

Medical School Application Personal Essay

Before

Word Count 3,895

Grammatical Errors

Consciousness and Organizational
Issues

More Than An Intern

*There is a moment, a cusp, when the
sum of gathered experience is worn down
by the details of living. We are never so
wise as when we live in this moment.*

- Paul Kalanithi, "When Breath
Becomes Air"

She had never been more scared in
her life. Why now, after all these years,
did it have to return? To her it was only
muscle weakness and an occasional
sharp pain that lingered in her sides with

After

Word Count 2,892

Improved quality of language

Style consistency/Concision

Spacers separate scene changes

Organized as a short story

More Than An Internship

*There is a moment, a cusp, when the
sum of gathered experience is worn down
by the details of living. We are never so
wise as when we live in this moment.*

Paul Kalanithi

When Breath Becomes Air

She had never been more frightened.
Why now, after all these years, had it
returned? The muscle weakness and
sharp pain in her sides lingered with each
breath. So many questions and cold fear

each breath she took. Her thoughts raced and her questions slurred together, fueled by the fear of the worst case scenario. As he approached, she asked me to take her daughter outside to play. I would blow up latex laboratory gloves into large balloon animals and rub them against the silky brown hair of the toddler so that her hair would stick up like a mad scientist. She loved drawing the silly faces I acted out onto the sides of the blue latex gloves, using the abandoned fingers to mimic hair.

The clock was approaching 1900 as the emergency department resident left the room. The mother's expression, as her daughter reentered the room radiating with curiosity regarding the man in the white coat's conversation, drained me to the deepest depths. She was ready -- ready to get back into the swing of things that made her weeks enjoyable, like her biweekly horse racing competitions and

ran through her mind – would it be the worst-case scenario?

As the Emergency Department resident approached us, she asked me to take her daughter outside to play. I blew up latex laboratory gloves into balloon animals, rubbing them against her silky brown hair so the static made it stand up like a mad scientist's. She loved that. She was just a toddler.

The clock was approaching 1900 as the emergency department resident left the room. As the girl and I reentered, the mother's expression drained me to the deepest depths. She had been frightened but optimistic when she arrived – hoping her biweekly horse racing competitions and long hikes through the Superstition Mountains could continue, somehow, forever. Something in the doctor's questioning or expression had changed her. She was nervous now, distracting herself with a conversation about these

long hikes through the Superstition Mountains. She would boast to me about those activities as minutes turned to hours, eventually lost in the silence within the room, 11B. The doctor, walking towards us at a slower pace than before, held an empty smile stripped of all hope. Her eagerness had turned into a distant dream for her, piled under the challenges that came with her former opponent that stripped her of her former readiness -- cancer.

The hundreds of in-person hours training as a camp director at Camp Kesem, a camp for children affected by their parent's cancer, and precious experiences trying to ease the mind's of some of my most memorable campers, was not enough for this moment. Camp Kesem was filled with children of all ages from different backgrounds. Our job as counselors was to create a "home away from home" because that is what Kesem

leisure activities as minutes turned to hours in Room 11B.

When at last the doctor returned, his empty smile stripped her of her hopeful wishes. It was cancer.

As a director at Camp Kesem, a summer program for children affected by their parent's cancer, I had hundreds of hours of training and two summers of life-changing experiences helping ease the minds of frightened, suffering children. I knew how to create a "home away from home" for my campers, a place where they could feel like kids again and put down the burdens of life at home - either caring for a parent, coping with death, or both. I was used to dealing with the behavioral changes and unpredictable meltdowns of young people struggling to handle such a terrible blow to their dreams and futures.

But I was not prepared for the awful moment of diagnosis. I found myself in

truly felt like for some. New and old campers were allowed to feel like kids again for the whole week, unloading the heavy burden they felt obliged to carry when at home either helping take care of their parents, changing their daily routine, or coping with their parent's passing.

