Letter from the Editors

Ad Libitum is a student club at Albert Einstein College of Medicine. Each year we produce one printed magazine containing highlights of the many submissions we receive from students, faculty, and staff at the college. Our hardest task is deciding which pieces of artwork and writing to include, because we receive far more submissions than could possibly be accommodated in a single magazine. The Ad Libitum group is truly a team, and we are constantly recruiting new members. If you enjoy reading this magazine, please consider joining our staff next year.

We are greatly indebted to Dean Kuperman, who has been our most steadfast fan. Without the ongoing support of the Office of Educational Affairs, this publication would not be possible. We are also grateful to Dean Spiegel, who has been a strong supporter and an advocate for the arts and the spirit of community here at Einstein. We thank Peter Dama, Karen Gardner, and our friends in Communications and Public Affairs for their assistance in publicity, website design, magazine production, new ideas, and enthusiasm. Vera Rico in the Graduate Office and the Graduate Student Council have also been instrumental in their support for our Literary & Art Nite (story, page 52).

Sarah E. Lutz, Alexandra Ogorodnikova, and Eric Y. Hayden
Editors, on behalf of the Ad Libitum team

Letter from the Associate Dean

It is now about seven years since a first-year medical student named Tara Vijayan arrived in my office and presented a proposal to establish a student-managed literary magazine. I hardly ever deny students’ requests to provide support for any reasonable activity that enhances and enriches their educational experience, and I was especially taken with the idea of creating a visible expression of the relationships between medicine, science and the humanities. But not even in my most optimistic mood could I ever imagine the path this particular project would take, with its broad representation of the Einstein community and expansion into the realm of the visual arts. Under the leadership of a succession of creative and energetic staff, Ad Libitum has enabled many members of this large and diverse community to express an eclectic mix of literary and artistic talents between the beautiful covers of superbly crafted and edited issues. Readers of Ad Libitum acquire new perspectives into the richness and diversity of our community and new ways of viewing and thinking about their outer and inner worlds. Thank you, Ad Libitum staff, for continuing to provide us with writings and images that are thoughtful, inspiring, amusing, interesting, enjoyable and instructive.

Albert S. Kuperman, Ph.D.
Associate Dean for Educational Affairs

Front Cover Art:

Nighttime Visitor

Bret Negro
Medical Student, 2nd year

Photograph
Editorial Staff


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Jessica Karp  Leather Dying-Fes
Ladan Golestaneh  Lost Opportunities
Greg Prelich  Peacock
Pamela Stanley  Room for Me?
Patrice Anastasia Cohen  The Gentle Fall
Sarah E. Lutz  Einstein’s Second Annual Ad Libitum Literary & Art Nite
Eric Yale Hayden  Sidewalk Shampoo
Dmitriy Kedrin  The One that Wandered Off
As the head geriatric neuropsychiatrist in an acute care hospital, I was having a rather typical day on rounds, examining patients with diagnoses of delirium and various types of dementia. After evaluating a woman with a history of Parkinson’s disease presenting with visual hallucinations, I had engaged the residents in discussing the possible etiologies for her symptoms. Out of nowhere, one of the students who had appeared distracted during the differential diagnosis blurted out, "Doctor, when did you know that you would specialize in neuropsychiatry?"

Taken aback by this interruption and not wanting to digress from the topic of the non-motor complications of Parkinson’s disease, I responded cryptically, with a smile, "Oh, I think my grandmother had something to do with it." Noting the quizzical looks on the faces of his peers and not wanting to perturb the attending further, he let the matter drop and rounds continued.

Later that night I reflected on my answer to the student’s question. My reverie brought me back to a time when I was just six years old. My grandmother, a 63-year-old expert seamstress, had developed a change in personality, becoming reticent and detached, which my family had attributed to new onset headaches. We realized that something more serious was afoot when she began sewing the bottoms of dresses to sleeves and became disoriented while traveling on the bus route she had taken for years to her job at the dress shop. She would sit trance-like for long stretches of time, circling her finger on a crocheted doily repetitively, suddenly apathetic about cooking and cleaning the house.

This worrisome transformation prompted my family to seek a psychiatric evaluation but, despite the diagnosis of depression, my family declined to treat her with medication. As her behavior worsened, her internist ordered a skull x-ray and the terrifying diagnosis of "brain tumor" was delivered. Shock and disappointment about the misdiagnosis of depression was replaced with anguish about my grandmother’s dire circumstances. She underwent surgery but lapsed into a three-week coma. When she emerged from it and was medically stable, she was discharged home with my family to recuperate.

Shortly thereafter, one of the most significant events of my childhood took place. I can still recall my cries of "Mommy, Mommy, I killed Grandma!" as I stared at my loving, strong grandmother lying crumpled on the floor of our hallway.

The doorbell had just rung, and she had gone to answer it while I followed closely behind. When she gripped the doorknob to turn it, she froze like a statue; I was astonished by her sudden immobility and called her name, but she was silent. As I tried desperately to open the door to help her, her grip on the knob loosened and she fell to the floor, remaining unresponsive for what seemed like an eternity. My father ran up from the basement upon hearing the thud and, as Grandma gradually regained consciousness, my parents helped her to bed. Later my mother explained that Grandma had had “a spell”—a
seizure—and she would be okay. My apprehension about having injured her beyond repair dissipated hours later when she awoke and comforted me, saying, "I'm sorry I gave my little dolly a scare."

Although I was very young, I already had shared a special bond with my grandmother as she had not only sewn beautiful clothes for my Barbie dolls, but had stayed with me several nights when I was hospitalized for dehydration subsequent to a viral illness. Now, having witnessed her take several falls and seeing her unable to feed herself her favorite macaroni dish, which she used to prepare for me, I understood that Grandma was very sick and would never be the same.

In medicine, a “sentinel event” signals the need for an immediate response to analyze an unexpected, undesirable clinical outcome. I can't help but think that one person's sentinel event can simultaneously be a pivotal, transforming, or defining moment for another, the realization of which may only come later. The love of science drew me to the medical profession, but I have no doubt that my choice of a subspecialty heralded from the indelible memories of my grandmother's sentinel event decades ago. Only in retrospect can I appreciate that as a young child I was immersed in a microcosm of neuropsychiatric illness as my grandmother’s cognitive, behavioral and emotional symptoms progressed: her headaches, confusion, depression, apathy, brain tumor diagnosis, and ultimately, that witnessed seizure. At the time, the brain's complexity was outside of my grasp, yet these events appear to have been locked into my subconscious, emerging later in residency to lead me toward my niche in medicine. Today, as I am challenged daily to help relieve the suffering of patients with devastating brain illnesses and neuropsychiatric symptoms that wreak havoc with their personas, I realize that my answer to the student should have been, "My grandmother had a lot to do with it."

The Kiss
Jayanta Roy-Chowdhury, MB, BS
Professor, Medicine and Genetics
A Demonstration
Stephen Lowery
Medical Student, 2nd year

(A)

Her heart was a quilt
Of umber hills
Where turquoise confines
The silver shadows
To its canyons.

A blanket of millet and maize
Rolls warmly to its belly
In the sun, that swells
Like a dying sun.

Or it is her soul that is petering out
Like our so inadequate
Bread crumb supply,
Fading with the shell-sounds
Upcountry.

Hunters
Angling streams of yellow flannel
Into a creek.

(B)

I recall
This thread once coiled
With fastidious attention
Round the spindle
Of our open hopes.
How did we come
To treasure this
By a process of removal
As trees removed
Will form a false meadow
(Rather than start with a real meadow
And ring trees round it?)

(C)

When we got it wrong
No governess was there
With long pale fingers
To shake our curls
(Or something)—
To stop the catalytic
Void’s opening
In the stillness
Of the landscape
Whispering
Nothing
At our feet.

Cooper Lake
Peter Dama
Creative Director, Graphic Arts Center
Watercolor, Woodstock NY circa 1985
**Simcha Means Joy**

Adam S. Levy, MD  
Director, Pediatric Neuro-Oncology  
The Children’s Hospital at Montefiore

_For Simcha’s father_

Horrible thing this  
Convincing your father  
You are dead

How many times  
Did he watch you sleep  
Read to you before bed  
Help you study  
Walk with you to pray

There is a plan  
Your father tells me  
Always a plan  
It is what it is  
*Baruch Hashem*  
Blessed be He

Who could refute such faith  
If not your father’s dead son

---

**Boiling Point**

Michel V. Gauthier  
Department of Medicine (Endocrinology)
The River’s Song
R.K. Sahu
Research Associate

On the chilled mountain peaks,
The sun can only melt the snow
None has dug for it ever a way
But the river knows where to flow.
Who would have imagined and why?
Its fall will create glorious rainbows
Nobody gave it a push from behind
Yet, with its own energy it flows.
There are thorns and forests to cross,
Rocks and boulders strewn all along
None has ever taught it the notes,
But the river never forgets its song!

3rd Year Almost Over and Still Exploring Potential Careers
Yves-Richard Dole
Medical Student, 3rd year

Tulip
Kausik Chattopadhyay
Research Associate

Forbidden City
Vincent Huang
Data Analyst,
Dept. of Family and Social Medicine
Montefiore

Yvonne Lui, MD
Assistant Professor of Radiology

Today, the return
of the shaved ice lady on the corner
outside the hospital.
Mango, coco, cherry, and blue.
Kerchief on her head, apron double-tied,
she recognizes us all as if winter never happened.

There under the round shade of an umbrella,
she’s been singing since my school days,
I managed
myself well then: nothing
to lose, worked hard, impressed my instructors,
won awards.

Tonight a down coat stuffed under arm,
cashmere sweater packed in a bag,
sitting in shirtsleeves
breathing the moist.
Things will go whichever way—it’s difficult
to know. I graduated
got a job, saved some money and invested
in love. The paved path here ends,

this evening’s ride
home on elevated rail, ducked into a long tunnel,
remarkable sun still glowing when we emerge.

Yesterday was a winter not of discontent,
tomorrow’s unknowable,
but today I’m on the cusp of something
glorious, spring.

Iris

Josephine Costa
Office Coordinator, Dept. of Psychiatry
& Behavioral Sciences

Bicycle in Winter

Karen Gardner
Manager, Internal and Web Communications
Silkscreen on Construction Paper
“Almost there,” I say to absolutely nobody. I bunch up my forehead in an attempt to concentrate that little bit harder as I use my hands and pure will to force the sperm cell into the egg to achieve fertilization, to create life.

