

Mauli | Second Issue Art & Literary Journal at JABSOM



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Significance of Native Hawaiian healing plants used in journal design:







'AWA



POPOLO

'OHI'A LEHUA

"Elements of nature such as water, air, and earth as well as Hawaiian healing plants were incorporated into the campus design. Specifically, JABSOM chose four healing plants to be a part of its official logo: kukui, popolo, 'awa, and 'ohi'a lehua. Kukui symbolizes enlightenment and specific parts were used medicinally to treat sores, childhood ailments and rebuild strength after an illness. Popolo is known to be foundational in Hawaiian medicine with specific parts used to treat respiratory ailments, skin eruptions, eye infections, and sore throats. 'Awa serves an important role in ceremonies with specific parts, usually the root, chewed and or mixed with liquids. Medically 'awa was used for the treatment of insomnia, muscle strains, kidney disorders, and headaches. 'Ohi'a Lehua symbolizes regeneration as it is one of the first plants to appear after lava consumes and cleanses an area. Medically, 'ohi'a lehua flowers were combined with other medicinal plants to alleviate childbirth pains."

Werner, K. K., Lee, W. K., & Kamaka, M. (2018). Medical School Hotline: Mala La'au Lapa'au - John A. Burn School of Medicine's Hawaiian Healing Garden. Hawai'i journal of medicine & public health : a journal of Asia Pacific Medicine & Public Health, 77(5), 118–120.



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#### mauli (mă'u-li)

- 1. n., Life, heart, seat of life; ghost, spirit
- 2. n., Fontanel. (space between the bones of the skull in an infant or fetus where ossification is not complete and the sutures have not fully formed)

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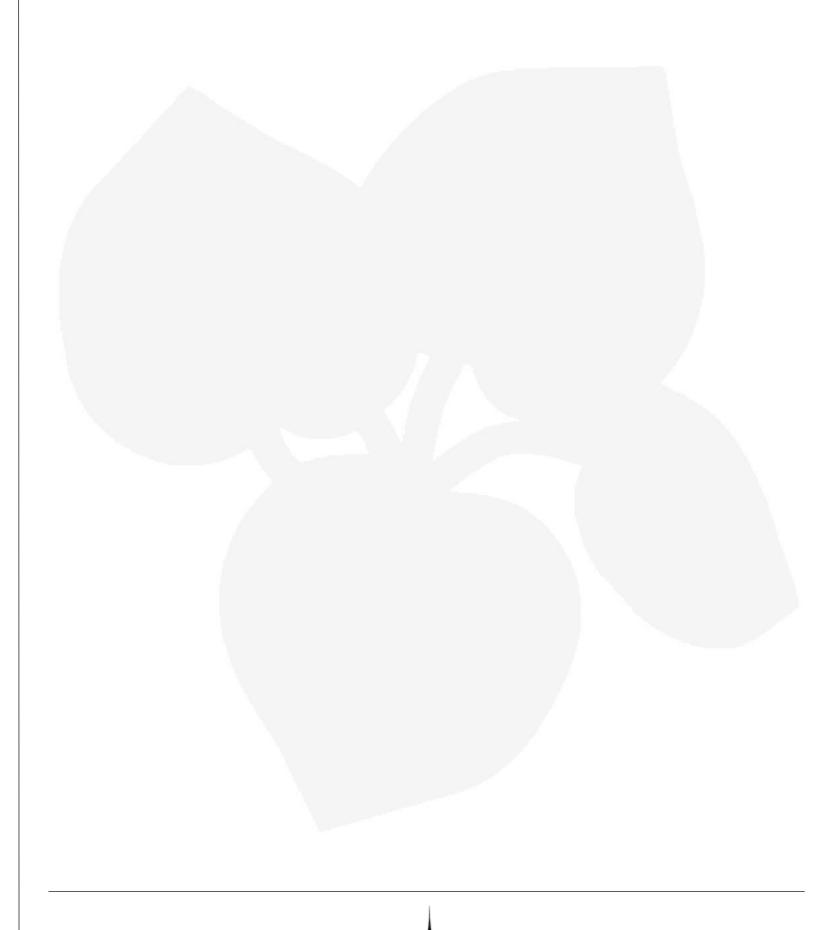
Mark Pian

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#### **EDITORS' MESSAGE**

Mauli is the art and literary journal at the University of Hawai'i John A. Burns School of Medicine (JABSOM). The purpose of this journal is to showcase creative works by members of the greater JABSOM community, and in doing so, highlight the significance of the arts and humanities in medical education and practice. The idea for Mauli was first sparked by a hospital stay: a week before Vera Ong (MS2) had her first MS1 final, she experienced sharp abdominal pain and was kept under observation in the hospital for a few days. She channeled her stress and anxiety into writing about her experience, helping her find peace and positivity within her situation.

Throughout our academic or professional lives, the artists, writers, and creators in us are often overlooked. It is our hope that this journal can help to keep those parts of us alive and well by advocating for self-reflection and mental health.

In naming this journal, we wanted to capture and honor our purpose and sense of place. To this end, we sought the wisdom and expertise of Dr. Mālia Purdy.† When she presented us with the name, she shared that "Mauli is defined as life, heart, and seat of life; ghost and spirit. It is also the word for fontanel, or the space between the bones of the skull in an infant or fetus, where ossification is not complete and the sutures not fully formed." She added, "Acquiring knowledge through education is limited if not connected to the human spirit." The name Mauli speaks to both the abstract and scientific aspects of growth and life—both of which are important to address in medical education in order to develop effective physicians who serve the communities across Hawai'i. We are honored to have this name bestowed to us by Dr. Mālia Purdy.

† Dr. Purdy is an Assistant Professor in the Medical Education division of the Department of Native Hawaiian Health. Being raised on the neighbor island of Maui, she is passionate about growing our own doctors and other healthcare professionals. She is passionate about fostering, mentoring, and supporting local students along their educational journey, and being able to shape, influence, and share perspectives to the future healthcare professionals of Hawai'i is a kuleana she deeply honors.

#### **ACKNOWLEDGEMENTS**

We would also like to thank Dr. Hirose-Wong for her guidance in setting the foundations for Mauli, and Dr. Winona Lee for serving as this year's faculty advisor.

The journal would also not have come to fruition without the generosity and efforts of Dr. Lee Buenconsejo-Lum, Dr. Martina Kamaka, and the JABSOM Communications Team (Deborah Dimaya, Paula Bender)—thank you to you all.

Finally, thank you to those who submitted art and writing to Mauli—you all gave voices to stories that might otherwise have gone untold. We would not be where we are currently without any of you.



### Awāwamalu

Makoa Mau

Sand between my toes
Sitting underneath the sun
Taking thoughts away

Makoa is a second year medical student and graduate of Kamehameha Schools Kapālama.





West Coast Reflections Laurie Tam, M.D.

Laurie Tam, M.D. is a JABSOM graduate, an internist, and a JABSOM Learning Community Mentor. She loves learning about the peoples and places around the world, amazed by the wonder and beauty of God's creation.



# **SAME**Clark Caballero

As I stumble through my clinical years, I become more aware of good preceptorship in the quality of my education. When students begin clinical rotations, they are thrust into an entirely unknown world. It demands quick adaptation to the unspoken yet rigid customs of medicine. I believe good preceptors guide students through a complex, often harsh medical environment and are keenly aware of their potential to harm students and their education.

The third-year medical students are, for the first time, routinely exposed to severely ill and dying patients making them vulnerable to secondary traumatic stress - emotional duress from hearing or witnessing the trauma of another. To excel clinically, students may also choose to endure mistreatment by patients, classmates, or previous preceptors while dealing with a heavy emotional burden. These afflictions are often compounded by a culture in medicine that may not recognize the fragility of medical students, despite exploring patient emotions and stressors as a part of delivering compassionate care. Altogether, we are regretfully too hard on ourselves as a community and fail to embrace the strength of being vulnerable, asking for help, and being open to receiving help. To alleviate these concerns, I reimagine a tool used in trauma-informed care by Dr. Heather Forkey. Students want the SAME: Safety, Availability, Mind in Mind, and an Emotional Container.

Safety and Availability: I remember asking about student evaluations from preceptors, "What if my preceptor just does not like me?" One of my greatest fears is being evaluated on my perceived value as a person rather than my actual performance. The subjectivity of clerkship evaluations is already predisposed to perpetuating inequality and prejudice. Part of creating a safe environment depends on my preceptors' tone and body language.

