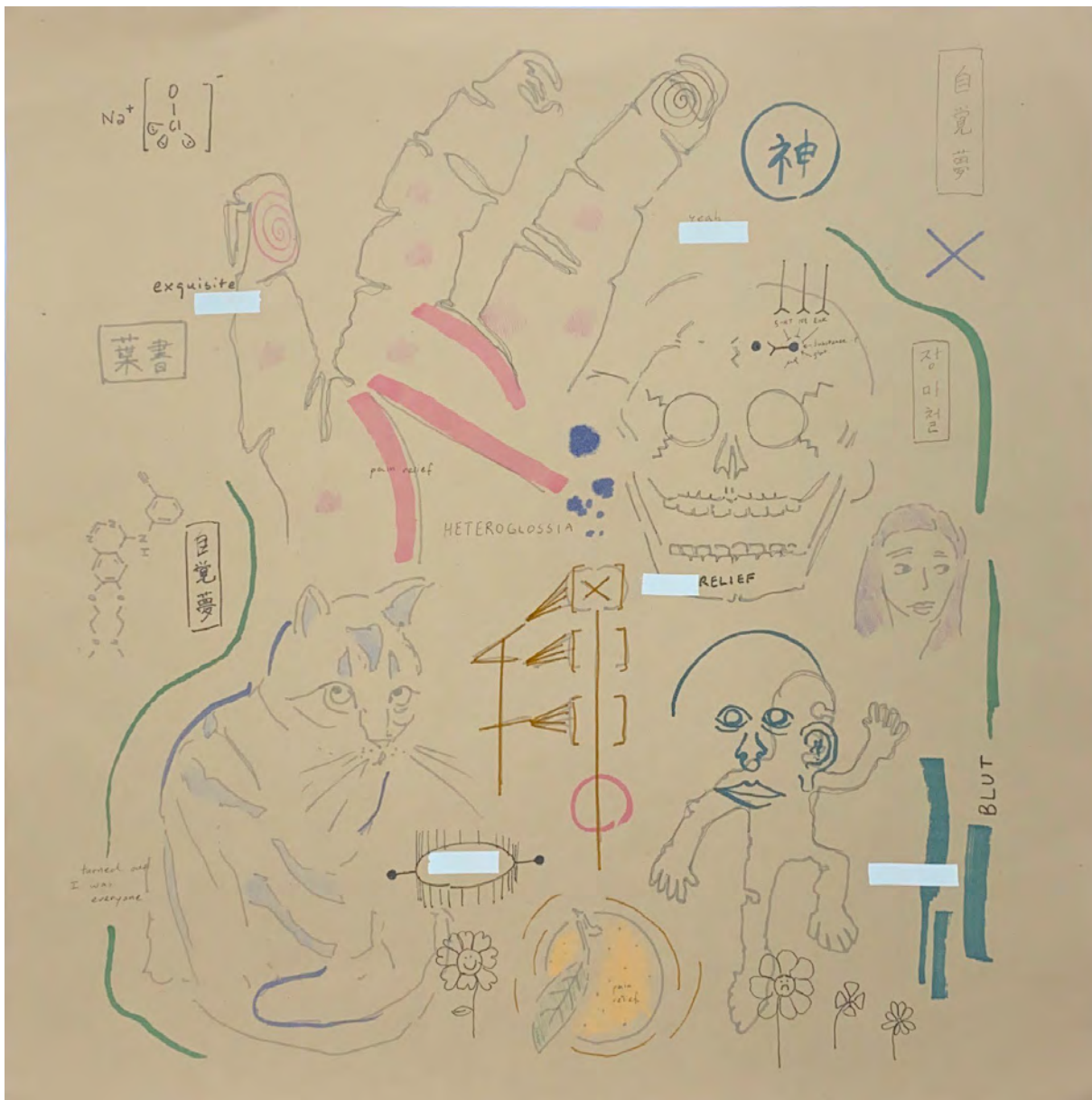


SCOPE



UT Southwestern Medical Humanities Journal
Volume XIII
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ON THE COVER

Heteroglossia
Jae Choi

“Heteroglossia” is a term in literary theory coined by Mikhail Bakhtin, a 20th-century Russian philosopher and critic. Heteroglossia refers to the multiplicity of different forms of speech that take place within any single “language” – for instance, regional dialects, various kinds of vernacular expressions, and registers associated with certain professional or social groups. Different types of speech interact in social settings to simultaneously create a sense of a unified “national language” while at the same time calling into question the neatly delineated limits of such a language. For Bakhtin, language is, in essence, a living system that reflects sociopolitical tensions along the course of its history; it is an incomplete unity fraught with instability and constant reformation.

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This year's SCOPE committee is so grateful for the opportunity to publish the written and visual artwork produced by the talented UT Southwestern student body. Each thoughtfully-crafted submission tells a student's story. Some of these pieces felt so universal to the medical and graduate school experience; other submissions shared rare experiences that presented lessons we only hope may become as ubiquitous as the experience is unique.

Ultimately, we felt that all the pieces in this year's volume of SCOPE told the story of a change, a transformation. As a committee of mostly first year medical students, this theme of change resonated deeply with us; we have struggled and overcome the challenges of our first year, and in doing so feel markedly changed as individuals. Pieces reflecting on the hours spent in anatomy lab, such as "Ms. Seven" and "REST," remind me of the most transformative moments of MS1 year. It feels appropriate to draw a line in our personal stories as the time before dissection and the time after. Furthermore, "26-Year-Old Female" chronicles the changes upperclassmen have experienced, and foreshadows our transformation as we progress to clerkships.

