THE BEAT

David Geffen School of Medicine at UCLA
EDITOR’S NOTE
Dear Readers,

It is our immense pleasure to present the 20th annual edition of The BEAT, The David Geffen School of Medicine’s Arts and Literary Magazine. In the following pages, you will find artistic and literary expressions from a diverse group of artists and authors. Each piece of work is the product of a thought, emotion, or vision that reflects the inspirations driving the hearts and minds of UCLA Health community members. We hope you enjoy this refreshing edition of The BEAT as much as we enjoyed putting it together.

And The BEAT goes on...

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LITERTATURE AWARDS
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VITAL SIGNS AWARDS

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SPECIAL THANKS
To Mary Ann Triest and Aurora Reyes from the SAO for helping us continue the tradition of Medicine’s Arts and Literary Magazine. In the following pages, you will find artistic and literary expressions from a diverse group of artists and authors. Each piece of work is the product of a thought, emotion, or vision that reflects the inspirations driving the hearts and minds of UCLA Health community members. We hope you enjoy this refreshing edition of The BEAT as much as we enjoyed putting it together.

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We welcome submissions from all faculty, staff, and students at the UCLA Health Sciences community at medschool.ucla.edu/current-the-ucla-beat.

CONTENTS

LITERATURE

ART

Walter Jong 4
Safiya Lahlaf 5
Nadia Shamout 6
Eviola Nakhla 7
Melina Radparvar 8
Hervey Lopez 9
Alex Garrett 10
Andrew Ro 11
Elena Schink 12
Jessica Rahman 13
Julie Hein 14
Benjamin Rostami 15
Jeff Cartier 16
Justin Sharim 17
Zhaung Fang 18
Shelley Bennet 19
Tami Samuels 20
Melissa Burdette 21
Angela Wong 22
Nivedita Keshav 23
Dinesh Banagra 24
Elena Schink 25
Brian Pung 26
Michelle Miller 27
Gihad Abdelhadly 28
Sally Elliot 29
Paula Stoessel 30
Andy Trang 31
Barbara Adams 32
Barbara Adams 33

ART

Robin Angelides 34
Christina Harview 35
Ira Wohl 36
Ryan Alano 37
Nadia Shamout 38
Paola Stoessel 39
Neil Parker 40
Anne Wakamiya 41
Katherine Bailey 42
Downin Birt 43
Lucas Restrepo 44
Jonathan Warren 45
Jacqueline Ngo 46
Rose Shan 47
Donna Choo 48
Ryan Alano 49
Bryan Huebner 50
Paul Camarena 51
Caitlin Oldenkamp 52

VITAL SIGNS AWARDS

PEDESTRIAN VS. TRUCK

CATASTERISM

THE HAND OF MY GRANDFATHER DURING THE LAST YEAR OF HIS LIFE

HER HANDS

A DEATH IN BLUE

PILOCENE

CONTRAST

STARS AND SPIRITS

ON SLEEPING IN

LITTLE TIGER, BIG DREAMS

ANNAS HUMMINGBRID COMING IN FOR A LANDING

TEA WITHOUT LANGUAGE

THE CASCADE

GILDED CAGE

FAST FOOD

EARTHQUAKES

MR. NOTCYRIL

SOMEONE ELSE’S PROBLEM

LOS ANGELES

JUSTICE

SOLITUDE

MEMORIES

THE FLOWERS WE SPEAK

THE PHOTOGRAPH

HARLEQUINS

COLOR MY HEART

SUDDERING WILL BRING HIM CLOSER TO GOD

CROSS-LIKE SHADOW ON SIDE OF BUILDING

YELLOW WHISPER/AUTUMN SPLASH

SEASONS OF LOVE

THE NINE LIVES OF MARTHA

WAITING IN PERU

MAN HARVESTING SALT

HEMOSTASIS

SHIPWRECKED

WHALE

GROWTH

HE LOST ME AT HELLO

CONTRASTS AND SIMILARITIES

IN THE MOUNTAINS

SIMPLICITY

SPEED

BAR’S NIGHT SKY

HAWAIIAN STARS OF GLADNESS

DESSERT LANTERN

ROMULUS, BUDDHA, AND ME

WHAT I IMAGINE GOD MUST THINK...

ANATOMY OF DANCE

ON THE SHORES OF LAKE WAKATIPO, QUEENSTOWN, NZ

KEEPING YOU IN LINE

FLOWING THROUGH THE NARROWS
Blood rushing inwards, a slow-beating heart.
Contraction, then a collapsing star chart.
A universe living within a cell.
A salutation without a farewell.
Eons-long chase resulting in glory:
Orion succeeds, catches his quarry.
Seven sisters laugh, a dove’s gentle coo,
For has he not been caught up with them too?
Harmony and discord twining as one,
Just as Heaven meets Earth and Moon meets Sun.
All is condensed, focused down to a drop.
Singularity. All comes to a stop.
A held breath, shimmering moment in time.
Anticipation blooms into sublime.
HER HANDS
by Eviola Nakhla

Five large spoonfuls of dark, crushed tealeaves
Hastily shoved into the blue kettle,
The one mottled black and brown with age.
The soft flick of the match consuming its wood
Licks the grimy stove to life. Water boils.
The rising wisps of steam brush the wide kitchen in soft strokes.
Deep amber is poured into tall glasses; its rich, herbal scent diffuses through the room.
She quietly sets the tea in front of my father, then me, then swirls sugar into her own.
She remembers the sprig of mint in my glass.
“Drink your shay,” she tells me, with a smile.
This is the third time she has made tea today.

She gently pokes her head in my room, opens her mouth to speak, and then closes it.
I hardly see her behind my glossy computer screen.
Hardly hear her light footsteps under beats blasting from my ears.
She walks into my room, the room she helps clean when I am away, and sits on the bed.
She waits until I look at her. I don't.
“I washed your clothes today, ya helwa.”
I respond with a nod, never lifting my eyes from the screen, eyes glazed.
“Can you help me type my job application?”
I only hear the disguised labor in her question.
I groan and sigh heavily, like an employee given a last assignment on their way home.
She pats my arm as she gets up, “Whenever you’re not busy.” She leaves.

That night her hands stroke my cheek before she turns off the light in my room,
Hands that are not soft and manicured like mine, but are textured like linen.
I see the veins protruding from the loose skin on the back of her hand, a network of age.
I look into the crinkles of her eyes, small specks of brown, my brown, behind large frames.
‘Ana bahebek,” she whispers as she extinguishes the light in my room.
“I love you too, mom,” I yawn back, already half asleep.
A tinge of regret pulls at my chest.
I close my eyes in the cool darkness
And see her hands stirring the béchamel crème of my favorite dish.
Her hands are red. She has been stirring for twenty minutes,
Steam clouds her glasses and tinges her cheeks pink.
I hear the clicks of the keyboard out in the living room now, slow yet deliberate.
The creak of the desk chair stirs me from my half-sleep.
Eyes closed again, I remember her hands gripping the passenger seat,
Knuckles white, nails dug into the upholstery.
She stifles screams, yet can’t keep her eyes off the road as I drive.
She starts to sob as we weave through traffic, her passenger anxiety coming to life.
I don’t slow down for her.

I then remember her hands as she hugs me after a weekend home
Tight and warm against my skin.
I close the door of my car and wave, and as I drive off, back to college,
I realize I don’t know the first thing about love.
I catch her smile in my rearview window as tears escape my suddenly moist eyes.

THE HAND OF MY GRANDFATHER
DURING THE LAST YEAR OF HIS LIFE
by Nadia Shamout
Rushing into the trauma bay
I see him
Pedestrian vs. Truck per my pager
Turned an individual, a vying person in real-time

The bay is suddenly lively
Health professionals running to and fro
Yet he lies unresponsive, motionless
Unprovoked by his surroundings

Technology pieces together his clinical picture
FAST ultrasound with abdominal bleeding
CT Head reading an intracranial bleed
The operating room is our answer, his clinical story revealed

But that is not enough; no, that could not be enough
To where was he walking? Does he have children?
My mind races with questions
Questions about the life he unintentionally paused

Unquenched without answers
I build my own story
I imagine the patient waking up in the morning
Greeting his family, eating breakfast

I watch as he leaves his home
As he runs through his usual plans
Oblivious of the unordinary that is to unfold
Of the operating room that is to become his haven

I watch as he undergoes surgery
As his abdominal bleeding stops
As his intracranial bleeding is deemed inoperable
As his prognosis is rendered poor

His clinical story is still clear
While his personal story remains untold
But all chapters are now transcribed
As both stories ended that night
A DEATH IN BLUE
by Alex Garrett

How long until the heart dies? Like a teacher in a crowded, unruly third grade classroom the sinoatrial node desperately tries to get the ventricular myocardium back in order, as every firing cell raises its voice in an attempt to be the loudest.

