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HEAL

Humanism Evolving through Arts and Literature



GRAMPA WITH TOMATOES
Raye Ng, Class of 2019

THE 1ST ANNUAL “HUMANISM AND MEDICINE” ESSAY CONTEST

Sponsored by the FSUCOM Chapman Chapter of the Gold Humanism Honor Society, in partnership with HEAL: Humanism Evolving through Arts and Literature

1ST PLACE **A FRAGILE HEART**

Torrie Lynn Reynolds, Class of 2017

“I’m scared. Promise me you’ll take care of my babies... please, promise me.” Tears streamed down my face as I watched my sister-in-law struggle to breathe these words to me in the emergency department. The pale, terrified face of the woman whose hand I held replaced that of the once joyous and vibrant woman I knew. It was 3:00AM when my husband and I got the call informing us my sister-in-law was in the ED with postpartum congestive heart failure. It hadn’t even been one week since she delivered her two perfect twin boys, and now, here she was fighting for her life while her new babies slept peacefully in the NICU just one floor away in the hospital. “I promise,” I managed to say, “I promise.”

In that moment, the scariest moment of my life, I was not sure if she was going to live or die. Everything I had learned in my three years of medical school seemed to escape me as I frantically tried to glean information from her nurses, doctors, technicians and machines. The next few days went by in a blur. My husband and I remained by her side in the ICU. When we weren’t in the ICU, we were in the NICU with her twin boys – providing what love, warmth, and care we could in her place. We would bring back pictures for her, but it was never the same. I could see the sadness in her eyes that, in the first few days of her new babies’ lives, she was not with them.

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Social Medicine

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.

Check out our new medical satire column

THE BUNION
on page 11.

A FRAGILE HEART (CONTINUED)

Over the course of the hospital stay, doctors and nurses were in and out at all hours. We attentively listened on rounds, asked questions, and offered what help we could to her treatment team. The doctors were pleased with how her treatment was coming along. Yes, they were treating the congestive heart failure. Yes, the cardiologist, nephrologist, intensivist, maternal fetal medicine—and probably a lot more *-ologists* I now cannot recall—were all focused on her labs, her scans, and her urine output. It wasn't until a family medicine doctor, the new hospitalist assigned to her case, came along that she as a person was treated. It was this doctor that changed everything. My sister-in-law smiled brighter and felt hope after speaking with him. This doctor exemplified the values of the Gold Humanism Honor Society. I will never forget him or what he did for my sister-in-law during this dark and scary time. I am inspired to be a better physician because of how his empathetic treatment literally saved her life.

This doctor was different than all the rest. He pulled up a chair, silenced his cell phone, and actually had a conversation with her at the bedside in the ICU. He was managing her medical problems, of course, but his questions were focused on her mental well-being and how she was coping emotionally. He was the first to ask these questions. She was comforted because he truly cared about her. "Have you seen your babies yet?" he asked her. "No, I was told they cannot come to the ICU," she replied sadly. My heart sank for her. The pain in my sister-in-law's eyes was one I had never seen before. I suppose this is a mother's love. "Well, I'm going to make that happen. You need to bond with your new babies, that is just as important as treating your heart failure," he

replied matter-of-factly. At that moment, he personally called the NICU, involved her ICU nurse, and started coordinating a transport. I couldn't believe it. If the babies couldn't come to her, he would bring her to them. This was the first doctor that spent more than 5 minutes in the room with her, and yet he was breaking the mold. He was kind and compassionate, warm and caring. He was the type of person that renews your faith in humanity.

Transport was arranged for her to be taken in a wheelchair with her nurse to the NICU. Seeing her babies for the first time since facing death was emotionally therapeutic. Her tiny 5-pound baby boys slept peacefully as she cradled them in her arms and held them skin-to-skin. The most amazing thing was her getting to breastfeed each baby just once, a bond she so desperately wanted to form with her new children. Because of her medications for heart failure, she only had this one opportunity to breastfeed. I'm sure she cherished each and every moment. This doctor had cared enough to treat her as an individual—as a scared and anxious first-time mother. She was not just "that young girl with postpartum heart failure in ICU bed 2."

I am forever changed by this experience. Embracing my sister-in-law tightly in the emergency room is a feeling I will never forget. I will always be grateful for the medical team that saved her life, but I will never forget the one doctor that was a compassionate, empathetic, and kind enough soul to take the extra time, go the extra mile, and bring a mother and her babies together. That, to me, embodies a physician of Gold Humanism Honor Society. I strive to be a physician of this caliber.