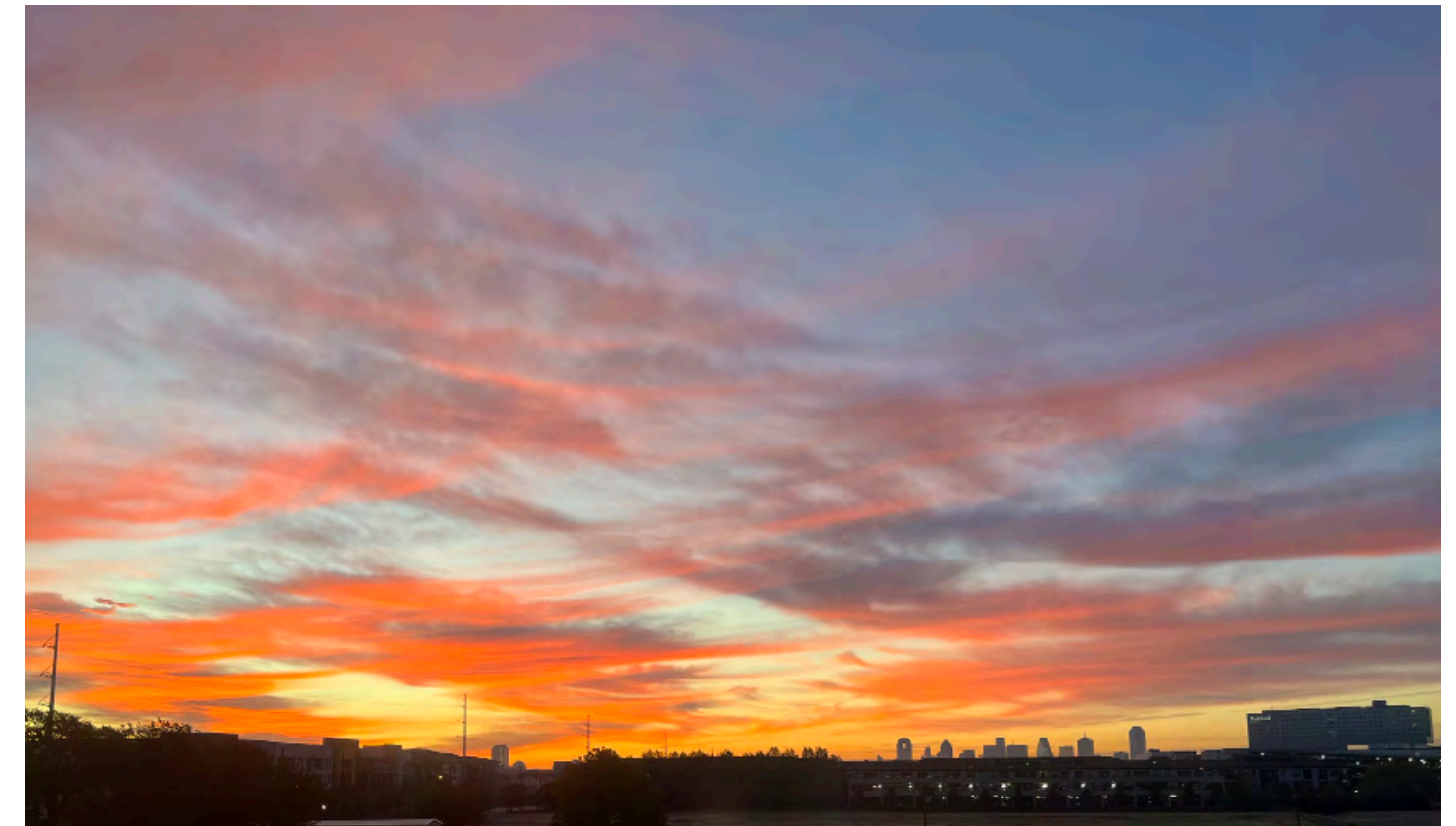
Finally, there are selections that detail varied experiences as the patient, or how it feels caring for our family, friends, loved ones, and even our own mental health. Although these pieces may not mark ubiquitous points of transformation in every medical student's journey, they are ultimately universal turning points in the human experience.

From SCOPE's opening with a "Parkland Sunrise," to its close with a starry-skied "Schoolhouse," we told the story of the change experienced in the journey that is medical school, health professions school, graduate school. In literature and in art we are meant to either see ourselves reflected in it, or learn from the experiences shared that are not our own. We hope that the thirteenth volume of SCOPE allows you to accomplish one of, if not both of these. Most of all we hope that you share your story in the next issue of SCOPE.

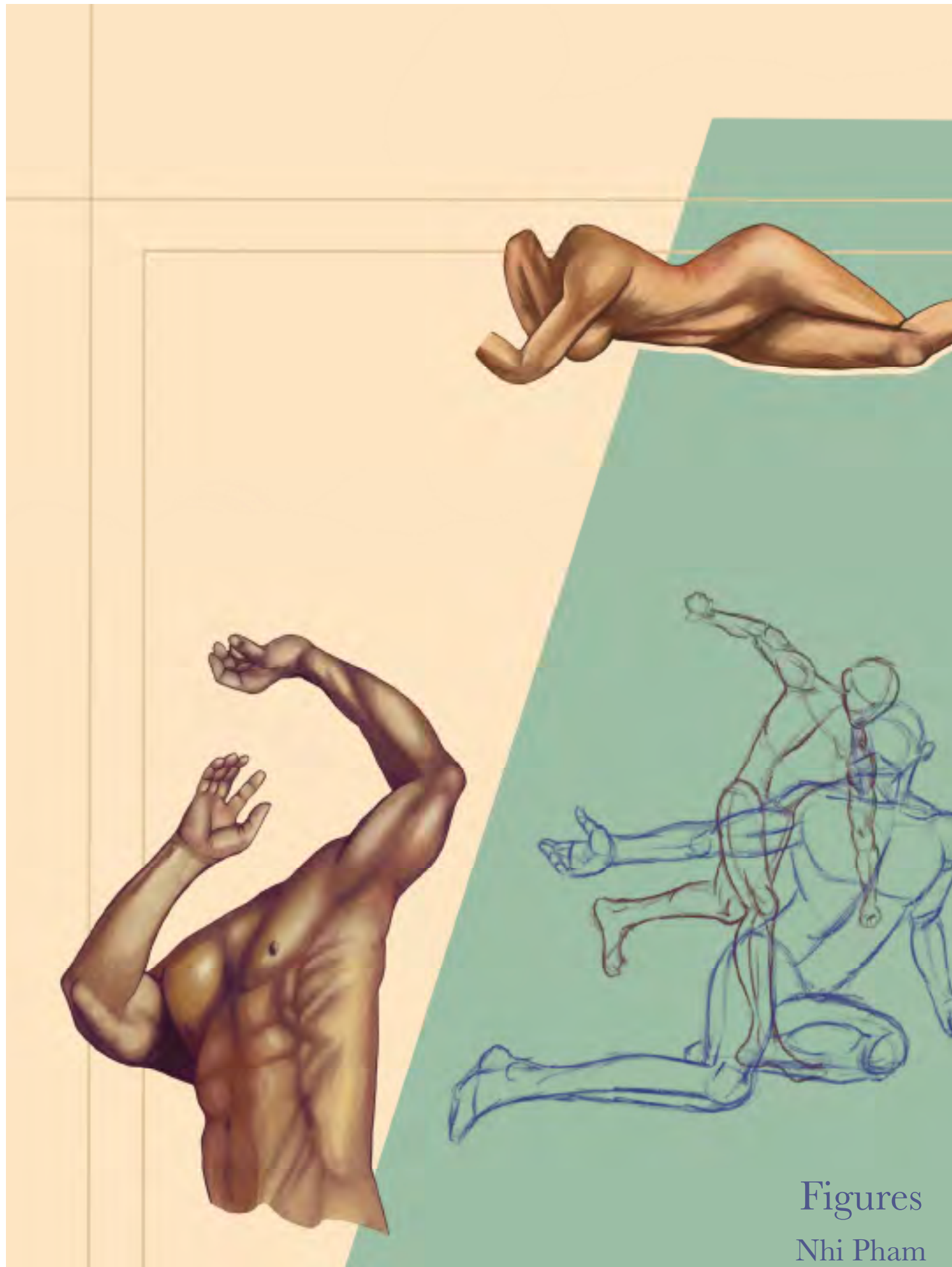
--Evie

Parkland Sunrise

Brenden Garrett



Scope is published by the Medical Humanities Interest Group, a registered student organization of the University of Texas Southwestern. Scope is not an official publication of UT Southwestern and does not represent the views of the university or its officers.



