



RESPONSE TO -
“MEDICAL MATTERS: -
REFLECTIONS ON AN -
ANATOMY LAB” -

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I was moved to respond after reading the article “Medical Matters: Reflections on Anatomy Lab” in the Winter 2012 issue of the Oakland University Journal (1). That article presented thoughts of first year med students anticipating anatomy lab and then reflecting on their first cadaver experience. In this response I’m writing to a first year med student from my perspective as an anatomical gift.

To my last and final doctor:

You are my last and final doctor, and I am your first patient. This is probably our first meeting. The time we’ll spend together will be quite short compared to my many years of life. In this brief encounter you’ll learn more about the physical me than even I have learned about myself over these many years. I’m taking this opportunity to fill you in on the other me, and why I’m here for you.

In the last years of my life I’ve been encouraging others to

(1) Mary Bee, Stephanie Schley, and Adam Weiner: “Medical Matters: Reflections on Anatomy Lab”. *Oakland Journal*, Number 22, Winter 2012.

consider coming to the anatomy lab. This all started decades ago, when as a youngster I wanted to have a career in medicine, as a surgeon. But I became an engineer instead. How did this all happen? How did I get here? Indulge me as I go through the thought processes that led me to this place.

Conserve, reuse, and recycle. More and more those words are becoming guidelines for our existence. Of the three, I prefer to focus on reuse. Conserve is worthy in that it reduces material and energy resource use, but it also reduces function. Recycle reduces virgin material use, but does require energy input. Reuse provides maximum function for given material and energy input. Quite simply, use what you have until it can no longer function, then offer it to someone else who can make good use of what's left. This was my "engineer" thinking.

Most of us have many things that we don't, or won't use; things we no longer need. Whatever it is, if it has some function then someone can make use of it. There are many paths for extracting remaining use: garage sales, charitable donations, gifts. Most of us probably do all of this.

But there is more. This all came together for me on my 75th birthday. Some years earlier I was chatting with the chairman of the company where I was working in my second career after retiring from General Motors. It was on the occasion of his 50th birthday. He explained to me the three stages of one's professional life. The first 25 years are for formal education. The next 25 years are for real-world education and professional development. The final 25 years are for being productive by exercising all that was learned in the first 50 years.

The *FINAL 25 YEARS*? Woops! I had just passed that point! I made two decisions.

First, I made an announcement at lunch. My wife and I were having lunch with friends and our two sons and their wives in celebration of my 75th birthday. I told them that as of that day I was officially retired. Sure, I previously retired from General Motors in 1992, and then from Dow Chemical Company in 2001. But I didn't really retire. I couldn't even say the word "retire." I wanted to work forever, or at least until I died.

After my second retirement I started another career, self-employed, as an engineering consultant. That died its own death after few years, so I had considered myself unemployed, but not yet retired. Then, on this the occasion of my 75th birthday I accepted retirement.

My second decision had to do with being “green” and also being productive and useful after those three career stages that ended at age 75. Yes, I was an engineer and I enjoyed that life. But when I was just a kid, maybe ten or twelve years old, I wanted to be a surgeon. I did a lot of reading about that subject and knew that it was truly my calling. Later when I was in high school I had the opportunity to watch a surgical procedure on television. Television was quite new, and what I viewed was a demonstration of using TV for surgical education. Watching a procedure was no longer limited to a chosen few gathered around the table. Here I was, a high school student, now part of the chosen hundreds who were as close to the action as the surgeon was. That’s when I discovered that surgery was not as neat and clean as I had envisioned from my reading. And that’s when I discovered that maybe surgery was not my calling. Being good at science and mathematics, I decided that engineering was my calling. However, as the years passed, I developed a renewed interest in surgery. I found that I enjoyed watching it. In fact I was awake for my total hip arthroplasty, all 90 minutes of it. The end of the femur removed from me had a place of honor in a jar on my bookshelf. A slice of it became a pendant for my wife. Some 75 photos taken during the procedure by the nurse anesthetist were carefully stored in my computer and on a CD. All this lead to my second decision of the day.

I decided to go to medical school. What medical school would accept someone this old? It depends on what is meant by acceptance. I got on my medical school career path following a chat with my brother-in-law, a doctor-surgeon. Medical school can make one useful, and it can also make one “green.” Conserve, reuse and recycle are the key words here, but mostly the “reuse”, my favorite. It’s too late to conserve, as I was al-

ready born and using resources. Recycle probably wouldn't apply to me. One out of three isn't bad, given it's the best I could do. Of course "reuse" also applies to organ donation, a worthy act and perhaps a higher calling than med school. Organ donation is most appropriate for younger people. Older organs from those of us who've circled the sun seventy or eighty times or more are just not good candidates for transplant. That's what my brother-in-law explained to me and suggested the med school alternative.