Occasionally, I feel I cannot express my uncertainty, or my preceptor cannot acknowledge my hesitancy. At these critical times, it seems apparent that my preceptors are too busy, stressed, tired, or a combination of the three. I feel too ashamed to burden my preceptors by wasting their time and energy with seemingly unimportant questions. The goal for preceptorship should be a safe setting for students. We need to share and expand our medical knowledge, practice our clinical decision-making, and receive guidance without fear of ridicule, admonishment, or consequences for the patient.

Keeping their mind in mind (looking at the world through a student's eye): Like any culture, medicine has a hidden curriculum, and preceptors play a powerful role in informing students of these social norms. I recall a conversation with my primary care attending after I admitted that my body tenses, and I need to remind myself to breathe during surgery. "It is because people like you and I are empathetic. We can feel the cuts we make in others", they replied. In my mind, I questioned the sentiment as it implies some specialties may inherently be more empathetic than surgical ones. Even more generally than attitudes placed on medical specialties, students learn how they should feel about themselves. I have repeatedly heard anecdotes of physicians who were praised for staying beyond their duty hours to care for patients. I never heard praise for people who find the strength after a long day at the hospital to go home and be mothers, fathers, or caretakers. This 'white coat of honor' subtly implies that my physician identity may be more valuable than my regular identity. While being a medical student is an important part of my identity, it alone cannot give my life meaning because my life is whole and meaningful in and of itself.

Being an emotional container (holding emotions for a student): At times, I am overwhelmed by my own insecurities in the clinic. For the best part of my lifetime, I have had a low opinion of myself. It is entwined with a fear of abandonment and a need to please others. When I encounter patients who have deep-seated fears of loneliness and unworthiness, I recognize a piece of me that I feel called to protect. Some preceptors have been especially perceptive and, after an emotional interview, open conservation saying, "What did you think about that patient? Did you have anything you wanted to talk about for that patient?" They are simple, broad questions, but they inform me that I can express myself openly. Even the idea that those preceptors could acknowledge that I, as a medical student, could be emotionally suffering from the trauma I see every day is plenty. I was learning it is sometimes okay to not be okay.

I believe preceptors can help relieve many of the stresses that burden medical students like myself simply by knowing we all want the SAME: Safety, Availability, their Mind in Mind, and an Emotional Container. Students need someone they can trust: a safe preceptor who teaches without judgment; an available preceptor who lets students know we are worth their time; a mindful preceptor who recognizes the problems within healthcare and promises to create a better culture; and an emotionally intelligent preceptor who recognizes students' insecurities and guides the student through the learning experience. These preceptors see the student as a whole person and make us feel valued.

Clark Caballero grew up in Waipahu with his parents, grandparents, and 3 sisters. His medical interests include medical education, mental health & wellness, LGBTQ+ healthcare, geriatrics, and palliative care. In his spare time, he experiments with new meal prep recipes, trains for the marathon, and spends time with family and friends.





Coffee or tea
Cecily Wang, M.D.

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Cecily Wang MD is an acute care surgeon with Hawaii Pacific Health and intensivist with Aloha Critical Care Associates. She was born in Taipei, Taiwan and immigrated to the US with her family when she was 8 years old. Dr. Wang has extensive medical training in general surgery and critical care medicine. She has served both domestically and internationally as a member of the US HHS Trauma Critical Care Team and Doctors Without Borders. Dr. Wang believes in the positive impact that a small group of caring individuals can make. In addition to medical relief work, she enjoys traveling and creating art.



# the second wave Jacob Lee

the wave that crashed was unimaginable surely not here surely not us

delivering care became a task hands in pockets wear a mask

elbows pioneered movements stumbling an unfamiliar routine against doors built for a time when touch was trusted

my new everfocus hand gel paranoia and unfamiliar fumbling through shirtsleeve armor

crisis became universal and personal inflicting brutality endured without familiar faces

no visitors at home no visitors on the ward a burden carried alone too much for some. between the fearful and the void stood nobody or stood us battling despair wearing trash bags

invisible foes killing our communities were nothing new we had seen this

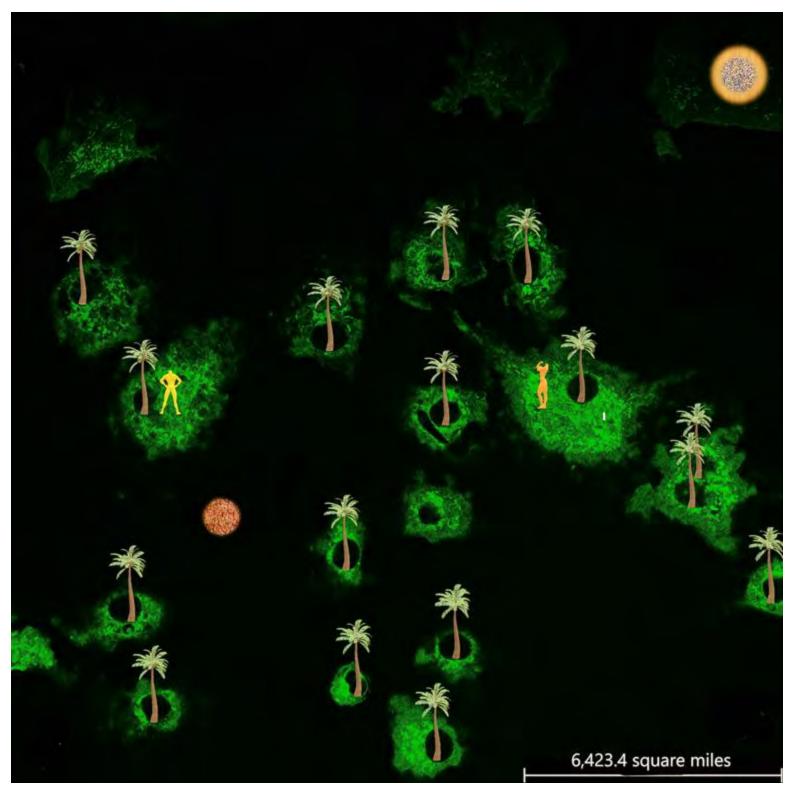
drugs and depression and other unseen reapers were endemic long before

solitary confinement once fit only for the most cruel blanketed our world creating crisis anew

as healers we link arms
tired but unrelenting
turning towards the threat behind the
threat
we brace for the second wave

This poem was written August 15, 2020.

Jacob Lee is a first-year Child and Adolescent Psychiatry Fellow. Recently transplanted from Kansas City, MO, and having lived his entire life 700 miles from the sea, he's enjoying the coastal life and the opportunity to experience the culture of the Pacific isles. His focus is on climate change and mental health, for which he serves on the American Psychiatric Association's national Climate Change and Mental Health Committee.



**Bright Fate** Frank Urena



Frank Urena is a Ph.D. performing immunology research at the JABSOM CMB department. He is originally from New England and came to Hawaii 3 years go to study lymphocytes and, in turn, found a new ohana on these beautiful 6, 423.4 square miles of paradise.

DIE.



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### My Anchor Kalei R.J. Hosaka

"Is that my grandson?" he asks inquisitively, holding on
Tightly to my mother's phone. "Good to see you! Where
Are you? We've missed you," he explains, not aware
That he asked the same questions the day before.

"Africa? What are you doing there?"

Never mind awakening hourly at night for

Bathroom trips. Or his MOCA score of 10.

He wears a "hang loose" shirt—

Reminding me to do the same with my own life.

As his memory fades, he grows wiser.

"We miss you. We have a plate ready for you. Come home soon."

Kalei R.J. Hosaka is a fourth-year medical student at the University of Hawaii, who recently returned from a research year in Moshi, Tanzania, supported by the Fogarty Global Health Fellows Program of the National Institutes of Health (National Institute of Child Health and Human Development). He loves his grandparents, and he dedicates this poem to them! Kalei is currently pursuing a certification in Narrative Medicine through Columbia University.





Harmony Seo Yeon (Saya) Orite



### **My Lolo Manning** Deborah Manog Dimaya

For at least the first five years of my life, I was the youngest out of my cousins on my dad's side. My mom returned to work at five months postpartum and every morning I was dropped off at the house of my Grandpa Manuel "Manning" and Grandma Dominga "Mirang" Manog. I don't remember much, but the earliest years I can remember were spent watching game shows and eating lunch with them—my favorite all-time meal being simply banana and rice. I ran around outside, pretending the neighbor's dog was mine and playing with the upstairs tenant's daughter, who was the same age as me. Grandma would call me in to take a nap and by the time I awoke, either my cousins and my older sister would be home from school or my mom would arrive from work to pick me up.

