

MEDICAL LITERARY MESSENGER

An Artistic Voice for the Healing Arts



Mural by Laura Marr; see page 32

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An Artistic Voice for the Healing Arts

We are thrilled to bring you this long-awaited volume of the VCU *Medical Literary Messenger*. I am struck by the way some of the themes in our volume (waiting, adjusting to a new reality) mimic our process of creating this issue. With tides shifting in our own lives, we have enjoyed the ebbing of some roles and the flowing of others into our team. How lucky we are to have Priscilla Cash step into the role of managing editor. She has been a driving force in this issue, pulling our labor of love forward to publication. We hope that the striking visual art and powerful imagery within the written word of our issue bring you time for reflection, emotion, and peace.

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IN THIS ISSUE

ARTWORK

Joan Gaustad
Laura Marr
Curtis Sessler, MD

FICTION

Terry Dubow
L. E. Duchin

NONFICTION

Dennis Dauble
Nancy Glass
Paul Rousseau

POETRY

Jennifer Campbell
Craig Cotter
Madlynn Haber
Susan J. Mellette, MD
Stephen C. Middleton
Anesa Miller
Lisa Romano Licht
Susan Roney-O'Brien
Rebecca M. Ross
Judith Yarnall

Retroactive Panic

In retrospect, I am horrified
that our healthy bodies
all along had a chance
at infection despite
the vaccines, the vitamins,
the masks and distance,
the good blood, privilege
of race and body type
and shelves stocked
with organic fruits
and clean vegetables.
Despite the hundreds
of miles we walked
for 18 months
in a safe neighborhood
day and night, noticing
the micromovements
of nature, the laughter
of children, the social lives
of dogs, it was coming
for us too, plague
the past cannot keep
from repeating, same
old story: anyone
with a heart that beats
has a chance
of forgetting
how that sounds.

By Jennifer Campbell

Jennifer Campbell is a writing professor in Buffalo, NY, and a coeditor of Earth's Daughters. She has two poetry collections, Supposed to Love and Driving Straight Through, and a chapbook of reconstituted fairytale poems called What Came First. Jennifer's work has recently appeared in The Healing Muse and Paterson Review and is forthcoming in Slipstream and The American Journal of Nursing.

Zingers

By Dennis Dauble

Seven years after removal of my cancerous prostate and hearing the words, “You are cured,” my PSA (prostate specific antigen) reading crept above zero. I ignored the sign until a second blood test confirmed my worst fear: cancer had come back. And all this time I thought I was free of the burden. Unfortunately, disease often ignores the rules of fair play.

Initial consultation with a radiation oncologist began when Dr. Chou asked, “Do you remember your Gleason Score?”

“Somewhere between six and eight, I think.” I replied.

Dr. Chou laughed. “I don’t mean to think it’s funny, but six is low risk and eight is high. What are your symptoms?”

“I have a high splash factor when I pee and I leak badly when I am hiking or if I drink more than one glass of beer.”

“Those are normal symptoms.”

“My sex life is pretty much down the toilet.”

“Sorry about that.”

“It’s sorry all right. What if I forego treatment?”

“Watch and wait is not recommended with your PSA score rising.”

More questions flooded my mind, but all I could think of was how long I would be waylaid from normal activities during treatment. “Is eight weeks standard?” I asked.

“It’s nine weeks if your prostate is

“I walked out the double glass door of the cancer center with an information packet under my arm.

The course of treatment was apt to lead to tiredness, loose bowels, increased incontinence, and muscle aches.

It was the first week in May, and I should be catching up on yardwork and fishing.”

intact with cancer. Eight weeks for salvage.”

Great. Another medical term to use in the next game of Scrabble.

Dr. Chou gave me a consolatory pat on the back. “Don’t dwell on things,” he said. “Your PSA is low and we’ve got a lot of information to gather before a decision has to be made.”

I walked out the double glass door of the cancer center with an information packet under my arm. The course of treatment was apt to lead to tiredness, loose bowels, increased incontinence, and muscle aches. It was the first week in May and I should be catching up on yardwork and fishing.

Looking out the living room window a week later, everything appears normal. White-crowned sparrows hop on the lawn for loose seed. Chokecherry and lilac blossoms burst forth with efflorescence. The heads of yellow daffodils and two-tone narcissus toss in a gentle breeze.

As young children, my sisters and I delivered paper baskets filled with fresh-cut flowers to neighbors on May Day: carpet-of-snow, basket-of-gold, tulip, grape hyacinth. We’d slip the bas-

ket’s handle over a front door knob, rap our knuckles on the door, and run. A similar assemblage of flowering plants graces my yard thanks to Mom’s tutelage. Love of gardening was passed down to all five siblings except brother Daran whose idea of working the soil involved repairing a fairway divot.

Back at the cancer center for day one of treatment, I am given directions to a changing room and told, “Remove everything from the waist down.”

An insensitive female aide hands me a pair of blue drawstring pants and leaves me standing there bewildered. More direction than a nod of the head should be given for all patients over the age of sixty. I brush back tears and place my shoes, socks, shorts, and briefs in a numbered metal locker. The adjacent waiting room has six hardback chairs lined up against one wall, a table covered with puzzle pieces, and a full-size leather couch. Bottled water in a glass-door cooler and a nearby bowl of hard candy complete the arrangement. Two older men wearing sweat pants and polo shirts, and a middle-aged woman

Continued, next page

Continued from page 4

with a pink silk scarf wrapped around her head politely return my nod.

“It’s the first day of the rest of my life,” I tell Marilyn, a breast cancer survivor who volunteers at the cancer center. A bald-headed guy with bushy eyebrows messes with the 200-piece puzzle and announces he has three days left on his nine-week treatment regime. “He shows up early and stays late,” Marilyn whispers. “Likes puzzles.”

Bladder pain is intense after two cups of coffee and four glasses of water are swigged to ensure bladder fullness as instructed. My name is called as bladder pressure builds. “We’ll do a cat scan first, followed by two rotations of treatment,” the aide says. “One on each side.”

I lie on my back and nestle my bare feet in a paddle cradle the aide centers manually. She pulls my pants down to expose the groin target area and hands me an eight-inch diameter hard plastic ring to hold. Gripping the “binkie” tight across my chest temporarily reduces the sharp pain in my bladder. First up is a scan to assess fullness of bladder and colon/rectum; the latter they ask to be empty. The initial procedure takes less than a minute and helps position what I call “the magic beam.” What follows is a period of adjustment in an adjacent control room where the Wizard of Oz pulls knobs, pushes buttons, and monitors the time. A space-age looking radiation machine clicks, clacks, and hums as sensors change position.

“Your bladder was full.” I am told, when the attendant returns to my side. “You don’t have to be that full next time.”

I crash into another patient when I run to the restroom.

A more conservative approach to drinking fluids on day two of treatment does not fill my bladder. “Maybe half full,” I am told. “You’ll calibrate.”

I tell a friendly aide, “I’m not advocating surgery or chemo, but it appears I have to operate on faith since I don’t feel anything during treatment.”

“You want me to go ‘buzz, buzz?’” she replies.

“I do that in my mind,” I say.

Meanwhile, any previous sense of vanity, modesty, and self-esteem flies out the window when my underpants are pulled down on a daily basis. “Die, bad cancer cells, die,” I say while the radiation machine hums, clicks, and clunks like a tone-deaf musical trio.

I sense I’m better off than some patients who sit patiently in the waiting room until their name is called. Like the skinny gray-haired man who never looks up and the sad-eyed lady with shaky hands. What we have in common, though, is an unknown fate whose final outcome is dependent on modern medical science. I’ve hiked to the top of tall mountains and crossed two oceans to fish and play golf, but those adventures are a drop in the bucket to what remains to be done. Now that I have held four grandchildren in my arms, I

want to live long enough to hold their children.

The days roll by. Sun-filled weekends spent at our cabin help time pass quickly. New and familiar faces populate the waiting room at the cancer center while the latest Parisian scene puzzle moves to completion. Stories are swapped about stubborn mules and broken boat anchors with a fellow patient while two women dressed in pink scrubs listen with bemused looks. I jump to attention when my name is called. Other patients perk up, hoping to be called next.

Following day eight of treatment I meet with Dr. Chou to assess progress. “Is regular exposure to bright sun a problem,” I ask, “I heard radiation exposure causes skin to peel and itch.”

“Just don’t go skinny dipping in the river and expose your groin,” he replies.

On the way out the door, I pass a male patient with an anchor tattoo on his right bicep and a fist-sized tumor bulging from the base of his neck. He greets me with a cheerful, “Have a great day.” *If we could all be so benevolent*, I think.

My wife, Nancy waits in the parking lot with an eye to the latest political news on her iPhone. “Guess

“Meanwhile, any previous sense of vanity, modesty, and self-esteem flies out the window when my underpants are pulled down on a daily basis. Die, bad cancer cells, die, I say while the radiation machine hums, clicks, and clunks like a tone-deaf musical trio.”

Continued, next page

what Trump said this morning?” she asks. National politics has caused her as much anxiety as salvage treatment does for me. Some days we clash over things that seem important at the time but upon further reflection are in the category of stupid. That Nancy drove to the cabin while I napped in the shotgun seat to revive a worn-out brain was a blessed relief. A second nap on the couch after dinner brought me halfway back to normal. Admittedly, regular use of the recently legalized THC-bearing herb has increased. Levity without insanity is my goal over the next few months.

Moon-cast shadows stretch across open ground when I soak in the cabin’s cattle tub spa that evening. Stars sparkle between top branches of tall fir that sway in a light breeze. I wonder if the brightest stars are light-years closer or perhaps larger and wish I had studied constellations more. I often slept buck naked under cool cotton sheets in the summer and was among the first to skinny dip when such behavior was the price of admission. Not so anymore following prostate removal. However, any embarrassment or vulnerability felt about lost vigor disappears when I submerge up to my neck in the spa. I purse my cheeks and send a “hoot hoot hoot” to the screech owl that lives in the cottonwoods by the river. It doesn’t hoot back, but I don’t mind.