I have been sitting over the intracytoplasmic sperm injection (ICSI) hood for too long and my back is killing me, but I manage this one last effort. It has been a long day, a number of difficult cases with poor sperm quality, but I was able to do ICSI on every one of them.

If I had more time I would take satisfaction in this wonder of life I was creating by shifting eggs and sperm on a petri dish. If I had more time, I would think about the expectant couples waiting to hear how many embryos they have to transfer, waiting for the chance to take home their own baby. If I had more time, I would appreciate that while I spent my entire day and my whole career dealing with zygotes and gametes and the building blocks of life, true life is grander than a few cells under the ICSI hood.

Maggie reminds me every day that life is more than looking at cells through a microscope. Even though she really wants to dress herself, she still needs someone to button her shirt, otherwise the buttons are all wrong and the shirt bunches up at one end. Left alone her hair remains in knots with a life of their own. This morning when I dropped her off at school, she ran off before I could give her a goodbye kiss. As I watched her blond curls bobbing along and being swallowed up into a sea of other six-year-olds, I felt a twinge from deep inside that carried news I didn’t want to hear.

I had hoped it would be a boy. I debated calling Ronnie; he hates it when I disturb him at work. He doesn’t really like talking about pregnancies, and anyway he wouldn’t have anything to say, and I am in no mood to have a conversation punctuated with long silences. So, I arrange to meet with Kathy instead.

“Here we go.” The lone sperm proceeds down the tube and into the waiting egg. Life can begin.

“A difficult case—the wife was almost breathing down my back,” I tell Kathy as we sit in the coffee shop across the road from the hospital. Tony, the owner, comes bounding over. The first time I came here, I had forgotten to remove my hospital ID. He
was delighted to have a real doctor—and a female one—in the shop. He immediately addressed me as Dr. Louise, and insisted on this name even though I explained that I have a PhD and not an MD.

“To me, you are a doctor,” he declared. It became a sort of joke between us. Every time I come in, he complains about some fictitious ailment.

Even though I haven’t been here for months he doesn’t miss the opportunity.

“Dr. Louise, so good you come, I have a bad pain in my side.”

“Then ask a real doctor,” I tell him and we both laugh.

“Why let the patients interfere with your work?” Kathy quizzes me. She is a pathologist and stares at cells all day. Although she has spent most of her life dealing with dead tissue, she never connects it with death itself. “I never speak to the widows or the children. I write a report and that is it.”

“I want to feel the people behind the cell.”

“Whatever. Anyway, how are you?”

“Well, I’m not pregnant again,” I give it to her straight.

“Oh, no.” She grabs my arm in what should be a sisterly embrace but feels like a vice gripping me. I pull away.

“What does dear Ronnie think?” Kathy asks.

“He doesn’t seem to care. He immerses himself in his work; I think it is just to get away from everything.”

“Don’t we all do that?” Kathy asks, peering at me over her glasses.

There is a huge hold-up on the bridge on my way home. We are in a standstill and going nowhere, so I use the time to check my voicemail.

There is a message from Felicia, an insightful woman married to a man with a low sperm count. They had many treatments before they came to us. She got pregnant on the second attempt and I was quite proud of my part in this. We became friends and I was delighted when she called me after the first trimester to let me know how she was feeling.

“Hi Dr. Hanrick, Louise, it’s Felicia Zin, I just wanted to let you know the good news, we gave birth to a beautiful baby boy this morning.”

I am touched not only that she had thought of calling me, but that she said “we gave birth,” not I, but we.

There is a flurry of red flashing lights and screeching sirens, and the cars move to let the ambulances through. Eventually, we snake past the accident and get a good look at the bodies being carried off and cars crumpled beyond recognition. I instinctively think of Kathy and her cells. Death as a molecular study and death as a tragedy.

As I come through the door, Maggie comes tearing up to me and buries her face in my jeans.

“Mummy,” she squeals. “What did you do today?”

I want to say that I got a woman pregnant but I see Ronnie hovering nervously behind her and don’t want to hurt him.

“I helped someone. It was hard work, though.”

“Well, that’s life,” she replies, quoting some television program.

“Yes, darling,” I say, ruffling her curls, but looking straight at my husband. “This is life.”
Ode to Sour Cream
Sarah Lee Schroeder
Medical Student, 2nd year

for Masha

O thick nectar of Europe,
O respite of nachos,
I salute you!

From wizened teat of yonder cow
comes your beginning.

Child of cream!
Child of Lactococcus!
Fermented fruit of graceful udder!

Bearer of
sixteen
percent
butterfat,
you shall adorn my hips.

Pure, white balance for chili!
Snowy crest of savory taco!
Savior of all humble baked potatoes,
rush to my aid!

Bather of jade discs
salted, peppered cucumber
my lips yearn for you.

Surely berries and brown sugar will find you,
and the days marked for you never expire.

Tureen with Bowl
Emese El Bissatine Pasztor
Faculty Spouse
Oil on Canvas

Breakfast at Tiffany’s
Jonathan N. Tobin
Professor, Dept. of Epidemiology and Population Health
The Object
Walter Ronaghan
Senior Director, Supporting Services

This is the second story in a trilogy written for Ad Libitum dealing with religious beliefs.

The object appeared just before midnight. The first reports came from visual observations, although to defense systems it was invisible. It was described as a bright light in the sky traveling from east to west around the planet and visible in the northern hemisphere. Unlike the communications satellites that were visible every evening, this object was both larger and brighter. The news channels immediately switched to full-time coverage of the object.

Washington was silent as the bureaucracy scrambled to find an explanation. The news was announced at a Homeland Security convention and banquet in Hawaii and the bar business immediately doubled. The Vice President was flown to a secure location in the Rocky Mountains. The military was put on full alert. Telephone systems and the internet were overwhelmed as people scrambled to contact authorities, friends, and relatives.

Governments around the world readied their military forces. Stock markets crashed as uncertainty led investors to scramble for safety. The Pope was awakened from his sleep. Police and fire departments brought in extra staff.

Pastor Bob, broadcasting the Christian Power Hour, explained to his television viewers that the appearance of the object was predicted by the Bible and was an important opportunity to obtain blessings by sending donations. The President and the National Security Council went into emergency session, debating what the object was and what to do about it. Arm ing a space shuttle and getting it into orbit with nuclear weapons seemed to be the option of choice. The drawback was it couldn’t be done in less than six weeks.

The CMN network awakened a variety of experts in the middle of the night for debates. Military experts, physicists, religious leaders, and pundits were brought in to explain the meaning of the Object.

Seven hours after the first sighting, riots started in cities of the United States. Food stores were looted. Survivalists loaded up on weapons and prepared to seal themselves in bunkers. Banks opened to long lines of customers wanting cash. Lines of cars appeared at every gas station, trunks loaded with containers to store the precious liquid.

Police were flooded with reports of theft and vandalism. Injuries among shoppers and looters filled emergency rooms. All of this was shown live on every television station, and chaos soon spread from the U.S.A. to Canada and Mexico, then the other continents. By 6 PM, martial law had been declared in every nation of the world but Afghanistan.

Churches, temples and mosques were filled. Prayers in every language were sent to every god ever conceived. Yet the object plowed remorselessly.

Head in the Clouds
Claire Bastie
Assistant Professor of Medicine

(Continued on page 14)
through the sky, hour after hour, its very silence adding to the sense of foreboding gripping the planet.

An online cult named Worship the Star began, and gained over three million members in less than six hours. As workers around the world stayed home to protect their loved ones or watch the drama unfold, commerce slowed and finally ceased. Transportation shut down for lack of workers and rioters and thieves threatened any vehicle that moved. Gangs roamed the streets of cities around the world. Military and police at first fought them but one after another gave up and focused on securing the wealthy and powerful, leaving the populace to protect itself.

Religious wars started after day 10, when the unbearable stress created by the object prompted leaders to take action. The first major war was “the Cleansing,” in South America, to eliminate all but true believers. Similar wars involving every major and minor religion started within 24 hours and spread around the world.

On day 11, the 20 million members of Worship the Star committed suicide.

On day 14 the world was shocked as a smaller light separated from the larger one and slowly descended to earth. Millions had already died. Every city was in flames. Trillions of dollars of wealth had evaporated. Governments had fallen. The world was ready for the final blow.

Defense department computers tried to predict the landing place of the object and the news stations, reinvigorated, once again began to explain to the listeners what it all meant.

The National Security Council was in session when the answer came. “The object appears to be coming down in the western United States, most likely Utah.”

Word leaked out and immediately two things happened. Thousands of people with working automobiles headed for Utah. And thousands of others with working automobiles headed away.

The military sent every unit within 500 miles in the direction of Utah. Every soldier, sailor, airman, and weapon was ordered into action. Every plane and helicopter was put into the force. The order from the Commander in Chief was clear.
warfare experts monitored their instruments as they moved closer to the light. On shore, soldiers prevented frenzied spectators from attempting to swim to the object. Rifles and artillery were aimed. Apache helicopters hovered, rockets and machine guns ready. Air Force fighter planes crisscrossed above, ready to attack on a moments notice. Dozens of news organizations lined the shore, their high magnification lenses broadcasting every tense moment around the planet. The boat approached to within six feet.

General Rufus T. Mucklenburger ordered the boat to a halt. “Look there, men. That hose is just below us.”

“Permission to check it out, Sir.” The Seals were eager to jump in.

“Hold on, hold on. Let me try and make contact.” The men could hear a low buzzing sound and kept quiet.

“Hello in there.” Buzzing.

“Hello in there.” More buzzing.

“Hand me that boat pole.” The General took the 12-foot aluminum staff and prepared to touch the light.

“Be careful, Sir.” Bolts on weapons were brought back and slid home into place. Seals and Berets jockey for position toward the bow and suddenly there was a splash to the starboard side.

“At ease, you assholes!” The Green Beret was helped back on board with murder in his eyes.

General Mucklenburger reached out and slowly shoved the pole into the light. First two, then three feet disappeared until he heard a “clink.” He pushed it back and forth a few times, repeating the clinking sound. “What the hell is this?”