Who’s that outside?

By the time it’s your turn for compressions (your turn, what an exciting privilege, to finally do something with direct impact!), there is no more cracking of ribs to be had, the sternum lightly bounces up and down under your hands until you adjust a little higher because you’re told your compressions aren’t effective (Effective!), and you push down harder, release more, using the full weight of your upper torso, your beating, living heart pumping faster and faster from the potent, intoxicating fumes of a concoction of exertion and stress and hope and death, and CRACK.

You didn’t know there would be this much recoil. Bump, bump, bump. Another one bites the dust. Bump, bump, bump.

Who’s that outside? They’re on their phones.

Epi, calcium, bicarb, epi, calcium, bicarb, epi, calcium, bicarb, there are no chaplains here. Our shocks make the body move in a perverse pantomime of real life, “Get your hands off me!”

Who’s that outside? Their faces are stone.

Twenty bodies inside the room clustered together in activity, a search party of ants fighting a thrashing caterpillar, working together to defeat the beast and bring home their prize.

Bump, bump, bump. Another one bites the dust.

Who’s that outside? Finally they can see the heart, as the ants march one by one from the room, shedding their yellow gowns like magnolia petals at the end of spring, no one looking at the silent observers outside, their faces still stone.

Soft-spoken words of apology cannot chisel emotion onto stone.

It takes the heart thirty thousand, eight hundred and sixty days, eighteen hours, twenty minutes, and five seconds to die.
Things changed overnight.
A star fell through my window,
And burned into my spine,
A searing white stain grew.

I felt agony, pain, death;
A bleaching of my soul,
I tried to claw it out,
But it only dug deeper.

And the days passed.

It grew over my skull,
Burrowed into my mind,
Trailing death behind.
My heart grew cold.

A creeping nothingness came,
My world became desolate,
My soul was stolen.
But still it grew.

And the days passed.

All I smell is empty numbness,
All I see is bone white static,
All I hear is the light whispering,
All I feel is bleached.

A desert wasteland has bloomed,
The world is sterile,
It mirrors my empty soul.
And then I saw you.

And time stood still.

Onyx fire burned around you,
Darkness shrouded your body,
Shadows danced in your hair.
Obsidian in an ivory world.

You were summer night,
You were rich earth,
You were raven’s feathers,
You were jet ink spilling onto my canvas.

And time still stood.

You reached for me,
And I could not move away.
Your fingers brushed my mask,
You froze against the emptiness.

I could feel my cowl bite,
Your blood fell red against the white.
But the way you smiled,
Tore through my void.

Something cracked, broke, fractured.
You made a fist of darkness,
And smashed in to my mask.
My barren world shattered.

Blackness came as a tidal wave,
Joy like a hurricane,
Fear like a wild fire,
Strength like lightning.

Time began again.

I felt love in your hand,
I felt my skin break and blood fall.
My mask fell away from my face,
And I saw the old scars from yours.

I understood that you understood,
I loved you and you loved me,
There was light,
And there was dark.

And the days passed.
And they were beautiful.
ON SLEEPING IN
by Julie Hein

Every day, I adjust the alarm clock on my phone. 5 minutes later, 15 minutes earlier, the exact time calculated precisely by me, factoring in the time of team rounds, the expected traffic on the way to the hospital, and the number of patients I have to see beforehand. As a third year resident, now finally a senior, the duty of pre-rounding thankfully passes over me, with one exception: if there is a patient in the ICU.

For days, weeks, that’s where you’ve been: that cramped room in the intensive care unit. So earlier we round, and thus earlier I arrive each day, ready to tackle the list of overnight vitals and lines, decipher the vent settings and drips, update the team on your status. “She’s the same, no big updates, nothing different than yesterday,” I report, day in and day out. Stably sick, yet we all know, steadily dying.

Until one afternoon, a family meeting was called by our ICU colleagues and serendipitously discovered by my attending and me as we passed by your room. We immediately knew something was different, seeing your family and friends gathered around your room, crying. We knew then you weren’t stable. You were sick.

I sat like a fly on the wall in that meeting. Discussions of code status, of de-escalating care, of your wishes for life and death. Your family was brave, fighting back the tears as they spoke for you and listened. The ICU team was kind and calming; my own attending more eloquent and honest and raw than I’ve ever seen. I myself not speaking, partly because I didn’t know the words to say, and partly because I did know but knew that if I said them I’d cry.

Likely within the next 24 hours, they said. Your two young sons sobbed into their father’s arms as they stared at this thin sliver of a person, their mother, and said their goodbyes. I said my own silent goodbye as I walked past your room one last time. Then, alone, I cried my own tears, followed by an impromptu therapy session by my attending, my mentor. His wise words stick with me: you were a part of her life, and a part of her death, and that means something.

Vulnerable and drained, I drove home. A quiet walk with my husband and a home-cooked dinner proved cathartic. Then two hours later, a simple text from my co-resident gave me the news I was expecting.

So I won’t come in early tomorrow. I adjust the alarm on my phone. One less patient to see, one less note to write, one less patient to round on. I will sleep in, while you too finally sleep.
I was home with Teta – my grandmother – and she wanted me to take her to visit Kera, five houses down. I knew mama forbade it, since Teta used a walker, but with the bribe of a single, crumpled dollar, I took her wrinkled hand into my small, eight-year-old one, and we gingerly made our way down the porch to Kera’s house. It was the beginning of spring, so the cold still nipped our noses once the sun began to set, but Teta’s hand warmed me like creamy shay bel laban – our favorite milk tea. The squeaking of Teta’s walker trailed behind us as we discussed the noisy bird nest I had seen the other day. We reached the shade cast by the dark leaves of Kera’s ancient sycamore tree, and her shaggy tabby glided out to greet us. We passed the boards nailed to the tree’s thick trunk - steps for a tree house never built - and knocked on the fraying screen door. Kera opened and smiled at me with moist, kind eyes and hugged me with hands wrinkled with raised blue veins. As I pet her cat outside, Kera and Teta sat over tea. The scent of mint carried their soft accented voices to me, one round and Polish, the other shy and Arabic.

Back then, I didn’t understand what it meant to be living off social security checks. I didn’t know that Kera had to use food stamps to buy her milk, her eggs, and rummage around to afford her cat’s food. The violin and light tublah drum beats of the Arabic music that filled my mother’s kitchen at home prevented me from hearing the frustration in my father’s pen as he wrote the electric bill, late for the third month in a row. I didn’t mind wearing hand-me down pink pajamas with a dusting of dirt around the sleeves or worn Barbie tennis shoes from my older cousins. I didn’t understand how hard it was to find work if you didn’t speak English, didn’t notice all the times my mother was laid off. All I knew was that in America, we had a home, neighbors with shaggy cats to play with, and that two Tetas from different countries could understand each other over tea.
GILDED CAGE
by Shelley Bennett

The Cascade
by Zhaung Fang

FAST FOOD
by Tami Samuel
Bending and breaking
When two forces disagree
Causing upheaval.

EARTHQUAKES
by Melissa Burdette

SOMEONE ELSE’S PROBLEM
by Nivedita Keshav

In the late 1990’s, we saw this in the reluctance of the global community to treat multidrug-resistant tuberculosis in low income countries. With treatments costing thousands of dollars, we called it “an expensive luxury” for poor patients. As the world sat and watched, cases spread rapidly in a shantytown on the outskirts of Carabayllo, Peru, qualifying an outbreak. Drs. Jim Kim and Dr. Paul Farmer realized the gravity of the situation and challenged the notion that poor people did not deserve to be treated simply because they were poor. They argued for the dignity and value of each human life, and negotiated with the government to treat and save these patients. They followed up with the creativity to ask if the drugs were even patented—they weren’t—and the prices dropped virtually one thousand fold overnight.

In Flint, Michigan in 2015, Dr. Mona Hannah-Atisha and water expert Marc Edwards revealed the results of rigorous research into the connection between rising levels of lead in the water and the level of lead in children’s blood. However, when she first began to speak up about her results, she felt “attacked” by those in power, echoing how others in the community, where over 40% live in poverty, felt they had been treated for voicing their concerns about their children’s health over the years.

What if Kim and Farmer had decided that a shantytown in Peru was too far to feel any connection to? Or if Dr. Hannah-Atisha had chosen to leave the poisoned city of Flint when she first realized the relation, rather than risk her own health?