Figures
Nhi Pham

Insomnia

Margaret Vo

i could draw the popcorn dots of my ceiling
by memory, that's how
intimately i've gotten to know it
every night.
counting sheep only does so much.
my soul craves interim nothingness
rootless oblivion
but my mind stays
in the conversations i replay
in the counters i forgot to wipe
in the rue that
keeps me up evening after evening,
hour after hour.
it's like my brain is cycling through
everything
except REM.
toss and turn, turn and toss,
the minute hand completes
another journey
while i remain behind,
unable to catch up.

i'm still drowning in the past
as the sun rises anew.

Ms. Seven

Catherine Agarwal

When I met you, you were
alone and had
no name.

Aged seventy-one, like my
grandmother, with the same
garnet-stained nails.

I watched as you lay
calmly,
draped loosely in white.

I held your hand with
blue fingers and
unearthed the years buried in
the grooves of
your palm. They showed me the life
nestled inside of you and
warned me to listen
before cutting.
I grasped my scalpel with
shaky hands,
praying it would not hurt you, even after
death's embrace.

But what if I told you
that the hardest incision was the last,
and that the skin tells the
stories we cannot
swallow. I can still hear the
thumping of your

aorta and the crackling
in your lungs and the
drumming in your ears and I still see the
good days and
long days and wishes and
regrets in the fascia and adipose tissue
I pulled apart in
silence.

I used to think that
dissection meant
exposing. I know now
that nakedness comes with
unraveling. Because
every moment I
thought I was
examining you,
you were always there,
untangling me, too.

Thank you.

REST

Vivian Nguyen

please take a seat
sit on the stool
next to a sheet
and tub of tools:
pink sewing pins
tan fraying twine
sharpies and pens
sticky tabs in line

under the table
hammer and chisel
stained blade and saw
greasy from it all
hefty garbage bag
nearly dripping sag
RISE



Recline
Nhi Pham

Patient-Specific 3D Printed Hip Model and Technological Innovations in Healthcare

Blaine Oldham

Recent advances in technology have sparked a revolution in healthcare delivery. From virtual consultations and telemedicine to robotic surgeries and artificial intelligence-assisted diagnoses, digital technologies are making healthcare more accessible, efficient, and accurate. One emerging technology likely to play an expanded role in personalized healthcare is rapid prototyping, including 3D printing.

As illustrated below, this technology – while impressive – cannot be employed without the technical expertise required to generate a successful print. This is where the collaboration between trained medical professionals and other technical experts becomes crucial. As future doctors, we understand well the problems that face our patients, ourselves, and the healthcare system. It will be imperative to leverage diversity in perspectives when addressing these challenges.

There are vast sectors of healthcare that stand to benefit from the incorporation of 3D printing technology. Some examples include medical student and resident education, surgical skills training, and patient teaching. In particular, this technology has the potential to greatly benefit patients with unique or complex conditions who need individualized care. However, incorporation of 3D printing requires communication, cooperation, and collaboration.



Someone...Anyone?

Vivek Mathesh

You don't walk alone. You are heard. I'm here with you. I'm here to listen.

Despite recent strong efforts to spread mental health awareness, a poor perception of those struggling with mental illness still burns vehemently in our society. Seeking comfort, care, and assistance from others is sometimes not an option for many due to a fear of being misunderstood and judged. This art depicts a disconnection between someone who wanted to be heard and those who could come to their aid. The warm tones and the ambered flowers juxtaposed with the discord between hands serve to represent "what could be" a beautiful moment of comfort and understanding.



***These figures show a 50% scale hip that was generated by converting a de-identified patient CT scan to a 3D file. The process involves creating and partitioning voxels from radiographic intensity readings, then creating a surface map of the resulting volume. The model is then refined into an appropriate mesh, and extensive error correcting and surface smoothing functions are applied. Next, the completed file is ported over to 3D print slicing software, where the appropriate print parameters for the model and required support structures are added. The toolpath is programmed, and material properties including temperature are selected. The print is then executed; these hips took about 11 ½ hours. After a successful print, the support structures are removed and the part is finished. Possible post-processing steps include deburring, sanding, acetone smoothing (if material used is acrylonitrile butadiene styrene), and polishing.

26-Year-Old Female

Isaac Myres

Standing over the unknown person before us on the stretcher, we hear the date of birth called out, giving us a little insight into the woman the paramedics brought in.

Born in 1996.

She is 26. She is my same age.

With all the commotion in the trauma bay, my mind registers just how young she is. She shouldn't be here. She should be at home.

Suddenly, it's as though I can see in my mind all the things she might do when she gets out of here. I can see her out with friends on a weekend. I see her buying ice cream on a Monday night because sometimes you just do that.

I can see her working and starting a career.

I can see her growing older and learning more about herself.

I can see her neighbors across the street she gets to know.

I see she might even have a family one day.

I can see her caring for an ailing mother.

I can see her being the cool aunt in the family.

I can see her sleeping in one morning after a really hard shift at work and just taking the day off.

I see her giving money to someone in need.

I can see her with her therapist talking about the depressive and dark thoughts that have come up sometimes.

I can see her learning new coping skills to manage those days that feel overwhelming, that feel impossible.

I can see her with her sister taking a vacation they always dreamed of.

I see them wandering the halls of old cathedrals in Rome to see Renaissance masterpieces.

I imagine her laughing as her sister practices ordering gelato in broken Italian.

I can see her visiting a sick friend in the hospital.

I see her rescuing a dog once her kids grow up and are out of the house.

I see her dressing up for Halloween at the age of 70 to give out king size candy bars to the kids.

I can see her struggling to keep up with trends and slang.

I can see her dancing in the kitchen to her favorite songs by ABBA, her sister there with her as they grow old together.

I can see her struggling with hip pain one day and coming to see us again. Maybe we would recognize each other. Maybe we would remember that time she came into the emergency room on the worst day of her life. Maybe she would remember how far she had come in dealing with the depression that was tearing her life apart.

I can see in my mind all the things she might do if she gets out of here.

I can see her, right here, right now. I can also see that wound in her skull.

I keep compressing her chest at 100 beats per minute. I keep going during the flurry of activity all around me. I keep grasping and hoping for that future for her.

As I see her now, it becomes apparent this is the stretcher she will never get off of.

She will never see that therapist, she will never buy that ice cream tomorrow on Monday, she will never dance in the kitchen with her sister.

She was 26.