Always, I had dealt with behavior changes and unforeseeable meltdowns when they arrived at camp or quarterly Kesem reunions we called Friends and Family Day. I was never prepared for the moment of diagnosis. Two years of being a student leader within the comfort of Camp Kesem showed me how individuals, especially the small ones, handle cancer differently, but when cancer barges in on another person's life unannounced, the most respectful thing I could do was be present.

The hospital's pastel pink walls and brown colored pillars encompassed the

silent awe – and horror – at the power and terror cancer brings when it invades, unannounced. I found my most appropriate action was to maintain a quiet, respectful presence and act as a witness in the face of this life-changing moment.



Pastel pink walls and tan pillars encompass courtyard at the southern end of the hospital campus. Every evening at 1820, the sprinklers showered the green grass and the palo verde trees. The lights along the path from the parking garage to the emergency room switch on at 1830, casting pools of light and faint shadows. If I timed my arrival at the top of the parking structure perfectly, I could witness it all unfold.

courtyard at the southern end of the campus. Every evening at 1820, the sprinklers within the courtyard would turn on, showering the tops of the green grass and trunks of the firm palo verde trees. The lights along the pathway, leading from the parking garage to along the south west wing of the emergency room, would light up at 1830, casting faint but growing shadows all around while brightening the area beneath. Student parking was on the roof of the parking garage and if I timed it perfectly, I could witness it all unfold before my shift.

The hospital air is not for all to breathe in. Some choke on it; some seem to experience exacerbation when they first experience it; some don't even notice it as if comforted by it; and some feel like they just took their very first real breath. It expands their lungs, jolts the body, and settles within themselves in a state of bliss. Within the hospital, patients occasionally

A hospital ambience and hospital air are not for everyone. Some people are stultified, others are made anxious, all find it foreign. But a few, like me, feel they have just taken their first breath when arriving at the great double doors. The hospital environment expands my lungs, jolts my body, and calms my mind. Within the hospital, some patients will come face to face with their mortality; a singular personal experience healthcare workers witness every shift.

When Paul Kalinithi wrote about life as a cancer patient during his final year as a neurosurgeon resident, he talked about the crossroads of death and fulfillment. Rounding helped him see the unique way medicine can occasionally bring about a brief yet deep, even profound connection between people. When *Breath Becomes Air* was published almost a year after Kalinithi died, finally defeated by metastatic lung cancer. His wife and

come face to face with their own morality. To some, it's their worst day ever, but for healthcare workers, they witness and embrace it every single shift. When Paul Kalinithi decided to finally write about his life, he was undergoing chemotherapy during his final year as a neurosurgeon resident, found between the crossroads of death and fulfillment. While rounding between patients as a resident, he would reflect upon his life, focus on what makes medicine as unique as it was. He would describe it philosophically, touching upon the great but seldom instances in life where connection between two individuals can be harnessed in brief moments in time. When his story, *When Breath Becomes Air*, was completed, Paul Kalinithi had been gone for almost a year, finally defeated by metastatic lung cancer. Within this time, his wife and colleagues helped publish his story, each adding parts of their own, creating an

colleagues completed the manuscript, creating a memorable image of a selfless neurosurgeon focused on his practice's sacredness.

He had discovered medicine as a calling, and his words resonated within me.

I was halfway through the book when I encountered this young mother and child. I was reading Kalanithi's moving words about the discovery and adventure of his student years. I was absorbing the knowledge, compassion, and humility Kalinithi radiated, knowing it could help me grow from a dreamy student into something more. His book, like a bible, was always with me



Around the globe, a 21st birthday signifies the coming of age; the world finally accepts your application for

image of a selfless neurosurgeon most focused on the sacredness of his practice before anything else. He found a calling within the realm of medicine; his words resonated within me.

