

## Blink

I squint against the harsh fluorescent. It reflects off the white walls and recently waxed tile on the short walk from the hospital clinic to pediatric outpatient.

Here, I meet Kelly, a thirteen-year-old who keeps missing her inpatient appointments. She makes new excuses each morning to keep from her overnight stays; her mother always concedes. She surprises me with how unphased she seems sitting there on the white sheets of the hospital bed. She's tall for her age, looking long and lanky above the cotton. She keeps her black converse on, her black beanie in her lap, exposing her olive bare scalp. Her gray sweater falls off her shoulders in an older-than-her-age way. Her headphone cord mixes with the piping emerging from the portacath beneath her clavicle.

She doesn't like when her mom discusses her cancer or her treatment. She keeps clicking the volume on her iPod higher, tuning out all talk. She's surprised when I walk into the room, not use to seeing anyone younger than her nurses, and not one who recognizes the Demi Levato song she's humming to herself.

"I love to sing," she tells me. "Do you know the cup song?"

It is up next on her iPod. She asks for the box of gloves hanging in a bin by the doorway. I shimmy the box from its cage, while Dr. G continues informing Kelly's mother why this experimental treatment that she researched would, unfortunately, not improve Kelly's sarcoma.

Kelly tucks her long legs under herself and starts swinging the box of gloves against her hand and hospital bed to the beat of the song. She closes her eyes, looking up towards the ceiling as she sings.

*When I'm gone,  
when I'm gone,  
you're gonna miss me when I'm gone*

Blink it back, I tell myself.

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Cancer itself is a complication. It's the side effect of some glitch in the system. An individual cell alters its path and the consequence becomes oncology appointments, a repetition of scans, and painful chemotherapy.

Cells do not do what you ask them to. They're unruly. They don't listen to your rules. Most of the time, you can't learn their plan until it's too late.

I was out of the office for two weeks. That was all it took.

Kelly's scan comes back riddled with new tumors in her abdomen. When her mom learns the cancer had spread, she heads to a California spa for a week. Perhaps that is not the exact series of events, but that is all I am told.

I'm angry at first, picturing Kelly alone, untold, at home while her mother receives massages and facials to mask the truth of the future months. It takes me some time to isolate judgment from these complex scenarios. There's a child, her family, and a web of emotions intertwined with those cancer cells.

How would you respond if you were just told your teenage daughter has less than six months to live? Could you face that fact straight away? Could you be strong immediately?

Could you blink back those tears?

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For years now, I have wanted to practice in pediatric oncology. The unanswered aspects, the unknowns that I could investigate, intrigue me. I am fascinated by the complications of minute alterations, the near-impossibility that one cell could trigger such results.

More so, I want to care for the entire family unit that is enduring this disease. I feel oncologists provide care to the patient and their family; these physicians work to palliate their struggles and emotions in addition to treating the patient's disease state.

People always question if that will take a toll on my own emotions. It is one thing I nearly always brushed off; all medicine is difficult and all loss is painful. Hardening to cancer never seemed a possibility.

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I return home for a month at the holidays, continuing my time shadowing Dr. G in his clinic. I run through the list of all the patients I saw that previous summer, inquiring about their current status.

When I ask of Kelly, Dr. G tells me she passed away a few days before Thanksgiving. He tells me that her cancer spread nearly everywhere. Hardened masses entered her lungs, dotted her organs, even impaired her vocal cords. Kelly spent the last few days of her life at home, unable to speak, singing only in her head. I picture her, eyes-closed, singing to me in that outpatient room, gloves escaping the twirling box. I think about the last song she must have been singing.

Dr. G blinks at me a few times, as if waiting for something. Then, he knocks on the next patient's door. I close my eyes, take a deep breath, and follow in behind him.