A week passes before I show up at the cancer center to celebrate the halfway point of treatment and find a small gathering of staff outside the waiting room. “Someone pulled the gong,” I am

“On the last day of radiation treatment . . . I blurt to the male aide, ‘I’d like to burn my treatment pants on graduation day. Tie them in knots, hang them from the ceiling, and light a match to them. Like a zinger.’”

told. “A graduate from treatment.”

A fellow patient shared, “Today is my last treatment. I’ve lost my sense of taste and fifty pounds along with it. Why eat? It just passes my mouth.” I gave a sympathetic nod and reflected how little I have suffered in comparison. Inattention to detail is an occasional challenge though. Like the morning I poured a cup of coffee into a hot frying pan instead of scrambled egg batter. Or when I swiped a stick of underarm deodorant across the bristles of my toothbrush. As for swagger, it left me following prostate removal.

A curious friend recently asked, “Is your hair going to fall out?”

“No.” I replied, “That happens with chemo.”

Some mornings I wake up groggy and other times I wake up thinking how good it would feel if my favorite aide, the petite brunette with a nice smile and a ponytail that swishes when she walks, had her way with me. Mostly though, I lie on my back, pull bed covers tight, and wonder if radiation has slowed me down like everyone says it would.

On the last day of radiation treatment, I announce my name and confirm my birth date is “nine, twenty-eight, fifty.” Without relinquishing position at the podium I blurt to the male aide, “I’d like to burn my treatment pants on graduation day. Tie them in knots, hang them from the ceiling, and light a match to them. Like a zinger.”

Being neither of the time nor culture to know about zingers, he gives a blank look. I go on to explain: “You take a plastic bag, tie it in a string of knots and attach it from a hook on the ceiling. Put a pan of water directly under the bag and flip the lights off. Turn on a black light if you have one. Light the bottom of the knotted plastic bag with a match and watch it flame and melt upward toward the ceiling. Zing, splash, zing, splash. Beads of melting plastic drop like meteorites into the pan of water.”

Keeping with tradition, I bang the gong, an anticlimactic event that fails to mitigate several weeks of anxiety and stress. Three months pass before a post-radiation checkup and a warm fuzzy from Dr. Chou. “I am optimistic,” he says. “You appear free of pain and have no issues. Your PSA has declined from zero point three to less than zero point one, meaning that radiation got to your cancer. Your PSA should continue to drop. There is nothing else to do.”

The good news is the clock on my life span has been reset to another ten years or so. “How many people have the opportunity to be cured twice?” I tell friends. ✧

Dennis Dauble is a retired research scientist turned outdoor writer who writes natural history columns for regional newspapers and is the author of five books about fish and fishing. His website is www.DennisDaubleBooks.com.

Family History

When the doctor asks for my family history,
I want to tell her that my father's life ended with a thud,
on the floor, outside of his door.
Will mine end so easily, so fast?
Or will I linger, like my mother, enjoying long years
while growing speechless, lost in a chair in the corner.
Both my parents had sad, curious, brown eyes.
I do too. My sister's eyes are blue, different, like the sky.
My father said I was the more sensitive one so
they gave me all their feelings to carry around for them.
His regrets and her anxieties. The doctor offers tranquilizers.
I tell her that anxiety comes natural to me, part of my history,
don't try to take it away. My heart is strong and clear,
according to the reports. It will not fail me as theirs did.
It continues to thrive, becoming more and more my own.

By Madlynn Haber

Madlynn Haber lives in a cohousing community in Northampton, Massachusetts. After retiring from a long career as a clinical social worker, her focus now is on her writing. She has had many poems and essays published in literary journals and anthologies, including Adult Children (Wishing Up Press, 2021), Muddy River Poetry Review, Poetica Magazine, Buddhist Poetry Review, Eunoia Review, and Months to Years. She is currently working on putting together her first collection of poetry. You can view her work at www.madlynnwrites.com.

Nights Before Surgery

I swear each night I crabwalk
into sheets of waves
where rip tides smash
my arthritic legs
into open mouths,
individual shark teeth spaced
rows against rows, honed
serrated, and the mouthparts
clamp down like beartraps of sea.
Those iron jaws clank closed
internally, for what feels like
eternally until I give in.

Not to sleep. Sleep won't have me,
but pills call, siren-sweet.
No mast, no ropes to bind me
and after hours of flailing,
pain stabbing, I pull myself free
of guilt, of shame, crack the lid
and slip a genie, the feared pill,
a weakness admission tablet,
a pill of need, between my lips.

Slowly teeth unclench.
The chains unwind, release hips,
thighs, knees, clang as they fall,
hit debris—drowned ships,
bleached bones, the bottom
of the ocean, and I am left
finally sprawling in wet sand
but can breathe, can stretch
my painless legs,
can read myself to sleep.

By Susan Roney-O'Brien

Susan Roney-O'Brien earned an MFA from Warren Wilson College and has published two chapbooks: Earth and Farmwife, and three full-length poetry collections: Legacy of the Last World, Bone Circle, and Thira. Nominated for numerous Pushcart Prizes and published widely, she curates programming for the Worcester County Poetry Association, runs a monthly online poetry venue, and facilitates free poetry workshops through area libraries. She, her husband, Philip, and Oliver, their Chocolate Lab, live in central Massachusetts where they garden and raise chickens. Susan keeps bees.

Waiting for Kafka

Guidelines for Relaxing Rehabilitation Readiness

By L.E. Duchin

Once you leave the hospital, your next stop is the rehabilitation center.

The surgeon has authorized a seven-day stay for recuperation, with ongoing care, rest, and better food. However, things may not go smoothly.

When you arrive, no one will check your ID, no one will check you in, and no one will explain any services or rules concerning your stay. Due to your current load of narcotics, you probably will not notice the above irregularities. And due to your physiological reactions to said narcotics, there will be much more pressing irregularities.

You beg to go to a bathroom. The first restroom in the hall has no bars to grasp and the commode will be low enough for toddlers. Gravity will pull you down, your breath will catch, and your knee will bend beyond the land of pain. You are in for rehabilitation, but this is not an accommodating restroom.

To avoid further complications, prepare in advance for your stay, using the following guidelines:

1 BRING YOUR OWN ICE MACHINE.

When you arrive in your room, gather several pillows and settle in bed with your post-op knee elevated as per surgeon's orders. For the next order, open your ice machine and prepare a large bag of ice to

reduce swelling. If you fail to come thus properly equipped, you will be forced to click your call button for assistance. You will then wait several years for a man in maroon scrubs to come to your door, and the following exchange will ensue:

"Hello."

"How can I help you?"

"I'd like some ice to put on my knee, please."

"We don't have ice."

"Sorry? I mean an ice bag. I'd like to ice my knee."

"No, we don't have any ice."

"What? Do you have those frozen plastic gel-packs that cool wounds and reduce swelling?"

"No."

"But I need something to put on my knee."

"We don't have any ice. The machine is broken."

"But . . . can I please talk to the nurse?"

Several months go by, and a nurse in green scrubs comes in.

"Yes? You wanted to speak to me?"

"Hi. I just arrived for rehab and I need some ice for my knee."

"We don't have any ice. The machine is broken."

"But I need some—"

"It will be fixed sometime tomorrow."

"So how can I get some ice now? I'm supposed to ice my incision area several times a day. I need some ice or a gel pack now. I can't wait until sometime tomorrow."

"Well, we don't have any ice."

"Seriously? This is a rehab facility with no ice?!"

"We'll have some ice tomorrow."

Déjà vu! At first you will think this is a joke. It isn't.

"How about sending someone across the street to the grocery store to get a bag of ice?"

"No, we can't afford to let anyone leave their duties here."

"Really? I'll pay for it."

Round Two: Repeat entire above exchange.

"Well I can't stay here."

"No, you have to stay here."

"If my medical needs can't be met here, I am leaving."

"You'll just have to wait until tomorrow."

The *Twilight Zone* music begins to play. You will, in fact, be trapped. You cannot walk. Even if you had a car, you can't drive with a nonfunctioning right leg. It's swollen. And painful. And throbbing.

You may, however, have a solution. It's possible that there are some brain cells in scuba gear that were not flooded with oxycodone. They are still functional. They can still breathe and think clearly. Axons away! They innervate your hand muscles to grab your phone. They push a friend's phone number

Continued, next page

Continued from page 9

who will receive your desperate message and bring you some ice.

First guideline repeated: Bring your own ice machine.

2 BRING YOUR OWN FOOD

If you don't carry your own food with you, your lunch and dinner will be limited to the facility's two choices for the day. But since no one will ever bring you a menu, your meals will arrive at undisclosed prearranged times. You will receive leftover school lunches from the 1950s. The lunch menu will also serve as dinner fare and will include biscuits and lard gravy paste, or mystery pasta with expired canned meat sauce. On subsequent days, still sans menu, they will bring you very deeply fried fish sticks, or sausages with coleslaw, Velveeta patty-melts with lettuce ('iceberg'—save that for your knee), or thin sandwiches of dry chicken and canned fruit cocktail.

Breakfast will be served at an ungodly early hour, and it is one-choice-fits-all. You will start your day with a nutritious meal of cinnamon coffee cake, three tablespoons of yogurt in a teeny bowl, and milk to go with Rice Krispies. Health food with health care! Yum.

Second guideline repeated: Bring your own food.

3 DEPEND ONLY ON YOURSELF

Unless you wish to end up in 'Depends,' never push the call button for assistance, or you will have to wait for someone to answer it. After a few minutes (read fifteen), the speaker will sound,

and a voice will ask what you need. A conversation similar to the following might take place:

"Good evening, Dave, how can I help you?"