All I have are happy memories, except for one time when I was mad at my grandpa for cutting my hair so short that I could be mistaken for a boy. After all, I was just a toddler and nobody warned me that it was a bad idea to entangle a sticky wad of gum in my hair. But I couldn't stay mad at him for long because he always made me laugh. He loved to tell jokes so much that it was impossible to have a serious conversation with him. As I got older, we would always visit Grandpa and Grandma on Friday nights. That is, until the day we brought them to the airport. I was so sad to see them go and I didn't understand why they would leave us. It wasn't until I was much older that I realized they had missed their home. Hawai'i was my home, but they longed to return to their motherland that they had left long ago in search for better opportunities.

In 2016, my grandmother passed away at the age of 90 so I flew back to the Philippines with some of my family for the funeral. As we sat in front of her casket, my cousin and I interviewed Grandpa about their life, in between greeting guests from villages all over during the day-long viewing.

He told us how he fell in love with my grandma because "nagaget isuna," (Ilokano for "hardworking"). He had witnessed her take on the role of caretaker of her mother and siblings at an early age while her father was working abroad. He courted her in high school and soon they were married! They owned tobacco and rice fields and had the mutual goal of working hard enough to buy a lot of land for their children and grandchildren to make sure they were taken care of. They grew up in a small village in Ilocos Sur, Philippines, where money is scarce and those with college degrees are not guaranteed jobs.

The last time I saw my grandpa in person was a blur. He had been so warm and inviting the day my family had arrived, proudly sporting his veteran's uniform. But the day we left, his demeanor turned a bit cold—he did not want to say goodbye. It was early in the morning before the sun came up that we got ready to make the nearly 220-mile trek back to Manila. While he lay in his bed I hugged him tightly and told him I would miss him but he simply nodded and seemed more interested in falling back asleep.

Come August 2020, he celebrated his 100th birthday so my cousins and I in Hawai'i did a virtual chat with him through a relative's phone. He had a huge smile on his face as he greeted all of us, including my one-year-old daughter. It's still hard for me to believe that the next time I saw him online, he was gasping for oxygen on a hospital bed after having tested positive for COVID-19.

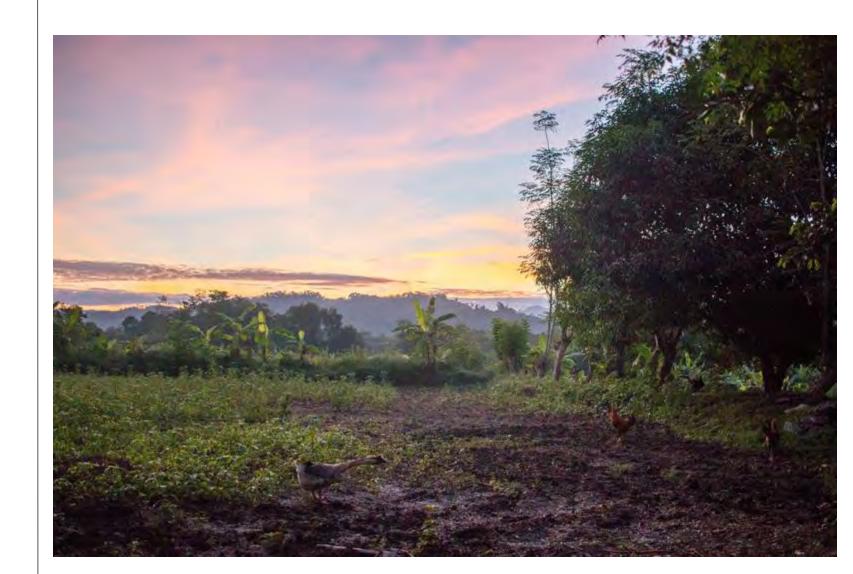




They say that hearing is the last of your senses to go and I hope that's true. I hope he could hear the noisy chatter as people tuned in from all over the Philippines, Canada, Colorado and Hawai'i to be with my grandpa during his last moments. I'm sure he heard all the "I love yous," his great grandkids telling him to wake up and my daughter saying "gum pa" as I pointed him out on the screen.

Ayayatenka Grandpa, saanka malipatan (I love you Grandpa, you will never be forgotten). His memory and legacy will live on through his children, his 10 grandchildren and 15 great-grandchildren.

Deborah Manog Dimaya is the Interim Communications Director at JABSOM, previously trained under veteran Hawai'i reporter Tina Shelton, and loves being able to use her multimedia journalism skills to tell the stories of the JABSOM 'Ohana. At home, she is a wife to her sweet and thoughtful husband, Josh, and mom to a curious toddler and two furry pups. A perfect day for her consists of olympic weightlifting, grabbing a matcha latte boba and a poke bowl then spending the day at the beach with her family.



### **Six-word stories**

Mark S. Pian, M.D.

Another awesome South Shore party wave

Feeling whole as waves embrace me

Honored Wave, introduce me to another

Who else lucky I live Hawai'i?

Ehu kai alveoli oxygenate nalu lungs

Dr. Pian is a life-long surfer, long-time pediatric pulmonologist, recovering physician/scientist, new paddler, and new JABSOM faculty trying to come to terms with the beauty of his new home.





Waikiki Sunset Erin Napier

Erin NaPier is currently enjoying ophthalmology research year and will return to JABSOM for her final year of med school in fall 2022. She previously was a staff photographer for her high school and college newspapers, but upon moving home for medical school, she set down her DSLR, learned to fly drones, and repeatedly "borrows" her mom's GoPro. (Sorry, Mom!) When she's not busy correctly diagnosing heart murmurs on clinical rounds, she can be found surfing, foiling, cycling, and playing with other people's dogs.

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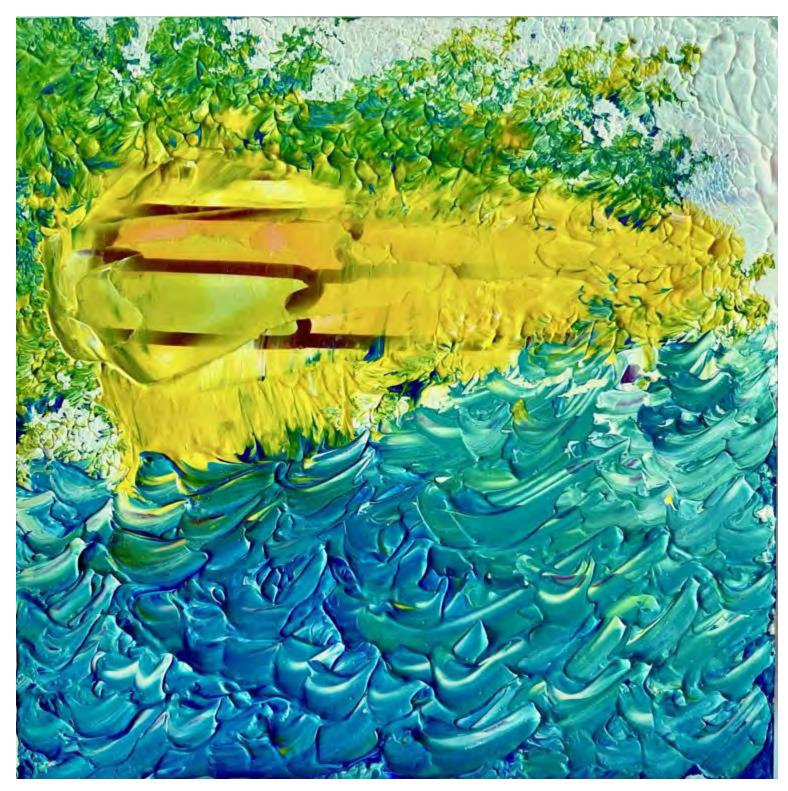


**Social Distancing** Erin Napier

# **Splash**Edward Nguyen

Splash, splash, switch, splash, splash Water jumps into the air Though wet, I feel blessed.

Edward loves being outdoors and appreciates the beautiful nature in Hawai'i. In his free time, he enjoys playing tennis, going on hikes, and surfing.



Flood Cecily Wang, M.D.

## Did YOU hear any murmurs?

#### Erin Napier

I'm a 3<sup>rd</sup> year med student

It's day 7 on my internal medicine rotation

Inpatient wards

It's more intense than some of the other rotations

At least no more night calls, thank goodness

3<sup>rd</sup> year is almost over

Only 7 weeks left

But who's counting?!

I think that means I'm supposed to have some clue what I'm doing

Some days

I feel like a rock star on rounds

Some days

I don't

An 87-year-old woman presents to the ED

Standard heart failure exacerbation

3<sup>rd</sup> one we've seen this week

I remembered to ask about any medication changes

Her nephrologist decreased her Lasix dose two weeks ago

Classic

I scribbled 3+ pitting edema in my notes

Does anyone even know what the "+" means?

Wow, I think I can actually see JVD!



