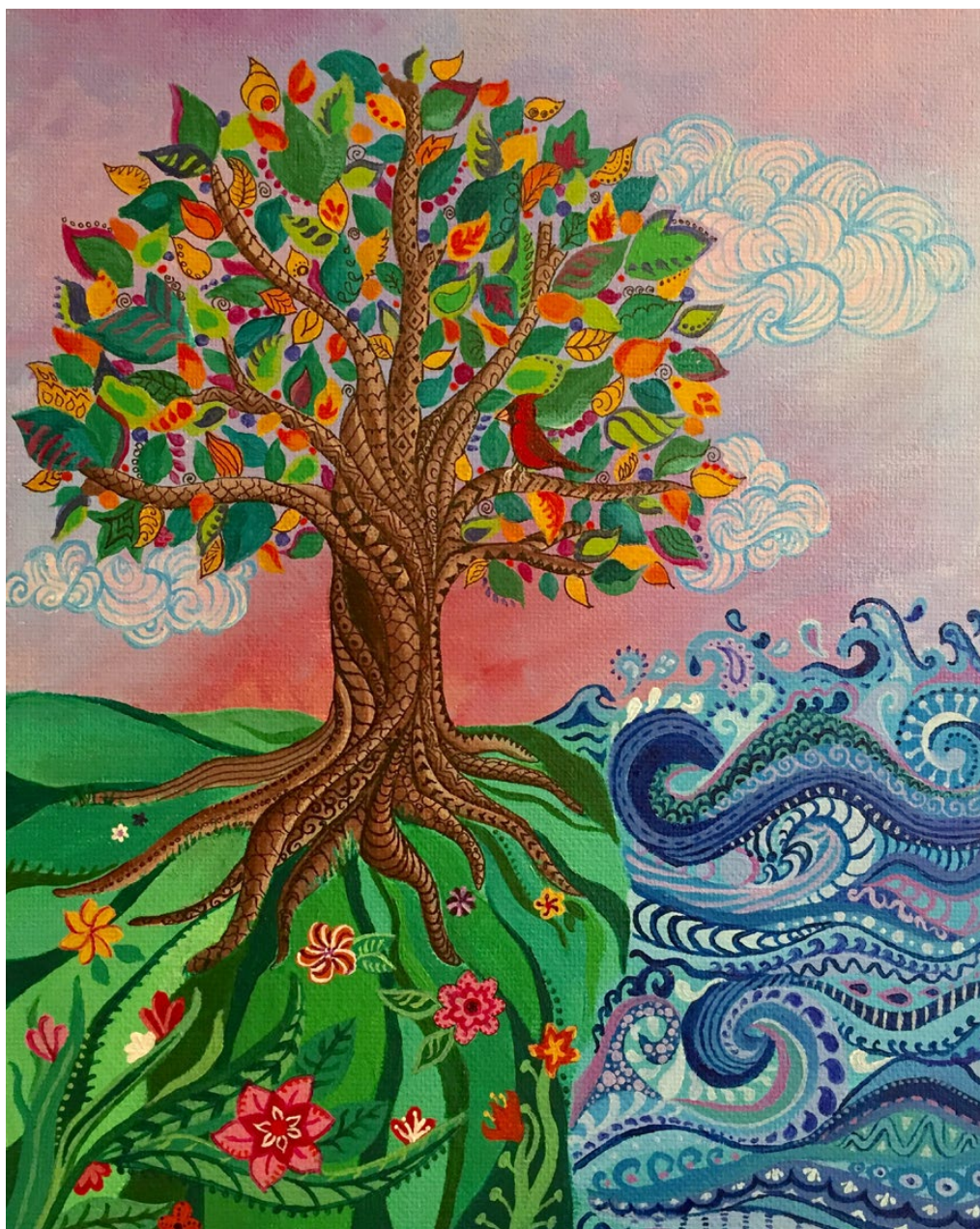


# HEAL

Humanism Evolving through Arts and Literature



Samantha Cleveland  
Class of 2019



FLORIDA STATE UNIVERSITY  
COLLEGE OF MEDICINE

Vol. 7, 2016



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## Letter from the Editor

**A**s this mild winter draws to a close, I am reminded of the winters that others have to deal with in other parts of the country. I open the blinds in my third floor office and sunshine floods the room. It is really comforting to feel the warmth of the sun on a winter day.

The light streaming in is full of colors. As it passes through the glass container on my desk, the colors divide, forming a rainbow on the desk's surface. Even though these sunbeams are beautiful as individual lights, the division into a rainbow really makes one appreciate the simplicity and beauty even more.

So it is with *HEAL* Volume 7. The cover features a melodic combination of colors and lines called "Serenity"—aptly named as it takes all of us to that place of peace where we once dwelled. The lines and contours of the tree draw the observer in, forcing meditative focus. But the cover is only the beginning of wonders! Like the sunbeam that is more beautiful when passed through a prism, *HEAL* is more majestic as you travel through its pages.

Volume 7 includes many great stories from our medical students who share a wide range of experiences, from travels to Ecuador and Nicaragua to meaningful moments with patients encountered in their clinical rotations. I invite you to pay special attention to the poem entitled "To My First Patient" by Keila López, which she performed at the College of Medicine early last semester. It is a powerful statement of gratitude to those who gave of themselves so she could study anatomy. I also invite you to read "Doctora," Julia Teytelbaum's piece on Ecuador and her experience there. For those seeking more medical content, Volume 7 has stories about depression, spina bifida, dementia, cerebral palsy, osteogenesis imperfecta, and alcoholism, some of which are told from the patient's point of view.

I am overwhelmed with gratitude as I think of the time, talent, effort and heart dedicated to realize my dream and the dream of a few medical students so many years ago. *HEAL* has been a life changing and meaningful experience for me, and I hope it has been the same for all those associated with the journal. I am extremely proud of *HEAL* and what it has done for us. We started *HEAL* as a forum where students could share their creative work, and today *HEAL* serves to unite our College of Medicine community.

*José E. Rodríguez, MD*

**José E. Rodríguez, MD**

**HEAL Editor-in-Chief**

*José E. Rodríguez is Associate Professor and co-director of The Center for Underrepresented Minorities in Academic Medicine. He is a family physician and founding editor of HEAL.*



## On the Cover

**SERENITY**

**Samantha Cleveland**

*Samantha Cleveland is a first year medical student who enjoys painting and photography.*



You have to  
stay positive  
regardless of  
how helpless or lost  
you may feel.

You have to work  
together to help  
others.

-Julia R. Teytelbaum, Class of 2018  
from *"Doctora": My Experience in Ecuador*

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# “DOCTORA”: MY EXPERIENCE IN ECUADOR

Julia R. Teytelbaum, Class of 2018

It is an adventure  
that made me realize  
two things that seem  
so simple,  
but are often  
overlooked:  
positivity and  
teamwork.

A stray dog barking. Children's laughter in the streets. Cars honking as if they were talking to each other. The clinging of silverware. The shuffling of feet. This is a short list of the myriad sounds echoing through my memories of Ecuador. However, what I saw in this country cannot be described, replayed or reenacted with mere words. I have to be selfish for a moment and tell you why I decided to go on this trip. I didn't want medicine; I wanted the culture of medicine. I wanted to know where and how people lived. What was important to them? What do they value? I witnessed my first delivery and bull-fight! I was taught how to dance Bachata and drink Canelazo like a local, but these encounters are just a taste of what I was given the privilege of experiencing. Despite knocking off numerous items on my bucket list, I want to share a story with you. It is an adventure that made me realize two things that seem so simple, but are often overlooked: positivity and teamwork. You may laugh and think to yourself, "This medical student was in Ecuador taking care of patients for almost 2 weeks, and this is what she got out of it?" Yes, it absolutely is, and I could not be happier with my free souvenirs.

We spent the first couple of days in Quito, where Dr. Rodríguez's family graciously opened their home to two medical students and an additional family of five (bathroom time was oh, so precious). Over breakfast one morning we discussed our next move—the festival. Our trip, Dr. Rodríguez explained to me, coincided with the Alausí festivals—a weekend of bull running, bull fighting, fireworks, and singing and dancing. Alausí held a special place in the Rodríguez family's heart, and I couldn't wait to see patients and experience the festivities.

Our first stop was Simbambe, a small town in the Chimborazo province of Ecuador. I cannot speak of Simbambe without mentioning our one and only house call. A woman was concerned about her son, but he was too fragile to make the trip to our clinic. I opened the





## REMEMBERING ECUADOR

José E. Rodríguez, MD

Associate Professor and Co-Director of the Center for Underrepresented Minorities in Academic Medicine

door and had to move cotton sheets out of my way. There was no electricity, and the house was very dark and dusty inside. Suddenly, I was being gazed upon by three pairs of precious eyes. “Lo siento...I’m sorry,” the mother said as she whisked her other children away from the room. As we turned the corner, we met her 16 year-old son. He was lying down, rolled up in numerous blankets, and very still. His eyes were closed, but his mouth was slightly open; drool ran from the side of his mouth. His mother wiped it away and stroked his jet black hair. Celia, a Spanish medical student, translated for us. She was sad, lonely, and worried about her son. He didn’t eat. His father was hardly home. She was worried about her other children. She had no friends. I heard the words “hydrocephalus” and “brain damage.”

