Surgery & Humanity

By: Morgan Lewis

My father always told us that he cuts people open for a living. Routine appendectomies, bloody midnight traumas, and heartbreaking cancers were passed around with the rolls at the dinner table. I’ve never been one to shy away from trauma. When I lost a tooth, I sucked the blood and played with the pulpy scab. Occasionally, I perused my dad’s old textbooks for pictures of beastly rashes. The best day of seventh grade biology was Frog Dissection Day. In high school, I begged my dad for a chance to see his work. I had my heart set on becoming a physician’s assistant, following my heroic dad into the fray of saving lives.

I woke early to meet my dad at the Coral Desert Health Center, blinking away the dull burn in my eyeballs as I drove up the winding River Road. I didn’t know what to expect inside the surgery center, so I had watched reruns of *House, M.D.* well past midnight, trying to glean any legitimate medical knowledge from Dr. House’s sarcastic jabs. Daddio met me at the double-door entrance, pulling me into a tight hug and looking more pleased about this impromptu “Take Your Daughter to Work Day” than I was. He paraded me around the back offices, introducing me to a blur of employees. Although the stifling cleanness of the air was beginning to catch in my throat, I returned every exclamation of “You look just like your mother,” “We’ve heard so much about you,” and “Your dad must be so proud of you” with a timid smile.

But when we met that morning’s hernia patient, his demeanor changed. He wasn’t Daddio anymore; he was Dr. Lewis. “This is a pre-med student from the college and she’ll be observing your surgery today,” he told the patient bluntly. The man glanced at me with a nervous half-smile—his age showing through his tired wrinkles. He made a joke that wasn’t quite funny enough to mask the anxiety in his eyes. I shook his hand while Dr. Lewis moved on to other preparatory information. Pre-med student observer. The title felt about as natural as the sterilized stench surrounding me, as the bleak bright lights above, as the unfriendly gray tile beneath my feet. Honestly, I had just graduated high school and had never taken an anatomy class.

I brushed off the uneasy feeling and walked toward the doctor’s lounge, where I stopped at a door marked with a screaming red “AUTHORIZED PERSONNEL ONLY” sign. Hesitant, I pressed the metal bar, making sure no alarm sounded to reveal my trespassing, and pushed open the doors. Dr. Lewis followed me into the lounge and we parted ways into the gender-divided locker rooms. “I’ll see you on the other side!” he chirped. I found a stack of stiff scrubs that I hoped were my size and slid them on. I studied myself in the mirror—an imposter in hospital blue. I couldn’t help but laugh and snap a selfie. I was a tourist in this foreign land of polished metal and fluorescent lights, eager to document every memory. I was six years old again, playing dress-up. A cowgirl, a Barbie cheerleader, a ballerina…“Look Daddy, I’m a doctor. Will you play pretend with me?”

Dr. Lewis instructed me on how to scrub in with exactness. My nose never itched so badly as it did after I sanitized my hands and held them up at right angles, hands over elbows, to dry. I stood a moment to take in the impersonal openness of the room, the single bed in the center, the nonchalant attitude of my father and the nurses. I always expected it to look tight and intense and dark like the operating rooms in *Grey’s Anatomy.* I realized this was a mundane day for these people, but it struck me as bizarre, the way they laughed and joked while the man lay asleep—a tranquilized elephant in the room. The man who shook my hand and awkwardly joked only a few minutes before was now sprawled out and unmoving and very exposed as the nurses prepared to drape him, cutting a rectangle in a light, plastic sheet. I felt the nurses’ eyes pressed upon me. They seemed to know this was my first time seeing a stranger’s anatomy so blatantly *there.* I didn’t know whether to look at the body with feigned indifference or pretend I didn’t see it at all. I found refuge instead by staring at the surrounding machines. My heart matched the steady beep of the heart monitor and the consistent drip of the IV bag. I shifted my attention to the incision the nurse practitioner, Autumn, was making on the patient’s abdomen. I guess I thought there would be more blood, that there would not be so much skin, that the dull buzzing of the cauterizer would be less sinister. Dr. Lewis and the nurses pried open the skin and my stomach turned. I was sure their insistent fingers would rip the soft skin, but it pulled taut, where the incision stopped. “I never want to let myself get fat,” I thought as I looked at the inch of yellowish blubber that led deeper into the gaping hole in the patient’s groin.

