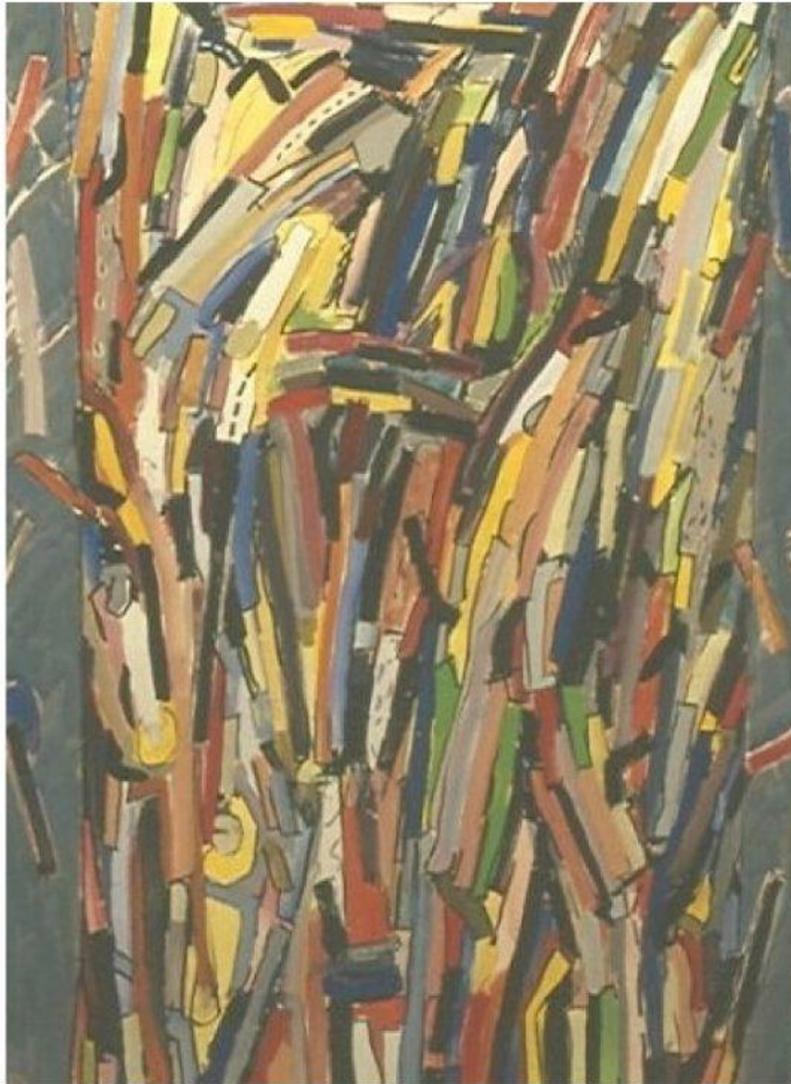


# Red Savina Review *fall 2018*

red savina review



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# Red Savina Review

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# Stevan Cavalier

## KATY'S WORLD

Katy had both her lenses surgically removed when she was four. They were opacified by cataracts, the result of lifelong dependency on anti-inflammatory steroids. Afterwards, she required glasses about 3/8 of an inch thick. Eyes seen through that kind of correction fill the frames in a moony caricature – the professorial buffoon, the comic tyrant. To Katy's startling owliness, add puffy, rubrous cheeks, sparse, brittle white hair, mottled skin and a blocky, stunted frame. All of these features were animated by a stern litany of growls, unintelligible directives which she underscored using a jealously guarded laser pointer. Even without this bit of assistive technology, Katy had no trouble getting her point across, stabbing the air and roaring until the scene rearranged itself to her liking. She was never without her crimson, fur-trimmed Santa hat, even in the bathtub. It was impossible to resist a rueful grin around her, although whatever mirth she generated was tempered by an awareness of how close to death she lived every day of her life.

