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LEXUS is a student organized publication that showcases artwork by UCI School of Medicine students, physicians, faculty, staff, and patients. True to its name, PLEXUS aspires to connect both healers and healing alike through the unifying language of art. This year, we have renewed our efforts to bring PLEXUS to the greater UCI community with improved distribution as well as outreach events, including a collaboration with the Bowers Art Museum. We would like to give a special thanks to our faculty advisor, Dr. Johanna Shapiro, and Dr. Ellena Peterson. Associate Dean of Admissions and Outreach. This book would not have been possible without their support. We hope you enjoy PLEXUS 2013.

To contribute to PLEXUS, please send artwork to plexusjournal@gmail.com. We look forward to seeing your submissions!

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▼ It's a A Bug's Life Bradley Jacobsen MS1 Photography



The Frog Carter English MS2 Photography

Hair Nguyen Thanh Nguyen

Spring pea shoots of the scalp.
Tendrils for a mother's locket.
Lingering grounds for a future lover's gaze.

Long vines of keratin are my fingers' muse while a thicket of bangs filters you out like Billy Collins' "Special Glasses".

They are linear reminders trailing in your car on your shirt on your pillow clinging shamelessly to your socks like I wish I could.





►► Trekking Costa Rica
Betty Wong
Fellowships Program Coordinator
Oil on Canvas

 Preying Mantis in Antelope Canyon: Arizona Ian Parker, PhD
 Professor of Neurobiology Photography

►► A Good Day Cipriano Hurtado UCIMC Security Photography





The Fruit of My Actions

Nguyen Thanh Nguyen

MS2

Where do we come from? Where do we go? Are we separate entities wandering to and fro?

Can what I do here affect what you do there,
Or are the fruit of my actions mine alone to
bear?

Leave me in my room to contemplate. These burning questions cannot wait.

Reflecting on my memories of the past years, I see that I provoked your pain and your tears Through words that were uttered out of anger and hate.

I thought I'd feel better, but these emotions hung a heavy weight.

Seeing you suffer, my heart wailed. How could I be happy if your happiness failed?

Smoking a cigarette, I see my lungs deteriorate.

A child nearby cringes from the smoke that I
create.

The child and I may die sooner than we think As the earth becomes smothered in black ink From gasoline, pollution, and my cigarette smoke.

Ozone depletion. Skin cancer. What's next? Where's hope?

I'm drowning in anguish. I need a drink.

Drowning in alcohol so I don't have to think.

Oh, I want to vomit, I realize that I am drunk.

I find myself beating you while you plead

"ENOUGH!"

Driving my car, I swerve to the right. I hit another car and take the driver's life.

I'm a little older now. Thirty-five years old.
I want to start all over, immerse myself in gold.

I want to build a house, so I cut down some trees,

But then I realize my heart is still not at ease. Where will the birds live? Where will they go? What about this poor tree? Does it know That I am destroying its entire family While taking away air that people breathe?

Looking back a few years before,
I see the world around me at war.
With a rifle in hand, I take an aim
At an enemy who is within shooting range.
BANG! The bullet penetrates, takes his life.
Oh, what good will ever come out of this strife?

I killed a man who was just like me.

He probably had many friends and a family,
And I probably killed his family, too.

He was their loved one, the best man they
ever knew.

They will struggle to live; they mourn and cry, And I was the reason why he is no longer alive.

Sitting on my bed, I contemplate.
Yes, there were many mistakes I have made
Because I have failed to believe, failed to see
That I am in you, and you are in me,
And that what I do can foreshadow your fate.
From now on I will be mindful of the actions
I take.

So we do not come and we do not go.
We are not separate entities wandering to and fro.

What I do here can affect what you do there.

The fruit of my actions aren't mine alone to bear.



Name: Adorable, Completely

Date: the best week of medical school

Time: a good morning

Newborn Nguyen Thanh Nguyen

Physical Exam

General Appearance: You are cute as a button, pleasant, and well-dressed.

Head: You are blessed with a full head of silky black hair, the generous locks nearly brushing your ears.

Eyes: Red reflex positive bilaterally. Alert and innocent, your brown eyes are ready to face this big world.

Ears: Fully formed pinna, they are miniature versions of the adult ear. The intricate folds and creases never cease to amaze me.

Nose: Delicate and thin, this nose will never need to be fixed.

Throat/Mouth: Well-formed, smiling pink lips. It is only with the beginning of a cry and a quiver of your lips, that you can send chills down my back. Your high-pitched shriek leaves me powerless, an amateur. I don't know how to comfort you, hold you like a mother, and care for you like a doctor.