I am told to stop the compressions and a moment of silence is had. All dozen people in the room stop and glance down at the 26-year-old female on the stretcher. All those moments she will never have flash back through my own mind as we stand there.

I am a 26-year-old male.

Maybe I will call my mom tonight.

Maybe, tomorrow, I will sleep in and go buy some ice cream.

“I have mantle cell lymphoma.”
“You have what?” I couldn’t hear him.
“Mantle cell lymphoma”
He was mumbling. “Wait, what?”
“Mantle cell lymph-”
“Yeah I heard the last word, lymphoma. What are the first two words?”
“Mantle cell”
“Mantle cell lymphoma?”
“Correct.”
“You have mantle cell lymphoma?”
“Yes.”
I burst into tears.

The night before my last day of pre-clinicals I had received an ominous text. My mother begged me to “just drive straight home” when I told her I would be swinging by for a visit. She wasn’t picking up the phone so I thought the worst, maybe someone died. I stood outside my childhood home and knew that this was the last time I would be the person I was in that moment. I was in the before. I was about to meet myself in the after.

I sat down on the couch, heaving in sobs, my arms around both of my parents. *Mantle cell lymphoma. A rare malignancy of B cells caused by a translocation of the cyclin D1 gene on the 11th chromosome to the constitutively active light chain gene on the 14th chromosome. Cyclin D1 is, as a result, overexpressed, leading to uncontrolled cell proliferation. Life expectancy: poor. Approximately 3-6 years.* The flashcard was emblazoned in my brain. I remember first learning of the condition and my breath catching as I studied. *How unfortunate*, I thought at the time, sympathizing but not empathizing. Medicine was fascinating and entertaining and exciting, except when it affected me in any way at all.

“What am I going to do without you?” I pleaded between sobs. No one could speak for the first few minutes. We communicated only through tears, gasping for air in the emptiness of the moment. God had left the room, opening a vacuum in Their place.

My father was a talented anesthesiologist. He had completed medical school and residency training at UTSW and was working there now. He beamed with pride when I got accepted - his Christmas present just a couple years prior. He was supposed to see me graduate medical school.

“I love you so much,” he finally replied.
“I love *you* so much.” I could have screamed it.

No, this can’t be happening again. Months prior, my mother had just finished her treatments for breast cancer. I had just come up for air after a year of waiting in hospital hallways with bated breath. Lightning struck twice. I ruminated on the unfairness of it all.

“I just want you to be a good woman. When I go, I just want you to be a good woman.” I nodded. *A good woman. A lofty goal.*

The next weeks moved slowly and sometimes not at all. My bones felt heavy. The weather mourned with me and I was grateful it did. The cold air caught in my throat when I tried to speak.

A good woman Jenny Foster

Yes, I am okay. No, we don’t know how long he has. He is stage four. I don’t know if it’s genetic. I grew awfully tired of platitudes. With every question about his condition, I became less patient with generic responses and less willing to comfort the asker. I would see that look of concern on their face, begging me to say something positive and heal the pain in their chest. But I wouldn’t give them the satisfaction of a just world. I would simply let the conversation fade off and revel in the tension in the air. As if to say, *do you feel that, too? Can you feel it with me?* I couldn’t stand superficial discussions about my father. I needed people in the moment with me or not at all. I was dangerously close to the precipice, confronted with my existence. I needed others to peer over the edge with me.

I needed to create meaning out of my circumstances yet no meaning was big enough to balance the scale. *What meaning could repair my family? Where do I put all of this grief?* I was clumsy with grief. I held grief in my hands as I stumbled on through life. Grief soaked through my everyday conversations. I felt the urge to tell everyone I met as a warning for my disposition. The cashier at the grocery store should know that my perpetual frown has nothing to do with their ability to bag groceries. Grief altered the fabric of who I was. Grief consumed me.

I was hoping for a distraction when I started rotations yet grief only followed closer. Several patients of mine were diagnosed with lymphoma. There were so many breast abscesses and cancer recurrences. I was brought back to medical school orientation when my mother was hospitalized for sepsis due to an abscess. I even observed a surgery with the same surgeon that removed her cancer only a year prior. During my surgery rotation, my father was admitted to the hospital during my shift. As I was writing the beginning scenes of my career, my parents’ stories bled through the pages.

And I was so dangerously, viciously bitter about it all.

I was bitter about having to wake up every morning. I was bitter about having to be a good medical student. I was bitter that I had to answer questions on rounds and look presentable and talk intelligently. I took care of other patients while my father struggled through chemotherapy across the street. Never once was the cruel peculiarity of my situation lost on me.

I debated even being in school at all. Why was I so spitefully determined to persist? The thought of my father not living long enough to see me walk the stage was an important motivation, yet not the only one. There was a twinge of self-flagellation in the way I pushed on.

My year of grief came to a head July, when my dog passed away from lymphangiosarcoma. My family and I were again victims of cancer’s cruel wake and life’s cruel timing.

I called in sick that day. A brief respite in the war against my ego.
I waved the white flag. The grief was too much. I had to set it down.

There was never one particular moment that I felt myself softening. If I had to guess, it would be some-time after my dog passed, and we found out my father’s cancer had not responded to the chemotherapy. I asked for a change in schedule so that I could be at home with my family. When I returned to rotations, I had changed. I threw out the rulebook I had initially given myself about how a doctor should be. I chose to speak through my experience.

During a tense pause in conversation with a family about chemotherapy, I mentioned that my father was receiving the same treatment. I told them about his experience, my voice catching. I knew I couldn’t tell them that it was going to be okay. It was likely not going to be okay.

But, I was more than willing to feel the not okay in that moment with them. I knew the not okay. I embraced the not okay. The not okay was going to be there whether I acknowledged it or not. I might as well shine a light on it and make it less scary.

The words flowed more eloquently after that. I was not afraid of life changing diagnoses or delicate subjects. I honed the makeshift art of sitting in the discomfort. I never steered the conversation away or gave silly airhead platitudes. I just let it be. Connection cured me. My patients made me sweet.