"Well, Hal, I could use some help getting to the bathroom."

"Alright, I understand. I'll be right with you."

The calm and soothing voice is lying through its speech program. If you call again in ten minutes there will be no response.

"Hal? Are you there? I really have to go."

Static.

By the time someone gets to your room it will be past too late. Your P.J.s will be summarily sent to the laundry at the Hotel California and you will never see them again. Never depend on anyone, especially at night. Grunt your way out of bed in the dark, breathe through the pain, and 'walker' yourself the six or so paces to the bathroom. Do not turn on the light because the loud fan that accompanies it will give you away.

When your walker bangs into the privy, you'll be ready. Unless the lid is down. Then your mighty micturition will miss the bowl. It will either squirt back at you, spraying your legs and feet (men) or spread smoothly across the lid and cover your entire backside (women).

Third guideline amended: Bring your own 'Depends.'

4 NEVER TELL ANYONE THAT YOU TAKE ANY MEDICATION

Instead, bring it from home, hidden in your socks. Otherwise they will use your hospital records and bring you the wrong pills at the wrong times and in-

stist that you swallow them.

"What's this one?" you ask, since their pharmacy uses different suppliers with different colored pills.

"It's for your cholesterol."

"But this is more than I take."

"It's what your record shows, so you have to take them."

"Well sorry. It's not right and I'm not taking them."

"You will."

"I won't."

"Uh-huh."

"Nuh-uh."

"Uh-huh!"

"Nuh-uh!"

"Neener neener, et cetera."

But caution! Even if you take no meds at all, they will still bring you pain pills as prescribed in the hospital.

"Time for your oxycodone."

"Oh I don't want that much. It makes me too loopy."

"The doctor said to take two."

"I only want one."

"You need two."

"No, I don't."

"Your records say—"

"I am not taking two."

See childish exchange above and repeat.

"Neener neener!"

When the nurse hands you two pills, hide one pill in your hand and throw it away later. If you don't, you will soon be hooked: chained to the nurse's will.

By day three you will find yourself in a familiar film. Doctor F. has prescribed one thing, but Igor brings you the wrong brain. Is it an accident? No. They want you compliant.

"I've never been given this before."

Continued, next page

Continued from page 10

“It will help with nerve pain.”

After the familiar ‘uh-huh,’ ‘nuh-uh’ exchange, you are stuck on repeat. A skip on your record. Your medical record.

“I’ll just take the Tylenol.”

“It’s not in your chart.”

“But they gave it to me last night.”

“It isn’t in your chart. I can bring you oxycodone.”

“I don’t want that.”

“But that’s what’s prescribed in your chart, so you have to take them.”

Your binoculars will be backwards and you will see this nurse zoom away down a long tunnel. She is an evil cartoon witch chanting that she will not give you Tylenol but will happily give you more narcotics!

Will the Thorazine come next? Heavier chains? How about the straight jacket?

Fourth guideline repeated: Bring your own medications hidden in your socks.

5 BRING CHAIN CUTTERS, A STUN GUN, AND AN ATTORNEY

These are essential because without them you will never get out of there. Though overly strict about the orders in your hospital file, your caregivers will overlook the final instruction. Apparently no one will have noticed your doctor’s directive to have the facility care for you for up to seven days. You, however, will have been counting the hours.

As you begin to pack your things, a nurse will walk by your room and glance in. She will stop suddenly, and walk back to question you.

“What exactly are you doing?” her old schoolmarm voice will ask.

“Getting ready for my ride home,” you smile, “my friend should be here soon.”

“Have you already met with your C.A.T.?”

“My what?”

“Your care assessment team. They don’t usually meet on Wednesdays.”

You have never heard of this before, and so remind the nurse that your surgeon’s order for a seven day stay is now concluded.

“So it’s okay, I don’t need that,” you smile again, “Thanks anyway.”

The nurse marches away. She will soon return with a co-conspirator who is aptly name-tagged Case Manager. He will tell you that they are not prepared for your C.A.C. You wonder what that is. They had not planned to meet by day seven! You think, *boy it would have been nice to have had a Care Assessment Conference on day one.*

In fact, you learn that there should have been a first-day assessment. Just another procedural omission. Due to their negligence, the case manager will say, “I’m here to inform you that your care assessment conference cannot meet until Friday.”

“But today is day seven. My assigned convalescence is over.”

They will ignore you. They will try to chain you to your bed, and you will have to make a frantic call to your doctor.

Even when your surgeon calls the prison to tell them you are ‘ready to be released today,’ the guards will try to give you more oxy. When you ask them if your surgeon has just called to approve your release, be prepared for the following reply:

“Yes, we did get that call. She said you were ready but she didn’t say when.”

You are apparently on trial. The jury is rigged. If you forget your stun gun, you cannot simply stun these judges into silence. These people will not listen to reason, certainly not yours. Without a lawyer, you will have no one to support your argument.

A professional who speaks their twisted language. A criminal prosecutor who can overpower them. Medicare might even pay for this since, after all, it is a crime scene. But remember, without the aforementioned cutters, even your advocate will not be able to unchain your bonds, your heart, your brain, your soul and your psyche.

Looming high above you, the members of the jury will peer down at you in your tiny wheelchair. You will only be able to see the heads of the nurse, the case manager, the social worker and the physical therapists.

Fifth guideline amended: Become your own stun gun, your own chain cutters and your own advocate.

“I’m going home today.”

“Not without our consensus.”

“Well, either way, I’m leaving.”

“But you need our verdict and the final judgment of Doctor K.”

“Okay, let’s call him in here.”

“Oh he’s not here today.”

They are lying.

You will hear your heart beating and feel your blood pressure rising.

“What doctor is here today to sign me out?”

“It can only be your assigned doctor, Dr. K.”

Continued, next page

“So, please call him.”

“No, he’ll be in tomorrow. You have to stay until then.”

“No, I don’t.”

“You cannot leave A.M.A.”

“What does that mean?”

“Against Medical Advice.”

“Oh, I see. That’s fine with me. I’m calling my ride.”

“But this will go on your record!”

“Okay, good.”

You will then wheel yourself toward the door.

A tall man in a dapper suit blocks your way as the judges shout, “Stop her this minute, Franz!”

He will rapidly approach you. He will look down at you and you’ll see that he has no eyes. Dark black pits stare back at you. You realize that this is the director of the facility and this is a trial.

“I know you,” you say to your aggressor, “I have my wits about me now. I have figured out your twisted plan. You cannot legally keep me here and I’ve already cut your chains. The oxy pills are hiding in a drawer! I didn’t take them.”

You stand up, grab your crutches, and proceed to the exit.

“Goodbye now, Dr. Kafka.”

L.E. Duchin (she/her) is a retired scientist with a passion for writing. After a thirty-year academic career, she is enjoying the time to focus on nonscientific prose. Her short pieces have appeared in Eucalyptus and Rose, Everyday Fiction, and Small Leaf Press. She is also the author and photographer of a children's book, My Name Is Chaac, from Who Chains You Publishing. The story is about the monkeys she researched. L.E. Duchin lives in the Pacific Northwest with her family and two dogs. She has traveled much of the world and enjoys hiking, camping, reading, and dancing.

Kicking It

Just poured distilled water
into the humidifier.

Three more gallons of it
in the garage.

Fourteen bottles of laundry soap.

Fighting cancer last year
I wasn’t buying much.

Since kicking it

I again like the line of plastic bottles
on the garage shelf.

