

The right position

The second year in medical school, we studied pathology and microbiology and saw a few patients on ward rounds. "Do a history and physical," Dr. Soames said the first Wednesday. "Take vital signs. Introduce yourself to the patient. Put the patient at ease."

"We've never examined a patient before," I said.

"Where are the patients?" Frank asked. "I don't see any patients."

We waited in a classroom, the four of us in our starched white jackets.

"Where are the patients?" Frank asked again.

"You are the patients," Dr. Soames smiled. "Examine yourselves."

"I don't want to be a patient," Jennie said. "I don't feel right being a patient."

"If you don't want to be the patient," Dr. Soames said, "be the doctor."

Brian examined Frank, and Jennie took my history. Then I examined Brian, and Frank took Jennie's history. Frank's pressure was up, and I discovered a mole on Brian's back. None of us was able to feel Jennie's pulse.

"There's zero pulse," Jennie said. "I can't find it."

"Suppose I have hypertension?" Frank asked.

"What if my mole grows bigger?" Brian said.

When friends came to my apartment, I examined them. Later I walked to the hospital, put on my white jacket, and sat in on emergencies. September and October, we practised physicals. To unwind, I jogged through Kingston, east to Fort Henry, or west, past the prisons and mental hospital. It felt good to see the city in the distance.

Jennie said Soames was cruel to make us examine each other but Brian said it helped. Brian was studious, Jen-

nie was shy, I was the one who jogged, and Frank was a constant joker. Deep down all of us were anxious.

Soames pushed us to do pressures, listen to hearts, inspect skin, bones, eyes and ears. He invited us to sit in on minor prison surgery. I saw him suture up inmates after fights. I read about rare and terrifying disorders. Soon we were total hypochondriacs.

Frank said, "I think I am dying of a terminal illness."

"If you detect diseases early," Brian said, "most are curable."

"Find that reference," Frank quipped. "Is your optimism curable?"

A compulsive reader, Brian lived in an apartment stuffed with journals, texts and Netter diagrams. He read Cecil and Loeb, Harrison, and Davidson. To relax, he took Stedman's medical dictionary to bed.

Dr. Soames, a ruddy-faced man with silver hair and sea-blue eyes, was

our mentor. He met us in the mental hospital and led us through isolated hospital wards and the electronic gates of the federal penitentiary and women's prison. The three limestone buildings were west of downtown Kingston beside the lake. "My uncle was Warden Soames," he smiled.

"What if inmates escaped?" Frank pointed to the penitentiary walls.

"My uncle escorted them back," Soames said.

"I heard they chained patients to the hospital walls," Jennie said.

"That was then," Soames said.

"If you ask me," Frank said, "a mental hospital is a fine place to learn."

Soames smiled. He said patients and inmates were no different from medical

students. His sea eyes twinkled, but we were unsure what he meant.

"What kind of doctor is he?" Frank asked.

"A gynecologist," Jennie said.

"Why does he work here?" I asked.

"Why does anyone do what they do?" Jennie said.

Frank said, "If you ask me, he smiles too much."

We wrote pathology and microbiology term exams, had holidays and returned for second term. We learned to inspect, palpate and auscultate each other. We grew closer. In the new term, Soames promised to demonstrate a gynecologic examination. In those days, thirty years ago, clinical instructors had a free hand.

That first Wednesday in January, we journeyed through a snowstorm to meet Soames at the mental hospital. A woman in a white gown was wheeled into the examining room. The nurse told her to lie on the table. She glanced at us as the nurse draped her.

"These are the medical students I mentioned," Dr. Soames smiled.

The woman lifted her left leg in the air. The nurse took her leg. "Put it here," Dr. Soames instructed. "Here." The woman settled her left leg, then her right, into the stirrups.

The nurse bent down and adjusted the stirrups so that the patient's knees flexed and her thighs opened. "Good." Dr. Soames said to us. "Come closer. Don't stand there."

Frank and Brian settled beside her left leg; Jennie and I moved around the examining table to her right leg. Jennie read the chart. Dr. Soames rolled a metal stool toward the woman. He wore a green surgical cap and a long white coat. There was draft in the room from the ventilator. It was our first full morning of clinical examinations and we had stuffed rulers, flashlights, tongue depressors and stethoscopes into our pockets so that we would look like real doctors.