He was startled when the light around the object disappeared and before him was a metallic vehicle, oblong in shape. Weapons pointed and safeties clicked off. A small hole appeared. It slowly grew until it was almost a yard wide. Inside the object was black, but slowly sliding across his vision he saw a very pale, humanoid-looking face. There were two glassy, dark protuberances where eyes might be expected and a small opening where a mouth might be. The face seemed to float in the darkness of the craft.

The General managed to speak. “The people of the United States of America welcome you in peace.”

The protuberances in the face seemed to shift, slightly changing in shape and size, the soldiers feeling they were being scanned.

“We mean you no harm. We come in peace. The world welcomes you. The people of the planet Earth welcome you.”

Newscasters were picking up the General’s words on their parabolic microphones and transmitting them to the world. The mouth of the being changed shape. The world held its breath as the being was about to utter the first sounds of an alien ever heard.

“Salt.”

Humanity gasped.

“What did he say?” Commentators around the world screamed for translators.

“I’m sorry, but what did you say?” The General was perplexed.

The little hole in the being’s face moved again and spoke more slowly. “Salt... Earth... Best... Salt.”

At the same time, the hose was withdrawn back into the ship and the “porthole” closed. The buzzing sound ceased. The bright light reappeared and slowly the object returned into orbit and rendezvoused with the mother ship. It continued in orbit for seven more days and disappeared as mysteriously as it came.

The Bean, Chicago

Mazen Sidani
Postdoctoral Fellow
Asymmetric Distribution of Stochastic Fluctuations

Adina Buxbaum*, Zach Katz*, and Friends
Graduate Students, 2nd year
Acrylic Painting
*Authors contributed equally to work

Cozumel, Mexico

Peter Dama
Creative Director, Graphic Arts Center
Watercolor

Couple

Yaw-Shin Ooi
Graduate Student, 1st year
Rice paper, stone, & Chinese ink

My Private Seals

Yardanna Platt
Medical Student, 2nd year
Aloise, Shoveling

Dave Norman
Student Spouse

I check email too much. It’s a habit, one of those things. I’ll be coding a webpage and a little window pops up saying I’ve got a message. Doesn’t matter who it’s from, I log in, the long way, and deal with it. Hi mom… I delete the spam.

There’s a program that tells me how many messages are in each account; it’s on the taskbar by my clock, but sometimes I log in just to make sure it’s accurate. Usually is.

I used to live in New England, before I got a job in the city. My desk looked out over the street, a blacktop ribbon dropped in a hurry and never picked up. They built houses around it, even in the weird triangles at funky intersections, sometimes with a room on the end like a slice of pie. There’s a secondhand shop in one of those triangles; in the tip are tools worn from projects half-finished and abandoned—first the projects, then the tools.

When it snowed the ribbon turned grey, then white, then it was time for the plows to make it black again. They have a baby plow for the sidewalks, with a baby shovel just small enough to miss the mailboxes. It must be fun to plow the sidewalks—your own highway where vehicles can’t go and nothing in your way.

Like getting away with something.

There was an old man across the street who listened to the Red Sox on his radio; white plastic lawn chair in his driveway, brown sweater vest, glass half full of Canadian beer. I watched him pour half the glass, turn up the radio, stare off into space. Never drank the other half.

It snowed a lot in winter, and he was out there every two inches with his plastic shovel. If six inches fell in a day, he shoveled three times. All hours of the night, too, scratching and thunk thunk thunking at the hardpacked snow where someone’s foot tamped it tight to the concrete. By the time he got to the sidewalk his front step had a dusting and you knew he’d be at it again.

He watched the sidewalk plow from his window, following it down the corner and out of sight. Then he’d be outside again, pushing that shovel through the snow-film towards the ridge that the plow left across his sidewalk.

“Aloise!” I called, panting, my coat still unzipped, snow falling steadily. I ran out to help, just jumped up and went out there, code line half written. “Let me do that, eh?”

“No thanks,” he said. “It’s just a little. Done in a minute.”

It must have made him feel important, scraping that tiny bit of snow. It just kept coming, little by little, taking his time away, making him feel useful. That’s not so bad; a little vice, perhaps, like half a beer.

It’s winter again and he’s probably still at it—still there, every two inches, every time the plow comes by. Aloise, shoveling uphill.
Night Ritual
Sarah Y. Berkson
Medical Student, 1st year

Drop anchor, Moon, in my discordant mid.
Lost answers cage me. Break cartilage, ribs
To pull me smooth up egg white chorus strings
Beyond the bars my song claw-knocks within.

Yes, up the up higher.
Steady, pull to
Yes, down the cold colder.
Arch the stars to
Quell-silence, defeat
This die-able beat,
This hot heat.
My knot speaks:

I want to be the best me.

Now bury stillness down my tick-tock head
Whose tumble fire plies your iron red.
Your anchor melts. Red ribbon. Ash. And then
I’m fallen black on blue to burn the day

Again. Again. Again.
Poetry after Rwanda

Carl Auerbach, PhD
Professor of Psychology
Ferkauf Graduate School of Psychology

In the aftermath of the machetes
my lover says to me: write me a poem
in which my breasts
are sunny mountain peaks,
my belly
is an amber field,
and my legs
are tall dark pines,
and then, smiling her gold-flecked smile,
she rests
her chin
upon the roundness
of her wrists
that once continued
into hands.

Coney Island

Sabriya Stukes
Graduate Student, 1st year

Chrysanthemum Dancer

Alfred J. Spiro
Professor, Dept. of Neurology
Chaplet of Gold
Jonathan Frankel
Medical Student, 1st year

My chaplet of Gold,
So precious and old;
I lived just for it.

All day and all night,
I fought the good fight;
Finally acquiring my treasure.

In possession of it,
Nothing compares, not a bit;
A joy incomparable to bliss.

So beautiful and pure,
The struggle worth it for sure;
Myself the son of happiness and love.

Things so wholly great,
Seem all to a doomed fate;
Lacking permanence nor any lasting joy.

And so came the terrible day,
When my precious went away;
Neglecting even to say goodbye.

Slipping right between my fingers,
Its texture still there lingers;
Memories serving only to torture.

Through blind hope did I steer,
For nothing short of a year;
Towards the hopelessness of my love returning.

Forced to face the truth,
My chaplet a baby tooth;
Separated, never to return.

I want so badly to forget,
To live life for something yet;
But in lieu, I am no longer.

The greatest sting of all,
No one understanding my fall;
Ignorance their convenient blinder.

Greater folly those who dost,
‘Tis better to have loved and lost,
Than never to have loved at all’.

Tell that to my heart,
If in its pieces you could start;
To gather in and make it understand.

For the man I knew before,
Was better off and still more;
Than the shadow that now lies in its wake.

My chaplet was truly great,
A love impossible to satiate;
But life without it, I have to wonder.

clouds don't pose
Alexandra Ogorodnikova
Graduate Student, 2nd year
Cumberland Island, GA
Central Park
Mazen Sidani, PhD
Postdoctoral Fellow

Winter Light
Kateryna Morozova
Visiting Scientist

Dishes by Sunset
Dave Norman
Student Spouse
My daughter began her clinical clerkships with a rotation in Internal Medicine at Beth Israel in June of the year. I drove her down to the temporary housing on 17th Street and helped carry her few belongings upstairs.

I knew that this would be an important transition from the world of textbooks and multiple choice exams and surrogate patients complaining of belly aches that they didn't truly have, to the real world of medicine, where textbooks are made of flesh and blood and incorrect answers and have real consequences. She had done well in her pre-clinical studies but I knew that many bright, book-smart students crash and burn when confronted with real patients who can be unsophisticated, self-destructive, manipulative or just plain crazy.

I wanted to offer some words of wisdom gleaned from my many years in the clinical arena. I hoped that she could somehow learn from her dad's experience. I wanted to tell her: trust no one, least of all yourself. Hold your opinions lightly and be prepared to shift your mindset when events on the ground continue to reveal the ever-evolving truth. And just because someone holds a higher rank in the food chain, it does not necessarily make his or her ideas correct. Respect authority, but remember your first obligation is to your patient.

I wanted her to know that interacting with patients and fellow health professionals would shake her self-confidence and self-esteem, but that she should never lose track of her inner goodness. The process is tough and filled with tragedy. It is ok to cry, but not during a code! I wanted her to know that bad outcomes don't necessarily mean bad doctoring. Health comes from God and we are limited in what we can do. On the other hand, the body has tremendous powers of regeneration and healing, and sometimes it is best to stand back and let it happen. Sometimes, the best medicine is no medicine.

I wanted her to know that mistakes are inevitable and she must learn from them. Making the same mistake twice, however, is inexcusable. I wanted to tell her to pace herself. Medical education is a marathon, not a sprint, and that if she burns out too soon, she would be of no use to anyone. She must try to keep a sense
of humor and appreciate the incredible human
tales that are about to unfold before her.

I wanted to tell her all of these things and
more. But I didn’t. I knew that experience is
not a commodity that you can transfer to an-
other person, no matter how much you love
them and want to spare them from the suffer-
ing. I knew that she would have to walk down
this road alone, and that I could not walk it for
her. I learned that from an old blues song. And
so I contented myself with helping sweep the
floors and clean the windows.

I spoke with her a couple of weeks later and
asked her how it was going. She told me a mid-
dle-aged woman had been admitted to her ser-
vice with severe abdominal pain but had re-
fused all blood work and diagnostic testing and
had decided to leave the hospital against medi-
cal advice. The intern on the case, having spent
the past year dealing with many such difficult
patients had stated, "If she wants to sign out, let
her. It’s her choice."

My daughter was disturbed. She was aware
that something serious might be going on with
this woman and asked if she could speak with
her. "Do what you want," said the intern, ap-
parently frustrated and feeling that there was
not much more a student could say.

My daughter asked the woman why she
wanted to leave the hospital when she was in so
much pain. "Because that intern disrespected
me," she said. "I don’t like the way she talked to
me, and I’m leaving! I’ll get those tests tomor-
row at my regular doctor’s."

My daughter tried to calm her. "You know
you may have something serious going on,
something that possibly can’t wait until tomor-
row. Won’t you please allow us to do just some
basic blood tests and x-rays? It won’t take long
and this way we can judge just how bad it is."

The patient hesitated. "You seem nice," she
said. "OK. I’ll do it for you. But you tell that in-
tern to stay away from me!"

"And what happened next?" I asked.

