The Souls of Our Shoes

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Last week we saw Mrs. James, an 80-lb woman who looked like a puzzle, bruised, toothpick that would blow over at the slightest breeze. She had severe COPD, was rating 84%, but Dr. Denno wasn’t even worried about that since that was normal for her. She was here today because she had had a stroke (supposedly) and had total weakness and even paralysis of her left body. When she wanted to rest her arm on the armchair of the wheelchair, she had to lift it up like a sack of potatoes with the other arm and drop it where she wanted it, and even then it would gradually slide off against her control. She was in denial that something that serious had happened to her, and it seemed like had this been up to her and not her son who was accompanying her, she would not have even showed up for this appointment today. She did not feel that anything was that wrong (despite needing a wheelchair and being unable to walk). The nurses couldn’t even stand her up to walk her over to the scale to weigh her, she was so weak. Karen brought in the digital scale from the next room and it took 3 people to steady her onto it. 3 people. For an 80lb woman who would topple over at any moment. Despite the mark she was already leaving on my mind just from seeing someone so crippled and incapacitated and bruised, she left a physical mark in the exam room that day. The shoes she stood on were completely falling apart, leaving smudges of disintegrating black tarry foam material across the floor and the digital scale she stood upon. She was more fixated on the mess her shoes were making, and made futile attempts to wipe it up with her crumbling shoe sole. The conversation circled over wanting her to go to a hospital for a stroke workup. She kept apologizing and the digital scale she stood upon. She was more fixated on the mess of her still alive. Was she this close to death at that time? Could of the office visit from last week, zooming in on that last snapshot in my head, actually, I was on reruns to another patient about their shoulder pain, I was just replaying over and over in my head what had just transpired. Actually, I was standing right next to the digital scale, the same scale that had been wheeled into Mrs. James’ room last week because they couldn’t weigh her on the other scale. The scale that bits of her shoe kept shedding onto and quite frankly kept making a mess on. There was a little glob of black gunk stuck on the scale from the previous week. To anyone else it would just look like mud, or maybe wet tar. But I smiled subtly because it was like she had left a piece of herself for us in the office. Whether on purpose or not, it felt like she was still a patient of ours, even though she was gone.

As I replayed the scene from the previous week, I saw myself from an aerial perspective. I saw the scene through the room’s eyes, my viewpoint a 360-degree security camera. So many conversations have happened in these exam rooms: celebrations, sorrows, huddles, arguments, denials, pain, confusions, fears. Laughing and crying, in no particular order. These rooms are like a one-way sponge, absorbing every human emotion till they can’t anymore. The walls suffocate these emotions, squish them in between the sheerrock and under the exam table and in the cabinets between the tongue depressors and gauze, but I know they leach out like incense or smoke, sometimes building an immense and pulsating pressure, and sometimes diffusing wisply like steam off a cup of tea. In Mrs. James’ case, we didn’t have some life changing diagnosis for her at the time, so it didn’t seem like that following pressure, but more of a light and airy lingering cloud that left a little mugginess once we said goodbye and that we’ll follow up with her next week. And as I replayed that cloud in my head, that subtle steam, I felt privilege and honor to be a fly on the wall. Sure, she was 95 and in poor health, death was no surprise to anyone but her perhaps. But I still felt this sense of pride that I was let into her health experience, even if inconsequentially and immemorably. The joke or two I was able to crack when Dr. Denno left the room for one second, or the crinkles in my eyes showing my smile under my mask, or just the subtle nodding along when she expressed how frustrated she was, all felt like such a blessing to be able to offer. A blessing not to her, the recipient of my small human acknowledgments, but to me, the giver, to be able to see what was going on and adopt the emotions of the situation with such a magnified lens.

As I zoomed back into the current patient and his seemingly irrelevant and unimportant shoulder complaint, I looked around. I was standing right next to the digital scale, the same scale that had been wheeled into Mrs. James’ room last week because they couldn’t weigh her on the other scale. The scale that bits of her shoe kept shedding onto and quite frankly kept making a mess on. There was a little glob of black gunk stuck on the scale from the previous week. To anyone else it would just look like mud, or maybe wet tar. But I smiled subtly because it was like she had left a piece of herself for us in the office. Whether on purpose or not, it felt like she was still a patient of ours, even though she was gone.