In these strange and trying times, so many have turned to the arts for reflection, resilience, and comfort. Many of us here at the Medical Literary Messenger are busy on the front lines in the fight against the pandemic, including our editor, Dr. Gonzalo Bearman, who is serving as a leader at our institution and in our state.

After missing our Spring issue, what a comfort it is to return with this Fall/Winter edition. Please allow yourself some moments of familiar reflection in these stories of personal or family illness. We are grateful to our authors and readers for giving us the joy of curating this issue in a time when joy sometimes escapes us. Thank you!

Megan Lemay, MD | Associate Editor

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SUBMISSIONS: The Medical Literary Messenger encourages submissions from the VCU Community and from authors outside the organization • All submissions should be made electronically through our online submission page, www.med-lit.vcu.edu/submissions.html • Submissions may be printed anonymously at the author’s request • The Medical Literary Messenger does not provide payment for works published in the journal • Copyright reverts to the author upon publication • The observations and opinions expressed by the contributors to Medical Literary Messenger are not necessarily those of the editorial board nor Virginia Commonwealth University School of Medicine • Submissions for spring are accepted December to mid-March; submissions for fall from June to mid-August.
Mom doesn’t remember she loves Earl Grey tea. 
Prefers it. Plain. 
God forbid milk. 
No sugar. No lemon.

For all she knows, Earl Grey is a fine gentleman 
riding from his castle in the English countryside, 
galloping on his well-groomed steed. He halts 
by the rocky brook to adjust his fine felt hat.

Maybe she mistakes Earl Grey for her runaway 
sixth-grader, the student who threatened 
at P.S. 60—to kill himself. Found by NYC police 
on the 59th St. Bridge. Said he hated reading.

Not Mom’s great-uncle. Rare to find a Jewish man, 
so-named, who escapes pogroms, sails penniless 
to Ellis Island. Leaves a hell-hole shtetl in Lithuania.

She’s ninety-four. I stoke the blinding furnace 
of her runaway locomotive with reminders. 

*But Mom, you love Earl Grey, your favorite!*

*Really? I do? If you say so.*

The copper kettle shrieks. She inhabits quiet. 
I pour steaming tea and fill our porcelain cups 
with disbelief. Kitchen table. We sit before 
a plate of scones. Eat. Mom smiles. We steep.

*By Sandra Dreis*
I shut the shower off with my toes for the better part of that year. They were the hands I never knew I had. Shirts off the floor, the remote off the coffee table, the razor I dropped in the shower that I only used to shave the tiny stubble that grew under my arms. My toes had evolved into stubby claw machine grabbers, and with a well-aimed clench and the bend of my knee, each of life’s subtle prizes could be mine.

But in the year before picking things up and putting them down became my own personal arcade game, my dad and I had another kind of game to keep me upright. “Five dollars for every night you wear that contraption like you’re supposed to.” He’s a gambling man, and that’s probably what it would’ve taken to get him to sleep in a Plaster of Paris brace until his spine straightened out, too. Money could make anyone do anything, well, almost anything. I’m guessing that’s where he got the idea. And he was a man of his word, so the cardboard box at the foot of my bed filled up with crumpled five’s like he’d promised it would, and I tightened the straps of my brace until I could barely breathe.

And no, I don’t know what an eleven-year-old was supposed to do with all that hard cash either. At first, it was like killing every game of Monopoly with Boardwalk and Park Place to boot. But after a while, it didn’t even matter anymore. You’d think having my choice of ninety-nine cent iPod touch apps and Hollister sweatshirts doused in perfume would’ve improved my mood, but Benjamin Franklin himself could’ve been staring back up at me from my box and I still would’ve cried over the fact that I couldn’t sleep on my side anymore without being impaled by the baby blue mold of my ribcage. Doodle-Jump and Minecraft had lost their luster; after a while, my fives just stayed in the box. They couldn’t get me anything I wanted—that would’ve required wanting something to begin with, and I think my dad knew that, too.

I offered to give him back the couple hundred in small bills I’d slowly accumulated to help pay for the surgery once we knew for sure that I needed it, but my mom would’ve sold her right arm before she let that happen. When she’d asked what went wrong at a checkup that should’ve been nothing more than a Do I have to keep wearing this? the doctor blamed my favorite spot on the couch. It was my dad’s spot before it was mine, to be fair. And I should’ve just let him have it. But I insisted on wedging myself between his six-four body and the worn leather arm; it was just more comfortable like that.

“You shouldn’t let her slump over like that,” the doctor said to my mom like I wasn’t in the room. She began to cry and then asked if I’d be able to have sex when I was older. She didn’t want me to miss out on The Best Parts of Life, she explained through helplessness and snot and my half-opened mouth. My mom told me that they all had terrible bedside manner, wiping away my own tears now—but I was just crying because the only thing more mortifying than that question was the look on the doctor’s face when she said “as long as it’s not too violent or doesn’t involve horseback riding.” I didn’t realize what she meant by bedside manner until a lot later.