In the present, we have too many instances to question the nature of our responsibility. From the repeal of DACA, to the lack of formal protection for the refugees fleeing violence and crushing poverty in Central America; from the threats to deny women access to reproductive services to police violence against black lives, we constantly must think about the very real roles we play in others’ lives. While classifying these issues as health issues comes without question, our response always seems to come with a particularly salient one: why is this my responsibility?

Make a map of all those who you touch, who touch you, who you care for. Be sure to include your family, friends, neighbors, colleagues, mentors, mentees, patients. Don’t forget those who are a degree removed: the farmworkers that put food on our tables, the gardeners who maintain our landscape, the janitors that keep our hospitals clean, the incarcerated who made the furniture we use. Now draw a circle around those who you see as your community. Who falls within, and who gets placed beyond the edges? Do you see a trend? How can we practice audacious compassion and widen this circle to encompass those on the margins, those most susceptible to biological and societal ills?

Responding to the needs of others is particularly urgent to those in the medical field, a field dedicated to absorbing the problems of others as our own. We must see elements of ourselves in our patients, and understand that the oath we took to protect and care for them extends beyond the clinic walls and into the larger communities that we serve. We must identify our partners in our institutions and community who are already working on these issues, and humbly ask to join the cause. We must exercise the empathy to feel personally insulted by injustices against others, the creativity to propose a way to protect them, and the courage to act on it.

When we look back on these moments in the future, will see who we are capable of saving when we act with swift conviction and humanism, or will we say may they rest in peace?
SOLITUDE
by Brian Fung

Her face has been beaten,
Bruised and battered by heavy hands,
Weathered and worn,
By wind, rain, and sun.

At first glance her visage seems smooth,
But her marble skin is flawed,
Fundamentally broken,
By spider web fine cracks that cover her face.

If I touched her now she'd break,
But maybe if I kissed her,
I could breathe meaning into her again,
And the cracks would heal.

I know some men only see her symmetry
But all I can see is the universe in her tears,
That drop from blind eyes,
Into the sea of eternity.
The thing about flowers is that they have a lot to say. They scrabble on the fringes of our awareness, threading roots through faded concrete and dry soil. They live, wave their petals in the breeze and then they die... pretty much ignored for the entirety of their existence.

And yet, we expect so much from them when we do pay attention. We expect them to say the words that we can’t. When a chorus of I love you or an apology sticks to the roof of your mouth... when the words pile up like refuse at the back of your throat and do not let you speak, you use flowers. You place your hopes and dreams on the scant petals of the dandelion you pluck.

She loves me, she love me not.

You hope the flower isn’t lying to you when it says that she does love you. But you’re placing a lot of expectations on something that only lives for a few days.

So you blow a dandelion for a million wishes.

But here’s the thing. When you have the stars in front of you, sprawled across the night sky and shining bright, it’s so easy to forget the dandelion that heard your wishes. Sure it had been a wish for a service. You’d helped it spread its progeny in exchange for a few words, but you forget.

---

It’s easy to overlook flowers because they’re always there. Silent until you need them not to be.

She gently tucks back a strand of your hair, just curling it under a wreath of pink roses you wear.

(You’re lovely, she thinks, crowned queen of her heart with flowers and a gauzy veil.)

But she doesn’t see the flowers. She only has eyes for you.

Again, they’re overlooked.

---

Your forget until you’re in the hospital. You forget until your loved one lies frail and weak underneath thin white sheets. They drape over her like snow, a little frigid... a little like a dream. And then you bring her a bouquet of lovely fragrant flowers.

It’s a bit like spring again, reds and yellows and white stark against the paleness of the hospital room. They’re all shouting to be heard and the expectation in the room is entirely too transparent to let the flowers do anything but shout.

God knows what they’re really saying. All you have to go on is what the florist told you. Yarrow for good health. White carnations for good luck. A sunflower because they’re her favorite.

You place them on her bedside and pray that she wakes up soon to see them.

She does. She smiles weakly at you, but her cheeks are flushed and that means she’s alive.

The flowers wilt silently on her nightstand, granting your wish.

---

There’s something so nerve-wracking about the way a flower catches the rain. Thin veiny petals that bend underneath one fat droplet. You watch as the white bloom cradles the water, lets the rain run through it until it is wilting and bent low.

The heaviness of the downpour is painful, hitting starkly against your dark umbrella until you feel yourself bend just as the dying lilies on the grave are.

Sorrow has bored away in your chest. You’re a being riddled with holes, and it simply feels as if you could perhaps take a few of those flowers littering the freshly dug earth and plop them right into your empty heart’s garden.

You’re old, but not very old. Perhaps it’s time you stop making wishes on flowers. They don’t seem to work very well.

They couldn’t keep her rooted to this life. Asking them to do much else is tantamount to idiocy, in your mind.

---

She left behind a book.

And pressed between many pages are dried and carefully arranged flowers.

A stark yellow dandelion, a wish unheard.

An old pink rose, regal and in full bloom. The petals splayed out in full display, reminding you of when it once crowned you on your wedding day.

A browning pale carnation, with the date of her hospital stay written in her frail, shaky handwriting.

On the last page, a message.

Flowers can say a great deal of things, but you find that in the end, distilled beyond all the condolences and gratitudes and well-wishes, you can hear the message loud and clear.

For all the variety in color and shape, ‘I love you’ is a simple enough thing to say.

---
HARLEQUINS
by Paula Stoessel

This morning
As the harlequins,
Soothsayers,
Soul-stealers
Return to the underworld,

I walk
Amidst
Poppies,
Lavender, maize:
I part the wind.

Steel cold
Blades of winter
Bend as they try
To pierce me.
I am armored.

I smile
As I remember:
Last night
I almost
kissed you

And I was surprised;
This morning
I am even more 
surprised
That I didn’t.

Yes, this morning
I wait
to wear you:
I have you
On layaway.

COLOR MY HEART
By Andy Trang
A shrill warning alarm from a nearly empty medication pump slices through the darkness, destroying the hospital night’s false sense of a restful silence. I freeze, feeling waves of sound pierce through me. The alarm sounds again and I shiver, coming to, refocusing on the task at hand. I slide the nearly depleted syringe of morphine out the machine as quietly as I can. It’s a dark early winter morning, around 5am, and I notice a small cluster of spectral lights thrashing behind a large shade covering the hospital window seemingly unable to find peace.

I, too, lately have been unable to find any peace taking care of my dying fifteen-year-old patient. I yearn for the dark to stay a little longer, wishing the blackness was like a shield that could protect Christian from the light, allow him to rest a little longer and remain hidden in night’s cloak a little longer.

I move as to not make a sound to insert a new Morphine syringe into the machine when suddenly a hard muscular hand grasps my wrist and holds me back.

Christian’s thick, sturdy forty-something year-old stepfather who has been asleep in a chair beside his stepson’s bed, stands and glares at me, face to face, intensely focused, his pockmarked face is visible in the electronic pump’s fluorescent green lighted numbers.

“There will be no more medication for him.”

“But the Morphine syringe is almost empty, we need to put a full one in to keep on top of his pain,” I educate him but, I’m still not quite understanding what he’s telling me.

“He will meet God as who God made him, flesh and bone without any impurity in his blood.”

I look down at Christian, his body is rife with osteosarcoma. Clusters of cancer cells are growing on his lungs, his spine, his brain. The lower part of his is spine is compressed together fracturing the lower vertebra along the edges. Most of his lung tissue is stiffened with cancer. According to the latest chest radiographs only 10% of his lung functions.

I think of the limp, lifeless figure of Christ, mostly naked, except for a loose white sheet draped partway over his body depicted in Caravaggio’s Entombment of Christ painting.

“But without pain medication, he will suffer enormously. His pain will put stress on all the systems of his body and could cause him to die faster.”

“Suffering will bring him closer to God and then God will heal him.”

Christian’s stepfather, Edgar, is a successful, powerful lawyer from Bolivia. He is the only one in the family who speaks English fluently.

I remember the first thing that he told me when I met him six months ago, was that they had done everything for Christian in Bolivia. After a year of unsuccessful treatments in Bolivia, they had come to the United States because they had understood that the Western doctors had newer treatments to fix his stepson’s bone cancer. I think I catch an expression exhaustion scratched into the fragile skin around his small deep set black eyes. Maybe his exhaustion has pushed him beyond the realm of clear, discerned decision making. Maybe he is tired of medicine’s jargon; the long sleepless night, the admissions and readmissions, the microscopic view of reality, the incredible weight of each value, of each image, all the doctors, nurses, assistants from various specialty services. Waiting in a small sterile room for the results of a scan or blood test. A new opaque area on a scan versus a clear scan can represent the difference between life or death. So many numbers and so many unfamiliar people in an unfamiliar place, can leave one feeling lost, and unbearably alone. I, too, sometimes feel lost in the downward trending numbers, to what they represent for the lives of my young patients and their families. I feel like I have become too close to the horizon of death that I can see underneath, stare into the certainty of what’s coming.