Even as a first year medical student, I knew this woman did not have an easy road ahead. We tried to explain to her that

his health was in God’s hands, and that the most important thing she could do for him was to make him comfortable. As I held back tears, there was a small voice behind me; her oldest daughter was offering us two large plates of corn and cheese. I thanked her but couldn’t hold back my tears anymore. Here we were, three complete strangers in this brave woman’s home, and after explaining to her that her son won’t likely live to see his next birthday, they were offering us food. My emotions took over as I saw handmade cards and colored paper in the shape of hearts hanging over his bed. I could see that this boy was loved. He was not seen as a burden and his siblings didn’t resent him. There was no battle for attention. All there was in that household was love and understanding. “You must stay positive and strong for your three beautiful, healthy children,” we explained to her. I could see how much her heart was breaking for her sickly son,





## NARIZ DEL DIABLO RAILROAD—ALAUŚÍ, ECUADOR

Janina E. Rojas, Class of 2017

### “DOCTORA”: MY EXPERIENCE IN ECUADOR (CONTINUED)

but she knew how much her other children needed her. She thanked us all, and we said our goodbyes. In broken Spanish I tried to tell her that I would never forget her and her family.

Each member of our team offered this woman something, and not just something to make her feel better or temporarily alleviate her pain. Dr. Moore, a plastic surgeon with years and years of experience and a special interest in children, explained to her what other doctors could not. Virginia, Dr. Rodríguez’s niece, prayed with her and stayed with her for a few hours after our visit to talk and let her know she had a friend. I hugged her and helped her put her son back into bed after examining him. I covered his cold, thin toes with a warm blanket. I told her eldest daughter how proud her mother is, and that she is her biggest helper. Dr. Rodríguez came and took a look at his medical papers, and discussed resources that could help her

situation. We all consoled her and thanked her for letting us into her home, into such an intimate part of her life.

As physicians we want to solve problems and find cures. But in a place like Simbambe, where resources and clinicians are so limited, you have to do your best with what you have. You have to stay positive regardless of how helpless or lost you may feel. You have to work together to help others. I cannot tell you how many times a woman or man walked up to me, held my hands in theirs, and said “Gracias, Doctora.” Gratitude is what makes me want to return to Ecuador. Gratitude is universal. No matter what language you speak, people know when you are trying to help. And for some people, your help is all they have. ■



# Julia R. Teytelbaum

*Julia R. Teytelbaum is a second year medical student. Much of her inspiration is drawn from contrasting and organic shapes found in nature.*

Blue



Cover  
Artwork  
Finalist

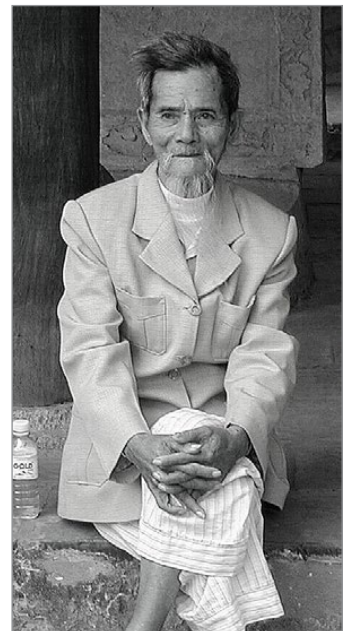




## Daniel J. Van Durme, MD, MPH, FAAFP

*Daniel J. Van Durme is Chair of the Department of Family Medicine and Director of the Center on Global Health for the FSU College of Medicine. He has been an avid photographer for many years.*

Charging Elephant (*above*), Belgian Canal at Night (*bottom left*), and Vietnamese Elder (*bottom right*)





# Andrew Michael Kropp

*Andrew Kropp is a first year medical student. Originally from St. Petersburg, FL, he is fortunate to have parents who see the value of travel, and invite him along most of the time.*

Dwarfed Sailboat (*top*)

Drifting Ice Arch (*middle*)

Mom and Baby Gentoo (*bottom*)





# GO NORTH

Simon James Lopez, MS, Class of 2018

“I just want to go North.” That’s all he said, at first, in response to the preformed prompt I was told, nay instructed, to ask: “Please tell me what you think I should know about your situation.” Naturally, his response was anything but preformed. My silence would encourage him to speak more, but in those short words I already understood where his story was coming from. After all, this was Immokalee, no longer just a random sign on Alligator Alley (that’s Interstate 75 for the less initiated), but the beat-up textbook definition of a migrant town.

It’s interesting to think how we were once a nation that believed we were destined to expand throughout the continent. “Go West, young man,” was the rallying cry accredited to American author Horace Greeley in regards to Manifest Destiny: the notion that America’s mission was that of redemption and to make the West in the image of the agrarian way of life so that people had an opportunity to succeed. Fast forward a century—give or take a few decades—and you’ll find that the high hopes once held on the shoulders of our forefathers have been replaced by crusty, tomato-filled buckets held on the shoulders of a tired, abused, and underserved workforce.

The plight of the Immokalee migrant worker is a somber one. While numerous documentaries and protests have done their best to make the often unheard voices of Immokalee known, to have one of those voices speak directly to me was more impactful than anything I had experienced prior. He was already working full-time at the age of 15, despite suffering from chronic asthma. I saw not a young boy in front of me, but a young man; albeit with some moderate foot pain. A forklift spared crushing this young man’s foot, but still left it a 4/10 on the pain scale. However, it crushed his dreams to go northward towards more farms and work to support his mother and siblings. His lungs, sounding bilaterally clear from fancy pronounced medical words like budesonide and albuterol sulfate, created a unitary voice that



## THE PLIGHT OF THE WORKER BEE

Simon James Lopez, MS, Class of 2018

worried how he would continue to provide for his family.

More often than not, my interactions in pediatrics during my Summer Clinical Practicum course in Immokalee were directed to patient’s parents and their responses. “My daughter has a R-A-S-H,” and, “My son needs his S-H-O-T-S,” were the common alphabet soups of the day that I feasted on most of the time. Yet finally I was able to meet a patient that held, and spoke, his own. I met a young man who was holding down a job so he could hold up his family and replace the plastic bins of tomatoes that normally rested on his shoulders with higher hopes that once manifested the American dream. This



## HANG ON LITTLE TOMATO

Simon James Lopez, MS, Class of 2018

was something I wouldn't have discovered had I not asked about his situation, but instead focused solely on his condition (like so many eager medical students checking a mental list tend to do). No tears were shed as we both sat as men trying their best to be men, each toiling away in our respective fields. With silent nods filling our stomachs more than any alphabet soup could have. I learned not of his problems, but of his story. I couldn't fix his flattened dreams any more than I could've fixed his flattened foot, but I could see his chest well-up with pride as I asked him of his life and how he faced the obstacles that came across his path. We parted ways with a handshake after the doctor came in to examine his foot, his nailbeds dirtied with the type of hard work glorified by Steinbeck. His wrath, and fears, subdued from conversation.

It would be remiss of me to say I didn't find the research I did on Greeley's quote to be a bit more meaningful after hearing my patient's story. When you attend a medical school that prides itself on responding to the needs of the elder, rural, minority, and underserved populations, coincidences tend to fall by the wayside. I'll allow Iowa Congressman Josiah Bushnell Grinnell

to elaborate on that quote, as he did in his own autobiography when discussing a conversation he had with Greeley:

"Go West, young man, go West. There is health in the country, and room away from our crowds of idlers and imbeciles." "That," I said, "is very frank advice, but it is medicine easier given than taken. It is a wide country, but I do not know just where to go."

I can only imagine my patient asking me where to go, where he could possibly find a way to provide a better life for his family. Where he could find work and health in a country that has seemingly forgotten him. I wish I could've given him the advice he deserved, frank as it could of been: "Go North, young man," I'd tell him, "Go North." ■

*Simon J. Lopez is a second year medical student. His love for photography began on the sidelines at Doak S. Campbell Stadium as a photojournalist for the FSView & Florida Flambeau. The inspirations for his writings include the sharp, nerdy wit of Junot Diaz and his far more talented colleagues.*





# Juno Lee

*Juno Lee is a second year medical student and a member of the HEAL editorial team.*

*All the Same (above), Figures (bottom left), Echo (bottom right)*



# DOTSY

Jason Miles, Class of 2016

Running on the beach,  
many kids within her reach.  
“Don’t throw sand!” she would say,  
but we would do it anyway.  
The wooden spoon, striking fear.  
“No more ice cream!” we would hear.  
Racing big wheels down the drive,  
with mostly luck, we did survive.  
Start the race with a push,  
someone’s stuck in the bush.  
Scraped up elbows, knees and toes.  
Brush it off, away we’d go.  
Running fast, wild and young,  
Zachy fell and split his tongue.  
Cousins come from out of town—  
hugs and laughs all around.  
Over first, dunes below,  
then out to surf, we would go.  
Paddle out to the sea  
to catch a wave, you and me.  
In the puddles, we would play.  
On the sand, our parents lay.  
All the while, she was there,  
watching with such loving care.  
All of this and so much more,  
these memories, I do adore.  
So very much, she meant to me  
and to all our family.  
Older now, we all shall get  
but our time with you, we won’t forget.

*Jason Miles is a fourth year medical student pursuing a career in ophthalmology.*

# JUNUS

Linda Minnock, MD

The icy blue day Junus turned ninety he dressed  
in his one blue suit and rode the city bus  
to clinic where he took up his same seat  
front and center to the nurse’s station.

Fourteen times in as many weeks  
with a moving but unnamed pain  
in his mouth, his throat or ear.  
Our masked faces and cold steel probed  
to cries of “Please, doctor, please STOP!”  
And stop we did.  
But back and back and back he came,  
always polite, always “Thank you, Doctor,”  
with a nod and handshake each time.

In that long life he had known waiting and pain,  
the two often together.  
He knew this doctor was his last hope  
and the doctor did his level best to help  
but finally Junus came back no more.  
He no longer sits straight-backed  
while waiting his turn to be seen,  
yet his dignity and grace remain.