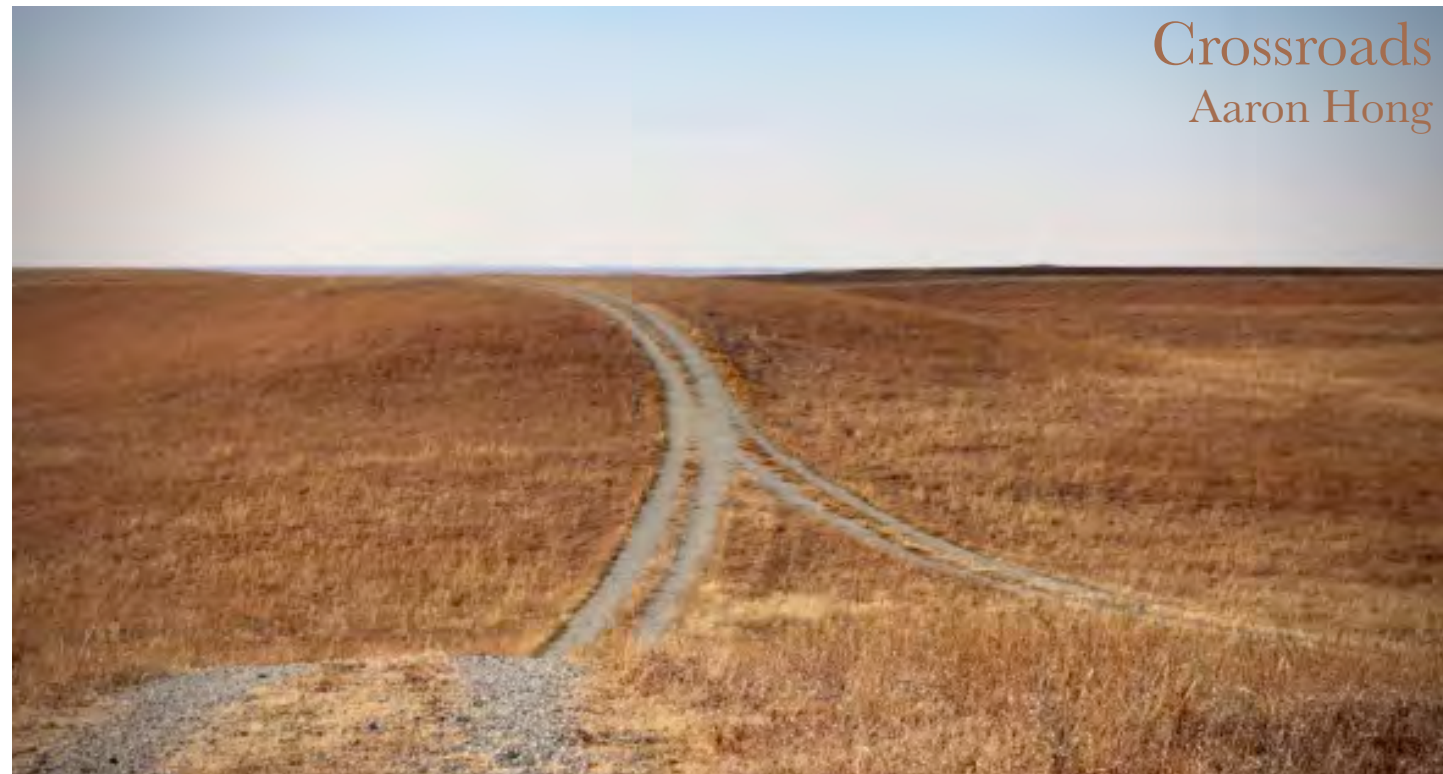
I met an older man recently who was treated for a rare form of lung cancer only to come down with another, exceedingly rare form of lung cancer a year later. Lightning had struck twice for him, too. We spoke about God and life and our own clumsy searches for meaning and comfort in a world that seemed to lack any.

“I understand that you’re a strongly spiritual man, but we can all feel sad at times. Does that ever happen?” I had started this line of questioning on a whim, just to see if one medication I was thinking of might work better than another.

“Sometimes...sometimes life gets me down.” He posited, eyes welling with tears. I felt his tears and his tears became my tears. I nodded. *I understand*, I told him so with my eyes. The silence rang on.

Eventually, we came to the conclusion that what he was feeling despite his strong faith was not a reflection of his character. Sometimes we all need a little help and sometimes that help comes in the form of a prescription. I thanked him for his time and was walking to the door when he stopped me.

“Ma’am, thank you for speaking with me today. I think you’re going to be a good doctor.” I smiled. *A good doctor. A good woman.*



their tattoos

(a reflection from the trauma bay)

Lillian Carter

when bones bellow and
blood drips on the floor.
when eyes release and
breaths cease faded black ink
pierces your skin like the day they got

their tattoos.

“be brave” below a bullet wound.
a half heart that lasted longer
than the one it belonged to.
the smallest of crosses, lost to us.

none are alike – though often seen as the same,
they were picked by someone who had a Name.



Support System
Laura Vargas Ortiz

Humanistic One-Liners

Aishwarya Iyer

32-year-old man with ~~Stage IV colorectal cancer~~ a passion for fixing up vintage cars.

45-year-old woman with ~~cholangiocarcinoma~~ a handmade quilt stitched with family memories.

54-year-old man with ~~opioid use disorder~~ a decorated history of service in the Marines.

63-year-old woman with ~~ESRD~~ a fondness for Werther's candies.

67-year-old gay man with ~~end-stage idiopathic pulmonary fibrosis~~ who lived through his-
tory with a dry wit and an acerbic tongue.

42-year-old woman with ~~dilated cardiomyopathy~~ and mother of five who made the best
tamales.

39-year-old ~~homeless~~ man who worked in construction for years.

32-year-old man with ~~alcoholic cirrhosis~~ whose last wish was to drink a Coca-Cola.

25-year-old ~~medical student~~ young woman with a determination
to always see her patients as people.



Recline
Nhi Pham

A Hospital of Birds

Brenden Garrett

The UT Southwestern "Rookery" is a sanc-
tuary and nesting ground for dozens of
bird species. The following are a few of my
photos of elegant egrets that remind me of
people I've met in Children's hospital.



The Lookout

This baby egret reminds me of that one
patient's brother who is always peeking
out the doorway, saying hello, and asking
what is going on. His curiosity brings a
sense of wonder to a sometimes-bland
hallway.

The Guardian

This is the parent who is always in their
child's hospital room; checking on them,
doing research about new diagnoses, and
asking questions to providers. Their eyes
show their worry, but also their resolve.



Hello, Neighbor!

This is the nurse who always shouts hello
to whoever passes by, accompanied with a
radiant grin. They're that person that
says something funny just because they
like to see people smile.

My Promise to Sasha

Benjamin Popokh

I've lived by a promise,
Given to a final breath
Not one made in passing
But one bred in death

I've lived by a promise,
Ever present in my mind
And given to one
Who cannot promise in kind

I've lived by a promise,
Each night and each day
By the moon's first beam
And the sun's first ray

I've lived by a promise,
A debt with no end
To a brother taken
And a lost best friend

I've lived by a promise,
To a youth taken by cancer
Blue eyes with no sight
Pale lips with no answer

I live by a promise,
And with all of my might
I'll continue your battle
I'll finish this fight

I live by a promise,
A dream I pursue
To give others the life
That God took from you

Uncertain Future

Michelle King

This will help you, the nurses said
No longer will you feel dread
As the illness descends and you get sick
This medicine will fix your problems quick.
But no, say I, this elixir is not working.
Its helpful effects must be shirking
In their duty, since I'm still getting ill
Maybe this is more complex than just a pill.

