

AFTERWARD  
by McFeely Sam Goodman

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Literary Edition

The world breaks everyone and afterward...  
—Ernest Hemingway, *A Farewell to Arms*

### *On Staging and Storytelling:*

The stage directions in *Afterward* need not be taken literally. Taken literally, they would illustrate the story in a way that I think would take away from the truth of the piece. Instead, it would be best to think of them as part of the text to be staged (which is not to say that they need to be spoken). They are meant to be evocative, to express themes and images of the section of text that they are paired with in another way.

It is my hope that the director of this piece will, in staging it, bring some totally new element to it. That will serve both to make it more engaging as a theater experience and to capture the truth that no story exists within a vacuum. Most plays seek to capture the world or some microcosm of it. In writing *Afterward*, I have sought to capture only myself, only my own particular experience, though I hope that parts of that experience will resonate with other people's experiences. But I do not imagine myself to be a microcosm. A staging which brings some element that is mostly or entirely novel to the piece, then, will help to bring some part of the rest of the world into the piece, placing my experience into a context.

The more time I spend with this piece, the more I realize that it is not what it seems. The first discovery was that this is not a memoir of my experience being treated for cancer in 2000 when I was twelve years old. Instead, as I wrote, it seemed to me that the story I was telling was the story of my thyroidectomy in 2013, a few weeks before I was set to begin my MFA in Playwriting at Columbia for which this became my thesis. The stories of my cancer treatment in 2000, then, became important in the way in which they shaped the experience that I had had in 2013. But watching the piece performed in its entirety for the first time in a workshop as the culmination of my MFA, I made a new discovery. As a piece of theater, this is not the story of my cancer treatment, nor is it the story of my thyroidectomy. This is the story of me telling the story of my cancer treatment and my thyroidectomy. It is because it is a story about the telling of stories that *Afterward* has to be a piece theater. It is important that the act of storytelling is made visible.

That is why I would advise against stagings which seek to illustrate my cancer experience, as those stagings shift the focus of the piece from the telling of the story to the content of the story. The content of the story is, of course, relevant and important, but the truth of the piece is in the way the story is told.

For the workshop of *Afterward* at The Signature's Ford Studio, Sarah Hughes staged the piece in a way meant to evoke the film set for the superhero film within the piece. Five actors shared the speaker text which they spoke to each other. To me, that staging complemented the text because it highlighted the act of storytelling in the text by setting it alongside the act of

cinematic storytelling, but I would encourage each director to find their own personal solution to the problem.

*On Casting and Time:*

Rather than perform this piece myself or cast a single actor to take on the role of the Speaker, I think that the role of the Speaker should be played by several actors, no one of whom should resemble me in more than a couple of externally evident traits (age, race, gender, etc.), nor ideally should they resemble each other. The actors should not try to “play” me. A diverse group of actors will highlight the theatricality of the piece and in doing so, highlight the time involved. Looking at the actors onstage, the audience will be reminded that they are seeing a work of theater, written, rehearsed, and developed over a long period of time.

Because *Afterward* is drawn so directly from real events in my life, I believe it is important to highlight the theatricality. In order to capture the act of telling and retelling the story, I have written the piece in a style that mimics my own speech and thought process. That stylistic choice runs the risk, however, of fooling the audience into thinking that what they are hearing is extemporaneous. But to treat *Afterward* as extemporaneous is to lose sight of the time involved. At the end of his essay, *How to Tell a True War Story*, Tim O’Brien writes, “All you can do is tell it one more time, patiently, adding and subtracting, making up a few things to get at the real truth...You can tell a true war story if you just keep on telling it.” That’s what I’ve done in writing this piece; I’ve rewritten it and rewritten it again. *Afterward* took me more than two years to write and more than fifteen years to live, telling and retelling these stories as my sense of myself and my experience deepened. Theater is the perfect medium for conveying that idea of retelling and rewriting, because it is a medium that is based in repetition, first in rehearsal and then in performance. For that reason, it is important that any production of *Afterward* be faithful to the time involved in making it, rather than try to erase that time by creating the illusion that these are stories that can be told right on the first try, as performing it myself or casting it with a single actor might suggest.

PRELUDE (to be performed as the audience enters):

*A luxury apartment.*

*Floor to ceiling windows look out on The City, except for one which is covered in blue plastic.*

*The apartment is full of sleek, expensive furniture and appliances.*

*Nothing looks like it has been used especially heavily, except that a number of the items seem to have been rather spectacularly broken.*

*For example, the coffee table is broken in half as though a person fell on it and the door of the expensive looking refrigerator is hanging off its hinges.*

*There is a tasteful collection of fine art from around the world including a very famous painting which appears to have been shot or impaled.*

*THE HOUSEKEEPER enters through the front door of the apartment somewhere upstage.*

*She surveys the damage and makes a number of phone calls.*

*She puts classical radio on.*

*She puts broken items into large black trash bags.*

*When she is done, she vacuums glass out of the carpet.*

*The doorbell is ringing. She turns off the vacuum and turns down the radio.*

*She goes to the intercom.*

HOUSEKEEPER

Yes, we're expecting them.

Review their credentials and then send them up the left service elevator.

Thank you, Ömer.

*She props the door open and goes back to vacuuming.*

*A few moments later one of the GLASS PEOPLE sticks his or her head in the door.*

GLASS PERSON ONE

Excuse me.

HOUSEKEEPER

Come on in.

That's the window right there.

*The GLASS PEOPLE wear coveralls, safety goggles, and gloves. They also wear harnesses which they use to harness themselves to a pillar.*

*The GLASS PEOPLE take down the sheet of blue plastic and lay it on the floor by the window.*

*Behind the blue plastic the window is mostly gone.*

*The GLASS PEOPLE then begin removing the shards of broken window from the frame. When they have removed all the glass they remove the putty from the frame with putty knives. When all the putty and glass has been removed they fold up the blue tarp.*

GLASS PERSON TWO

Is it ok to use one of these bags?

HOUSEKEEPER

Yes. Please, go ahead.

*The GLASS PEOPLE put the tarp into one of the black trash bags. Then they go out into the hall and get the new sheet of glass. In order to do that they have to unhook their harnesses from the pillar. They lay the new piece of glass down on the carpet in front of the empty window frame and hook their harnesses to the pillar again. They install the new window using heavy duty suction grips.*

*While the GLASS PEOPLE are working, the HOUSEKEEPER scrubs bloodstains out of the carpet. A new refrigerator is delivered. The same procedure by which the GLASS PEOPLE were let in is used to let in the REFRIGERATOR DELIVERY PERSON. The process is repeated again for a new coffee table.*

*Once the GLASS PEOPLE have left the HOUSEKEEPER repaints the pillar where it has been scuffed by the GLASS PEOPLE's harnesses.*

*Then she gets out a sewing kit and repairs the canvas of the famous painting. When the canvas is replaced, she uses oil paints to restore the painting.*

*By the end of the prelude, the final broken items have been replaced with newer even fancier items and the apartment is like new. The curtain falls.*

I: The Truth

*A dancer does a dance of death.  
All throughout the dance he is dying.  
He knows he is dying but he does not let us know and  
we would not be able to see it anyway because he is  
dancing so well. All the same, his impending  
mortality weighs on the whole dance.*

*SOMEONE ELSE/DANCER clutches a balloon without a  
string. It is an effort that engages the whole body.*

SPEAKER

When I was 11, I was in a car accident.  
Nothing serious. No one was hurt,  
but we were driving home from my grandmother's  
It was raining  
and a guy ran a stop sign and pulled out in front of us.

And,  
in the moment before the crash  
I said  
or my mom said  
or  
we all said

EVERYONE?

"We're going to hit that car."

SPEAKER

We pick the strangest moments to tell the truth  
and the strangest people to tell it to.  
We tell it when it's too late,  
when there's nothing to be done about it.  
We tell it to people who can't possibly understand  
or to people who don't want to listen

I'm not talking about everyday truths  
like, "That hat looks stupid on you."  
or confessions  
like  
"I'm cheating on you"  
or  
"I was the one who robbed the Isabella Stewart Gardner  
Museum on March 18th, 1990,"  
though I think maybe the same still holds.