Katy was one of triplets, the result of infertility treatments. When they were born, her mother was 48 and her father 62. I was Katy's pediatrician. Above my office desk, I keep a row of fat binders in which I've archived several thousand photos from more than three decades in practice. Early on in my professional past, these were taken by proud mothers using point and shoot cameras during exams. Later, most were selfies shot on smart phones, often wrested away from older sibs.

There are school photos, official and unofficial, celebrating the orderly progression of intellect and social adaptation – smiling young beings, gap-toothed, collars buttoned, hair immaculately combed or braided, aglow with health and unreserved delight. Many photos had arrived as holiday cards reflecting a year's progress; children at birthday parties ripping into huge boxes, paddling happily in float rings around back yard pools, grinning children amidst their grinning families on exotic vacations, staged in group hugs at the beach, clasping boogie boards and snorkel gear, mom and dad festooned in flower leis and bold silkies.

Katy never lived any semblance of these lives. She is among the select few I have flagged in the many pages of my collection, those who died in childhood.

She appeared syndromic at birth, in dramatic contrast to her lithe, toe-headed, fine-featured siblings. Katy's medical issues began in infancy with recurrent, mysterious symptoms – generalized nodular rashes, often blistered or pustular, clearly itchy or painful, swollen joints and fever. At intervals of weeks to months, she would experience a few days of misery, receive improvised comfort measures, and resume her unbothered existence.

Her milestones were delayed. She managed to sit independently at a year of age, walking at two. Katy remained non-verbal well into toddlerhood. It was also increasingly clear that her vision was markedly impaired. She sat inches from the TV, squinting and tilting her head at the screen.

I collected many photos of Katy. Typically, she is mooning at the camera between her beaming siblings, never without a Santa hat, its white fur border pulled down to the rim of her glasses.

Katy's sibs, Anne and David, remained paragons of health and beauty all of her life. Absorbed in school, play dates, soccer and swim matches, lost in the blessed oblivion of childhood, they seemed to somehow escape the ravaging black hole of Katy's needs.

There was also older brother, Cal, whose life in between infrequent clinic visits I knew little about. He occasionally attended Katy's clinic visits as a bystander. In the exam room, Cal would look up now and then from his homework or a hand-held game, and I'd glimpse in his eyes a note of apprehension, not so much worry for Katy, perhaps, as for himself.

Charming as she was, and solicitous as her siblings may have been, Katy's illness was like a captive tiger that could turn on its keepers at any time, ripping the whole family apart. There could never have been more than a scrap of parental attention left over to nourish and succor her siblings, although whenever I saw them together, they never appeared as other than obliging and resourceful amusements for their odd sister.

Katy's medical life was attended by an ever-evolving team of pediatric sub-specialists at various academic institutions in the San Francisco Bay Area, assembled according to her shifting array of symptoms. On the other hand, her medical "home" for lower level care was a community hospital in the East Bay where I practiced. All the many forays into the labyrinth of her symptomatology wound up in cul-de-sacs.

One memorable photo of Katy I enlarged and pinned up on a bulletin board in one of my exam rooms recalls a morning when I was making hospital rounds. She is sitting cross-legged in her favorite crib whose metal bars are enameled in lime green, clasping a remote TV speaker to her ear. Several attendants are fussing with the monitor and straightening the bedding around her. I remember her holding court as usual, barking orders in her husky growl and high-fiving everyone in the room. Her main point of focus would be Barney the Purple Dinosaur, her great favorite, grinning at us from the wall-mounted TV. Katy would be wagging a finger to the beat of Barney's theme music with imperious precision.

A week before, she'd come close to dying from the first of many life-threatening GI hemorrhages, spending a week at a nearby pediatric intensive care unit. The bleeding had stopped on its own and, after a transfusion, Katy was able to return to her home facility.