I was well beyond halfway through the pages of that book before this experience began. Kalinithi had a Master of Arts in English Literature from Stanford University and dreamed of eventually pursuing a life as an author. Following his adventures in California, he went abroad to the United Kingdom to attend University of Cambridge with a newfound love for philosophy and science. Though his book revealed more of the later portions of his life, there was a lingering essence displaying his time as a university student. The book, clenched between my hands like a bible, never left my side. I hoped that osmosis would take into effect, absorbing the knowledge,

adulthood, and bars finally take your business. Many of my friends had turned 21 in style with a Power Hour – an extravagant alcohol-fueled indulgence that starts one hour before midnight of the big day. My friends urged me for weeks to call in sick the evening before my 21st, but I put them off with vague "maybes." I was secretly thrilled by greeting my coming-of-age birthday inside an emergency room – embracing the future I was determined to achieve.

That evening I wrote, "Perhaps it was the afternoon coffee finally kicking or the thrill invigorating my body as the seconds tick down to my 21st birthday. Perhaps it was my imagination. Perhaps the excitement I felt preparing for my shift was empathy rushing through my veins. Perhaps instead of empathy, it was sympathy."

Years ago, my father advised me to continue journaling as I pursued my

compassion, and humility Kalinthe radiated with, to evolve the mere dreamful student that I was, into something more.

Around the globe, one's 21st birthday signifies the coming of age; the world finally accepts your application for adulthood and downtown bars start accepting your business. Many of my friend's had turned 21 in style with a Power Hour. An hour or so before the clock strikes midnight, the night before the actual big day signifying one year older, college students would celebrate with an extravagant party filled with alcohol.

During that hour, the birthday boy/girl would drink as much as they possibly could then would hit the town to the best college bars nearby. Weeks prior to my big day, my friends urged me to call in sick so that I could throw a Power Hour. My responses were mysterious and

medical education, no matter how tired or strapped for time I felt. He was an advocate for doctors who embraced humanity rather than merely symptoms. He encouraged me to sympathize rather than empathize. "When you empathize," he said, "the spotlight shifts away from the patient and towards yourself, decreasing the human value of the person you're treating. Sympathy means you share in the person's moment of need and understand and embrace how they truly feel."

My father was an army brat, eventually seeking adventure in faraway places. I grew up listening to stories of Dad hiking the Swiss Alps and meeting bizarre but warm characters in all corners of the world. He recalled fond days in France with a favorite cousin, living life as they defined it. As he grew older, his focus shifted from software engineering to a life of higher purpose. In hopes of joining the

deflecting, always replying with “maybe” or “who knows” but deep down, I was ecstatic. What better way to spend my “coming of age” than inside an emergency room, embracing the future I want more than ever by getting a taste of it first-hand.

That evening I wrote, “Perhaps it was the afternoon coffee finally kicking in as the room spiraled around my head like an endless staircase; my gaze occasionally imprinting single still frames into my memory like the motion pictures of the late 1800’s. Perhaps it was thrill invigorating my body as the seconds counting down to my 21st birthday had reached single digits. Perhaps it was my imagination. Perhaps it was empathy rushing through my veins, inflating my head. Perhaps instead of empathy, it was sympathy.”

Years ago, my father had advised me to write down not only my

Peace Corps, he went back to university and, ultimately, medical school. His memories of his medical student days informed my own choices as I sifted through life’s offerings. He said he, too, was a night shifter in med school, not because the hours were quieter but because he loved watching doctor-to-patient interactions without the noise and commotion of the daylight shifts. It inspired me to seek out these healers in their natural environment.

As I prepared for the Sunday shift of my 21st birthday, I followed my routine. Up at 0600 to make dinner and breakfast. By noon, finish chores so I could sleep from 1300 to 1700, though I never became accustomed to sleeping during the day. Staying awake for night shift was half the battle; reaching midnight without dozing off was my goal. Making it to the end of my shift at 0700 and then to class at 0900 was the ultimate challenge.

observations, but my feelings in the medical field. He was an advocate for doctors who embraced humanity rather than treat the symptoms on the paper handed to them. To truly be a good doctor, you had to sympathize instead of empathize. When you empathize, the spotlight shifts away from the patient and towards yourself, thus decreasing the value of the person you're treating. Sympathy was unique. It was a feeling from great depth that communicated to another that they were understood and seen for how they truly feel.