The slimy, veiny mess of pink was completely unrecognizable, but I feigned understanding with nods and the occasional “ah” as Dr. Lewis pointed out various pieces of the anatomic puzzle. He was in teaching mode, in the same detached voice he used to present me with The Talk— I was eight years old again, squinting at sketched diagrams of ovaries and fallopian tubes, pushing my mind to understand things without enough life or experience to support them. A maturity I desired, but still lacked.

Then he grasped my hand and shoved it into the newly formed cavity. I pulled away. But Dr. Lewis firmly clenched my fingers and poked them into the flesh so hard I was convinced the anaesthetized man would wake up and yell in pain. I could hear Dr. Lewis explaining something obscure about the hernia or the muscle tissue, but my hand was inside a human being and I could comprehend nothing else. Only a thin layer of plastic protected this man from my hand—now obtrusively and unnaturally feeling around in this previously unexposed orifice of someone’s father, brother, son, uncle, and husband.

Humanity. *Human*ity. The word seemed foreign to me and I looked around at the masked professionals—all were oblivious to my epiphanies. To them, the man on the table was another day, another body, another exposure, another mass of muscle and blood and blubber to be fixed. My head spun but I kept my feet firmly planted, determined to ignore the sweat beads forming around my hairline and to breathe past the hot carbon dioxide recirculating in my surgical mask. I watched Dr. Lewis’ hands work on—who knows what—until he was done and left the room to speak to the next patient, leaving Autumn with instructions to “close him up.”

My hereditary Lewis stubbornness was the only thing keeping me vertical as Autumn handed me a curved needle—“You’re going to stitch him up!”—grinning as though she were awarding me a trophy. I imagined holding the tiny needle, shaped like the Grim Reaper’s scythe, and shuddered. But I recognized the opportunity to earn my place in that cold unfeeling surgery room. I accepted the needle and Autumn securely guided my shaking hands in the crisscrossed pattern that would best seal the skin back together; in and down, up and out, in and down, up and out. As she helped me tighten the knot on the last stitch, my mental resiliency surrendered to the light-headedness that had plagued me since I put on the surgical mask. I left the room, retreating to the lounge couch where I nibbled on stale cookies and tried not to think about how I had just trespassed a human body. Flashes of the surgery burst in my mind like water balloons: the bouncy skin resistant to the blade, the stiflingly sterile air, the texture of the tendons and intestines, and the burning buzzing cauterizer. Resiliency. Humanity. Vulnerability. Sterile. Unfeeling. I breathed in the words as I breathed in the fresh oxygen that my lungs welcomed, now that the mask was off.

Dr. Lewis returned to the room and announced that his last procedure of the day was a colonoscopy. I had a pretty good idea of what the term entailed from asking one too many questions during a dinner table story. But as I followed him into the dark room, lit only by a video screen in the corner, my breathing shallowed. I didn’t expect the patient to look so childlike in the fetal position, her entire backside exposed and wrinkly as old bed sheets. I didn’t expect the plastic tube to be longer than I am tall. I didn’t expect the force Dr. Lewis used to shove the long camera backwards through her digestive system. Or maybe “her” is the wrong pronoun. After all, she was barely a woman now, but a patient, a specimen, a procedure. I thought I was beginning to understand it all—until the woman stirred, exhaling a soft moan. “Pushing more propofol,” announced the anesthesiologist on the side of the table as he eased another dosage into the patient’s IV until she stilled again. “You know, they call propofol the Michael Jackson Drug because it’s the drug that supposedly killed him,” Dr. Lewis educated, “but his doctor would have had to give him extremely high dosages of it. It’s only meant to put people under for a short time, as you just saw.”

I caught a glimpse of life’s fragility in that moment. I realized the trust that patients are forced to yield to their doctors. I wondered if Michael Jackson’s doctor felt guilty. I tried to focus on the screen showing the tiny camera navigating the patient’s cave-like intestines, but instead I saw myself on the table, limp and exposed as the patients I’d observed. I felt their fear, their humiliation, their vulnerability in this backwards world. This world that tiptoes the tightrope that divides life and death. This world where the masked rulers harm to heal, cut to cure, and tear to repair.

This world that I wanted nothing to do with.