I had met with her parents for an update down the hall in the playroom, leaving Katy happily caged in her crib, and, over bad coffee, somberly rehearsed the current array of threats to her life, which now included both GI and pulmonary circulatory disturbances, severe liver disease and a low platelet count which put her at risk of further serious bleeding. On this particular morning, I'd assembled an expanded team of medical participants for an in-depth, system-by-system

stock-taking, including her nurse, a GI and pulmonary specialist, a nutritionist, and her social worker.

After we'd all settled into the cramped space, Katy herself joined us. We adults sat on kindergarten chairs pulled into a semicircle with Katy, cheery, pale Buddha in Santa attire, perched in front of us on her power quilt. As I trotted out a list of symptoms one at a time, Katy dialed away wildly on an Etch-A-Sketch with the intentness of a street fair portraitist, beaming at the results, holding up the screen to each of us as if it revealed the Ten Commandments.

This was actually the first time I'd spent an uninterrupted hour in her presence. Hearing her cackle with joy at each re-arrangement of lines, at the jingle of tin bells on her hat, watching her applaud herself in a mirror, I realized how charmed and momentarily happy Katy was in the cozy space she'd made her own, versus the perilous tunnel of threats she navigated in our imaginations.

Two weeks after this conference, once again due to brisk GI bleeding, Katy needed emergency transport from our suburban pediatric ward to the pediatric unit at UCSF medical center. Although it seemed likely she would slip into shock, her family and I had hurriedly decided not to move her to a more intensive care setting, at least not at first, a plan it was hard to defend to the accepting pediatrician at UCSF. In making this triage decision, without admitting it, her mother and I were really acting on a much larger, although as yet unstated dilemma about what measures we might undertake should Katy's condition further deteriorate. Just how heroic, to be understood as intrusive, would be the care her parents would authorize? It was a discussion bound to take place sooner or later, for which, no matter how well rehearsed in the imagination, no one can adequately prepare.

After my clinic day, I drove into the city to visit Katy. I was directed to a room where Katy and her mother were situated on the sort of narrow pull-out chair where her parents had spent countless nights hunkered, swarmed by monitor alerts and requisite nursing intrusions. Katy lay unconscious across her mother's outstretched arm, her breathing ragged and erratic.

That morning, before moving her to UCSF, I'd conferred with a pediatric surgeon, debating an emergency splenectomy, a maneuver aimed at arresting the gastrointestinal bleeding by raising her platelet count. By then, her team of doctors had pumped a tanker-full of blood products into Katy's circulation, trying to get ahead of her torrential blood loss, but were falling farther and farther behind. She had slipped into shock. Splenectomy would be an extremely high-risk undertaking.

It was clear to me Katy was fast sinking to where no conceivable intervention could rescue her, where shock would irreversibly injure her kidneys, heart, and brain. The pediatric nurse manager had assembled a late-afternoon care conference comprised of herself, a pediatric floor nurse from Katy's home facility who had driven into the city after working an all-night shift, a social worker, a hospice nurse, newly-added to her care team, her parents and older brother, Cal, then about 11, and myself. Our talk fell under a pall of self-imposed restraint that felt like a drafted script for Katy's eulogy. Katy would be accepted into pediatric hospice care. The social worker said nothing but nodded sadly for emphasis at key junctures in the conversation. After polling all

concerned, Katy's parents decided on supportive, as opposed to "heroic" measures, that is, oxygen and basic fluids, what we call "wind and water", and pain management. It was remarkable Katy endured for the two hours the group spent conferring together. I felt sure I would receive the inevitable call sometime later that night.

But instead, the next morning I learned that, a few hours after I and a stream of well-wishers had departed the serene tableau of her dying, Katy opened her eyes, sat up in bed and, crowing with delight, began to toss water at her stunned visitors. To those of us having conceded the fight, nothing was more typical, and unnerving, than rallies of this kind.