My father grew up an army brat, eventually seeking adventure in far away places for a grand portion of his life. I grew up listening to stories of him hiking the Swiss Alps and meeting bizarre but warm characters on his journeys. He often would talk about his time in France with his cousin Rob, living life to their own definition. Eventually his focus in life

Before leaving my one-bedroom apartment in Tempe that night, I made sure I had my journal, water, and stethoscope. I never used the stethoscope in the emergency department, but it was a symbolic reminder of my mission, and I was always sure to have it with me.

Sunday night shifts were hectic early in the spring semester; it seemed there was a celebration each week. Super Bowl, St. Patrick's Day and now, my 21st birthday. Tonight was to be my tenth shift as an undergraduate intern. I walked through the double doors of the ER, and the night began with a "shift change" debrief of the most difficult cases, ranging that night from STEMI's (ST-elevated myocardial infarction) to a possible GI (gastrointestinal) bleed. Around the nurse's station, Dr. Stephens reviewed each patient's action plan while I followed.

shifted from computer programming and software engineering to one of greater value. In hopes of joining the Peace Corps, he went back to university, ultimately, medical school. As I adventured through life's offerings, seeking interest in both the arts and science, my father would reminisce to me about his moments within hospital walls as a student inspiring me how the body's physiological processes work and the importance of life. One evening, we sat down and began talking about all the stories he re-lived like they were yesterday. He was also a night shifter but his rationale wasn't because he was a night owl or because they were the most quiet. It was because he loved watching doctor-to-patient interactions without the noise that came from family visits and the sheer increase in hospital staff numbers that defined daily routine. One night he was handed amputee fingers as a prank

My favorite doc was working tonight - Dr. Stephens, a brilliant eccentric who always rolled up his scrubs to just below the knees "for fashion purposes." He asked if there was anything special on my list of things-to-see for my birthday. Though I was always interested in kidney procedures, I knew that an overnight ER shift could bring anything and everything, renally related or not, all of it valuable training. I asked to stay close to him. That request led to the very moment a young mother, her little girl, Dr. Stephens and I were now experiencing together. It is the most sacred atmosphere, and I was forced to breathe it in.

I was not enjoying a celebratory party as the clock ticked past 0000. Instead I was facing hard, inescapable truth. I stood beside a patient I had known for a handful of hours, holding her daughter's hand as her mom explained how the next few months would be different for

from a nurse who worked in the OR (operation room). Though the times had changed since then, including new policies in hospitals regarding non-health care professionals, I was most excited to be surrounded by actual healers in their natural environment.

My Sunday routine was odd to say the least. I would wake up at 0600 and would start making both my dinner and breakfast. I made a ham and cheese omelet coupled with country potatoes for breakfast and would then mash up the remaining potatoes in the bag to make my mashed potatoes for dinner. A typical Sunday was filled with chores to finish before 1200 so that I could sleep from 1300 to 1700. I could never get used to sleeping during the day. Being able to stay awake for night shift was always half the battle and reaching midnight without dozing off was my goal. Making it all the way to the end of my shift at 0700 and

"mommy." Her girl held our balloon animal so tightly it burst with a pop. She was trembling. All I could do was exist in the privileged space that the mother and physician allowed me to occupy. My attention drifted to the physician, who I noticed was attempting to disengage to attend to other patients. But the child's tight grip of my right index finger begged me to stay – to offer hope. For once in my life, it was not about me.

The daughter was as tough as nails that night. She had a poker face that would fool a room full of gamblers. It made me wonder if she had somehow prepared herself for the worst. I found myself thinking of my father. "You have no siblings you can talk to about your ideas and your observations," he would remind me. "By necessity, you have to keep these things for the most part to yourself." It was the first time he encouraged me to write everything down,

class at 0900 was the ultimate challenge. Before leaving my one bedroom apartment in Tempe, I made sure I had everything including my journal, water, and stethoscope. I never once took out my stethoscope in the emergency department but perhaps it was a symbolic ritual before every shift to tuck it into my backpack.