Last week, I washed the body of an eight year old who had died from a brain tumor. I had never cared for this particular child before. It seemed so strange to come to know a child for the first time by tenderly, carefully washing his lifeless body. Afterwards, a nursing assistant and I placed his bloated body in a white plastic body bag. I don’t know why the hospital body bags are white, the thin plastic covering reminded me of a shroud. At night, I sit down, hands trembling, and start writing their names, Nikki, Michael, Sankethi, Jack, Giovanni, Jorge, Jose, Sophia, Ivy, Luke...when I reach number ten, I put the pen down, I can’t write anymore. I don’t want to relive the story of the downward trending numbers.

Christian’s dying is particularly brutal, and challenging.
Marcie has no choice but to exit the room.

is obvious suffering.

Edgar moves his bulky body in front of her, blocking her access.

her way toward the empty pain pump.

Marcie is unable to tolerate the cries of pain and barges in room.

the closed door.

ligible words, but then a moan rips into the supposedly holy sounds and becomes screaming from the behind

Christian gasps for air, ghastly, shallow, quiet gasps, but the believers continue to pray. In their minds, his gasps

verse, echoes with the same cadence, each ending word predictably flattens in the same drawn-out tone, over

A congregation of four believers gather around Christian’s bed. They close their eyes, muttering a strophic

creates its own version reality from reality.

Edgar starts the speaking in tongues session and what was just a room becomes a chamber of malevolence,

myself. I feel my powerlessness. I feel my face and  my ears flush with redness.

I want to scream, “Stop!” Stop this now, let your son die in peace, comfortably!” I feel the anger well up inside

We place a light sheet over Christian’s shivering body but all I feel is the weight of the almost weightless sheet.

Respect thy father…” Christian recites a verse from the bible.

speaking in tongues ceremony, to create a miracle in Christian's broken body.

Edgar believes that freeing Christian’s body from modern medicine will allow God’s presence to commune with the holy spirit, to sanctify his flesh and resurrect Christian's broken body.

I remember when I first met Christian, he had encouraged my mispronounced Spanish, laughing and flapping his hands and fingers back and forth until they seemed like angel wings in front of his body. His thick, black wavy hair and his porcelain skin had reminded me of a cherub in Renaissance paintings.

Amoled, I nurse, Marcie, who is fluent in Spanish and I, plead with Christian to ask his stepfather to restart the pain medication.

"Respect thy father...” Christian recites a verse from the bible.

Christian’s faith is important to him. He trusts his father will make decision in line with God. My hands tremble beneath me as I glide a soapy washcloth over his wasted, emaciated body.

Christian breathing is growing more labored in his blood, increasing, becoming weaker.

Christian squints tightly. His eyelashes and eyebrows have fallen out after many rounds of chemotherapy. The

Christian’s body is exhausted from the bath and ceremony. He is sitting in an armchair near his bed, I think he

I imagine that if cement has feelings this is how cement must feel, not being able to move out of itself. I feel ce-

I search for the legal definition of torture on the internet — the intentional infliction of extreme pain and suf-

I attempt to find compassion, forgiveness for the father and for myself, for attempting to play God, for wanting

Haven’t there been times that I haven’t been able to be with my own sorrow, felt harmed by someone, something

I’m reminded of the Eli Wiesel reflection on surviving the concentration camp that a person can love God and

I look up at his father and his face twitches. His eyes are concentrated, fixed with the power of a holy maker.

I’m angry at the institution of medicine and science for pretending to be akin to

I search for the chain of command as we were taught to do in nursing school. We call the ethics team but ethics teams surprisingly says that it’s not an ethical situation for the father is the power of attorney and Edgar repeats that it is his wish to have the father as the power of attorney. They are not at the bedside. They are not bearing witness to the misappropriation of power. I wonder if their refusal to acknowledge our concern is just because there is no time, there is not enough time to give legal help. The pal-

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and over. The audible predictably of the prayer seems to provide comfort. They sway as if in a trance. Suddenly,

in powerless, I close my eyes and imagine coming into his room with a syringe falsely labelled as normal saline and administrating it. Christian would peaceful drift off, away from this madness. But deceit with good intention seems to always go away in all the accounts I’ve read.

This young man is being slaughtered, slowly with the remaining life he has left by his stepfather’s power. Christianedral,

I search throughout the house for the thing that makes me angry. Christian? An institution? Somewhere there a place where the suffering is unbearable, both for the child and his victim?

This death is for the death. For the father to prove his God is bigger than medicine to cure cancer, to prove the medical system wrong. Sometimes, it seems the easiest way to relieve the sadness and anger is to blame some-

I feel the anger well up inside myself. I feel my face and my ears flush with redness.

Edgar will never let another person have power over his son again. In his view, the oncologists lied. Six months

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Marcie and I rush into the room. Edgar is making Christian move to chair. He tells Christian to get up, get some exercise. He tells Christian that sitting in the chair will help him heal.

Christian’s body is exhausted from the bath and ceremony. He is sitting in an armchair near his bed, I think he

I search throughout the house for the thing that makes me angry. Christian? An institution? Somewhere there a place where the suffering is unbearable, both for the child and his victim?

Christian looks at me with a blank expression, it seems he doesn’t even know it is his son’s bedside.

She is furious. We go up the chain of command as we were taught to do in nursing school. We call the ethics team but ethics teams surprisingly says that it’s not an ethical situation for the father is the power of attorney and Edgar repeats that it is his wish to have the father as the power of attorney. They are not at the bedside. They are not bearing witness to the misappropriation of power. I wonder if their refusal to acknowledge our concern is just because there is no time, there is not enough time to give legal help. The pal-

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Christian is found dead in his chair. He is slumped back in hospital chair by his empty bed. Death seems to bring with it the end of all spoken language. The room is quiet, still.

I come to work the next day. Christian has just been found dead in his chair. He is slumped back in hospital

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Christian is sitting in an armchair near his bed, I think he has been murdered, torture to death but he still breathes with what little life he has. He is being destroyed slowly, slowly.

I’m left with the moral residue of feeling complicit. I want a fair and just way to say “no more” this is the care we offer and if this isn’t the care you want then you can leave. But to leave Christian and his family on the
dead.

And then I ask, what would mercy do? Where does one find mercy when pressed between the silos of divided righteous? At some point in my life, haven’t I, too, been the father? Despondent, full of relentless rage over wrong done to me, my space, my air, betrayed, but the believers continue to pray. In their minds, their grief, their anger creates its own version reality from reality.

A congregation of four believers gather around Christian’s bed. They close their eyes, muttering a strophic

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SEASONS OF LOVE
by Christina Harview

in spring prime,
i see birds in yours eyes
as you think of somewhen else.
and i, at the newly green tips
peer deep into you

in summer shine,
with an inadvertent burn,
i turn to face you
in the folds of the ocean,
but you are already gone.

in fall night,
i remember you
with finely braided strands.
crickets awaken all at once
their voice reminds me of yours.

in winter deep,
you pull me up
and quote Vonnegut.
the stars spin above us;
and the world stands still.
All that spring she kept telling me not to call her seventy-eight; she was still seventy-seven and would be that for another two months. As I landed in Miami, I wondered if she was ever still alive. At the hospital, I found her hooked up to a disturbing jumble of tubes—the backs of her hands swollen and discolored from the needle punctures in her veins. Nevertheless, there she was. My mother was a survivor.

When I flew down again in July, it was to bring her back to New York, so she could have some respite from Miami’s intense summer heat. As we sat in her perfectly furnished, immaculately clean, studio apartment, we were shielded from the harsh rays of the afternoon sun by the drawn Venetian blinds, which cast thick, dark shadows across the wall-to-wall orange carpet. My mother reclined on a long, narrow, gold-colored, clear-plastic-covered sofa. I sat across from her in a rather uncomfortable lime-green club chair. The chair rested unevenly on four inverted, two-inch carpet squares, each one strategically placed under a leg, in order to protect the carpet from unwarranted indentations. It occurred to me then how brave my mother was; not because as fastidious as she was, she had taken on the challenge of or- dering skills.

And so they were— in a neatly wrapped, unique sensibility. Almost immediately, I separated it from the others and secured it where I knew I could lay hands on it whenever I felt the want or the need.