I didn’t realize how deep in the shit I was either, not officially at least, not until art class. Most days, art was done sitting in a chair, but for some reason, all of grade six was tracing themselves on extra-long parchment paper; lying awkwardly on the cold linoleum floor with their hands at their sides or in silly poses, girls with their legs clasped tightly together to keep their khaki uniform skirts from flapping up. “What do you mean it hurts to lie flat on the floor?” some girl with tissue boobs and eyeliner already winged and perfect had asked me. “I don’t know, it just does.” So my body trace came out half-assed and squiggly because the maximum amount of time I could lie flat on my back without pain wasn’t long enough for Becca to be able to capture my true essence and eleven-year-old curves that were too high to be my hips.

“I’m pretty sure one of the nurse’s assistants said something cryptic and stupid like that. And I felt my face get red-hot and pathetic like it always did no matter how many times I’d embarrassed myself in this doctor’s office.”
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“Well, there’s nothing else left to do now but wait.” I’m pretty sure one of the nurse’s assistants said something cryptic and stupid like that. And I felt my face get red-hot and pathetic like it always did no matter how many times I’d embarrassed myself in this doctor’s office. And no matter how many times I swore to never let it happen again, it always did. They were all the same person, anyways. Every in-and-out nurse, they all said the same things, and I wanted to punch them all in their straight-backed faces. My mom had told me to cut the attitude once (before we had both started regularly crying at these appointments). “Because these people are trying to help you—not hurt you.” And it’s not that I didn’t believe her, it’s just that it didn’t really matter what I believed. The date had already been scheduled, with or without my go-ahead. For the sake of my future. If there was ever a time to act like a crooked (in every sense of the word) little asshole, it was now.

So, up until August fifteenth, I was basically untouchable. Despite the fact that once I was fully healed the only thing I wouldn’t be able to do was horseback ride—and lucky for me, I was no equestrian. But with the way I took it, you’d think I was a proper horse girl—boots and all. Given that I wasn’t much looking forward to having sex, seeing as I could barely stand the sight of myself without a shirt on, all jutted out ribs and left-leaning. The point of my tiny, prepubescent life had evolved from doing everything in my power to preserve my spine at its current curvature into absolutely fuck it.

And I loved every single second of my futile rebellion, even though every day felt like a doomsday clock countdown ticking ominously in the back of every room I was in. But I put the brace in the trash and I listened to Nirvana and I sat on the left side of the couch and I double dog dared someone to tell me to move. I loved the way my school uniform felt on my bare skin. After all those months with two extra layers in between, I’d found a breeze in the spitty mouth of south Florida I never knew existed.

What month was it at this point? I’m not really sure, honestly. They stopped meaning anything after a while. Sometime during camp, maybe? My school had given me permission to miss the first month, and with the surgery being scheduled for the middle of August, camp was my last hoorah before being bedridden till my birthday. I flew on the trapeze until the skin on my hands peeled back in long gummy strips. I pissed on the rips in the show and I put fire too close to my face and stayed out past the curfew that was assigned to my “intermediate girl” age group and got senior staff members to drive me around in their golf carts even though I could walk just fine. I lifted up my shirt for everyone who asked—not like that, I was eleven, Jesus, calm down. For anyone who wanted to see the way my spine had contorted into the letter C, obviously.

Counselors and campers alike would trace their fingers along my naked back, like the games my mom and I played before bed as a kid when I couldn’t sleep. “Does it hurt?” they’d ask, with good intentions, I’m sure. “No, not really, only a little twinge in my brain when people ask me stupid questions.” No one could say the right thing. Walking on eggshells with bare feet was probably easier to navigate than talking to me at that age. I was praying every night for a reason to let someone know how angry I was without having to actually tell them why. And let me tell you, God and I’s relationship had never been stronger. Every day was a new opportunity to practice being thirteen, because I sure as hell couldn’t picture getting to twenty.

And you know the only thing I hated more than people constantly touching me like I was an interactive scoliosis exhibit? No one touching me ever again. Because that’s what happened after the surgery. People were afraid to hug me, like they might snap me in half if they loved me too hard. Granted, I’d just been stitched back up, so it probably wasn’t in my best interest to be loved all that hard, I suppose. And between my Poppy’s big belly and his ginormous stature, the angle of his hugs had me biting my lip to keep from letting him know how bad they hurt. But what I wouldn’t give for one of those hugs now. I’d have let him crush me to pieces to feel how much he loved me.

I was starting to believe they’d put titanium bars around my heart instead

“If there was ever a time to act like a crooked (in every sense of the word) little asshole, it was now.”

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of my spine. I couldn’t stop feeling my bare chest against the starch of the hospital gown, the way my veins felt like 7-Eleven Slurpee when they’d put more morphine through the IV. The taste of it in my mouth, and the way my wrists and arms and ankle skin looked after they’d taken all the IV’s back out again. The way pissing felt without a catheter was kind of nice, though. I did miss that.

There’s no nice way to remember most of these things. There’s no nice way to say that the doctor stuck a pill up my ass as I waited for her not to. There’s no nice way to realize that most of the things I remember from those nights in the hospital might not have actually happened. Like my mom who never yells getting fed up fast with me not being able to get comfortable. That didn’t actually happen, though, but we didn’t talk about it until years after. That was just the morphine. Who knows about the pill up the butt. That was one hell of a fever dream if that’s all it actually was.