I'm talking about core truths.  
Truths we carry around with us every day.  
Personal truths.  
Truths that scare us.  
Truths we want so badly to tell, but can't  
or think we shouldn't.

We go around everyday spending an incredible amount of  
energy clutching onto these truths.  
Keeping them safe.  
And maybe that's why  
when our guard is down  
or we're too tired  
or surprised  
(and sometime we surprise ourselves)  
to keep it up  
we let down the facade  
let out the truth

SOMEONE ELSE/DANCER  
I'm so scared.

SPEAKER  
and let it fly.  
(and maybe,  
for a moment as we watch it float away  
watch it shrink in mute obedience to the laws of  
perspective  
we may imagine for a nanosecond  
that it is not ours  
that we will not have to carry it any  
more, that maybe

Around the time of his death, I kept reading that at what  
would be his last Sundance, someone who didn't recognize  
him asked Philip Seymour Hoffman what he did.

PHILIP SEYMOUR HOFFMAN  
I'm a heroin addict.

*SOMEONE ELSE releases the balloon.  
watches it go.*

SPEAKER  
The truth.

The truth as he knew it, As he felt it in those last days or maybe always.

The truth, told to someone who would dismiss it as a wry, self-deprecating remark, or dark humor, told to someone who didn't even know who he was and who, only a few weeks later, after Hoffman died would recall the encounter to reporters who would include it in accounts of the actor's last days where it would sit poetically and tragically, a foreshadowing of an inevitable demise.

He could only tell such a truth to such a person, a total stranger, someone who wouldn't know what it meant until it was too late.

My freshman year of college there were these two guys, roommates, juniors, who were legends on the ultimate frisbee team. They seldom played, but they were the life of all the parties. They were abroad that fall, but their auras loomed large.

Flash forward to the first party of the spring and there they are. I haven't met them yet, because they don't come to practice. So I walked up to Peter Gardener and said, "Hi, I'm Peter Gardener, you must be McFeely Sam Goodman."

It took him a second, but he got a kick out of that. And I liked the look of surprise that flashed across his face. It made me feel like I had a little power over this Big Man on Campus.

Months later, we were sitting with our trays on the lawn behind the dining hall, eating with some mutual friends. I still didn't know him that well. Peter asked me what my summer plans were. I told him that I had an internship at a CBS radio station. He asked me how I had landed that and instead of telling him "A friend of a friend" as I had been telling people, I told him the truth:

McFEELY SAM GOODMAN

It's through Hope and Heroes.  
It's an organization for kids who have cancer.  
When I was twelve I had cancer.

SPEAKER

I was still a little intimidated by him and I wanted to prove to myself that I could still knock him off balance.

But this time I didn't enjoy the look on his face.

*DEATH takes a bowling ball and throws it at the dancer who even though he knows that this is how the dance ends cannot get out of the way.*

*The bowling ball hits the DANCER and he dies.*

*The SPEAKER dances with DEATH. Unlike the DANCER, the speaker is afraid of death so he dances clumsily and keeps stepping on DEATH's toes.*

II: Borrowed Time

*Two clocks or an hourglass and a clock or two hourglasses or any two (or more) timekeeping devices dance a dance which expresses what it is to be borrowed by Jimmy Buffett and spent frivolously.*

*Or else Jimmy Buffett dances in a carefree fashion with a clock.*

*Or a clock, alone on a Jimmy Buffett-themed cruise, dances with a taxi-dancer who may or may not be a clock.*

SPEAKER

In August [2013], when Philip Seymour Hoffman was still alive and I was in a hospital bed recovering from a thyroidectomy, I read a short piece (350 words) on Jimmy Buffett in Rolling Stone in which he said, quote

JIMMY BUFFETT

I've dodged a few bullets, between plane crashes and being shot at in Jamaica, so I'm on borrowed time anyway.

SPEAKER

Borrowed time.

Since I was twelve, I've thought of myself as a survivor. If I could handle cancer, I could handle anything. It didn't make things easy; having cancer wasn't easy, but it

gave me incredible inner self-confidence. And as that self-confidence grew and as I began to have successes in life, as things started to fall into place for me and the years passed it became more and more easy for me to imagine that surviving cancer had not only made me tough, it had made me invincible. At twelve, I had faced down a disease which most people use as a shorthand for death and I had come out on top. I had won. I had survived. Sure, it was possible for a person to have cancer more than once, but what were the odds? I figured I was safe for at least another forty or fifty years.

And I lived with that confidence, that feeling of security for about twelve years.

And then this happened:

During a routine check-up at the Center for survivor wellness, a check-up so routine that even my parents (who take the sort of obsessive interest in my health that parents take when their son is diagnosed with cancer when he's twelve) don't come with me anymore, so routine that they're even starting to suggest that maybe I don't need to go, that an annual check-up with my Primary Care Physician is enough so long as I stay in touch with the CSW and come back in twenty years for a celebratory round of scans, during this routine check-up my doctor, who is not the doctor who treated my cancer (that doctor is off treating kids who have cancer, which, after all, is what the Department of Pediatric Oncology is really for), this doctor, whom I've been seeing for a few years, who sees long-term survivors, this doctor finds a nodule on my thyroid.

Long story short, the nodule turns out to be a lot of nodules, turns out to be what two endocrinologists agree is a "funky"-(that's the word they use, I swear) looking thyroid, which turns out to be even more funky-looking in person when the endo-surgeon gets a good look at it with his own two eyes under the bright, white lights of the operating theatre, as they call it.

Conclusion: it's got to go. Turns out a thyroid is easily replaced with a little pill taken every morning and after a couple months of fiddling with the dose, I won't even miss my funky old human tissue thyroid.

So, that's that. Out the thyroid comes. On further inspection, there's no cancer, just a lot of funky scar tissue.

But, as I lie in the recovery room, reading the 350 word piece on Jimmy Buffett, another way of looking at being a survivor makes its way into my anesthesia-addled brain. Maybe, not dying of cancer doesn't make you invincible. Maybe it just makes you not dead. Maybe, in fact, it makes you weaker; it was the radiation they used to treat the cancer in the lymph-nodes in my neck that put the funk in my thyroid in the first place. Maybe every twelve or thirteen years something like this will happen, until one day I don't survive. Maybe, I am living on borrowed time.

And that scares the shit out of me. And so, I do what I do with things that scare me, I try to think my way through the fear. And so, I ask myself,

#### ACADEMIC SAM

What do we mean when we say that one is living on borrowed time? Whom do we imagine that time is borrowed from? God? The Grim Reaper? In which case, aren't we all just borrowing time?

#### YET ANOTHER SAM

And when you think about it, isn't borrowing time like borrowing eggs, or sugar, or thyme with an h and a y, in that you can't give it back, can you? You borrow it and you use it up.

#### SPEAKER

But, actually, in the moment, I don't try to ask any of those questions. Those come later, as I try to make sense of my fear and to figure out why it hasn't quite gone away.

Lying there in the hospital bed, the only question I ask myself is how it came to be that Jimmy Buffett and I are both living on borrowed time.

Interlude: Costumes

*CLAIRE Kent (The Incredible Human) and  
WONDERFISH.*

*CLAIRE is finishing sewing her costume.*

*(either the actor who plays Claire is talking to  
a crude fish head on a stick while the actor who  
voices WONDERFISH does the voice in a recording  
studio or the actor who plays WONDERFISH is  
wearing a motion capture suit.)*

WONDERFISH

Come on.  
Just a cape.

CLAIRE

A cape is not aquadynamic.

WONDERFISH

We're going to mostly be fighting crime on land  
anyway.

CLAIRE

Look I don't why you're making such a big deal about  
having a costume.

WONDERFISH

You get a costume,  
it just seems fair.

CLAIRE

I need a costume to disguise my identity.  
Plus a uniform lends authority.

WONDERFISH

What about my identity?  
What about my authority?

CLAIRE

Look, I've got this extra scrap,  
I'll make you a mask.  
You'll look like a ninja turtle.

WONDERFISH  
Awesome.

*WONDERFISH starts karate chopping around.*

I need some nunchucks.

CLAIRE  
I told you, no weapons.  
That's a surefire way to get yourself hurt.

WONDERFISH  
Please.  
Can I just have one nunchuck?