Neck: Supple, lost in the creases below your chin.

Chest: Clear to auscultation bilaterally. Your breaths are so fast, blowing by me like the breeze whistling through the car windows.



Cardiovascular: You wiggle away from me, sensitive to the cold stethoscope on your chest. The rate and rhythm of your heartbeat tap constantly like the click of fingers on a keyboard, but the murmur is only a whisper for my untrained ears to imagine.

Abdomen: Round and protuberant, you barely notice as my hands palpate your tummy. Yourgray umbilical cord with its plastic clip is my only reminder that you once lived in the womb, that you had a home before this crib, this nursery.

Musculoskeletal: Your arms and legs fight me as I try to complete my exam. You won't let me position your arms, and wrap you up tight in your blanket.

Neurologic: All reflexes intact. You make me feel special as your fingers curl around mine, even though I know that it's just the grasping reflex, to disappear at one year.

Skin: Your skin is not rosy and smooth, but actually peeling and dry. The surface is not as I expected, only the beginning stages of something more to come.

Comments: You are a complex, beautiful gift of life. I am privileged to discover your every idiosyncrasy, from the roundness of your head, to the birthmark on your thigh. As I complete my exam it is your innocent peer that sends a pang to my heart. It will be so long before I am a true doctor, so long before I'm a true mother. In the adoration I have for you, in every detail that I document, there is a yearning that you could be my own. But alas, I need to finish this note and move onto the next.









Mirage Kyle Smith MS1/Prime Photography

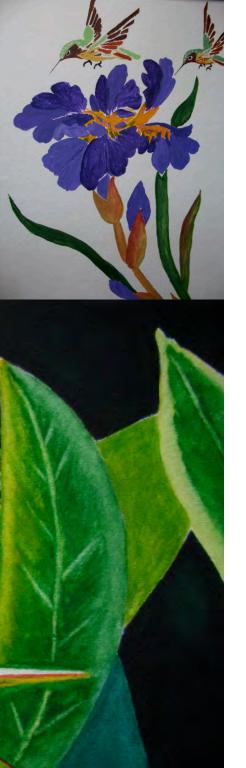
◆ Anvil Cloud lan Parker, PhD Professor of Neurobiology Photography

Stampede Carol Taylor L&D Department, UCIMC . Watercolor

► A Catch
Tanni Thai
Senior Financial Analyst:
Controller Services
Photography

▼ Bird of Paradise Ricardo Perez Cancer Survivor Painting >> Hummingbirds in the Garden Ricardo Perez Cancer Survivor Photography





Allergies

Johanna Shapiro, PhD

Professor of Psychology

A minor surgery outpatient The assistant places a sterile pad with a hole in it on the surgical field my back Do you like tension? he asks the doctor stretching my flesh

When the needle slides in loaded with anesthetic the pain is unexpected my eyes tear the sting passes in seconds but my eyes keep filling the water brims over spills down my cheeks I sob silently into the waxy paper of the exam table trying not to jiggle the surgical field

First it's about the pain but then it's about my uncle who just died then starving children, my daughter's divorce, the typhoon in Burma, the guy in the Hummer who flipped me off as I drove here in no particular order no particular importance all the things we carry and can't change

The doctor steps back shifts his eyes from the surgical field to my blotchy wet face Your eyes are running, he informs me Do you have allergies? I was about to correct him when I realized he's right I'm allergic to the world.



Post-Call Poem

Meghann Kaiser, MD

Today, the title of my memoirs would be "Enough."

About a physician wanting: For the quiet of her mind. The well being of her patients. The gratefulness of loved one. The approval of superiors. The admiration of her colleagues The forgiveness of her soul. Knowing it will never be.

Enough.

Life Panel

Frank L Meyskens, MD

The sickness has revisited a body wracked, invaded unremitting, day and night. Life ebbs, the verdict in.

All systems and technology failing maxed out with morphine and wonder drugs vital juices no longer flowing. Desperate and despondent for hope.

Who should be the jury no controversy or doubt that the end is near. The last great act of living now.

Life closing, shadows abound Decisions made by a life panel, the one most loved who will loosen the rope and send me home.