Once when my mom had left my hospital room (which was never a whole lot) and it was just me and my dad, I stood up (which I never did a whole lot, either, having just started to be able to walk on my own again) to go to the bathroom, and as I made it the seven feet (shuffling and messy shlep-stepping) over to the part of the room with the toilet, I felt like I was going to throw up and pass out all at once. Which was extra frightening because I wasn’t about to call my dad into the bathroom to help me. All the spit in my mouth gushed up around my tongue and I started to shiver but not from the IV in my arm and I started to think about where I should stand in order to not crack my head open on the porcelain when all eighty-something pounds of me went down. But it didn’t happen. I just peed and stood back up and my thighs wobbled and I flushed and that was the end of it. But I would’ve called my dad in, I was that kind of help-me desperate.

When my uniform shirt had switched from middle school navy to high school white-with-red-and-blue-stripes and my life was “perfect in high school” and my teeth and my back and the arches in my feet were corrected and I finally got contacts etc. etc. That’s when I’d be happy. That’s what I was reminded of when I considered the alternative of my internal organs being pressed together by my sideways-growing bones. It was a waiting game and I had less patience than my back doctor—who, as it so happened, was conveniently on a Caribbean cruise the week I was supposed to get cleared for activity again.

After I left the hospital, the weeks went by the way they had after I’d just been born. My parents drove me home afraid. And my mom spoon fed me waffles and strawberries afraid. And my dad didn’t know what to do with me, afraid. And my grandparents came over but I fell asleep halfway through when dinner was supposed to be because sleeping was the only time when things didn’t hurt a whole lot. I could still only lie on my back, but as it turns out, Morphine now comes in take-home pills and lucky for me, I qualified.

So, the year I shut the shower off with my toes was also the year I wore sports-bra bands around my ribcage because they never quite evened out the way doc said they would. I can still stick my hands all the way underneath them. That was the year I woke up early in the mornings to watch the news with my parents because it felt good to know other people were hurting, everywhere all the time. That was the year I got to know them, my parents, and the people they were. That was the year I realized I was lucky, both to have this opportunity and to have it go really, really well. Not a screw out of place. That was the year Ms. Houghton taught me how to teach Tae Kwon Do while I couldn’t fight. That was the year she started calling me Coat Rack, and I swear it was a term of endearment.

I still have pictures from that morning in the hospital, of my dad making bulge-eyed squinty faces next to the stuffed dragon he got me that was bigger than I was. I saw cancer kids that morning, with contraptions hooked up to their pasty mouths to help them breath the waiting room air that I was blowing through like a chain smoker. And I cried and cried and felt thankful and bad all at once as I counted back from ten. For a while I felt like they’d wasted the titanium. I took morphine coated naps and felt the kind of twelve-year-old sad that thought the left side of the couch would be better off without me sitting in it. But my parents never did tell me to move, and I couldn’t bear to see it empty. So that was the year I grew four inches taller with my eyes shut, the year I straightened out.

Rachel Weinberg is a creative writing major going into her senior year at Florida State University. She loves poetry, short fiction, and creative nonfiction. When she isn’t writing, she’s flying on the trapeze or thinking about summer camp.
The Next Generation

This was painted while on my OB/GYN rotation after witnessing a C-section for the first time. I reflected on how I was born via C-section, and now, as an adult completing my medical training, I was assisting in another C-section. This prompted me to think about the generative nature of obstetrics as a specialty and how it affects the entry of every person into the world. To illustrate this, I painted a picture of a C-section, where the three arms of those participating in the procedure are each emerging from an abdomen that has been prepped and draped for surgery. Additionally, the emerging infant is wearing a surgical glove, signifying the infant’s potential to continue this cycle in the future.
The Clamp

One day a pump clamp slid and down it went,
Herceptin spilling on the floor. You wept,
convinced it was your fault, though innocent.
The pharmacy made up the dose; you kept
on schedule though a sad recipient.
The incident just pointed out how mad
Arrangements are: One part goes bad, we're spent,
become dependent, stripped of what we had.
The clamp, a wayward cell, some trivial
unraveling that skewed a chromosome,
meant mutiny set loose. That poured the gall
in it: rebellion was your second home.
A merely stupid slip, or blow struck well:
except in selfish terms, how could one tell?

By Dan Campion

A contributor to previous issues of the Medical Literary Messenger, Dan Campion is the author of Peter De Vries and Surrealism, coeditor of Walt Whitman: The Measure of His Song, and contributor of poetry to Light, Poetry, Rolling Stone, and many other magazines. A native of Chicago with degrees from the University of Chicago (AB), the University of Illinois at Chicago (MA), and the University of Iowa (PhD), he works as a writer and editor in Iowa City, Iowa. A selection of his poems titled The Mirror Test will be published by MadHat Press in February 2022.
Answering Machines

A stocky, 40-ish woman marches into the office, fists clenched, jaw set, eyes narrowed. Barbara Sergeant, belligerent as usual, has arrived for her weekly therapy session.

She doesn’t acknowledge the gray-haired woman who opens the door. She doesn’t have to be polite to her therapist if she doesn’t feel like it. And usually, she doesn’t.