So I decided to go to med school as a cadaver, an anatomical gift. I didn't plan on being admitted soon, but knew that when the time came it would be a fulfillment of my childhood dream of going to med school. And this was the cheapest way to go . . . to med school tuition-free, and just to go.

I had lunch with my wife at a Chinese restaurant. I don't believe in fortune cookies. However, the one I received that day was prophetic: "You will be involved in many humanitarian projects." Others who have gone before have been involved in the humanitarian projects of medical research and education. I had benefited from that. We all have benefited from their generosity. Now I had the opportunity to make better the lives of those who follow.

So here I am.

I've been here before, but not like this nor for this final purpose. And now your anatomy lab is far more elegant, sophisticated and functional than when I first visited. My first of these two visits was quite impressive for me. I appreciated the opportunity to get a glimpse of what an anatomy lab is all about. I had seen pictures and watched videos of surgical procedures. I had perused an anatomy text. I had seen models of human anatomical structures. I have some photos of my own total hip arthroplasty.

Doctor Bee opened the doors of the morgue and wheeled a gurney into the lab. I was somewhat surprised when I was offered a pair of gloves. What I experienced in a brief viewing of a cadaver was a hint, powerful as it was, of the beauty of God's creation in the human body. I could only imagine the immen-

sity of the experience for medical students to not only see, but to uncover and discover the magnificent systems we live with and take for granted.

My experience included looking into the opened cranium and seeing, touching, holding and viewing the complex and delicate structure of the brain. The opened chest cavity displayed the heart and lungs, which I also touched and held. The exquisite, functional design of the heart chambers and valves was impressive. The lungs were firm and spongy, and smaller than I had anticipated. I saw arteries and layers of muscle tissue. Even this limited viewing of the beautiful structures of these organs and tissues pointed out to me what a wonderful gift each of us has been given.

But what else I saw was even more impressive, more magnificent. I saw a person, unidentifiable but yet a person, who by making this gift of self spoke to what it means to be human. Why care about anyone or anything after you're gone? Why would anything matter? As much as the body, the organs and tissues demonstrate the beauty of creation, so also does the "hard wiring" of caring that is part of what it means to be human. Here was someone concerned about those who will follow. I envisioned a parade of faces, unfamiliar faces of medical students who through this gift would develop skills to bring healing to countless others who will never know or be known by this donor, many of whom haven't even been born yet. .

I came into this with no doubt about the need for medical students to learn anatomy from cadaver viewing and dissection. But this belief turned into a strong conviction. We all have benefited from medical science. Most of us who read this, and I who write this, would probably have been long gone from this earth were it not for others who went before us and donated their bodies, willingly or not, for medical research and education.

What a waste it would be to simply discard my body when I no longer need it. A part of being human is having a concern for others. Donating my remains as an anatomical gift is such a simple and inexpensive thing to do. This anatomy lab expe-

rience caused me to think again about my personal decision to be an anatomical gift for medical research and education, and how right that decision was.

This body has been of great utility to me over all my many years. I've had a wonderful marriage of well over 50 years to a wonderful wife. Together we brought two sons into this world. I enjoyed my career as an engineer. Retirement has been good to us. The extent of my life has exceeded my expectations. At birth in 1935 my life expectancy was 61 years. If I was born in 2012 my life expectancy would have been 75 years. At that date I was already 77, so I exceeded that one, too. I thank God for the comfortable, pleasant and productive life He gave me. Now, with your help, I expect to continue to be useful first to you, and then indirectly to those many patients you'll serve during your career.

I'm here for you, but I expect some things from you, too. Here's my short list.

- -Apply yourself diligently. Study hard to become the best doctor you can be. I'm here to help you.
- -Don't be timid. Yes, you need to think before you act. But don't over think. Don't permit thinking to paralyze you. You're in this anatomy lab to do things, not just think about them. Time means nothing to me, but your time in this laboratory is limited. Don't waste it with excessive contemplation. If you make a mistake on me just learn from it. I've had major surgery before. No matter what you do or how you do it, this will be easier on me than prior surgeries. No post-operative pain and no rehab.
- -Share what you learn about me with your fellow students. That will make me even more useful, and that's why I'm here.

A few final thoughts. I'm here now, and I had been encouraging others to do likewise, because cadavers are in very short supply. Some 95% or so come from donors and donors'

families who wish to see some good come from these last remains. The remaining few are from unidentified persons or those with no next of kin. This is in sharp contrast to a generation ago when most, almost all, came from the unidentified indigent. My doctor had informed me that some medical schools have as many as 10 medical students per cadaver. He questioned the effectiveness of the experience with such a ratio of students to cadaver. I want you to have the best possible medical education.

I came here to help you, so use me effectively. By doing so you'll extend my influence to future generations through your good works.