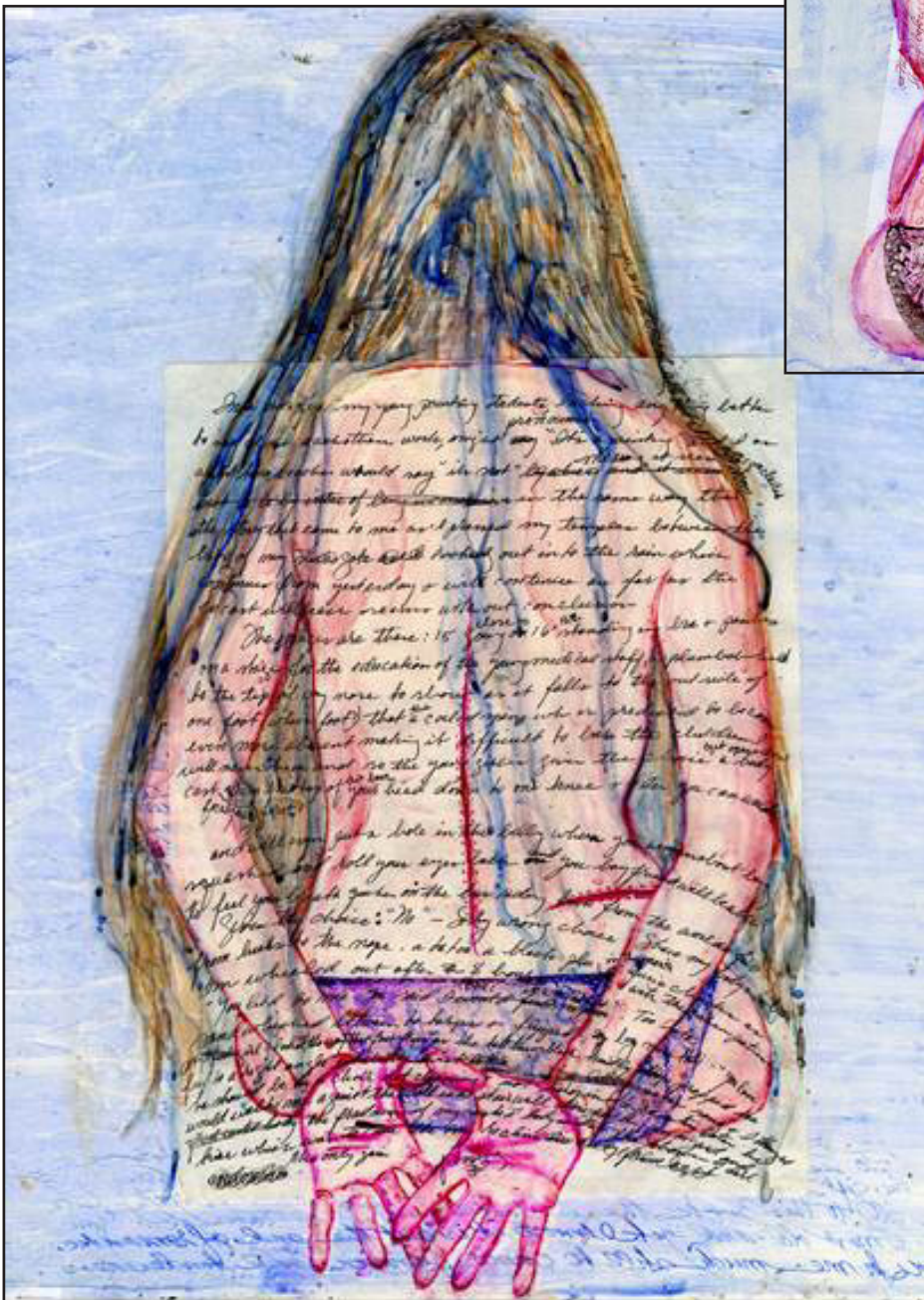
By Craig Cotter

Craig Cotter was born in 1960 in New York and has lived in California since 1986. His poems have appeared in Southword (Ireland), Chiron Review, Columbia Poetry Review, Court Green, The Gay & Lesbian Review, Great Lakes Review, Hawai’i Review, and Tampa Review. His fourth book of poems, After Lunch with Frank O’Hara, is currently available on Amazon. You can visit his website at www.craigcotter.com.

Stories P I N E



A DREAM



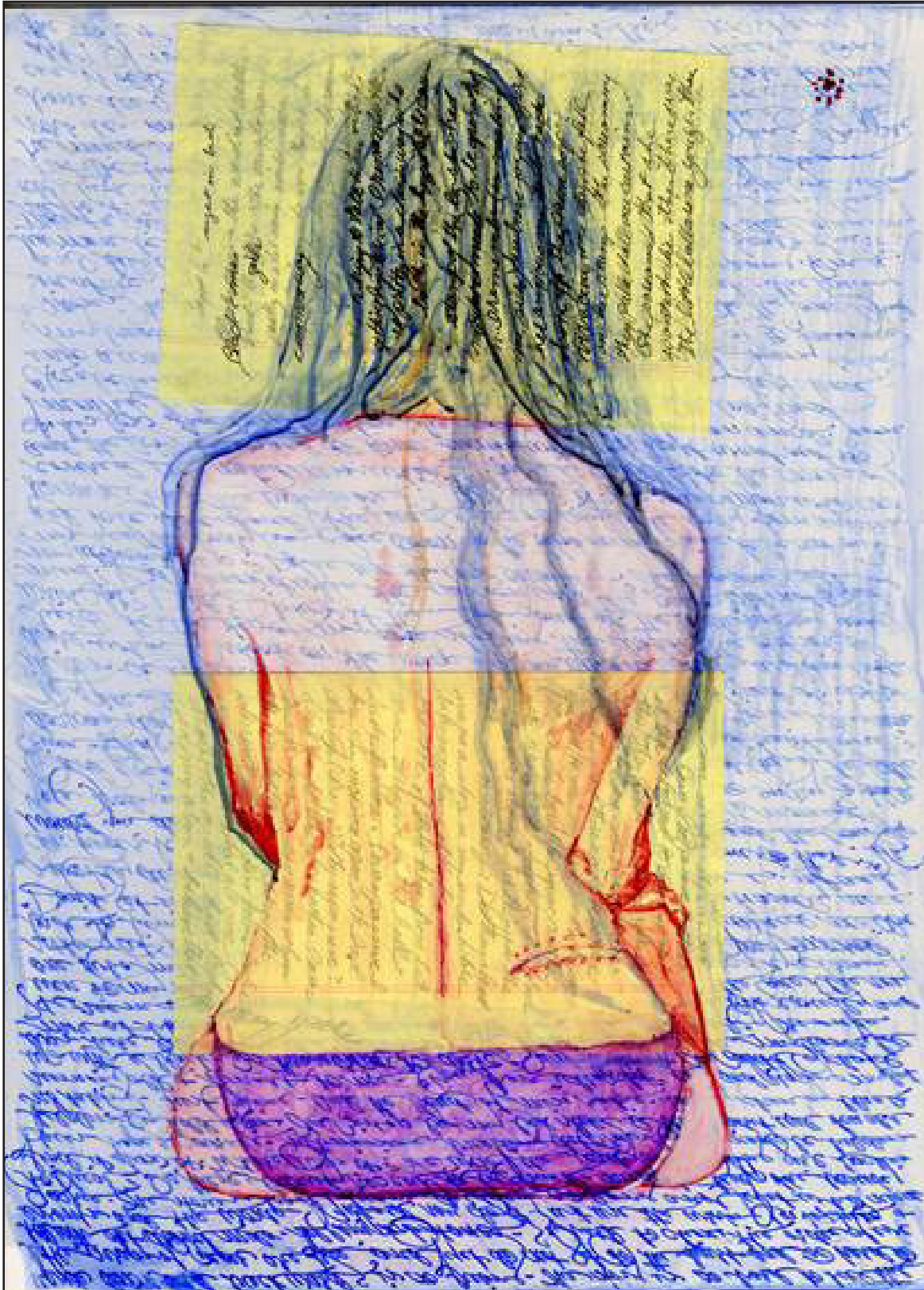
A LETTER

Paintings by Joan Gaustad

The writings that underlay these paintings are about the girls the artist shared a recovery room with at Walter Reed Hospital after having spine surgery at age sixteen—stories that have haunted her ever since.

Continued, next page

Spine Stories



NOTES

Joan Loren Gaustad is an artist living and working in Richmond, VA. She is the author of the visual memoir *Someone's Missing...and I Think It's Me* (VCU Libraries Publishing, 2021). The book tells the story of an artist couple as they try to navigate the mysteries and terrors of early onset dementia. *Someone's Missing* was nominated for the 2022 Library of Virginia nonfiction literary prize.

You Can Talk to *Me*

“I’d like to see some rubies, please,”
my mother tells
the saleswoman, tightly coiffed
and painted past her age.

Blue-shadowed eyes calculate,
skitter past my mother’s cane,
her ill-thin frame
then fasten hard on me.

“We have these.” The woman slides what glitters
in a velvet box my way. Nothing
for my mother,
her unmet gaze ablaze.

Joy of our excursion dims—
the search for her granddaughter’s gift.
Muzak too loud,
fluorescents unforgiving.

Listen to me (I want to say):
this woman almost died, she *did* die
on that table. Routine gone code red,
decades of minutes onyx black. Then coerced back

by doctors “miraculously”
while you sold your trinkets.
What you see?
The chit for living.

Darkness cost enough; this twilight can’t reduce her.
“I’m the customer,” she says, fingers
to the richness, burning to engrave her mark.
“You can talk to *me*.”

By Lisa Romano Licht*

* Author’s note, page 26

Miscarriage

By Paul Rousseau

A MEDICAL STUDENT IN A RURAL CLINIC

Central America, 1977

Elena sits perched on a gurney with claret-stained thighs. She has just miscarried in the clinic's lavatory. She inquires of the gender of the fetus, and hands twitching and heart flapping, I blurt, unexpectedly and duplicitously (for I could not know), "*Una bebita,*" A little girl.

A guttural sob rolls up from her belly. "*Quiero los restos de mi bebe,*" I want the remains of my baby. Beads of sweat wet my brow. I inform her I need to speak with the clinic physician. "*Quiero los restos de mi bebe,*" she implores.

I scurry through the halls searching for the physician; I am told he is in the countryside delivering a baby. I query a nurse. She wrings her hands, indecisive. She speaks with another nurse. Finally, she advises, "*Darle los restos,*" Give her the remains. I am dubious of her response, however, I am in an unfamiliar land, and uncertain of legalities

and customs.

"*Esta segura?*" Are you sure, I ask.

"*Estoy segura,*" I am sure, she responds.

So, I gather a dollop of fetal flesh, bundle it in gauze, slip it into a paper bag, and place it in Elena's hands, and as she murmurs, "*Maria, mi hija,*" Maria, my daughter, I cradle her shoulders and weep. ✧

Paul Rousseau is a semi-retired palliative care physician published in sundry journals and literary magazines, including Medical Literary Messenger. Lover of dogs, the desert, and mountains.

Melodrama of the Wolf Moon

*A full moon in the month of January
is a 'wolf moon' in early American tradition.*

—Wikipedia.org

Declaring that I want them back
earns me no mercy.
Extinct in these parts
a generation, their howls
haunt—a ringing in the ears.

So it is in our two-man pack,
when curses refuse to wash down the drain.
Each footstep sinks, a lurking mineshaft.
Each word slaps, a ready bruise.
And by night, hungry ghosts prowl,

their tin-hat terrors lashing down our bed:
The disease that swallowed your mother
opens its maw for us.
The noose that choked my father
flies—lariat from vanished hands.

Come morning,
I watch where I plant my feet
but forget the charm to ward off ghosts—
this is the rub of their blight: so quick
shifting flat-edge to daylight,

they suck the air clean out
of our world, till I fight to gasp,
Where have they spirited my dear boy?
Your heart drumming distant
from its cage of bone.

