

Little Brown Bird

Peyton Morss-Walton

She is a middle-aged to older woman in the hospital for chronic pancreatitis, and I cannot decide how much sympathy to feel for her. My team largely ignores her. Apart from continued missives for her to remain NPO and receive IV pain medication, she seems not to trouble them. My attending shrugs at her name during rounds – *she needs to get on PO medication if we want to discharge her* – and I decide to take her as my patient, largely because it seems my presentations will be minimally scrutinized.

I go to see her in the morning before our rounds begin, and I ask her if she would be willing to be an example patient during our medical student teaching rounds. I am constantly surprised by the cheery willingness of patients to be exploited for my own gain, and she again defies my expectations by eagerly agreeing – *I have often been a model before*. She shows me her severe dextroscoliosis, which has no bearing on her current admission, and my sympathy for her begins to creep around the edges of my team's disdain.

She is tiny and wrinkled, like the bird I found on the sidewalk outside the dry cleaner when I was five. My mom told me I wasn't allowed to touch it, because it might have diseases, so we picked it up using an old ace bandage that we found in the footwell of our 1990 Ford Explorer. We brought the bird home to our house on the edge of the conservation land and dug worms from the dirt near a tree. The bird was nearly transparent, and it could only swallow the smallest worms, and we watched them slip away, the throat muscles peristalsing as the worms slid slowly down.

This lady feels transparent too, if only because she is so small and malnourished. She has an ex-smoker's lines across her face, and her skin is so wizened that if her hair hadn't been blonde, I would assume she had grandchildren. Instead, her yellow hair peeks anachronistically around a hair tie, and I wonder if I can even touch her without causing her pain. Her abdomen is so tender from this pancreatitis flare that I cannot – I barely dare to press my fingers against it before retrieving my unruly hand. She thanks me for not pressing too hard, and we agree to show her scoliosis on my teaching rounds, rather than her abdominal tenderness. I feel so tall and large, towering over her, but I have not yet reached the level of fluidity with patients where I feel entitled to sit on the edge of their beds as we speak. Instead, I stammer through a few more questions about her medications, her supplementary enzymes, and her history of pancreatitis.

She sits upright, eyes bright and alert despite the opiates, and she tells me about her boyfriend, who after twenty five years is still not allowed to live with her – *it's better to have your own space*. She worked in a police force for years, she's accustomed to being the only woman in a room full of men, and she likes my shoes. Actually, she likes my whole outfit, I look cute today. She wore a uniform all her life, as an officer, so she's always enjoyed looking at other people's outfits. She likes seeing a woman's face in medicine.

I have forgotten completely what I'm wearing today, choosing clothes at random from the drawer reserved for *dressy casual*, whatever that means, and I stare down at my feet to find the black shoes from ebay that pinch my toes, the too-short pants from Gap that won't quite sit on my waist, and a patterned shirt that I would never have picked for myself, so it must have been a gift. It surprises me so much that I laugh and a spout of authenticity pours out the frustrations of dressing nicely at 5:30 in the morning, with stubbornly long limbs that refuse to adhere to affordable style. She tells me she had the opposite problem, shopping for petite

clothing, and I see her swallowed whole by a uniform, the image of the baby bird wrapped in an ace bandage superimposed alongside it.

We called a lady in our town about the baby bird because we wanted to see if we could put it back in the nest. She told us that the mother birds sometimes kick out babies that don't smell right, and that even though we had been careful not to touch the bird, after living for a while at our house the mother would never accept it again. So we drove to this lady's house and gave the bird to her, and she held out her hands and we placed it into her hands without any protective wrapping, and someone explained to me that it was because the bird was never going home to its nest.

Far from her home, my patient is clearly lonely. The next day she explains that she doesn't allow her boyfriend to visit her in the hospital, as she doesn't want him to see her like this. She keeps only one thing by her bedside, a bouquet of artificial flowers from a close friend's daughter. She says that after they visited, she gave them her credit card so the friend could take her daughter to Chili's for lunch. The friend was struggling financially, and the daughter had been surprised and thrilled. She doesn't have any children, this new little brown bird of mine, but she is still a mother.

She compliments my outfits every day and we lightly discuss her life, sexism in medicine, and whether or not she should allow her boyfriend to visit her. Her stay is prolonged and her pain lingers. On the fifth day that I see her, she asks me about my medical school trajectory, and I explain some of my interests and motivations. *Your parents must be very proud of you*, she says, and I nod, knowing they are.

It is seven weeks after my dad died in a car crash, and I have spoken of it to no one in this hospital. I assume the other medical students know, but the faceless rotating teams of residents and attendings that switch weekly are a wall I haven't thought to breach. My sisters attend grief groups at their colleges and get extensions on papers and exams. I pick my clothes out in the dark and start my car and drive to the hospital, where I pick patients that are overlooked, hoping to be so myself.

My dad died recently, I tell her, and she takes my hand. *He cried when I got into medical school*, I tell her, and she nods.

I think of the worms we fed the little bird and being so worried the whole time that it would choke. I was so afraid of the bird with its frailty and its diseases and I was afraid for the bird, because I wanted it to be happy and to find its nest again. I realize I am scared for this delicate old lady, who seems elderly before her time. I hope that her illness does not define her life, and that she can leave this hospital, and spend years with her friend's daughter. She has shown me so much kindness when I did not even realize I was so desperate for it. I have chosen her for the wrong reasons – in grief, seeking a patient I thought would be “easy” to care for, and I am afraid for myself, too; of my sadness and my pain and the way I've changed since the crash.

On her last morning in the hospital, I wear my favorite dress. I sit on the side of the bed and hold her hand, and tell her that I hope she continues to improve, and I will remember her often, and that I will write about her.

In my mind's eye, I hold the baby bird in my hand, instead of giving it away. We had tried to take the safe option: not touching it, not holding it, but it hadn't mattered in the end. My dad's crash also seems unpreventable. I hope that we are making a difference for this patient. And I wonder if this will be my life in anecdotes, the cradling of fragile things, and if it will bring me happiness or suffering.

I think of all this and I return to my team to run the list. She is leaving the hospital, so it is time to add a new patient to my load.