- [no title] **Carol Taylor** L&D Unit. UCIMC Watercolor
- **≪** Portrait of Lincoln Wendy Houghland Cancer Survivor Painting
- **◆** Spring Bouquet Ben Franco Caregiver **Painting**



▲ Decorated Longtail Boats
Christy Tabit
MS1
Photography

Ino title]
Stefano L. Sensi, MD, PhD
Associate Adj. Professor
Photography





Pediatrics Reflection Project

Kelsey Goodman



▲ Van Gogh on Wood Val Engstrom Art for the Soul Painting

was teenage patient that joined team's mv early on in mv inpatient rotation. However, I was reluctant to take her on as one of "my patients" for the first few days. She wasn't young or adorable like my other patients; she had a difficult, ambiguous problem of persistent hypertension in the setting of obesity and type II diabetes that reminded me more of frustrating adult patients than I would have liked.

Even after I took on J. as my patient and rounded on her over the next week, I never developed a particularly strong emotional connection to her, or even came to find her medical problems that fascinating. And vet that lack of connection to her is part of what made her case so compelling to me on the day we finally discharged her from the hospital: J. was homeless. She lived in a motel with her mother and siblings, and she had for a long time. And everyone on our team, all of her subspecialist consults, knew this. It was a side note in every progress note in her chart, and our team expressed the appropriate amount of concern and sent for a social work consult, who gave them two meal vouchers and recommended some resources to them to help pay for the rent. And we acknowledged this on rounds and patted ourselves on the back for doing our part.

The problem was that we never thought about it again. We discharged her home on several long-term medications, her a large-sized blood pressure cuff and told her to check her blood pressure twice a day, and then wrote a discharge summary instructing her to follow up with her primary care doctor and the nephrologist, to eat a healthy diet with limited salt intake, exercise, and lose weight. And we went into her hospital room and explained all of these instructions to her, and she nodded her head and we felt like we had fixed this patient and could go on our way.

And technically we did do our part: we're physicians, and our role in maintaining the health of our patients can only go so far. But the problem lies in the fact that after she was discharged from the hospital (and with no health insurance, I have no concept of what her hospital bill will look like and whether she will suffer any financial hardship from her several week stay), she fell off the map. How does someone who can't pay the rent on their motel room from month to month have regular follow up with both a primary care doctor and a subspecialist? How will she pay for the medications she will need to control her blood



Nude Val Engstrom Art for the Soul Painting

pressure the rest of her life? How do we expect her to change her diet and be mindful of her salt intake when she has no real practical ability to make healthy choices when it comes to what she eats? How do you tell a kid with no home, who lives in an unsafe area, to exercise more and start a weight loss regimen?

These issues aren't and can't be the exclusive responsibilities of her doctors; her health and wellbeing are also the responsibility of the society in which she lives. And it's hard to ignore the fact that while we can offer her exceptional medical care while she's in the hospital, as soon as she leaves, America as a society fails her. J.'s high blood pressure, type II diabetes, and obesity will likely continue to spiral out of control and lead to a lifetime of poor health, and there's nothing I or any of her doctors can do about that.

Without a social safety net to help J., she will continue to be homeless, unable to afford her blood pressure medications, overweight, and unhealthy. Her hypertension is so serious that she may already have had a stroke, and will likely suffer a more serious one in the future. J. is not the troubled yet beautiful girl with the wonderful personality that everyone takes pity on and helps out of her hard times. She is not the impoverished yet gifted teenager whose exceptional talent will lead a teacher to mentor her and help her win a full ride to an Ivy League university. The socioeconomic inequality in this country is so great that it will be the great exception rather than the rule if J. is ever able to rise out of her circumstances and take charge of her own health. J. is not the underdog success story, she is the forgotten kid that falls through the cracks.

Sometimes the hardest part about being a doctor isn't reaching the limits of medical science and telling a family, "I'm sorry, there's nothing more I can do."

▼ Amaya
Fransisco Saucedo
Patient Coordination Dept.
Acrylic



Sometimes it's reaching the limits of your profession and being forced to confront the fact that you're sending your patient back out into the world where our society is failing them; knowing that your patient is receiving so much less than what medical science has to offer. We like to think of preventable illness as an archaic phenomenon reserved to third world, underdeveloped countries mired in poverty; and even when we acknowledge that people don't have equal access to care in America, we still can't bear the thought that such a thing might happen to children. But J. is a child with a preventable illness, and she will suffer a lifetime of poor health despite the best efforts of an excellent children's hospital. And as a doctor, that's a hard concept to come to terms with. ■