By Anesa Miller

Anesa Miller is a poet, essayist, and novelist with a background in Russian literature. She received an MFA in creative writing from the University of Idaho.

Burial

By Terry Dubow

Anna worries most about what her sons will think. Twins, they've never understood her, and in fact, when they were awful as teenagers, had taken pleasure in their cruelty toward her, not because they're cruel—they aren't, you should see what kind of fathers they've become—but because, when they were young, cruelty had been such fun for them, wrapped in their growing senses of humor, reinforced on every television show they watched, and, also, because Anna had done such a good job embodying the principle of unconditional love. They could hurt her with their jokes because they knew they had no consequence. Breakfast would still be served.

She worries they will make her feel silly and sentimental.

Besides them, she worries what her childhood friend Nancy might think, though she hasn't seen Nancy in twenty years. Too much wine. Too much history. Anna will bury that too.

Out in the half-dark, Hector, the farm hand, has already started the machines somewhere in the fields. Curtained by the early morning gray, his dog, a youngish calico mutt, no doubt is walking alongside the tractor that Hector rides on, its angry whirring sounds muffled but not as much as Anna hopes for. Up on the stair landing, Anna pulls the curtain back and looks out the window. Even when it is in shadows, she hates this sight and has hated it for almost a decade now. It is a moonscape without the grandeur, a farmland with-

out any sense of fecundity, a backdrop without a wedding. She also dislikes the dog though she can't quite explain why.

Her husband, Al, brought them here to this farm and then, six years in, clutched his chest while wrestling with a machine that the man at the used farm equipment repository in town had sold him. Anna didn't see Al's chest clutching and then collapse, but she often wonders what her first reaction would have been had she witnessed it, whether she would have run down the steps and out the front door screaming or whether she would have hesitated just a moment, just long enough to remember for the rest of her life, hesitated because she was just so angry, so goddamn angry, that he had brought them here, here, this place, so he could chase what he said was his life's ambition even though she'd never heard him say a single solitary word about farming. He didn't even much like walking. At the zoo, peacocks scared him. What would he do with hogs?

Now that he is gone, though, she protects his memory and her own memories by biting down on any vicious haunting. She tells herself and Theresa, who does her hair in town, that Al was an angel, quite literally an angel, the whisper she can now sense but not hear, the slant of uneven light pouring over the couch where he'd spent his evenings.

On the landing, she catches herself and wakes up from her thoughts. Nathaniel will be here in a few hours. She has a roast to baste and cook and his favorite potatoes to prepare. She

turns off the landing and heads down the stairs, her daughter's ashes still and unmoving in their unremarkable canister, which she carries, as she often does when alone in that house, in the largest pocket of her barn coat, the taupe one with the frayed sleeves and the ripped collar.

What is strangest to Anna, stranger than her solitude or how the sight of Hector the farm hand is the only thing that settles her anymore, what is stranger than all of that is how often she finds herself in a morass of similes. An aneurysm is like a stowaway alien tucked into brain tissue and blood vessels, ready to explode. It is like a mysterious sea creature, growing and growing in black water, growing undetected until the moment before it surfaces, the bulge of its spine breaking through the thin membrane separating ocean and air before the rest of it soars and crushes the aghast sailors below, gathered on the ship deck, hands shading their eyes, men with their mouths open, men who'd only heard of such loathsome creatures in legends spoken from barmaids and mad drunks teetering on stools. Or it is like one of those bot flies that Anna once saw on a documentary about adventure seekers in Panama or some other lost place, the kind of fly that lays its eggs under the skin of cows, horses, and even people. An aneurysm is just like that, Anna has decided, buried, burrowed, and silent until the precise moment it is ready to

Continued, next page

Continued from page 18

tear open its warm home and explode into a cloud of mindless, winged, dust-sized monsters.

Anna doesn't really know what an aneurysm is, and, sometimes, that devastates her. It isn't like cancer or heart disease or other horrors. It doesn't give you time to learn about it. By the time it is part of your vocabulary, it has already killed what you love. Who would spend time learning its history and genealogy after it has done its dark work?

In the kitchen over the glistening roast, she is thinking of the flies. Bot flies under skin. Fruit flies in the apple basket. Fly wings on the window sill. She looks up and out the window. The sky is a light and brilliantly so, a band of clouds lit from below, the color of tangerine here and pink lemonade there, set on fire from the rising sun. Her eyes flood immediately. She looks at the clock behind her. It is 6:32. Sunrise.

“Why not?” Maggie's face turned beastly when she was this angry, eyes sinking into their caves, forehead sloping forward. It always disrupted Anna's ability to speak when her daughter got this way.

“Because, Maggie, because—. You're better than that.”

“You don't know that.”

Anna tilted her head to the left, befuddled. “Of course I know that. You're my daughter.”

“I'm twenty-two. I'm not your daughter anymore. Not like that anyway. I exist outside of what you know. Of what you can know. I don't even know.”

In Anna's memory, Maggie had vanished then, poof, smoke into the air,

but of course it wasn't like that. Maggie had probably stormed off to her childhood room or made another cup of tea and sat with her superiority in the winter sunlight, the steam from her mug rising like mist from beneath her.

College was the worst invention to ever befall a family, Anna decided right at that moment. There was nothing like it in the life of a mother. College was a toxic current during their childhood when it was merely a prospect that swept up and drowned their vacations and required endless horseback riding lessons and fights about skipping debate practice, and then it became a Hollywood of sorts, bright lights and vapid promises of reward just beyond the horizon, and then it was just debt—debt to banks, debt as an engine for a father's obsessions, debt as a cracked mirror shining back a twenty-two-year-old's inadequacy. College was debt, and debt was a poison. College was debt, and debt was an aneurysm, lying in wait.

“I know who you are,” Anna remembers saying to her daughter though she can't recall whether Maggie was still in the kitchen or whether she'd disappeared again.

Anna never has been much for touching herself. It embarrasses her to do it, and it is worse to imagine herself doing. With Al, the feelings came eventually, sometimes gloriously, and it was enough. When married, it never occurred to her as necessary or even desired, and so she's never felt much of an interest on her own.

Washing the potatoes, round and coarse and obscene, she thinks of Nathaniel, Maggie's former fiancée, and a

sudden urge begins to warm her skin. She looks over her shoulder and finds no one. Out the window, she sees Hector on his tractor, doing whatever tractors do, and the dog jogging at its side.

She closes her eyes and lets the moment pass.

By the time the front doorbell rings, the smell of the roast's bubbling fat has turned the house into a holiday. She sucks in a deep breath, runs her finger along the ridge of the closed piano lid, as if there could be a particle of dust left uncollected in the house, and she swallows what small pittance of saliva is left in her mouth. She feels as nervous as a school girl or a patient before the diagnosis. Walking toward the front door, she can't decide which option better described her current state.

Maggie had met Nathaniel in college. Anna doesn't know how to finish that story though because, when she was alive, Maggie offered frustratingly few details. It could have been at a fraternity party, both of them bleary eyed and incoherent. It could have been in any one of the thousand art history courses that Maggie took to ensure her lack of employment—those were Al's words, not hers, but Anna had to agree though she could never say so out loud and certainly not to Maggie or Nathaniel.

Opening the door, Anna sees again how handsome Nathaniel is, tall and dressed like he'd just been rock climbing or splitting cords of wood. His hair, the color of wet bark, sweeps carelessly across his forehead. His eyes are set back in their caves, which have not grown dark yet, have not become

Continued, next page

Continued from page 19

signals of decay and exhaustion. Nathaniel's eyes make Anna, and she assumes Maggie, think of a future filled with life or a life filled with future. Anna hasn't yet decided which.

"Mrs. Harrow, oh my God. I'm so, so glad to see you." He steps toward her, and she finds herself swallowed in his arms. His chest is cold from the April air, the zipper of his fleece vest like a jagged shard of ice pushing into her cheek.

Anna pulls back. "I'm so glad you came all this way. It feels a little silly now."

He shakes his hard chin. "No, no. None of that." He places his hand on her shoulder and looks around the house. "These smells. They're some of my favorite memories."

"It's the roast."

A smile spreads across Nathaniel's face, and Anna returns the gesture, but a despair rises in her quickly. She worries that they are already done with things to talk about. The truth is they've never truly been alone, except when, on their visits home, Maggie was showering and he'd come into the kitchen to drink his coffee while Anna cut fruit or stirred brown sugar into the pancake batter.

Even after Al's funeral, when Maggie and Nathaniel stayed for three weeks because the twins were busy with their families and Maggie and Nathaniel were more or less unattached and underemployed, even then, Anna and Nathaniel hadn't been alone for more than twenty minutes, and now this—a long day, a burial, and a dinner with only the whirring of machines in the distance, machines that made Anna long for her

own grave or for an apartment with a doorman in a city she'd never been to, someplace European where her loneliness and abandonment might feel more natural, more like something someone might choose.

Outside, the spring feels like winter, the way it stings Anna's earlobes and nose. Her hands have been cracking for months, the air so dry and thin it acts like a thousand scalpels slicing trenches along her knuckles and palms. Anna finds these lines both fascinating and disturbing because they make her wonder if her skin is actually simply a series of bands that could be disassembled with enough cold and time. As she walks Nathaniel along the farm road, she keeps her stinging hands stuffed into the pockets of her barn coat. Her solitary silver ring bangs dully against the canister.

As they walk along in silence, the mud of the road occupies her mind and her eyes. It reminds her of shit, she's embarrassed to acknowledge, waves of curdled shit, endless pools of it filling with melting snow so that all the physical world will be only it, enveloped in or buried beneath the slick sheen of waste.

"Mrs. Harrow?"

