



Heal

Humanism Evolving through Arts and Literature

The HEAL Mission

HEAL is a place for medical students to share their growth and development, for faculty and staff to impart their knowledge gained from experience, and for members of the community to express how health and healing have impacted their lives.

We hope this work increases your appreciation for the art of medicine.

HEAL Newsletter Team

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Pamplona Alta- Lima, Peru

Mauricio Parra-Ferro, Bridge

Happy Travels

Cashana Betterly, Class of 2016

I didn't know what I was doing.

Structured chaos is the only phrase that came to my mind when I stepped inside the homeless shelter for the first time. I had never volunteered in a place like this before. I was as nervous as ever, but I didn't quite know why. Well, maybe I do.

For starters, I arrived 30 minutes before all of the other students. This was the first anxiety provoking event of the night. I knocked on the side door. Maybe it was the back door. Or the front door, for that matter. I really wasn't sure. But I knocked and knocked until a younger Black gentleman in his late 20's approached me from behind, noticing how clueless I looked.

"Can I help you?" he asked with a puzzled look on his face.

"Um...yes, maybe. Sorry. Uh, I'm a med student and I'm here to help with giving

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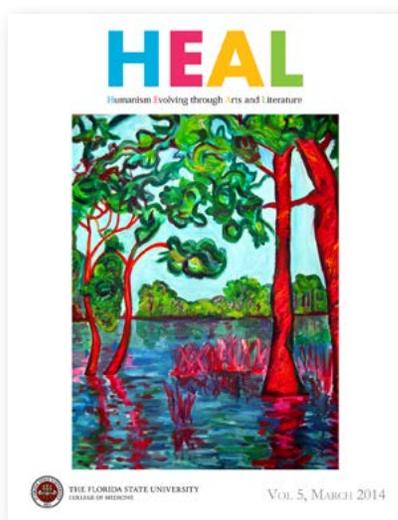
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Look for HEAL Vol 5



Coming March 2014!

health screening tests and doing blood pressures," I said, not really knowing if that description adequately covered my tasks for the night.

"Oh right! Today's Monday! Come in here through the kitchen."

And off we went.

The smell of meat and potatoes filled my nostrils. It was humid. Pots and pans were hanging off of the walls. Clinkings and clankings were heard all over the place. We weaved our way through narrow walkways between cupboards and stoves. We eventually arrived to a common area at the bottom of a staircase.

"The women live upstairs. Sometimes they bring their children with them. The men are right over there."

I peered into the adjacent room and took in the sight of about 40 homeless men sitting at picnic tables, all in their 50's and 60's. Sound was blasting from a small television set in the middle of the room. Fans were scattered about, cooling down the men while they waited for their food to be ready.

"Where do I even start?" I thought to myself.

Just as I was about to walk in, the physician overseeing the event and the other students arrived. Many of the other students decided to start doing health screenings in the men's living area, so I wandered upstairs to work with some of the women.

Upon reaching the top of the stairs, I saw a room containing four bunk beds. In a room adjacent to that, there was the women's living area. This one was much smaller than the men's living area, much more humid. Same picnic tables, complete with more sets of fans and a tv. And connected to this room was the back porch, where the women were allowed to take ten-minute smoking breaks.

To this day, and I don't exactly know

why, there was one woman in particular who stood out to me. She was in her late 40's with sandy-silver hair. I think she reminded me of a baby-sitter I once had. The half-moons under her eyes exposed her fatigue and stress. At the same time, I could sense a comfortable warmth about her. I could tell she had a story. Everyone there did.

"Excuse me, ma'am, would you like to have your blood pressure taken today?" I said to her, knowing deep down how much I actually stink at taking blood pressures.

"The doctor is coming to me this time instead of the other way around! How wonderful!" she joked.

She ended up being the only woman I spoke with that night. We talked in the women's common area, we talked in the back porch during her smoke break, and we talked in the common area again. As it turns out, alcohol was the demon that brought her to this homeless shelter. She once had been a stewardess for a well-known airline. Her daughter is a current college student. She hadn't spoken with her in years. An unstable marriage combined with an already existing addiction led to the trying circumstances she's living with now. Last I spoke with her, she was doing well on her anti-depressants, staying sober, and getting ready to re-take her stewardess exam.

This was a year ago.

I have no idea where she is or what she's doing now. I would like to, though. I would like to know all of these things. I told her that I would try to visit her again. So far, I have not kept that promise.

I don't want her to be there when I return to the homeless shelter. I want her to be re-united with her daughter. I want her to be on airplanes again, putting new and nervous passengers at ease with her warmth and sense of humor.

To the sandy-silver haired woman, I wish you safe and happy travels. ■



Signal Box Art Pro
Camilo Fernandez-Salvador and Annie Chau,
Class of 2014



Central Park from Above
Trung Tran, Class of 2014

What Can I Do?