My daughter told me that abdominal x-rays
showed a probable bowel obstruction. The pa-
tient was taken immediately for surgery. My
daughter visited her the next day on the surgi-
cal unit. It was a bowel obstruction which had
required immediate surgical attention. The pa-
tient’s pain was relieved now, and the woman
thanked her for talking her out of leaving the
hospital.

When my daughter started her clinical rota-
tions, there was so much I wanted to tell her,
words of fatherly advice to help her make it
through. I told her none of these things. But on
that day in late June I did allow myself to say,
"You know, you are just beginning your third
year of medical school, you don’t know much
medicine yet, but today you probably saved
someone's life." Then, I hung up the phone. Af-
ter all, some roads must be walked alone... al-
though there is no law against your dad hiding
in the bushes and watching you along the way!
Dreams Of A Cesarean Section Down The Rabbit Hole

Michael J. Frey, MD, Assistant Professor
Department of Obstetrics & Gynecology and Women's Health

Jingle bells played frizid air, the OR dressed up red and green. My patient lay on Gurfenware, below her skin, a baby's deen.

"Scalpel please" I did announce, while Santa gave a car away, on radio tuned to tovish bounce, as cut was made into her blay.

Moving up the rectus sheath, sucking blood with lapish lac, I cut into the purple bleeth, I took one out and put one back.

Finally I reached her uterus, wherein the child did kitch and bave. Then taking knife with rubin nuch and down into the whitish tave.

Then cut the ruddish tave did I And sutured tave onto a zeen. Then pulled out baby (wurfing cry) then clamped and cut the cordic deen.

Joyous cries from mother berse, while outside friked snow did fall. Now for the surgery in reverse while jignel bekks played for us all.

Family
Elan Rosenblat
Medical Student, 3rd year
All or None
Alexandra Ogorodnikova
Graduate Student, 2nd year

Some crazy guy
In some crazy shirt
Orange

Is jumping around the lawn
And maybe stealing flowers from flowerbeds
For his girls

Smiling, he says something tender to all
Without getting attached to any
Doesn’t realize that these girls
Cry secretly under their plush blankets

Because each of them wants—daisies, maybe
But for her exclusively
Rather than a dozen roses on Valentine’s Day
To all

Serene Moment
Edmund Miller, PhD
Associate Professor, Medicine (Surgery)

White Table Lamp
Kurt Marsden
MSTP Student
Wire, paper, & lacquer

Morning Light
Soumya Ranjan Nanda
Research Technician

Once while coming home I saw a fairy,
A fragrant wind blew across my heart
as if I was in a prairie.
I thought I finally met the girl of my dream,
Because I could see her heart was modest
and pristine.

Respecting and admiring her beauty
became my common trend,
Just a few years later she became my best
friend.
For now I know that my love is so true,
But when will I tell,
that the fairy is no one but you?
The Little Bastards That Live In My Stomach

Michael J. Frey, MD
Assistant Professor
Department of Obstetrics & Gynecology and Women's Health

They don't really care about me
no matter what they say.
They bash and ramble inside my stomach;
howling and drinking whiskey,
while playing Arizona pitch and poker.

There is Cherokee Bill, who is a burner.
There is William Bass who always wears white,
Kid Monty (the morose) who drinks Pepsin,
Uncle Jon is the harmonica player
and Senseless Jack who leads the group.

At night they wrench and buck about,
Cherokee Bill burns old love letters in my gastric folds,
while Senseless Jack and Kid Monty shoot up the place.
William Bass carves his boney fingers,
into the side of my Pyloric Sphincter.

They swear they love me even when I try to kill them.
I drink pink pills to snuff, smother and slay them.
It calms them down and they promise to change,
chanting, "change, change," until slipping into sleep.

But bless the capacious coffee cup,
and the secret stresses, who wake
the little bastards in the morning.
And they all huddle together,
atop muscle and blood to plan against me.
Though they swear they love me.

Yikes!
Mark McBride
Clerk Messenger
Johnny Needs A Brand New Heart  
(Inspired by Johnny “Clyde” Copeland’s 1995 appearance on “Good Morning America”)*

Karen Gardner  
Manager, Internal and Web Communications

Now let me tell you something  
‘Bout when my left ventricle stopped its pumping.  
Y’see, I had this faulty chamber,  
And it was putting my life in danger,  
Because the blood, it wasn’t flowing,  
So my heart rate, it was slowing,  
Giving me the deep down heart ailment blues.

Well, it got so bad, I got real ill.  
Couldn’t be helped by no simple pill.  
And my doc said I needed a new heart.  
That way I’d get me a new start  
And have a better chance at living,  
Than the odds my own heart was giving,  
Causing my deep down heart ailment blues.

So, now I’m on the wait list.  
And I’m feeling kinda existentialist,  
‘Cause I’m waiting on a donor  
Of whose heart I’ll become the owner.  
And our fates are in the Lord’s hands,  
It’s not something I’d wish on any man,  
Having the deep down heart ailment blues.

Well, things they went from bad to worse.  
It was like I was under some awful curse.  
My heart, it needed assistance,  
‘Cause life had weakened its resistance.  
So, my doc implanted a HeartMate,  
A device to assist my heart rate,  
Helping me battle my deep down heart transplant blues.

Well, this HeartMate is really something.  
It keeps my left ventricle pumping.  
And the gasping wheeze it’s making,  
Is the sweetest music, there’s no mistaking!

It’s the sound of my HeartMate thumping,  
And, baby, there just ain’t nothing  
Better to chase away my deep down,  
Heartfelt, heart transplant blues.

*Johnny “Clyde” Copeland continued to perform sporadically while on the LVAD “HeartMate” (a battery powered pump that was embedded in his chest and remained there for 18 months before he received a transplant). Johnny received a heart transplant in 1997, but died from complications associated with surgery a few months later. He was 60.  

A Jazz Singer

Elena Kudryavtseva  
Associate, Rheumatology Department
First Year Dream

Outside my window
a red brick wall
holds the street
above the crowd
that flows like molasses
into the river to drown
The people don’t push
they absorb
and I can get trapped
if I’m not careful
There must be a tunnel
for I can’t swim
and I can’t die
and the man in the white coat
watches over us
like Moses at the Red Sea
And the Sea is red

Second Year Dream

It’s not my regular barbershop
as he glides his razor
across my head
with a surgeon’s touch
My arm falls asleep
and the clock says noon
but the sun is gone
just two lights remain
displaying my body
The people wear masks
and their rubber hands
draw lines and cut
like an ancient rite
and I must think
in gray and white
But I cannot think

Hope

Sarah E. Lutz
Graduate Student, 5th year
Celebration
Dipanwita Batabyal, MS
Graduate Student, 5th Year

Third Year Dream
I wonder if I’ll ever sleep
really sleep
as I watch the doctor
bring his ears
to the patient’s chest
and murmur words
like a faulty heart valve
calling for a rescue
The paddles are on the fifth floor
but I’m on eight
and I’m all alone
as I race down the halls
that are longer now
There are no doors
there are no stairs
And the elevators only go up

Fourth Year Dream
The foxhole is empty
just a friend with a heart
ripped open from the inside
pouring his life on my hands
and I must keep pumping
sixty times a minute
It’s my first job
I have a union card
but I’ve never had a job
and my arms are getting tired
the ground is getting closer
my head is getting lighter
I’ve never seen this before
and I’m lying on a land mine
if I take my hand off
It will explode

Dande and the Lion
Pia Guinto
PhD Recipient, 2009
Dials of dopamine, signals of serotonin, gradations of glutamine
Check off your boxes and dissect me with your blunt tools
Does the caliber of my catecholamines measure up to your standards?
No, you say. Well then—what can I do? Adjust my levels.

Purple pills, shortening synapses, aiming at alogia
But I cannot see you through this fog of nonchalance and this is amusing.
Is it safe to suppose that my passivity falls within your conception of normalcy?
No, you say—because your lens of perception is privileged. So adjust my levels.

Literary legacies, artistic antiquity, ingenious inventions
The world-moving accomplishments of mankind are certainly not rooted in apathy
Can we do nothing more than these preset machines command us to?
Still you say no. Why does it matter so much? Adjust my levels.

Despondent discoveries, reinvigorating realizations, indefinite insight
The Eastern notion of enlightenment is really an unsophisticated picture of perfect levels
Yet why do these ideas still persist in haunting and pervading my being?
Yes, I’ve got it. But it is still too difficult to bear. Adjust my levels.

Take part in the creative process and do not be over-comforted by the ease of rationality.
Too many men fall under this spell. Have they not felt the fur of Schrödinger’s cat?
Oh, the assuredness of numbers, equations, theories, processes; these things are easy.
More difficult is the unknown, untouched, unfathomed… the complex nature of the human spirit, the source of desire, the need for connection, the strength of solitude, the intricacy of love.
The repose we derive from logic and reason is, in fact, paradoxically similar to a serenity of faith some find in the divine. And the interesting and obvious connection is this—a tangible answer, a trusted guide, an unremitting ally, a constancy with which we delude ourselves.
Switch gears, adjust levels—I’ve adjusted my levels… let me adjust yours… with moments.
How do we savor a moment? How can I completely and utterly enjoy or appreciate any moment if I know it is fleeting?
On the starboard side of a sailboat, with the sun warming my face and the wind cooling my back… In a cold theater, wrapped up in the arms of a beautiful girl, her heartbeat and breathing slowly moving my hand… In the middle of a novel when I feel as though the words are written solely for me, when the author’s hand seems to reach up out of the page and grab mine…
How can I take in the glory of these experiences? Show me appreciation because I can’t feel it under the pervasive consciousness that these moments are ephemeral.
You can adjust any and all the levels you want, but I can assure you, this remains constant.
Or does it? I don’t know. Perhaps this is it—blissful ignorance.
Or perhaps it is the very recognition that I can never truly enjoy one moment that enables me to enjoy them all.
Grief
Sylvia W. Smoller
Professor, Dept. of Epidemiology

They chip away at you
Half your heart, or more,
But some remains—to regenerate…
Then one lung so you can hardly breathe at the news
They gouge you with their deaths
They take the core and leave the hole
First love, first friend, last friend,
But the remnant heart still beats,
And... slowly grows....