Nathaniel's voice wakes her. She turns back and there he is, his skull now covered in his gray ski hat, but otherwise precisely the same as when he knocked on the door, hands in the pockets of his dark jeans.

"Yes?"

"How do you—I mean, what do you envision?"

"Envision?"

"I mean, do you want me to say something?"

"Oh," she says and wipes her nose with the back of her hand. "I haven't thought that far ahead."

"I'd like to say something."

She nods, and it occurs to her that she doesn't know if he has any kind of religion in him. She, herself, is a lapsed Unitarian if such a thing even exists. "Of course," she tells her daughter's former fiancé or her former daughter's fiancé. She hasn't yet decided which terminology is more accurate. She will choose soon, she decides.

On her fifth-grade report card: "Maggie confounds—and in a good way!" The neighbor man once called her "edible," which made Al knock on his door and tell him to stay the fuck away from his little girl. Al banged his fist so hard on the neighbor's door that the stained glass window shattered into shards of tangerine and aqua. In high school, Maggie started a student group called "SOFAH," an acronym for Students Organized for America's Homeless. One of the twins, Anna can't remember which one—not that it matters—one of them mocked Maggie so relentlessly about the name—"Is your club organizing to provide comfortable seating for America's homeless?"—that Maggie quit in protest and seemingly chose never to organize for anyone ever again, including Nathaniel.

But Nathaniel never seemed to mind, and that is what Anna wants to know about most. *How did you do it?* she wants to ask him over dinner if not over the grave. *How did you get her to love you?*

Continued, next page

The burial spot is nothing more than a patch of grass near a gnarled maple tree with a fever sore in its side that on a human would be a cause for alarm but on a tree is a cause for a poem. At least, that was the case for Maggie who, to the surprise of her mother, crafted and revised a poem about this tree, sliding the torn sheaf of paper upon which she wrote it inside her catastrophically disorganized desk drawer. Anna found it only afterward, when no one, not even Maggie's vapor soul, could keep her from stacking the desk's papers into orderly piles.

As far as Anna can tell, it is not a good poem, but she also knows that she has no place to judge. She worries that she simply isn't intelligent enough to understand its words or why her daughter had stopped a line in one place and kept it going in another. It makes no sense to her, but she also knows that sense making—or the lack of it—is a never-ending journey. If it were to end, what would be left for her to do?

But that is why Anna is burying Maggie here next to this tree. It had earned a poem, which indicated that it meant something to Maggie, and Anna had found that that burst of insight into her daughter was enough to build this plan around. She would bury her daughter next to a tree that meant something, even if, to Anna, the name of that meaning was unavailable.

The tree stands leafless and shivering at the far end of the farm, too far from the house to be seen, which is why it startles Anna every time she happens upon it on her long winding walks. Its blanket of leaves has cleared it from

“But that is why Anna is burying Maggie here next to this tree. It had earned a poem, which indicated that it meant something to Maggie, and Anna had found that that burst of insight into her daughter was enough to build this plan around.”

growth, and so, the evening before, it was no problem, no problem at all, for Anna to rake out a space and then push the tip of a spade into the soft earth, once, twice, three times, piling the dark dirt into a mound of slipping shards of soil.

Seeing it again, this time in the half-light of the dusk and with Nathaniel behind her, Anna feels sick, her stomach taut and tumbling. She wishes that she'd dug a proper grave, not a hole, so she could leap into it herself and ask Nathaniel to pile the cool, muddy earth on top of her. The spade is where she left it, leaning harmlessly like an amputated arm against the tree's trunk.

At Al's funeral, Anna sat on a folding chair in the front row like a widow, which she was, of course, but not in the way that the word was intended. With the twins on either side of her and Maggie at the end of the aisle and her grandchildren and daughters-in-law in the row behind her, she felt happier than she'd felt in years. Though she knew it was a dark thought, she wanted to thank Al for bringing the family back together. It was an act of tremendous generosity.

As the minister spoke, Anna fixed her eyes on the glinting metal bars holding the casket and then drew her eyes down the curtain and into the grave's black mouth. Without warning,

she began to convulse as she imagined the cold six feet down and Al's forever home, and her thoughts immediately and intractably turned not to her own involuntary future but to those of her children, which is when she told herself that she'd incinerate them, all of them, if it ever came to that, though it wouldn't, couldn't, ever come to that. *In what world*, she asked herself for comfort, *would it ever come to that?*

Anna realizes that she should have thought this through. She and Nathaniel stand next to each other above what she sees now is a remarkably modest hole in the ground. While she was digging it, the hole felt substantial, the blade turning over the earth like a machine wired and fueled for this precise purpose, the mound of dark earth growing at her feet. Now, though . . . Now, she sees that it is like so many other parts of her life, the chasm between the real and the invented cataclysmically wide.

Nathaniel's throat makes the unexpected and uncontained sound of a broken animal. Anna twists around to see him with his hands dug into the front pockets of his jeans, the denim rising and falling as he claws his thighs, his chin bowed so all she can see in the half-dark is the top of his hatted scalp

Continued, next page

Continued from page 21

bouncing as he weeps.

She moves toward him, places a hand on his quivering shoulder. She doesn't speak though. Since Maggie's death, no words spoken by another human being have ever amounted to anything, so she refrains from joining the mass of inarticulate mourners who mean so well but only add to the agony because of the safe distance their words make apparent, the safe distance between the afflicted and the witnesses.

"Can I hold her?" His voice is thin and high.

"What?"

"Can I hold her?"

Anna feels her mouth grow sour and dry. "Of course," she says, but feels a deep regret welling in her because she sees what she should have seen before, namely that Nathaniel is here not to simply observe her ceremony and perform a role that she has crafted in her mind. He's also here to share his own personal, private grief, one he has crafted and refined himself in his own dark rooms, his own polished stone of despair, the shadow side of the love that Anna could witness but not measure or mimic.

She knows she doesn't have a choice. With her thin fingers, she clutches the canister and pulls it out of her jacket pocket. Slowly, she hands Maggie over.

Anna is distracted. She is distracted and flustered at the moment when she aches to be present, present and absorbent. In the dream version of this moment, she has sensed Maggie's spirit, even felt her hands again, the warmth of her breath and then her release, but now, Anna feels emp-

ty and elsewhere and senses nothing. The night has grown dark, and the only light comes from the flaccid beam projected by Nathaniel's cell phone toward the canister sitting unsteady in the shallow hole, leaning just slightly to its side. Why they didn't bring a flashlight, she can't say. Why she didn't anticipate the night sky, she has no answer.

"Do you want to say something?" Nathaniel asks.

Anna looks up and follows the phone's light back to him. "I don't know what to say."

"Tell me something about her childhood, something I don't know."

She shifts her feet. "How much do you know?"

He smiles in a way that stings her, his top lip pursed and his bottom spreading to suggest that he knows more than she'd like him to but that he's happy to indulge her. Anna hesitates. She considers telling him about the clock, how, for years, she pictured a clock ticking off Maggie's hours, her childhood hours at first and then, to Anna's horror, her life's hours, this clock that Anna could hear so clearly and see only in a haze so that the numbers themselves, the most essential pieces of information, remained concealed even as their movement, their descending movement, blurred in her vision. She imagines telling Nathaniel this and how almost every night she had to hold herself back from sprinting to Maggie's room where she slept or did her homework or later where she hid and talked on the phone with her friend Samantha or later to Nathaniel himself—how she would hold herself back from bursting in just so she could just stare at her.

Or, Anna thinks, what about something more shocking, like how she and Al would sneak into the basement late at night so Maggie would be spared the sound of the floor creaking above her head?

The night's cold presses against Anna's cheeks, but she is suddenly filled with warmth from the embarrassment of realizing that this stranger-boy, this boy in a tight cap and ripped jeans, this boy held Maggie last, extracted more from her than Anna ever had.

She considers telling him about how she lied to Maggie when she was young, how she told her young daughter that the pet mouse had escaped when, in fact, Anna had taken it deep into the backyard and released it only to find it decapitated and disemboweled on the front porch the next morning, a gift from Jasper the cat.

Why, she wonders while staring at his waiting face, is there so little to say?

Behind them: the rising sound of a clattering engine. Anna twists her head over her shoulder and finds the hazy eyes of the tractor's headlights approaching. It's Hector, she knows it must be Hector, but it feels like someone else. Why else would someone intervene other than to save her, and who else would that be other than Al, the gauzy spirit of the husband she did not truly mourn?

She turns back to Nathaniel who shields his eyes as he looks into the tractor's bright beams. She is spared and relieved. "I have so much to say," she lies to Nathaniel over the grinding sound of the slow approaching machine.

Continued, next page

Continued from page 22

The noise is a lulling device. They both fall silent under its roar. And then, without ceremony, the tractor stops, and Hector leaps off and storms into the beams of the headlights and up to Anna and Nathaniel. She sees his flared nostrils before she notices his red eyes.

“You did this on purpose, didn’t ya?” Hector’s voice is ratcheted higher than Anna expects, higher like after he’s finished and before he’s found his clothes.

“Whoa, whoa,” Nathaniel steps in. He places his hands in the air, mid-chest.

Hector tilts his head in confusion and fury. Anna sees him in profile and imagines him again in war, on beaches storming machine gun nests, and wonders again what it feels like to arrive here on this farm, doing this menial work, living so meaninglessly, after all of that. “She killed my dog, buddy.”

Anna swallows. She did not kill the dog, but the accusation itself produces a wave of incriminating guilt inside her.

“She’s been with me all night,” Nathaniel says.

Hector turns. “You did it, didn’t you, Anna? Poured antifreeze in the water bowl. How cruel is that heart of yours?”

Stepping forward, Anna sets her hand on his elbow. “Stop, Hector. Just stop. I did nothing of the sort.”

“Well, he’s dead. He was a good dog. He was a great dog. Had the spirit of a child and the heart of a wolf. Why would you do such a thing?”