*Linda Minnock practiced as a family doctor in Tallahassee for 31 years. After retiring in 2013, she now works part-time at the Clinical Learning Center. She enjoys kayaking and hiking.*

# THE DEPTH OF DAILY INTERACTIONS

Kevin Draper, Class of 2016



## JARGON

Jesse O'Shea, MSc

*Jesse O'Shea is a 4th year medical student at the Sarasota Regional Campus.*

I remember my first solo interview during the first week of my psychiatry clerkship in the same way that I remember my most intimate, life changing, and personal memories. These are memories that awaken all five senses and transport you in time and place. I was instructed to enter a cramped, all but forgotten room of the psychiatric ward to gather a detailed history from a newly admitted patient, Ms. Smith, a candidate for electroconvulsive therapy (ECT). At that point in my education the thought of ECT still conjured scenes from *One Flew Over the Cuckoo's Nest*. I had of course read up on ECT, but not yet witnessing it, those powerful movie scenes were still etched into my memory.

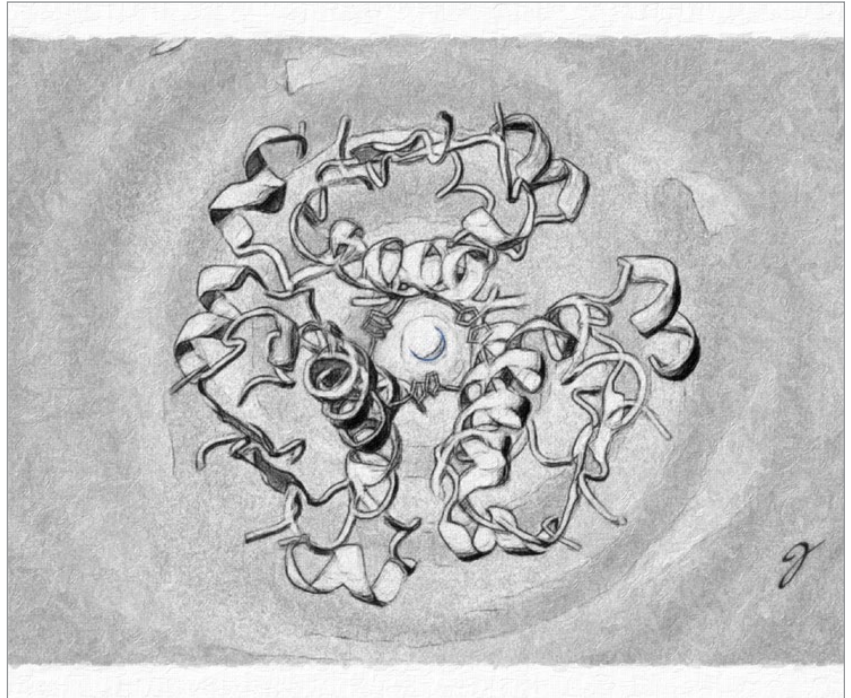
With a knock on the door I entered the room. A middle-aged woman wearing a pink t-shirt and faded blue jeans stood up to greet me. I introduced myself as a medical student assigned to conduct her interview on behalf of her attending physician, and we exchanged handshakes. She was strikingly tall—well over six feet—and her broad shoulders projected an intimidating presence. On closer inspection, she had soft blue eyes complimenting her welcoming smile, and her long brown hair was tied into a pony tail with a pink bow, all of which tempered her otherwise imposing frame. I settled in for the interview for which I was supposed to follow a structured packet of detailed questions. I started simply by asking, “What brings you in here today?” This question would be all I needed to spark a free flowing conversation between us. I gathered more information than I ever anticipated. I barely kept up.

She began with childhood stories about being the tallest person in the class and the mean-spirited name calling by her classmates. She recounted how she would come home from school in tears, which in turn caused her father to hit her and demand that she toughen up. She opened up about how deeply it hurt to be different.



Boys either paid no attention to her or were just outright mean. She constantly resented her appearance. Amidst stories of heartache, she also told of occasional moments of happiness growing up, such as when her size was an advantage and she led her high school volleyball team to the state championship. Unfortunately, these moments of joy were fleeting, inevitably drowning in some deep sadness. It was midway through her senior year when she first attempted to take her life. She laughed awkwardly when told me how she woke up in the hospital with bandages around both wrists, thinking about how she was a failure—even at trying to die. I wasn't sure how to respond except to simply say, "I'm sorry." She nodded then continued.

Following her suicide attempt she started seeing a therapist. Things seemed to improve over the next several years, although in the back of her mind the sadness always lingered. She explained how she had earned a volleyball scholarship and went off to college where she majored in education. This led to a master's degree and a solid teaching job. A few years later she fell in love with who she thought was a wonderful man. When he became verbally abusive, she spiraled into a depression worse than any she previously experienced. She swallowed all of the pills in her medicine cabinet, and as she dozed off she had thoughts of finally being free of the pain that had tormented her. Again she would survive, and she laughed uncomfortably as she



## INSULIN: THE MIRACLE MOLECULE

Jesse O'Shea, MSc

lamented having to begin another cycle of rehabilitation. Her doctor prescribed new medication after new medication, what she described as "every drug out there," but nothing worked for more than just a little while. For years the sadness and treatment failures went on and time slowly passed. Although she wasn't better, life had become tolerable, but that changed when she recently lost her teaching job. She felt the all too familiar overwhelming desire to end her suffering by her own hand. This

And so it is with the profession I have chosen; often very brief interactions with patients can be the most impactful moments in one's medical education.



## THE VIEW FROM HALIFAX

Lindsey A. McAlarnen, MSc

*Lindsey A. McAlarnen is a fourth year medical student at the Daytona Beach Regional Campus.*

### THE DEPTH OF DAILY INTERACTIONS (CONTINUED)

time, however, for reasons that escaped her, she decided to not give up. She felt out of options, save ECT. She expressed hope that it would bring her a semblance of peace for which she had long yearned. Under that backdrop, Ms. Smith found herself sitting on an old couch in an old room in a remote wing of a large hospital telling her life story to a medical student. She was asking me, a green third-year medical student still adjusting to a new rotation to be the bridge to what she saw as her last chance at happiness. I had to be receptive, understanding, inquisitive, reassuring, and advisory, when all I felt was confusion and sadness. I knew I had to hide how I really felt for the sake of Ms. Smith, except to remark how hard this has been for her and that I hoped for the best. As our interview concluded, I thanked her for sharing her story and she thanked me for kindly listening. We shook hands and parted ways.

When I got home that day I reflected on what transpired in that interview room. I couldn't escape the thought that it was so unfair that someone so kind could be so lost and alone. Had I found myself standing next to Ms. Smith in a grocery line, I would imagine we might just say hello and move on with our happy lives. How could so much anguish lay beneath the surface of an unassuming and gentle façade?

From the start of medical school I had heard many times how the greatest but most humbling part of entering the medical field was the privilege it afforded you to gain trust from the patients you treat. I hadn't gained a full appreciation of this until I learned it from being the med student assigned to Ms. Smith. I heard about past events that haunted her, the things

in the present that worried her, and the things about the future that scared her, and she looked to me for help. And so it is with the profession I have chosen; often very brief interactions with patients can be the most impactful moments in one's medical education. Ms. Smith was my catalyst to contemplate the complexities of human interaction and human existence at its face, and realize that the struggles we experience are not always on the surface. Without knowing it, Ms. Smith taught me that everyone I meet, no matter how normal they seem on the surface, has problems and secrets they hold close to the heart and I must always strive for empathy and understanding with any patient I see.

The beauty of the field of medicine and life as a physician does not lay in the simple privilege of patient contact and trust. That is part of what makes it special, but it is not what makes it unique, and it is not what changes one as a person. What changed in me that day, and what I think changes everyone in this field, whether they realize it or not, is that you must truly understand and appreciate the depth of everyone you treat. One must open up the heart and the mind and consider what may be, not just what is or what seems to be. I hope I can one day master what I began to realize that day with Ms. Smith. For now, all I can do is to extend kindness, care, and understanding to patients that come my way, and do it without any thoughts of receiving something in return, save a sense of having done some good. ■

*Kevin Draper is a fourth year medical student at the Orlando Regional Campus.*





# Jamie Anne Mortel

*Jamie Anne Mortel is a BS candidate in Biological Sciences at Florida State University. She uses art to reflect on science and the world.*

Micro to Macro



Cover  
Artwork  
Finalist



# Gorana Knezevic-Zec, PhD

*Gorana Knezevic-Zec is a Grants Compliance Analyst in the Department of Behavioral Sciences and Social Medicine at the FSU College of Medicine.*

## Rhapsody in White and Blue

Artist Statement: “This necklace has it all—something old, something new, something borrowed, and something blue!

I ‘borrowed’ the J hook from an old Japanese necklace—all other elements are new. Royal blue crystal drops connect two strands of off-white (faux) pearl beads and drops. The second strand has pearl and crystal drops that give a rich dangling effect. Blue crystal rondelle beads provide additional bling to this necklace.

I started making jewelry ‘accidentally’—my sister (in England) started ordering vintage jewelry from USA sellers, mostly original art deco necklaces, and had them shipped to my address rather than to Europe. Some of those beautiful necklaces arrived damaged, with broken strands/beads and I decided to ‘fix’ them. After repairing a few pieces, I decided to make one of my own. And now I have a nice collection of necklaces!”