How uncertain can I be?
What even will my future be?
If this continues, then my life
Will only be filled with dread and strife.
Four years of high school and nothing's aided
Don't you realize I'm now quite jaded?
Now college seems but a dream
Or, at least, that's what it seems
Nothing's worked, I'm still so sick
Nothing seems to do the trick.
But doctors keep trying, a solution appears
And finally, after four long years
I'm finally bereft of fears.
The meds are working, now I'm hoping
Life will be more than just coping.
Now I'm healed, now I'm free
To be whatever I can be.

Forest Road
Aaron Hong



Correspondence

Jae Choi

I took this picture of what appears to be a *Dittrichia graveolens* plant in Northern California this past Christmas. Observing the filamentous branching and the fuzzy barbed bristles of the specimen in the viewfinder, I was reminded of stereoscopic images of *Aspergillus flavus*, an opportunistic fungal pathogen; I set a large aperture to establish a murky bokeh effect, as if one is looking through a microscope with different parts of the image in and out of focus. I felt that the largely monochromatic color palette of the photo only reinforced this surprising visual association. After further research, I noticed another interesting connection. *Dittrichia graveolens*, also known as the “stinkwort” plant, is invasive in its own right, although it poses a threat to native plant ecosystems rather than to humans (as in *Aspergillus*). The correspondences between various forms of life along different levels of analysis — whether it be the way the fractal patterns of the limbs of a tree resemble the branching of neuronal dendrites, or the way the fibonacci spiral appears in the nautilus shell as it does in the cochlea — has always been a source of fascination for me. Noticing these sorts of associations beckons moments of awe that serve to continuously renew my fascination with the biomedical sciences and the relation between what is “nature” and what is “human.”

Contaminated

Mikayla Eppert

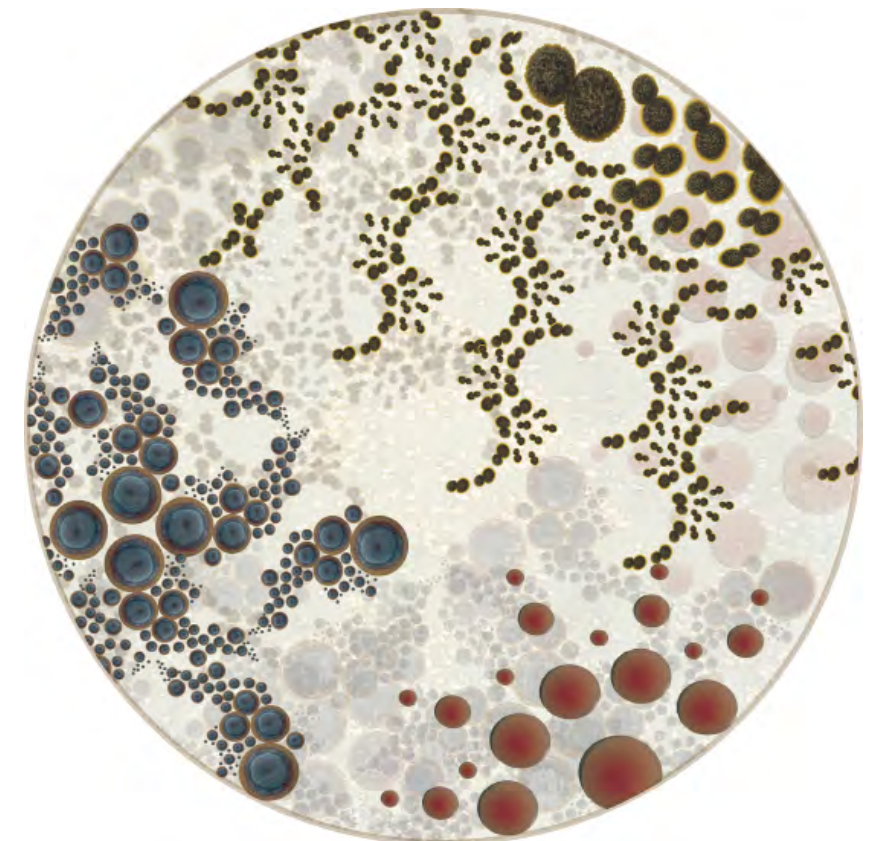
When I looked in the mirror this morning,
I found mold in my brain.

I’m told it’s completely innocuous, but
even steel wool can’t remove the rot

My mom told me vinegar and baking soda would do the trick.
Yet, parts of me dissolved, and the spores still bloomed.

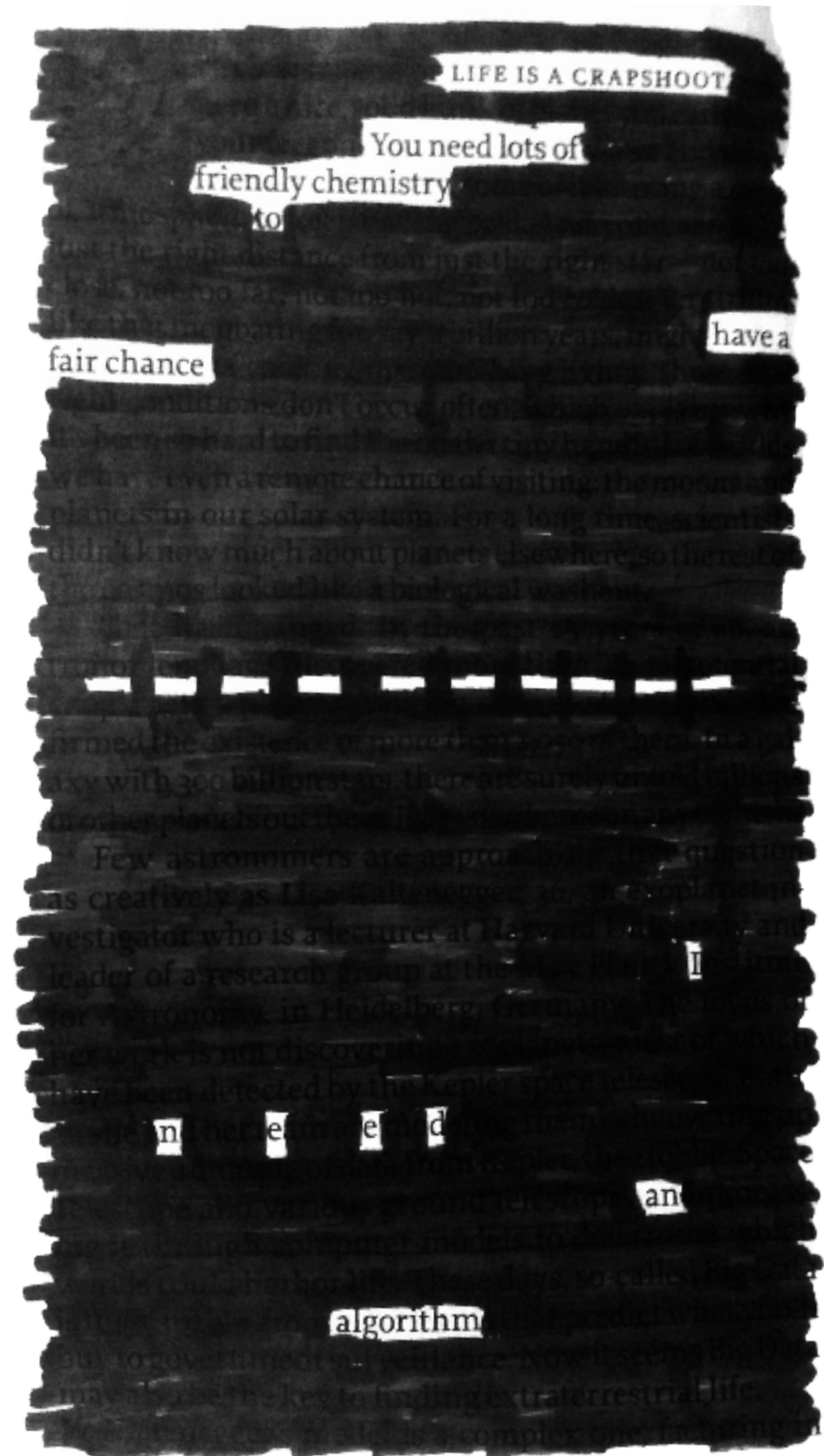
The mold’s infected every part of my body:
my fuzzy words souring my tongue,
the damp discomfort of my hands in disappointing others,
and mildew collects in the musty chambers of my heart.