To some, the drive there was breathtaking as the dimmed orange orb, casted lower and lower behind the stray pink clouds of the western sky. Sunday night shifts had been hectic this semester. Maybe it was good or bad luck but regardless, almost every night was a celebratory event: Super Bowl Sunday, St. Patrick's Day, and eventually, my 21st birthday. Rumor has it, hospitals are extra staffed for weekend night shifts.

Tonight was my tenth shift as an undergraduate intern. As I walked

to form my journaling habit. I wondered if the toddler beside me was an only child also. Children usually seem more composed than adults in the emergency room. Is it their innocence, their inner strength or both that protects them from pain?

When I was a child, hospitals were my home away from home. My parents divorced before I started school, and due to my mother's job as an ER and ICU



nurse, hospital "daycare centers" filled my childhood. I am one of the few for whom those large double doors trigger a feeling of nostalgia.

The nurses' station was my playground; the chair legs became the pillars of play forts. The strip of hallway between "Dialysis" and "Intensive Care Unit" (ICU) was a track where I chased

through the large double doors of the ER, nostalgia rushed through and the night had begun. We started with the typical “shift change” consisting of a debrief of the most difficult cases ranging from STEMI’s (ST-elevated myocardial infarction) to a possible GI (gastrointestinal) bleed. Around the nurse’s station Dr. Stephens went around the room giving his two cents for each patient’s action plan while I followed closely behind.

My favorite docs were working tonight. After rounds, Dr. Stephens, who had always rolled up his scrubs to right below the knees because of “fashion purposes only,” had approached me asking if there was anything special on my list of things-to-see for my birthday. I was always interested in kidney procedures, nothing seemed more fascinating to me than the renal system.

my favorite paramedics back to their ambulances. As an immigrant from the Philippines, my mother's first language is not English, but she was adept with medical terms. My early spelling lessons consisted of words like emergency, ambulance, and stethoscope. When I was nine, with Heelys (shoes with wheels) strapped to my feet, I delivered patient charts and electrocardiograms (EKGs) to every room in the ICU.

Some of my mom's co-workers back then are my colleagues today.



As darkness retreated the morning of my 21st birthday, an elderly patient arrived, something that does not usually occur early in the day. She was a nursing home resident, covered in blankets and

He had always taken a liking to me over most of the other interns. In my eyes I was just a volunteer, not a real intern. I wasn't expected to fulfill any real duties. Tonight though, I felt more than just an abled body walking through the emergency department. I had been given the most special opportunity: to be alongside the family during the diagnosis. This is the most sacred atmosphere available and I was forced to breathe it in.

That night I was faced with the truth as the clock struck 0000. I spent my moment of birthday fame beside a patient I had only known for a handful of hours, holding her daughter's hand as her mom had to explain what the next couple months would look like for "mommy". The daughter held the balloon animal so tightly it popped into a small rubber clump. She was trembling and all I could do was exist in the sacred, privileged space that the mother and physician

two layers of no-slip socks, a yellow wristband indicating her fall potential. Charge nurse Jimmie beckoned me to the incoming patient's room. He was keeping an eye on me per my mom's orders.

Distressed and bleeding through gauze dressings, our new arrival was restrained to the ER bed. Dr. Stephens learned she had rolled out of her nursing home bed, gashing her face.

Turning to me, he said, "Stay off to the side. She is lashing out, and the last thing we need is you in the next room needing treatment for a blunt injury."

I stood at the foot of her bed, out of reach. A nurse was removing the blood-soaked gauze. The patient cursed her loudly.