# José E. Rodríguez, MD

*José E. Rodríguez is Associate Professor and co-director of The Center for Underrepresented Minorities in Academic Medicine. He is a family physician and founding editor of HEAL.*

Saludos desde Nicaragua



## Trung Tran, MD

*Trung Tran graduated from the FSU College of Medicine in 2014. He is currently completing a residency in Internal Medicine at Ochsner Medical Center in New Orleans, LA.*

Florida Sunset (*above*)

Fireworks (*left*)







**GEORGE THE MONKEY**

Danny Bernabe, Class of 2016



**SACRED MONKEY FOREST**

Wes Tindell, Class of 2018





# Stephanie Tran

*Stephanie Tran is a second year medical student.*

Giant Katydid (*above*) and Desert Cat (*below*)





# THE SPECIAL PATCH

Cesar Garcia-Canet, Class of 2016

People often ask me why I'm choosing to train in pediatrics once I graduate from medical school. "It must be hard to see a child suffer," they say. In my pediatrics rotation, as well as in my chronic care rotation where I followed pediatric patients throughout a whole year, there were tough moments. It is difficult to see a child in the ICU recovering from an anaphylactic reaction. It is difficult to see a teenager there, too, for attempted suicide. It is difficult to see a newborn without her mom for almost a month because she had to be hospitalized for postpartum depression. However, what these patients and all others in pediatrics have in common

is resiliency. Resiliency to bounce back and recover from an illness. Resiliency to fight during an illness. Despite it all, children smile and are happy. They are content to play a game. Or talk about Olaf from the movie Frozen. Or talk about things that, in our adult world, make no sense, but to them makes perfect sense. Gina is one of these kids. In fact, she loves Olaf and thinks he is the best thing since sliced bread! And she, like all my other pediatric patients, is the reason why I am going into pediatrics. Her resiliency makes me learn more, do better, and aspire to be the best pediatrician out there. Gina's story is inspirational and is what the field of pediatrics is all about.

Despite it all, children smile and are happy.  
They are content to play a game.



## BOYS

Wendi Cannon

*Wendi Cannon  
is the Associate  
Director of  
Information  
Management  
in the Office  
of Information  
Technology at the  
FSU College of  
Medicine.*





**ODA A VALPARAÍSO**  
Thomas Shakar, Class of 2017



**WILLIAM GETS A CHECK-UP  
(FILIPINA, PANAMA)**  
Adam Field, Class of 2016

*Adam Field is a fourth year medical student at the Orlando Regional Campus. He is pursuing a career in emergency medicine and enjoys participating in FSUCares service learning trips.*



# Her resiliency makes me learn more, do better, and aspire to be the best pediatrician out there.

## THE SPECIAL PATCH (CONTINUED)

Gina is a 5-year-old whom I first met at the beginning of my chronic care rotation when she came in for her annual well-child visit. When she was only three or four months old, she was abandoned at the gate of Provincial Hospital in China. At the time of admission, the doctors noticed that she had a spina bifida defect in the lumbosacral region, in addition to poor function of the left side of the body and left foot drop. Subsequent studies also showed diastematomyelia at about the level of T10. According to available medical records, Gina underwent surgical treatment for this and recovered well. Eventually, Gina was adopted and came to the United States. Visits to various hospitals in Orlando, FL were established in the summer of that year. Today, she walks only with minor difficulty (her left leg is slightly shorter than her right). Overall, she has been doing well—gaining weight, thriving, and hitting developmental milestones. Gina is very intelligent. She jumps over low obstacles, rides a tricycle, is fluent in English and Mandarin, speaks in 4-5 word sentences, recognizes alphabet letters, says her full name, counts to ten, copies a circle, washes and dries her hands on her own, and plays make believe. Currently, there is a well-healing scar in her thoracic spine with a hairy tuft. Gina refers to this as “my special patch” and loves to tell anyone and everyone about it. She is very proud of it, in fact.

One must take a step back and fully be in awe of her story. Imagine as a baby being abandoned. Imagine having a defect that exposes a great deal of your spinal column. Imagine undergoing a very complex surgical procedure and not having a parent in recovery. Granted, Gina was a tiny baby, so she never knew what was happening. But now she does. She is a 5-year-old who knows exactly where she came from and what happened. Gina is not resentful. Even at this young age, she is fully aware of her diagnosis and all the subsequent follow-up she

must have as she grows up. Her adoptive parents do, too. Yet, Gina is so resilient. So happy. So curious of the world around her (she asked me what each instrument I used to perform her physical exam was and what it did). She wants to be a puppy doctor when she grows up. And she does not mind going to Orlando for follow-ups at all. It gives her the opportunity to “visit Olaf and Ana and Elsa” and tell all her nurses and doctors about her “special patch.” Think about a child, like Gina, that sees the future ahead of her (in spite of her past and in spite of her diagnosis) and smiles. How often in medicine do we come across patients that are noncompliant or just feel like life has dealt them a bad hand? If you stop to ponder this, you will probably say, “Too many.” Gina, like so many kids in the pediatric patient population, is different. She loves life. She loves her mom, dad, and siblings. She loves the simple things in life. She loves her two cats and three dogs.

Maybe what is needed today in medicine from both patients and doctors is to look at illness, disease, and treatments through the eyes of a child. Maybe, just maybe, patients would be happier (even healthier), and doctors would be more content with their line of work. Maybe what does not make sense in our adult world...finally will. All it takes is to read Gina’s story. To extrapolate further, all it takes is to see the smile of a pediatric patient and it is all worth it. Life happens and it is tough to see a child go through something as terrible as this. But they are not jaded by the situation. They tackle it head on, with a smile. I believe that each sick child is proud to show off their “special patch.” And because of this, we should be inspired and strive to be better for all our patients, young and old. ■

*Cesar Garcia-Canet is a fourth year medical student at the Fort Pierce Regional Campus where he serves as Community Service Chair. He is currently applying to pediatric residency training programs. Cesar is married to his wife, Melanie.*

# AN OBSERVATION

Alyssa Marie Frey

They are signs  
of wisdom;  
wounds  
accumulated  
in a time of war  
and badges  
of experience  
forged  
in fortunate  
moments.

*What is medicine from an innocent and uneducated view? As a premedical student, it is very hard to get a true glimpse into what medicine is. When I was an observer in the Interventional Radiology Department at Tampa General Hospital this summer, I wrote this in an attempt to see past the jargon and science that I have not had the opportunity to learn yet. I believe I saw the truth of medicine that day.*

There is a man directly five feet and six inches in front of me. The man has dark hair and kind eyes. In the corners of those kind eyes, the furrows are forming. When he smiles, they manifest. When he frowns, they remain. His constant companions, the furrows are heralds of joy and harbingers of pain.

They are signs of wisdom; wounds accumulated in a time of war and badges of experience forged in fortunate moments. I wonder at what they have seen. How many babes did they welcome into this world? How many souls did they watch depart it?

Perhaps their omniscience should frighten me.

It does not.

Perhaps I should have heeded their ominous foreboding.

I did not.

I catch my reflection in the monitor. I see my own kind eyes and dark hair. I see the bright glow of youth and passion. I do not see the furrows. No badges of wisdom or wounds of experience grace my familiar features.

The furrows reappear as the man removes a small stack of photos from his white coat. He passes them to a woman.

She has the furrows, too. Deep, long lines that cascade down her smooth forehead. They deepen. They seem like canyons sculpted over time with pressure. They have the elegant curves and finish of an old ravine. Time and stress have created a finite wound from a long and strenuous war.

A frail and trembling hand obscures my observation of her life-lines.

A large, kind hand is placed on the frail, trembling shoulders.

The large, kind hand unconsciously shudders with the grief of the body beneath it.

The woman sits on the bed.



There is a boy directly six feet and six inches in front of me. There is a boy in the bed. The boy has a still, blank face. There is a frail, trembling hand on the still, blank face. The kind eyes close, and the dark-haired head falls.

The furrows return. The canyons deepen. The face is blank.

The photos are grey. The coat is white.

The face is blank.

The man leaves.

I follow.

There is a piece of paper directly eight feet and six inches in front of me. The piece of paper is pretty. The pretty paper hangs on the wall.

I want a piece of pretty paper.

I want a white coat.

The large, kind hand is on my shoulder.

I see the kind eyes.

I see the furrows.

He turns away.

I think about my observation. I catch my reflection on the glass door.

I see my own kind eyes and dark hair.

I see the bright glow of youth and passion.

I see the furrows, small and fleeting.

I smile.

The furrows deepen.

*Alyssa Frey is a junior at Florida State University, majoring in English Literature and Chemical Science. She enjoys playing the piano, reading, and writing, and hopes to pursue a career in medicine at FSU.*

I see the bright  
glow of youth  
and passion.

I see the  
furrows, small  
and fleeting.

I smile.

# TO MY FIRST PATIENT

Keila Rose López, Class of 2019

In the midst of anatomy I reflected on  
Strategies and stress  
Arteries and tests  
Endless nights of studying  
Long days of learning  
Praying, yearning, saying  
I can't wait  
Until I'm done  
Until this battle is won  
Until I close this chapter of my life where I don't feel so  
Lost  
Where I don't feel that achieving is coming at too high of a cost.  
Where my mind is not a jumble of arteries  
The artistry of nerves  
Words on pages I've never seen before  
Hurdles and challenges just to, get that score  
And be done

But I missed something  
Let's go back to the beginning  
Back to the start  
In between the cranial nerves I lost the, heart.  
I missed that part, of you.  
And here is what I do, have to say  
Thank you  
For your love.  
For being that Godsend of learning from above.  
For teaching me those lessons you can't learn on a page.  
For opening my mind, spirit, and soul into a new age.  
Thank you  
For teaching me to cherish every breath  
To give all I have in this life until there is nothing left.  
To my patients, my peers, and my community  
Thank you for giving a gift of love that created unity.



Thank you for teaching me humility  
That my abilities should not overshadow His majesty.  
For the epiphany that the uniqueness of my patient  
Should never be diagnosed as simplicity.