CLAIRE  
First of all, no.  
Second of all, what are you going to do with one  
nunchuck? The whole point is that there are two that  
are connected so that you can swing them around.

WONDERFISH  
Ok, you convinced me.  
I want two nunchucks.

CLAIRE  
I said no.

WONDERFISH  
Ok, well then I want pants.

CLAIRE  
Fish don't wear pants.

WONDERFISH  
Most fish don't have legs.

CLAIRE  
You don't need pants.  
The Ninja Turtles don't wear pants.

WONDERFISH  
Yeah, but the Ninja Turtles have nunchucks.

CLAIRE  
Just Mikey.

WONDERFISH  
And pizza.

CLAIRE  
You want a pizza?  
I'll get pizza.

WONDERFISH  
With extra pepperoni.

*laugh track.*

III. (Super)human

*A young woman (CLAIRE KENT) and her loyal pet, a three-eyed fish, perform a dance about how youth is fleeting and life is full of surprises and challenges.*

*It is also a dance about fighting crime with your best friend (who is a fish) and playing Division I football and then having to move home to bag groceries in a town where no one understands you anymore.*

*It is a dance about making NCAA history and losing everything you thought was important to you in the blink of an eye but still having to get up every morning.*

SPEAKER  
I was going to write a screenplay about my experience.

It was going to be about a young woman who grows up in a small town built on a toxic waste dump.

And as a result of growing up on a toxic waste dump, this young woman develops superhuman strength and superhuman speed and so, at night, she sneaks out of her bedroom window and fights crime. And she puts her super speed and super strength to use during the day playing football. And she earns a D-I football scholarship and she's the first person from her family to go to college.

But then, in the spring of her freshman year, she gets cancer, also from the toxic waste dump she grew up on. She has chemo and radiation and it works and she beats cancer,



but the chemo and radiation take away her superpowers and without them she loses her football scholarship and she has to go back home to her small town where now everyone else has cancer too, but no superpowers, so they don't really understand what she's complaining about; after all she survived cancer; and she takes a job bagging groceries at the local supermarket.

The movie was going to be called (Super)human, but with the "super" in parentheses, like (Super)human.

*makes finger parentheses.*

But then I realized that I'm not from a small town and I never played football unless you count flag or two-hand-touch. And I graduated college and besides I had cancer when I was twelve, not nineteen and I didn't get it from growing up on a toxic waste dump, I got it from—well, no one really seems to know, which, believe it or not, is the case for most people, it's not all smokers and kids whose mom sat too close to the microwave when they were pregnant, and honestly, I bet if there are people out there with superpowers it's probably the same for them too, like when people are like "So, did you get bit by a radioactive spider or something," they're like, actually, for every Peter Parker there's someone like me who just woke up a little different than the day before and maybe didn't even notice right away. So I didn't write that screenplay and eventually I wrote this instead.

IV: Table of Contents in No Particular Order

*A sort of dance overture of the entire piece is performed.*

SPEAKER

A lot of this is going to be about what happened a couple years ago, and not about what happened when I was twelve.

There are a couple reasons for that.

The first is that I think it's easier for me to explain the impact of what happened when I was twelve in the context of what happened two years ago and maybe also that I think I've

come to understand what happened to me when I was twelve,  
and what its impact has been on me  
emotionally and physically  
as an adult,  
better  
through the experience that I had two years ago when the  
doctor at the CSW found a nodule on my thyroid.  
(At this point when I go to the Center for Survivor  
Wellness, what they're looking for is not a recurrence of  
my cancer that I had when I was twelve. What they're  
looking for are long term side-effects of my treatment,  
so that's what we're talking about here,  
essentially,  
are long-term side effects.  
This is the story of an experience told through its side-  
effects.)

But, the other big reason that a lot of this is going to be  
about two years ago when I had my thyroid removed is  
that at this point,  
fifteen years later,  
there are a lot of the facts  
about having cancer when I was twelve  
that I don't remember,  
partly because it was fifteen years ago  
and partly, maybe, because I was on a lot of drugs,  
and maybe also because it wasn't something I particularly  
wanted to remember,  
I don't know.  
I don't really have anything to compare it to.  
How much do you remember from when you were twelve?

My dad is in charge of most of the remembering.  
He was the one who stayed on top of all the the medical  
information we were getting.  
I was too young and I didn't really want to think too hard  
about what was going on.  
My mom, like me, preferred not to know the details.  
It was easier for her to deal that way.  
But my dad was always full of questions for the doctors.  
Not doubts, never challenges, just really genuine  
curiosity. That was his way of coping; he wanted to  
understand exactly what was going on.  
He asked so many questions we used to joke that he was  
going to go to med school.

So, I could ask him  
and my mom  
to help me fill in some of the blanks,  
but that seems a little beside the point.  
Because the point of all this,  
I think,  
beyond satisfying your curiosity,  
is to try to impart to you  
to convey in some way  
the mark that this experience left  
on my development,  
on who I am  
today  
and on the things that came later.  
So, to that end,  
it seems like what matters  
is not so much What Happened,  
but what I remember happening.

So,  
then,  
here are some things I remember:

The cannolis  
Eric Lindros's concussion  
the ball machine  
the parking lot attendant who prayed for every family as  
they drove into the parking complex  
sitting outside Au Bon Pain and asking my dad if I was  
going to die  
that Au Bon Pain in general  
the fruit woman  
the missed-physical list  
mango and Doonesberry sorbet  
a McDonald's hamburger to loosen the bowels for the Gallium  
scan  
laughing so hard at the Marx Brothers that they couldn't do  
the Gallium Scan  
Not laughing at all at the Marx Brothers  
my brother's foam monkey on a stick  
care packages (a Game Boy, books-on-tape, too many stuffed  
animals)  
a white pizza with broccoli  
Lawrence of Arabia in black and white  
fantasy baseball  
that car knocking over the scaffolding

the radiation mask and the tattoos  
the men with prostate cancer in the radiation waiting room  
the howling roommate  
Goofy painted on the wall somewhere  
fruit punch and the CAT scan  
and later:  
a Korean PET scan technician who had learned English from a  
Russian PET scan technician and so had a Boris and Natasha  
Russian accent.

V: Three Roommates

*This movement is an elaborately choreographed fight sequence.*

*Maybe we see this, maybe it's behind the curtain, in the apartment the housekeeper was cleaning. Maybe we see it on a soundstage with green screens and the apartment will be edited in later.*

*Claire Kent, A.K.A. The Incredible Human, is fighting The Surfactant, a scaly villain who served as the CEO of Bridge Innovations, formerly Bridge Chemical, until he drank water from the creek behind Claire's house during a live press conference in order to prove that the chemicals his company was pouring into the creek weren't harmful to humans.*

*This is the first fight scene after Claire loses her powers. But Claire doesn't know that yet.*

*The fight goes badly for Claire.*

*This is about something that used to come easily suddenly becoming impossibly hard.*

*This is about a strength becoming a weakness.*

*This is the scene in the movie where the hero is hurt so badly we think that surely there can be no coming back.*

--

*Maybe there is another fight scene at the end of the movie where Claire fights The Surfactant again, as*

*Claire, not The Incredible Human, without her powers,  
but stronger now.*

*or maybe she fights him in court instead.*

*or maybe after Claire and the rest of the town beat  
Bridge Innovations in court, Frog-Woman goes and kicks  
The Surfactant's ass as a sort of coda or visual  
metaphor for the legal victory.*

SPEAKER

Ok, so most of these stories,  
believe it or not,  
are funny stories,  
not all happy stories,  
but funny stories, ok?  
My family's way of dealing with things that are hard has  
always been to laugh at them,  
so I guess those are the things that stand out fifteen  
years later,  
are the things we laughed at.

This one is not a funny story,  
I mean,  
it's ok if you laugh,  
different people find different things funny.  
But to me, this is not a funny story.  
To me, this is a story about pain,  
maybe.

At CHOP,  
Children's hospital of Philadelphia,  
where I started my treatment  
I was in-patient for my chemo  
not impatient, obviously  
but in-patient as in not out-patient  
as in I slept over at the hospital,  
but maybe you knew that  
you probably knew what I was saying as soon as I started  
enunciating,  
maybe even before that.