\* \* \*

Katy, the medical conundrum, was the subject of ten volumes of medical records, replete with countless lab tests, biopsy reports and dozens more concerning invasive diagnostic procedures, hundreds of "progress" notes and consultations written in the lifeless argot of the profession. Beneath the featureless surface of her medical record, there roiled a great mystery.

In her brief life, Katy made more than a dozen visits to UCSF. Her insurance even covered three full days of evaluation at the NIH. The best pediatric thinking failed to comprehend her condition. She was like a blackboard scrawled with impenetrable algebraic figurations. Our hope was an intuitive flash, a sudden incisive shift in perspective that would reduce her to simple terms and yield a workable solution.

Lacking a unified diagnosis, I always felt her prognosis was grave. Katy spent whole seasons in intensive care. After more than 30 years in pediatric practice, I still consider Katy's survival to age eight a miracle.

In the last six months of her life, Katy spent just two weeks at home. Hope, like the transfused cells in her circulation, was always short-lived. Besides GI and pulmonary bleeding, other major medical issues boiled over unpredictably but with regularity – worsening arthritis, painful rashes, fever and suspected though usually unproven infection, progressive liver disease, diarrhea and poor nutrition.

There were less acute problems that constantly got parked on a back burner: her progressive visual impairment, profound deafness, and lack of speech. Katy had hearing aides but usually refused to wear them. To communicate, she preferred self-invented signs, tactical gesticulations, various grunts and emphatic barks, and, of course, her laser pointer. As for her poor vision, Katy kept dislodging the 'permanent' contact lenses inserted after her cataract surgery until her ophthalmologist got tired of twice weekly visits to replace them, and left them out, leaving her strapped into her owlsh goggles. These she seemed to happily accept, more as a fashion statement when admired in her pocket mirror, another constant accessory.

Katy hated to eat. She was, in medical terms, orally averse. Throughout her life, Katy never took much of anything substantial by mouth, seemed to be repelled by textures. Unable to sort out chewing and swallowing, she often ruminated mouthfuls of food for hours, eventually gagging and spitting them out. She finally received virtually all of her nutrition via a constant infusion through a gastric button inserted in her abdominal wall.

We presumed the root cause of her ills was auto-immune, a term that suggests far more than it explains, meaning some fundamental mistake in her body's surveillance system against foreign invasion in which many of its own cell lines had been accidentally targeted.

Compounding the mystery of Katy's hyperactive immune system, was the contradictory fact that she was never able to mount an effective immune response to opportunistic infections, that is, make appreciable amounts of antibody to invading pathogens on her own. Although no one was certain of their benefit, she required monthly infusions of human immunoglobulin, a blood product comprised of broad spectrum antibodies, to maintain her at a level considered adequate to keep infections at bay. Minor infectious illnesses, such as simple colds or viral diarrhea, almost always put her back in the hospital, frequently in intensive care.

Naturally, Katy's mother was prone to periods of despair, with brief remissions, even erratic spikes of optimism. Often, when Katy's rush to the vortex was especially headstrong, her mother was tempted to abandon the powerful urge to toss her yet another life ring, and to let Katy go. In this regard, she was often encouraged by well meant, but, in my view, overly pessimistic advice from Katy's medical care team, whether local or at an academic referral center, and by friends and family.

There were times when, bleak as Katy's prospects seemed, I felt that to deny her certain interventions, even those which might be called heroic, was premature, that she could be rescued, if temporarily, restored to the meta-stable circumstances in which she so brilliantly thrived. I never could forget that epic emergence from coma to engage in yet one more water fight. We could never confidently know just how late it was in the game.

In emergent circumstances, the typical dilemma now was whether or not to return her to an academic referral center, relinquishing control over medical management, inevitably subjecting her to more testing and painful procedures, or to let her die near or at home. Her final stay at UCSF illustrated this quandary.

Katy was in our local ER once more, bleeding not just from her GI tract, but also her lungs, coughing up copious volumes of blood, in fact at immediate risk of drowning.

