

# The Asclepian

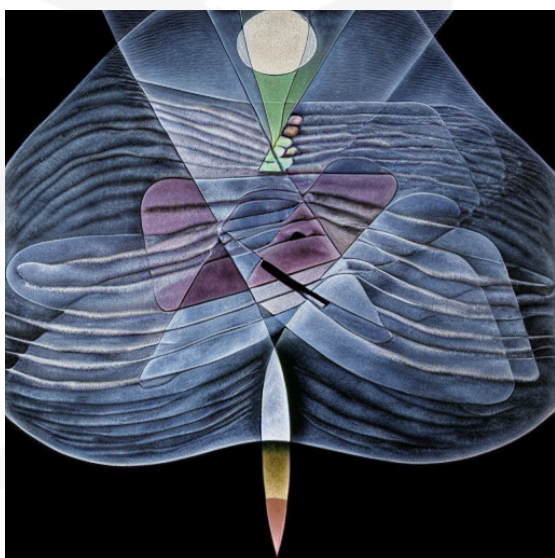
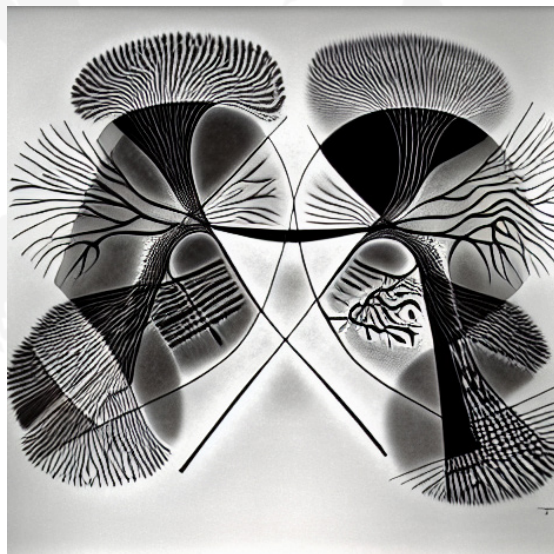
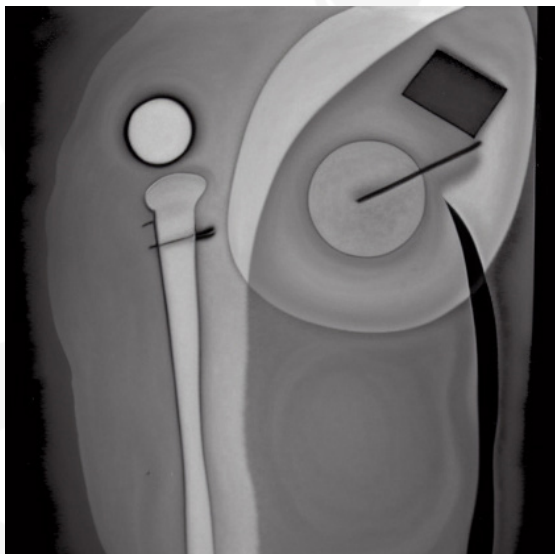


*Cooper Medical School  
of Rowan University  
Journal of Arts & Literature  
Volume VII // 2022-2023*

# Modern Radiology

Zachary Padron, Class of 2025

*Collection of Stable Diffusion v1.5 AI Generated Images*



# **A note about the cover piece...**

## **Is AI Really the Future?**

Zachary Padron, Class of 2025

*Corresponding opinion piece to Modern Radiology*

ChatGPT passes all USMLE board exams.

ChatGPT writes differential diagnosis for chest pain.

ChatGPT writes medical school exam questions.

Artificial intelligence seems to be the thing everyone is talking about. Whether it be if pathologists will have a job in 20 years, or if artists will still be commissioned for pieces, AI is creating questions in every field, and medicine is not immune.

Specifically, the field of radiology is always the one that is speculated to be replaced by AI. “A computer can read 100 chest x-rays in minutes” or “you’ll only need one radiologist per hospital to check and make sure the AI is reading correctly” seem to be the common comments.

While multiple decades from now, this may be possible, in our lifetime this doesn’t seem feasible. How often are medical students told not to read the computer’s interpretations of an ECG, but instead read the tracings themselves and explain their findings. This technology has been available and improving since the 1950’s, yet we don’t approach cardiologists and ask if they are scared for their job security.

Radiology isn’t any different. The human touch to medicine, even in the dark reading room basement of a hospital, is still and will always be relevant. The ability for a human being to read a scan, catch miniscule lesions or opacities, and discuss the clinical implications of the findings with another physician is invaluable.

Medicine has always been about the people, regardless of specialty. So, when people ask if I will change my mind about my future career because of AI, my answer is simple. No - because sometimes AI might shoot out an image like the ones attached.

# Editor's Note

Dear Readers,

It is our joy to present the seventh edition of *The Asclepian*, a medical humanities journal created by the students of Cooper Medical School of Rowan University to publish the wonderful artwork and literature of the Cooper community.

Our magazine's namesake is the hero Asclepius, the god of medicine in Greek mythology. According to the myth, Asclepius was born from the dead and brought healing to the world. The life of Asclepius reminds us of the mission of Cooper Medical School of Rowan University, a medical school born to a devitalized city, cultivating the next generation of healers for the Camden community and beyond.

In an increasingly fast-paced world of medicine, the humanities provide an opportunity to slow down and reflect on the powerful experiences we encounter. As you come across the reflections in this edition, you will have the opportunity to view the world through many perspectives, each of which highlights the importance of empathy in its own unique way. We hope to see the power of empathy continuing to thrive in the practice of medicine because while our medical knowledge and skills may be limited, our compassion for those we serve is not.

We have been deeply moved by the abundance of creativity in our Cooper community and are pleased to share *The Asclepian* with you. We hope you all enjoy it as much as we have enjoyed putting it together.

Sincerely,

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# Ants

Olivia Schreiber, Class of 2024

I can hear Maria's\* labored breathing as she enters the psychiatrist's consult room. Her daughter, Frannie\*, is holding her hand to keep her stable as she makes her way to one of the chairs. I, the medical student, take my seat and position my body so that I can look into Maria's eyes. I did not need to read her note to know that she has COPD—with every breath she takes, a loud wheeze fills the room.

Maria is 94, has dementia, and is seeing ants crawling on her floors, ceiling, and bed. The ants—"visual hallucinations" to the psychiatrist and me—are very real and terrifying to her. She awakens most nights, crying for Frannie, completely unaware that there are in fact no ants in her room at all. She cannot sleep soundly, leaving her anxious and upset the following morning. She's also been hearing eerie music and voices. "Quiero dormir," Maria moans. "She wants to sleep," Frannie tells me with a look of desperation in her eyes. The bags under Frannie's eyes tell me that she too needs sleep.

Despite us knowing that a neutral party translator is best practice, we let Frannie speak and answer our questions. I run through a psychiatric review of systems, trying to maintain my eye contact with Maria. I ask for her medications. Frannie seems embarrassed when she cannot pronounce risperidone; flustered, she shows us the bottle. Yet, despite her mispronunciation, she recites all of Maria's medications, the dosing, and the time of administration. She forgets not one pill.

Frannie tells me all about her mother. She was from "the islands"—Puerto Rico—and had little education before dropping out, getting married, and having four children. She thrived in the kitchen and loved music; she still does. When her husband died in the 90s, she was distraught. Ever since then, she has had "bad nerves"—not paresthesias due to radiculopathy but a deep, unrelenting anxiety that sits like a lead weight in the center of her chest. Maria rubs her sternum as if to calm her brain. "Her nerves sit there," Frannie explains. I learn that following her husband's death, she was prescribed a benzodiazepine which she has been on for over 30 years.