The two women take their accustomed seats. The therapist waits.

Barbara packs her opening remark with contempt and hurls it. “Why do you still have that stupid answering machine? You're such a Luddite!”

The therapist side-steps the missile and waits for more.

Barbara tries again, more forcefully this time. “I hate your answering machine!”

“Then why be one?” asks the therapist.

“Huh?” Barbara is momentarily confused. This was not what she expected to hear. But then, she rarely hears what she expects during these sessions.

“I said, ‘Why be one?’”

By now, Barbara is ready with a fresh blast. “Bullshit! Is that supposed to make sense?”

Calmly, the therapist explains. “An answering machine has a taped message; it plays automatically and is always the same, no matter whom the call is from or what it’s about and—”

Barbara cuts in. “What in hell has that got to do with me?”

“So sometimes, like today,” the therapist continues, “I feel like I’m talking to an answering machine. If I say, ‘Hello,’ the machine says, ‘I’m mad!’ If I say, ‘How was your week?’ the machine says, ‘I’m mad!’ The words change, of course, but the message remains the same.

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“Bullshit! I have good reason to be mad.” Barbara switches from offense to defense: “I called you yesterday because I really needed to talk and all I got was your damn tape. And now, all I get is a damn lecture.”

“So the signal—the ‘good reason’—that turned on your tape was that you didn’t get what you wanted from me?”

Barbara pouts like an indignant child. “Well, I didn’t.”

“And what about that got you mad? Did you feel abandoned?… hurt?… scared?… It’s hard to tell when your machine is on.”

Something is changing. Both women feel it.

After a long sulky silence, Barbara sighs. “Damn this therapy thing is hard.” She sounds vulnerable now. “You just won’t let me be the way I am.”

“Well hello,” the therapist brightens. “I think your machine just switched off.”

By Janet Amalia Weinberg

Janet Amalia Weinberg is a former clinical psychologist. She edited an anthology designed to offer positive views of aging (Still Going Strong; Memoirs, Stories, and Poems About Great Older Women) and has co-led a conscious aging group. Her stories and articles have appeared in Changing Aging, Room, Long Island Woman, Crack the Spine, Psychology Tomorrow, Weave, and elsewhere.
Gastroenterology

Love is in your colon.
You say heartache but it’s not
your heart, it’s your ascending
and descending colon
absorbing the ups and downs
of your life and all your loves—
the highs pole-vaulting over
your transverse colon,
the deep despairs aching
all the way down to your
rectum. Your colon is you!
And your happiness is
many billions of bacteria
coating your colon and its contents,
living in a healthy balance. Your sadness
is a spastic colon. The intense
feelings your large and small intestines
send up to your brain are
mistranslated as spiritual, heartfelt,
heartbreak, dispirited. Even
stomach ache is a misnomer: It’s all
referred pain and referred joy
from your colon. The referral says
you have a family history. Please
turn on your side and lift your knees.
Let’s have a look inside, shall we?

By Paul Hostovsky

Paul Hostovsky’s newest book is DEAF&BLIND (Main Street Rag, 2020). His poems have won a Pushcart Prize, two Best of the Net awards, the FutureCycle Poetry Book Prize, and have been featured on Poetry Daily, Verse Daily, and The Writer’s Almanac. He makes his living in Boston as a sign language interpreter. Visit his website at www.paulhostovsky.com.
Change of Heart. COVID-19

By Michael Cannistraci

I am listening to my heart beating, pounding rhythmically like a metronome. My breath fills my lungs: in through my nose, out through my mouth. There was a time when I couldn’t breathe. The cold penetrates my skin, chilling me despite layers of wool and flannel. It was a mild winter in the East but a chilly spring. I look at skeletal trees, branches stretched out to heaven as if in prayer. Just then a bright red cardinal lands on the bush. Its color is almost alarming, stopping my breath for a moment. It stares at me, takes me in briefly, then flies away, disappearing into thin air like a magic trick. Even the birds are practicing social distancing.

I am one of the fortunate ones. I work as a clinical social worker with Medicaid patients and am considered an essential health worker. I have a job and I can perform it remotely, but this was a long week. A call from a woman in her sixties with stomach cancer, asking what she should do now that they can no longer give her chemotherapy in the hospital and she must take medications to treat the malignancy in her body. A heroin addict discharged out of rehab to make room for medical beds. The calls from others with anxiety disorder, more anxious now that they can't refill their meds. There are no simple solutions.

I watch on television the emergency rooms and hospitals flooded with patients, the chaos of managing too many sick with too few nurses and doctors. The dread and creeping fear of being alone in an emergency room and not knowing your fate. I know that fear.

The calls began coming this week, first from my sister and friends, each leaving the same message. “It’s been one year this week. How are you holding up, how are you feeling?” Twelve months ago, a lifetime it seems. I was in an emergency room and glimpsed death. As terrifying as my experience was, I am filled with a sense of how blessed I am. I was lucky.

One year ago, I was hurtling across town with my Russian cab driver. My left arm was numb, and my hand was as cold as an ice cube. It was 1 a.m.; uptown, the streets were dark and empty. The 96th Street Transverse was closed, the 86th Street Transverse was closed. When I told the cab driver I was going to die in his cab, he cursed in perfect English and drove 100 miles an hour, crossing at 79th and barreling up Madison Avenue to the ER, the luxury stores a blur of light and concrete. We arrived at the emergency room. So far, so good. Well, sort of.