Thank you  
To the families  
For teaching me that the body is temporary  
But love and the soul is what carries an eternal legacy.

Thank you  
To my teachers and my mentors  
For showing me that empathy is an action and not a word.  
That medicine is a science but compassion is the cure.

And to my first patient,  
You have changed us as medical students  
And as the physicians we will become  
Your gift of love will live in us  
So your presence will never be gone.  
Thank you

*Keila López is a first year medical student. She is a freestyle rapper in her spare time and believes rap and poetry can serve as a tool to unite and inspire others. She is proud of her Puerto Rican heritage, passionate about homeless advocacy, and believes that love, compassion, and humility is what creates a meaningful legacy.*

Thank you  
To the families  
For teaching me  
that the body is  
temporary  
But love and the soul  
is what carries  
an eternal legacy.

#### **VIETNAM ORCHID**

Daniel J. Van Durme, MD, MPH, FAAFP,

Chair of the Department of Family Medicine and  
Director of the Center on Global Health

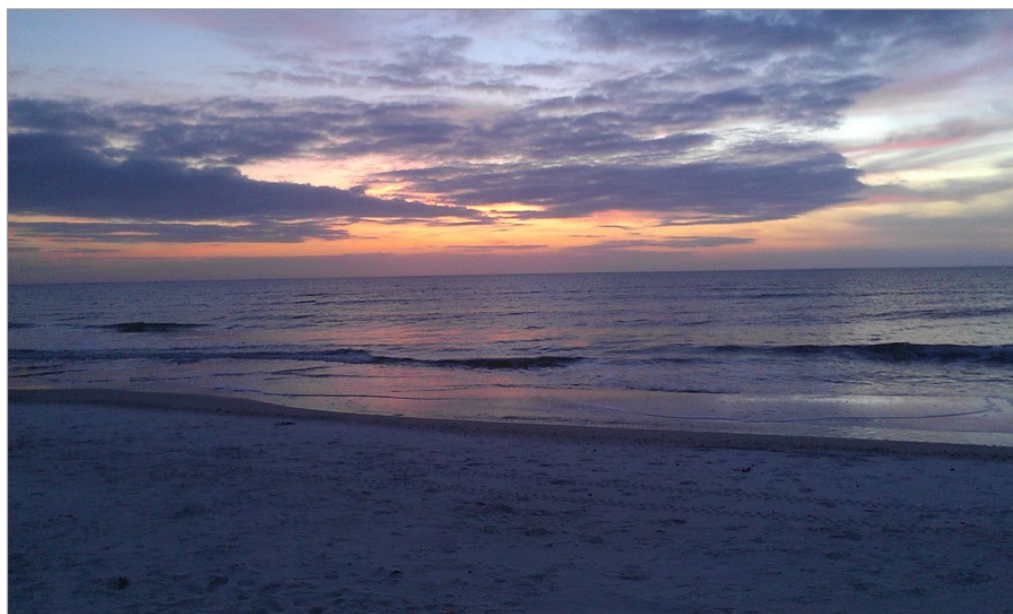




## FIRE DANCING

Bryce Bergeron, Class of 2019

*Bryce Bergeron is a first year medical student and hobbyist extraordinaire whose camera accompanies him on adventures.*



## CAPE SAN BLAS

Meredith Dozier

*Meredith Dozier is enamored with all things Gulf Coast, Especially Old Florida. Her favorite place to be is diving head first into a wave at sunset in her beloved Cape San Blas. If there is one thing to know about Meredith, it is that her family is the most important thing to her. She wants to thank her husband Sean and step-daughter Ally for introducing her to the Cape, and for being her greatest joy and honor, and her new baby son Levi for being the sunrise of her heart.*



# STRAIGHT, NO CHASER

Randall Stephens, Class of 2018

A 25-year-old male presents to an AA Meeting complaining of an ache in his heart and a weight on his shoulders. After all, what better way to get in the mindset of someone dealing with an addiction than getting your now traditional gut punch this morning over coffee (*with a side of tears, hold the tissues*), a punch that even the strongest whiskey sour the night prior couldn't lessen (*you hypocrite, add this failed relationship attempt to the proverbial frequent-buyer punch card. Two more and my next emotional breakdown is free!*). People of all types begin to walk through the doors of the meeting hall, excited to be around other people "Living Sober," the official name of this AA group (*yet the only type that's on my mind, was how I wasn't hers*). Only 4 out of 13 lights try their best to brighten a fellowship hall full of couches, chairs, and tables—each looking like they had been worn out, beaten up, but recovered by people who needed them more than they would know (*one empathizes*). A beautiful mid-morning sun does its best to peek in through the pollen-covered windows that keep this meeting private. The dust dancing in the sunrays that do get through begins to settle down and take its seat as the meeting begins.

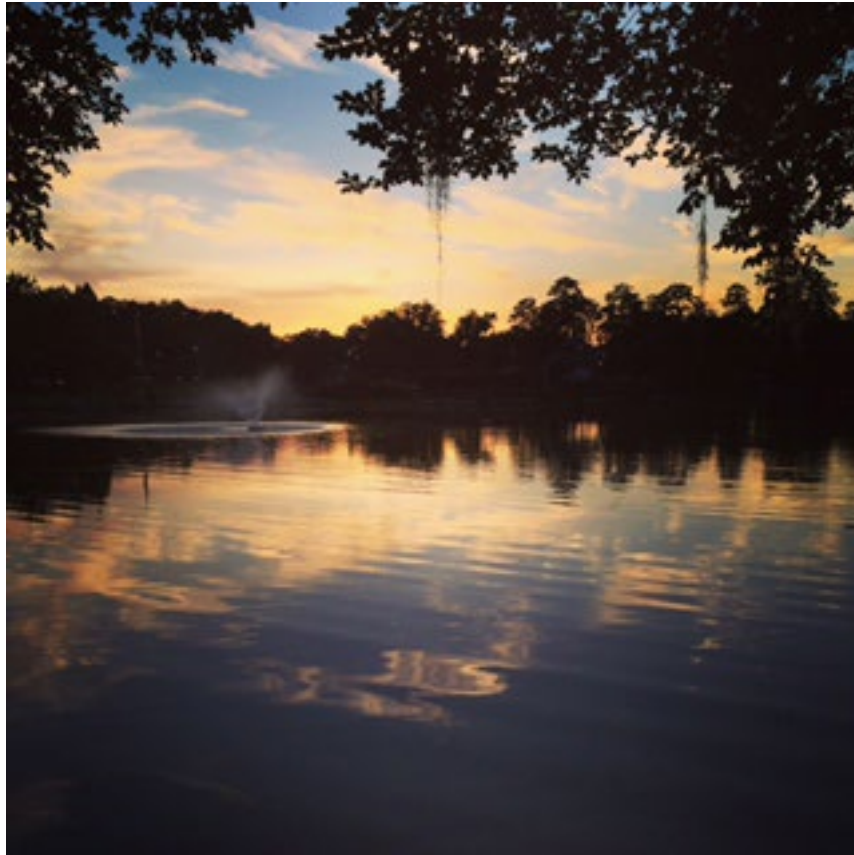
Sundays on Monday Road (*the irony is not lost on me*) are for discussion. I sit on a beat-up blue couch, seeped with the tears of women giving up their children because of "the drink and the drug" (*to think, I had only signed up for this meeting out of others because it had a free breakfast, as if that was going to keep me from breaking down*). "Are there any visitors that would like to make themselves known?" I sheepishly raise my hand first and bleat out my name with the confidence of a hundred ants (*perhaps next time I'll ask the Wizard for courage*). More hands slowly go up as names are spoken aloud with a courage not worthy of my typing fingers. Each with the same last name, "...and I'm an alcoholic." They begin an open discussion on procrastination and a shiver goes down my spine as I realize the pathology lectures piling up on my desk (*how exactly did I become a second year medical student again?*). Across from me, someone who's been sober for more years than I've been alive (*twice the amount of time I've been alive but who's counting*) begins to talk about their own struggles but also of their own resolve to get through each day. I can feel my eyes begin to water up (*side of tears, order up!*) as this person says they want their grandchildren and great-grandchildren to know their elder died sober. I look away



## VISION NYC

Daniel Farinas Lugo

*Daniel Farinas Lugo is a first year medical student who enjoys walking around and getting lost in new strange places in search of inspiration.*



# Malav Patel

*Malav Patel is a second year medical student.*

Summer at Lake Ella



## STRAIGHT, NO CHASER (CONTINUED)

to wipe a tear and I make eye contact with someone, a slight smile showing on their face gave me more comfort than I had anticipated (*or thought I deserved*).

As I begin to leave, the person next to me buys me a copy of Alcoholics Anonymous (*the latest edition I might add, I haven't purchased the newest edition of any textbook in my life*). "Now you'll definitely get an A on your paper," they exclaim. They remind me that, as a future doctor, I can never truly diagnosis someone as an alcoholic; that is something the patient needs to discover for themselves. The only thing I could provide is my guidance in getting them to a meeting. As I flip through the pages of this book, I see doctors have known this since the 30's: "Faced with this problem, if a doctor is honest with himself, he must sometimes feel his own inadequacy. Although he gives all that is in him, it often is not enough" (*If that ain't just the gospel truth*).