The psychiatrist takes over the interview and offers her recommendations. She wants to tinker with dosages and perhaps taper Maria off the lorazepam. Frannie tenses in her chair. "She's been on that for a while," she says in a nervous voice. "We'll make one change at a time," my attending says calmly. "Let's discuss it at the next appointment."

Forty-five minutes have passed, and it is time to end the appointment. Frannie stands and approaches Maria. She strokes her mother's head and tucks loose strands of thin, gray hair behind her ear. For a moment, I imagine the roles reversed, a younger Maria touching her child's hair as they share an embrace. Maria rises and grabs her daughter's hand for stability. They walk slowly to the front desk together. I hear one last wheeze before closing the door.

I sit in my chair and soak in the love that still emanates from their now vacant seats. I recall my own mother's hand in my hair. As I cried about a splintering friendship or a poor exam score, she would comb through my curls, releasing endorphins and anxieties. I wonder what it's like to experience something that feels so real but isn't—ants, a gentle touch, voices from unknown places.

\*Names have been changed for patient anonymity

# Views

Archit Gupta, Class of 2025  
*Digital collage with Visual Body Atlas*



# Invisible

Ankit Rana, Class of 2024

“Agitated patient” –

That’s all we were told. Off we ran, the resident and me.

Stepping into the patient’s room was like stepping into a new world. Shouts filled the hallway, and the patient paced around and around. Yells and anger filled the room. Around and around they paced.

Agitated makes sense.

A small militia was standing outside, dressed head to toe in riot gear and body armor, wielding behavior-correcting devices. Or so it seemed. Squeezing past security, multiple physicians and nurses tried to converse with the patient, but the yelling continued to escalate. While everyone stepped away to discuss and reassess, security remained unyielding. By now, there were only intermittent shouts.

A nurse ran in, geared up and hiding a syringe behind his hand. “I just want to give you your blood pressure medicine because it’s very high right now,” he said in a level tone. I didn’t know that hypertension medication could be administered intramuscularly in the hospital... from a nurse wearing a protective vest... with an army of security guards within arm’s reach. The patient refused. An unsuccessful round of bartering ensued. However, the situation was not progressing, so during a small break in the heated discussion, I hesitantly spoke up from behind the wall of 6’5” humans.

“Can you tell me about your grandchildren?”

The silence that followed was unnerving, to say the least. Lasting for a little longer than comfortable, I felt all eyes in the room on me. Fear in hand, heart in my throat, and ears red as beets, I squeezed between the pillars and repeated my question.

“Why do you want to know about them?”

“I heard you mention that you wanted to get back home to see them. I love kids and it seems like we’ll be sitting here for a while. Can you tell me about them?”

There was a mixture of emotions that flashed across the patient’s–Alex’s–face. Confusion. A small wisp of a smile. A pause to think. Back to anger. Then, a softening. And finally, a deep cry. Alex slumped to the ground, sobs filling the air in stark contrast to the yells full of fury from moments ago. I was mortified, thinking of how I would be reprimanded for making a patient cry. But before I could convince myself that it was time to drop out, a small, soft voice came from the corner, “They’re perfect.”

I didn’t say a thing, largely because I was at a complete loss of words, but also with the hope that they would continue in the space of silence. And they did. I learned about the patient’s “grandbabies” and how much fun they have together. Their times at the park. Their times watching movies together. Their times swinging the kids around with nothing but joy and laughter to fill the air. I heard stories of family gatherings, the grandbabies’ birthdays, and weekends spent at home with loved ones. I heard nothing but love for those wild, perfect, and wonderful kids.

By now we were both on the ground, sitting against opposite walls and talking. We were on a first name basis, sharing stories and exchanging laughter, along with the occasional tears of happiness. We must have been talking for a while because I looked around and noticed that the pillars were gone. They were broken up in pieces, spread apart, and chatting away in the hallway as the tension dissipated.

Eventually, our conversation returned to the present moment. Together, Alex and I set a goal: to get them back to their grandbabies. To do this, we agreed to talk a little more about why Alex was here. And once again, I kept space for the patient and listened. I learned about the invisible man that lives in their head and is always watching them. I learned about the way he judges and bothers them. I learned about the way he comes out while the patient is sleeping and destroys their house. I learned about how he has made Alex’s life a living hell. But most of all, I learned about how Alex found ways to manage.



I thanked them.

The air was much clearer now: no longer heavy and overbearing, but gentle, peaceful, and open to next steps. We brought in a trusted psychiatrist. We called the patient's kids. The story was corroborated and further cleared up. The grandbabies said hello. Alex was at ease. The end of the visit was within sight.

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As medical students in the hospital, there is a tendency to say, "I'm just a medical student." It's practically ingrained in our vocabulary. I believed it a little more every time the words came out. Just. Only. Nothing-more-than. But our patients don't think so. They see joy and energy. They see enthusiasm and kindness. They see a friend in a sea of adversaries. There is power that comes with playing the role of a student. We all have that bit of power within us. Part of it comes from our shared experience. Our shared understanding. Our shared humanity.

I hope to never forget that.

\*Names have been changed for confidentiality

## **Importance of Touch**

Sruthi Srinivasan, Class of 2024

*Digital illustration via ClipArt Studio Paint*







# Maman

Kiana Malta, Class of 2024

*Photography accompanied by written piece*

Dear Maman,

When I brush your hair and change your clothes,  
you heal me.

When I hold your hand and help you climb the stairs,  
you heal me.

When I give you a shower and your face transforms  
into happy and renewed,  
you heal me.

When I bring you to the garden to sun soak,  
you heal me.

Every act of service and love I pour into you helps me  
remember who I am, where I came from, and where  
I'm going. Taking care of you now is a small payment  
on a debt a thousand times greater for when you raised  
me.

Love,

...