"How dare you treat a sweet lady like me with such force! This is torture!" she screamed. "I'm writing an article for the paper about how the nurses here cause pain to their patients!"

allowed me to be present in. For a second my attention drifted to the physician whom I noticed was attempting to disengage to attend his other patient rooms but the child's small grip around my right index finger begged for hope. For once in my life, it was not about me.

The daughter was as tough as nails that night. She was either a natural or she had a poker face that could fool a room full of gamblers. It made me wonder if she had been preparing to hear the worst possible news. "Plan for the worst, expect the best," is what my father used to say. It was self preparation to allow others and experience the opportunity to live up to their highest potential, and if not, life would still be just fine. He claimed that since I was an only child, all my thinking had to be kept to myself instead of participating in think tanks that other siblings would tend to do together

The nurse brushed off the comments. Outbursts like these are common in emergency medicine. The nurse smiled a bit, recognizing there was some truth in what the patient said. It was a painful but necessary procedure. It seemed to me that she lacked sympathy, though, and was just going through the motions, not connected to her patient's discomfort or mental state. I was uneasy about this, feeling the situation called for some encouraging words to ease the tension.

Pouring saline on the wound evinced an even louder scream. I could see a laceration on the side of her face that would require more than a few stitches. "Stop pouring that on me!" she yelled at the nurse. "You're torturing me with the cold!"

We were stunned. Why was the temperature more uncomfortable than the saline, or even the open wound itself?

growing up. I wonder if she was also an only child too.

Children were always more composed than adults in the emergency room. Is it their innocence that protects them from the pain that correlates to hospital visits? As a child, hospitals were my home away from home. My parents divorced before I started school so “day care centers” at the hospital sparked a forever nostalgic bond between myself and those large double doors of the hospital. No other building or institution has such memorable doors big enough to fit even the largest of gurneys. The nurses station was my playground and the chairs resembled the posts of play forts. The strip of hallway between “Dialysis” and “Intensive Care Unit” (ICU) was the track where I chased my favorite paramedics back to their ambulances. My mother was an ICU and Emergency Room nurse. As an immigrant from the

Dr. Stephens spoke calmly to her, asking her to lower her voice and pointing to me, joking that as a young student, the main takeaway from my ER experience should not be a widened vocabulary of curse words. His attempts to soothe and joke had no effect. Two more nurses arrived to hold her arms down as the original treating nurse cleaned the wound with Betadine antiseptic, preparing for a bedside procedure to close the wound.

Wanting to make myself useful among all the activity, I rested my hands against the tops of her feet and began to wiggle her toes, hoping to distract her. It worked. I had her attention immediately, and the thrashing stopped.

Gazing up at the nurse treating her wound, she said, "Where did you find this handsome young man?"

The room burst with laughter. The atmosphere lightened for everyone.

Philippines, English was not her first language and when the time came to teach me spelling, her go-to words were: hospital, emergency, ambulance, stethoscope, etc. As early as nine years old, with Heelys (shoes with wheels) strapped on my feet, I was delivering patient charts and electrocardiograms (EKGs) to every patient room in the ICU. Little did I know growing up that some of her coworkers would eventually become mine as well.

As the darkness retreated and the first glimpse of light radiated from the east, an unexpected visitor arrived. It was not typical to have elderly patients arrive this early in the day. She was your typical nursing home resident covered in blankets with two layers of no-slip socks, a yellow wristband indicating her fall potential, and of course, hard of hearing. Jimmie, my mother's coworker at another hospital, was the charge nurse for the

"We're not sure where we found him," Dr. Stephens said, "but we'd like to keep him and not scare him away, so I hope we can all stay quiet and calm."

He was composed throughout, never flinching or showing annoyance. His compassionate nature made every patient feel special, the star of their own story.

"What is your name, young man?" she asked. "You remind me of my neighbor."

"Anthony," I replied, "Where are you and your neighbor from?"

But as a new splash of cold Betadine flowed across the side of her wounded face, she began acting out again.