This doctor had cared enough to treat her as an individual—
as a scared and anxious first-time mother.



BALANCE

Tamra Travers, Class of 2016

I reached out to Dr. Ken Brummel-Smith for advice when I was on my very first clinical rotation. His advice, included below, became the inspiration for this piece.

“You are being given an amazing gift, working with people who are suffering. The most important thing you can do for them is to recognize your feelings and not run from them. Your job is to remain present, and removed, at the same time. It’s the perfect Zen experience. Look at the Tao symbol and think of that when you are feeling overwhelmed.

The black is being overwhelmed. But even in that tidal wave there is a circle of hope. The white is your commitment to the patient and to yourself. There’s always a dark circle hidden in that, but the white is strong – and on top!”



CENTRAL PARK
Trung Tran, MD

For my future patients, I hope never to be their disciplinarian, but their teacher that helps them discover their motivations.

A QUESTION OF RESPECT (CONTINUED)

Chris was not eager to discuss the intricacies of his diagnosis. At the end of the interview, I learned that the social worker, with whom Chris would meet next, could not see him for another 30 minutes. I took a risk. I sat down with Chris and asked him the question that transformed my classroom two years before: “What are your goals?” Chris laughed. It was the first time I had seen him smile. He shared that he wanted to be a chef. I picked up a dry erase marker, as I was accustomed to in my former classroom, and wrote his goal on the board. Together, we mapped out how he would get there, starting with his GED and culminating in owning multiple restaurants. As he took the marker from my hand, I watched him transform as he mapped out his own path to his hopes and dreams. At the end of our time together, we talked about how taking his HIV medication every day would allow him to be healthy enough to pursue his goals.

Nine months later, Chris was back in school and working. He was also taking his medication every day. By connecting his goals to the management of his illness, Chris reduced his viral load and was pursuing goals that gave his life meaning beyond his diagnosis.

In the first year of medical school, we learn how to take a patient history. We are taught that the history should uncover not just symptoms but

the patient’s values. Yet, during my initial experiences in preceptorship, when time is limited, I find myself omitting the questions that have the best chance of evoking patient values. While I exhaust the history of present illness—Can you show me where it hurts? Does the pain move?—I often sacrifice the social history, hesitant to ask: In a time of need, who can you count on for support? What do you do for work, or even, what are your goals?

As a first year medical student, I imagine the temptation to sacrifice the social history will only grow. Yet, four years ago, if I had focused only on science with my high school students, I don’t know that they would be graduating this June, with many going on to be the first in their family to attend college. And if I had just focused on Chris’s diagnosis, I don’t know that he would have reduced his viral load. Only when I looked beyond my own knowledge base and elicited their goals did I learn to support them in their pursuit of a meaningful life. For my future patients, I hope never to be their disciplinarian, but their teacher that helps them discover their motivations. As I take more histories, I will seek to uncover the values of my patients so the plan we develop is one they are motivated to live out. And, if pressed for time, I won’t leave without asking some iteration of the question: what are your goals?

THE WOLF OF MEDICINE

Everyone has a story. The title and characters may be different, but the plot oftentimes takes us on a wild adventure that fosters personal growth and new understanding. For the healthcare provider, much of our learning and understanding comes externally from our patients. But when the mirror is reflected back on ourselves, a personal account challenges us to view disease and sickness in a new light. In this short excerpt, I hope to chronicle my own account and how it has challenged me to become a better physician.

Chapter 1: The Diagnosis

I remember the final weeks of my senior year in high school, marking the days off on my calendar before leaving for college. It marked a defining time in my life to grow up and become my own person. But as I was entering what was to be the greatest four years of my life and the peak of my adolescence, I was diagnosed with Crohn’s disease. It was unexpected news and devastating to say the least. I sat there with thoughts of uncertainty, wondering how my life might change. As a college student, I was supposed to be an adult now; adults are supposed to be strong. But as I reached the limits of my containment, I sat there in the doctor’s office and broke down into tears.

Chapter 2: The Decline

Aside from handling the pressures of a new city, new classes, and an entirely new living dynamic, I was beginning a battle with my health. I always felt drained and tired. Food became the enemy, and I began losing weight. While my doctors had me experimenting with new medications and treatments, I felt my health deteriorating. Crohn’s is not the type of disease that people like to talk about. So, for the longest time that is exactly what I did. I packed my bags for college, medications on hand, hugged my parents, and left for college, not to speak about Crohn’s disease to any roommates, colleagues, or friends that I would meet.