I present to my attending

It might not have been pretty

But believe me I've had worse presentations

"Did YOU hear any murmurs?"

Darn, I remember putting my stethoscope on her chest

I listened at the right spots

I even rolled her on her side to listen for an S3!

My nicely printed H&P says

Heart: normal rate and rhythm, S1/S2 present, no audible S3

Great. I guess I didn't edit the dot phrase

What am I supposed to say?

say no I didn't hear one and risk sounding like an idiot?

say yes (I mean she did have a lot of heart problems?!) and risk being a liar?

"I didn't appreciate any murmurs"

"You said she had severe aortic stenosis; I'm surprised you can't hear one"

My attending brings my fellow medical student and me to see the patient

He says she might be a "good learning opportunity"

"I have a hard time appreciating some heart sounds"

"It can really be an art"

My attending puts his stethoscope to my patient's chest for no more than 2 seconds Did her heart even have time to beat??

He smiles

"Were you two taught how to grade heart murmurs?"

Turns out my classmate, my attending, and I were all taught slightly different scales

The nuances of the grading system aren't terribly relevant

Here are the important takeaways from the grading system:

1= VERY soft, if you can actually hear this you probably did a cardiology fellowship or you're lying

2= your ears must be darn good

3= you might have had some health care training, but it's not thhaaatt hard to hear

4= loud, pretty hard to miss

5= so loud your stethoscope doesn't even need to be fully on the patient's chest, impossible to miss

6= rumor has it you can hear this one from outside the patient's room

He asks my classmate to hold her stethoscope up in the air

It's not touching the patient

She can't hear a murmur

The patient doesn't have a Grade 6

Next my classmate puts her stethoscope sideways on the patient's chest

the flat parts of the stethoscope aren't flush with her chest

just the cold metal edges are

I've never seen anyone hold it like that

"Oh my goodness I can hear it!"

My eyes enlarge

They feel like saucers on my face

Not even my N95, face shield, and hairnet can hide my embarrassment

My classmate is beaming

"Wow, I've never heard a Grade 5 before. That's impressive!"

The attending motions for me to take a listen Wush-dub Wush-dub Wush-dub
Well it was more like:
WUSH-dub. WUSH-dub. WUSH-dub
Can a murmur yell?
I swear this murmur was yelling at me
Or taunting me
Probably both
HOW-could YOU-miss THESE-sounds

I looked back at her echo Impression:

severe aortic stenosis It was actually written in all caps Impression:

SEVERE AORTIC STENOSIS

Can a medical record yell?

I swear it was yelling at me too

My name is Erin NaPier
I am now a 4<sup>th</sup> year medical student
And since that day
I have not missed
and will never again squander
an opportunity to report that a patient has
a grade 5 crescendo-decrescendo murmur
best heard from the right upper sternal border
that radiates to the carotids bilaterally

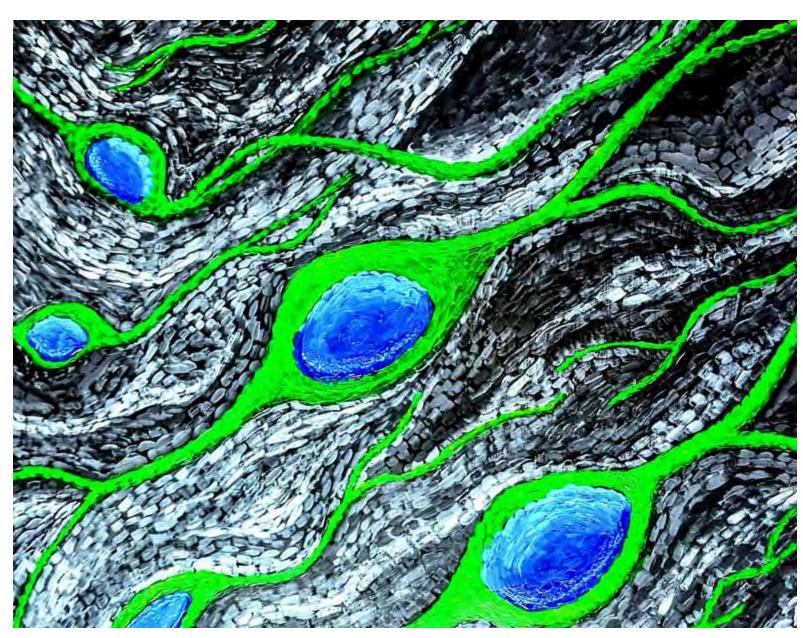


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**Neurons** Kendra Marie Ormsbee

Kendra Marie Ormsbee is the first in her family history to pursue higher education; having received her B.S. from Elizabethtown College, and now pursuing her M.S. in the Nichols laboratory, part of the Cell and Molecular Biology department at JABSOM. On any given day, she can likely be found imaging fluorescent neurons at the microscope, reading with warm cup of coffee at her cubicle, or at home snuggled up with her cat Rousseau. She hopes her unique perspective and appreciation for education will continue to shine through her work on the canvas and in the lab.

# White Teeth Anonymous

Your teeth, So bright, So white.

Like the sun, so bright, so white.

I am in awe.
What is it,
what's your secret?
So I too can have teeth
as bright as the sun like yours.



Gardenia Alyssa Kameoka

Alyssa Kameoka is a first year medical student at JABSOM. She was born and raised on O'ahu and loves to create art in her free time.



THE STATE

Now I lay me down to sleep Cecily Wang, M.D.

The tightly woven polypropylene cover Hugs the lower face warmly. The nose and mouth struggle To catch a breath. Our voices muffled. With each sound we try making.

Nonetheless,

This is our biggest protector – From the merciless agent

Traveling across

Oceans,

Lands.

Borders,

And people,

Infecting the human race with a disease

Taking away the lives of

More than a million.

As we remain optimistic,

With each passing day,

The smiles behind the covers

Begin to lose their expression.

Let this be a time

Of recovery and of remedy, From the losses we suffered, And the injustices that prevailed.

When this moment passes, And it fades from our memory, Don't waste away This ability to Freely express ourselves, And uplift others, Again.

Huanli recently graduated from the University of Hawaii Manoa with her BA in Biology. She has been working with the JABSOM Department of Pediatrics for four years, since as a freshman. She hopes to attend medical school and become a physician-scientist. In her free time, she can be found cooking, taking/editing (mostly food) photos and passionately learning about Northern European culture.



Huanli Hu



**Just us** Cecily Wang, M.D.





# Weights Holly Olson, M.D.

We lift weights to build strength To carry the weight of the days

We can carry both happiness and sadness At the same time But the weight of them Requires strength, and so

We lift weights to build strength To carry the weight of the days

Happiness in one bucket Sadness in another Why is either bucket in our hand? Why do the buckets need to be carried, Today? Or any day?

No matter, they just do.
And because they do

We lift weights to build strength To carry the weight of the days

I joined JABSOM in 2016 as a faculty member in the Department of Obstetrics and Gynecology and also in the Office of the Designated Institutional Official working on Graduate Medical Education. Having dual roles allows me to work with residents in the clinic and on the floors to better understand their concerns as we learn and care for our patients together. Originally from Ohio, the Army brought me to Hawaii for the second time in 2000 and I consider it an enormous privilege to have stayed here after retiring from active duty.





**Roam** Kelli Kokame

Kelli Kokame is a second year medical student at JABSOM who enjoys doing photography as a hobby.