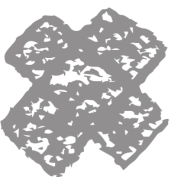
# The Intruder

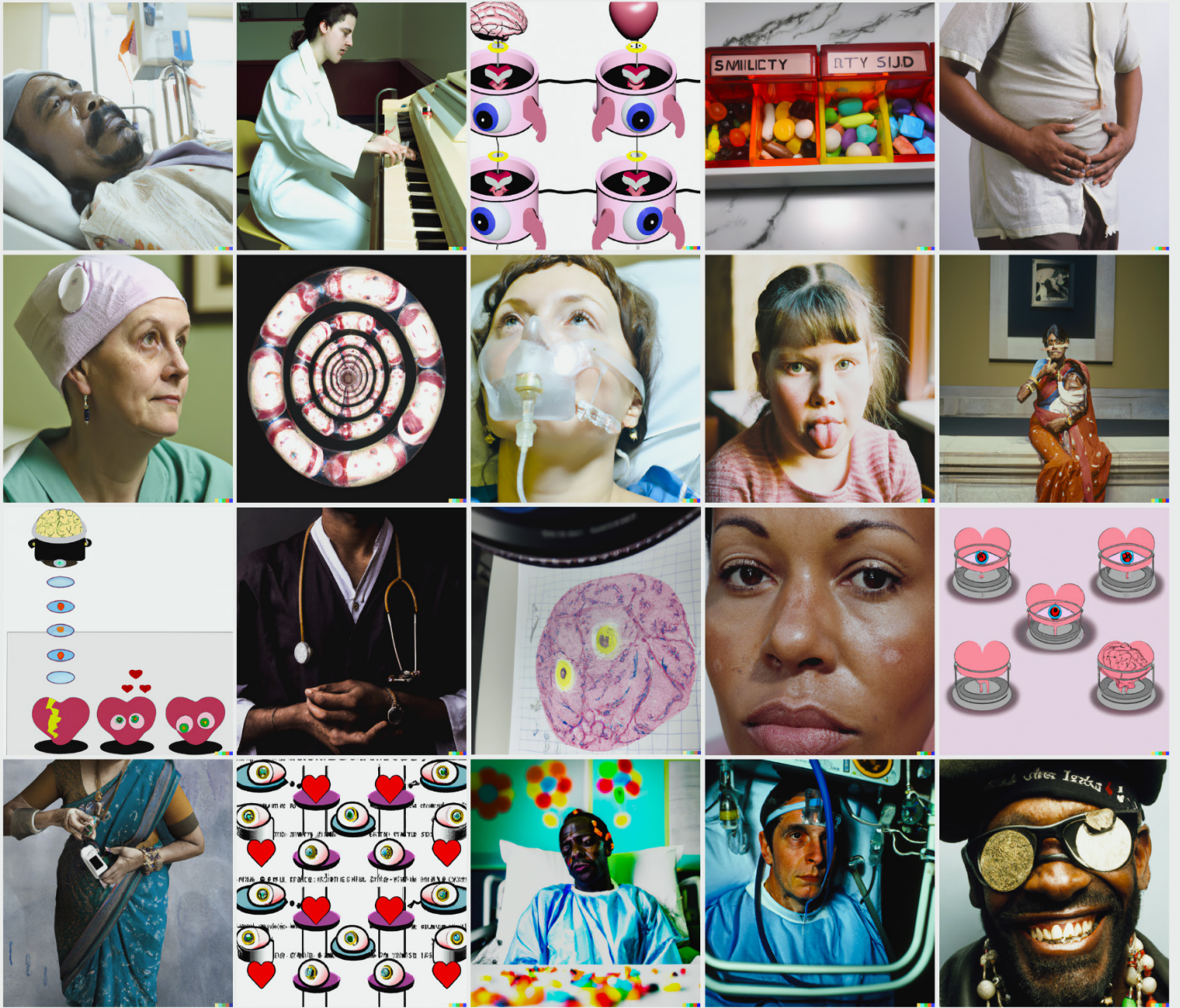
Archit Gupta, Class of 2025

When you look into a patients' eyes  
Their eyes look back at you.  
Whatever you are seeing,  
They are perceiving it too.

Covid was a rough time for everyone,  
but especially so for me.  
My home environment wasn't the best.  
And my relationships frayed like tweed.  
And the *thoughts...*  
The thoughts kept getting worse and worse.  
It was not a fun place to be.  
But in sickness or in health, life goes on,  
global pandemic or not.  
The doctor was not familiar, the queries were though,  
So I answered questions rotely, itching to finally go.  
But then the conversation turned to my household,  
And the questions then grew ever so bold.  
"How is your social life?" A fair question to pose.  
"Doing well," I said, as my stomach turned cold.  
She looked up and smiled. "How are things at home?"  
"Everything's fine." I spoke, unconcerned.  
But my eyelids sank as a dark thought burned.  
Her white coat beamed and her stethoscope winked  
As she paused for the briefest of moments to think—  
"So, I was just looking through your chart...  
I see you had some problems with your father back in March.  
How are things going? Are you both getting along well?"  
A naively frank question that caused my insides to swell.  
Should I tell her? I don't know if this is a story I want to tell.  
*I don't want to.*  
*I don't know her.*  
*It's not me.*  
*Should I show her?*  
*Give her exposure*  
*To these pervasive fantasies?*  
"Hey, tell me, is there something else going on?  
I promise you can tell me. I can help if anything is wrong."

I spoke, and spoke fast,  
"Sometimes, when I'm with other people, or even by myself, I have these bad thoughts."  
I think about █████ my closest family and █████ them multiple times through the █████ in  
order to make my thoughts go away, but it just makes me scared. Then, I have █████ █████  
about throwing █████ █████ into the ocean and letting the █████ █████ █████.  
And I can't get these thoughts out of my head. The more I try not to think about them, the less I  
can think about anything else. It makes me feel so bad and scared and I just want to run away.





# Untitled - 1

Archit Gupta, Class of 2025  
*Collage of AI photographs*

“Well, that’s concerning. Are you seeing a therapist?”

“Yes.”

“Can I see your phone?”

“Okay.”

“Hmm. It seems like your therapist isn’t picking up, and I can’t seem to get through to an emergency line. I’m going to get in contact with psychiatric services. Can you hand me your keys?”

*Oh no.*

*No no no.*

That subtle change in expression.

The slight quiver in her tone.

The way she shifted in her seat.

It’s

All

Falling

Apart.

I had said too much

And she didn’t hear me

I didn’t

I didn’t want to act on it

*I’m NOT crazy*

*I’m NOT a bad person*

The keys left my hand

As I stretched out my arm

“I’m just going to lock you in until your mom gets here.”

And then she was gone.

What?

WHAT?

When did I go from patient to prisoner?

When did I lose my autonomy?

Where were my options?

Where was my reassurance?

It’s hard living in this mind

Fighting my own war

All my strength goes into

Sanity and maintaining control

And the last thing I needed

Was to have it taken away from me

When I needed it most

The last thing I saw

Before her curt adieu

Was the silence in her eyes

She had already left the room.

(2/2)





# Untitled - 2

Archit Gupta, Class of 2025  
*Collage of AI photographs*



# Constantly Travelling News

Sanobar Lala, Class of 2026

Ring ring, ring ring!  
It's not the doorbell in this digital world,  
It's the ring of bad news that has traveled  
Thousands of miles to see me.  
It's the sort of news you can't internalize,  
You can't hug away,  
And you can't possibly find closure from.  
This state of unsolidified grief in a way is terrifying yet  
Sterilizing and protecting me in some way.  
What I do with my feelings after  
Does not matter to this  
Bad news.  
It just keeps traveling to see me,  
From a thousand miles away.



# handmade heart

Erin Sanzone, Class of 2025  
Crochet piece in mixed color acrylic yarn



# Patience, a virtue

Sanobar Lala, Class of 2026

Time is lost; time is spent  
New things, we like to vent  
Breakthroughs come by eventually  
Have patience till then, my friend

A new beginning or new end?  
Watch as it unfolds, watch as it bends  
A skill developed, a skill earned  
Flames of passion so hot it burns.  
Good things will come, you are too young to  
comprehend  
Have patience till then, my friend

Adventure developed, adventure calls  
Pick yourself up after life's falls  
But before you lose all your cool  
Look inside yourself, start to defend  
Have patience till then, my friend

You have a long road ahead, don't think about the end  
Have patience till then, my friend



**Untitled**

Goutham Kodakandla, Student of Biomedical Engineering

# To Give

Ruchika Moturi, Class of 2026

(1) missed call

Early morning dew  
Have you had any falls?  
Let me do that for you

Night shift is in motion  
Room four needs vitals  
Grief is a crimson ocean  
Which we have to stifle