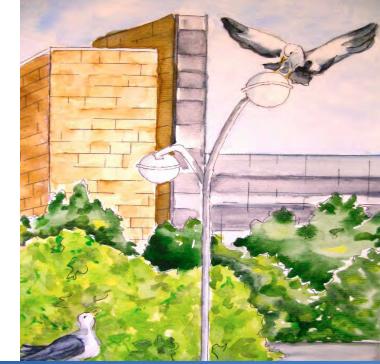


AJay's Jazz Man Rolanda Engstrom Art for the Soul Painting

• Russian Ballerinas Stuart A. Green, MD Professor, Orthopedic Surgery Photography Positano
Michael Connor
MS1
Photography

▶ UCI Hospital, 2009 Ben Kilpatrick Cancer Survivor Painting

▼ Thousand Island Lakes Lorianne Catherine Burns MS2 Photography







Every Personal StatementThat I Have Ever Read

Anonymous

is hand trembled in mine as he coughed. The flickering torchlight revealed his eyes, gone dark with the fear that he may not live through the night. And in that instant I was transformed. I decided to become a healer, and the moment was too powerful to allow me to make even the least attempt to bring this man to medical attention.

I have always been fascinated with (insert field here), because I love (patients, complex pathology, humiliation). I have been blessed with tremendous role models. My (mother, father, entire extended family) are physicians. They taught me the values of originality and self reliance. Their letters of recommendation speak to how I practice these values faithfully.

"Beeuae ta muae," the village elder told me on the day when I returned home. It means peace be with you, and may you go on to do great things. I now have a tattoo of that message on my back, which I can read for inspiration if there is a mirror around. I hope to reflect the best of myself at your institution.









【 [no title] Alan Widgerow, MD Clinical Professor Plastic Surgery Sculpture

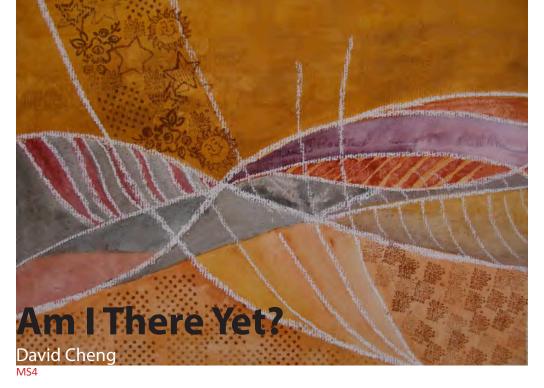
▲ Hmong Woman with Basket

◆ Old Oak **Kyle Smith** MS1 Photography

Ruth Hsu MS2

Photography

44 Australian Rainbow Carter English MS2 Photography



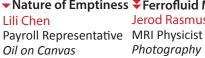
used to follow the leaves of the trees around me, used to always wonder how far those leaves would fly, used to always wonder where I would be when those leaves had fallen off and flown away. I used to have handfuls of sand, jarfuls of bugs, can fulls of clovers - a grasp and reach further than the stubby, chubby arms of a child. And then, growing up started. And, growing up meant realizing that the world was bigger than our collective minds could touch, but too small to fill all the cracks and craters of its problems. Growing up started to feel like growing into an outline. Becoming a person became following rules and expectations to fit within the frame of that person. And then, it became growing older - realizing that growing old wasn't quite as far as I used to think it was. It became looking through the lens of memory, wondering how I went from standing as a kid who watched the stars and

the clouds, to an almost adult who wondered not about if the sky would fall, but how and why and where and then...what then?

And then, the loneliness, evanescence, carefree carelessness, unforgettably forgotten nights stop for a brief few, for a heartstopping phase of wonderment and anxiety. An airy mystique named after...who knows. "Love." Enmeshment of all the deepest innards of human emotion, entitlement to the most bizarre and heroic events in the course of human history. The product of which is often, intentionally or not, a new life. Looking into the watery eyes of a baby, I wonder if, under those ripples of wonderment and bedazzlement, some deep and forgotten part of me resonated with it. Wondering, if I'd already grown too much up, and forgotten what it means to be a child at heart again.

◆ Abstract Wave Gina Youn Cancer Survivor Painting

▼ Succulent Kim Kennedy, CRNA Nurse Anesthetist Oil Pastel



▼Nature of Emptiness ▼Ferrofluid Millefiori Jerod Rasmussen Photography







▼ Tube Travel
Adam Truong
MS1
Photography



▼ Cottages at Crystal Cove Kim Kennedy, CRNA Nurse Anesthetist Oil Pastel Fruit Bowl Maria Tabita Clinical Nurse III Watercolor







A Single Sob

Frank L. Meyskens, MD

When cancer visits your universe, a companion feared, not wanted.