If character traits could only be described through word association games, it wouldn't come as a surprise to me if my name is synonymous with "beer snobbery" (*I'd rather it be associated with witty, but writers can't be choosers*). After all, at any social gathering the statistical odds of me getting asked, "Hey, what beer are you drinking?" or, "Hey, you drink a lot of beer, what do you recommend?" are so good I should go to Vegas with them (*adios student loans*). None of that will ever make me a good doctor. I want to be able to get people the help they deserve. To recommend meetings like "Living Sober" because people jokingly calling me an alcoholic isn't funny once you've cried in your car after realizing your gut-punches don't amount to a hill of beans in this crazy world (*Here's looking at you, kid*). Because joking around with your colleagues about going to these meetings as a fictional *Fight Club* character isn't funny when a recovering alcoholic stares you in the eyes and thanks you for being a doctor that cares for people like them. The general welfare of our future patients rely on the notion that we understand their pains, and I'll always remember sitting on that beat-up blue couch Sunday morning on Monday Road (*hold the tissues*). ■

More hands  
slowly go up  
as names are  
spoken aloud  
with a courage  
not worthy  
of my typing  
fingers.

Each with  
the same  
last name,  
"...and I'm an  
alcoholic."

# TRAIN STATION AT DUSK



## HEAL WRITING WORKSHOP

In October of 2014, HEAL hosted a writing workshop for the medical students at the College of Medicine's main campus. Participants were presented with a photograph and the task to place themselves within the image, employing all senses in order to invite the audience, the reader, into the lived reality of the photo. As workshop participants learned, great humanistic writing requires skillful observation, attention to detail, and choosing the right words—all skills that are equally important in the practice of medicine. As William Carlos Williams said of his dual profession as poet and physician, "...one occupation complements the other, that they are two parts of the whole, that it is not two jobs at all, that one rests us when the other fatigues..."

## MEMOIR

Amanda Wilder, Class of 2018

As the shades of the sky shifted from blue to a deep royal purple and the sun's bright yellow light began to pool at the bottom of the horizon, the nerves I gathered to take this trip fell over me like a curtain. I glanced anxiously at my watch for the twentieth time—7:25, the train should be arriving soon. The empty station whispered to me: leaving this city meant I would be starting over in the next one all alone. As the overhead florescent bulbs kicked on, I felt pangs of excitement from deep within my chest. Next stop: Madrid.

## FREIGHT

Angela Bradford, Class of 2018

The sky reflects the unfolding fraught adventure, as though it is trying on every garment in the closet, trying to look just right for the arrival of the train. The purple scarf with the gold dress? Or pink gown with white shoes? It is as indecisive as me, standing on the platform, wondering what I'll say when the moment arrives. In the hours before the city wakes up, I stand at the edge, weighing my options. As the distant rumble, like faraway thunder, is noticed first in my bones before it reaches my ears—the mad thought occurs, of leaping before the train to avoid having to say anything at all.



# COTTON CANDY



Juno Lee, Class of 2018

I didn't understand it. The park was empty, except for this cotton candy vendor. I had already circled the park twice, between naked black trees, crunching damp gravel on the trail. The overcast blanketed gray and blue and even the songbirds seemed to whisper today. But here I am, silently watching this whistling smiling hulk of a man, delicately twirling his wand of sugar into clouds of pink. I could hear him through his tangled dark beard, talking about the newspaper's font being too small or some shit. My eyes fixated on the ever growing spinning tumor and I couldn't move away.

Travis Bontrager, Class of 2018

Over the stinging aura of freshly mowed grass,  
the sun beats down with an audible glare.  
The line stretches far from the shade,  
a cotton candy cart offers little cover.  
a swirling pink web appears from the dry air,  
wrapping, growing, spinning, enticing.  
Only a crumpled dollar more for the jumbo,  
a painted mouth over a sick stomach follows.

Denise Go, Class of 2018

We sit at an aluminum  
table, taciturn and unapologetic  
for our refusal to participate  
outside windex-sprayed  
screen doors. The  
cotton candy, sickly sugar  
processed and twisted  
into capricious gossamer  
threads, makes me  
self-conscious of my  
femininity—fleeting, confined,  
melting in your mouth  
to escape its own form.  
Of course, it's pink.  
Because who would  
ever decide that something  
so fragile like your branded  
and commercialized  
womanhood could be any  
other color?

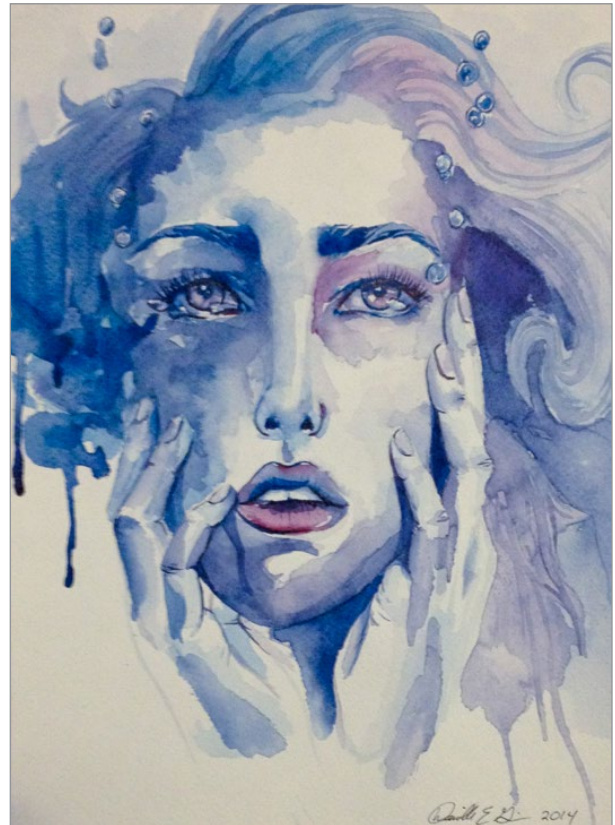
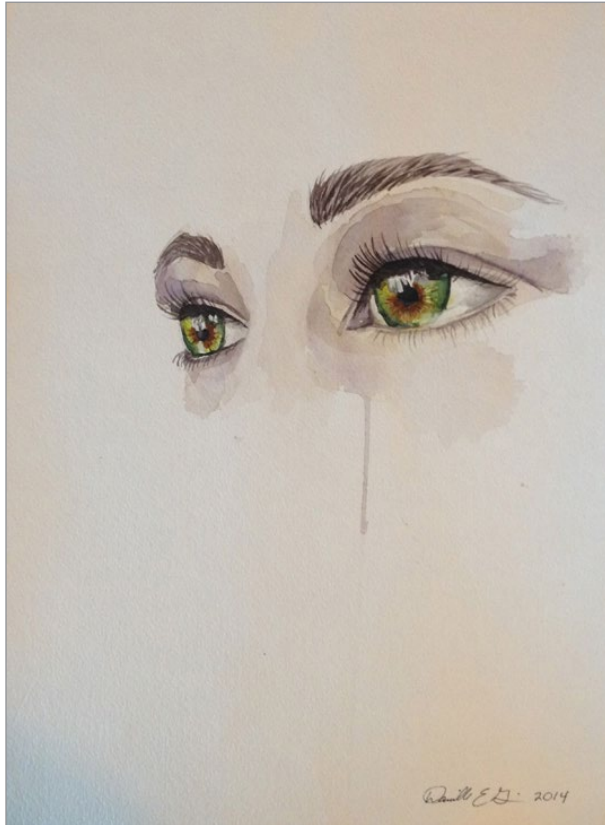


# Michael J. Muszynski MD, FAAP

*Michael Muszynski is the Orlando Regional Campus Dean and the Associate Dean for Clinical Research at the FSU College of Medicine.*

And While the Waves Breaking





# Danielle Guinan

*Danielle Guinan is a third year medical student at the Sarasota Regional Campus. She is a self-taught artist who draws her inspiration from music, nature, and human emotion.*

Window Pains (left) and Last Chance to Breathe (right)



# Ashley Michelle Kreher

*Ashley Kreher is a first year medical student who currently aspires to become a doctor of Family Medicine with a focus in Preventative Care. She is from Rotonda West, Florida and has always had a strong passion for the arts. She enjoys expressing herself and her experiences in medicine through photography, charcoal, and watercolors.*

Vamos por mas Victorias en Color





# Zachary Field

*Zachary Field is a second year medical student who has always been intrigued by the idea of turning a blank canvas into something meaningful.*

Journey Through Musical Time



## JOY COMES IN THE MORNING

Dorty Morency

*Dorty Morency is a third year medical student at the Fort Pierce Regional Campus.*

# KING OF THE MOUNTAIN

Amy-Joy Thompson, Class of 2016

*Author's Note: This first-person account is written in the voice of a patient who left a great impact on me. We talked for 3 hours about his incredible life living with an extremely rare and (up until recently) very misunderstood condition. I felt honored to speak with such a vibrant and perseverant person. I hope that you will learn from and enjoy his story as much as I did.*

"Most things break, including hearts.  
The lessons of life amount not to wisdom—  
but to scar tissue and callus."

-Wallace Stegner, *The Spectator Bird*

I tried to deny that I was all that different, but the playground kids would always manage to remind me—painfully—otherwise.

Granted, I'll never claim to be bright. I loved playing King of the Mountain when it probably would have been wiser to hang back with the group of "nice girls" who pitied me, girls who would invite me to study with them in the library after school. Instead, I would brush them off and follow the other boys into the patch of woods behind the school. The rules were simple: climb onto the log, grab someone around the waist, hurl them to the ground, and repeat. That one day, I swear I was Captain America,

# My entire body shook as everything finally made sense and came crashing down upon me. Our curse at least had a name.

my favorite superhero—I sent every kid soaring and scrabbling face-first into the rotting leaves. I lifted up my spindly arms and roared.

I didn't see Benjamin, ever the sore loser, grab me by the ankles from behind. My feet went tumbling and my torso snapped sickeningly against the log. I crumpled to the ground on my back, and to prove the twisted point, he punched me in the chest, hard. I heard a revolting crunch and felt a wave of excruciating pain that made me convulse against the ground. "Oh, did I make the little King crack? Looks like Humpy Dumpy fell off his wall..."