The night I returned to New York from the emergency trip to Miami, I brought the photograph out once more. I now knew what I wanted to do with it. The night before, I had decided to redeliver the package. I informed by the postal clerk that they had moved to in upstate New York, she couldn’t have been more than sixteen. Her arms were outstretched on either side of her body, her deli-cate fingers curled around the tips of the furthermost branches. Gazing straight into the camera, her head tilting ever so slightly to the right, a shy smile crossed her fresh, innocent face. I wasn’t sure why, but I felt riveted by the image. Then it dawned on me: the person in this photograph hadn’t always only been my mother; she’d had another past; thoughts, feelings, experiences, desires—all filtered through her own unique sensibility. Almost immediately, I separated it from the others and secured it where I knew I could lay hands on it whenever I felt the want or the need.

The following afternoon, as I sifted through a week’s worth of mail, I noticed a partially crumpled, yellow piece of paper, which read, “Article too large for box. Please pick up at Post Office.” I wasn’t sure why, but I felt riveted by the image. Then it dawned on me: the person in this photograph hadn’t always only been my mother; she’d had another past; thoughts, feelings, experiences, desires—all filtered through her own unique sensibility. Almost immediately, I separated it from the others and secured it where I knew I could lay hands on it whenever I felt the want or the need.

The night I returned to New York from the emergency trip to Miami, I brought the photograph out once more. I now knew what I wanted to do with it. I carried it carefully into an envelope, brought it to a commercial photo lab on West Forty-Fifth Street, and asked them to make me a post-er-size print.

Now, as we stood in her apartment, I reached for the gray cardboard tube, which rested by my side and handed it to my mother without explanation. At first, she hesitated—then looked straight at me—an inquisitive twinkle in her eye. Perhaps she sensed some-thing outside the realm of our famil iar routine was about to take place. Removing the large, rolled-up piece of paper from the tube, she began slowly and deliberately to unravel it. As soon as her eyes made contact with the im-age, her body seemed to freeze, her eyes grew wide and her breath seemed to falter. For what felt like an eternity, she concentrated her gaze on the face before her, as if it were a long-lost friend, the recollection of whom, sud denly overwhelmed her with a multi-tude of feelings too deeply felt to be expressed. Only after the photograph had been completely unrolled, did she allow herself the luxury of a long, plaintive sigh.

I saw the apartment only once more when I came to collect her personal belongings, after the funeral. It wasn’t the same. Without her there, it was just a location in which she had ex isted, until time did what time always does.

For as long as I could remember, my mother had always ended every con versation by reminding me that in case anything happened, all the papers and household needs would be clearly marked and stored where I could easily find them. And so they were—in a neatly wrapped, old-style, brown leather folder, of a kind and quality they just don’t make anymore. This was one time I felt grateful for her considerable organiza tional skills.

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THE PHOTOGRAPH

By Ira Wohl

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A VILLAGE WEAVER AT WORK
by Noah Kojima

AWAITING HIM
by Paula Stoessel

She had wrapped herself
In imported paper
Flowered and formed,
Flown in from Scandinavia

So she sat in a stiff whicker chair
Waiting, reevaluating
The contents of her wrapping.

“Of course I love you (am I worthy?)”

Footfalls? No. A rise of cricket
Warming the summer still.

His whistle? No. A flat night bird
Sending Morse code to Orion.

She grew surer
That he would never come.
His knock? No. The house settling?
The breeze? No. A branch. A ghost?
She unwrapped herself (“I am not worthy.”).
Around two in the afternoon, the sun peeked around the west side of Orchid Lakes Assisted Living and into the window of Martha Flannigan’s ground floor apartment. There she dozed in her La-Z-Boy by the window, and as the room brightened, her hair, then her forehead, and finally her eyes came into full sunlight. Feeling warmth on her skin and seeing redness through her closed eyelids, she turned her head towards the window and allowed her upper eyelids to tug at the lower lids until they opened to small slits.

Her drab one-bedroom unit overlooked the parking lot, and she could see one of her neighbors, accompanied by a younger relative, pushing a walker across the black asphalt, which shimmered in the California desert heat. She sighed a long sigh and rolled her head back to the left, just out of the sun. The TV was still on. She wondered what time it was.

It was too warm by the window. She lowered the foot support on her recliner and inched her rear end forward until she was able to touch her feet to the carpet. Placing her fists on the seat cushion, knuckles down on either side of her, and extending her arms, simultaneously heaving forward, she came to a stand.

She looked around her apartment. Her daughter called it a dump, a trash pile, sometimes a minefield. A sewing machine sat in the corner. She used to make quilts and pillows for veterans at the local hospital and Christmas vests for her grandchildren. But the spindle had been idle for over a year now—ever since she moved in. Shoeboxes were stacked next to the sewing table, filled with thread, scissors, swatches of fabric, and pins.

The floor was the real danger zone. Garden gnomes, ceramic rabbits, wrought-iron birds, and a plastic Santa Clause were among the collectables sitting around the edge of the room, their time past. The items, some still with original price tags, were junk.

Two months of newspapers and magazines all but entombed her chair. She shuffled around them and into her dim bedroom. The white plastic pull-down shade was drawn over the only window, but the shade didn’t quite reach the window’s sill. A sliver of light beamed through the gap and lit a section of the opposite wall of the room. Her bed was made; she hadn’t slept in it for weeks. She admired the quilt that lay over her bed, without fully appreciating that it was her own handiwork.

She made her way into the bathroom and turned on the light, staring into the mirror over the sink. She propped herself up with her arms and moved her nose closer to the glass. She looked from one eye to the other, then drew back her lips, teeth bared, to inspect her yellowed enamel. Satisfied, she broke her gaze and tugged on the right side of the mirror, which opened a metal cabinet behind it. It was empty. Right. She bent down to open the cabinet under the sink and fished around for a shoebox. When she felt it, she reached down with her other hand to bring it to the sink counter. She removed the lid and found what she was looking for—a translucent orange bottle of Vicodin. There were only three pills left. Opening the bottle, she peered into it. She swished the tabs around to make them clink against the plastic and then emptied them out into her hand. One by one, she popped them in her mouth, swallowing them down with a sip of water from her bathroom cup. After the last pill, she gulped the rest of the water and set the cup down onto the ceramic edge of the sink with a loud clack. She closed her cabinet door and once again gave herself a good hard look.

This time, she raised her eyebrows and with her index finger, she pulled back on her right cheek until the skin in a small area of her face was more or less taut. Eighty-three years old, she thought. Or was it eighty-four this year?
broom, he swiped at a swallow’s nest that was just out of reach. The nest landed on the dirt floor with a swish, and to keep the bugs under control. “These birds is gonna to turn into pest themselves. You kids watch, now.” With a

A month earlier, Milo and Martha watched as he got out the ladder and positioned it under one of the rafters in the barn. There had been two swallow nests that year, and their father said you only needed one nest in the barn

“No, she made her own spot in the hayloft! Hurry, we got to get ‘em out before Daddy gets home.” Milo said.

She heard a thundering of feet up the tall wooden backstairs towards her room, and then Milo, her older brother

She settled back into her chair, put up the footstool, and sipped her coffee. The news was on, and she took the TV off mute. A local school bus had grazed a telephone pole out on highway 39. She knew the route; it had been the most desired in the county to drive, with few traffic lights and tame kids. A wave of sadness came over her, but by this time the Viscidin was working, and her reaction stopped there. For years, she had struggled to escape the memories of the children she could not save that day in late May. Only two weeks until school would have been out. The heavy rains, the slick roads, headaches in her lane… She swallowed. Her coffee had cooled to drinking temperature, but when she took a sip, the liquor still burned the back of her throat.

With each news clip, Martha raised her eyebrows and opened her jaw slightly, but the pills and alcohol soon stopped any new thought, and the news report became an unconnected series of images that occasionally evoked emotion, but were forgotten as soon as the next clip came on. Her eyelids hung heavy, ratcheting lower with every breath until her upper lids hit the lower lids, bounced back open for a breath, and then finally stayed closed. Though she would not remember which ones, old memories drifted in and out of her mind, not unlike the tumbleweeds that sometimes blew by her window.

Though it was only mid-morning, the second story bedroom of the western Virginia farmhouse was already warm and humid. The window was open, and occasionally a cool breeze mercifully wafted in. Martha sat on the floor with two dolls propped up across from each other, a small wooden plank she had found in the scrap pile out back dividing the space between them. Rusty tuna cans doubled as tea cups, and she took turns holding the makeshift cups to the lips of her ragged tea party guests.

She heard a thundering of feet up the tall wooden backstairs towards her room, and then Milo, her older brother by two years, burst through the door. “Calico had her babies!” he said, breathlessly. Calico was the half-feral cat which walked like a cat and talked like a woman. She sat in the corner of the loft, was Calico, eyes fearful with the approaching humans, but fierce motherly instincts compelling her to stay with her new kittens rather than run to protect herself.