Drowned Meadow
Diana Hartel
Assistant Professor, Dept of Epidemiology
Oil Painting

Fall Colors at Wavehill, Bronx, NY
Martin Grajower
Assistant Clinical Professor of Medicine

Still Life
Anya Sedletcaia
Graduate Student, 6th year
Watercolor on Paper
Dad Gets Chest Pain

Paul Gross, MD
Assistant Professor, Department of Family Medicine

I should have suspected something was up when my wife, Diane, gave me a solicitous hug the moment I got home that night.

But I was dead tired—it was past eleven—and I was just enjoying her pity until she gave me a particularly earnest look and uttered the words every grown child dreads:

“Your dad’s in the hospital.”

Oh, Lord.

My father’s in reasonable shape for 87, aside from his hearing, which is dreadful, his poor vision, that touch of Parkinson’s disease, an unsteady gait and an enlarged, indolently cancerous prostate. But every morning he sets off for the newsstand, picks up The New York Times, then passes the day in his recliner, reading, napping, and fending off my mother’s prod-dings to be more active.

“Your mom said something about chest pain,”

Diane goes on. “His doctor sent him to the emergency room.”

Chest pain?

My father’s entire family is long-lived and free of cardiac problems. I call my mom to find out what was going on. Born in Belgium, my mother has a European accent and likes to talk. She launches into a meander-ing tale that finally brings us to yesterday, when she and my dad were walking to their condominium health club.

“He became pale and said he couldn’t go any further,” my mom says, “so I brought him home and he slept all afternoon.”

“What about the chest pain?”

“Well!” she replies.

“He happened to have a doctor’s appointment to-day. I told him to tell the doctor exactly what was bothering him—and he mentioned chest pain!”

“What chest pain?”

“I don’t know. He never told me about it. The doctor took an EKG and didn’t like what he saw, so I drove him to the emergency room.”

“You drove?” I imagine my father clutching his chest while my mother jiggles the wheel of their careening Buick.

“Well, he couldn’t walk!”

“Yes, but... Did they put him in the intensive care unit?”

“I don’t think so.”

“Are you okay?” I asked.

“Yes, I’m all right,” she answers impatiently, “just tired. I’ll sleep well tonight.”

Hanging up, I wonder what my dad’s internist could have seen that would have prompted this un-usual type of ER referral.

I also wonder at the “chest pain.”

Abandoned Picnic

Yonatan Greenstein
Medical Student, 3rd year
Digital Photograph
Given my dad’s other physical complaints—difficulty in swallowing fizzy drinks, funny tastes in the mouth, wobbly legs—I could imagine a twitch in the chest being a perfect addition to his symptom collection.

The following day I drive across the river to an unfamiliar New Jersey hospital, where I negotiate a network of confusing hallways. When I arrive at my father’s room, it is empty except for a short, vigorous blonde woman—Maman, my mother.

We hug. “They took him for a test,” she says.

I search her face for signs of emotional distress, but all I pick up is steely resolve and preoccupation. Her voice is exasperated. “His legs are wobbly, so I tell him to come to the spa. ‘You can walk on the treadmill. You can sit in the whirlpool. It would do you good.’ But no, no, no. He’s Mr. No!”

Although she herself is approaching 80, it occurs to me that if only my mother’s drive could be harnessed there would be no energy crisis.

“I want to massage his legs—that would help, too—but he has a rash on his calf, so I can’t do that either.” My mom conveys the bafflement of a relentless force glued to an immovable object.

“He looks well for his age, though.” She laughs. “The cardiologist told him, ‘I should take some of your blood and transfuse it into me!’”

Minutes later, I run into this same cardiologist at the nurse’s station. He reminds me of astronaut-senator John Glenn in his youth—trim, balding, confident.

“You father’s waiting for a dipyridamole stress test,” he says. “If it’s positive, we’ll cath him. If it’s negative, we can treat him medically and follow his symptoms. I think he’s got disease.” This puzzles me. I ask about his EKG.

“Left anterior hemiblock. I’m not sure if it’s new.”

I follow the cardiologist’s zigzag directions down more corridors, where I find my dad in a cubicle with two nuclear medicine technicians.

When he sees me, my father does a slow double-take. He looks like the elderly Cuban-born man that he is, like countless old men I’ve seen on hospital stretchers, with sagging olive skin, thinning gray hair, and a questioning expression.

“How are you?” I ask loudly.

“I feel better,” he replies. My father’s accent resembles that of I Love Lucy’s Ricky Ricardo. “Not bad for a young fellow.” He grins at all of us.

“What about this chest pain?” I ask.

“It’s better,” he answers.

It’s odd taking a medical history from my own dad, and irritating when I don’t come up with much. My father can’t describe the pain. It’s happened twice over the past ten days, both times while walking uphill to the newsstand. He’s also noticed some new exertional breathlessness.

“What about yesterday?”

“What?”

“Yesterday! With Maman!”

“She wanted me to go on the treadmill. I was too tired.”

“Did you have chest pain then?”

“No.”

“How about now?”

He touches his hospital gown and raises his eyebrows. “No.”

I remember, with frustration, that the medical interview, properly done, is supposed to establish a diagnosis in seventy-five percent of cases. Whoever came up with that number didn’t have many patients
like my father. I can’t resist pressing on his sternum.
“Does this hurt?”
“No.”
Reluctantly, I find myself concurring with the cardiologist. An 87-year-old man with new exertional chest pain has coronary artery disease until proven otherwise. My dad seems to enjoy my discomfort. “It’s a mystery,” he says happily. The cardiologist-who-looks-like-John-Glenn re-materializes and explains the dipyridamole injection to my father, who nods knowingly. He hasn’t understood a word.
“They’re going to inject something!” I yell.
“Oh.”
I retrace my path across the river—to precept at our family health center—while my father’s test is taking place. Hours later, I call John Glenn, whose brisk tone now has a veneer of certainty. “The study is absolutely clean. It’s only eighty-five percent predictive, but I doubt there’s a life-threatening occlusion. I’ll put him on a daily nitrate and see how he does. If the symptoms don’t get better, we’ll cath him.”
End of story.
I ask about the hemiblock—no, he still doesn’t know if it’s old or new—and am still puzzling over all this as he hangs up.
So does my dad have coronary artery disease or not? And why the nitrate? Just to be safe, the doctors decide to keep him one more night and my brother Eric, an internist in another city, drives down to meet us. That evening, I return across the river to find my mother and brother hovering about Dad’s hospital bed. He looks as radiant as a homecoming queen.
“I feel better,” he says.
“So, Dad,” I raise my voice, “Why didn’t you tell us you’d been having chest pain? Your sons are doctors, you know.”
“I know that,” he replies, “but you’d worry. If you had symptoms, wouldn’t you get them checked out first?”
I want to argue, but can’t figure out how. “It’s time to let us help,” I want to say. “You can’t do it alone. Let us in.” But I know that neither he nor my mother are ready for that kind of help, and maybe never will be.
A few years back my mother defecated copious amounts of blood into the toilet and told no one, in-cluding my dad, until her colonoscopy had been scheduled.
“Let’s take a walk,” Eric suggests.
Securing my father’s gown so that his bottom won’t stick out, we all stroll down the hallway together.
Dad plops a cane sporadically on the floor. He shuffles with knees bent, feet wide apart, looking ready for a horse to gallop under him. Long unruly strands of hair flutter horizontally off the back of his head, as if tugged by an invisible airplane.
His expression is dazed and contented. I think of the movie Sleeper, where Woody Allen, brought to life after two hundred years in a cryogenic cocoon, blunders spacially about a laboratory.
My dad, born at the eve of World War I, is equally oblivious. His gait is uncertain, he can’t see or hear well, and, in spite of what the stress test says, he may yet have heart disease—but he looks as happy as a clam. When we reach the end of the hall, he makes a
stuttering U-turn. “You didn’t have to drive all this way,” he tells my brother, then looks around blankly. “Which way?”
“Over here,” Eric points, and Dad motors off.
It looks like this little hospital stay has been just what the doctor ordered. The chest pain is gone and Dad seems peppier than ever.
Modern medicine will take the credit, but I, myself, think otherwise. Oh yes, I’m grateful for the tests and the pricey reassurance they’ve given us, but in my book it’s not the whiz-bang technology that’s really helped him. Rather, I think that Dad was cured by this infusion of concern from his wife and two busy sons. It occurs to me that he could use a few doses of ongoing attention from his boys.
“Look!” my mother says. “He’s not using the cane properly.”
She’s right, he isn’t. But he is walking. And he hasn’t said “no” a single time all evening.

This story was written in early 2001. The chest pain never did recur, but a year-and-a-half later my father died from metastatic prostate cancer. He was 89 years old.

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A Mental Portrait
Jessica Furst
Medical Student, 3rd year
the utter peace and tranquility of your deepest sleep
that I interrupt every morning
the black eye mask that hides a view of a world I
can’t imagine you waking up to
the smile on your pale face and the kind words you
use to entertain my incessant questions
you, the artist, clearly out of your element,
immersed in a canvas completely unfamiliar
I interrupt your sleep and you take off the eye mask
we look out into the darkness of the pre-dawn hours
what is it you see out that window and what is it
you think?
as our routine draws to a close,
I am humbled by your kindness
I stand by the foot of your bed as the daylight paints
the room
sending shadows to caress your face and perhaps
solace to warm your spirit

I stand in silence. I am trying to memorize your face
you are the artist but I am creating a mental portrait
a permanent remembrance of a man who inspires
tranquility and calm, watercolor and pastels,
shades of a soothing grey in a harsh world of black
and white

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Sole of Foot
Adina Haramati
Medical Illustrator

Twelve Apostles
Michoel Snow
MSTP Student, 1st year
Mother
Aurelia Minuti, MLS
Head of Reference & Educational Services
D. Samuel Gottesman Library

I miss your hand upon my forehead,
When illness made my body ache.
I miss your words of quiet wisdom,
When a mistake, again, I’d make.

I miss the clothes you used to make me,
Your love in every stitch entwined.
I miss the lullabies you’d sing me,
Your soothing voice still on my mind.

I miss your kitchen in the winter,
Fragrant with coffee and with pie.
I miss us sitting in the garden,
Under the oak tree, in July.

I miss how you would always hold me,
Whenever a man broke my heart.
I miss the letters you would write me,
When life forced us to live apart.

I miss your presence in my life,
Never again to share tears and laughter,
I miss you always and forever,
Today, tomorrow and thereafter.