As this chronic disease is not yet well understood, I was left with many more questions than answers. Why me? Why now? Life was so unfair. Skipping classes for doctor’s appointments or expensive imaging studies became routine. My cellphone became a tool for battling insurance companies, trying to push through prior authorizations or get imaging studies or medications approved. Healthcare felt like an insurmountable obstacle that I was left to overcome, and I felt entirely alone. Navigating the complexity and enormity of healthcare became the wolf in my story.



“PEACE
BROTHER
WOLF”

Daniel Bernabe,
Class of 2016

Healthcare felt like an insurmountable obstacle that I was left to overcome, and I felt entirely alone.

THE WOLF OF MEDICINE (CONTINUED)

Chapter 3: High Hopes

After being bounced around from doctor to doctor, I was referred to a gastroenterologist in a faraway land called Gainesville. I remember sitting there in the overcrowded waiting room anxiously awaiting for my name to be called. My foot was tapping restlessly. I recall sarcastically thinking to myself that I should grab a number, as if being served at a deli. Finally I was called back. There was a knock on the door and a short, stocky woman in a white coat walked in, buried behind thick-rimmed glasses. I rolled my eyes, ready for another lecture about Crohn's.

After a brief introduction and review of my chart she asked, "Regarding your disease, what are you afraid of?" There was a pause. Out of the half a dozen doctors I had previously seen, nobody had ever asked me. "Well...I guess I'm afraid of the unknown," I murmured, "I don't know anyone else going through this, what to expect, or how it will change my life." She rolled her chair over from behind the computer and parked it right in front of me and put her hand on my shoulder, proceeding to tell me that I was not alone. She connected me with the Crohn's and Colitis Foundation of America, an organization of thousands of people just like me, and for the first time I felt a sense of community. It was a simple gesture and demonstration of humanism that has stuck with me to this day.

For the first time I felt that I was not lost in the vast sea of healthcare, viewed merely as a number, or a quota, but rather as a person. In the big business of healthcare, it is all too easy to become consumed in efficiency

and profits. But healthcare is not every other industry. Patients are not interchangeable products on an assembly line. That simple interaction immersed me in Crohn's disease and medicine. I wanted to learn everything about it and maybe even provide some relief for others going through something similar. A year later, I sent in my applications to medical school.

Chapter 4: The Outlook

As a student at the Florida State University College of Medicine, it is a humbling feeling to stand behind the power of medicine. Through all of the late nights, early mornings, and countless containers of coffee that I have consumed, I am reminded of what it means to wear a white coat. A simple interaction with a physician years ago reminds me that in medicine we are not treating diseases; we are treating patients. That the human condition is more than a collection of cells and tissues carefully arranged into the being sitting on the exam table in front of us. And that, I believe, has been the most valuable lesson that I have learned in my medical career.

As I transition into my clinical years, I am faced with the decision of beginning to pick a specialty. Though I am uncertain as to what I am going to be, my experience has already answered the more important question of who I am going to be – a physician that puts patients before profits, and one that humanizes healthcare. While the future may be uncertain, it also looks promising, but we will have to wait and see what lies in store until the next chapter in the story is written.



THE SERPENT OF BRASS

José E. Rodríguez, MD

A MOTHER AT 13

Growing up in Brazil, I had seen poverty and been touched by it many times. In fact, my experiences with social disparities in my home country were what first propelled me towards medicine. When you move to the United States of America from a “developing country,” there is a sense of fantasy that nearly blinds you to the realities around you.

It was the last week of my Community Medicine rotation when I found myself doing house calls with a case manager in the rural outskirts of Tallahassee. I had no idea what awaited that sunny December day. I was about to meet one of the strongest women my soul has ever been blessed to meet. I found myself sitting in the living room of a 17-year-old single mother while she shared her dreams and aspirations. She was thriving in high school, with plans to graduate early, attend college and seek a career in the medical field. As the visit went on, my admiration for her heart grew by the second. I have always been a firm believer that everyone I meet has a story to tell: a story worth listening to, a story worth my time, a story that can add to my own story and personal growth—a soul awaiting an

invitation to touch mine. And, man, did she have a story to tell!

She grabbed a piece of paper displayed on the wall, and offered to share a poem she had written. She demonstrated poise, wisdom, maturity, kindness, and a resilience way beyond her short 17 years on this earth. She is the embodiment of what it means to be a strong woman; to have all the odds stacked up against you, and still be able to stand up tall, stare fear in the face and choose to fight because you are worth it.