I was placed in a wheelchair straight from the taxi, then an attendant wheeled me up to a nurse at the entrance of the emergency room. I had told my wife to stay in bed, to sleep. I never imagined that I couldn't handle a little thing like my arm going numb by myself. The nurse took my vitals. I was lifted onto a gurney and wheeled into the ER, placed in the middle of a large room filled with patients and nurses working rapidly with a detached sense of urgency. There were patients laid out along the walls, like a line for a car wash—an older woman bled from a head wound, a grizzled man in pajamas sat in a wheelchair patiently holding his hand wrapped in a bloodstained white towel.

The patients stared distractedly at their surroundings. They were all shapes and sizes—all races, each speaking in their native tongue, a United Nations of the sick and injured. I looked at them and I had the queasy feeling that they had been here for a while. I wondered how long before someone would treat me. I raised my head from the gurney, tried to make eye contact, to speak to one of the nurses. No one saw me. At that moment, I felt so isolated, afraid and unsure of what was happening in my body, but I had the sense that someone would come, that I was not completely in pain with no one to care for me. I wonder how patients in hospitals feel right now, in emergency rooms far more overrun than the one I was in a year ago. Are they lonely, filled with a clinging, sick fear? I imagine the medical staff filling those emergency rooms, pushing forward against a deluge of desperately ill patients, outnumbered, and running out of time. And knowing that more are coming.

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In that ER a year ago, everything moved so quickly, while I lay still on the gurney, trapped in my own thoughts. The room smelled like Pine-Sol and was tinted blue from the fluorescent lights. I was surrounded by a disorienting array of sounds: people speaking in Spanish, English, and Chinese; patients moaning; the sound of someone retching or yelling for ice cubes. Lying flat on the gurney in the middle of the room, I tried to get a passing nurse to stop. It felt like a dream, like being gagged and tied to a rolling altar in the middle of a riot, anarchy and controlled chaos surrounding me. I started to regret telling Ann not to come with me to the hospital. I had that option and now others don’t; deprived of having a loved one close, to hold a hand, to say something kind, to soothe with love. Even someone to be present when death comes.

Ann arrived at around six in the morning. She looked like she hadn’t slept much. I breathed a little easier with her quiet presence near me. She took control, her years as a school principal kicking into overdrive. She tried to bring order to the chaos. She asked the nurses and doctors for any kind of clear diagnosis, and they responded vaguely, “we are exploring this, we are looking at that.” No definitive answers, no medical insight to guide the way.

Time wore on. My blood was repeatedly drawn from me. I had a chest x-ray while on the gurney. I was taken for an EKG then more blood was drawn. I didn’t have the same nurse twice and no one seemed to know what the last nurse had done. There were no answers to my increasing pain and worried questions. Looking back now, I feel grateful that I could even find someone to ask. How many nurses right now can take the time to speak to each patient, to calm their fears?

Suddenly, I was rushed into a room filled with men and women in their thirties in white lab coats, like a cast from a medical TV show. A doctor came forward, looked at me disapprovingly, and told me I had torn my aorta in three places and I had two options: A: I could have cardiac surgery immediately, or B: I could die in a couple of hours. I chose option A.

The sensation was like floating up from the bottom of a deep lake. I was aware only of blackness, then gradually gray light came through my senses. I woke to find myself alive but trapped in the body of a stranger. I couldn’t stand by myself. I could barely lift my head to make eye contact. I couldn’t breathe without a tube. How to describe it? That feeling of your body unable to take in breath, the encaging anxiety as your lungs only take in staccato bursts of air. A gasp more than a sigh. My heart, that symbol of true love, now a venal miser, giving me oxygen only in droplets, like a rusty faucet in an abandoned house. I wonder what those on respirators now feel, gulping small bites of air.

Healing began slowly. On the third day in the ICU I was told I needed to stand and walk. Two male nurses held me up, one on either side. I began to march/shuffle in place and felt like I was carrying a refrigerator up a flight of stairs. On the fourth day, a nurse made me get out of bed and sit for an hour. It was torture. I gasped for air, my body tensed in pain. The road to recovery began to feel awfully long. I had the gift of seeing my wife every day, although evenings were desolate. I would remember how we would reach out across our bed at home to hold hands as we fell asleep. There is something gray and lonely about the solitude of a hospital room—the sound of monitors and the hushed voices of nurses your only companions in the dark.

I lay there in my room remembering the person I had been and contemplating the person I would become. My body didn’t feel like my own. I was a strong, physically fit man in his early...
sixties. After the surgery, I couldn't lift five pounds and couldn't walk more than twenty paces. I wasn't Superman or Batman or even Ant-Man; I was Lucky to be Alive Man. I was reminded daily by the medical staff that I was given a miraculous gift. Most patients with a torn aorta don't live. This event had ripped away my beliefs about who I was, the story I told myself about myself and my role in life.