“I didn’t. Listen to me, Hector. I didn’t.” She lifts her hand to his face. He flinches and retracts, but then softens as she touches his tears. She does

not love this man. She does not love any man. But she does feel tenderness.

Nathaniel pauses for a moment and then returns Maggie’s ashes to Anna before stepping toward the tractor and disappearing into the yellow beams of the tractor’s headlights.

Anna turns back to the shallow grave. “There she is,” she says. Her voice’s flatness makes the statement sound more final than she intends, but hearing it and feeling it in her throat lifts her somehow, brings her a hum and a lightness in her chest, like early mornings used to when Al and Maggie and the boys were still asleep upstairs and her coffee warmed her palms and, outside her window, a boy threw papers onto porches, the stars above receding into their caves or simply moving on to the other side of the world, leaving her with the sun and the fading moon and the sense that, if frozen, this place would resemble what the prophets tell awaits her on the other side of the cold grave.

“We should do this now,” the voice behind her says.

Anna turns around again and sees Nathaniel, arms extended, holding the dog’s stilled body.

Hector and Nathaniel take turns with the shovel. The sound is a wrenching sound punctuated with the dull pings of metal hitting stone. Anna stands above them holding the canister in her hands. The dog is at her feet, sleeping, it seems, lit garishly by the tractor’s stark headlights.

No one speaks, which allows Anna to breathe. She feels something strange begin to emerge, something that, as the shovels do their terrible work, she rec-

ognizes as elation.

She can’t leave Maggie here, she decides.

She knows she must tell Nathaniel that and that she must move from here and leave Hector alone again, but she also knows not to say as much now, this moment when they are both laboring so hard, unpacking earth from the earth.

She turns around to look back at the house in the far distance, two of its top rooms lit like eyes. She wonders about the roast, and then she sees something puzzling. It is a figure approaching, cast in darkness, alight only by the thin, bouncing beam of a flashlight. It is not the ghost of her daughter—she knows that immediately—but she knows also that it is the ghost of something.

Soon, it is close enough for her to see that it is a man with a gait she remembers. She wonders, at first, if it is Al, but then sees that it is someone stranger.

“Nathaniel, did you tell the twins about tonight?”

A cleared throat from behind her: “I did.”

Her heart rises. One of the boys has decided to come. She thinks first of the dinner, how there will be enough, and then she closes her eyes before her son is close enough to her to identify himself as either one twin or the other. She doesn’t ever want to discover which one is here and which one is not. ✧

*Over the last years, Terry Dubow has published more than twenty-five stories, most recently in *Litro* (upcoming), *Clockhouse* (upcoming), *The New Ohio Review*, *The Sierra Nevada Review*, *Salamander*, and *Painted Bride Quarterly*. With four *Pushcart Prize* nominations in total and one *Special Mention*, Dubow’s novels are represented by Lisa Grubka at the *United Talent Agency*.*

Hippocrates and the Egyptian Building, MCV Campus



Photo by Curtis Sessler, MD

At certain times of the day, the sunlight reflects off of the adjacent Medical Sciences Building and produces an interesting starburst pattern on the pillars of the Egyptian Building on VCU's medical campus. By timing the photo and adjusting his position, the photographer was able to capture the starbursts on the columns at the level of Hippocrates's gaze.

Curtis N. Sessler, MD, is the Orhan Muren Distinguished Professor of Medicine and the Associate Chair for Faculty Development for the Department of Internal Medicine at VCU Health. Dr. Sessler is a member of the Division of Pulmonary and Critical Care Medicine.

Hypochondria

It was only two days
before my back released the pain to
ibuprofen, eaten greedily like M&Ms, but
not after I'd panicked, wondering
if that shoulder wing housed a burst appendix living in my back,
if I'd dislodged a lung,
if a tumor had set sail upon my torso, or
if a migrating heart attack waiting to pounce was
floating through my body.

It could have been
a new form of pertussis,
coughing out to the shoulder blades, or
maybe a kidney infection misplaced.
I had struck my head on the refrigerator
a few days prior—
perhaps this certain concussion
had manifested behind my ribs.

Had I eaten too much celery,
causing a toxic buildup
of pectin-based polysaccharides?
Maybe I'd broken a tooth or a tonsil,
one or the other now stuck in the
upper right quadrant of my back,
or I'd contracted giardia
from an untreated water source,
or I'd hatched a Bubonic plague-inspired goiter
that had yet to swell.
My conjunctivitis-eye view of reality
has been slightly skewed these days.

Had my body turned on me?
Was this revenge for
pushing too hard on strenuous hikes,
ignoring stress, or
giving people humorous nicknames?
Was it that unfortunate joke about the horse?
I am not particularly sorry.

Not once did I consider the possibility of
syphilis or typhus or chicken pox
but it seems wholly possible
that I'd suffered a muscle strain resulting
in a debilitating case of seborrheic dermatitis while
lifting a heavy mixer out of a tight-fitting box.

By Rebecca M. Ross

Rebecca M. Ross hails from Brooklyn but currently lives, hikes, and teaches in New York's Hudson Valley. Her writing has been published in Writing in a Woman's Voice, The Voices Project, Live Nude Poems, The Metaworker, Last Leaves, Uppagus, Whimsical Poet, Street-cake Magazine, The Westchester Review, Soul-Lit, and Peeking Cat. She has work forthcoming in the Dissent Anthology. Rebecca has a BFA in creative writing and an MA in English from Brooklyn College. She's a big fan of dad jokes and clever puns, and still wonders how to get to those weird places that she visits in her dreams.

In the Next Bed

My mother gurneyed away
for yet another test, and drained

I wait in a hard-chaired
corner, watching her roommate

She sits beyond the curtain's veil—too young
to wear that gray-green gown

Long, ebony hair shadows her face, shoulder tan line
a faded souvenir of light flown

Her husband sits, bulk-awkward, on her bed
his sneakers and jeans meant for the street

The lunch tray between them is plastic, like the drain growing
from the sheet and the thin, blue gloves

crumpled in a cardboard box, crooked
on the gray-green wall

His hand dwarfs a white plastic spoon,
feeds her Jell-O not quite red as the blood

they will draw again and again.
He lifts the spoon gently to her lips

as if he will feed her again and again
with this same delicate gesture as if she were a child

A promise more intimate
than bedroom whispers

By Lisa Romano Licht

Lisa Romano Licht's poetry and other work has appeared in Blue Heron Review, The Westchester Review, San Pedro River Review, Steam Ticket, Mom Egg Review, Ovunque Siamo, and elsewhere and was selected for The Year's Best Dog Stories 2021 and Vita Brevis Press' Nothing Divine Dies, both anthologies. She holds an MA in Writing from Manhattanville College and lives in Rockland County, NY, with her husband. Find her on Twitter: @LRLwrites

Lost and Found

By Nancy Glass

If I'm being honest with myself, I'll admit I lost my passion for my hospice work during the pandemic. I wasn't part of the traumatized workforce in the ERs or ICUs, not working seven days a week like so many. But safety precautions—double masks and face shields, gloves, endless cycles of hand sanitizing, six-foot separation from families, the advice against holding my babies, the recommendation to get in and get out of the homes as quickly as possible—all left me feeling disengaged. An endless series of frustrating discussions about vaccines contributed to the sense of futility. Adding to that, the pivot to virtual team meetings: faces lined up in tiles, or disembodied voices without faces, speaking through the ether. Avoiding the office, I knew little about what was happening behind the scenes. Disconnected.

If I'm being honest with myself, I'll admit I finally got comfortable staying home, lazy about making the effort to get out and see my patients beyond the required initial home visit. I spoke to nurses and parents over the phone, used FaceTime to see physical findings, and rationalized staying home as being not only a logical public health decision but also my contribution to reducing carbon emissions.

If I'm being honest with myself, I'll admit that finding my way back to my passion was not a sudden epiphany on my part—I was dragged back into the fray by obligation, the commitment to

teach our postgraduate fellow, Therese, about pediatric hospice medicine. Her enthusiasm and excitement for making home visits was contagious as I saw each encounter through her eyes.

If I'm being honest with myself, I'll admit I found my passion anew in a blue house on the east side of downtown.

My team was preparing to admit a chronically ill, very sick young woman in her early twenties to home hospice care after a long hospitalization. Her social situation created additional challenges. Her father Jose, widowed with eight children, my patient being the eldest, worked two jobs to feed his brood. He couldn't care for her. Her Aunt Carlota had told the hospital team she was prepared to care for Tatiana (Tati) in her home, but I hadn't met Carlota yet—I'd only heard about her from others. So Therese and I scheduled a visit on the morning of Tati's discharge from the hospital.

We drove to Carlota's home east of downtown, a mixed neighborhood of industrial businesses, small frame houses, and gated clusters of new townhomes, all within sight of gleaming skyscrapers. We found the house easily—a neatly painted bright blue frame house with white trim right next to an industrial plant ringed with concertina wire.

"If I'm being honest with myself, I'll admit I found my passion anew in a blue house on the east side of downtown."

A table and chairs in the small front yard hinted at family gatherings; a small rose bush planted on the fence line trumpeted its aspirations. We made our way to the wrought iron fence, opened the gate, and climbed a short flight of stairs to the front porch. I noticed a well-built wheelchair ramp off to the side and wondered if it was new. Even though it was nearly March, strings of Christmas lights were still dangling, outlining the roof and the porch, lending a festive appearance to the home. A bronze sign next to the door welcomed us to "Casa Familia Rosales." Carlota answered the door, inviting us inside, where she also introduced us to Tati's father Jose, who had requested several hours off from his job to meet me. I was touched by his gesture, not expecting to see him.