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## A Day Out Edward Nguyen

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As the green trees sway, Winds blow and cockatoos sing, Deep breath in and out. Page 37 Mauli | Second Issue Page 38



**Birch tree souls** Cecily Wang, M.D.



Art & Literary Journal at JABSOM

Kalei R.J. Hosaka

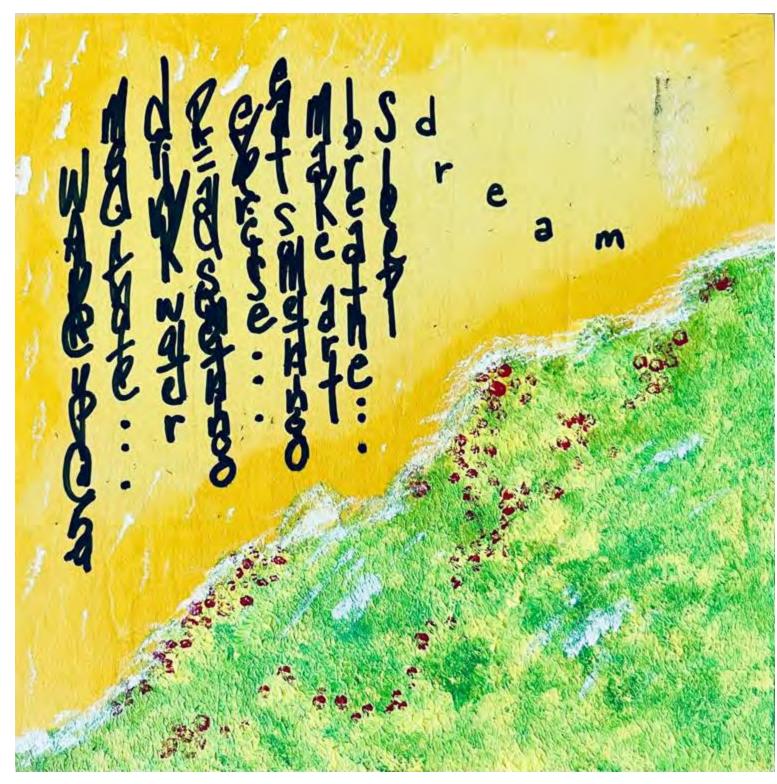
I find myself wandering
Away into the cold, glistening city of dreams
The roads are filled with beaming exhilaration
Excitement without clear direction—but excitement nonetheless.
I run down
To the metro, just arriving

I am wandering
Away from contentment
To the city of dreams, fueled by dissatisfaction
The riddles and rhymes of billboards
The best doctors are:
The most famous? The most powerful?

I fear I am wandering
Away into the city of dreams
Where I occupy the center,
To an existence without clear direction.
I run down
To the metro, just arriving







Wake up ... dream Cecily Wang, M.D.



**Hot safari Sunday** Cecily Wang, M.D.

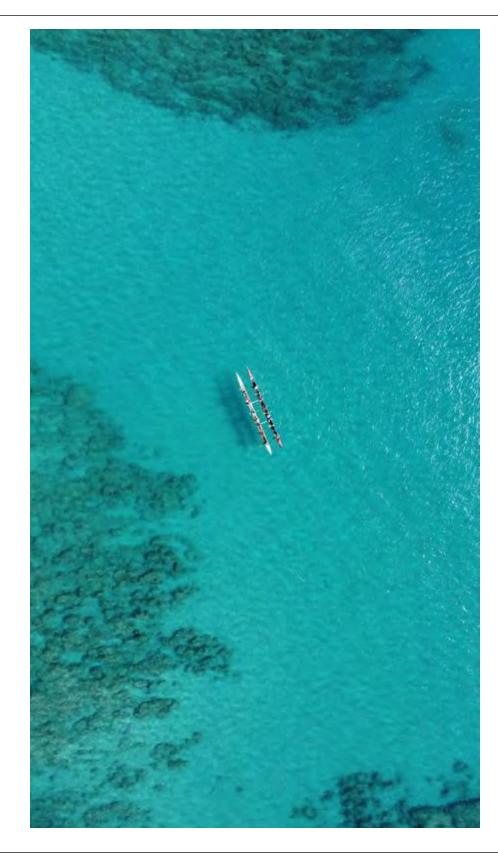
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**Diamantes Azules** Hannah Bulosan



Art & Literary Journal at JABSOM

Hannah is a first-year medical student at JABSOM. In her free time, she enjoys scuba diving, beach volleyball, and underwater and drone photography.

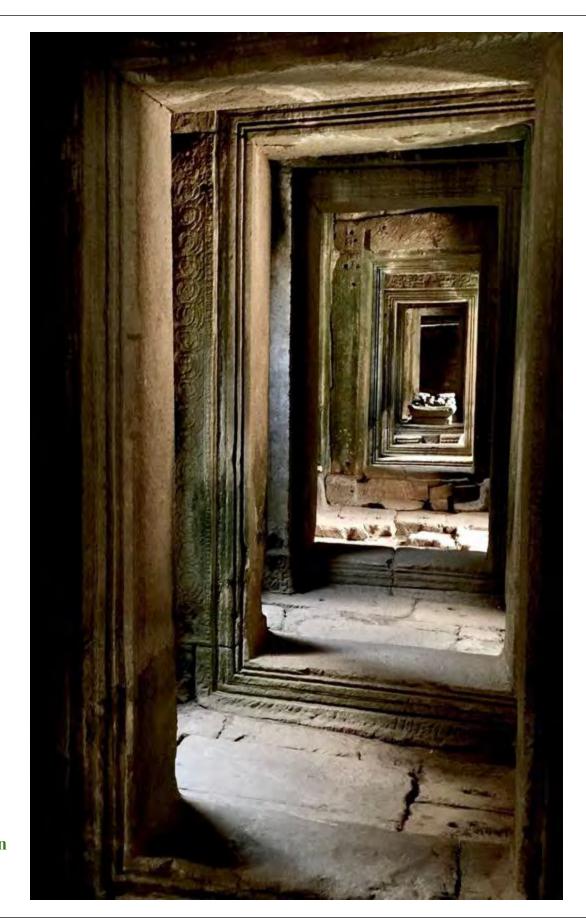






**Serenity in Myanmar** Andy Oishi, M.D.

Andy Oishi, M.D. is a local boy, JABSOM graduate, full-time general surgeon, and part-time medical missionary. He loves to travel and bring back photo memories from his mission trips.



Infinite Regression (Angkor Wat) Andy Oishi, M.D.



**Blue jeans, brown boots** Cecily Wang, M.D.

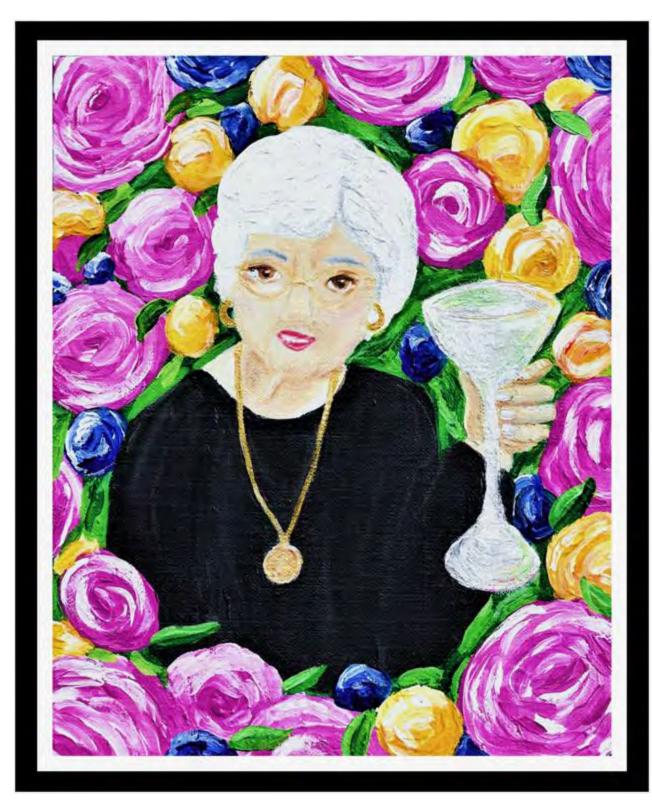






Royalty (Royal Palms @ Lyon Arboretum)
Laurie Tam, M.D.





**Nana Marilyn** Kendra Marie Ormsbee

Time will tell
If we choose poorly
If we choose well

In life

In medicine

In love

In money

Time will tell
If we choose well
If we choose poorly

Success

Failure

Benefit

Risk

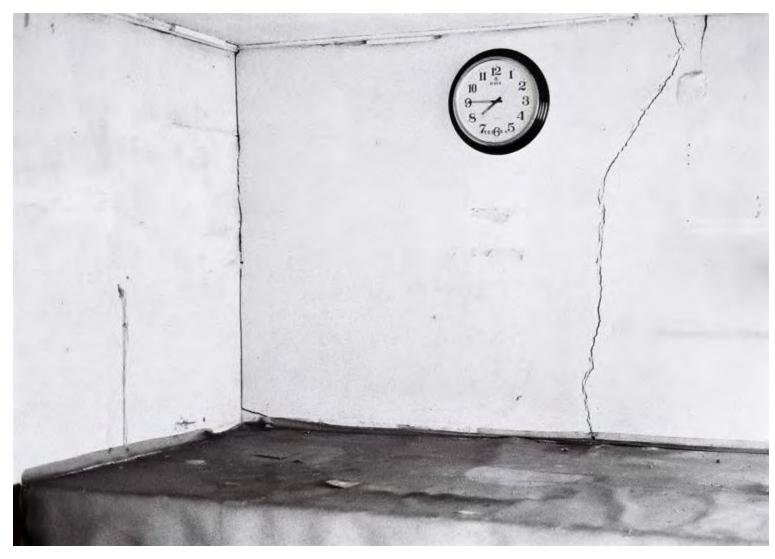
Joy

Heartbreak

Profit

Loss

If we chose poorly If we chose well Time will tell **Time**Holly Olson, M.D.