Kelleigh Elizabeth Simpson, FSU College of Law

The story of the working poor is the story of life on the margins. Where a single event on an ordinary day can bring a life crashing down. A car breaking down or an illness can take someone from barely scraping by to living in a car or a homeless shelter. More important than a change in location is the change from being able to support a family, to having children ask for food that you can't afford.

When someone's life is ruined by a need for healthcare they can't afford, if they are lucky, they end up at my office.

What is the real cost of cheap corn flakes at that big box store? Many are working 20 hours a week at minimum wage with no health insurance. The misery is certainly not confined within the borders of the United States. Ask the families of people working in the factory in Bangladesh, who died to produce Walmart's "Always Low Prices." These people live and die to provide cheaper consumer goods for an ever greedier American public. The poor pay the price; the rich get more for less.

When someone's life is ruined by a need for healthcare they can't afford, if they are lucky, they end up at my office. If they are less lucky they end up working 40 hours a week at the Chelsea House Shelter for room, board, and seven minute showers. Or, more likely, they become homeless. When I meet people they are at the lowest point of their lives. I cannot heal years of abuse or congestive heart failure, but I can do something.

What I can do is make calls to doctor's offices. I can fill out paper work. I can cross T's and dot I's. I can navigate the papers and deadlines and legal jargon. I can listen and tell you that I see the same tears of frustration from everyone-- men, women, young and old -- that you are not alone, that maybe the only thing to do today is cry. But tomorrow, we will work together to make things better.

What I can do is navigate the social security system, a system seemingly designed to be inaccessible to those who need its services most. I can use my privilege to help those without it. It doesn't make life fair. It doesn't change the fact that I can have a \$40,000 surgery for \$140. Worse is that I can get the treatment at all, something not available to most of my clients. Even worse is knowing that they are alone. People end up on the streets because they don't have people to lean on, people that are there to provide a home for those with broken lives.

The story of the working poor continues. It lives on in millions of lives and is passed down through countless generations. How can I make life fair? How many people do I have to help get social security disability before I even the score?

I will never make life fair. But I can try. ■

Formaldehyde

Tyler Wellman, Class of 2017

Down in the lab
formaldehyde penetrates
nostrils, odor attaching first to
clothes, then to skin. Sterilizing
effects slowly seep into spirits.

Start dissection on back,
slice with scalpel into flesh to
remove the only clothes
cadavers have left, toss
skin into steel bucket.

Brass(ket)!

Yaowaree Leavell, Class of 2015

The moon in the sky and the sky on the sea
the man on the mountain the mountain in me!
take (your dark (eyes)/
rake) my stark (bones)/
throw) me a zephyr unfettered as thee

my ship is a wind with more eyes than it needs
darting through cloudbanks like fish among weeds
fill (my full (lips)/
trill) my soft (voice)/
light) the way west for my windblown steed

my bones are a basket of sun-forged glass
trilling a song all thunder and brass
feel my long (ing)/
touch) my warm (skin)/
brown) the cliffs and green the grass ■

Pieces of Iota

Thomas Edmondson Whigham, Jr.
FSU College of Law

In a systematic way the
erosion of the barriers between
her emotional composure
and self-assurance and
the callous disregard the rest of the world conveyed
and
the sense that the world felt
if it bothered for feelings at all
a barely hidden contempt or hatred
was more than enough to
through the lengths of time
eliminate all notions of shared humanity.
And it was enough to break her. ■

Author's Note on Brass(ket)!

I wrote this piece as a sort of poetry experiment in synesthesia, which is a rare neurologic condition in which different sensory modalities fuse. Some people taste asparagus when they hear the number seven, others see color swatches when listening to music. Even for those of us without abnormal brain pathways, language can also be experienced in different modalities. This poem was meant to be all vision and sound: the overlapping experiences of seeing syllables sequestered and broken up on a page, while hearing the brassy, glass shattering loudness of the word sounds, while also (hopefully) seeing the bright, living image series described in the lines.

All of the parenthetical words are body parts embedded in scenic description - a loose reference to various myth cycles in which earth is created from the dismantled form of some large deity, i.e. the Norse Ymir and the Chinese Pangu. What follow after the line breaks are verbs which can be attached to both the body part that precedes them as a descriptor or taken as an imperative beginning the line that follows

--Yaowaree Leavell



Angel Azúl
Andrade Jaramillo



Pelicans A-posing
Harry Moulis, MD

What My Doctor Tells Me

Stephen Quintero, MD

You're very sick

sllip ruoy ekat ot tegrof t'noD
shtnom eerht ni kcab emoC
neth erofeb nward doolb ruoy evaH
stset ruoy erofeb knird ro tae t'noD
llip tsrif ruoy htiw doof diova ot deen uoY
doof htiw enicidem dnoces ruoy ekat tub
su llac htaerb fo trohs ro hguoc teg uoy fi