They told me it’s completely innocuous, but
what if the mold’s all that’s left?





Life is a Crapshoot
Molly Schlamp



Rite of Passage

Kelsey Park

Warily heed these hallowed halls of prestige:
You were chosen for your determination.
A one-track mind with a laser-sharp focus,
a heart of gold and never-failing righteousness.

You were chosen to walk this passage, where
time passes like molasses. To monitor the suffering
with an unwavering gaze. To treat those who have
tired, halted, or slowed to a stand-still.

Here is the true test of strength you must pass: to endure
the endlessness of effort of waking of work
You must trudge forward; You must be
Good, Faithful, Honest, and Just.

Yet I must admit, I cannot say without some regret--
My pulsing, hurting, and flawed spirit may be
no different from the soft and ordinary souls of
Humanity I was purposed to serve.

Kyoto
Claire Abijay



Colorado Bravado
Moises Narvaez



A Secret Well Kept
Dequan Weston

~~~~~

Blanket of death, O' how heavy and bold  
Sweeping ends expiring both young and old  
The restless will skirmish, the tired will accept  
The fate you bring, is a secret well kept

The blanket descending upon you,  
I fight with my all  
For I expect the same if it is I to fall  
My hands on your chest, we will fight to the death  
You and I, fighting the same blanket of death

Young soul, so troubled and wrecked,  
How foolish to think you decide the fate of your breath  
I will remove this man from your chest, I will bring you to your final rest  
Just accept and come with, I promise it's quick  
You and I, this is our last breath

Blanket of death, O' how heavy and bold  
Sweeping ends expiring both young and old  
I'm scared and cold and don't know what to expect  
I've lived such a short life but have no energy left  
I welcome your warmth, I do accept  
But when the warmth and darkness come, what will be next?

Blanket of death, O' how heavy and bold  
Sweeping ends expiring both young and old  
The restless will skirmish, the tired will accept  
The fate you bring is a secret well kept

~~~~~



Arcuate Life
Jae Choi

Post Shift Prayers

McNeilly Arias

I saw the hungry hands of death tonight.

His greed stood before me and tried to coax hope from my sinews
In his wake, I take communion slow
Remind myself to be a glutton for hope
In his wake, breath is holy
– a steady, forgotten mercy

I feel the weight of Glory in each inhalation
It's the air telling me He's not done yet
It's the heaviness of his nearness nestling close to the low hanging heart in my chest
No, my muscle does not hurt- it's just a sagging sort of sore
Oh God, let it be the sore that comes before rebuild

Rebuild
'Cause you see, Kingdom is built on poured out longings
Its roads paved with gold bricks forged by those who want better
Its buildings erected by the downtrodden yearning for newness
Its clouds made heavy with tears of those who knew we were meant for more

That's why Spirit groans for us when we don't have the words to pray
He's building Kingdom from our weary sighs

So, don't hinder your liturgy of sobs
This dry, cracked ground needs them
Earth longs to quench its thirst on your spilled prayers

Please
Heart swell, bubble up, rise through tight throat and brim over hot, salty sadness
- like springs in the desert
When God spoke, he promised to catch each tear in a jar
To keep careful count of each oasis sprung
So, I beg you tears, spill forward to feed the dust under foot

I have nothing to offer this desert but that which He spent on me
I've known it since I was young
Before I could reach my mother's hip, I knew I was a pitcher filled to be poured out
I heard the water in my ears, saw it behind my eyes, felt it lapping in my throat,
ready to spill over

Some may think the offering weak, just a humble stream
But it cuts canyons
It falls through fingers yet keeps you afloat
It coaxes roots from mustard seed and urges stem towards sun
So that your spent CO₂ can become new breath

What have you spent your breath on today?
I poured mine out in rivers on the ER's linoleum floor.



Schoolhouse
Aaron Hong

Contributors

Claire Abijay is a current fourth-year pursuing Neurology. She learned to watercolor during the COVID pandemic.

Catherine Agarwal is a first-year medical student at UTSW. When she's not studying or in the lab, she can be found rock climbing, writing, thrifting, or spending time with her family.

McNeilly Arias is a first-year medical student from San Antonio, TX. She lives in Dallas with her husband Seth and is thankful for her family's and friends' support as she prepares for a career in medicine at UTSW medical school.

Lillian Carter is a third-year medical student with plans to go into psychiatry.

Jae Choi is a first-year medical student at UT Southwestern Medical Center. He enjoys taking pictures of things, painting, writing stories, and taking long walks on the Katy Trail while listening to music.

Mikayla Eppert is a second-year graduate student in the Biomedical Sciences Ph.D. program currently working in the lab of Dr. Ben Sabari. After completing her Ph.D., Mikayla hopes to work on improving communication between scientists and non-scientists about different treatments for disease. She believes art can be used as a powerful media to convey our most personal experiences and connect to each other through them. Her art is derived from her life experiences, particularly the intersections of her identity and the world around her, with an emphasis on mental health.

Jenny Foster is a third-year medical student with a passion for yoga, music, and her two cats. She started writing creatively as an elementary school student submitting poems about nature to local contests. Over the years, her love of writing has taken the form of journaling and song writing with friends. She now writes to share her patients' stories and her own experiences in medicine.

Brenden Garrett is a third-year medical student and a full-time nature appreciator. His pictures don't usually do justice to what he experiences, but every once and a while what he sees actually ends up as a little digital image.