**Wonju, Korea** Kyung Moo Kim





DIE.

**Wonju, Korea** Kyung Moo Kim

at times i wonder the P-value of a white coat. the Power, Prestige and Privilege, the Persistence, Pettiness and Penitence, that Professionalism hurdle between me and Personal rapport.

they think it makes me better. a medal for my knowledge, a mark of my invulnerability, a mantle for my shiny new suffix suitable for a Paragon.

i perceive it as a Physical Personification of my veneer of effortless Proficiency. that Projection of confidence Preventing me from exposing all that i don't know.

yet while i have always exceeded expectations to be Perfect -I know it is only a matter of time until that Porcelain armor is stained with the blood of a Patient i kill.

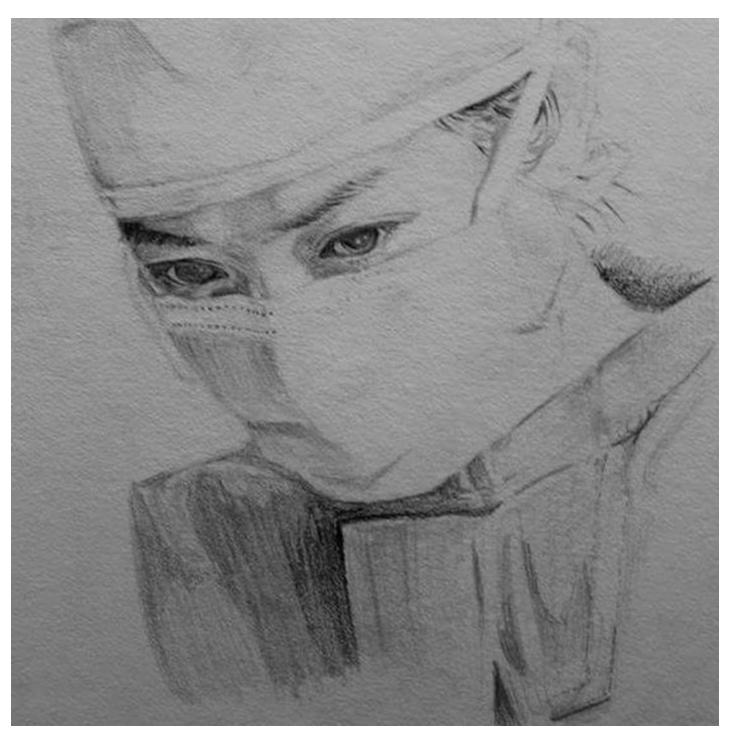
and so i Ponder, why is the symbol of medicine that doomed crusade against death the color of Purity, of innocence, of hope?

why can't it Protect me from failing, from flailing in the way everyone seems to think it should?

i've thought this over and decided to reject this hypothesis of meaning, to leave others to ascribe value to a piece of thin cloth. i won't let your expectations or Perception of Perfection belie my Pursuit of Happiness.

Alpha **Undefined** Brendan Seto

Brendan is a current JABSOM student whose GPA-boosting poetry class in college did more harm than good.



Untitled Seo Yeon (Saya) Orite

#### The Storm Before the Rainbow

#### Cherisse Lohelani Sen Kawamura

I stood next to the surgeon, my hands and eyes focused on the job but my mind and heart a million miles away. I could feel it. The way a menstrual period feels when it first comes on. The way I should not feel while 9 weeks pregnant. I had started spotting the day before, but hoped it was just normal first trimester bleeding. Today this did not feel like spotting. The surgery was running long—it was already 6 p.m. It was the first day of my surgery rotation as a third-year medical student and I had scrubbed into an interesting case. We cut into the abdomen expecting to see an infected peritoneal dialysis catheter and it turned out to be perforated diverticulitis. But at that moment, all I could think about was getting out of the OR and heading straight for the bathroom. I dreaded what I might find.

"It's a miscarriage."

Lying on the exam room bed with my legs apart and an ultrasound probe inside me, I fixed my eyes on the ceiling as I grappled with these words. Words that I never imagined I would hear, yet here I was. The spotting had turned into bleeding and the bleeding did not stop. I had called my OB who recommended I come in for an ultrasound. With those words, the tiny bit of hope I had been clinging to quickly slipped away. My worst fears were confirmed. As a medical student, I know how these things work. I learned about spontaneous abortions and "missed abs." But they do not teach you in school how it feels to have one. I walked out of the clinic to find my husband waiting outside, and when I saw him, I shook my head. And we just cried together.

It was a pain unlike anything I have experienced before. A searing pain, a deep sadness that pierced my soul. How can I miss someone I have never met? How can I mourn someone who was never fully formed? Even though I know from a medical standpoint that these things just happen and are common (the American College of Obstetricians and Gynecologists says 10% of known pregnancies result in early pregnancy loss), I could not help but feel guilty and ashamed. Maybe I should not have done that pathology elective. Maybe I should not have had that drink when I did not know I could be pregnant. Maybe I should have been more careful. Maybe, maybe, maybe. The following days were the hardest. I felt so fragile. Like a paper-thin sheet of glass, just touch me and I'd shatter into a million pieces. One minute I was fine, the next minute I was crying into my surgical mask and running out of the call room to hide my face from the residents. I was grieving not only the loss of a life, but also hopes and dreams that were just beginning to form. It was hard to let go.

There is also an immense loneliness that accompanies a miscarriage. Because it had been so early in the pregnancy, very few of our family and friends even knew we were expecting. Sharing about the miscarriage led to mixed responses, as often people did not know what to say. I had a naïve but well-meaning family member suggest that maybe I should not carry my phone in my pocket so close to my womb. And yet, I found comfort and hope in expected and unexpected places. My husband, while going through his own grieving process, was my rock and unwavering support. My faith was challenged but ultimately strengthened. But where I truly found hope was in the stories of others. A relative who miscarried between her third and fourth kids. A friend who lost two babies before her first child. I also think back to a friend from college who, many years ago, wrote so eloquently about her experience that at the time it moved me to tears. And even now as I think back to her story, just the knowledge of her experience makes me feel less alone. Pregnancy loss can be an isolating experience, but it does not have to be.





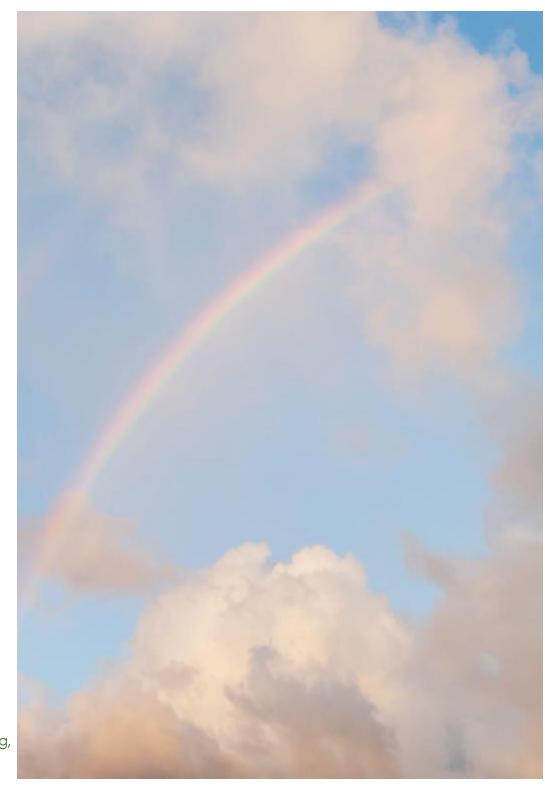
I chose medical management and took the misoprostol on my day off, which ironically and somewhat cruelly just so happened to be the day before Mother's Day. My surgery chief resident, without really knowing what was going on, gave me the rest of the weekend off for which I was extremely grateful. My body recovered quickly; within a day it was like nothing had happened, although I would never really be the same. But I know that I am a better friend, physician, and future mom because of it.

#### References

"Early Pregnancy Loss". Acog.org, 2022,

https://www.acog.org/womens-health/faqs/early-pregnancy-loss.

My name is Cherisse Lohelani Sen Kawamura, I was born and raised on 'Oahu and graduated from JABSOM class of 2021. I wrote this piece at the end of my third year of medical school and chose to share it in hopes that others may also be encouraged. As of last July 2021, I am a first-year family medicine resident and new mom.



a new day... Shannon Hirose-Wong, Ph.D.

