's often still with me  
But as I approach age 53, I wonder,  
Will the wasted time and struggle over a number on the scale ever  
leave me?  
(The only time I didn't mind extra weight was while carrying my babies)

Menopause strikes, why are women tortured so?  
And the pounds that I hate, spent my whole life loathing  
Seem to be even more stubborn and need oh so much more coaxing

Fitbit, oh Fitbit, you lie to me so  
10, 12, 15,000 steps a day seem to taunt me  
They don't make a difference as if they are phantom

Struggle with weight seems to be stuck in my brain  
Won't go away, ever, I hardly feel sane  
But God gave me this body, I try to be thankful  
He gave me this life, which doctors did say was doubtful

So when will I fully be over this struggle?  
When I'm 99, frail and fragile?  
(By then I'll have nightly cheesecake and wine and laugh at the danger)

I'd like to think all will end and it will be starting tomorrow,  
But society tells me I should be filled with such sorrow

I try to remind the messages my mind seems to harbor,  
My life's half over, I'm not done yet  
I'll never give up and keep working toward the quest of good health—  
And maybe, just maybe be kinder to the woman I know as myself

## **A Toast to Gray. . . Hair**

Karla Patton, community

Gray is neither black nor white  
some say it's just a calm  
neutral with little might.

It's the "quiet" between two extremes  
but are they right?

Nay I say, since my hair has taken on  
this luscious non-dyed hue!

I'm told it's chic, in style, it's modern,  
even new — far wiser when given its  
proper due.

Yes, gray hair, I'm praising you!  
It's curly, it's straight, it's kinky,  
Wavy, wild and free.

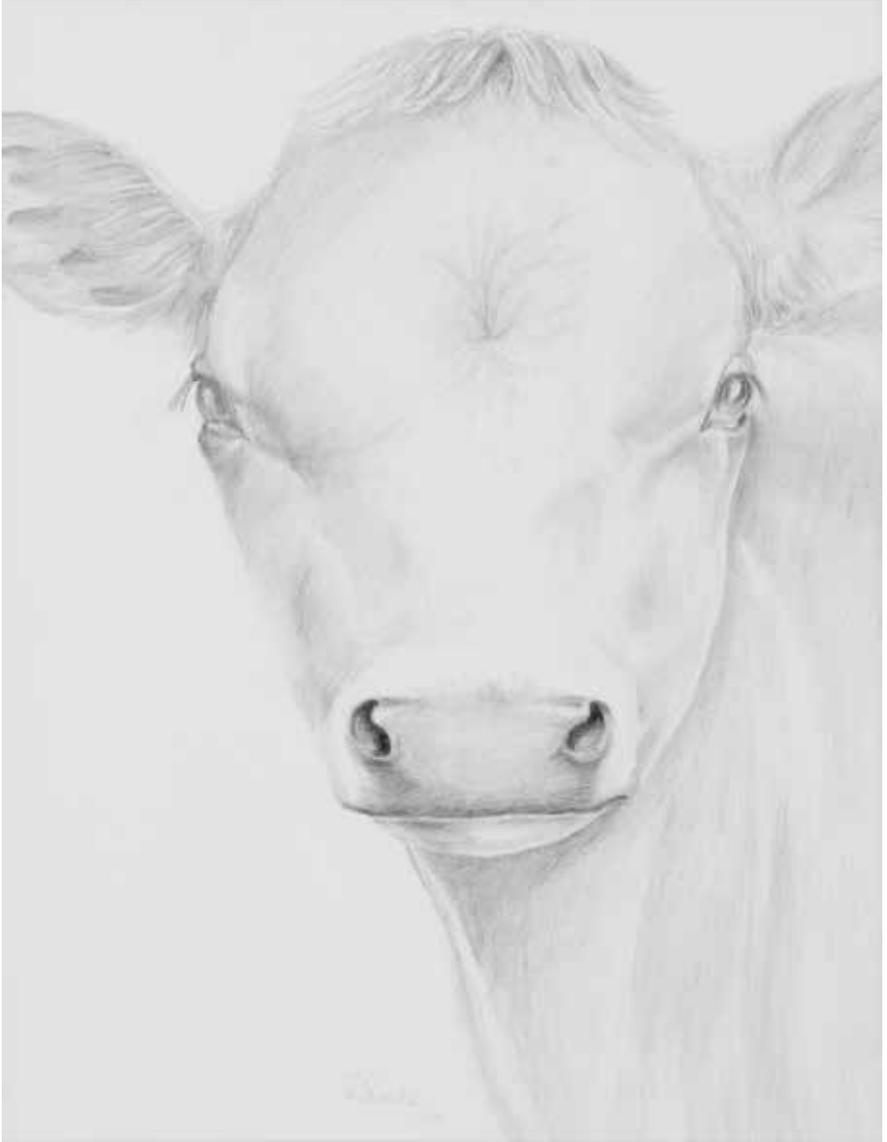
For those who say, "I'm too young"  
that's not for me.

I boldly say, that's your choice,  
but my gray hair fits and  
I'm wearing it!

So raise a glass to toast  
and look my way, for  
I am blessed to live  
another day, with my  
unassuming, yet attention-  
getting gray.

**Moonbeam**, pencil drawing

Jo Powers, staff in medical humanities



## Catastrophizing in Bed

Sarah Johnson, community

Twice a month, I can't sleep. I think  
I'm getting sick—my eyes bulge  
wide every time I create  
a new symptom. I think about  
women to distract myself, the curve  
of their chests, soft and pale  
lights illuminating my hands—then I think  
I'm getting a sore throat. I swallow  
a few times to be sure, and yes,  
the back of my mouth is dry  
and raw; sweat pools at my sternum,  
between warm breasts. I turn  
on my stomach to the cool edge  
of the bed. Do I feel nauseous?  
I definitely have the flu  
by this point—it's 3 a.m.  
and I've almost soaked the bed,  
but I can't drink water  
because I might get sick. My husband  
doesn't move; he's deep in sleep  
and I can't think clearly  
to tell him what's wrong with me.  
I must be dying because I can't  
outthink these symptoms,  
and if I fall asleep, I might miss  
something, like the way my ears  
hurt now, a dull ache that could spread  
to the rest of me. Why did God  
make me like this? Or did my cells  
decide.

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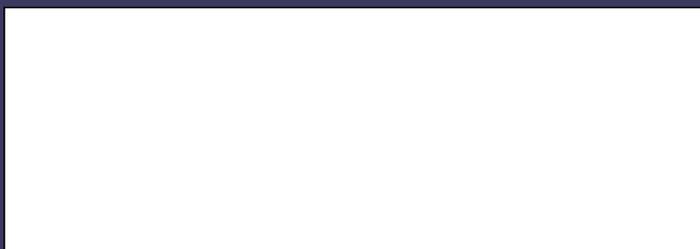
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# SCOPE



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