After 11 days in the hospital, I was discharged home to my small apartment. Visiting nurses came to work with me. And little by little, over time, I got better, but I was a different man than before my wild ride to the ER. I could easily be ashes blowing over the ocean, and I couldn't forget that. I looked at my relationship with my wife: time is precious, there's no room to complain about eating cauliflower or debate who cleaned the toilet. I saw the elderly and disabled with more compassion. Like a drop of ink in a bowl of water, this shift in feeling and mindset spread. I began to question other aspects of my behavior and my perception of life. I realized I had to let go of my righteous anger, my grudges, my obsessing over what could go wrong. I could no longer pretend to be immortal by ignoring mortality.

The dissection surgery changed my heart, but glimpsing death changed me. I am happy to be alive, and grateful for the good and the bad in my life. Grateful for beautiful sunsets and waiting in line, grateful for holding someone I love and grateful for people that don't clean up after their dogs. I almost died, but I didn't. I am here. I am alive. I am a resurrection in progress, a new life in the working stages. My revival left me with no clear vision of who I am, but I do have a new sense of who I can be in this moment. I can be thankful to be alive. Now I listen to the miraculous, onward beating of my broken heart. It tells me to love more and be grateful that I can.

A year later, I think of those gasping for breath, feverish and afraid, lying on gurneys in emergency rooms throughout the world. COVID-19 has spread, with no clear end in sight. Strangely, I was blessed to have my chest cut open a year ago. I didn't know it, but I timed my brush with death well. While I write this, so many suffer and die alone, a wall of infection separating them from loved ones. Tonight, I lie in bed with my wife, the room pitch dark. We're alone together, cut off from the world indefinitely. She reaches out and takes my hand. I hold it, smooth and small in mine. We are sheltered, cloistered, lying on the island of our bed, cut off from neighbors, family, and friends. We drift off to sleep to dream in hope of a world healed.

Michael Cannistraci began his creative journey as a child actor. Having graduated from UCLA, he worked for thirty years acting in theatre and television. In mid-life he answered a new calling and completed a master’s degree at Hunter College School of Social Work. He currently works as a clinical social worker and psychotherapist. His last essay was published in Entropy Magazine. He lives with his wife and muse in New York City.

Thoughts for Healthcare Workers During a Pandemic

Courage is the light of morning hour though it is not morning.

Courage is the coat you didn’t know you were wearing.

Courage is a melody gifted to you from silence.

Courage is a kind heart—you discover it is yours.

Courage is the cup no one offered—but here it is.

By Christine Colasurdo*
The Most Chilling Cargo

On a shining May day, death slammed a hospital staff. An august healthcare worker died from Covid-19. Teary-eyed, this staff watched two transporters dressed in protective suits and masks that soon departed with a white sheet draped over this body bag which laid upon a gurney.

Along afterwards within a long busy, crowded hallway, these two wheeled by unsuspecting visitors. At a freight elevator, they hustled inside this gurney, followed by them closing these doors.

After they reached the basement, the doors opened and they left. Both soon saw a forklift waiting outside an open entrance door. Two transporters advanced until they were close to this forklift. The forklift lowered its forks with a two-sided, open pallet that next hoisted up this body bag until it reached the mast top.

When this loading had finished, the forklift and the transporters crawled along under an erected white tent that had hidden them. All soon reached where a freezer trailer end rested in a lot. Forklift moved closer until it was partially inside. It lowered this body bag over the floor and it stopped.

Two transporters climbed upwards into this trailer. Both shuddered at seeing two columns of body bags, for both dreaded they’d be next while they waited… Forklift next tilted forward and these two removed this bag from a white sheet. Beeping forklift moved backwards, straightened its mast, while these shivering transporters slid this bag close to a column. Both next turned and eventually climbed down. Forklift and them departed quickly and secretly…

Outside, a covered chain link fence bordered this hilltop hospital. Pedestrians strolled downwards and onwards… Few ever suspected what was close to them—

disease and death inside

By Ronald G. Mazzella

An ex-psychology researcher, Ronald G. Mazzella now works as a supervisor for M.T.A. New York City Subway—a state government agency. He has published three nonfiction pieces and hopes to one day publish a novel.
Going with You to the Doctor

When your doctor mentioned heart transplant
my own skipped, and I took in a long breath.
He mentioned it in passing, a reference to some
distant possibility if things take a bad turn
so you would know the options and choices.
I went to the waiting room in my mind.

We have been down many of these medical roads
waiting at the diagnosis’ traffic light
pulling over at the roadside worry stops
and blasting through all the procedure speed traps
with watchful eyes scanning for the ambulance
hiding behind the billboard.

To me you appear healthy.
These internal goings on of yours
play out like we’re in some silent movie melodrama:
you tied to the railroad track with the train bearing down
me sitting in the front row knowing that in the next reel
somehow, you’ll be safe in my arms.