Girl Begs Car to Car, Mumbai
Grant Hilary Brenner, MD
Psychoanalysis, Psychiatry & Consultancy

Still Life
Tina Pollack
Medical Student, 1st year
Oil on Canvas
Reinventing the Wheel
Joseph Sabat
MSTP Student, 5th year

Stare Mesto
Alena Janda
MSTP Student, 1st year
Drawing

Fireworks
David A. Wallach
Manager, Committee on Clinical Investigations
Digital Photograph

Two Taxis
Kari Plewniak
Medical Student, 2nd Year
Listening to the Heartbeats

Maria Kon
MSTP Student, 4th year

It is silent
It is so silent in my room.
Strings of music start to seep through
The wall of my thoughts and longings
For you and about you.
Heartbeats bring on the memories.
Fast: of passion and rage
Slow: of sighs and fulfillment.
A phantom of your smell reaches my temples
From a crumpled pillow that held your dreams.
Need wine to fall asleep.
Need wine to mimic the drunken state I have around you.
The Irony of Life in the Bronx
Magalie Bruneus
Medical Student, 3rd year

I was most struck by a courageous, bright and witty 10 year-old girl who, despite residing in an unstable living situation and being physically abused by her mother, seemed upbeat and optimistic. I always find these cases heartbreaking. Children don’t deserve this and yet, judging by the rising demand for social workers, situations just like this are quite common in NYC. A person of this age should worry about school, playing games, and friends instead of fearing for her safety at home.

Her eyes glistened with tears as she recounted the experience of being thrown against a wall, an image that will haunt me for a long time. Despite it all, like every hopeful child, she still cared about her mother and worried that she deserved this abusive treatment. Yet she was simply caught in a custody battle between her parents, and appeared to arouse her mother’s jealousy and wrath when her affections—and perhaps consequently her guardianship—seemed to sway toward her father.

Attempting to embrace the nonjudgmental representation of my own little white coat, I desperately tried to understand all facets of the story. I tried to make sense of this poor girl’s plea. I knew there had to be more than what was said, more than what I was hearing. The mother simply had to be insane for attacking her own child. I tried to comfort the little girl as best as I could, desperately searching for unbiased words. I did not want to utter condemning remarks against the mother because the little girl in me, shielded in my short little coat, was as hopeful as she was. The little girl in me wished that this was not permanent, that maybe the mother was going through a transition, maybe she will awake one day horrified by her actions. Perhaps then she will make amends and be forgiven because she injured her most precious gift, her most valuable, loyal, loving and affectionate friend. I took comfort in believing that all was not yet lost, that the mother had a momentary lapse of judgment. Yet, I knew that this was all too typical, that perhaps a separation was the best solution.

Meanwhile the irony of life continued, as I met a 36-year-old woman who had difficulty conceiving a child. As I interviewed her, my own primitive self felt that this was yet another situation where life was unfair. Parents with deep desires to conceive should be able to conceive and those that routinely use their children as punching bags or Frisbees should not. Unfortunately, it’s never that simple.

Again, in my own little white coat, I reverted to my role as a medical student, trying to believe that people are fallible, ephemerally emotional beings. Perhaps the abusive mother was once a hopeful, expecting mother who deeply desired a child, only to have terrible life events cause such a drastic and dreadful change.

As I gathered the hopeful mother’s history, I was optimistic that she would be an excellent parent. Life and love will prevail. She will seek help when needed. This would be different... but of course, I may never know.
Calling Carissa

Natasha Shapiro
Medical Student, 3rd year

This is part one of a two-part story. The second part will be published in next year’s magazine.

Back of her head pressed against the backseat window and legs stretched out across the seat, Carissa watched her grandmother’s anxious face as her grandfather sped along Mercy Parkway on their way to East Hope Psychiatric Hospital. The New England foliage stretched on both sides of the road, with an array of red, orange, yellow, and green swaying in the late October wind, but none of the three noticed the beauty around them—they had taken this route too many times before.

“You’re hot, then you’re cold,” hummed Carissa along with her iPod, barely moving her lips. Closing her eyes, she let the Katy Perry lyrics bring her back to her first visit to East Hope last May. She had just turned 15 at the time, and her best friend Matt had taken her to get fake ID’s as his birthday present to her. It took a lot of preparation. Matt had insisted on putting make-up on Carissa, who, having been a tomboy all her life, told him to go “fuck himself with his eyeliner.”

“Girl, relax,” he tried to coax her. “This guy is supposed to be a sure thing and all, but even a conman won’t give you a fake if you look like you’re twelve.”

Carissa compromised. She agreed to let him do her make-up as long as he did not force her to wear the dress he had found in his older sister’s closet, who, being away in college, “wouldn’t notice anyway.” Not even the promise of a fake ID could make Carissa give up her slogan t-shirt, torn jeans and dirty Keds. An hour later, having stolen Carissa’s scrunchie and letting her straight, light brown hair fall to her shoulders, he put a mirror to her face and said: “My oh my, my dear, don’t you look mighty pretty.”

“Fuck off, homo,” she replied, trying to stuff the ends of her hair into her t-shirt.

Matt had been her best friend since he moved to their town in seventh grade. In fact, he was her only friend. Carissa was a shy girl growing up. She kept to herself, preferring to read books or even playing with the dolls and teddy bears that her mom showered her with in the rare moments she spent with her daughter in between seeing patients, performing surgeries, and delivering babies at two different hospitals every day of the week. Carissa didn’t have a father. Of course, she knew, everyone has a father, but hers wasn’t in the picture, and she never cared enough to ask why not. That her mother was barely in the picture didn’t bother her either. She was content being left alone. Carissa’s teachers tried to get her to socialize, but she refused. In class, she would sit in the back, scribbling in her notebook. During lunch, she would eat her sandwich in the corner, not making eye contact with anyone, an open book at her side. Her peers thought she was weird. Too weird to even pick on. Until the sixth grade that is. Starting Junior High School was a change. Just being “shy” did not go over well anymore. Her classmates competed with each other to get “Carissa the Freak” to say or do something. She became the constant target of spitballs, and somehow old chewing gum always found itself into her hair. But Carissa remained distant and unaffected by the torture until a year later, when Matt arrived.

Matt’s family had just moved from England. He had a British accent. While many may find a British accent attractive, it is anything but that in the seventh grade. Not to mention the extra 20 pounds around his belly, arms, and legs, and his curly, red hair.

Emerald Lake near Carcross, Yukon

Nisha Sandesara
Medical Student, 2nd year
When the teacher left the room after introducing Matt to the class, and he took the only empty seat—next to Carissa—a snickering passed through the classroom.

“Hey, Freak!” yelled out Allen, the popular kid who headed the war on Carissa. “Looks like you have a boyfriend now!”

Carissa did not respond, continuing read the book under her desk, but Matt looked around nervously, and said with a shaky accent: “No, no, I have a girlfriend back in England.”

“A fatso like you?” asked Allen. “What’s her name? ‘Matt’s mom’?” The classroom roared with laughter, as Matt’s freckled cheeks turned red.

“No, I swear!” Matt’s accent sounded even heavier.

“I swear!” Allen tried to mimic the accent.

Matt looked around, despair in his eyes. Carissa kept looking at her book.

“Why don’t you two losers kiss before Mrs. Bickerson gets back to the room?” Allen started clapping his hands, and chanting: “Kiss, Freaks, kiss!” with the class following in his lead. Carissa didn’t stir. Matt nervously looked around. A glistening drop rolled down his cheek.

“What are you, a fag? She’s not that ugly! Just fucking kiss her already.” Allen pushed Matt out of his chair. As Matt plopped at Carissa’s feet, hitting his head on her chair, she slowly raised her eyes to meet Allen’s leering face.

“What are you looking at, Freak?” he asked. “I’m doing you a favor here. This is the only way you’ll ever get someone to kiss your nasty face.” She looked down at Matt, who was quietly sobbing, curled up into a ball on the floor. And then she did something that no one had ever expected from quiet Carissa. She sprang to her desk and jumped on top of Allen, grabbing his neck as he crashed, loudly hitting his head on the neighboring desk on his way down. The classroom gasped as she continued to squeeze, sitting on top of him, her teeth clenched and showing, shaking his limp body against the floor. He had lost consciousness from hitting his head. But she kept squeezing, and Allen’s face kept getting redder.

“Carissa Loewenstein!” Screeched Mrs. Bickerson, sprinting toward her. She tried pulling her off Allen, but Carissa would not let go of his neck. She kept staring into Allen’s face, her eyes full of hate.

“Help me get her off him!” Mrs. Bickerson yelled, and a few boys unclenched Carissa’s fingers from Allen’s neck as the teacher pulled her away.

Carissa was suspended for a week, and Matt came to visit her every day. At first, she refused to answer the door. But with the urging of her mom, who was relieved to see another child being friendly toward her daughter, she finally let him in.

“I didn’t do it for you, homo,” she told Matt. “He just got on my nerves, that’s all.”

“You shouldn’t use the word homo, it’s derogatory,” replied Matt. “Plus, I have a girlfriend, so I can’t be a homo... err... homosexual.”

“Whatever, homo.” And with those words, a beautiful friendship began. Nobody liked Matt and Carissa. But they didn’t need anyone to like them. They were perfectly happy hanging out together. In eighth grade, Carissa invited Matt over while her mother was working night call at the hospital, and offered him shots of expensive scotch that she sneaked out of her mother’s liquor cabinet. Although hesitant

(Continued on page 42)
at first, Matt was soon lying drunk on her living room floor, laughing at late night TV, while Carissa was vomiting in the bathroom.

Drinking became a bi-weekly thing for the teens, each time Carissa’s mother worked nights. Carissa made sure each drinking session involved shots of different hard liquors, so that no bottle went empty too fast. But her mother never noticed. She was now spending the rare free moments she had going on dates instead of checking on her daughter. By high school, marijuana was added to their bi-weekly “sleepover” parties. Carissa had overheard a sale in the girls’ bathroom, and broke out of her shell for long enough to befriend the dealer. She presented Matt with his first joint on his fourteenth birthday, and together, high and buzzed, they went to a local mall and got matching piercings in their right ears. But their get-togethers came to an abrupt end when Carissa’s mother was killed in a car accident after falling asleep behind the wheel on her way home from night call.
I have been to the top of the mountain, and it is cool

Simon P. Onderi
Medical Student, 1st year

Dreams came true,
And it happened as if without a clue
If that was all I wished to do
There would be nothing more to pursue
Ask them,
And they will tell you

Thus far we have come
When we started we were down
To despair, we thought we’d succumb
But we still eyed the crown
Hear them,
And they will help you

Rest time was so scarce
Respite from tedium quite sparse
Endless toil a bit of a curse
But we knew it would all pass
Follow them,
And they will show you

Out in the cold one early morning
Why I did it, I inquired
Looking back as now sojourning
Explanation is required
The total sum of a man inspired
Belief in the boundless limits of man’s ability
From the top of the mountain I could now see
The future spread out like an endless sea
Human spirit’s infallibility
Anchored only by a sacred dedication
The only reason for Education
Mankind’s happiness the ultimate vindication
Heed them,
And they will heal you.