So anyway, at CHOP I was in-patient,  
later at Columbia Presbyterian I was out-patient  
I would come Friday after school for my first dose

and then go home and come back Saturday morning for the second dose, but at CHOP I would stay the night and this is the story of my first night at the hospital. There are other stories from this night but this one is about my roommate and it connects to two other stories about roommates one of which, maybe you'll find funnier.

On that first night  
at CHOP  
in that first room,  
I had a roommate.  
I don't think he was there when we first got there,  
he was off somewhere having some procedure done  
or maybe he was there but he was sleeping  
but at some point he came back  
or woke up

And it turned out that my roommate  
in this first room, on my first night at CHOP  
in addition to whatever he was being treated for  
there at Children's Hospital of Philadelphia,  
had some sort of  
developmental disorder  
I think would be the correct term  
or cognitive disorder  
whatever it was, and far be it from 12-year-old me to  
diagnose this kid,  
in retrospect,  
through what we've already established is the very hazy and  
perhaps semi-repressed fog of memory,  
anyway,  
my roommate,  
from beyond the cursory privacy curtain that separates our  
two beds,  
is HOWLING  
I mean really existentially howling,  
while his mother tries to calm him down, without success,  
from pretty much the moment he enters the room  
or wakes up  
until my parents manage to get me transferred to a private  
room, ostensibly so that I can get some sleep,  
but really, I suspect, because, when it comes down to it,  
this kid, my roommate, is really just giving voice to the  
existential howl that we are all feeling, we and everyone  
else who has ever had occasion to patronize a

children's hospital,  
which, let's face it,  
like a late-term abortion or a handgun,  
depending on your politics,  
is something that you're probably glad is available to you,  
but which you pray to the deity or higher power of choice  
you won't ever have to use.  
And having to share a room with this howling human being is  
probably making the whole thing a little too real for my  
parents and so they ask if there are any private rooms  
available and it turns out that there are.

Jump forward now approximately thirteen years.  
I am at Columbia Presbyterian Hospital  
now called New York Presbyterian Hospital.  
I have just had my freakishly funky thyroid removed. My  
thyroid has, as I said earlier, turned out to be even more  
gnarly than ultrasound and biopsy had previously indicated  
and so it has taken more than three hours to excise and as  
a result, rather than being released on my own recognizance  
to recuperate on my own, my surgeon has strongly  
recommended that I spend the night in the hospital.

And so I find myself in another double occupancy hospital  
room. Unlike my first room at CHOP, which came equipped,  
as, to my knowledge, all rooms at CHOP did in the year  
2000, with a Playstation, this room is for grownups and so  
in lieu of a Playstation, my room has an auto-inflating  
bed, which undulates every five minutes like clockwork to  
prevent bedsores. We are told that it cannot be turned off  
as this will deflate the bed entirely.

On the other side of the perfunctory privacy curtain, is  
Hector. I am too terrified to look at Hector, even when I  
get up to use our shared bathroom, but I imagine from the  
sounds that emanate from his side of the curtain  
alternately that he has been in a really horrendous  
motorcycle accident or that he has some sort of genetic  
bubble-boy type chronic illness. Whatever he has, the  
treatment for it involves a constant sound of water  
bubbling coupled with a Darth Vader breathing sound I  
assume is coming from Hector.

That this hospital room bears a psychic resemblance to the  
series of hospital rooms in which my grandmother died less  
than a year earlier does not help to alleviate my sense

that in my surgery-weakened state I will catch any number of illnesses that I know from my online reading hospitals are positively crawling with and die.

Adding to my uneasiness is the fact that my nurse keeps dropping things on the ground, which I have to think invalidates their sterility.

I am still under the lingering effects of the anesthesia which seems to leave me irritable and paranoid and, quite possibly for the first time in my life, I think I am really worried that I might die.

I want to emphasize at this point in the story that in the moment I am describing I am in no real physical danger. I do not have cancer or any other life-threatening condition. In fact, preoperative testing, which is usually reserved for geriatrics, but which my surgeon insisted on because of my medical history, shows me to be remarkably healthy. I am recovering from routine surgery (incidentally, as I am writing this I google "routine surgery" to make sure that's the correct term and the first four hits link to articles attributing the death of Joan Rivers to the hidden dangers of quote unquote routine surgery. The fifth is the Wikipedia entry for surgery and the sixth lists what the editors of Cracked.com consider the worst routine surgery horror stories, almost all of which involve penises.) I've gotten way off track, but the point that I was trying to make is that in that moment, in that hospital room on that bed which keeps inflating and deflating in different places, I am in relatively little mortal danger. Yes, hospitals are incubators for disease, but I have made approximately one million visits to this and other hospitals since I was twelve and while I may feel weak post-surgery, I am far less immunocompromised than I was for many of those visits. It is also true that hospitals for grown-ups in the U.S., sans slushie machines and Playstations, are probably among the least hospitable places you can find yourself and so a lousy place to feel vulnerable, but I'll have to write another play about the travesty that is hospital care in the United States of America, because I'm getting away from the point I'm trying to make here,

which is  
that all this



all this fear that I'm feeling in this shared hospital  
room,  
this mortal dread,  
is mental,

which is something that takes me a long time to recognize.  
Even as my parents and I are cracking jokes about being  
traumatized, I remain convinced, on a general core psychic  
level that I am physically not well, convinced that I have  
been irreparably physically damaged by my cancer treatment  
and now further damaged by this thyroid surgery. It  
probably doesn't help that when I look in the mirror it  
looks like I have survived a beheading.

(For those of you, like me before this experience, who are  
not totally sure where the thyroid is, it's right here:

*points to neck.*

I mean, not mine, obviously, but if you still have your  
thyroid, that's where it is, so when everyone around you  
chuckled at the beheading joke, that's why.)

And I remain convinced that I have been permanently  
physically weakened for several months. I am still feeling  
that way to some degree in February, when Philip Seymour  
Hoffman dies and I keep reading that quotation from  
Sundance and again can't quite help feeling that there are  
some of us,  
Phil, Jimmy Buffett,  
and I,  
who go through life as marked men,  
carrying our death sentences like

Contributing to this feeling is the fact that during this  
period the doctors are still trying to find the correct  
level of thyroid replacement drug. These changes are  
matters of tens of micrograms. A microgram is a millionth  
of a gram, that's how minute the differences are between  
doses, but the effects on either end can include weight  
loss or gain, irregular heartbeat, trouble regulating body  
temperature, hair loss, and fatigue. Nearly all of those  
symptoms are also associated with another condition which I  
am also experiencing during this period, namely, starting  
grad school.

And starting grad school coupled with the actual physical recuperation from surgery coupled with this feeling that, in spite of a battery of tests having told me the opposite, I am weak and vulnerable coupled with some pretty standard millennial angst at having graduated college into a horrendous job market, leaves me feeling that I am on the verge of complete and total failure, academic failure, career failure, organ failure, failure at life, not in the current common colloquial sense, but in the literal sense.

Until a combination of a new therapist and my primary care physician (whom at this point I believe to be an OBGYN by training, though I have since been corrected), until my therapist and my doctor convince me that what I'm feeling is normal for someone in my position and will, in fact, get better.

I want,  
at this point,  
to come clean about something,  
something that I think will really help to emphasize the degree to which, as I am slowly coming to recognize, the major relevant medical event in my life may not be pediatric Hodgkin's Lymphoma, but the psychological trauma caused by my pediatric Hodgkin's Lymphoma, or at least that the two deserve a shared billing.

And what really brings this all home  
is that, as it so happens,  
this story,  
the first part of it,  
the story of the Howling Roommate,  
is in fact not true,  
as in, not just misremembered, but kept in the piece even though I now know better. My parents, who came to a reading of this play in December, told me afterward that this story is not true,  
that my roommate, Evan was his name,  
did not have a developmental disorder,  
but was 7 and just having a good old fashioned bad time.  
And that furthermore, he was my roommate not on my first night in the hospital, but during my second stay.

You know what,  
I'm sorry.

I can't do this.

Because I hate when plays jerk their audiences around.

It's a major pet peeve of mine.

So I'm just going to come clean,

and let you know that my parents have not seen this show.