“Let’s hide ‘em in my closet for now, ok?” They agreed in an instant and ran into the house, the door slamming as their father’s rickety old Ford sputtered into the driveway. Out of breath, they sprinted up the back staircase, taking the steps in twos. As she reached the next-to-last stair, she turned to look down behind her. She lost focus for an instant, and she under-reached with her rising foot and hit her shin against the step. Already turned slightly down stairs, she lost her balance and fell forward, bumping and sliding her way to the bottom of the staircase, until her fall ended in a moment of darkness.

Martha awoke with an oxygen mask over her face, which made the sound of the ocean every time she exhaled. She was laying flat on the ground, on a hard board, and three uniformed men stood over here. “Martha?” “Mama?” “Open your eyes.” One of the men was pressing his knuckles into her chest to wake her up. “What?” she yelled, and then opened her eyes. She looked around. At the edge of the room stood her daughter Corrine, arms folded across her chest, looking expectant.

The last thing Martha remembered was… her mind scanned back and forth…nothing. She focused harder, eyes gazed upward at the space behind her eyes. Still no memory came forth as recent or causative of her current situation. She was not in pain, nor did she feel short of breath. She reached her hand up to her face to pull off the plastic mask, which pushed down on the bridge of her nose, but one of the uniformed men pushed it away. “Keep your hand down, missus,” he said.

The resident nursing supervisor stepped forward and leaned over Martha, entering her field of vision. “The janitor came by to get your trash. You didn’t open your door when she knocked.” Apparently it was Thursday, trash day. “Then we found you lying in your chair. I couldn’t wake you up.”

Martha grimaced and tried to prop herself up on her arms. “Stay down, ma’am,” said the young paramedic, putting one hand behind her head and one hand on her chest. She glanced down; she had an IV in her left forearm. “Corrine, what are these people doing here?” she asked.

“Just let them help you, momma.”

“I don’t need any help.”

got down from the ladder, picked it up, and threw it in the trashcan, replacing the lid and walking away with finality. Martha had seen the nest from her play spot in the loft only a few days earlier, and she knew there were young chicks in the nest. Later in the afternoon, she and Milo returned to the trashcan, opening the lid carefully, but the chicks were dead. Less bird doo in the barn, supposed Martha, but it seemed harsh.

Martha and Milo ran down the stairs, out the backdoor, and across the dirt corral, ducking between the lower two boards of the three-board fence to reach the barn. They scurried up the ladder and into the hayloft. Stacks of hay towered around them, and they hurried towards the back of the barn, their steps muffled by loose hay overlying the wooden boards. Every ten feet there was a square hole in the floor, to allow hay to be tossed directly to the cows housed below. There, in the corner of the loft, was Calico, eyes fearful with the approaching humans, but fierce motherly instincts compelling her to stay with her new kittens rather than run to protect herself.
“They are going to take you back to the hospital for a quick check-up.”

“Well, I’m not going!” Martha sat up, this time, her sinewy arms gaining traction underneath her so that she could sit forward over her legs and draw her knees into her chest. The room teetered and steadied itself, and she looked around through squinty eyes. “I’m not going to the hospital,” she said again, and this time tried to stand up.

“Whoa, whoa, whoa,” said the paramedics, all putting their hands out. Everyone in the room moved towards Martha. As they closed in around her, she sat back down on the floor. Corrine crouched down next to her. “Are you feeling better, momma?”

This wasn’t the first paramedic visit to Orchid Lakes to care for Martha Flannigan. It was the seventh or eighth. Same thing each time—she couldn’t be woken up. The first time, she had been admitted to the hospital and had undergone extensive testing, the conclusion of which was that she was a relatively healthy, but memory-impaired addict of multiple sorts.

“Yes, I think feeling better.”

Corrine looked around, unsure what to do. She knew that no blood test or x-ray would detect the nature of her mother’s predicament. This was not an issue of infection. Maybe of mild dehydration. Normally, Corrine crossed her arms and stood back, while her mother fought off the paramedics but was eventually taken to the hospital against her will. Today, though, for some reason, her mother looked so vulnerable, so tired, so desperate to just stay put.

Her mother had a lived a hard life, and recent years of forgetfulness had actually brought relief to her weathered nerves. Corrine knew that the memories of school children she had saved—and lost—in a frightful bus accident 20 years ago no longer haunted her nightly. And she no longer talked of her father and the course his upbringing sent her on. Optimistic wasn’t the right word, but maybe ignorantly blissful? Content to ride out the rest of time on her La-Z-

Boy? There were worse things.

Corrine stood up. “Sir? Guys? I don’t think she needs to go this time. I’ll stay and take care of her. Make sure she drinks enough water tonight. I’ll check her medicine cabinet, too.”

The head paramedic protested. Corrine knew they were protecting themselves from liability.

“No. Please take the IV out.” Martha looked up at her with what Corrine thought might be grateful eyes. Corrine tried to see past her mother’s stony, weathered face, to see Martha’s nature as a mother, a sister, a daughter, all of her past lives bringing her to this moment, and closer to the end. The paramedics packed up their equipment, and soon, Corrine and Martha were left alone in the apartment. Corrine took in the scene: the bottle of rum on the counter, the piles of papers, and junk strewn about. Martha waited tensely. What would her daughter say this time? But mother and daughter, each mother and daughter themselves, just looked at each other. For a fleeting moment, Corrine’s frustration and Martha’s willfulness ebbed, and the two women felt only tenderness and appreciation for each other.

“HEMOSTASIS by Lucas Restrepo

MAN HARVESTING SALT by Dorwin Birt
SHIPWRECKED
By Jonathan Warren

WHALE
By Jacqueline Ngo

Past sunlit kelp and glimmering fish
down a silent abyss, a corpse drifts
asleep to the dull ache of the seafloor,
heavy as a freight train.

Scavengers alight on the lunar eyes.
Sleeper sharks ravage flesh that gives,
rolling their heads like senile old men.
Satin ribbons of blind hagfish ripple.
In a crater, a crab takes refuge. It prays
and purges bones, lovingly as a priest.

The pale glow of skeleton emerges,
vertebrae stacked neat as toy train tracks.
Giant worms saturate ribs and ridges,
blood-red and obscene. They gouge into bone,
laying eggs that bubble like hot tar.

The domed skull opens like a grand piano,
its insides splattered with starfish.
A cloud of flesh and sulfur blooms,
softer than the pages of old books.

GROWTH
By Rose Shan
HE LOST ME AT HELLO
by Donna Choo

“Kon nichi wa”
A tall white man in his 60s, maybe a bit older, stood behind me. He was dressed in an oversized shirt to expose his chest hair and gold chain.

I was waiting to buy donuts for the office because I had a craving for an Old-Fashioned.

Surely this wasn’t about to happen. I did not want to have this conversation. I did not want to have this responsibility. Not now, not here. I just wanted my box of donuts and to leave.

Mornings are an effort for me. I blame twelve years of Catholic school for many things but wearing a uniform conditioned me into a no-nonsense way with fashion to start the day. Don’t get me wrong. I like nice things and looking nice, but prefer if it took less effort altogether. I’d simply like a personal stylist too.

These days, my one crucial fashion accessory is the ubiquitous white headphones. Worn to distract myself with calming music before the start of the day, they also act as my armor to prevent unwanted conversation before I’ve had that first cup of coffee.

“Kon nichi wa,” he said again.

When I didn’t respond at all, he tried again. This time it was, “Ni hao.” Then, Yeoboseyo.

I took off my headphones and simply said, “No, I don’t understand—”

This man was relentless. Finally, I blew my cover and simply stated, “You know, I have a thing for Asian women.”

What would he have said if I’d told him I am a fourth generation Asian Pacific Islander of Japanese, Korean, and Native Hawaiian descent who grew up in Honolulu and lived in Japan for two years after college. I do speak some Japanese, but unfortunately no Korean. My great-grandfather was a railroad cook and my grandmother was born in Wyoming with a birth certificate that listed her as mongoloid. My grandfather played professional baseball and was featured in an exhibit in Cooperstown—yes, THE Baseball Hall of Fame. I’d like to learn Korean and Spanish too. Yes, Hawai’i is a state. Of. The. United. States. Of. America.

So what do I say to such a man? Why do I have to prove to some random stranger that I do happen to understand kon nichi wa, but that is not my truth?

Yes, these moments present an opportunity to educate and I have entered into such discussions hopeful, committed and obligated and it is draining and daunting because people like this man need help with figuring it out, and understanding, if they ever will.