The front room of Carlota's house was wide open: living room, dining area, and kitchen all combined, painted a bright yellow, with a smooth wood laminate floor. My first thought was how accessible this home would be for Tati. Her hospital bed was ready for her arrival, set up against one wall opposite a large television. In the corner next to the TV was a shrine to Our Lady of Guadalupe, a vase of fresh flowers beside a statue of the Virgin

Continued, next page

wrapped in Christmas lights. Four doors punctuated the left side of the central room, concealing what I imagine were three bedrooms and a bathroom. A long dining table still covered with a Christmas tablecloth dominated the space between the living room and the kitchen.

We talked about Tati's long hospital stay, during which time the family had struggled to visit, depending instead on nightly FaceTime visits. We talked about the ups and downs of her illness, about how discouraged and withdrawn she had become, brightening only when Carlota mentioned that the team was working toward discharge. I learned that Carlota also cared for her elderly parents in the home, both of whom had major health issues, as well as her own twelve-year-old daughter, wheelchair-bound with special needs. Carlota was already well-versed in feeding pumps and oxygen treatment, confident she would be able to manage Tati's care.

I had to bring up the "tough subjects" even on this first visit, because I wasn't sure when I might see Jose again, still Tati's legal guardian. We talked about the family's hopes for her future, about what was important to them, about whether they would want to return to the hospital should her condition change, about whether they would want her to have cardiopulmonary resuscitation should she decline further. They both acknowledged hearing that her doctors could not reverse her failing organs. Jose became tearful during this discussion, and Carlota—his baby sister—comforted him with her arm

“She'd had a big weekend: her family had put on a long-postponed quinceañera for her. Everyone had come to celebrate—the women had prepared fifty dozen tamales for the party. Now two days later, Tati was no longer conscious, working harder to breathe.”

wrapped around his shoulder.

I might have imagined that Carlota would feel overwhelmed taking on responsibility for another family member, but she was thrilled about having Tati come stay with her. She had plans for family dinners, plans to take Tati out in her wheelchair or just sitting out on the porch to relax. She'd wheedled Tati into telling her what she wanted to eat and do when she got “home,” and Carlota had prepared everything to make her happy and comfortable.

“Tati is very excited about seeing her family again, so, so happy. There's just one thing I'm missing,” she said, sighing, “Tati wants a coloring book of angels, and I haven't been able to find one.”

Just then, during a lull in the conversation, we heard birds chirping, and Carlota pointed toward the kitchen—“they sing all the time,” she laughed. And there they were: in a cage on the kitchen counter, two blue parakeets, singing their hearts out. After talking about the family's plans for Tati's homecoming, their birds, and worrying with them about their two dogs who had escaped the previous night, Therese and I had such a warm feeling about this family, about the loving home in which Tati would spend her remaining days. We felt uplifted by Carlota's loving heart, her generous support for her brother in his time of

need, and her determination to make each day special for Tati.

We dropped by the next day to see how Tati's trip home had gone. When we arrived, she was just meeting her one-month-old niece for the first time. Tati's sister placed the baby in her arms, and both the baby and Tati smiled for pictures. Carlota and two other women were sitting at the dining room table making tortillas for supper, a fragrant meat sauce simmering on the stove.

Therese whispered to Carlota that she'd ordered two coloring books of angels and some colored pens for Tati, and that Amazon would deliver them later that afternoon.

My next visit, sadly, was just the following week, when it became clear Tati was dying. She'd had a big weekend: her family had put on a long-postponed quinceañera for her. Everyone had come to celebrate—the women had prepared fifty dozen tamales for the party. Now two days later, Tati was no longer conscious, working harder to breathe. When I arrived, folding chairs borrowed from their church for the party were still stacked against the wall. Tati's long puffy pink dress, a vision in tulle and sequins, hung on the utility room door. Working with her nurse, I eased her breathing with medication.

Continued, next page

She died within the next hour, her aunt and father holding her hands.

And as hard as it was to witness the family's grief over the next few hours—at one point there were thirty-seven family members in the home—I was touched by their love and grateful we had been able to get Tati out of the hospital, even for this one celebratory week. I felt that our team had made a difference for this family. I was reminded, once again, of the key element of reciprocity in our relationships with families and coworkers—the flow of energy goes both ways. The patient and family need us just as we need the opportunity to serve them as best we can. Similarly, in working with trainees at every level, the physician needs the learner's enthusiasm and fresh eyes to be reminded of the privilege of caring for others. Our patients, families, and trainees help us focus our attention on what's important.

If I'm being honest with myself, I'll admit I found—once again—the passion for this sacred work caring for those on the precipice of life's end, in the blue house on the edge of downtown. ✧

Dr. Nancy Glass has been published in Intima: A Journal of Narrative Medicine, in The Journal of Narrative Visions, in Medicine and Meaning, and in Amaranth. She won the 2022 Writer's League of Texas Manuscript Contest in General Nonfiction. After forty years practicing pediatric critical care, anesthesiology and pain medicine, and pediatric hospice care, she retired from clinical practice as Distinguished Emeritus Professor of Pediatrics in 2022. She received her MFA in Writing from the Vermont College of Fine Arts in January 2023.

Touching Distance

Allodynia
The touch of water burns
Labyrinthitis
(It) spins & wobbles
I have to be clean
I cannot be clean
Eczema / Allodynia
I must stand up
I cannot stand up
I must stand up slowly
(‘You will not fall’—in A&E—
She holds me)
Checklists
Cathexis

By Stephen C. Middleton

Stephen C. Middleton is a writer working in London, England. He has had five books published, including A Brave Light (Stride, 1999) and Worlds of Pain / Shades of Grace (Poetry Salzburg, 1996). He has been in several anthologies, including Paging Doctor Jazz (Shoestring, 2004) and From Hepworth's Garden Out (Shearsman, 2010). For several years he was editor of Ostinato, a magazine of jazz and jazz-related poetry, and The Tenormen Press. He has been in many magazines worldwide. He is currently working on projects (prose and poetry) relating to jazz, blues, politics, outsider (folk) art, mountain environments, and long-term illness. Note: A&E is UK-speak for ER.

Parkinson's Sequence

1.

Complex and welcoming,
your beautiful hazel eyes
have not yet begun to take on
the sheen of glass

You look up from your plate
to meet me, and we share one more normal dinner,
questions and stories about our day
as a cello purrs in the background
and the pear candle on the table glows low and bright

Neither of us used to know
that normal is precious

2.

The disease is the one with resilience
We are the ones with our wind knocked out
only beginning to fathom
how to live with an inequality

3.

Four years later, it is 6:15 a.m.,
in that lovely moment between
setting the mug on the table by my bedside
and taking the first sip of tea

that moment before my mind begins
to wander in replenishment
through the boundless grey fields of dawn
before gathering in for the day

in that sacred moment
you stir beside me, and
comings and goings become
an affair of wheelchairs

and gait belts and transfers
The bit tastes metallic
as I aim the big wheels
toward the bedroom door

Hours later, I remember something
You told me once, I think in bed,
the purpose of life is delight
and I think *yes yes*
and how delightful that you said it

By Judith Yarnall

Judith Yarnall lives by Lake Champlain in Burlington, Vermont. She's a writer, teacher, caregiver, and mother who has published poems and essays in several literary journals, as well as two books from university presses. Her thanks go out to Dr. Robert Hammill and to Sara McMahon and the Parkinson's dance community in Burlington. They made Parkinson's, occasionally, fun!



Photo courtesy of Peter M. Mellette

In 1950, while a medical resident caring for cancer patients at St. Barnabas Hospital in New York, Dr. Susan Mellette developed a passion for medical oncology. That same year, she enrolled in a creative writing course at Columbia University, taught by William Kunstler, and another passion was reignited—a commitment to writing. She would spend the next fifty years integrating the two, finding the medical humanities a powerful tool for engaging with the personally challenging and emotionally demanding aspects of her forty years of work as a clinician at the Medical College of Virginia. The poem featured is from her collection, *Fighting Cancer One Patient at a Time*, published in 2014.

Final Word to F. B.

Address: The Elysian Fields

March 12, 1970

It was not even brass of which those bullets were composed
Those drugs intended to control disease
Instead of gold, they proved to be but lint
Those futile, feeble weapons left no trace . . .
And you are gone.
Those brave shrill words I spoke—and wrote
Those self-exalting claims . . .
They ring like wind-chimes in my ears
Like crushing wads of paper in one's hands.
'Twas there the sounding brass—the tinkling tin.
I meant them well. I ventured—but I failed—
I even failed to justify the claims I made . . .
So little respite was there in the sure advance
Of those wild cells we cannot yet control.
What secret lies submerged—unfathomed—far below
Our poor ability to comprehend?
So on . . . and on . . . and on . . . we muddle as we may
It is not wish nor will nor even sacrifice
Which makes us fail—
No lack of any one of these pertains.
It is our ignorance—our bleak stupidity
How long? How long? How long?
This soul-defeating maze?

By Susan J. Mellette, MD

Republished from *Fighting Cancer One Patient at a Time: The Poems of Dr. Susan J. Mellette* (2014) by permission of the author's children, Peter Mellette, and Susan Mellette Lederhouse.

ABOUT THE COVER ART



"You Bring to this World Things No One Else Can," mural by artist Laura Marr

Created for the Virginia Treatment Center for Children, this mural is located in the teen counseling room. It's a scene of a young man by the James River, finding hope in the future. The VTCC Mural Project, led by P. Muzi Branch of VCU Health Arts in Healthcare, commissioned a series of murals by well-known local artists, including Marr.

Marr holds a BFA in graphic design and illustration from Baylor University, with post-graduate study at the Santa Reparata School of Art in Florence, Italy. Her perfect day includes an adventure with her Scottish husband, Andy, a sketchbook, and a latté. You can see more of Marr's work on Instagram, @flourishrva.