You're very sick

taht ytiraluggerri elttil a evah snacs ruoY
pu dewollof eb ot sdeen
tsigolonircodne eht ot uoy dnes ot deen eW
ecnarusni evah uoy oD
drawrof dneb ro tfil t'nac uoY

You're very sick

Innate Curiosity

Jesse O'Shea, Class of 2014

During my first delivery while on my Ob/Gyn rotation, questions arose on life, suffering, and universal truths as the baby surfaced for its first breath. While it was a complicated delivery with much to tell, I could not help questioning. Why did the mother have to sustain injury and harm during this experience? Why did the newborn have its cord around its neck? Is this the miracle of life? Innate curiosity. I realized then that men are equal in suffering and in the boundaries of need. They are not born equal—that is, they are not born with equal genetic bequest, physical, or intellectual states. They are equal in the sense that they are born to live, endure, and die. Physicians, who have witnessed men in their naked loneliness, know that perhaps better than anyone else on earth. Physicians will have to help and lead us all in cherishing and restating that final core of human faith. Likewise, it is imperative to understand that as humans we are all interconnected; we are connected in the sense that we are all equal, as stated above, and therefore every

life is significant. In the end, despite all the questions raised, despite all of this thinking, I looked onto the newborn and the newborn looked back at me with curious eyes, and all thoughts were vanquished. ■

Innate Curiosity
Jesse O'Shea, Class of 2015



He Sees Me

Cathaley Nobles

--for AAJJ

He lives in two worlds
He's strong when strength is needed
He's generous with his time
He knows my weaknesses
He accepts me as I am
He Sees Me!

He has chosen spirituality as his blueprint for life
He's sensitive and in tune to the needs of others
He unselfishly shares his life experiences
He constantly finds the good within me
He gives me courage when I have none
He Sees Me!

He has an inner peace at the early age of 48
He is independent and self-assured
He has taught me to expect more of myself
He makes me laugh and celebrate life
Half of his life he has been blind, and I love him
For He Sees Me!

A View from the College of Medicine
Trung Tran, Class of 2014



Psalm XXX

William Wellman

The title reads *Thanksgiving for Recovery from
Grave Illness.*

I decide this shall be my Psalm.

I will be well.

I, with the Psalmist, will be
made well by the Lord.

I take my drugs
as directed.

Psalm XXX every night.

Prednisone, Cellcept,
nothing changes.

I do not improve.

A move to stronger poison,
Cytosan.

Six weeks gone,
nothing changes.

I do not improve.

Psalm XXX every night.

Doubt arises and questions come forth—
What disease did the Psalmist have?

Why does God not hear
my supplication?

Lord be MY helper
Lord be MY helper
a helper.

Psalm XXX every night.

Boston will have answers.

Bombarded by degrees, a second biopsy—
the renowned pathologist finds a new disease.

This disease is not curable.

The voice on the phone mentions future kidney failure (from
across the hotel room, mom quickly reads the disappointment
in my eyes).

Time for stronger poison,
Rituximab.

Signature provided, serious
side effects.

I have not read Psalm XXX for weeks now.

Back to Florida

improvements none.

Rituximab joins the list of
no avails. Prograf because
why not?

My hair thins, falls out
all day, fills my hands. One more,
no avail.

One last treatment,
Plasmapheresis.

Two months—
these nurses, so nice and caring.
Gatorade/TV/two hours/blood out/
albumin in/clockwork.

All to no avail.

I start to look at Psalm XXX again.

I switch doctors,
We wait for kidneys to die.

I will not be healed,

I will not dance,

I will not sing.

Why,

Why in the hell would Psalm XXX be my Psalm?

I switch to Psalm XXXVIII

A Penitent Sufferers Plea for Healing

Psalm XXXVIII every night.

My kidneys fail,
I am strangely happy.

Dialysis,
Catheter projects from my chest, later
I get an AV Fistula.

I feel healthier now than I have in 18 months.

Psalm XXXVIII every night
makes much more sense.

Sitting in the chairs of dialysis clinics, we are icicles.

Dripping yet beautiful. I can always
find some smiles. However,

I can not escape

the fact that 50 years ago
I would be dead.

Night sweats, migraines, constantly in a

fine. I am ok. I know tomorrow I will be fine
as well.

Transplant nephrectomy,
indefinite dialysis.
I read Psalm XXX again.

I heal quickly, three kidneys
have now been removed from my body.
A welcoming calm, a
presence overwhelms me.

I am not yet joy, but
I am hope. Dialysis
has its own issues.
I learn joy, I think
about seminary. Possibilities.
Presence.

*You have turned my mourning into
dancing;
you have taken off my sackcloth
and clothed me with joy*

Psalm XXX, my Psalm. ■



The Amazing Technicolor Giraffe
Kevin Yan, Class of 2015



Eyes
Tyler Wellman,
Class of 2017