I thought about correcting him ("It's Humpty Dumpty, idiot!"), but then reflecting on my misshapen body, and my dumpy hand-me-downs, the variation was probably intentional—and it stuck. When I came to sometime later, it was dark and I was alone.

\*\*\*

I first heard the term "Osteogenesis Imperfecta" in the movie *Unbreakable*. I shoved it into my sister's hands and said watch this. My entire body shook as everything finally made sense and came crashing down upon me. Our curse at least had a name.

My youngest brother has it, too. My mother wailed that it was her fault as the doctor ran out of the hospital room with a small cocoon of bloody sheets in his arms. I was sitting on the cold floor in the hallway, and snuck a peek through the door to see my mother sobbing. My father nursed his own hand after my mother had presumably cracked his hand during the delivery.

When I finally met my brother, he was a bundle of bandages, weird angles, and a web of skinfolds, encased in two diaper casts. The doctors reported that he had been born with 42 breaks below the knee. I shifted my own bandages uncomfortably, shaking my head pityingly at my family's sore luck and sighed.

\*\*\*

I was the least cool kid in class somewhere on par with parasites and the plague. As Dad was more generous with the strap than with wholesome fatherly wisdom, and Mother was too busy tending to my brother's latest fractures to notice my existence, I searched for other ways to keep myself sane. I tried football. During the first practice, a kid gave me one generous shove and cracked my collarbone. I tried working at a swap shop in 4th grade, and slipped on a puddle, splintering a vertebra. The store owner glared at me writhing about on the floor and snapped, "Hurry up and clean this before a customer slips!" A customer finally took pity on me and called an ambulance, and I was promptly dismissed from the establishment.

As it seemed wise to spend the rest of my childhood trying to be invisible and stationary, I resorted to the safety of my three-hundred comic books—especially Captain America. My sisters, Pea Pod (my flying squirrel), and my uncle have also kept me on my feet. My uncle gave me my greatest escape: the water. Every Saturday I'd wake up at the crack of dawn with a 5-gallon bucket, tennis shoes, a pair of cut-off shorts, and a sack. He took me water skiing. I've never felt so unbreakable! I wound up shaving off one of my skis to a point and I dubbed it my Uniski, for even if one leg was aching, I could balance on the other. Then at the end of skiing, I'd push my brother along the pier as he drug the dip net beside his wheelchair catching crab for our Sunday night boil. I owe my uncle the best years of my life.

The rest of those days—they belong to my wife.

\*\*\*

The first marriage was also a casualty of disease. It snapped from the strain, and neither of us had the means to splint it or the patience to let it heal.

My second marriage though...they don't make them like Joyce anymore. She was the most beautiful woman, and it's more painful than any fracture to think of her now. While she lay in hospice, she made friends with every nurse she met. I stayed by her side almost every moment, but when I couldn't



## KING OF THE MOUNTAIN (CONTINUED)

take it anymore, I left and returned with a bright yellow and red tattoo over my left chest—a picture of Betty Boop, her favorite character, with “Joyce” in a curled banner beneath it. I unbuttoned my shirt that was tight around my barrel-shaped chest, and revealed the tattoo.

She lay there, speechless. As a Catholic, she never did believe in tattoos, and I wondered if I had insulted her—but later, she asked one of the nurses if she could have one too. It just so happened that the nurse’s husband was a tattoo artist. He gave her one that mirrored my own, with “Butch” (my nickname) on the banner.

Two days later, she passed in my arms. I would have taken a thousand fractures over losing my best friend.

\*\*\*

My sister and cousin kept me going emotionally while the doctors kept me going physically. I’ve had more vertebroplasties than I can remember. At one point, a doctor did an x-ray to scope out my rotator cuff and said, “We have a problem.” They saw a lung mass, which for a brief moment, I saw as so ironic that I burst into a fit of laughter in the office and the doctor thought I was crazy. But alas, that too was related to the disease—somehow some bone cement had gotten lodged in my lung and is floating around in there somewhere. I have 4 pins in my arm that won’t hold, and my knees are made of more bionic material than bone. So much of me is metal that I might as well be considered a walking superhero with a metallic skeleton for a suit.

Despite the fact that I am on a first-name basis with most of the orthopedists in this city, I still feel like a foreigner in the emergency room. The last time I was there, I had broken another bone in my back. The convulsions this time just would not let up. I keep a small canister of Percocets that I break in half and store on my belt to try and last me the month, but they didn’t even begin touch the pain. The medical students in the

ER rolled their eyes when I declared my pain level, and denied the existence of my condition. Oh, I know the damn ER isn’t connected to the hospital system, but all they had to do was ask for the records and they would know that I’m not one of the pain junkie pill mill vampires that has made the rest of our lives’ miserable. Just when the convulsions started to die down, a tech tried to move me—and I swear I wanted to wring his neck. The pain flared up all over again, and they again rolled their eyes when I screamed.

It makes you hate people, you know. It really does. These are the same people that, standing outside of my brother’s deathbed in the hospital said, “Hey, did you see that guy? He looks like big Buddha.” I stood up next to my broken brother with his barrel chest, and with fire in my eyes said, “That Buddha is my brother.” They simply walked away.

\*\*\*

This is Superman’s kryptonite. I try to make the best of it—I used to build and fix fiberglass boats before my disability wouldn’t let me anymore, but I was damn well good at it—and I still go fishing and hunting, and I swear buck fever is real and is better than any medicine—but sometimes you want to give up. I wish I hadn’t had this disease. The ridicule leaves you scarred.

But I’m still trying. I thank God for my daughter every day. I didn’t want any children, but I am so glad that we had her—every time she hit a cabinet or fell to the ground, I scooped her up to check that she was okay. Every cry or whimper had me running in the night to check. I never got any sleep as a parent. But thank God—she is fine. She has three boys now, and they are all fine.

Maybe the generational curse has come to a close. Maybe my superhero power as Butch was to put an end to this cycle.

I guess that makes me the King of the Mountain—I’m the last one still standing. ■

The medical students in the ER rolled their eyes when I declared my pain level, and denied the existence of my condition.



# Juno Lee

*Juno Lee is a second year medical student.*

Rx Risen

# MAVERICK

Cashana M. Betterly, Class of 2016

I suppose you could say I'm a celebrity around these parts.

People call me the infamous "miracle baby." My mom has posted videos about me and my journey all over the internet. I can't really blame her. It's probably safe to say that most babies aren't born after only spending 23 weeks in their mommy's belly. So, I'll give her that. But if she plans to embarrass me this much during my teen years, we will definitely need an intervention.

I'm also known by many pediatricians around town because of all that I've been through—because I've managed to live despite my health problems. As it turns out, I probably should have stayed in my mommy's belly a little bit longer. I guess you could call me a rebel, an adventurer. I knew there was an awesome world outside waiting for me and I didn't want to wait any longer. That decision didn't come without some consequences though.

I spent the first five months of my life in the hospital with other babies. I think some of them were rebels like me. It wasn't my favorite place, if I'm being honest. They kept poking me and prodding me all over, and constantly waking me up to run tests. I never really knew what was going on. After my journey to the outside world, all I wanted to do was rest. And I thought to myself, "If this is what the outside world is like, take me back to where I was before!" Because, hey, at least the weather was much warmer there. But things gradually got better. And I knew they were only trying to help me, to make my adventure a success. The breathing machines, the medicines for all the bugs in my body, the pokes and prods—they all served a purpose.

And I'm very thankful for that. You know, I often wonder what ever happened to those other babies. I think some of them took journeys to heaven while I was there. I wasn't ready to take that journey, not yet. Some other babies continued their journey here on earth with me. Maybe I'll run into them one day. If we can recognize each other, that is. Chances are, we'll all look a tad different. After all, I'm two-years-old now. I'm almost an adult!

I'm much healthier now. But the biggest thing that bothers me is probably the way my body moves. I can't move in the way that I'd like to. They call it CP, or something like that. Some fancy name that I can't pronounce. Most kids don't have it, but I do. And sometimes I see the other kids run, play, and swim and I get a little sad. There are days I can't even stretch my arms when I wake up in the morning! It's frustrating, to say the least. The upside is that I go to therapy every week and my legs are getting really strong! I'm standing for longer periods of time now and I get to wear fancy footwear to help my feet get stronger too. Who knows? Maybe one day I'll be able to run around the playground with those other kids. Maybe I'll run even faster than them!

The next thing that can be kind of annoying is the way I breathe. Since I was born so early, my lungs never had a chance to grow in the way they were supposed to. So I take medicine every day for them. That, coupled with the fact that my swallowing muscles are kind of weak, make for a pretty tricky way of eating. I have this cool little tube inside of my belly that my mom puts white juice into every day. I must say, they've put some of it in my mouth and it's just not that appetizing. I see the other kids with apple juice, orange juice, yogurt...now

According to science,  
I shouldn't be alive right now.  
But I'm a maverick.