Just someone who wholeheartedly believed that Mauli would represent the heart, insight, & talent of students and serve as the reminder that we are "whole" beings.

# On becoming a parent during the pandemic

Jillian Freitas, PsyD

It started with not being able to finish my coffee.

We were in that surreal time between Christmas 2019 and New Year's, and we had just bought our first home in Makawao – a vanilla shell of a home built in the '80s, lovingly kept in the same condition since. My sweet parents were in town, helping us move and renovate. We were eating a quick breakfast before getting back to scraping popcorn off the ceiling and desperately hoping the roof would hold up to the heavy rains (it didn't). I felt nauseated drinking my daily morning coffee, a routine I previously loved. My mom kept asking me why I was so tired when we all had the same amount of sleep (I'm still tired). I knew in my na'au what these symptoms might mean, but my rational mind kept dismissing the idea. We had been disappointed so many times before.

Yet here we were: somehow, magically – and with the help of fertility medicine (shout-out to Clomid!) – we were on our way to becoming parents.

Pandemic parents.

When the pandemic hit, I was about four months pregnant, and, as they say, starting to show. (It's a funny term really, because to whom I was showing was a mystery.) We were visiting New York City when the world shut down. Broadway tickets we bought that morning were canceled that afternoon as the city went dark. We caught the first flight out the next morning, and by the end of the weekend my clinic had pivoted to work-from-home telehealth and quarantining; meanwhile, we pivoted to having our groceries delivered from our local CSA. Our world, like everyone else's, got a little smaller.

In some ways, I loved this. I felt so prepared for a quarantine life. As an introvert in an extroverted shell, I relished the opportunity to tuck away into my best hermit self. And I recognize the privilege in being able to do so in a home I owned, with a partner I loved and respected, and with easy access to outdoor space and nature. I was ready to piece together jigsaw puzzles, play board games, cross-stitch, read all those novels on my bookshelf, run, work out daily, explore new recipes, tend to our aquaponics system, and generally enjoy the independence of the remainder of the child-free phase of our marriage. Despite the global backdrop of anxiety and uncertainty, there was a sweetness to the simplicity and quiet of this stage.

Yet woven into the joys of nesting were glistening threads of grief. From a young age, I knew I wanted to be a mom, perhaps because I believed, and still believe, I've had the best. Yet here I was, on the precipice of parenthood by pregnancy, and I couldn't share it with the woman who gave me life. My siblings and most of my family and friends never saw me pregnant. I was changing into a new version of myself without the supportive audience I had envisioned. I went to my prenatal appointments alone. I recorded a video of our anatomy scan so my husband could hear our baby's heartbeat and see her wiggling endlessly in her placental palace. And I processed irrational – yet very, very real – feelings of grief and jealousy. My sister-in-law got to have my mom coach her through not just one but both of her labors and deliveries, yet I could not have my own mom for my first.

Talk to any person who has given birth during the pandemic, and I'm sure you'll hear similar sentiments. And I had it relatively easy. For the most part, my pregnancy was uncomplicated. I trained for my labor and delivery like I was training for an ultramarathon: eating healthily, exercising daily, practicing yoga and meditating. But let's be real, training for labor is like training for a race with no planned course, no set date and time, and no idea what obstacles will decorate your path along the journey. Still, I delivered a baby during a pandemic, while wearing a mask. I'm not gonna lie, I'm pretty damn proud of that.

The moment I reached down and felt her head crowning between my legs, just as she was about to transition from po into 'ao, I felt every feeling immensely, all at once. Our girl was born into a world of masks, of uncertainty, of anxiety, of grief – and, most importantly, of a fierce and enduring love. I could spin endless yarns about navigating the early weeks of the foggy anxiety of sleepless new parenthood, but I'll spare you. What stands out to me from that time is not how anxious I was, but how much I've grown in the 17 months since. I once lived with parental pandemic anxiety resting on my chest, dragging me down like weights in my pocket, waiting eagerly on my pillow at night, ready to spring at any given moment (3 a.m. nursing session sound like a good time to remind yourself of your worries and fears?).

Is that an allergy cough or is it COVID?

Is it safe to go to our lactation appointments in-person?

Will my daughter know her family?

Will her social skills be forever stunted because of her lack of exposure to other people?



What bacteria lurks on that playground pole she just licked and why does it look like she is chewing on something and what is that in her mouth and what if she chokes and do I even remember pediatric CPR and first aid and how is it only 10 am and why doesn't she take 2-hour naps like her cousins and why am I so tired and why don't other moms I know seem this tired? Whompf.

Yep, I am a pandemic parent. I am visited by anxiety from time to time. I'm still tired. I still love coffee, except it's decaf these days. We have a beautiful, spirited, fearless 17-month-old daughter who, during free-range park adventures and sidewalk romps, has scraped her knees (with the scars to prove it) more times than I can count. She is outrageously social; ever met a toddler who blew kisses at the tow truck? She is unafraid of the world around her and I love how she loves exploring her corner of the universe with abandon. I know that, in due time, anxiety will creep into her life as it does for any person (it's a difficult time to be a human, after all). But for now, I want to live the way she does: unafraid, full of wonder, in love with all the small details. I want to enter into her world and embrace uncertainty for the unexpected joys that await us.

Dr. Jillian Freitas is a licensed clinical psychologist and Assistant Professor with the JABSOM Dept. of Native Hawaiian Health. She and her husband met while writing and editing for their university newspaper, and have shared a love for the written word ever since. Although most of her current writing is more technical and clinical in nature, she enjoys the opportunity to indulge in resurrecting her creative voice.



**Road crossing** Cecily Wang, M.D.

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### A Good Call Felicitas Livaudais, M.D.

Last Saturday, call was crazy. I went to the hospital at 6:30 AM, saw babies, went to clinic, went back to the hospital to do some circumcisions, then took a lunch break with a friend who was feeling blue. I drove home and sat down for a few minutes when the hospital called to admit a little guy with an asthma exacerbation. I was super tired and asked Jerry, "Do you feel like driving me to the hospital for a quick admit?" He was very accommodating, so I got back to the hospital to admit Eli. He is a beautiful boy with curly hair whose mom did meth when she was pregnant, so now he is in foster care. He was doing better after albuterol, steroids and antibiotics for his pneumonia. I thought I was done when L&D called me for a C-section delivery. Shucks. I change into scrubs and wait in the nursery for them to call me, when in rolls Baby M. I am waiting so I decide to do an extra H&P. When I examine this well-formed baby, I notice petechial lesions on his buttocks, and when he cries, some on his soft palate. That's weird – so I order a CBC, at which point I am called to the ER to help with a child who just aspirated a red hotdog. Jerry calls and I ask him to meet me in the ER. Some random number calls and it is our son, Luke, who has lost his cell phone at a bar in New Orleans, while dancing on top of a stool, or something like that. The 2year-old in the ER is intubated and sedated. He was perfectly healthy an hour ago, until he aspirated a round, cut up hot dog that is now lodged in his lungs. The suctioned froth is red, just like the hot dog. I make sure he is stable, then contact the transport team and Dr. Griffith. Jerry shows up in the ER as the OR is calling, so I bring him with me. He changes into scrubs to watch. Mom is a young 24-year-old Asian lady and dad is Caucasian, looks to be in his late 50s. I'm glad I didn't ask if he was the grandfather. Jerry looks cute in green scrubs. It gives me flashbacks of our days at Charity Hospital in New Orleans. The baby is a 35 week preemie, and the OB hands her to me apneic, gray with no tone.

I catch her, stimulate her, give her blow-by oxygen – the usual miracle of turning pink and crying happens, and everybody exhales. She is breech with splayed hips. Dad cuts her cord and I let mom kiss her before she is whisked off to the nursery to be observed. Her birth weight: less than 5 lbs. My patient husband is waiting to take me home when lab calls to report Baby M's platelets are 14,000 – yikes! That is super low. The other premature baby from the C-section is starting to grunt. I call the NICU at MOA, repeat Baby M's platelets in case they are clumped, start nasal flow on the preemie and get a chest X-ray. I tell Jerry I will be here all night and to please pick me up in the morning. I wish I had a toothbrush. I go back to the ER for the toddler with the hot dog in his lungs. He is stable, we give him clindamycin, I fill out the transport papers and talk to his parents. His mom is going on the transport with him. I hate hot dogs. They are so bad for you, especially cut up round for a rambunctious toddler. Transport arrives so I go back to the nursery. The preemie is still grunting. Her chest x-ray shows Transient Tachypnea of the Newborn (TTN). I start antibiotics and IV fluids. Baby M's next platelet count is 18,000, still low. He needs platelets. I talk to his parents who I happen to know from Hope Chapel. They know me as Mia's mom. We discuss their baby's abnormal labs, the need for platelets, then mom starts to cry. We bring her back to the nursery so she can nurse him before the nurses start the IV. I tell her I will stay until everything is stable. Then I lay my head in the call room which must be super close to the central AC since it feels like Safeway's vegetable section – so cold. The nurses cannot start Baby M's IV. I call a grumpy anesthesiologist who brings his ultrasound machine to find a vein. He can't find one either. It is time to transport him to an NICU. At 3 AM, there is another C-section which is thankfully a healthy baby with no issues. I have Lab draw additional blood from Baby M whose platelets are now 6,000. The transport team arrives and can't get the IV either. They are the experts, but we are scared to start an umbilical line with his platelet counts.