Or they haven't as of the moment that I'm writing this.

It's possible that they're in the audience right now;

look around, if you see a guy who looks like me, but with less hair, that's my dad.

Or maybe they were here last night;

the point is that the story of them coming and correcting me, which is the only piece of out-and-out fiction in this piece (beyond a couple scenes I've thrown in from my abandoned superhero cancer screenplay)

is in here not because it happened, but because as I sit here writing this it occurs to me that it might happen,

that any piece of it, especially the pieces drawn from my experience a decade and a half ago, might prove to be

wrong, incorrect, misremembered, and then what does that do

for this story I'm telling you, what is the story of Hector

and the bionic percolator without the story of the Howling Roommate to set it up?

I promise that this won't be a programmatic feature of this piece, jerking you around or trying to muddle your sense of fact and fiction to try to disorient you into thinking that this piece is more profound than it is.

But I'm doing it now, just this once

because I think it makes my point very nicely

which is, that even if some of this,

this story of the Howling Roommate, for example,

is not completely factually correct (which again, I have no real reason to expect except that it happened a long time

ago), it doesn't make this all less true. That in fact,

it's actually an even better story if it's not factually

correct—if I've completely fabricated this story of Evan or

whatever his name was, if in my memory I've created this

howling roommate to give voice to my own twelve-year-old

existential howl—because it paints an even deeper picture

of the trauma that lay dormant more or less in my own

psyche from the end of the year two-thousand to August of

twenty-thirteen.

But now, having made that point, in the interest of trying to salvage any chance I have left of holding onto your

goodwill, I'm going to promise you that from here on out,  
there will be no more post-postmodern funny business. From  
here on out everything in this piece is as I think I  
remember it,  
Deal?

Interlude:        PET Scan

*CLAIRE KENT is getting a PET scan. She wears a  
hospital gown.*

*The Nuclear Medicine TECHNICIAN has a Boris-and-  
Natasha Russian accent.*

TECHNICIAN  
Do you want a beer?

CLAIRE  
*(groggy)*  
Huh?

TECHNICIAN  
A beer?

*She holds up a stuffed animal in a PET scan t-shirt.*

We hev for children. To keep calm in machine. And walium.

CLAIRE  
Oh, no, thank you. But, uh, they, I took a valium.

TECHNICIAN  
You hev to stay wery still.  
For picture.  
Otherwise, blurry like rainy day.

CLAIRE  
Yeah.

*later.*

CLAIRE  
You know what,  
could I?  
I think I'd like a bear.

TECHNICIAN  
You want a beer?

CLAIRE  
Uh, yes, please.

TECHNICIAN  
What kind you want?  
We hev tiger beer and lion beer.

CLAIRE  
Do you have a, uh, bear beer  
uh, bear bear?

TECHNICIAN  
Beer beer I think we are out.

CLAIRE  
That's ok.

TECHNICIAN  
I go check.

*exits.*

CLAIRE  
It's ok. A, uh, lion bear is fine.  
I don't even really need-

TECHNICIAN  
Here. I found.  
Your lucky day.  
Last one.

*The bear bear looks like it has been discovered under something. It is very dusty and might be missing an eye or an arm or an ear or something. And yet there's something endearing about it.*

CLAIRE  
Thanks.

TECHNICIAN  
Ok, lie down.  
You bring CD?

CLAIRE  
Sorry?

TECHNICIAN  
To listen during scan.

CLAIRE  
Oh, uh, no. I didn't know.

TECHNICIAN  
No problem. I have plenty.

CLAIRE  
Oh, uh, no. It's fine. I don't mind it quiet.

TECHNICIAN  
No, is much better with music.

CLAIRE  
No, it's ok.

TECHNICIAN  
Here is a good one.  
*Una Mattina* by Ludovico Einaudi.

*CLAIRE lies down on the PET scan machine holding the bear bear.*

CLAIRE  
This is actually  
This is really beautiful.

*Ludovico Einaudi comes out and plays the piano.  
The Nuclear Medicine TECHNICIAN dances.*

VI: The Cannoli

*A dance in which the dropping of an Italian pastry comes to stand in for the sum total of life's disappointments and challenges.*

SPEAKER  
I first thought to write a book about my experience about five years ago. I mean, the idea had always been there, of course. I've been writing plays on and off for over ten years. I also used to draw cartoons, so there was a time I

though I might tell the story as a graphic novel. But the timing never really felt right.

But, about five years ago, as I was approaching my impending college graduation and, like Dustin Hoffman says, worried about my future, it seemed like maybe the time had come.

I was in therapy and starting to work out some of the mark that being a cancer survivor had left on me and also working through some of that anxiety about what would come next and I thought maybe I could kill two birds with one stone.

I would write a series of vignettes about my experience. Maybe it would start out as a blog and end up a self-published book on Amazon. I'd put my writing skills to good use, people would buy it (people love stories about survivors) and I'd make a little money, build my resume, get my name out there, and give myself a foundation to build my post-college life on.

The first story, of course, would have to be the cannolis.

Around the time I was being diagnosed, and later when we were meeting new doctors, my parents and I would be asked if I had had any symptoms that had alerted us to the cancer.

(There are few enough cases of a lot of these cancers and I happened to be young to have the kind of cancer I had, so that pretty much every doctor I meet is curious to learn as much as he or she can about the details of my particular case.)

But we would say, no, that until the doctor in the school nurse's office noticed the lump on my neck, there had been no clues, no symptoms.

And then someone (at first it was usually my dad) would say, well, except for the cannoli.

Here's the story of the cannoli.

My dad had been in New York, maybe for work or maybe looking at apartments—we were getting ready to move, and he

had brought home cannolis which we had eaten out on the deck after dinner. Except that I didn't finish mine, which my dad would tell the doctor was unusual, but not as unusual as what happened next. My dad told me that if I didn't want to finish my cannoli, I could put it in the fridge. The door in from the porch was actually two doors, one glass and one screen door, and in the process of opening the second door while holding open the first, I dropped my cannoli.

And instead of dusting it off and putting it in the fridge, I threw it out. That's the part that my dad jestingly suggests is so uncharacteristic of me.

I can't tell you why I didn't finish the cannoli; I don't remember eating it at all. But what I can tell you is why I threw it away. My memory of the actual throwing away is hazy, but the feeling in the moment that I dropped the cannoli is still clear fifteen years later. It was a feeling of pure, frustrated petulance. In that moment, there was no gray area which would have allowed for the dusting off of the cannoli. Having fallen, it was ruined and the only thing to do with it was to throw it away. I didn't really believe that, but in that moment I needed it to be true. This is a feeling which I remember recurring in my childhood and which I still occasionally feel. The need for the reality of an experience to match how bad I felt. Rather than adjusting the perhaps unwarranted feeling of frustration and shame at having dropped the cannoli, I adjusted the incident itself, making it worse to match the feeling, throwing the cannoli away rather than saving it.

Retelling the story now, the combination of lack of appetite and the fatalistic gloom in the face of cannoli accident seem to suggest a particular diagnosis, not cancer, but depression. Was I depressed? If I was, it's probably not of diagnostic significance or I have to think one of the many doctors to whom we have told this story would have remarked on that possibility.

With all this talk of diagnosis, you're probably starting to get curious about what the story is with that. If I didn't have symptoms, how was I diagnosed?

Short answer: Total fucking accident.



Here's what happened:

To be enrolled in public school in Princeton, New Jersey, you had to have a physical once a year. That's probably true most places. And so, in order to make sure that all the kids at John Witherspoon Middle School had their physicals, someone's mom who was a doctor had volunteered to set up shop in the nurse's office to see all the kids who for one reason or another hadn't had their physicals.

I had had my physical, or at least I had an appointment to have a physical. I think it was an insurance thing. The insurance would only pay for a physical every 12 months and after somehow having had my physical late the year before, I couldn't have another until after the school deadline. Anyhow, my mom had written a letter to the school to that effect. But, somehow, I ended up on the list of kids who needed physicals. So, I waited in line and when it was my turn I went into the back room of the nurse's office and was examined by the doctor, who asked me

DOCTOR

Do you always tilt your head to the side like that?