Shanghai 2008
Robert Berkenblit
Assistant Professor of Radiology

Bless
Allison Tan
Medical Student, 3rd year
They have called a truce to mark the day,  
Though she knows it will not last.  
It is like in the Middle East—  
A day set aside to mark the passing of some sacred moment.

She is filled with dread at the thought of this time.  
He is happy, almost excited, at the possibility of reparation.  
They have grown apart.  
The gap has widened beyond easy crossing.

For her, this night is an ending;  
For him, the possibility of new beginnings.

They cannot agree on what to do, where to go.  
Dinner and a movie, but where to eat, what to see?  
He wants to see war, she anything but.  
He wants to eat volumes, she nothing at all.

She wants to drink the evening out of consciousness,  
Though, as the designated driver (he still has no license),  
She cannot do that.

He sits across the table from her,  
A mark of the space that has grown up between them.  
She remembers a time when she would have wanted to reach across that space,  
Watches the memory of it flow away like water under a bridge flows out to the sea.  
Memories flow away from her out the window to who knows where?

She longs to flee, to jump into the car and drive away and away from this moment,  
Away from this stark reminder of one third of her life spent chasing rainbows.  
She lacks the courage on this, of all the days, to turn her back,

To follow the pull of her heart, her soul.  
They speak of moments, of tenderness and pain.  
They have grown apart, he says, because they do nothing together.

She counters with the reminder that there is so little common interest.

They need to build things back up, he says, and find the middle ground.

She is revolted at the thought of more time in his company.

It is a new feeling for her.  
She has felt many things over the years for this man, her husband,  
But disgust is new.

She rolls it across her tongue,  
A spoiled vintage, a bad year.  
The truth of it runs down her throat and settles uncomfortably in her stomach,  
A bitter and painful reminder of the rest of the night, maybe the rest of her life, to come.

**Leaf**

Patrice Anastasia Cohen  
Graduate Student, 3rd year

*Digital Photograph*
She closes her eyes and remembers another love,
The blue, blue depths of the eyes of one she once
loved with all her heart,
Recalls the laughter and understanding, the hope
and longing of a deeply intimate connection.

For a moment that is all too brief,
She is there with that love on this night of sacred
remembering.
They are alone together, her soul safely in his keep-
ing.
She thinks of him with a longing that doubles her
over.
He brought such joy to her life,
He renewed her through faith and laughter.

“Where are you?” her husband asks.
She cannot bring herself to answer,
She is anywhere but here, in this moment.
She reminds herself that the moment is all there is.
Each life built on moments upon moments, choices
upon choices.

Where did she lose the moment? The choice?

She cannot bring herself to cross the small space of
the table,
She hangs there in the limbo of not knowing.

Her husband, now, this moment, wants her.
With words he tries to reach across the divide.
But she is out the door and up the road,
Straining with all she is to cross another gap,
To set herself free to bring healing and laughter and
love back to her heart.

She cannot foresee what is to come,
But she knows with all her heart that she must take
the risk.

In memory of a friend
Peter Schmidt
Computer Based Education
Charcoal

Bronx Blooms
Eleanor Russell-Goldman
PhD Recipient, 2009
Faeren
Tan M. Nguyen
Medical Student, 1st year

It was a clear day, the sun shining unobstructed over the island called Chuuk. On its eastern shore, towering brown cliffs over 60 meters high ran right up to the shoreline. From a distance, the cliffs were a magnificent sight, especially during the spring, when the jasmine orange flower bloomed at all elevations of the cliff. Its aroma, combined with the scent of the ocean breeze, was said to be an aphrodisiac to Faerens, and was thus nicknamed the “Cliff of Love.” It was wintertime, but the breeze was still strong enough to turn the windmills that dotted the top of the cliff.

Edwin and Chaucer sat right at the edge of the cliff. The boys were both 18 years old, two years away from adulthood. As the eldest of their siblings, they would soon assume responsibilities of the household, including managing the family’s finances and maintaining their families’ respective guild memberships. Edwin didn’t like to think about that. Luckily, he had Chaucer, who kept spitting malt candy in his direction. Edwin laughed, and shoved Chaucer off the cliff. Chaucer screamed as he tumbled to the churning waves below.

Halfway down to the sea, Chaucer unfolded his wings and abruptly swooped back toward the sky. Like all Faerens, Chaucer had a pair of enormous wings attached to his back between his two shoulder blades. Normally, the wings were tucked so neatly that two Faerens could not see each other’s wings if they were standing eye to eye. Completely unfolded, however, the wings spanned almost one and half times a Faeren’s height. Chaucer playfully somersaulted and dove a couple of times before flying toward the ocean. “Don’t go out too far!” Edwin yelled. “You’re going to swim back if you get tired, because I’m not helping you fly back!”

In the distance, past Chaucer and toward the horizon, a group of dragon herders majestically made their way to an unknown destination. No one knew just how many islands were out there, but it was clear that a normal Faeren could not reach even the closest island by flying unaided. Dragons, gentle furry giants with massive wings, long necks, and even longer tails, were needed to explore the farthest shores. Unfortunately, by the Emperor’s decree, dragons were strictly the domain of the Royal Army and the dragon herders, merchants who traversed the ocean to maintain communication and commerce between the islands.

Edwin sighed. Dragon herding was a demeaning job, and with the increased activity of the Petran rebels, the Royal Army was a virtual death sentence. But Edwin wanted an excuse to explore his world. All his life he heard stories about the colorful Coral Sea north of the island of Durbar and of miniature dragons on the island of Gea. There were even rumors of mythical creatures called Humans on the westernmost known island of Flasia. Legend had it that they looked just like Faerens, except without wings. Edwin found that captivating, but he would never know. He came from a family of blacksmiths, so a blacksmith he would become. It seemed that Edwin was stranded on Chuuk forever.

“BOO!” A sweet, melodious voice reverberated behind Edwin. He feigned surprise, and “fell” off the cliff for good measure. Edwin did not need visual confirmation that the playful perpetrator was his and Chaucer’s lifelong friend Celeste. He caught her sweet rice aroma long before she made any sound. Edwin thanked the stars for his sense of smell; Celeste, like the
rest of her family of hunters, could sprint and fly with a bag of bells and remain absolutely silent. He flapped back to the cliff’s edge and sat next to her.

Celeste frowned. “You know I don’t like it when you just pretend to be afraid, right?”

Edwin laughed. “And you know I don’t like it when you use your hunter tricks on me, right?” Celeste broke out in a grin, her flawless face a portrait of an angel without her halo. Edwin’s heart jumped every time she smiled at him. Then again, so did everyone else’s. Celeste’s beauty made her a local celebrity. Simply put, no one was more exquisite or more graceful.

Some of the elders claimed she was as beautiful as the Royal Princess Tesla. No one knew for sure—commoners living on the Imperial Island were obligate residents and employees of the Emperor, and members of the Family rarely left their paradise. Rumor had it that the Royal Palace was even more restrictive and secretive, so much that it was nicknamed “the Iron Box” of the Island.

“Where’s Chaucer?” Celeste asked. Edwin looked out again to the sea. Chaucer was still somersaulting, chasing flocks of sea birds and diving with them as they hunted for fish.

“That Chaucer,” Edwin chuckled. “Always the joker. Did you know he acquired another bag of malt candies from somewhere? He won’t tell me from whom.”

Celeste laughed. “Oh, you know Chaucer. He probably sweet-talked some dragon herder’s daughter.” Her face darkened. “Unless he’s a hardened criminal with illicit connections to the Petran Rebellion?”

“Chaucer? He couldn’t kill his own cow. I don’t know how he’s going to manage being a butcher like his father. Unless he runs away with a circus troupe.” Celeste punched Edwin for his mockery.

When Chaucer realized that Celeste had arrived, he immediately soared back to the cliff’s edge. As he plopped down, Celeste demanded, “How goes it, rebel?”

Chaucer was quick on his feet. “Rebel? How many times do I have to tell you, I’m the Emperor. Now kiss my ring and bow down to my greatness.”

Edwin shook his head. “I refuse to acknowledge a clown as my ruler.” Celeste laughed.

Celeste playfully jabbed his knee and said “It’s okay, Chaucer. We know you’re a Petran rebel, and a joker. Your secret is safe with us.” She gave him a smile. Edwin didn’t like how Chaucer smiled back, but then, he never liked how any man smiled at Celeste.

Except for Celeste’s hunting excursions with her family, the three of them were always together. Celeste and Chaucer had always been like siblings to Edwin, and it was only recently that Edwin began to see Celeste as something more. He wondered if it had to do with his approaching adulthood, or simply his hormones. He counted himself lucky that most boys were intimidated by Celeste’s beauty, and the rest were put off by her inevitably superior physical prowess. But Chaucer, Edwin could not tell. Certainly, the love between those two was there, but it was an ambiguous love, as ambiguous as Celeste’s feelings for Edwin himself.

Chaucer’s head perked up. “Hey, did you guys hear about the new dragon herd that arrived yesterday? I hear they were able to pick up some cocoflower juice from Masma. We should go get some and then….”

A booming roar ripped through the three friends’ ears. They turned around and looked up. A red dragon was bearing straight for them. Even from so far away, the dragon was an impressive sight. By its color alone, the three friends knew it was a war dragon, bred for its size and strength and trained to remain calm amidst the chaotic sounds of battle. Fifty meters from the cliff’s edge, the dragon rider expertly dismounted at full speed. The dragon corkscrewed in a wide arch to slow down to a stop, but the rider spread his own wings and gracefully glided to the three friends, who had collectively stood up to face the stranger.