By now, Dr. Stephens was ready to begin suturing, stating it would not be easy as the skin of the face is thin, and stretching it difficult. An injection of local anesthetic was followed by a less vigorous screech. She had expended

night and beckoned me to the incoming patient's room. He looked out for me, per my mom's orders.

Dr. Stephens made his way to the entrance of her room where the woman was being restrained to her bed. Turns out she literally rolled out of bed but unfortunately gashed her head on her bedside nightstand. Regardless, she was covered with red-stained gauze and in distress.

Turning to me, Dr. Stephens said, "Stay off to the side, she seems to be having a fit and the last thing we need on our hands is for you to end up in the room next to her being treated for a blunt injury."

I entered, stood at the foot of her bed. I figured it would be difficult for someone to instantly grow, allowing their feet to reach my body or more importantly, my face. One nurse was at

most of her energy attempting to break free of the nurses. She began crying. I wiggled her toes again.

"Why, hello, young man. What's your name?" she said, calm returning to her voice.

"Anthony," I replied. "Can you remind me where you are from?"

I wondered which was worse, her hearing or her memory. I continued moving her feet back and forth in a rhythm so that her attention would turn from the physician.

"The moon!" she said, her face lighting up. Her eyes glistened a bright blue, and Betadine dripped down her face, an almost comic look. Dr. Stephens was using a small needle to thread between multiple layers of epithelium, a few millimeters away from the surface of her skull.

"Then you must have an opinion on the Man in the Moon, right?" I asked.

her bedside attempting to remove the blood-soaked gauze.

“You bitch!” she yelled at the nurse. “You torturing son of a bitch. How dare you treat a sweet lady like me with such force. I’m going to write an article in the paper about how the nurses here cause pain to their patients!”

The nurse brushed off the comments. Unfortunately in emergency medicine, it's fairly common to be exposed to rough-around-the-edges type of patients. The nurse smirked as if there was truth to what the patient was saying. Did she smirk because medicine was just another form of tough love? It appeared to me that the nurse was just going through the motions and it did not matter who the patient was, the procedure is the same. I felt uneasy about this revelation. To me, some encouraging words could

“Well,” she paused as if carefully considering her reply. “He is always out for lunch, so I don't get to see him as much.”

Everyone laughed, and for the first time, she smiled. Perhaps at that moment, she wasn't in distress.

“Done,” Dr. Stephens said, tying the last knot in the sequence. He smiled at me, giving me a subtle nod of approval.



Water glistened in the grass as sunlight filtered through the dense palo verde limbs. The sprinkler system shuts off at 0645, just in time to avoid soaking me as I head toward the parking garage.

That Monday morning of my 21st birthday, I felt I had indeed entered adulthood, but not by downing shots at a

have been said to ease the patient's openly distressed feelings.

An alarming yell came out of the elder as the nurse poured saline on the wound. There was an obvious laceration and by the looks of it, she might need more than a few little stitches to close it up. Blood gushed down the right side of her face and it looked painful. I couldn't even imagine the sensation of having the side of my head wide open for the world to see. But to my surprise, she was not in as much pain as I thought.

"Stop pouring that on me!" she yelled at the nurse. "You're torturing me by pouring freezing cold water on my face."

Everyone looked at her as if completely mind boggled. She wasn't in pain but rather more in distress because of the temperature of the saline? Had it been a deeper and larger cut, I'm sure

bar. Greeting a sunrise tired but grateful is far preferable, and that morning, it felt even better. I sat in my car, recording my final thoughts on the night in my journal. Paul Kalanithi's book was on the seat beside me.

I wrote: "Today marks another day of being alive, breathing the air that makes me feel ever so more alive."

Not once did I want my 21st birthday to be different. More than ever, I felt the hospital was my "home away from home." I now saw that these moments were meant for me and in that this setting, I would make my life's contribution.

I may not yet have Master's degrees or a neurosurgery residency, I noted, but I understood the feeling Kalanithi and my parents were trying to convey. Sympathy, service, human connection, and brilliant medical aid are united in emergency care.