After the shock and disbelief, silence the redoubt most often taken.

And the journey of cuts, drugs, big machines, touchstones to your presence on earth. On this battlefield and beyond the tears flow and flow, quiet unexpectedly.

And the loneliness, an innocent prisoner in a solitary cell, a survivor's hope, when hope is in short supply. Believing in miracles, because that is all that remains, talking to me about your dreams.

My eyes glisten as you struggle to continue not wanting to disappoint me, your protector. A single sob from within belies the pain, the grief, your journey.



Infinite Path Linda Rodriguez UCIMC Security Photography





- **«**Craniology Virginia Liu MD/PhD student Photography
- **◆ Centuries**old Camelthorn trees Ian Parker, PhD Professor of Neurobiology Photography
- ▼ Bay of Fundy Boats Stuart A. Green, MD Clinical Professor of Orthopedics Photography







Are you Africa

Bryce Spitze

Endless seas of golden grass, Dotted black by beasts' backs. Untold beauty is this land. You are Africa.

Hunger makes your belly hurt. New mothers die on floors of dirt. Untold sorrow is this land. Are you Africa?

Precious jewels fill your soil. Jet black wells spring forth with oil. Untold wealth is this land. You are Africa.

Pockets lined with stolen cash, While peasants toil and fear the lash. Untold thievery is this land. Are you Africa?

Deepest jungles make your face. You are the birthplace of my race. Untold mystery is this land. You are Africa.

Poison courses through your veins -No treatment, though; instead, war games. Untold injustice is this land. Are you Africa?

Ten thousand tongues sing your songs, And taste your fruits as morning dawns. Untold joy is this land. You are Africa.

You are Africa.

The Little One

Eric Ballon-Landa

MS3

nto the room I hear him come. Above me, his head appears. Then, with blue plastic hands and a dangling toy, he starts poking at me. He lays his hands on my head, then wipes the goop from where it sticks in my eyes. He shines a light in my eyes, then in my mouth. He prods my neck, then holds the dangling toy against my chest, first here, then there, and listens. He squishes my belly, flips me on my side, runs his fingers down my back, checks my diapers, tickles my feet, pats my head. His eyes smile. I can't see behind his mask, but I think his mouth is smiling, too. He coos something I can't understand. Then he's gone. The ceiling is back.

. . .

Into the room I go, calling "helloooo" and "good morning!", expecting that a mother will emerge—from the closed bathroom door that I pass on my way in, or the pillow-covered armchair in the fat corner. The baby is there, dwarfed by her cradle-bed and covered in blankets, and I approach nervously because I want mom's permission to examine her. But there are no movements in the room other than these 4.5 kilograms of baby and the drips of her IV fluids. I poke my head into the cradle to look.

I had been primed to notice her low-set ears, small head, and abnormal belly-button, the stigmata of her chromosomal abnormality – yet I cannot look past her raucous Einsteinian mane of jet-black hair, or her left hand, covered in a grandmother-knit mitten. This mittened hand is in her mouth, and she smacks her lips against it, sucking rhythmically. Too easily, I pull her arm away from her mouth. With plodding, semiconscious effort, the arm resists gravity and inertia to resume its original place. Her limbs are mostly bone – dangling skin that has almost nothing to protect unanchored vasculature that has almost nothing to nourish. Her belly is distended and soft, splaying to the sides, and she gurgles and burps constantly, unable to control the formula feedings that we send through her nasogastric tube every three hours. Who can tell if she is hungry?

I leave thinking that mom can probably tell. But in six days of hospitalization I won't ever learn the answer to that question, because mom won't be there to answer it. I will wonder: where mom can possibly be that is more important than being here; how a being as vulnerable as my little patient can be left alone and survive the day; and why a mother, during brief visits, would sit idle and let a stranger care for her dying child.

Then, I will remember, that - regardless of the very best intentions, unspeakable amounts of love, or uncontrollable grief - there may be other children to feed, family to support, bills to pay, lives to help live.