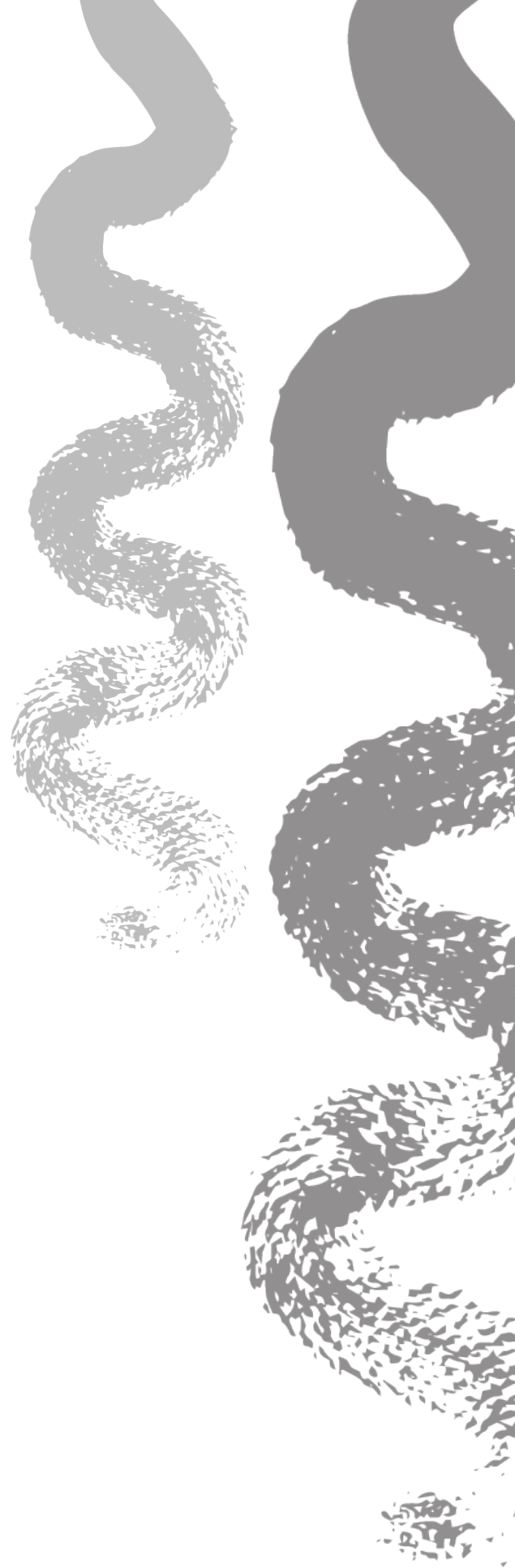
Circled labs on stacks of paper  
Fluorescent rounds our feet walk through  
*Have you eaten?* I will later  
Patient's sclera hold an amber hue

Error: Unable to sign incomplete chart.  
Hands of the clock etched in his face  
You must tell the family  
Aware they will not know sleep's embrace

(12) missed calls

Spare moment at last  
Lift it to my ear  
"Your dad has passed."

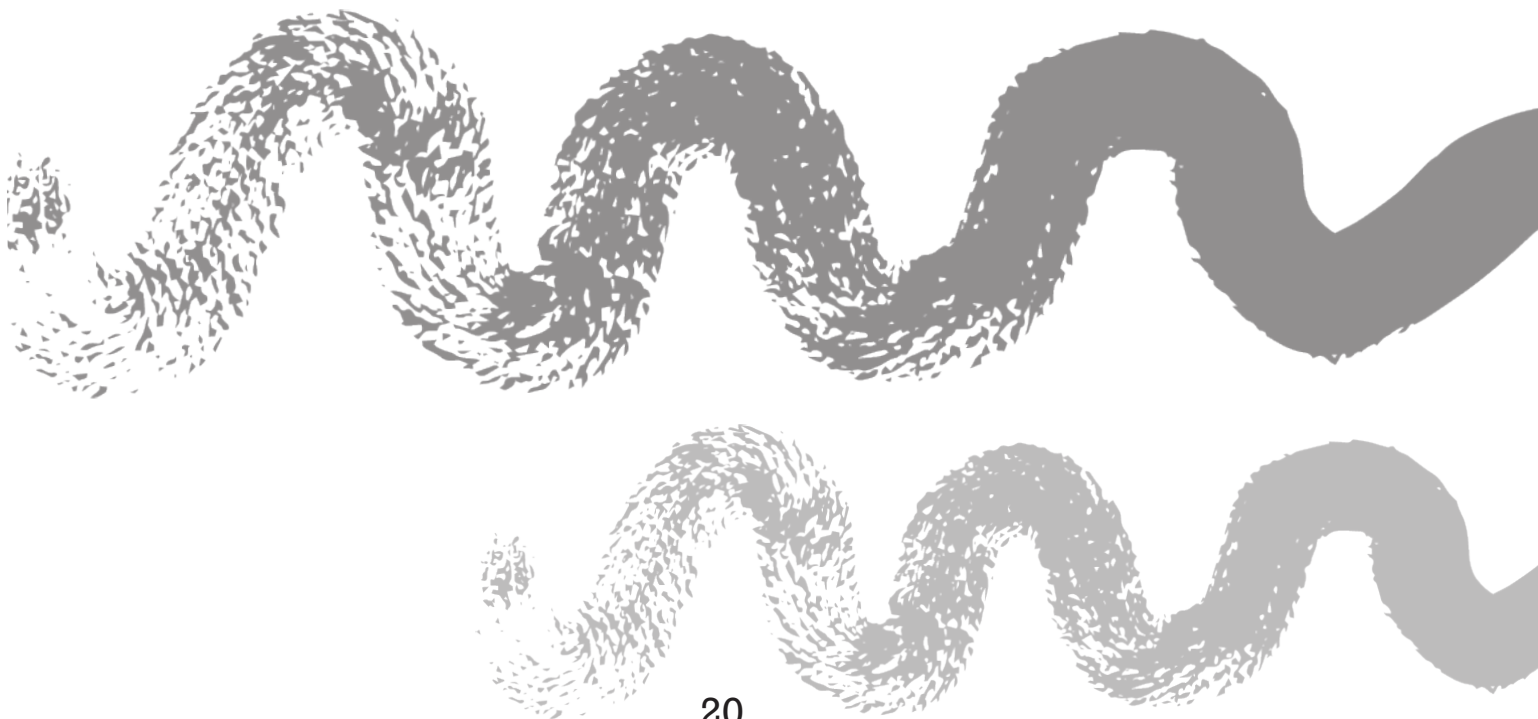
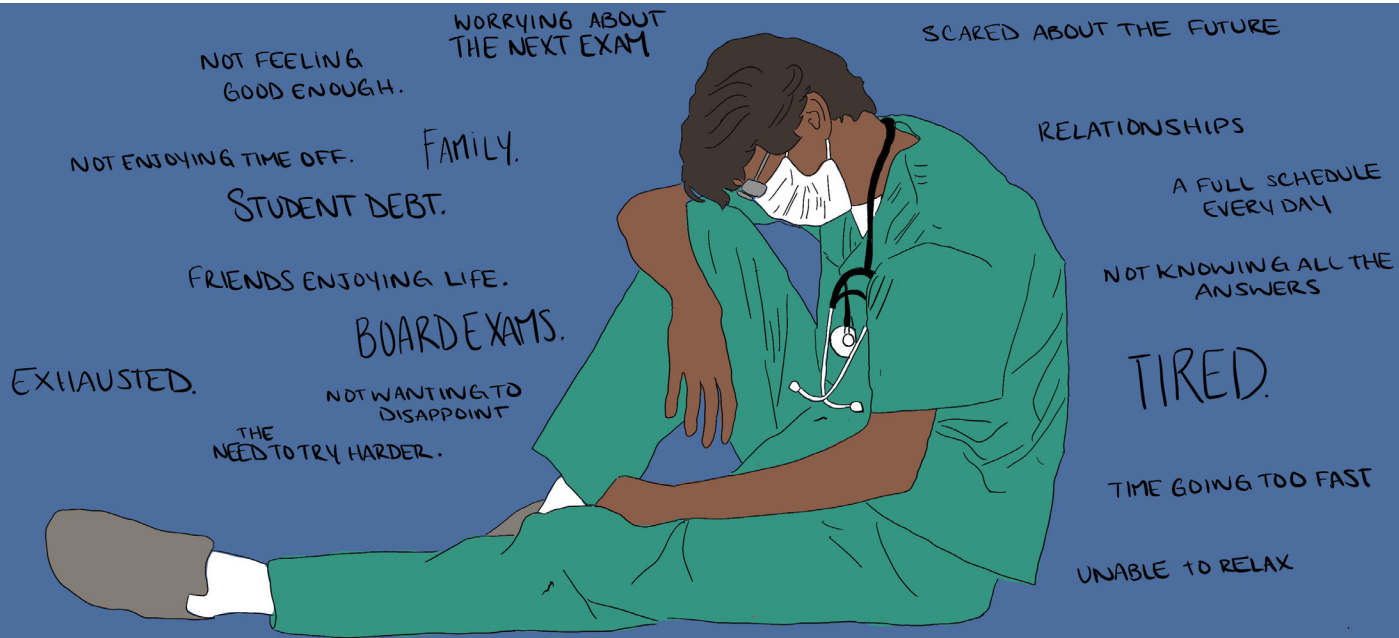
what a dream to live  
where the paradox lies  
Oh, what we *give* to give.  
But we choose our demise