By Walt Stepahin

Walt Stepahin is a longtime resident of San Diego. He has been writing poetry since his college days. When he retired some years ago he joined a poetry workshop to pursue his passion as a writer of poetry. Walt has since been published in the Oasis Journal and the San Diego Poetry Annual.
An Epistoler of Resuscitation

By Paul Rousseau

I slip into a mindful rhythm, trying to ignore the discomfort. I've a duty to perform; I'm your beating heart. It’s a demanding and tiring duty. The minutes pass as if trudging through glue; five, ten, fifteen. Rivulets of sweat trickle down my forehead and drip onto your chest. There’s a tap to my shoulder. “Do you need to be relieved?” I do, but I don’t. I need to see the ending. I glance at your face. Your eyes are still, your pupils as big as dinner plates. You’re just this side of death. “Stop!” I rest my arms. They quiver with fatigue. “He have a pulse?” I feel your neck; nothing. I glance at the monitor.

Flat line. “No pulse!” I start again, but a pressured voice shouts, “Everyone clear!” I startle and jump back. Your dolloped body twitches. The smell of scorched hair slices the air. “V. fib. Everyone clear!” Your body twitches again. “No pulse!” I resume my cudgeling, but the respite has weakened my arms. My muscles are flimsy and feebled. I scrape along two minutes more, then step aside.

I smell sweat and the residue of waiting room coffee. “Is he okay?” they ask. We tell them he's passed, died being too harsh a word. There's wailing and crying and a collapse of bodies. “Please, Jesus…” It's the crushing promise of love; it's grief.

I sit alone, unsettled. There’s a lingering disquiet lodged deep in my heart. It’s like a throbbing tooth my tongue returns to again and again. It’s the residue of your death, the passage from present tense to past tense, from you are to you were. It’s also a stark reminder of our ephemeral presence, and the fullness of time closing to an end. And for that, I thank you. ✷

Paul Rousseau is a semi-retired physician and writer published in sundry literary and medical journals, including The Healing Muse, Intima, Blood and Thunder, Tendon, JAMA, Annals of Internal Medicine, and others. He is currently marooned in Charleston, SC, and is a lover of dogs.
Litany for My Sister

That there is suffering.

That the camellia I planted last year blooms now, in a hard frost.

That my sister lies dying.

That I lack words for the sickness of spirit most call mental illness.

That the camellia opens tentatively with sunset-pink petals.

That there will always be suffering as certainly as a super blood moon will rise tonight.

That my sister has suffered most days of her life.

That words travel out only as far as human compassion.

That I have failed my sister, that most everyone has failed those “suffering from mental illness.”

That in my own suffering I had forgotten the camellia but found it again today as the frost thaws.

That the only thing that has not failed is love.

By Christine Colasurdo

Writer and calligrapher Christine Colasurdo is the author of two nonfiction books on the outdoors and an award-winning poet. Her book Return to Spirit Lake: Life and Landscape at Mount St. Helens is a recommended Washington Reads book. She has been the recipient of a Fishtrap Fellowship and a US Forest Service writer’s residency. She has written for magazines, newspapers, and radio, and her calligraphic artwork is in the Harrison Collection of the San Francisco Public Library. She teaches creative writing as well as calligraphy at the Multnomah Arts Center in Portland, Oregon. Visit her website at www.christinecolasurdo.com.
Safekeeping

By Tracy Roberson Woolard

I go visit you in the hospital. I don’t want to. Before I can see you I have to show the receptionist my driver’s license, give her your name and a number. After placing my East Carolina University change purse, a Samsung cell phone and a key chain with a snowflake on it, I use the date of your birth to lock my things in a metal cage of square lockers with other people’s stuff. I press the button with a key symbol on it and something inside slides, clicks, and locks some things of mine away for safekeeping.

You seem surprised when you see me. We “fought” on the phone earlier and you don’t think I’m coming and I don’t think I’m coming either. We both know better. I last saw you a few days ago in another hospital room before they brought you here. Your eyes were enlarged deep hardened brown pools and wild. Those eyes said you wanted to do something. They’re smaller now, less wild, and back to their normal love-ly light brown color and still saying they want to do something, but less destructive. I was scared then and now…I’m still scared.

I play back our conversation from earlier in the day.

“Come get me out. Tell them I’m okay and I’m not going to hurt myself. You can get me out if you wanted to. You want me to stay in here forever.”

“No,” I tell you. I’m not going to do that. You need help. I didn’t put you in there.” I pause before I say the next thing. “You put yourself there.”

This is the fuel you need to light me up and you proceed with a rapid succession of burns.

“You don’t love me! I hate you! All you want to do is get rid of me. To put me away.” You’re shouting now and I wonder what the people working there will do to you.

“Maybe, you don’t love me. How. About. That?” I’ve wanted to tell you this for a long time. I haven’t because I know these jabs you’re throwing are a part of your illness. I want to say more. I decide to stop. I don’t want to hurt you just because you’re hurting me.

“You know what? I’m not listening to this. I love you, but…I’m sorry. I…I can’t. I…”

You hang up on me. I slam my work phone back into its cradle.

The visiting area is a large room with vacant white walls and se-veral rectangle tables assembled in a U. All sorts of people are here. White. Black. Asian. Tattooed bodies and pink colored hair. Earrings in noses, lips, and ears. T-shirts and jeans. Long skirts and sweaters. Neat and wrinkled. Crying, laughing, and smiling. Distraught faces held in hands. Young women and men in their late teens to mid-twenties. The last time you were here you stayed on the wing with junior high-aged children and those not yet eighteen. The room is monitored by hospital staff. A young man who doesn’t appear to be paying much attention to the visitors or the patients. He’s probably gotten used to keeping watch while pretending not to. We’re sitting at the table near the door.