The stranger was no stranger at all. Only the most privileged of Guardsmen were trained to ride red dragons of such massive size, and Druiker, the Head of the Royal Guard, was as privileged as he was lethal. His long hair, white as snow, billowed in the breeze over his black sweater as he folded his wings and walked straight to the young Faerens. Edwin and his friends did not know Druiker personally, but his reputation preceded him. Edwin tried to contain his nervousness
and fear.

His right hand resting on his sheathed saber, Druiker offered a mirthless smile. “Greetings, young ones. I’m conducting reconnaissance along Chuuk’s eastern shores, and I need to know if you have seen anything out of the ordinary here.”

“Guardsman, I don’t think there is anything weird here. What are we supposed to be looking for?” Celeste asked. If Celeste was as scared as Edwin was, Edwin could not tell.

“Actually,” Chaucer responded, “the other day my father and I were about to butcher a cow for a customer, and the cow started to speak! I don’t think that’s ordinary…”

Druiker was not amused. His face darkened and said, “I need not remind you that Petran rebels have been operating in this area in recent weeks, and the Imperial family has been hard at work to protect your lives and livelihoods.” He turned to Celeste. “And given the extraordinary circumstances, I have the power to arrest any… uncooperative subjects…” Edwin did not like the way he looked at Celeste. Then again, Edwin did not like how any man looked at Celeste.

“Rest assured, Guardsman, that I know my station in life,” Celeste responded. “And I hope everyone remembers theirs.” Edwin began to perspire. Now did not seem to be a great time to remind the Kingdom’s most fierce soldier that they were social outcasts.

Druiker unfolded and flexed his wings, never smiling, never taking his hard gaze off Celeste. After an eternity, Druiker whistled and, with a strong flap from his wings, shot perpendicularly into the air. In perfect synchrony, his red dragon swooped right above him and was mounted by Druiker without losing any speed. They flew eastward.

“Those Guardsmen,” Chaucer spat. “They visited my father’s shop yesterday and demanded information about Petran rebels. It scared off two customers, and now we have a dead cow and no one to buy it.”

Celeste nodded. “They interrupted our family dinner, and I mean the entire family dinner. You know how we always have one uncle or another cousin out on a hunt. It ruined the entire night.”

“But aren’t you guys scared?” Edwin asked. “They say Druiker has personally killed 50 Petran dragon riders!”

Chaucer scoffed, “Please, and I have actually killed a cow all by myself. Speaking of which, I need to help my father dismember that cow and sell its skin to a tanner.” He visibly shuttered. “Now that’s something to be afraid of.” Chaucer flew north to his home.

Celeste turned to Edwin. “Listen, I’m going to go on a hunt tomorrow, and I’m not sure when I’ll be back. You should stop by.”

Edwin nodded. “Three hours after sundown? My family should be finished with supper by then, and I need time to retrieve Chaucer.”

Celeste shook her head. “No, it seems like Chaucer’s going to be busy with that cow. I don’t know what’s wrong with him. If I can down an antelope, surely he can slice a cow’s neck. Some boys will never be men.” She smiled that radiant smile. “Come two hours after sundown.” Then she was gone.

Edwin wasn’t sure what to make of it. It was rare to be with Celeste without Chaucer. The three were inseparable. Maybe she did fancy him over Chaucer. Maybe he should tell her how he feels. Would he ever have enough courage for that? He saw one of Chaucer’s malt candies lying next to him. He flicked it over the cliff, watched it fall into the ocean, and dashed home himself.

Tag, You’re It
Grace Marie Jones
Graduate Student, 6th year
a joke and a shadow
Bret Negro
Medical Student, 2nd year

kite in a tree, what a mess and tangle,
if only he could figure out its angle

a worried man with hands in his pockets
jammed into his pants like a plug in a socket

his head is a mess of electricities
his heart keeps on tilling to put them at ease

he stands there and studies that kite and those branches
unraveling the fringed funny facts when he chances
to feel on the back of his neck some strange heat
like the gnawing of fire it’s warming his meat

turning slow from his place standing there by the mess
he is suddenly crying and wearing a dress

someone has turned his poor lungs inside-out
he’s riddled with strangeness, and littered with doubt

patterns and windows and numbers and doors
how is anyone ever to know what they’re for?

and just like the worried man clutching his head
my thinking’s fragmented, my reflexes dead

my sorrows are rendered, my happiness fried
as lights go on twisting and blinking inside

like him i am staring, at a fire, at a show
at a kite in a tree, at a joke, a shadow

Spinning Still
Valeria de Turris
Postdoctoral Fellow

Leather Dying-Fes
Jessica Karp
Medical Student, 1st year
I believe a doctor’s presence at the bedside is important in and of itself. As doctors, we incorporate medical facts and objective information about our patients into a credible story upon which we build therapeutic formulae. Making eye contact, holding a hand, and choosing an empathic tone are also important. After all, it is our privilege to console our patients. Most importantly, regular patient visits build trust. Patients frequently look forward to our visits, and this contributes to their healing process. However, with the current reimbursement system for most attending doctors, being physically present and sharing experiences with a long-time patient and friend has become extremely difficult. Practical considerations like insurance reimbursement and volume quotas are at the forefront of a doctor’s priority. Such considerations come at a cost.

Alice, my 41-year-old patient, who had survived lupus, double valve surgery, cirrhosis, mycobacterium infection in her knee, 11 years of dialysis, heart failure, and skeletal disfigurement, had been admitted to the hospital two weeks prior. Alice was a tough-talking authentic woman who was honest in every aspect of her life. She was interested, she was compliant, and she was a believer, in herself and in those around her. She had tried her best to battle the elements of her government-funded South Bronx apartment and seen her son through community college.

“What up, Doc?” She would smile every week when I visited her in the dialysis unit. She spoke in the Bronx Puerto Rican slang and there was a comforting gentility about her that was surprising. She once told me matter-of-factly, “No one in my life has ever paid as much attention to me as you.” She was responsible about her medicines and appointments. Though the hand she was dealt in life was difficult, she had a sarcastic sense of humor and made light of her problems. She always smelled like Tide detergent.

So it was strangely horrific when this young woman, who had been a fighter all of her life, developed calciphylaxis, a dreaded complication of dialysis.

Calciphylaxis is an extremely painful, disfiguring condition associated with high mortality. I knew it was bad when she started complaining of severe thigh pain one summer afternoon. I told her that this was not good. She understood, but did not really understand. She refused to go to the hospital, where she depended on overworked staff to change her diapers and feed her, until the day when she really needed to go. She was emaciated with parotid gland enlargement and her voice had deepened. I knew it was the beginning of the end.

Alice was admitted to the family practice floor. I was the consultant nephrologist. I saw her horrible state and I did not visit her again for a few days. The calciphylaxis lesions coalesced and looked superin-
fected. She refused dressing changes because it was so painful. She missed dialysis. I would get phone calls about her not accepting that she was dying. When I saw her, my facial expressions seemed rehearsed to me and unfair to Alice. Nevertheless, I know that she could read it in the long silences and in the way I shrugged my shoulders when she said, “I can do this, ‘cause I fought off everything else: why should this one kill me?”

Then I would avoid her for many days. It seemed too arduous. I did not want to be the one to tell her, outright, that it was the end. Her 24-year-old son wept like a child, “What am I going to do without you?” This made her want to fight harder. This made me upset at him.

The last visit I made was on a Monday evening. She seemed buried by the bed sheets. Her little head peaked out of the Minnie Mouse blanket she had brought from home. She gave me a half smile. “Well, how am I doin’?” she muttered as she reached for my hand, as if she were comforting me. Her tray sat by her bedside untouched. It smelled like old plastic. I fed her pear pieces out of a can.

She reluctantly nibbled on them out of a sense of obligation for my efforts.

Next Monday I sat in the MICU with my fellow as we were rounding on the dialysis patients. I had not seen Alice for a week. Even though she thought the world of me and called me her doctor and told all the other doctors to consult me with any decisions, I had not seen her because there was nothing to do and I hate to feel powerless: without any recourse, without the ability to offer anything hopeful. I justified this by explaining to myself that there was nothing to do medically, that she did not have insurance and I was doing charity. I thought, now that I have kids I cannot afford to spend my time doing charity work when I can spend it seeing other patients. But I know that this was not true, that I did not want to take the time to sit with her and face her death with her.

As I was going down my computer list of patients, I inadvertently deleted her name. A simple mistake, a slip of my hand. Alice died six hours later. I never said goodbye.
Einstein’s Second Annual Ad Libitum Literary & Art Nite
Sarah E. Lutz, Graduate Student, 5th year

The second annual Ad Libitum Literary & Art Nite was held December 10, 2008, in Einstein’s Lubin Dining Hall. The event was attended by more than 250 guests, and featured live music, poetry readings, and displays of original artwork created by members of the Einstein community.

The room was filled with bright colors and engaging imagery from more than 60 artists. Those in attendance mingled, sipped wine, and perused the displays, while the Einstein Jazz Ensemble and then classical violinists Jennifer Lee and Bret Negro provided a lively atmosphere. Sixteen authors read their poetry and stories aloud to a rapt audience.

“This event reflects the collaboration that Einstein thrives on: students, faculty, and staff sharing their creative talents in a warm, receptive setting,” said Mariam Kabir.

In his opening remarks, Dean Spiegel commented on the cross-fertilization between science and art. This theme was evident through the artists and writers who shared their paintings, photographs, stories and poems at the event. Some of the artwork and writing is published in Ad Libitum magazine.

One of the benefits of Literary & Art Nite, however, is that it allowed for the display of multiple works, rather than just one or two pieces. For example, Changsheng Li filled an entire 5 x 7-foot exhibit wall with photographs taken in the Zhang Jia Jie National Forest Park of lush, misty landscapes, and portraits of monkeys framed as carefully as if they were well-coiffed ladies. Art sold in a silent auction raised more than $600 to benefit the Bronx River Art Center, an organization that provides arts programming for underprivileged children in poor areas close to the Einstein campus.

The Literary & Art Nite provided the Einstein community with an opportunity to support creative talents while enjoying a social evening. The event was supported by Dr. Albert S. Kuperman and the office of Educational Affairs, and the Graduate Student Council.
Sidewalk Shampoo

Eric Yale Hayden
Graduate Student, 5th year
Digital Photograph

Back Cover Art:
The One that Wandered Off

Dmitriy Kedrin
MSTP Student, 7th year
Oil on Wood