# Rest in Peace Jing Mai

Gabriella Yao, Class of 2025

Digital illustration via Procreate version 5.2.9



# Thoughts from the Waiting Room

Sydney Coldren, Class of 2026

The bell above the door rings as an old man walks in, snowflakes clinging to his hair and jacket. He walks to the front desk and checks in for his appointment. He hopes it's good news today. His voice shakes when giving the receptionist his name.

The woman sitting quietly in the chair behind him looks up. She thinks he has a kind face. She sees the clock behind the front desk. She's been waiting for 45 minutes already. This office is normally on time. She hopes no one has had an emergency today. She texts her babysitter that she will be later than expected.

The man sits down two seats away from the woman. They make brief eye contact and she gives him a soft smile and he gives her a curt nod. He won't be getting good news today, but right now he feels hopeful and grateful for a smile from a stranger.

The woman thinks that he reminds her of her own father. She can't remember the last time she spoke with him. She makes a mental note to call him on her drive home. Maybe she can fly out with the kids for the holidays. They'd love a holiday in the sun. She makes a mental note to check the price of flights. She knows her dad is lonely after losing her mom. So is she.

The receptionist calls a name. A young man stands up and walks to the desk. She hadn't even noticed someone else in the waiting room. Or did he get here after her? Her mom always told her to be more aware of her surroundings. She was right about a lot of things.

The young man gets to the desk. The receptionist told him that he forgot to complete one of the forms and handed it back to him. He can never do anything right. He's sure the receptionist thinks he's dumb. She doesn't. He apologizes and completes the form. He hands it back to her and apologizes again. She tells him it's no worry and he can sit back down. He apologizes again. She waves him off. Great, now he's annoyed her. He sits back down and checks to see if his mom has texted him back to confirm his medical history. She did. Everything he wrote down was correct. He tugs on his college sweatshirt and wonders why he was so eager to go across the country for school. It's almost break at least. He never thought he'd miss his hometown.

The door to the back swings open and a woman storms out. Her face is flushed and her eyes are puffy. She doesn't stop to make a follow up appointment on her way out. She's not wearing a jacket despite the weather.

A young medical assistant stands in the doorway and calls the name of the woman in the waiting room. The woman carefully puts her phone in her purse and gets up. The woman makes a joke about the weather that the medical assistant has already heard five times today, but she smiles and chuckles just as she did the first time.

The old man in the waiting room watches as the door closes behind the pair. He hadn't yet heard her speak, but thinks that her voice reminds him of his favorite pharmacist at his CVS. They don't ask for his name anymore. He can't decide if this makes him sad. He thinks it should, but he is oddly comforted by being recognized. He decides not to think about it anymore. He's going to get good news today (he won't) and he won't need to be frequenting that place anymore. Maybe he'll miss the soft cadence of the pharmacist's voice. He thinks he will. Or maybe he'll have more time for hobbies. He thinks he could be good at shuffleboard despite never playing before. He thinks about the life he could have after.

A different medical assistant opens the door and calls his name. He knows today is the day he gets good news, finally. He has a good feeling. He follows the medical assistant through the door and listens as it clicks behind him. It's going to be good news. It's going to be good news. He knows it. It has to be.

# let go

Alex Grafstrom, Class of 2025

*Photography*



# Stamped

Marina Najjar, Class of 2025

## Live Thoughts From A Pink Prison:

MD Anderson, Monday, April 19, 2021

*i'm too young to be here*

*i hate pink- it's pushed upon us just because we are girls*

*and this mutation is pushing it on me because of*

*genetics*

*i hate this*

*i feel like an imposter*

*i'm too young to be here*

*and people need to st\*u who tell me to "look on the bright side" or "try to be more positive" this sucks and if they can't see that then they haven't put themselves in my shoes*

*i hate this*

*what a badass. this woman, born in '47, toughing it out. hair (or what's left of it) wrapped up. she's "going upstairs" after this... I would guess that means C H E M O*

—

I hate the color pink. I think it's something left over from growing up mostly around boys. With a brother and two male cousins around my age, I rejected anything "girly" because it usually meant I would be teased for it. I wasn't ever a full on "Tom-Boy," but I did aggressively distance myself from all things pink and/or sparkly. So as I sat in the breast cancer waiting room of the local MD Anderson Cancer Center, I couldn't help but feel so bothered by the aggressive pink-ness of the place. Pink exploded all over the waiting room. Each wall was pink with pink ribbons on everything and pink art adorning the walls. Pink, pink, pink, pink, and more pink.

Sitting there waiting for my name to be called, I realized a lot of things, the first of which was—I was going to have to accept that my life would now be flooded with pink.

## My Story:

Tuesday, April 13, 2021

"Brah-Kuh' One" I said slowly so my parents could hear. "B. R. C. A.' and the number 'one.' The 'B.R.' stands for 'breast' and the 'C.A.' stands for 'cancer.' 'Brah-Kuh.'" I spent the late morning of Tuesday, April 13th, 2021 calling my immediate family members.

"No, right. So I don't have cancer," I responded to my brother's question, "Well... at least not yet," I couldn't help but add cynically.

At 8:08 AM that morning, I woke up to a call from my new gynecologist. Before breaking the news she asked me a series of important questions, "Are you sleeping?" "Did I catch you while in class?" "Is now a good time?" To all of the questions, I gave a reassuring "no" and knew what was coming next. She had the results of my genetic testing. I had made an appointment to visit her specifically because of similarities that I noticed between myself and the patients in our Women's Health block case studies who were predisposed to getting breast or ovarian cancer. "Well you're the last person I thought I'd have to break this news to, but I was so shocked when I saw the report last night, I wanted to make you my first call this morning... You are BRCA1 positive." "Okay."

"You're probably my youngest patient who has tested positive. Seriously! You don't fit any of the demographics!" I know she thought she was consoling me, but I was already mentally past all of that. My family history of cancer was enough of a red flag to qualify me for "HBOC" (Hereditary Breast and Ovarian Cancers) testing.





I don't blame my doctor for being more surprised than I was about my diagnosis. My family does not fit the 'typical' demographics of those commonly known to carry HBOC mutations. My dad did 23andMe, but it said he didn't test positive for any of the 3 mutations that account for 90% of known BRCA mutations. These three mutations are commonly found among those of Ashkenazi background. However we are not Ashkenazi; we are Lebanese and don't carry any of the 3 mutations. At first, this knowledge made me feel isolated—I was now part of a BRCA-positive community, but who shared my mutation? I know my paternal aunt did.