So we must try, I must rally and believe, hope that we, I can make a difference, so that there may not be another woman accosted in a donut shop first thing in the morning.

This morning I just wanted an Old-Fashioned. Then, as I moved to put my headphones back on he made one more pronouncement.

“You know, I have a thing for Asian women.”

Finally, I found the right words. “So do I,” and left with my box of donuts.

CONTRASTS AND SIMILARITIES
by Ryan Alano
A bee lands on a beautiful rose and whispers, “In this moment you and I are one, Even if in the next moment you and I are none.”

_**SIMPLICITY**_
by Paul Camarena

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**SPEED**
by Caitlin Oldenkamp

My first year of medical school: I learned to study
My second year of medical school: I learned to think.
My third year of medical school: I learned to speed.

Third year of medical school: where the rubber hits the road both figuratively and literally. I had always driven speed limit. Or just about. Physics class and EMT school had scared me straight. KE = 1/2mv^2 It’s the velocity that kills you.

But then third year happened and I had to be glutes-in-chair at 6AM. In Torrance. Having just left that very hospital less than six hours prior. I was tired. I was spent. I was late. And the southbound 405 was clear at 5:37AM.

It started out as a slow creep up from 70 mph. Two months later I was flying at 88 mph as *Back to the Future* came to mind. I never expected to drive this fast in my lifetime. Now it was daily. Twice.

I had seen the MVAs in the trauma bay. The stethoscope in my hand and the ID badge at my hip could not protect me from physics. They also would not shield me from illness. But I ignored those thoughts altogether.

There was a job to be done. At 6 AM. In Torrance.
HAWAIIAN STARS OF GLADNESS
by Kenny Ferenchak

In a sky of ominous clouds, one shining star can reveal the path to the navigator.

Isaiah landed in my classroom a clever, unreserved 9th grader. All too disturbingly common in our Hawaiian town, his world to that point had been a confluence of adverse childhood experiences most would hope only existed in an academic journal—poverty, abuse, separation, adoption, substances, violence, incarceration, and mental illness.1 In my geometry course, his rough psyche, and tragically imprinted the proud lineages that had thrived for ages. Legends carefully passed through generations asserted that Hawaiians stood amongst the masterful Polynesian voyagers, navigating thousands of miles of open ocean using their brilliant understanding of the heavens and seas during an age when other seafarers dared not stray from coastlines.11 Yet typifying the stress brought by outsiders, misguided research amplified by popular culture suddenly shifted the narrative to one in which Hawaiians accidentally drifted to the remote island chain, nearly fitting into a contrived impression of a simple and backwards race.11

As social movements took hold in the 1960s on the continent, Hawaiians realized for the first time the Pacific. Anthropologists and cultural practitioners erected Hōkūle‘a’s (“Star of Gladness”), a full-scale reconstruction of the double-hulled canoes Polynesians had used to sail across the vast ocean.11 Driven to reclaim cultural pride, crews rediscovered the ancient art of wayfinding, sailed thousands of nautical miles using no modern navigational tools, and inspired peoples across the Pacific to revive their rich traditions of language, arts, and indigenous practices.

Supports began lining up in Isaiah’s life—stability in his foster home, a network of friends and teachers, and extracurricular involvement. But everyone saw the special impact of the canoe. As his class began visiting weekly to assist with repairs on Hōkūle‘a and learn from her crew, Isaiah quickly discovered his path, eagerly asking questions, volunteering answers, and leaping at opportunities to learn new skills. He was invited to join Hōkūle‘a’s leadership on sails around the islands and at public events. His exemplary involvement and the canoe diffused into the rest of his life. Isaiah rose to near the top of his class academically, became involved in a list of extracurriculars too long for his college applications, but the health of the child and community are also steered by broader historical, cultural, economic, and political forces. Providers must be skillful and proficient in their medical practice, but their actions and attention must also reach beyond clinic walls to the family home, classroom, and even a community’s canoe. Innovations like school-based health centers prove that we can transcend conventional barriers to better track the health courses of our youth.40 As a teacher in a challenging community, the image was painted of our students coming to class with the typical textbook-filled backpack, but on one shoulder was an additional bag labeled “hunger,” under one arm a package marked “abuse,” and around the neck a bundle denoted “homelessness.” The mission, it was said, was to relieve our youngsters of those extra burdens so they can focus on the task at hand. Isaiah and Hōkūle‘a’s push us to consider a greater aim. Beyond alleviating the extra weight of adverse experiences, we can tap into the resiliency inherent in these children and communities. As integrated teams of physicians, families, teachers, and others, we should build them up not merely to shoulder the excess burden but to transform their stress into assets of experience, wisdom, and skill so that they may ultimately return home to lift us all.

On June 17, 2017, Hōkūle‘a brought thousands to O’ahu’s shores to greet her triumphant return home from a three-year, 40,000-mile worldwide voyage. Still a glimmering centerpiece of the Hawaiian Renaissance, her mission has expanded as a beacon for environmental sustainability and indigenous knowledge across the globe. Visiting 150 ports across 18 nations; hosting dignitaries the likes of His Holiness the Dalai Lama, Archbishop Desmond Tutu, and UN Secretary-General Ban Ki-moon; and touching 100,000 lives during its circumnavigation, the humble Star of Gladness has carried its message of aloha to lengths that could not have been imagined at her launch 40 years ago.13

One Hōkūle‘a’s crewmember during the return festivities was Isaiah, now a senior on full-scholarship at the University of Rochester. He has been flown back to the island from upstate New York for other sails and conferences, but the grandeur of this homecoming was special. Lingering obstacles at home, mental health challenges, and academic struggles have not made college a smooth sail. But with only one year left to finish his degree in business and film, a sense of accomplishment is beginning to set in. His plans after college? Simply to reach as many youth as possible with his story, at home in Hawai‘i and beyond, letting them know that anything is possible no matter your life situation.

To know where you’re going, you must understand where you’re coming from. The navigator can only arrive at a destination by carefully tracking each movement from the origin. Isaiah’s story confirms the science that dark trajectories are plotted with toxic stress and that courses can be corrected with appropriate action at critical points of plasticity. Essential to this narrative, the adversity a child faces is contextual, and successful interventions must likewise appreciate the contest. Clinical approaches and healthcare policy are powerful, but the health and well-being of the child and community are also steered by broader historical, cultural, economic, and political forces. Providers must be skillful and proficient in their medical practice, but their actions and attention must also reach beyond clinic walls to the family home, classroom, and even a community’s canoe. Innovations like school-based health centers prove that we can transcend conventional barriers to better track the health courses of our youth.40

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References:


3. Clearly, direct causality between ACEs, brain development, and poor academic performance cannot be assumed in Isaiah, but his experience may be representative of the broader trends. See Hair NL, Hanson JL, Wolfe BL, Pollak SD. Association of Child Poverty, Brain Development, and Academic Achievement. JAMA Pediatr. 2015;169(9):822-829.

4. Similarly, direct causality between ACEs, ADHD, and behavioral issues cannot be assumed in Isaiah, but his experience may be representative of the broader trends. See Brown NM, Brown SN, Briggs RD, Germán M, Belanaritch PF, Oyeku SO. Associations Between Adverse Childhood Experiences and ADHD Diagnosis and Severity. Academic Pediatrics. 2017;17(4):349-355.


11. For one of many works detailing traditional Polynesian “wayfinding” and its modern-day practice, see Kyselka W. An Ocean in Mind. Honolulu, HI: University of Hawaii Press; 1997.


BIOGRAPHIES

Gihad Abdelhady – I did my undergraduate at UCLA. I am currently working in a lab here.

Barbara Adams – I’m a graduate of UCLA School of Nursing. I have been an oncology nurse for the past 10 years. I have worked in the oncology at UCLA and currently work in the CTRC outpatient research clinic.

Ryan Alano – Ryan is a 4th year medical student, who enjoys creating and capturing emotion through music and photography.

Robin Angelides – I’ve been working for UCLA Medical Center for over 30 years. Although I am a full time nurse, I have always found time to pursue my passion in art. My pictures are inspired by the UCLA Botanical Garden, which is a beautiful, peaceful place in the midst of the city.

Katherine Bailey – Katherine Bailey is a second year medical student interested in capturing the beauty in people and landscapes through photography and drawing.

Dinesh Bangara – Tech entrepreneur and photographer based in the South Bay.

Shelley Bennett – I’m a physical therapist at Ronald Reagan UCLA and I also work closely with the on campus hospitality program.

Dorwin Birt – Dorwin has worked at UCLA for the past 35 years. He is a computing support coordinator for the Intellectual Development and Disabilities Research Center. He also serves as technical support for a microscopy core.