SPEAKER

I did. I mean, I didn't think much of it, but I did. I still do, sometimes, but she said, try straightening it. And I did, and she felt my neck, and she said, there's a bump here, on the right side and maybe that's why you're tilting your head to the left and I think just to be safe you'd better have it checked out. And I said, sure, and I went to lunch.

And at lunch, I joked with my friends that I had a weird bump on my neck and David Giancola said that the doctor said that he had some sort of heart murmur and I said, I wasn't even supposed to be on the list anyway. I'm having my real physical in two weeks. And we laughed and agreed that David and I were probably fine and that the doctor was a quack and we finished our lunch and went to recess.

After what happened, I used to wonder about David Giancola and his heart murmur. I looked him up recently and he's on Facebook, so whatever it was, if it was anything, he survived, too. And I wonder if he remembers that lunch the

way I do and whether when the word spread that I had cancer after I stopped going to school, he or any of our friends made the connection between that lunch and my bump and my sudden absence. I also wonder, somewhat perversely, what everyone at school must have thought when I didn't come back the next year (my close friends' parents would have known we moved, I guess).

The doctor called my parents to tell them what she'd told me and my parents mentioned what I may or may not have, which was that we'd been in a car accident a few months earlier, driving home from Passover Seder at my grandmother's and could it be that? Whiplash or something? And the doctor said that she thought it could and that probably I should have some scans.

And so we drove (on a school day!) to some office park (I remember there being some issue concerning my actual doctor, but I couldn't tell you what) and I had some scans and I remember the doctor who did them showing them to my parents and me, but I don't remember the conclusion and I don't remember if the c word was spoken then. But we went to Children's Hospital in Philadelphia for further tests, none of which I remember (except for a conversation with Dr. Brodeur looking at an X-ray, which must have come later). What I remember from that first day in Philadelphia is sitting in the sun outside of Au Bon Pain, an Au Bon Pain that we would spend a fair amount of time in over the next few months and

Oh, shit

whew

I have told this story so,

so many times

in the most matter of fact way,

but as I sit here

at my computer

typing it up fifteen years later

I can't seem to get through it without crying.

I remember sitting in the sun outside Au Bon Pain and my dad saying to me that I had cancer and me asking him

McFEELY SAM GOODMAN

Am I going to die?

SPEAKER

And him saying, No, the doctors don't think so.

And we all cried and it might have been the first time I saw my dad cry, but it wouldn't be the last.

And that was it for me. I asked if I was going to die and my dad said no and that was all I needed to know.

At twelve years old I was willing to take my parents' and doctors' word for it and I honestly do not think that I ever doubted that I would survive.

I cannot imagine that my parents were so blissfully naive.

I'm not saying that having cancer didn't suck. It did. Chemo is not fun. I had a tube called a Broviac Catheter put into my chest, just above my heart, so that they could pump medicine into me without having to use an IV every time. I lived with that thing in my chest for over six months.

But I never thought I would die. I took it for granted that if I showed up to the hospital and did the chemo and the radiation I would survive. So, that's what I did and when the doctor said stick out your tongue and say, ahhh, you bet I stuck my tongue out as far as anyone ever did.

And it worked and I lived, but it created this idea in the back of my mind that was probably encouraged to some degree by my doctors and my parents that I had somehow beaten cancer through hard work. Which is just not true.

The truth is I was lucky. The truth is I had great doctors, great nurses, at great hospitals and they were lucky. The truth is they were lucky in my case and probably not lucky in other cases. The truth is that maybe my pediatrician would have noticed the lump the same way the doctor at school did, but maybe he wouldn't have. The truth is that I had Stage IV Hodgkin's Lymphoma and Stage IV is the last stage. The truth is that I survived and I felt like I worked for it and so when that endocrine surgeon told me that the chances that my thyroid nodules were cancer were so high that he wanted to take out my thyroid sight unseen, it rocked my world.

And the reason that a month later, one thyroid lighter, I still felt like I was not ok was that I hadn't really had to work for it this time. The surgeon had done most of the hard work during those three hours I was under anesthesia. Without having put in the work, I didn't really feel like I was better. In fact, it took at least six month after my surgery for me to start to feel like I was ok again, as long as my treatment for the original cancer.

And there I go again, calling it my original cancer. Because, the fact is, I only had cancer once, when I was twelve years old. What happened two years ago is that I had my thyroid removed because it was weird looking and there might have been cancer. In the end, tucked into one of those thyroid nodules was 2.5 millimeters of cancer in quote "greatest dimension," which I guess means smaller or "less great" in all other dimensions (this is one of those linguistic ironies like how a "negative result" on a biopsy is good news, because of course when it comes to cancer "less great" is great news). Less than three is what they call a microcarcinoma. But that's if they find it when it's still inside of you. When they find it in the funky blob of tissue that used to be your thyroid they don't even really consider you to have had cancer at all—I guess it's like drug possession, if they don't find it on you, you never had it. But it felt like I was more scared for my health in those two weeks leading up to the surgery and in the months that followed than I was in the whole time I was being treated for cancer.

And so I told myself and I told other people that I had survived cancer twice now. Once again, I needed the reality of the experience to match how bad it felt.

Interlude: Batman (Not Super)

*FROG-WOMAN and CLAIRE KENT.  
CLAIRE is bagging groceries.*

FROG-WOMAN  
Iron-Man.

CLAIRE  
Crazy rich.  
Genius inventor.

And with an enormous weapons development lab at his disposal.

FROG-WOMAN

Batman.

CLAIRE

Crazy rich.

And again, huge industrial R&D company at his disposal.

I mean those guys basically just buy superpowers.

FROG-WOMAN

Ok, but my point is you can fight crime without superpowers.

You're still in great shape.

In fact, you're probably in better shape in a lot of ways.

CLAIRE

I don't feel like I'm in better shape.

I feel weak.

FROG-WOMAN

Come on. You've been working out like crazy.

I can barely keep up with you.

You're not weak.

CLAIRE

Look,

I'm never going to be as fast as I was.

I'm never going to be as strong as I was.

This is me now

and me now

is never going to be able to do the things I used to be able to do.

FROG-WOMAN

Ok,

But,

I mean

you've got to do something,

right?

I mean you can't just

do

this

Sorry,

I didn't mean

I mean obviously there's nothing wrong with  
if you like  
if you enjoy  
I just  
I just thought

CLAIRE

No, it's ok.  
I guess I'm just not feeling particularly  
Super,  
you know?  
This is feeling more my speed.  
I'm  
taking things slow.  
Working my way back up to full speed,  
whatever that is.  
And right now,  
this feels about right.

FROG-WOMAN

Ok.  
I won't push you.  
But I want you to know  
I'm here.  
When you're ready  
to try a higher speed  
whatever it is,  
I'm here.  
And until then,  
this is going to be my go-to supermarket.

CLAIRE

No, you don't have to  
I mean isn't this way out of your way?

FROG-WOMAN

It's worth it for the markdown on these toaster strudels  
alone.  
I mean, three for five?  
Where am I gonna get that in The City?  
And if I get to see you every day  
all the better, eh?

VII: Neurosis

*A thirteen-year-old Claire runs a race against a slightly older male RUNNER.*

*This dance is actually just a footrace.*

*CLAIRE wins.*

*or,*

*a collection of small worries and gentle warnings grow up playing on a toxic waste dump and transmogrify into stranger more troublesome creatures.*

SPEAKER

While I am in the recovery room the endo-surgeon says two things to me which manage, in my sedated, anesthesia-addled state, to take hold deep in my subconscious and induce intense neurosis for months to come.

The first is to try to avoid coughing for risk of reopening my stitches. In my subconscious mind this mild, fairly obvious short-term warning somehow manages to transmogrify itself into the vague but powerful sense that the common cold may prove fatal or alternately that my surgery or the fact of being a cancer survivor makes me hypersensitive to colds. These things now seem patently absurd, but the fact is that I believe them on a core level for many months following my surgery. In fact, it will turn out that returning to a college campus in the company of first-term graduate students who have forgone sleeping in combination with worrying compulsively about catching a cold makes me hypersensitive to colds. Even this turns out not to have been completely true when it is pointed out to me that the symptoms which I have been attributing to colds are probably the symptoms of the stress of grad school in combination with the stress of believing that I may have contracted a fatal cold.