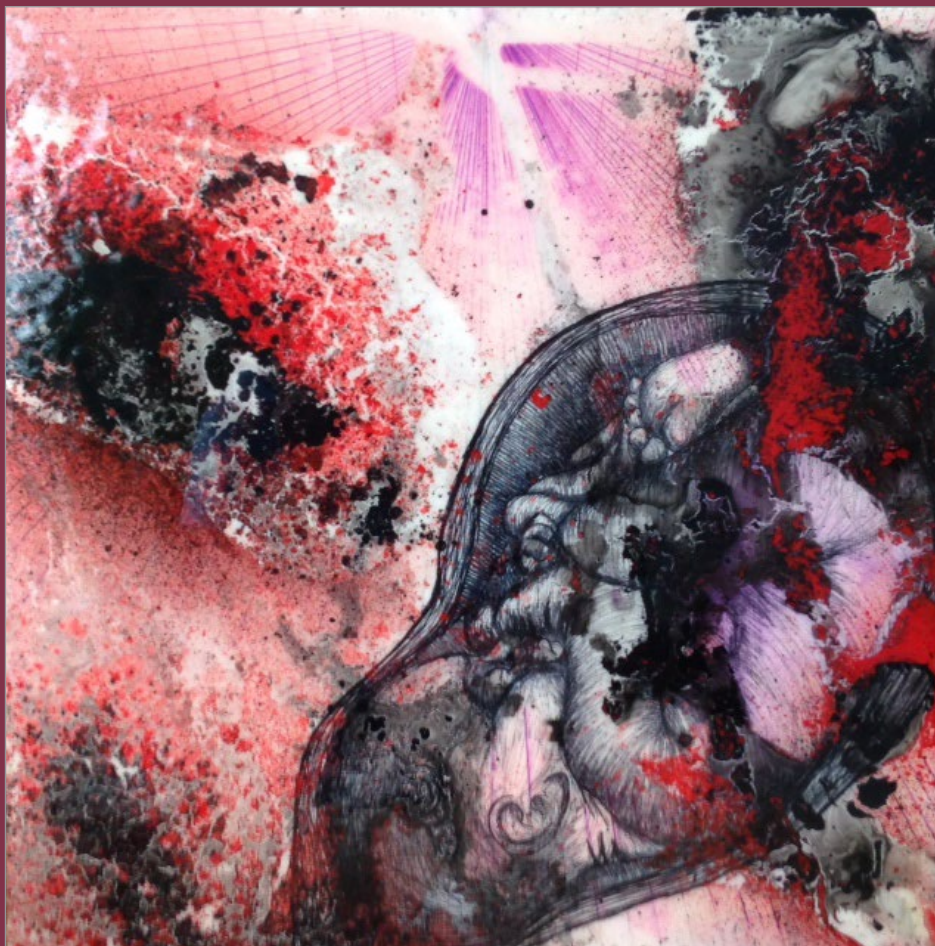
that's the good stuff. There's a nice lady who's helping me learn how to swallow better and I think she's doing a pretty good job. Pretty soon, I'll be eating those delicious enchiladas that we cook all the time at home.

Oh! That actually leads me to my next point...I don't think I've mentioned the most important part of my adventure yet—my mom. Even though she's 24 now and getting kind of old, she's still the coolest person I know. A lot of kids I know have both a mom and a dad, but she's been raising me all by herself. I think that makes both of us pretty special. My grandma helps take care of me, too, sometimes. She's even older than my mom, which I didn't think was possible, but she is. My mom works hard. She has a job and she goes to school, yet she still manages

to cook wonderful food for the family and spend time with me at the end of the day. And that's always my favorite part of the day.

To wrap things up, according to science, I shouldn't be alive right now. But I'm a maverick. I've been through things during my first 2 years of life that most people will never experience in a lifetime. And this fact has pros and cons. But I'm here now and I'm not going anywhere. Despite my health problems, I know my awesome venture out into the world will be worth all the struggles. I don't regret a thing.

And you know what? The weather out here isn't so bad after all. ■



## IN UTERO

Nicole McLaughlin

*Nicole McLaughlin is an emerging artist who received her BFA from Florida State University and currently maintains a studio in Key West, Florida. Often times her work grows from looking for mathematical order and structure in nature: specifically in human behavior, evolutionary psychology, cell behavior, and biological imperatives. She exhibits throughout the Southeast.*



# Lauren Alexis Jeck

*Lauren Alexis Jeck is a second year medical student.*

Gum Swamp Trail- Apalachicola National Forest



Cover  
Artwork  
Finalist





## Ricardo José González-Rothi, MD

*An amateur photographer and faculty member in the Department of Clinical Sciences, Ricardo González-Rothi took this photograph of a beehive after it was removed from his kitchen ventilating hood. He entitled it "The Thinking Hive" because it so reminded him of the right hemisphere of an actual brain, which is where personality, creativity, intuition, music, art and spatial abilities kindly reside.*

The Thinking Hive



# OTTO VON BISMARCK: THE QUICK AND MELANCHOLIC AUTOBIOGRAPHY OF ONE DEMENTED BASTARD

Rennier A. Martinez, MD, Class of 2015

**B**arabbas and I were born on the same day on a rainy afternoon on the Ides of November. My first memory of him would be five years later, when, in what I thought was a heroic act by a true friend, he bit my cousin for the simple audacity of taking a beloved wooden toy without my permission. The last time I saw him I was shipping off to the Korean War. No one objected more to my departure than that faithful canine. He died 2 weeks later. My mother said it was from sadness. I'd like to think it was old age. Old age is as good a time as any to die, especially if you miss someone. Now I can't even remember what he looked like.

I have a worn out picture of my parents, back when we still had the farm, and I stare at it for hours on end, expecting, hoping, wishing, to remember more about that small house on that gargantuan mountain in Wisconsin in which Barabbas and I, raced and wrestled and risked countless scoldings from my father. I think it was Wisconsin. I think it was a mountain. It doesn't matter much now; no one lives there anymore.

My parents were German, just like Barabbas and our car. I was German too—at some point. Now I'm just old and demented. And according to my roommate, what's his face, I seem to be taking too much space. I believe him. I feel like an oddly placed piece of furniture that everyone keeps going around, or bumping into, without ever taking the time to place it in its proper location.

These days memory is in short supply. As a teenager, getting lucky for me meant kissing some full-lipped red-head at the movies. Seven years ago it meant being able to find my car in the parking lot without having to request the aid of the National Guard. Now it means not soiling myself after having too much oatmeal while still remembering to call my nurse to clean me up. My brain used to be filled with plenty of wondrous information: like the name of my priest (always know the name of your priest just in case you decide to start dying unexpectedly and need an expedited extreme unction), or, the names of my grandchildren (those are the first recollections to go, on account that they are so many and all look alike), the names of my neighbors (I'm fine with forgetting these since they're bastards most of the time anyway), the names of my

pets (not remembering these didn't affect me much, as most animals respond to some form of whistling), and ultimately, my birth name. I was born Otto von Bismarck—no relation to the other Otto von Bismarck. Even during my birth I never cried. My grandmother decided to baptize me expeditiously on my fourth day of life fearing that the reason I was eerily quiet was because I was not interested in this world and would soon depart it. Her prophecy came true—only eight decades later.

About fifteen years ago some young clever doctor told me I was losing my memory. I could have told him that, sans the thousands of dollars' worth of tests, but everyone knows doctors are a bunch of crooks. I had been losing my mind for ten years prior to that anyway and they never noticed. No one did. So, I started taking all kinds of pills, which I didn't really want to take, on account of them being as useful as parachutes in submarines, but it seemed to make my children happy, so I took them. Things did not get worse for a while. Josephine and I vacationed with friends; visited my kidney doctor; traveled to Maine; visited my heart doctor; saw my granddaughter get married; visited my regular doctor. I deeply dislike visiting doctors. It keeps me up at night. Really! My wife passed away from this or the other as explained by the surgeon that last saw her alive. Doctors focus too much on diseases, so I never really knew. The only thing I know these days is that I miss my wife. Sometimes I forget her name and it breaks my heart.

Now I'm a guest in this new age purgatory with dozens of old demented bastards just like me, trying desperately to die, just like me. These young doctors and nurses put up a good fight, they really do, but they don't realize they are just stalling. We're winning. We'll always win. I just hope I don't take too much longer. I'm getting so old my wife in heaven might start to think I won't make it. ■



# Mollika Hossain

*Mollika Hossain is a second year medical student.*

Nature and Humanity





# Ashley Morton

*Ashley Morton is a third year medical student at the Pensacola Regional campus.*

Daydream (*left*) and Vernazza (*below*)

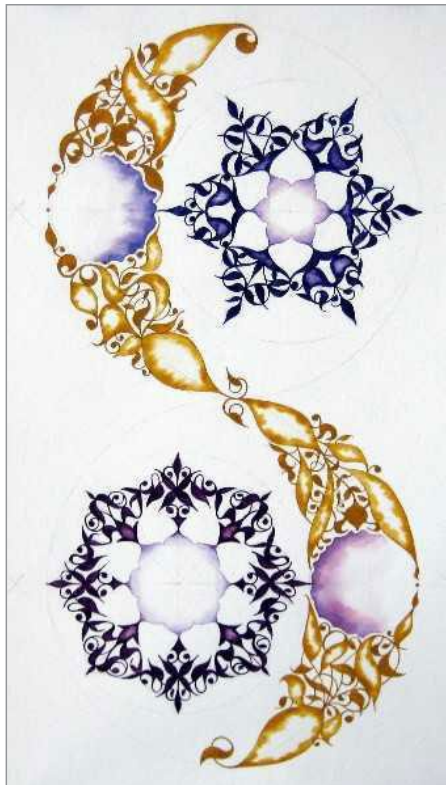




# Karl Lorenzen

*Karl Lorenzen is a faculty member of the leading holistic learning centers, Anthroposophy NYC and the New York Open Center, and a teaching Artist in Residence at the Omega Institute, Rhinebeck, NY. His artwork has been featured in HEAL, The Healing Muse, and Paris/Atlantic 2015.*

The Seed (right), Crescent (bottom left), and Craquele (bottom right)



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تسین غالک نی

Tirajeh Zohourian

*Tirajeh Zohourian is a second year medical student  
at Florida State University.*

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