Melissa Burdette – Melissa June Burdette is a valued member of CareConnect’s Hospital Billing Team. She is heavily involved in multiple workgroups and integrated owning areas. Originally from Louisiana, Melissa enjoys all things outdoors, and, in her free time, she enjoys reading and writing all types of literature, including, but not limited to, the fine art of storytelling through poetry. She also enjoys taking her Carolina dog, Honey, to the beach and on hikes, going to concerts, and bowling.

Paul Camarena – I find a measure of peace and solace when I write, I hope you can find something similar in my work. I’m a firm believer in the mental health benefits of undertaking artistic endeavors. I plan to pursue a PhD in public health with a focus on mental health/dementia.

Jeff Cartier – My hobby is photographing birds and wildlife. I have had my pictures in bird magazines, newspapers, forest service studies and literature. I have made friends all over the world through my hobby.

Donna Choo – Donna Choo is originally from Honolulu, Hawai'i. She once had a really great jump shot, and is still most proud of being named to the All-State team in high school.

Sally Elliot - Sally is an MD/MPH Student in the PRIME program at UCLA. She loves to spend time outside.

Zhaung Fang – Faculty of the Department of Anesthesiology and Perioperative Medicine. A passionate photographer with special interests in nature and landscape photography as well as traveling in the world.

Kenny Ferenchak – Kenny came to UCLA after teaching for eight years in Hawai’i public schools. He looks forward to one day returning home to the Wai‘anae Coast of O’ahu to serve his community as a physician.

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Sally Elliot - Sally is an MD/MPH Student in the PRIME program at UCLA. She loves to spend time outside.

Melvin Fleetwood – I have been employed by UCLA for over 14 years and prior to that worked at a bank and was in the US Navy for 4 years. Studied film at the University of New Orleans.

Brian Fung – Brian Fung is an Internal Medicine resident at Olive View-UCLA and former DGSOM graduate. He has been fascinated with photography since a young age and will never turn down an opportunity to take photos of the world around him.

Alex Garrett – Alex is a 4th year student at DGSOM. He is interested in cats, the outdoors, and literature.
Christina Harview – Science and art are one in the same when it comes to imagination.

Julie Hein - Julie Hein is a third year resident in Obstetrics and Gynecology at UCLA. She enjoys writing as a way to reflect upon her experiences in medicine. She plans to pursue a career in Family Planning or General Ob/Gyn.

Bryan Huebner – I originally grew up in Benicia, CA (a small town in the north/east Bay Area) and have always loved the outdoors, especially the eastern Sierra Nevada mountains. I did my undergraduate degree near Chicago and am so glad to be back in California where I can head up to the mountains more often!

Walter Jong – Enjoying long walks on the beach, in the mountains, in the desert, and the city armed with camera.

Nivedita Keshav – Nivedita is a first year medical student at DGSOM and in the PRIME program. She is deeply interested in issues of social justice and health equity, and is privileged to be working with and learning from LA’s diverse communities.

Noah Kojima – Noah Kojima is a medical student who is currently in South Africa for a Fogarty UCGHI GloCal Scholarship. He enjoys wildlife photography.

Safiya Lahlaf – Safiya is from Massachusetts and graduated from Northeastern University. She is currently a first-year medical student at DGSOM.

Harvey Lopez – My name is Hervey Lopez I am working in the CT section of the Radiology department of UCLA as a Hospital Assistant III in the Ronald Reagan Medical Center

Noah Kojima – Noah Kojima is a medical student who is currently in South Africa for a Fogarty UCGHI GloCal Scholarship. He enjoys wildlife photography.

Thomas Luong – Third-year medical student who enjoys exploring the human condition through various hobbies: hiking, camping, photography, archery, tennis, guitar.

Ishan Mehta – I’m a Pulmonary & Critical Care Medicine Fellow at UCLA. My passion for photography spurs from my love of traveling. “We travel not to escape life, but for life not to escape us”.


ON THE SHORES OF LAKE WAKATIPU, QUEENSTOWN, NZ
by Ishan Mehta

Eviola Nakhla – Eviola Nakhla is a first year medical student at DGSOM with a passion for fiction and poetry. She was born and raised in Southern California in an Egyptian household and enjoys exploring the Middle Eastern experience in her writing. When not running to PBL, podcasting lectures, or pouring over anatomy flash cards, she likes being outdoors, venturing to new food and coffee spots, exploring modern art galleries, and creating art with makeup.

Jacqueline Ngo – Jackie Ngo holds a master’s degree in Narrative Medicine from Columbia University. She aspires to become a neurologist.

Caitlin Oldenkamp – Caitlin hails from the SF Bay Area, studied at both UC San Diego and Columbia University, and is a third year medical student at UCLA. She (badly) plays trombone in her spare time.

Neil Parker – A true Bruin being at DGSOM for over 40 years, Dr. Parker now concentrates on teaching, patient care and photography

Jessica Poon – Jessica graduated from UC Berkeley in 2014 after majoring in Molecular and Cell Biology. She spent two gap years on the East coast conducting basic science research and taking Natural Science Illustration courses at the Rhode Island School of Design before joining the class of 2020 at DGSOM.

Melina Radparvar – I am currently a pediatric intern at UCLA. I love to read and write poetry during my spare time.

Jessica Rahman – Artist, beekeeper and public health enthusiast working in cardiovascular genetics with a wonderful team. I like to think my paintings are a reflection of the way I aspire to live: at the intersection of fantasy and mindfulness. I am emotional about leaving UCLA in a few months’ time, but ever grateful that it has prepared me for the road ahead (where I hope to use art and tech to shape a better world).

Lucas Restrepo – Lucas Restrepo is a Clinical Assistant Professor of Neurology at David Geffen School of Medicine.

Andrew Ro – Pizzazz. Passion. And a little bit of pixie dust. These are the qualities that Andrew believes are important to convey both in art and in life. His hobbies include being silly, dreaming large, and as you can ascertain from his submission, capturing life’s more fleeting moments via photography.

Benjamin Rostami – Ben Rostami is a 4th year MD/MBA student at DGSOM. He is an LA native who enjoys traveling the world anytime he can and photographing the beautiful scenes he comes across.

Tami Samuel – I create, therefore I am. Art is life and life is an art. Mammographer by day, artist by night This is what I do. My passion is graphic design, painting and mixed media collage art. This is what I love. I’ve been an employee of UCLA Health for 22+ years. An artist from birth.

Nadia Shamout – Nadia Shamout is a UCLA graduate with a B.A. in Anthropology and a minor in Middle East-North African Studies. She currently works for UCLA Hematology/Oncology in Westlake Village.
Rose Shan – Rose is a third year medical student and former editor of The BEAT. “Growth” is the third piece in her Anatomical Botany series (first two published in last year’s issue).

Elena Shink – As part of my work as a clinical research assistant in immunotherapy for sarcoma, I have had to learn to deal with patient death. Poetry and writing are an important tool in exploring the feelings that my work gives me.

Paula Stoessel – Dr. Stoessel is a retired UCLA Professor of Psychiatry who continues to teach psychotherapy to the UCLA Psychiatry residents. She is in private practice and is a member of the PLATO Society.

Andy Trang – Andy is passionate about studying many elements and styles of art including portraiture, figure drawing, architecture, technical illustrations, and abstract surrealism. His pieces are predominately in the medium of pen and ink where he practices the technique known as cross-hatching to render a multitude of textures, tones, and lighting effects through the precise placement of a myriad of lines. He hopes to continue to practice his art as an expression of the human condition as he pursues a career in psychiatry.

Nolan Ung – Dolan loves to shine bright.

Anne Wakamiya – Anne grew up in Richmond, Virginia, but has lived in California for over ten years. She has enjoyed writing since high school. She is currently a Geriatric Medicine Fellow.

Jonathan Warren – Jonathan Warren is a medical student with the Class of 2020 who hopes to pursue a career in Emergency Medicine. He originally hails from the great frigid lands of the San Francisco Bay. When he is not studying, he enjoys photographing nightscape, landscapes, and all the adventures in between.

Ira Wohl – I am an Oscar-winning filmmaker for the feature documentary “Best Boy”, as well as a licensed Clinical social worker, seeing the students of UCLA for more than twenty years.

Angela Wong – Angela specializes in street and pyrotechnic photography in Southern California. Her photos have been featured in online documentaries for CNN’s Great Big Story, Cultura Colectiva Plus, and Yorokobu.

KEEPING YOU IN LINE
by Jessica Rahman

FLOWING THROUGH THE NARROWS
by Nolan Ung