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The Man Shackled on 4 Northwest

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The Man Shackled on 4 Northwest

In one of the patient rooms tucked into the Northwest (NW) wing of the fourth floor of the hospital, there lay a particular man. Upon walking into his room, you would find nothing extraordinary about him. He is young, early thirties, with a head full of curly brown hair and wide, earnest eyes. His legs touch the foot of the bed, and his hospital gown fits poorly, the sleeves ballooning out at the tops of his arms. He looks like any average guy you would see perusing the aisles of Trader Joe's except for the handcuff that encircles his right ankle and chains him to the bed. Unlike every other patient who has to wait until visiting hours for a loved one to swing by and offer comfort and fresh "get well soon" flowers, this man has a perpetual companion sitting in the far-right corner of his room: an immigrations officer.

Upon talking to this man, myself, I came to understand he had traveled for over a month by bus, by car, and by foot from Central America to reach the US border, where he had asked for asylum. When asked why he had left, the answer was simple: to flee violence and poverty. But while his mental fortitude and grit were strong, his body had begun to betray him. He was brought in for multiple episodes of coughing up blood, shortness of breath, and weight loss. A quick chest X-ray at the ED revealed what would typically be listed first on any differential: a peripheral mass indicative of a neoplasm. A follow up CT and biopsy characterized this mass as adenocarcinoma of the lung. The appropriate specialties were consulted, a diagnosis was made, and plans were set to determine potential metastasis.

Unjust would not begin to describe the sequence of events that had transpired in this individual's life. To have journeyed for so long only to find himself at a hospital where he would be informed that he has lung cancer. He had committed no crime and was in fact a hero of his

own right, yet he was reduced to being shackled to a hospital bed. To bind this man during what could arguably be one of the most difficult and vulnerable moments of his life seemed inhumane. Unfortunately, his situation reflected the plight of many other immigrants who arrive at the US-Mexico border seeking medical care.

There have only been a few instances as a third-year medical student when I've felt completely helpless regarding a patient's situation, and this was certainly one of them. I did the only thing I had the power to do—I pulled up a stool, sat there, and listened to him tell his story. He relayed more than just his medical history; he narrated his life. There was nothing he hid as he laid out the bare truth of what led him to that hospital bed. At the end of this encounter, I thanked him for sharing his story, informed him of our team's plan to manage his diagnosis, and ensured him we would do our best. I only followed him for two more days before he was transferred to the ICU for worsening symptoms.

My rotation ended shortly after his transfer, and amidst the flurry of studying for the end of clerkship-shelf exam, I did not follow up on his case. I had signed off the Heme-Oncology service and his hospital course was no longer available to me. Therefore, I never found out what happened to this young man, and there is no definite conclusion to his story. But during that time in which he was able to share the intricacies of his life and what led him to that hospital bed, I was able to acknowledge his grief and recognize his struggles. There was not enough time for him to tell me everything, there never is. But for that brief time that he could, he was more than just a man who crossed the border seeking asylum. He was more than just a patient who was chained to the hospital bed on 4NW. He was a human being, worthy of being seen and heard.