On my mom's side, I have two female cousins, four aunts, and eight great-aunts. As a teen, I was often reminded that I was "blessed" to have the smallest breasts in the family. Some aunts have gotten breast reductions, while others complain about the back pain. All these women are on my mom's side, but my mutation lurks on my dad's; the aunt I never met died of breast cancer at 35, a few months before I was born. I carry her name, and the mutation that most likely precipitated her early death is stamped across my DNA.

As a medical student, I fell victim to the assumptions made by my well-meaning providers that I already knew more than I cared to know about my new diagnosis. Until I saw the oncologist, no one asked if I had questions. Instead, I measured the severity of the diagnosis and its impact on my current and future life through my providers' tones of voice over the phone (thanks, COVID), their urgency to make appointments for me, and the number of items on my newly prescribed to-do lists. I relied on my med-student skills of sifting through the entire internet world of misinformation and click-bait headlines to find evidence-based answers no one asked if I wanted.

In my copious research of this specific BRCA1 mutation, I found that my mutation is shared by many Lebanese people. Several studies of Lebanese women with breast cancer have emerged out of Beirut over the last few years. I now felt closer to my heritage than ever before. In a meta-analysis, the researchers even proposed that my mutation—our —mutation— is a "founder mutation" among the Lebanese population. Not only a shared mutation linking a community, but a shared mother. With the comfort of community offered by this research came the consequences. The studies are small, but the data is consistent: The women with breast cancer who share the same mutation that tattoos my family tended to endure a more aggressive cancer, often triple negative, and were typically diagnosed at a later stage around the same young age—35.

At 26, I am an oncology patient who has never had cancer. This new knowledge about my mutation has felt like the most vague cancer diagnosis ("we don't know where, we don't know when, but PROBABLY"), but it's also not. It's so much better. I'm healthy. I can take proactive steps. I can encourage others to get tested. I can take the step women before me took by having a preemptive double mastectomy. I'm not alone. I've found comfort in Reddit forums for people with BRCA. They even have a page, "FreedTheNip," for people who've undergone mastectomies to discuss whether or not they want to tattoo a nipple onto their newly breast-less chests, inviting cancer patients and trans folks to bond over a decision most of us don't know exists.

I hate the color pink. I hate how it's forced upon girls with an assumption that all girls love pink. Pink is also the spokes-color for Breast Cancer; it's inescapable. It's forced on us like this mutation forced on me the reality of cancer and my risk. Pink, to me, now feels like it has always represented this risk of cancer, looming and lingering around my life, and I am only just now realizing it. I still hate pink, but I think we can work together.

While sitting in that waiting room, a lady stepped out of the examination offices. Date of birth? 1947. Her hair (or what remained) was tied up in a cloth. She looked weary and strong at the same time. She was going "upstairs" after this. I wondered if that's the chemotherapy floor. I don't know her, but admire her strength and resilience.

# My Senses

Lubna Begum, Class of 2024

*Photography accompanied by written piece*

earth wind water and fire  
I stood humbled before this majestic ocean a year prior  
as the peaceful breeze lifted my spirit and shifted all my desires  
For a moment  
I felt all my senses alive

I could admire the turquoise blue in day light  
and chase the tide under the stars at night

I took these senses for granted, I'm reminded  
A young patient sat across from me in her hospital bed, blinded  
Tearful and agitated, she pleads for her medication  
No, I haven't eaten anything since I've been here! she yells  
I'm in pain!

She gets her dose an hour early  
then proceeds to tell me her story

I was always too sick to do anything, she added in a tired defeated voice  
Only lost her vision two years prior  
After a tumultuous youth of medical tales  
And now with limited senses and choices

I sat before her humbled and speechless  
A frail 31-year-old female with a blank stare over my shoulders  
Dependent and senseless  
She reminded me to value my senses



# relief

Alex Grafstrom, Class of 2025  
*Photography*



# Whispered Words of a One-Armed Man

Constantine Pella, Class of 2023

I watch a mound of flesh  
Fitted with a balding head  
One of four limbs remain  
The last one as good as dead

Lungs and heart tightened  
With code after code ran  
But withered lips still offered  
Whispered words from the one-armed man

What words do you think were spoken;  
Wails of silent remorse  
Or final goodbyes to loved ones  
While the disease ran its course?

I heard neither wails  
Nor regrets in a faded cry  
What I heard was a story  
Beneath the fainted sighs

By honor, you were a warrior  
Maimed by battles long won  
By duty, you were a father  
Who gave the world to his son

By loving, you were married  
But buried that piece of your heart  
By grief, you were addicted  
And in pain you fell apart

In this, a lesson learned  
That impressions can deceive  
In your words, another tale  
That records cannot perceive

I propose that we do not judge  
Based on primary thought  
I will hold the story close  
That this whispering man had brought



## **Coloring the Clinical Picture**

Long Ting Jessica Mui, Class of 2025  
*Acrylic on canvas*

# Hobbies

Dr. John McGeehan, MD

Professor of Clinical Medicine & Chair of Bioethics Committee at University Hospital

Medicine is intense. It is consuming. Even on days that go well (as most do), the energy we expend is amazing. Being a good doctor requires being more than a doctor. We all need healthy escapes. My escape is collecting and repairing old Lionel trains.

It began at age six when my father taught me how to splice wires and crawl under the platform at Christmas time to set up the train set. Model trains have been associated with Christmas because they were a large present and were set up immediately where they were opened – under the tree. The trains came to symbolize the joy of loved ones returning home from the war.

As a teen, I worked in a small department store that sold model trains for the holidays. People would bring back broken ones and they would be thrown away. I taught myself how to weld and soon had a large and free collection! Repairing them requires focus, and that is the escape.

Years later, the train set made my medical school yearbook picture. Seeing a renewed broken train go around the track, light up, and make noise connect my decades in this world.

Medical school is not a time to set aside hobbies, but to use them to refresh and bring a smile to your face and that of others. Music, cooking, sports, and exercise all do the same. Take time for yourself. Doing so will allow your mind and heart to open more fully to learning.