The second thing the endo-surgeon says to me in the recovery room is to make sure to eat nutritious meals to speed my recovery. This too, in retrospect, could not be more banal, general, doctorly advice. And yet, it too manages to transmute itself into a dire existential imperative and for months I agonize over the the nutritional content of my meals. I should add that I was cooking for myself for only the second extended period in my life. But I should also add that I am, in general, a

very healthful eater, albeit with a weakness for cheese and pasta, and if those two foods made up a slightly higher portion of my diet than they had under my parents' roof, I was still eating more than enough dark leafy vegetables, protein-rich grains and legumes, and fresh fruits to more than satisfy my doctor's offhand admonishment.

Nevertheless, nutrition becomes a fixation for me, especially after an acupuncturist I see once or twice makes the same benign recommendation. I also become a compulsive hand-washer, unhealthful in my pursuit of good health.

Interlude: Running Away from Something

*A sports movie.  
It has an old-timey, "aw shucks" feel,  
like they might go for malteds after,  
but the running clothes are the neon-colored,  
reflective-striped latest thing.  
The RUNNER from the previous scene and his COACH.*

RUNNER

I lost.

COACH

It happens.

RUNNER

To a girl.

COACH

It doesn't matter who.  
The important thing is that you do better next time.  
All you can do is keep working hard.  
Keep improving.

RUNNER

There were TV cameras there,  
weren't there?

COACH

I think so.

RUNNER

For her?



COACH  
I reckon.

RUNNER  
They're saying she's some sort of prodigy,  
aren't they.

COACH  
That's just talk.  
There's a lot that can happen.

RUNNER  
You mean like puberty?

COACH  
Any number of things.

RUNNER  
But she's good.  
Really good, I mean.  
I mean, she beat me.

COACH  
Yes, she's good.

RUNNER  
I just don't understand.  
She's like 14.  
I'm taller,  
I'm stronger,  
and she's a girl.

COACH  
Yes, but she has something you don't.

RUNNER  
What?

COACH  
She has something she's running away from.  
It's impossible to overstate the difference that makes.  
It's not everything, but it's a great deal.  
Human beings,  
we're not made to run for fun.  
When an animal runs, it runs as a matter of life or death.  
It runs to eat. It runs to kill. It runs to survive.

You simply cannot replicate that without motivation. That girl, when she runs, her life depends upon it.

RUNNER

So, when I run,  
I should run like my life depends on it?

COACH

Damnit, son, you're not listening.  
You can't. It can't be done.  
That's not something that can be faked.  
That's the point.  
What she has,  
you either have it or you don't.  
She has a reason to run.  
Maybe some day you will, too—  
for your sake, I pray to God you don't—  
But 'till that day comes,  
you're going to run because you want to.  
you're going to run as fast as you can  
as fast as your mind can make your muscles go.  
and you'll work on your technique  
and you'll work on your strength  
and you'll get faster  
and faster  
until one day you don't  
until your body starts to slow down.  
But, by then, it won't matter so much.  
You'll be older and there'll be things that matter more to  
you than winning, or else you'll have found something else  
to win at, something you'll think is better.  
But that girl,  
that girl out there,  
That girl doesn't run as fast as she can;  
that girl runs as fast as she has to  
and it's never fast enough  
or else it's just barely enough  
just enough  
just barely  
to keep ahead of whatever it is she's running from.  
Until it happens to her,  
like it'll happen to you  
that she loses a step.  
Only for her there won't be  
any second act.  
There won't be any moving on

She'll be dragged under  
and that'll be it.  
That'll be it.

Now do you understand, son?

VIII: Neal Koala Sampat

*Dev Patel does a dance in which he pretends to be a koala while also trying to stay completely still.*

SPEAKER

If you can't tell by now,  
I am a nervous person.  
What you may not have noticed, though, is that I am a nervous swallower. It's almost unconscious. So when the endo-surgeon told me not to swallow while he stuck a needle in my neck to biopsy, I told him that might be a problem. Because the prospect of a needle in my neck—really in what I would call my throat—not to mention the significance of what that needle might tell us, was guaranteed to make me nervous, which then in turn was pretty much guaranteed to make me swallow involuntarily. Plus, then worrying that I'll swallow was going to make me swallow.

The endo-surgeon told me just to try my best.  
Focus on something else.

When I was a kid we had a book,  
*One Day, Two Dragons*,  
It's a counting book, but it's also a book on how to distract yourself if you are scared of going to the doctor. The dragons distract themselves from their anxiety during their visit to the doctor's office by counting things in all the rooms they are in.

*One Day, Two Dragons* has, needless to say, been a tremendous resource for me.

So, in the endo-surgeon's exam room I knew I had to pick something to focus on. Since my head was tilted back, I had limited options. I chose a hinge on the cabinet behind me. The hinge had four segments. I focused on it as hard as I could. For good measure, I also focused on my breathing. In order to make my breath occupy as much of my

attention as possible, I paired the rhythm of my breath with a sort of mantra that I repeated to myself in my head.

Neal Koala Sapat  
Neal Koala Sapat  
Neal Koala Sapat  
Neal Koala Sapat

Neal Sapat is the character played by Dev Patel on *The Newsroom*. Koala is the middle name I gave him so that his name would scan better with the rhythm of my breathing.

It worked.

Well, it worked well enough.

I was able to keep my nervous swallowing to a minimum, only interfering with the biopsy once or twice.

Ultimately, it took the surgeon seven tries to get all the samples he wanted. I joked to my girlfriend later that I looked like I had been attacked by tiny vampires.

Seven samples was enough to confirm that I needed surgery. My thyroid was coming out.

IX: Planning for the End

*A reprise of "The Truth," except that McFeely Sam Goodman dances the part of the dancer and the bowling ball turns out to be a cloud and so, distinctly non-fatal.*

As I lie on a table in an ultrasound room, looking at clouds painted on the ceiling while a technician pokes at my neck with a cold gel-covered wand, I wonder what I will do if I am told I have only months to live.

Less than an hour ago, my current oncologist found what felt to her and another doctor she called in for a second opinion like a nodule on my thyroid during the physical exam portion of my annual visit to the Center for Survivor Wellness at Columbia Presbyterian Hospital. I am twenty-five years old, but this is only the first or second time I have made this visit without either of my parents, so I have found my way to the ultrasonic imaging department by myself.

On the waiting area TV, I watched, if only in an attempt to distract myself, the Governor of Virginia defend himself against allegations that he received more than \$135,000 in gifts by claiming that they were gifts received not by him but by his daughter on the occasion of her wedding.

If I am going to die, I vow to myself, as I lie on the ultrasound table, I will go to Fort Meade in Maryland to attend the trial of the United States Private who will announce in August, on the day after she is sentenced to 35 years in prison as a result of her conviction under the Espionage Act, two days after my thyroid is removed, that she is a woman who prefers to be known as Chelsea Manning. I have recently read that Private Manning's trial is open to the public and if I have only months to live, I resolve not to pass up any more opportunities to be a witness to history or to pursue interesting or exciting experiences. I will not go to Columbia, but will instead travel and write full-time.

This anxiety about making the most of what life I have left is really just an extension of anxiety that stems from three years of failing to find a job that will support me before giving up (temporarily) and heading back to school, but the current circumstances bring to the forefront the existential aspect of the anxiety which I sort of suspect was at its root all along.

Incidentally, this Friday afternoon and specifically this moment I've just described of my lying on the ultrasound table is the only moment in the course of the entire thyroidmageddon experience in which I am actually considering the possibility that my death is imminent, not just scared of death, but actually planning for it. While I continue to feel vulnerable and hyperaware of my mortality, by Tuesday, around the time Bradley Manning, as she is then known, is receiving her verdict, when the endocrine surgeon tells me he thinks my thyroid has to come out, I am no longer planning my last months.

Interlude:           What Are You Scared Of?

*CLAIRE KENT and a hometown FRIEND at the high school track which runs around the football field.*

FRIEND

What are you so scared of?  
Bullets still hurt you,  
like they always did.  
Fire still burns you,  
like it did before.  
So, you're not as fast as you used to be.  
You're still as fast as anyone else.  
So you're not as strong as you used to be.  
You're still as strong as anyone I know.  
You're just like us now.  
But at least you've got your health.