If we sent her back to UCSF, it would be in order for a pediatric pulmonologist to perform bronchoscopy under very adverse circumstances, passing a tube into her trachea to look for and hopefully stanch the source of bleeding. Bronchoscopy, which would require general anesthesia, would leave her reliant on a mechanical ventilator, at least during recovery, but possibly permanently.

In this scenario, as I explained to her mother, it was possible Katy's family would be faced with the choice of whether to actively withdraw respiratory support, to "turn her off," possibly in a fully sentient, if heavily sedated state. Quite reasonably, the pulmonologist at UCSF, who contributed his opinion via phone conference, as well as her local pediatric care team, were very discouraging.

In spite of the odds, there appeared to me to be one or two narrow, though perilous, escape ways back to some kind of safe haven. Initially, Katy's mother opposed transfer and further invasive

procedures, wishing only to provide comfort, “wind and water,” making sure Katy received sufficient morphine to endure drowning in her own blood. This would almost certainly require the induction of a comatose state, which itself might arrest her breathing. There was considerable local apprehension about this scenario playing itself out on a short-stay community pediatric ward like our own.

In spite of justifiable pessimism, we were all reminded of Katy’s many “miraculous” recoveries from perilous circumstances. I argued in favor of transfer to an intensive care setting, to include bronchoscopy, if that’s what it would take to stop the bleeding. Even if she required mechanical ventilation, her lungs were fundamentally sound and, once blood was cleared from her airways, I thought there was a good chance it would be temporary. Further, I thought we should take advantage of Katy’s time under anesthesia to perform colonoscopy, looking for potential sources of GI bleeding, which might be cauterized or tied off.

We decided to move her to UCSF. It was a stormy first day in the PICU, where Katy received more transfusions and an attempt was made at so-called non-invasive assisted ventilation, basically a mask tightly strapped to her face pushing oxygen under pressure into her lungs to try to damper the bleeding. Katy tolerated this poorly. Watching her struggle, Katy’s mother, having allowed her transfer, vacillated about bronchoscopy.

I had reviewed Katy’s admission history at UCSF, which was sent to me as a courtesy. The details of her story were complete and balanced, but I found the final summation of her care plan grating. Each note ended with “Katy is DNR,” “Do Not Resuscitate”. “DNR” status meant there would be no Code Blue called, that no specially skilled team would be summoned in the event of a cardiopulmonary arrest or other life-threatening situation.

I felt that DNR was an expedient over-reaction to Katy’s circumstances, dire as they might seem. I knew the mind-set that “DNR” status generates in physicians, especially those in training. It is the first and often the only guidepost they will fix on during a crisis.

Even given detailed contingency plans, physicians must never be excused from having to think, to respond to adverse circumstances with creativity and flexibility. They must accept responsibility for risky improvisations in response to an unpredictable turn of events, rather than staying the predicted course. I have seen more than one physician who thought he was navigating in accord with a senior consultant’s directions agreed to on sign-out rounds sail into disaster during the night by refusing to change course in adverse weather. So long as he or she is motivated by the Hippocratic Oath, first to do no harm, and next the Golden Rule, a physician, even one unfamiliar with a complicated case like Katy’s, will generally make the right decision.

I decided to fight traffic after I’d made local hospital rounds and join the UCSF team for their evening sign-out rounds. I had called Katy’s mother earlier in the day to advocate for a more nuanced plan after she had agreed to bronchoscopy and colonoscopy under one sedation. With this in mind, after protracted discussion, observing furtive eye rolling and sidelong glances among the residents and fellows assembled on rounds, I, the “local slick”, as residents at elite institutions referred to hometown providers in my day, prevailed on the UCSF team to consider reversing Katy’s DNR status.