Aaron Hong is currently a fourth-year medical student. When he is not in the hospital or studying in the library, he likes to travel to the middle of nowhere and appreciate the beauty of sites often overlooked.

Aishwarya Iyer is a fourth-year medical student and aspiring family medicine physician. She is passionate about reproductive justice, narrative medicine, and good food and coffee. Like much of her writing, her process of combating the impostor syndrome associated with calling herself a writer is a work-in-progress.

Michelle King is a student in the Masters of Science in Clinical Science Program. She has been interested in creative writing for more than a decade, and particularly enjoys writing poetry.

Vivek Mathesh is a first-year medical student. In his free time, he loves to cook, draw, write poetry, and play chess. He is inspired by the sweet, candid moments of life that make your day, such as a cute dog walking into the coffeeshop or watching a nice sunset at the end of a long day.

Isaac Myres Med student, uncle, donut connoisseur, bar trivia champion, Google Maps Guide Level 4, owner of a Bop-it, lover.

Moises Narvaez is a first-year, first-generation Mexican American medical student here at UT Southwestern. He has a huge love for sports, biotechnology, and the outdoors. Photography is a relatively new exploration of the arts and an extension of his love for the outdoors.

Vivian Nguyen is from Southern California and completed a BS in Microbiology and a minor in Professional Writing at the University of California, Los Angeles. She is currently a second-year medical student at UT Southwestern Medical School.

Blaine Oldham is a third-year student at UT Southwestern. He enjoys creating, troubleshooting, building, repairing, and modifying things by working with his hands. His interests include travel, games, computers, rock climbing, and (of course) 3D printing.

Kelsey Park is a third-year medical student. Clerkship has been both a transformative and grueling experience for her. For self-care, she enjoys making music, writing poems, and spending time with her friends.

Nhi Pham is a first-year medical student by day, 2D visual artist by night. She specializes in digital art, graphite, Prismacolor, and acrylic paint. Although art began as a childhood hobby, drawing and anatomy courses at UT Dallas spurred her interest in figure drawing.

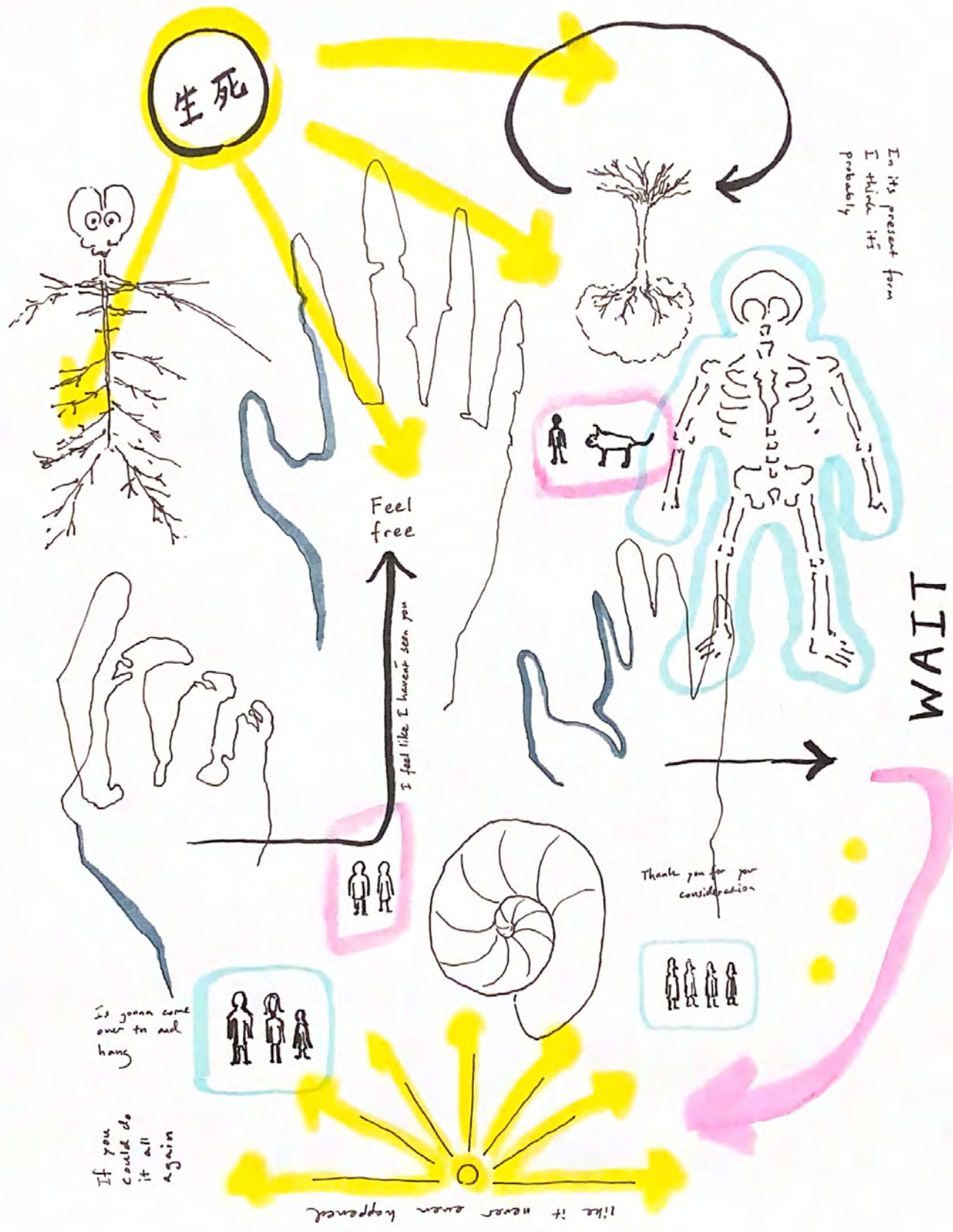
Benjamin "Benji" Popokh is a first-year medical student interested in pediatric oncology and pediatric neurosurgery. In his spare time, he enjoys running, reading, music, and comedy. He graduated with degrees in neuroscience and biology from UT Austin, but wishes he minored in English so that he would finally understand iambic pentameter.

Molly Schlamp is a third-year student finishing up clerkships and trying to make sense of what she has seen and learned. She loves writing, music, exercise, and anything else that punctuates life's difficulties with moments of joy.

Laura Vargas Ortiz is a first-year medical student. She is half Colombian, half Argentinian, and grew up in Texas. She has always loved art and is particularly interested in its ability to heal.

Margaret Vo is a first-year medical student. In her spare time, she enjoys pacing in her apartment, eating Jimmy Fallon ice cream, and sniffing candles.

Dequan Weston is a second-year medical student at UTSW. His passion for medicine began while on a medical emergency response team during his deployment to 5th fleet. He further pursued his passion in a Phoenix ER where he worked as an ER tech and saw firsthand the fragility of human life in an entirely different way.



Jae Choi
Different Tongue