**Or**

FRIEND

What are you so scared of?  
Yeah, you've been through a hard time.  
A lot of us have.  
But you're one of the lucky ones.  
You made it through.  
Sure, you're not as fast as you used to be.  
You're still as fast as anyone I know.  
And maybe you're not as strong as you used to be, but  
you're still as strong as anyone else I can think of.  
I'm not saying it's nothing,  
going through what you've been through,  
but at least you've got your health.  
That's not something most folks around here can say.

CLAIRE

That's just it.  
It's not bullets I'm afraid of.  
It's my health.  
It's not bombs, it's not krypton rays,  
not supervillains, not bumps in the night.  
It's my health.  
I'm terrified of getting sick again.

Everything I was  
Everything that I thought made me strong

came from what was wrong with me  
came for growing up here,  
playing where no child should ever have played  
drinking bad water  
Everything bad that happened to me as a kid  
was turned into something good because I thought that it  
had made me stronger.  
It turns out it made me sick,  
it made me weak,  
it made me vulnerable.  
And I was lucky and I'm better now.  
That's what they say.  
I was lucky.  
I know it's true.  
I look around and I see how many people in this town are  
still sick.  
How many people have lost people  
and I know I'm lucky.  
But I don't feel lucky.  
I feel as though a veil has been lifted and now I know the  
truth, which is that all the bad things  
are just that.  
They're bad things.  
They're not blessings in disguise.  
They're not making me better  
or wiser  
or stronger.  
They're just waiting to bring me down.  
I'm better now, but I've never felt worse.

X: Shitting in the Woods

*No dance.  
Or maybe the SPEAKER is dancing now,  
nothing elaborate  
just the occasional elegant, almost unconscious ballet  
step.*

SPEAKER

Here's what happened after the endo-surgeon told my dad and I that he was recommending a thyroidectomy.

I should tell you that he made this recommendation almost immediately. I thought I was seeing him so that he could perform a biopsy on what at this point I still understood

to be one single thyroid nodule, if there even is such a thing.

My oncologist has found the nodule the previous Friday and we had scrambled to find an endocrinologist who could biopsy. The endocrinologist was an endo-surgeon named Kevin Parrack who looked a little like my cousin. Dr. Kevin Parrack, after hearing my medical history and doing a quick ultrasound, tells us that he's not going to do a biopsy. It's his medical opinion that the risk of a false negative, a biopsy that doesn't show cancer even though it's there, is unacceptably high. So, given that it's a fairly simple surgery, not that any surgery is simple, and that the thyroid can be effectively replaced by a very small pill taken once a day, it's not worth leaving it in. Given that I'm due to start grad school orientation in three weeks, that recovery is one week, and that surgery must be scheduled two weeks in advance, we provisionally schedule the surgery for exactly two weeks from now, letting him know that we're still going to see what my oncologist thinks and get a second opinion from an endocrinologist recommended by my uncle, who was a doctor here for many years. In the end, as you already know, Dr. Parrack does do the biopsy while we simultaneously go ahead with the preparations for the surgery in case we decide to go ahead with it, which, as you already know, we do.

But, I want to go back to that moment that my dad and I, having expected a biopsy which we hoped against hope would come back clean, have instead been told that I will have to have my thyroid removed and tell you what happened next.

My dad and I decide to walk from the hospital to my parents' apartment to tell my mom. I will then walk from my parents apartment to the apartment that I share with my girlfriend so that I can tell her in person.

On the way home we stop at the farmers market where my dad buys me a baguette. Even when we are not in the midst of a medical trauma, my dad takes great joy in buying me things from farmers markets, his version, I suppose, of the stereotypical Jewish mother's compulsive feeding. He and I alternate talking and crying as we walk home. It's clear to both of us that the surgery is no big deal compared to what we've already been through, but also that we are way too traumatized not to treat it like a big deal. We arrive



at my parents' apartment and tell my mom and the three of us cry together and agree that the surgery is no big deal compared to what we've already been through, but also that we are way too traumatized not to treat it like a big deal. I give my parents one last group hug and head home to tell my girlfriend. I have been texting her constantly to make sure that she will be home when I get there. I try to make it sound important without making it sound scary. She, however, thinks I have had a biopsy on my thyroid and so when I get home she is not home; she is at the supermarket surprising me by buying ice and ice cream, which she has read will help with the discomfort (when I do eventually have the biopsy, it turns out that I don't need the ice anyway, so we keep it for a while and then wash it down the drain. We eat the ice cream). She gets home and I sit her down on the couch.

I am ready for her to panic. She, after all, has only known me as a cancer survivor, not as a cancer patient. The idea that I might have died has, at times, reduced her to tears. I worry that she will not be equipped to deal with this new development. That is how clueless I am about what is going on.

My girlfriend handles the news that my thyroid will be removed and replaced with a small pill as a proactive measure the way I imagine almost any non-traumatized person would. That is to say that precisely *because* she has not been through what my parents and I have, she sees the surgery for what it is, routine, a dramatic but effective solution to a problem which might have been much worse. After all, I might have come home with a cancer diagnosis. She seems more concerned with my anxiety than with anything else.

I eat some lunch, leftover eggplant parmesan that she made the night before, and afterward she suggests that I go for a run.

I started running, with my dad and sometimes my brother, in high school, but I became a serious amateur runner after graduating from college. In the three years I spent living with my parents following my graduation, working hard but not making a living, running gave structure to days spent at home writing and applying for jobs, a way to feel deservedly tired at the end of the day.

In the two weeks leading up to my surgery and in the months that follow, I will attach almost religious significance to running, entrusting to exercise my physical and mental health as well as my sense of identity and safety. This is in part the result of telling the various doctors who examine me for my preoperative medical clearance that I run 3-5 miles several times a week at a variable speed of a twelve to fifteen minute mile, repeating these statistics so often they become a mantra. And so, as anxiety over my surgery looms, I start timing my runs. I vow to run faster and farther, telling myself that I will know that I have recovered from surgery when I can run these four-and-a-quarter miles faster than I can run them now. So, the day before my surgery, I run as fast as I can, proving to myself that I am strong enough to survive and setting a benchmark for my recovery. For the next two years, I will run this same route through the woods of Inwood Hill Park with a combination of profound religious devotion and neurotic compulsion.

But on this run, on this Tuesday, two weeks before my surgery, something is not right. For a number of years, I have had stress-related gastrointestinal issues. The most recent is what I have finally identified as a mild ovo-intolerance aggravated by exercise. I realize about halfway through my first lap that the eggplant parm I ate for lunch had eggs in it. Whether it was the eggs or just the overwhelming anxiety of the day, I am now feeling an unpleasantly familiar gurgling in my intestine. I hope against any logical hope for about a quarter of a mile that what I am feeling is just gas and when I cannot pretend any longer, I bolt off the path and into the woods and behind a tree, yank down my shorts, and shit.

Any embarrassment is mostly masked by the overwhelming intensity of the need combined with a sort of cathartic sense that this feels like an appropriately obscene response to the day that I have had. When I am done, I halfheartedly kick some leaves in the direction of my defecation and hope for everyone's sake that it will rain soon. I jog back to my apartment, head straight to the bathroom where I shower and wash out my underwear and then emerge and immediately confess what has happened to my girlfriend. My girlfriend seems considerably more

concerned that I have had diarrhea in a public park than she was that I am having my thyroid removed.

After dinner, we watch an episode of *The Newsroom*. On Aaron Sorkin's recommendation, conveyed to me in the trustworthy voice of Jeff Daniels, for reasons that I cannot fully explain, but which must have had to do with an any-port-in-the-storm longing for emotional support in the form of instances of great beauty, Willie Nelson's cover of Elvis' "Always on My Mind" becomes a sort of anthem for me over the next few months as I prepare for and recover from surgery.

Halfway through *The Newsroom*, I remember that I still have a baguette in my backpack.

*After the curtain call, the curtain rises to reveal the damage caused by the elaborately-choreographed fight in the fifth movement. The HOUSEKEEPER comes out and cleans up and repairs everything as she did in the prelude.*