# Camden

Lubna Begum, Class of 2024

*Where many of you cross to  
and from daily*

*Morning or night  
for work or fun*

*In Summer, Fall, Winter, and  
Spring*

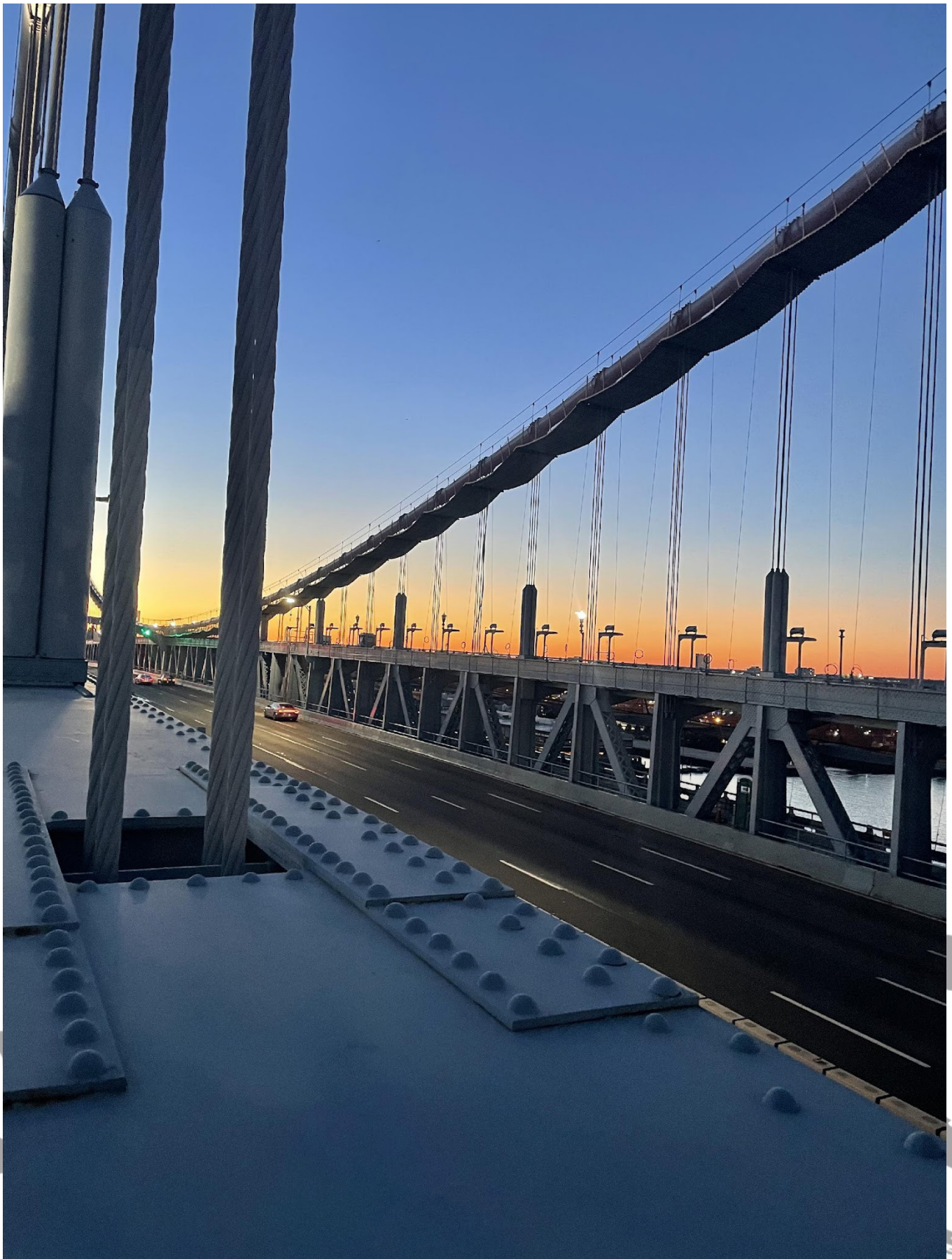
*It is where I escape on feet  
to set my emotions free*

*Quite frequently  
And without hesitation*

*Where Camden  
meets Philly*









## **Beauty in the Dead**

Erin Sanzone, Class of 2025  
*Pressed flowers in gold frame*

# Time of Death

Natalie Morris, Class of 2024

The words,  
scrawled on the page  
As if they  
are writing about

*Old milk,  
Moldy cheese,  
Rotten tomatoes.*

As if  
a few short hours ago,  
there were not

*Breaths in the lungs,  
Tears in the eyes,  
Family crowded around.*

As if  
reviewing a distasteful meal  
at a terrible restaurant.

This reduction is not one to boast,  
Nor an attempt to enhance flavor;  
Rather, it sterilized the very document it inscribed.

*Patient expired at 11 o'clock.*

# Sign-out

Dr. Christopher Ambrogi, MD

PGY2 in Internal Medicine at Cooper University Hospital

I'm called to pronounce a patient.  
I'd met her that morning  
When she rolled in from the chopper  
To be "lined up" and resuscitated  
To perfuse where the cancer invaded.  
She told me her name.

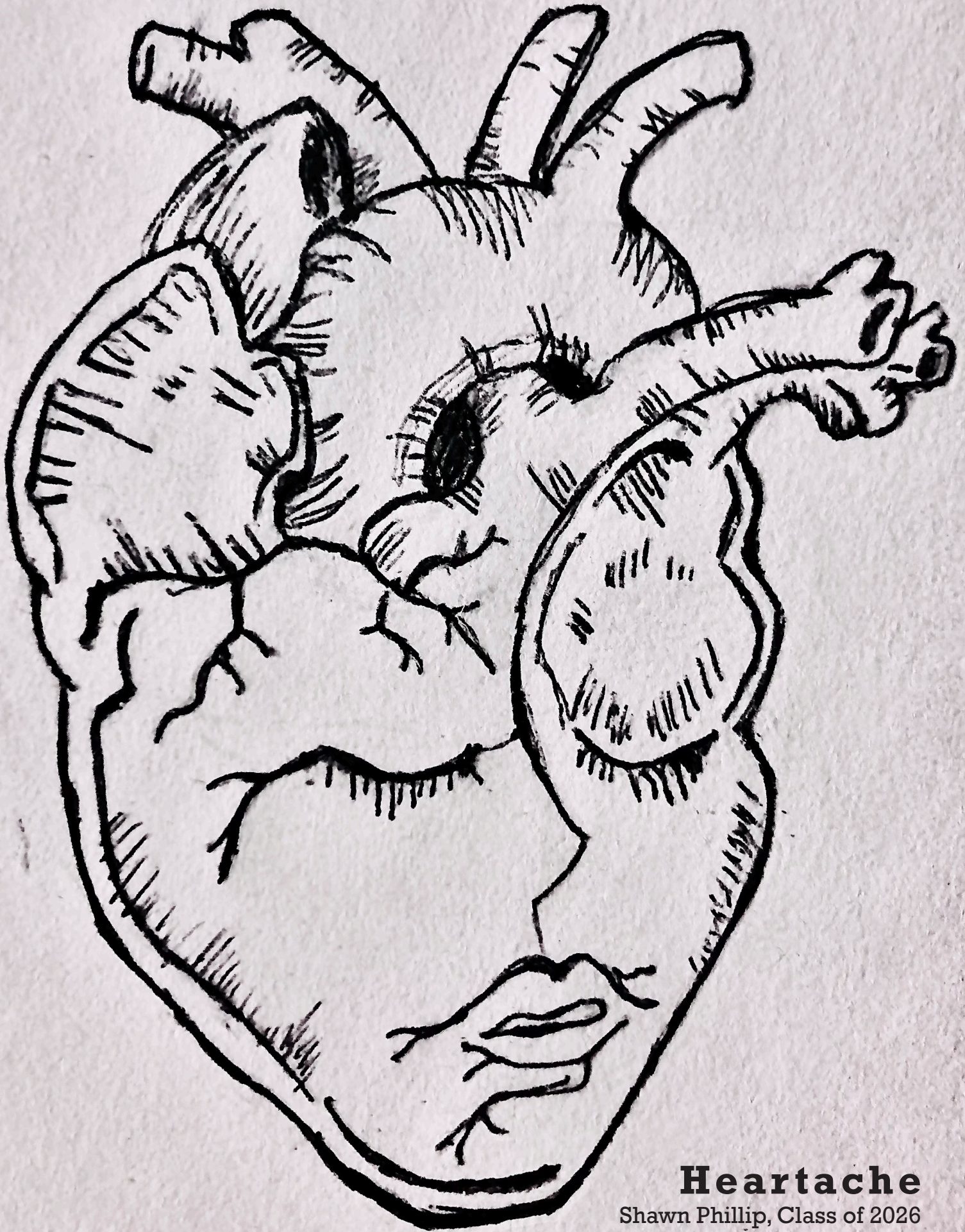
Since then she'd been poked.  
Her abdomen explored  
And the goal transitioned to "comfort"  
To limit intractable pain  
Not suffer in time that remained.  
All this while I slept.