That morning, I knew how my dad felt when he discovered the reason why we

her reasoning for hollering would have changed.

I stood at the foot of her bed, the doctor began talking calmly to her, asking if she could keep her voice down and her language to a minimum. He pointed to me, showing her that I was just a young student and joking that inappropriate words should not be what I learn about most from an emergency room internship. She was too busy thrashing to pay attention. Two additional nurses came in, each holding her arms down as the original nurse cleaned the wound with Betadine antiseptic, preparing for a possible bedside procedure to close the wound.

Wanting to be more than just an observer surrounded by four other people actively helping care for the patient, I slowly put my hands on the blankets covering the woman's feet. I decided to wiggle her toes in hopes of distracting

breathe the air and why we savor our lives.

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her, to further ease the tension of the nurse addressing the wound. I caught her attention immediately and the thrashing stopped.

She looked over to the nurse she was originally cursing at on her left and with complete tranquility in her voice, asked, "Where did you find this handsome young man?" Immediately after speaking, she began yelling and fussing. She tried to flail her arms but was stopped short by the nurses on her sides.

The room bursted with little snickers and a whole bunch of laughter. The air got lighter, between everyone.

"We're not sure where we found him," Dr. Stephens said, "but we'd like to not drive him away by not showing him a good time." He was composed through all of this. Not once did he flinch or show the world any sign of annoyance. He shined with a level of compassion that would

make any person in the room feel like the main character of their own story.

“What is your name, young man?

You remind me of my neighbor.”

“Anthony,” then asked, “Where are you and your neighbor from?”

Immediately, the previous behavior began. Cold Betadine flowed down her face and the physician was prepared with his suture kit, preparing to close the wound. He claimed that the procedure would be rather difficult as the skin around the face was rather thin and stretching it is difficult compared to other regions in the body. His initial injection of a local anesthetic was followed by a screech. Her movements were not as drastic as she had already expended most of her energy attempting to break free of the nurses’ grips. She began crying and wailing. I wiggled her toes.

“Why hello young man, what’s your name?” she said, with a calmness in her voice.

“Anthony.” I wondered what was worse, her hearing or her memory. “Can you remind me where you’re from?”

I continued to wiggle her toes, moving her feet back and forth in a rhythm so that her attention would stray away from the physician.

“The moon!” Her face lit up and her eyes glistened a bright blue as the Betadine comedically dripped down her face as a small needle was being threaded between multiple layers of epithelium, a few millimeters away from the surface of her skull.

“Then you must have an opinion on the Man in the Moon, right?” I asked.

“Well,” she paused as if consciously digging deep for an answer

that would suffice. "He is always out for lunch so I don't get to see him as much."

Everyone around the bed laughed hysterically. She seemed to cackle a bit too.

Perhaps in that moment, she wasn't in distress.

"Done," Dr. Stephens said, finally trying the last knot in the sequence. He smiled at me, giving me a subtle nod of approval.

Water was sprinkled over the grass in the courtyard that morning, glistening with sunlight that rushed through the dense palo verde tree limbs. The sprinkler system shuts off at 0645, and just in time so I wouldn't get soaked as I walk past and back to the parking garage. That Monday morning, I had come back to life outside of the hospital a different person. Sunrise feels different at the top of a parking structure and that morning, it felt even better. With my journal and Paul

Kalanithi's book grasped between fingers, I started to journal. I recorded the shift's final thoughts, reflecting on the events that unfolded, thinking back to see if there was something I had missed or forgotten. "Today had marked another day of being alive, breathing the air that makes me feel ever so more alive." Not once did I want my 21st birthday to be different. Not once did I believe the hospital was nothing less than my "home away from home". Not once did I believe these moments weren't meant for me. I might not have a couple Masters degrees or a neurosurgery residency experience, but for once I understood the feeling Kalinithi and my parents were trying to convey. That night, I felt like my dad did back then and discovered the reason for why I breathe it in