

What Makes Them Tick

By Crystal Lemus

An early Saturday morning drive in East Tennessee proved to be promising. The sun grabbed tightly onto the towering shoulders of the Smoky Mountains and slowly pushed its way up providing a warm glow that glistened in the fog. I took a deep breath and tried to enjoy the stillness of the hour drive to the hospital.

Seeing the hospital off in the distance as my car made its way to the parking lot, I could already tell I was going to get lost. Thankfully I was arriving 45 minutes early. I always had to factor in time to get lost; it happened more times than I would like to admit. After parking, I pulled up my email to go over directions on how to find my preceptor's office for the fifth time, trying to memorize it word for word. I put on my white coat hoping it would give me even the slightest false sense of confidence.

To the outside eye, I was an expert on every inch of those hospital floors. In my reality, I had to follow a senior couple walking in front of me to make sure I wasn't going through the wrong door. I spotted the help desk and my body could not help but be pulled in that direction. Standing in line, a lady in front of me asked for a specific room number. I watched the interaction happen as if in slow motion, my foot tapping without me realizing it. I was almost late to being early.

Rounds that morning consisted of going in and out of rooms, taking notes and a quick debrief on affected cerebral lesions and treatment options. As questions came my way, I kept formulating word problems in my head- the way I had been trained to go about critical thinking in medical school. *"53 y/o F presenting with L face, arm, leg weakness. Sensation intact. Purely motor,"* I thought to myself. *"Lesion in her right internal capsule,"* I spit out almost robotically. *"Right, but did you notice her body language, her mood? At this point in time, I want to know what brings her joy; what makes her tick."* Looking through my notes of purely objective findings I admitted I did not pay attention to her behavior.

After the last room, we made our way back up to the doctor's office where he debriefed with a nurse practitioner that had split the rooms with him. *"Go back to the second room we went to and do some narrative interviewing on the patient. Find out more. I know there is more there."* I reminded him I had just finished my first year of medical school and had only delved into a small amount of problem focused interviewing. In my mind we had spotted the problem — a right lesion in her internal capsule, what else could there possibly be? Not wanting to appear too naïve, I headed towards the elevator, taking my time so I look up exactly what narrative interviewing was. *What questions should I ask? What if she thinks I am simply being nosy and asks me to leave?* My mind had so many intrusive thoughts.

Each turn led to a hall that was a carbon copy of the one before it, inevitably leading to me getting lost. I felt swallowed by an eerie sense of silence—a silence that shifted through the halls, the rooms, behind masks and shields.

Eventually I found the patient —I had noticed her bright pink socks — and I made my way in and reintroduced myself. She grunted acknowledging my presence but avoided eye contact. After telling her a bit about myself — a student, a lover of running, buffalo sauce and scary stories — she looked at me. A blank stare telepathically sending me question marks. I told her that I did not bring any medications or want to conduct any medical procedures; I simply wanted to talk. She took a moment but then rolled over in my direction. “I like learning about lawn mowers,” she stated, giving me half a smile.

The words that flowed out afterwards were effortless as she talked about how solar photovoltaic cells were being used to power electric lawn motors. Her face lit up as she continued to delve deeper into estimating the torque produced in the blade and whether it was sufficient to perform intended jobs. All of this went way over my head, but I smiled and soaked it all in. In that moment, I was a sponge only interested in tech developments and cost-effective lawn mowers. Though bedridden, she took me to a place that brought her a pure sense of joy. A place filled with rap music, *King of the Hill* and mashed potatoes and gravy.

As a medical student, you see people at their most vulnerable, when they are in their greatest need. Yet each patient retains their identity as someone who exists outside of the hospital walls—this, to me, has become some of the most important work I do. Seeing people for who they really are and what they really love but also allowing people to bring their dignity, identity and personhood into the hospital room. Stepping out of the room left me with a sense of wonder. A wonder for what others could be enduring within the same building.

The mothers, fathers and young people who faced life-changing illnesses that prevented them from doing what they loved in life. The woman in her 50s who had scars from breast cancer or who couldn't speak in full sentences because of COPD.

The 70-year old man who had an intracranial hemorrhage that damaged his sense of memory and self; his wife transformed from a lover to a caretaker; yearning for a husband who once walked 30 miles with her in Europe.

The mother with a toddler running around the exam room listening to cartoons on an iPhone as she mourned the loss of her sister to sudden cardiac arrest.

As I headed back to report to my preceptor, I passed through the same rooms and silent hospital hallways. I couldn't help but wonder about all the vibrant stories that were left to float in the emptiness of four corners.

The woman with breast cancer sitting with scars that gave her the cure, the man with the intracranial bleed that can now walk three miles with his wife instead of being confined to a chair, or the woman with the toddler learning about her genetic cardiomyopathy so she does not have to leave her own child behind—they are given hope through healthcare providers, we, in turn, are given hope through their stories.

After a long meandering day, my preceptor mentioned a shortcut to get out of the building, but instead, I retraced my steps and the now familiar help desk came into view—it seemed like ages ago I had stood in line there.

Passing through the ER lobby I saw EMTs rushing in with a lady on a wheeled stretcher. There were no visible protrusions through the skin or blood but her teeth were clenched shut in pain. What could her medical situation be? Where could her injury be located? Could she have injured a nerve? And for the first time, my mind shifted. I thought about her story. I wondered what she liked watching on television. Or maybe she preferred watching movies. Possibly comedy? Was she a music lover? Did she have a unique interest like lawn mowers? What was it that made her *tick*?

Crystal Lemus is a second-year medical student at DeBusk College of Osteopathic Medicine in Knoxville, Tennessee. She received her Bachelors in Neuroscience, Honors from Belmont University in Nashville. Prior to medical school, she completed a two-year fellowship in public health at the Tennessee Department of Health where she completed rotations in Patient Care Advocacy and Traumatic Brain Injury. In her free time, she enjoys going for runs, punch needle embroidery, conducting research and writing children's books.

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