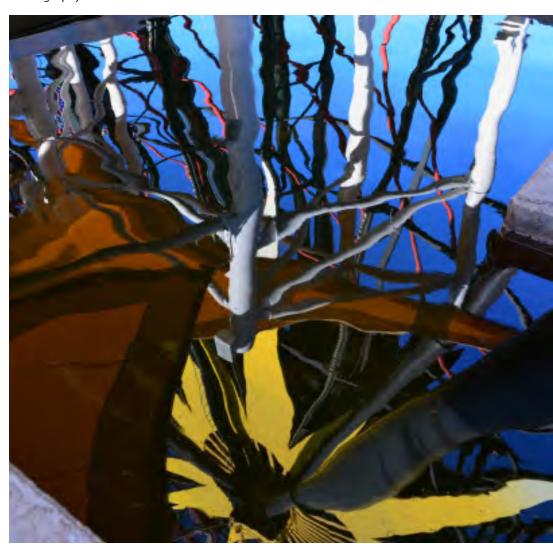
For LG, my 11 month-old patient with Trisomy 13. ■



Feel the Love Cipriano Hurtado **UCIMC** Security Photography

▼ California Reflection Cipriano Hurtado UCIMC Security

UCIMC Security Photography



We Are Taught

Samantha Costantini MS3

We are taught that the brain Is a series of synapses Flickering from one lobe to another And ultimately firing no more

We are taught that heart Is merely a pump To circulate the blood That fills our endless vessels

We are taught that wrinkles are caused By foldings of the epidermis That crease our surface, suggesting age And dehydration

Hands, intricately innervated By sensory and motor nerves Have differentiated us in evolution From those unable to turn a knob

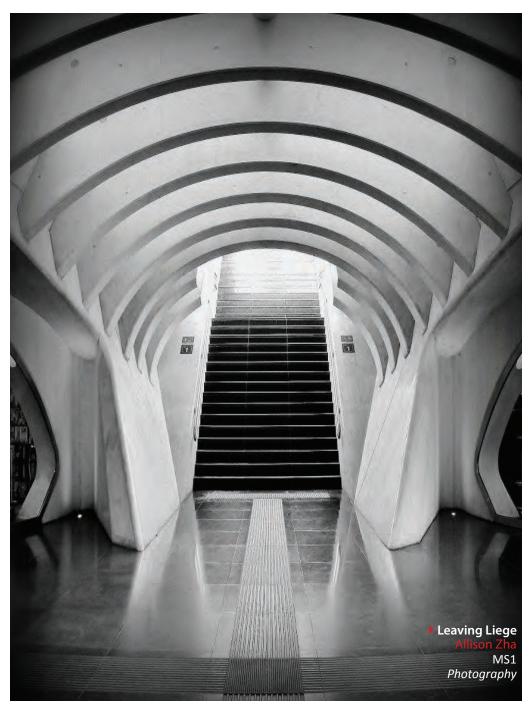
How much easier is this Scientific, electric, mechanical view Than what our firing synapses Truly think of such things In moments of supposed "weakness" The brain Ever-changing controller Whose unique connections Make up who you are

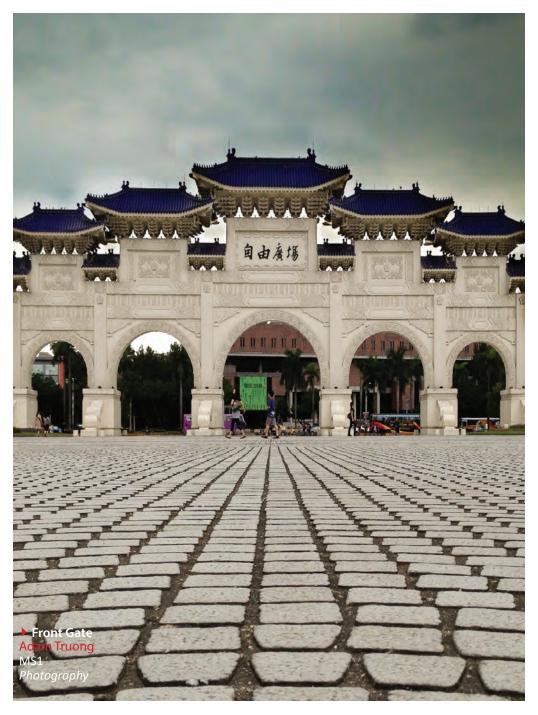
The heart A thumping reminder of your humanity That beats stronger and faster When a loved one walks in the room

The wrinkles Lines of experience Earned from hours of smiling, worrying And long days in the warm sun

The hands Givers of comfort Which have written the words You couldn't wait to get out

And one day We will lay your pump, hands, and burnt-out electrical connections In a box not nearly big enough To hold the life inside.







AUDIO AVAILABLE ONLINE at http://www.meded.uci.edu/Medhum/plexus.asp

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