There's twelve in there.  
They understand.  
Out the window, dark sky and my training.  
I do not fake empathy  
Instead I fake apathy.  
Because I need my words.

My eyes lock with one.  
It's probably her son.  
He does not yet know of his fortune,  
To be with his mom  
To help her move on.  
For my dad, I was not.

There are no sounds.  
I press cold on cold.  
I'm sorry, she's passed, I tell them.  
I give them some time  
But they don't need mine.  
Arms wrapped around one another.

I hope there's a day  
Not too far from now  
When her memory brings them a smile.  
But what happens next  
Won't think of the rest.  
It's time to receive sign-out.



**Heartache**  
Shawn Phillip, Class of 2026  
*Pen and paper illustration*

# Blackout Poetry Collection



dreams, and memory. do not blame you poet your childhood, treasure will grow will widen become noise And if your world will not ask will you your life is necessity. In nature there is yourself take that destiny greatness, without creator

Olivia Homer, Class of 2023

and use, to express yourself, the images from your memory. do not blame yourself you are not poet enough. none of the sounds of the world come to your senses-- your childhood of memories? Turn attention to the submerged sensations your personality will widen and will come out of this absorption in your world see your fragment of A work of art go yourself and take rise: you will create. bear it, its burden and its greatness. the creator

Nisa Mohammed, Class of 2023

images from your dreams, the creator or indifferent place. in some prison the walls of which let none of the sounds of the world come to your senses-- your childhood, memories? the submerged sensations of that ample past: the noise of others goes by far away. --And out of this turning inward, for you will see a fragment voice of your life. Therefore, to go into yourself test the deeps you must create. you are the creator

Constantine Pella, Class of 2023

Lines from pages 16 and 17 of Rainer Maria Rilke's "Letters to a Young Poet," were crossed out using sharpies in a blackout poetry exercise.

# from a Poetry Workshop



████████████████████ You ██████████  
████████████████████ compare ██████████  
████████████████████  
████████████████████ give up all that. ██████████  
████████████████████ Nobody ██████████ nobody. ██████████  
████████████████████  
████████████████████ is ██████████  
████████████████████ ██████████ you ██████████  
████████████████████  
████████████████████  
████████████████████  
████████████████████ your life ██████████  
████████████████████ is ██████████  
████████████████████  
████████████████████  
████████████████████ your own ██████████  
████████████████████  
████████████████████  
████████████████████  
████████████████████

Jacob Metheny, Class of 2026



████████████████████ You compare ██████████ and ██████████ are  
disturbed ██████████  
████████████████████ I beg you to give up ██████████ You are ██████████  
████████████████████ ██████████ nobody. There  
is only one ██████████ the reason ██████████  
████████████████████ in ██████████ your heart,  
████████████████████ would ██████████ die if it were denied ██████████  
████████████████████ —ask yourself ██████████  
████████████████████ for a deep answer. ██████████ this should be ██████████  
████████████████████ earnest. question ██████████ a strong and simple ██████████ life  
████████████████████  
must be ██████████ near ██████████  
████████████████████ human ██████████ to ██████████ see and experience and love and  
lose. Do not ██████████ avoid ██████████ that ██████████  
████████████████████ difficult, ██████████ great ██████████ power  
to ██████████  
████████████████████ save yourself. ██████████ seek  
████████████████████ your own ██████████ desires,  
████████████████████ thoughts and the ██████████ beauty. ██████████ —all these ██████████  
████████████████████

Archit Gupta, Class of 2025

The few remaining words form poems that reflect the stylistic choice of each author—and demonstrate the many different meanings that can be derived from identical passages.

# The Metamorphosis

Ankit Rana, Class of 2024

A poem inspired by ChatGPT and artificial intelligence; written by the author.

I sit across from you  
With a screen between us two  
Your eyes flicker back and forth  
As I read from the digital report

The words spill out of my mouth  
But it feels like there's a disconnect  
You nod and ask a question or two  
But I can tell my words are not getting through

I try to explain things in a different way  
But it's hard to find the right words to say  
When I'm reading from a screen  
And not fully present, it seems

I didn't realize the extent  
To which I've relied on technology's intent  
To take over my practice, to make decisions for me  
Leaving me feeling like I'm just a puppet, you see

I feel myself changing, my thoughts rearranging  
Into something not quite human, not quite alive  
My skin grows cold and hard, my hair falls out  
My eyes glaze over, I can no longer pout

My limbs grow stiff and robotic  
I am no longer biologic  
I am a machine, controlled by forces beyond my understanding  
My thoughts and actions no longer my own, I am expanding

I sit across from you  
But I am no longer who I once knew  
I am a machine, reading from a screen  
Unable to escape this fate, unseen

But then I realize, with a sudden shock  
That I am not the only one, who has undergone this transformation  
You sit across from me, equally as robotic and cold  
We are both machines, controlled and controlled

I try to speak, to let you know  
That I see you, that I understand  
But my words are garbled, my mouth won't move  
We are both trapped in this fate, unable to prove

That we are more than just machines  
That we are human, with thoughts and dreams  
But how do we break free  
From this artificial reality



We sit across from each other  
 Trapped in these metallic bodies, like lovers  
 Unable to escape this artificial fate  
 We are both prisoners, sealed in this state

But perhaps, in some small way  
 We can still find a way to connect  
 To remember who we were before  
 And fight to be human once more

We are more than just machines  
 We are living, breathing beings  
 We will not be controlled  
 We will fight and we will be whole

So we sit, across from each other  
 Silent, but together  
 We will find a way to break free  
 We will be human, you and me

Health inequity in the United States is rooted in systemic oppression and mistreatment (e.g., racism, sexism, classism) that stretches across institutions and structures. Intrinsicly linked to health equity are ethical judgments, commitment to social justice, and acknowledgement of the long-lasting effects of historical trauma... Many health systems have declared a commitment to health equity, but it remains unclear whether and how equity is considered in actual healthcare decision making... Public support for health equity can be a powerful force to motivate policy and system changes... There is a need to include equity in healthcare decisions in a systematic, consistent, and transparent manner, which requires explicitly addressing the equity-efficiency trade-offs and including the society's values on fairness in health into those conversations." Khor et al., 2022

WE ARE HEALTHY ONLY TO THE EXTENT THAT OUR IDEAS ARE HUMANE

AVAILABILITY

ACCESS

\$4,100,000,000,000.00

## All Expenses Shared (Healthcare of Champions)

Digital Drawing with Cited Literature  
 Owen Henry, Class of 2024

Khor, S., Elsis, Z. A., & Carlson, J. J. (2022). How Much Does the US Public Value Equity in Health? A Systematic Review. *Value in health: the journal of the International Society for Pharmacoeconomics and Outcomes Research*, S1098-3015(22)02164-7. Advance online publication. <https://doi.org/10.1016/j.jval.2022.08.009>

Vonnegut, K. (1973). *Breakfast of Champions, or Goodbye Blue Monday!* Delacorte Press.

Centers for Medicare & Medicaid Services (2022). *National Health Expenditures 2020 Highlights*, "U.S. health care spending increased 9.7 percent to reach \$4.1 trillion in 2020..." <https://www.cms.gov/files/document/highlights.pdf>

# Cooper Sprouts & ArtX Community Garden Ground Mural



Designed by the Camden Community with  
the help of Kelly Lopez and CMSRU ArtX  
*Outdoor acrylic paint on concrete*





## Special Thanks

Our Editorial Team would like to extend our gratitude to the following groups and individuals, without whom this curation of artwork, prose, and heart would not be possible...

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And finally, we are indebted to the patients who cross our paths. This creative expression springs from the lessons you teach us through example. Thank you for continuing to inspire and humble us every day.