I cannot explain why I was blessed with the opportunity to meet LaKirrie Robinson, but I will be forever thankful I did. As she shared her heart through her words, I was reminded of why women are such marvelous beings and hoped she would allow me to share her piece with others. The words below will forever inspire me as I work towards a career in women’s health and walk alongside others through their incredible life journeys.

-Alessandra Taylor, Class of 2017

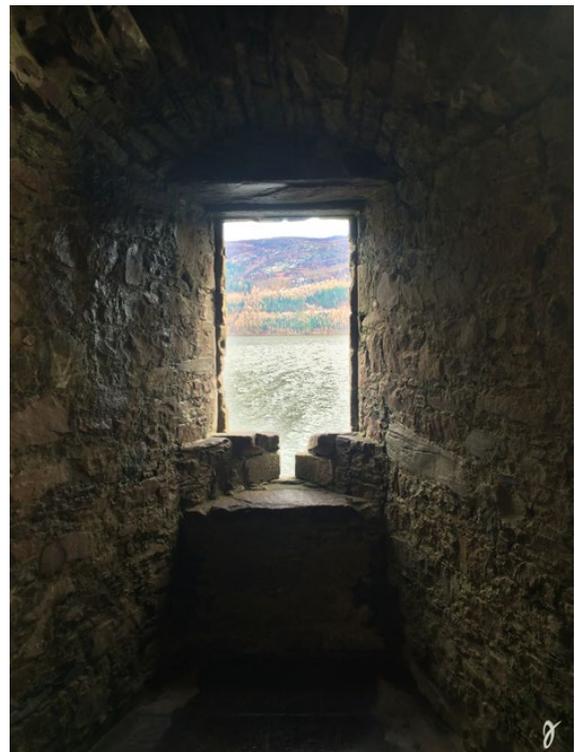
A MOTHER AT 13

LaKirrie Robinson

A mother at 13.
What would they say?
Everyone else has the choice,
But she couldn’t walk away.
The father said it wasn’t his,
Her friends thought it was a lie.
So smart, so beautiful yet
Just wanting to die.

Her people wouldn’t say a word just gave a blank stare.
Collecting her books from school,
Knowing she shouldn’t go back there.
Crying for 9 months straight,
Not knowing what to do—
She had started this
And she had to see it through.

Everyone passed judgment,
People she never even met.
The names were so horrible,
That part she’ll never forget.



TRAPT

Jesse O’Shea, Class of 2016

A MOTHER AT 13 (CONTINUED)

A size 16
With bright brown eyes.
She's going to join the Air Force,
Sort through the world of lies.
Her figure faded fast,
No more time for fun.
This baby coming soon—
He'd be her number one.

So many people stared
As she shopped for baby things.
That look in their eyes,
You couldn't imagine the hurt it brings.

The morning sickness went on
Till she couldn't get out of bed,
But yet she struggled on and
Everything about babies she read.

9 months came and went
And her gift came from above,
A tiny angel
For her to cherish and love.

In what seemed like seconds,
She had forgot about all the sacrifices.
She had given up her teenage years,
But it didn't matter about her friends
That would never be there.
It didn't matter about the father
Who she knew would never care.

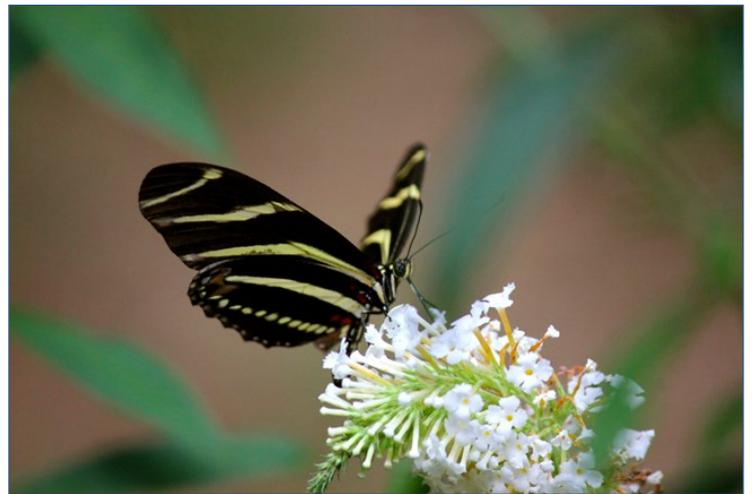
A mother at only 13,
Not knowing what to do.
A teenager wise beyond her years
Who saw that journey through.
A mother that fought the battle
In a world where she was shunned.
A new beginning in her teenage life,
Her world has just begun.