Art Explosion

"I am going to sit between her legs and observe her perineum. Can you see?"

Soames instructed the nurse to adjust the surgical lamp. The nurse rotated the beam below the patient's pubis, which grew bright as an electric sign.

"Are you okay, my dear?" Soames asked.

"Yes."

"Good," Soames said. "Isn't it quite a storm out there?"

"It's cool here, too," the woman said.

"Let's have the light brighter. That will warm you," Soames said. "Is that better?"

"I think so," the woman said.

"Good," Soames said. "Now I am going to be inserting something cool into you." Soames reached out his hands and the nurse gloved him. He pointed to a spot above the woman's skin to a mass of dark hair and flesh. "What is this area called?" Soames asked.

"The symphysis," Frank said.

"I am *not* pointing there," Soames said. "What is this area?"

"The perineum," Brian said.

"Exactly. What is the perineal area?"

"It's the area before and after birth," I said.

"Wrong," Soames said. "You mean perinatal. Read your notes."

"Didn't he say perinatal?" I asked.

Jennie put the chart down and whispered. "Perineal was what he said."

"The perineum is the area between the thighs, extending from the coccyx to the pubis and lying below the pelvic diaphragm," Brian said.

"Exactly," said Soames. "Now I am taking up this surgical instrument. Who knows what this is?"

"It's a retractor," I said.

Soames adjusted the instrument. "Definitely not."

"It's a speculum," Brian said. "It's a duckbill speculum because of the shape of the blades."

"Precisely," Soames said. "I am warming this with my hand; I will insert it into this patient and conduct a vaginal and cervical inspection. Each of you will inspect the anatomic areas. By the way, what is this position called?"

Jennie and I whispered. In medicine, there was always an exact name.

"It's the missionary position," Frank said.

"Interesting, but wrong." Dr. Soames smiled. "Go read up positions."

"This is the dorsal lithotomy position," Brian said, "if I am not mistaken."

The woman in the white gown was thirty. She kept staring at the white ceiling. The room was pure white, with white floors and a large surgical lamp. We felt the draft in the room. Jennie said that the woman had been in the mental hospital since her second breakdown. Her husband had been charged with assault by the police. We examined her. She did not say a word. We inspected her perineal area so we understood the Latin names of all her parts.

At noon, we ate in the hospital cafeteria and watched the snowstorm over the hospital grounds. The grounds stretched from Lake Ontario to King Street. It looked as though we were lost in a desert.

Jennie said. "She was cold in the room. Suppose it was the other way around?"

"Meaning what?" Frank asked.

"What if you were the patient and three women examined you?"

"That's fine with me," Frank said.

"No," Jennie said. "You would feel exposed."

"She wasn't shivering," Brian said. "She wasn't complaining."

"What if she was too *depressed* to complain?" Jennie said.

"I wouldn't mind," Frank said. "It's perfectly natural."

"But you are not her," Jennie said.

"And she is not me," Frank replied.

"And you are not me."

No one said anything after that.

We left the mental hospital. Jennie and Brian caught a bus to the campus. Frank and I walked east on King past the penitentiary, leaning into the blizzard.

"I was thinking," I said. "Suppose she was depressed. Then it wasn't right what we did, was it?"

"We were medical students." Frank joked. "We just followed orders."

Later the sun emerged, the sky turned amethyst and the wind died down.

It felt good to walk in the deep snow back to town.

Ron Ruskin

Psychiatrist
Toronto, Ont.

Mitral regurgitation

Why
do I hear
orcas blowing their air
into a summer's evening
stillness; wind sighing off
water at dusk of blistering
heat; a child's playful
caress whispered close
into the
ear?

Why
do I see
Fingal's cave, glistening
wild, wave crescendoes
sucked out in relentless ebb; a
cello cavern birthing harmonic
sorrow; a communion cup
pouring blood, one aperture
into the
next?

I
pull away
from worlds inside
my stethoscope, and look
into doe-brown eyes, nonchal-
ance hiding her deep: So, she
says, My daughter wants to
know, "How long
will the surgery
be?"

Ruth Elwood Martin

Family Physician
Vancouver, BC