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They are told to just take him with the yellow bag of platelets and dad goes on the transport with him. I wish mom could go too. She will join them in the morning. They leave at 4:30 AM. By that time, the transport team and I are old friends – Paul and Lyn were great. The preemie is stable. I put my head down again and call Jerry to pick me up at 6:30 AM. Thank you God I am not on call the next day. Jerry takes me to Stella Blues for breakfast. Baby M eventually got an umbilical line in the NICU, then platelets and IVIG. He did not have an intracranial bleed. He is back to being a normal baby at home with his parents. A hair's breadth from devastation – Neonatal Alloimmune Thrombocytopenia. It was a good call.

Dr. Felicitas "Fely" Livaudais is a general pediatrician in Maui and loves to work with medical students. She says:

"Back in the day, we'd take care of the hospital keikis as well as our clinic work. This particular call was exhausting but memorable. The joy of medicine is internally gratifying when you are making a difference. Baby M is a healthy little boy now. His mom thanks me when I see her."



**Unnamed**Cecily Wang, M.D.



## Reflections of My Mo'okū'auhau (Genealogy) in My Path to **Becoming a Physician**

Dee-Ann Leialoha Carpenter, M.D.

I feel like I need to help those who are seeking to be physicians, especially Native Hawaiians. Why is that, you ask? I don't recall having a mentor. Over the years, I've realized that there were so many things I wish I had known when I was going through this process of becoming a physician. These students need to know that they are gifted, needed, and resilient enough to enter the medical field. They may not come from a family of doctors, but for some reason they want to go into the medical field. What is their passion? Why medicine? Did they learn from their family, their first culture, that they should be a doctor? Are they like me, who had our sugar plantation doctor as a next-door neighbor? Or, do they just want to "help others?" Have they always helped others? Is this something learned or innate? Is it from their ancestor who was a kahuna?

Do they know their ancestry? Do they know that their Native Hawaiian ancestors were scientists? They were able to travel across the ocean, bring with them the plants, animals and food needed to live in a new land. Their Native Hawaiian genes come from those who have survived, lived here, worked the land, bore your parents, grandparents, great-grandparents, who taught the entire 'ohana how it is to live together on an island, in harmony with nature. We are resilient.

Think of a time when you were young, when you were doing what you loved to do, perhaps doing a science experiment, working on a math problem, or reading an encyclopedia or scientific paper. What was the reaction of your family members? Was it positive with a resounding "yes, continue what you're doing" or was it, "gee, you're weird, why are you doing that?" Did you continue doing what you love or did you feel shut down and didn't want to continue because of what so many people said? What made you want to continue what you love doing? Is it the continued curiosity that you have? The questions that you have, the need to learn more to help quench your curiosity? Is there someone behind you: a family member, a teacher, a friend, who has encouraged you to continue? What do they say or do that helps you to go on and learn? I was lucky. I liked to learn things on my own, and by reading.

I loved to read science books, and the encyclopedia was one of my favorites growing up. My parents encouraged me to do what I loved: reading and doing experiments in nature. I know not everyone has a supportive family. I try to tell those who don't have the same uplifting family I had to look to their ancestors, who persevered, continued to find out how to do things for the good of themselves and others, for survival. You have this same gift of curiosity and vision in your genes; use that to move you forward. Find a mentor, a friend, a teacher, a pastor, someone who believes in you, and use their encouragement to move you forward.

I recall loving math and science. I liked discovering new things. My parents would take me down to South Point on the Big Island where I grew up, and showed me how to dig in the ground and find fish hooks made by the early Hawaiians who used to go there to fish, show me the mooring holes where the canoes would be tied, for those seven canoes that would leave Hawai'i and follow the "line of malie" down south to end up on the top of North Island, New Zealand, and establish as Maori people. How lucky am I to be from this group of people, who used the stars, the moon, the sun, the waves to navigate and traverse across the Pacific. Perhaps I can be one of these scientists. The more I learned, the more I wanted to learn. I recall thinking that I would grow up and "cure the common cold." Only when I got into medical school did I realize that there were multiple viruses that can cause the "common cold," not one particular virus to produce a vaccine for and that's why it can't be cured.

I would learn from my parents about how my ancestors also taught us some 'ōlelo noeau to live by. The first thing that I recall learning was to Nānā ka maka, ho'olohe ka pepeiao, pa'a ka waha -- watch and listen and keep your mouth shut. Pay attention to the world around you: the land, the ocean, the wind, the currents. I was taught to never turn your back on the ocean.

This would later serve me well while I watched my patient walk down the hall to my office noticing the slight shortness of breath or how slowly the person moved, or leaned to one side with an antalgic gait due to pain in the hip, knee or ankle. Another 'ōlelo noeau learned growing up is Ma ka hana ka 'ike — learn by doing. By being adventurous and trying new things, I have learned so much. This is similar to the medical adage "see one, do one, teach one." Procedures are needed in medicine and after watching how a procedure is done, it then becomes your turn to do the procedure, learning the correct way to do it by simply doing it. Thereafter, you teach someone else how to do the procedure, so the learning continues in the teaching.





To care for others, you need to work together in a way that helps all of those around you, your 'ohana, your community, your ahupua'a, your island. What other values are part of your moʻokūʻauhau? Here are mine: 'Ohana, aloha, mālama, mālama 'aina, ola, ho'oponopono, lokahi, pono, kuleana, lā'au for prevention and treatment. Use these values as well as your 'ōlelo noeau, to move forward in your path to becoming a physician. These are what makes you resilient, what makes you, you. Ho'omau!

Glossary:

kahuna: Priest, sorcerer, magician, wizard, minister, expert in any profession

'ohana: Family, relative malie: Calm, quiet, serene 'ōlelo noeau: Wise sayings

pa'a ka waha, ho'olohe ka pepeiau ma ka hana ka 'ike: Learn by doing

ahupua'a: Land division usually extending from the uplands to the sea

moʻokūʻauhau: Genealogy

aloha: A word expressing different feelings; as, love; affection; gratitude; kindness; pity;

compassion; grief; the modern common salutation at meeting and parting.

*mālama*: To take care of, tend, attend, care for, preserve, protect, beware, save, maintain

mālama ' āina: To take care of the land ola: Life, health, well-being, living, livelihood

ho'oponopono: To put in order; to regulate; to correct what is erroneous

lōkahi: Unity, agreement, accord, unison, harmony

pono: Goodness, uprightness

kuleana: Right, privilege, concern, responsibility,

lā'au: Medicine from plants Ho'omau: To go forward

Dee-Ann Leialoha Carpenter, MD, is a Native Hawaiian Board-Certified Internal Medicine physician, who is an Associate Professor in the Department of Native Hawaiian Health and the Office of Medical Education at the John A. Burns School of Medicine, University of Hawai'i at Manoā. She thrives in mentoring students interested in the field of medicine.

Dear future self,

I'm a second-year med student now and in the middle of studying, it's hard not to think of how you're doing.

What specialty did we end up choosing? Was it what we had thought? Do you make time for the people and things we love?

I hope you haven't lost the shine in your eyes when concepts finally click. And that your love for learning is never dampened by stressors at work. I hope you wake up each morning joyful to see your patients.

And most of all, I hope you stay strong in your faith and surround yourself with people who allow you to love freely and laugh ugly—just as I am surrounded with now.

It's going to be a while until I see you, but I'm really looking forward to it.

Stay strong, Anonymous MS2



**Ready for the New Year** Laurie Tam, M.D.



**2022- Hope and Anticipation** Jennifer Wong

Jennifer Manyu Wong grew up in Kapolei. Her passion for art derives from its limitless interpretations and as a medium to convey her ideas. While exploring the various art styles and medium, she came across Chinese brush painting and was drawn by the beauty of the brush strokes. It had inspired her to do a Chinese speed-painting as her talent for the Narcissus Pageant. She hopes to one day incorporate her passion for art into her medical career.





Welcoming the New Year of the Tiger Jennifer Wong