She cherished that little boy
Till this very day.
And I know because she's me and I'm brave enough to say!



THE CARING HAND OF COLLIER COUNTY

Simon James Lopez, Class of 2019



ST. MARKS BUTTERFLY

Daniel Van Durme, MD

A BRIGHTER UNKNOWN

Greg Turner, EdD, MBA/MPH

Be who you are,
And strive to be what you were meant to become—
Not who you were.

Easy come, easy go.

The more we learn, the less we know;
What an elder sees sitting, the young can't see standing.
Life is short, the art long, and opportunity fleeting,
Memories die like embers.
We're all shipwrecked... but hopefully,
Too busy becoming to be destroyed—let alone sunk.

Thankfully, Fortune brings in some boats that are not steered.

As best you can,
Build a ship you can sail and cling to;
Live the life you want and were destined to live.

To guide you safely in,
Look for, seek, and reach out for every hand you can;
It's time to stop imagining what might have been.
Instead, love what you already have... and
Focus on what remains.

In order to embrace the life that is waiting for you,
Be flexible about what you've planned;
Fear not to embark on a rantum scoot, or to
Sail your craft confidently toward a brighter unknown.
The only journey that matters is the one you navigate to that distant shore.



PACHAMAMA

Andrew Michael Kropp, Class of 2019



ICE CREAM VENDOR IN IMMOKALEE

Linda Minnock, MD



New exam format should be “totally chill,” says NBME spokesperson.

HEAL Journal Tries New Thing, Please Don't Be Angry

The Bunion is a place for satirical medical news and humor related to experiences with which medical students, faculty, and clinicians are all familiar. Such experiences can involve the FSU College of Medicine, the medical school experience, or healthcare in general. Content is not intended to offend or humiliate anyone. All names are fictitious and any resemblance to actual people would be merely coincidental. Submit to The Bunion through the HEAL submission site: <http://journals.fcla.edu/heal>

USMLE STEP 1 Becomes Formative Assessment in Move Towards Student-Centered Education

TALLAHASSEE, FL- STEP 1 of the USMLE has long been viewed as one of the most difficult challenges facing an aspiring physician. Traditionally, students dedicate months of time, hours of study, and countless dollars preparing for STEP 1. That is all beginning to change with students across the nation protesting for the USMLE to become a formative assessment. Faculty and administration are beginning to get on board with the idea as well. “At first we were following educational methods backed by research and results, but now there is a move in the higher education field towards student-centered education,” said Dr. Helen Langston. “We realized all the stress that comes with studying for STEP was causing much unneeded anxiety. Students weren't able to watch Netflix marathons or enjoy a night on the town. Local businesses like Madison Social were really struggling during this period of study,” continued Langston. The National Board of Medical Examiners, wanting to maintain its monopoly in the medical exam market, predictably wants to

keep the students happy with their services: “In business, they say the customer is always right. Well, here at the NBME, the students are our customers. They say ‘jump,’ we say ‘how high.’”

Activist and medical student Sidney Sponges supports the decision: “I think this is a step in the right direction, but we won't stop until we're able to take this exam open-book at home in our pajamas. That's how we do most of our learning for class, and that's how the exam should be.” Others feel like the exam itself is outdated. Alex Doyle, a second year medical student, thinks “the exam should evolve with the values of our society.” He adds, “We live in a day and age where 1% of the people have 90% of the knowledge. Those are the people who year after year get the top STEP scores. Meanwhile, other people have to make do with lower scores. What if STEP scores were assigned more subjectively, like with a bingo raffle?” This radically progressive view is supported by some who say there are biopsychosocial measures of success that are

BEN APPELO,
CLASS OF 2018

out of most students' control. “That's the goal, but for now we think that a formative STEP 1 would put everyone on an even playing field,” said Sponges.

This move towards student-centered education isn't appreciated by all, including FSU College of Medicine's Dr. Walter Robertson. “When I was a student, you had to truly earn your place in medicine,” he said. “You've got kids these days wanting a formative assessment? Let me tell you, in my day our faculty said, ‘look to your left...look to your right...two of you won't be here at the end of the semester.’ We became the greatest generation in medicine.”

Dr. Walter Robertson gave his thoughts, “The move towards the formative USMLE exam will be part of our continually evolving curriculum change. I must admit, it's a great experiment. However, the patients of America need not worry, because if it doesn't work, telemedicine has the capability of outsourcing our medical needs to Canada.”