I grab your hand. Your arms are decorated with lots of things: bracelets, a happy face, a skull, a sad face, the word hate, the word love, an angry face (or, an “act a damn fool” face as Aunt Pearl calls it), and scars. Many scars slashed across your wrists, fore-arms, and biceps. You say some are old, some are new. How do you know how deep to cut before you stop, I wonder. I probably should be shocked, horrified, disgusted even. I’m not. I’d asked you by Tracy Roberson Woolard

“I give you a hug and tell you to hug me tight. I ask you to be nice to me when we talk on the phone next and you in turn ask me to be nice too. I fear one day the both of us will explode into an amazingly magnificent raging fire and this will all be over.”
To the Student

I wish that when this body’s done with me it helps a future healer learn the art.
I’ve signed the papers saying I agree to this, and trust events will play their part.
Take note: The tonsils came out just past five, the wisdom teeth much later. Thickened bone above the left eye’s from a stupid dive into the shallow end. A tiny stone from gout may glow. The great toe on the right had bone infected, cut in, swathed in wraps when it was forty. What more’s left to write?
Oh, yes, a right-side pelvic tendon snaps.
Hay fever. Prone to migraines. Smoked but quit.
Until what killed it, which you’ll find, kept fit.

By Dan Campion*

* Author’s note, page 8

Tracy Roberson Woolard won the Firefly Ridge Literary Magazine 2015 Women’s Writing Award for her memoir excerpt, “Involuntary Choices.” Her article, “All the Things the Mohawk Stole,” was published in the February, 2015 issue of Talking Writing. She is currently working on her memoir about raising a child with mental illness titled, Be Committed.
To the Surgeon: About My Wife on Whom You Will Operate Tomorrow

She has light in her chest
from the rising sun. She carries pollen
and animals, along with fruit.
She is also made of sad dark, a body of broken moons.
Her bones are vowels. She talks
from the edge of her heart, so pure a place
all words arrive true.

Today, rain on the hospital windows,
such sincerity. Years ago we talked into the dark
by a window until the rain stopped
and drops fell from the eaves.
Most of my life started from that day.
Today she cried softly, like a winter window
overlooking a bare branch orchard.

I have put a rose on her bedside table
and put a mirror behind it. The reflection
is a quieter, more patient flower.
Please leave it where she can see it after the surgery.
It is not an ornament but a failure to say
how much she means, a reaching toward the unsayable
and an abandonment of trying, like a failed poem
left overnight on her porch by the door.

In her, rivers bend into and out of sight.
Under anesthesia, her blood may dream of angels;
and she may be amazed, as if watching a wheel of emeralds.

Tonight she is with you in the hospital, I hope resting.
In this hotel room, in this width of lamplight
I am alone. The silence of her absence
is distance inside me. I look out the window.
The moon turns the trees to feathers.

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Continued from page 21

Dear surgeon, she trusts your years of study, your careful hands, the wild birds of your heart trained to pay attention, and thanks you for what you do. Even in her sometimes fog, she rings a temple bell for you, wishing you well.

By Robert Randolph

Robert Randolph has published poems in about 50 journals and a book from Elixir Press. He teaches English at Waynesburg University. In part of his life he was a hospital chaplain and a pastor, and this poem ties into sensing the feelings of love and concern in spouses when the other spouse faced upcoming serious surgery.
Commencement

For Shannon Beers, RN, and the Class of 2020

This year, there is no procession.
No cap and gown.
Pomp has given way to circumstance.
And the circumstance is beyond your control.
To suggest a different scenario would be
less than true and you deserve the truth—

The truth that this disappointment
only magnifies your achievement.
The truth that what you lose in ceremony,
you gain in resilience.
The truth that the world needs you now
more than ever before.

The lamp lit by a nurse on the battlefield a century ago
still casts its glow over the profession to which you are called.
Today’s battle will exact no less a toll.
And you, who have been in the trenches of study and sacrifice,
are ready to be the face of healing,
the hand of compassion,
the heart of courage.

The pin you receive as you enter your profession
is no mere accessory.
It is your oath made visible.
It declares the truth that in the service of each patient,
you serve the world.
It is evidence that commencement is not an end,
but a beginning,
and your beginning has just begun.

By Gloria C. Heffernan

Gloria Heffernan is the author of the poetry collection, What the Gratitude List Said to the Bucket List (New York Quarterly Books). She has written two chapbooks: Hail to the Symptom (Moonstone Press) and Some of Our Parts (Finishing Line Press). Her work has appeared in over sixty journals, including Anchor, Chautauqua, Magma (UK), Southword (Ireland), Stone Canoe, Columbia Review, and The Healing Muse. She teaches at Le Moyne College and the Syracuse YMCA’s Downtown Writers Center.
Explaining the virus to little kids is really difficult. You want them to be careful, but you don’t want to scare them. This photo captures that struggle beautifully: What do you do when your one-year-old sees every mask as an invitation to give a kiss? Luckily, in this moment, Dad's mask was newly clean.