The procedures in question were accomplished the following morning, and, remarkably as always, Katy tolerated both well. Fresh blood was found welling up from the bronchial tree, but without a discernable source. After it was washed out, there was no more active bleeding. The bronchoscope was successfully removed from Katy's trachea without having to leave behind a breathing tube. Colonoscopy revealed numerous distended, thin-walled varicosities in the lower GI tract, reflecting circulatory pressure build up due to her advanced liver disease, none, however, actively bleeding. It looked like Katy would live to see another hospital discharge.

But then, of course, in just a matter of months, there was the inevitable hospitalization from which there would be no discharge. Katy had bounced in and out of hospice several times in the interval. Her parents had decided she had made her last trip to the PICU.

There was a somber gathering in Katy's room, this time including a chaplain. Seated in a shadowy corner was a pediatric unit assistant who had become so close to the family as to fill in at home when one of Katy's nannies was unavailable. She pressed a handkerchief to her face.

Katy had lapsed into stupor. On a CT scan, it appeared she had suffered a series of hemorrhagic strokes, entirely expected in view of her marginal blood clotting capacity. All kept silent during my system-by-system recitation of perils, almost all with eyes on the floor. I stated clearly that I felt no further interventions were warranted, that Katy should receive just comfort care from now on, and that it was time for her to return home if that's what her family desired, for her final days among us.

When I finished the short litany of morbid scenarios, there was a further interval of silence, during which the regular beeping of hallway monitors and the whirr of a microwave oven in the kitchen nook next door enhanced the feeling of disproportion between Katy's morbid entrapment and the airiness of ordinary life. Katy's brother, Cal, finally spoke up, saying words close to those I myself had once spoken, citing her miraculous rallies, offering a modest, minority view in support of at least some respiratory assistance. This was met with respectful nods and a few more moments of silence. Her mother then asked me to speak at Katy's funeral.

\*\*\*

Dear Friends...

I have lived this day many times in the last eight years. But with Katy's death, the sadness I have felt in its anticipation has been transformed into something else. Looking at your glowing faces, I have a strong sense that this transformation has occurred in you as well.

Surely we all knew that Katy was marked nearly from the moment of her birth. But for what distinction? I think we all assumed for tragic suffering. For years, we probed the conundrum of her symptoms, improvised her care without the remotest knowledge of what we were treating. As we struggled for a plan, Katy hovered at the brink. We could only watch in amazement as she danced away from death, time and time again, in defiance of every scientific principle, beckoning us to follow as she scampered into the next green mansion in the magic kingdom that

was her native habitat. Katy turned science on its head, where it mocked us like a grinning Cheshire cat.

Many of us were privileged to get close enough now and then to observe Katy in her native element and there we could no longer feel so bereft, that her life was in any way a tragedy. I rather came to think of it as a triumph.

Who can imagine a Katy other than the ebullient being in a pulled down Santa hat, roaring approval at Barney? A cautionary finger lifted, she silenced us all, scribbling wildly on her Etch-a-Sketch, as if taking dictation from a higher authority, calling on each of us to applaud her latest attainment. "Pay attention," was Katy's message to us all, "to what sounds like nonsense and looks like gibberish and consider your need for certainty and progress as you try to make sense of the world. I've got it figured out. Just watch."

Her world made perfect sense to Katy and her brief time in ours has left me feeling as if much of my striving to understand life in scientific terms, to insist on certainty before advancing into the unknown, is squandered time. That was Katy's wisdom and enduring gift.

# Cathy Allman

## A PLACE TO GO IN HUNGER

My grown daughter, the teacher,  
asks what's for dinner.  
I want to make what she craves  
but my mushroom soup

is an embarrassment  
though it's smooth and needs no salt.  
At the table we talk, sometimes  
tears spill like chicken gravy.

If I were a prophet, I'd know  
how a poppy seed blooms red,  
but I see only a small black dot.

We slice bread, spread butter.  
If I'd learn to listen, I'd know  
her stories have answers I forgot.

She talks about new math  
and word problems and proofs,  
science—all solutions of the natural  
world without an equal sign.

She tells me how she feels  
when she's not sure  
her students understand  
the lesson, the riddle—

is  $X$  greater than  $Y$   
when  $Y$  has the most to lose  
and  $X$  has more to give?

I worry, not if I'm right  
or even if I'm wrong,  
but when she leaves

the table, is she starved,  
or can I still feed her?

# Dean Baltesson

## CONFABULATION

You are probably not aware  
that I suffocate you  
under the weight of poems  
too heavy for anyone.

I have translated you from  
one romantic language to another  
using simple words  
in a present tense that never occurs.

Are you even real  
as I dance alone,  
the only glimpse of you  
from fatigue and memory?

I have learned  
to sketch you in the silence  
of a portrait speaking  
so remotely each day.

I have authored my stupid passion  
with only words  
in a silence  
of my own illustration.

# Roy Bentley

## Human Remains

When we opened the cardboard  
carton that read **Human Remains**,  
she was in it, my father's mother,  
the dead woman he would not burn.

Her head rested on a block of wood  
and her death did not open us to God,  
not in that moment in the mortuary,

winter-Kentucky filling the window—  
the first *momento mori* is Memory,  
a story of a blue dress on a corpse

and embracing the whole of afterlife  
as one gray afternoon with a narrative  
in which you aren't necessarily the hero.

I let him seed that much of my life, but  
why did I? Because I could. It was what  
I might next do for someone who had  
done more than a few things for me.

## How Death Was Led Forth from the Body and How, That Afternoon, She Lived Again

There is a seduction plot between the job and who fills it.  
However, I didn't so much imagine having taken a position  
as found myself intact after the parachute and reserve failed.

The job of ushering the dead has rules like packing a chute.  
You can't let them despair of ever inhabiting the body again.  
It requires patience, but then so does getting anything right.

In this case there are guidelines, regulations, best practices.  
I suppose someone thought I might be good at steering souls.  
But, on awakening, I had begun reciting the Agnus Dei—

*Agnus Dei, qui tollis peccata mundi, miserere nobis—*  
because, well, once a Catholic always a Catholic.  
Then I took a knee. For what lives, what dies.

I snapped a selfie, but couldn't post it. The dead  
aren't allowed to use Facebook. If the rules hadn't  
prevented me, I would have updated my Status:

*Being who I am is like falling through a clear sky  
and going through the checklist until all that can be  
done has been done, and the ground rises to meet you.*

## Marilyn Standing next to Her Cadillac, 1954

In 1954, America wasn't great. This was when Marilyn Monroe and her Caddy are brand-new, and her face outshines the dark-blue curves of a waxed-to-faultlessness GM factory-paintjob.

And if it's 1954, she is on the cover of Playboy—and married to Joe DiMaggio. The Great DiMaggio, Hemingway calls him in *The Old Man and The Sea*. Of that Marilyn Monroe: "...two other screen stars,

Joan Crawford and Lana Turner, got only casual attention. After Marilyn every other girl appeared dull by contrast." Years later, Tony Curtis played Antoninus, a poet, in *Spartacus*. Antoninus says

"I'm Spartacus!"—first, which gets him killed. After this, they're together in *Some Like It Hot*.

Tony Curtis said she reeked. He said it nice, if there's a nice way to say that, but he said it.

If you believe there should be a sense of honor among those with whom we are most unguarded—

how could he know his judgment would carry?  
how could he speak like that about the dead?

Barbiturate-dazed, she may not have washed or was about to miscarry. She was fucked up, sure.

But asked what it was like to kiss Tony Curtis, she volunteered: In my mind, he wasn't there.

## Near Hell for Certain, Kentucky

That summer, I lost a prized bear there.  
The Teddy bear granny Potter bought me  
in the bus station in Ohio. Jenkins, Kentucky  
was the endpoint of the Greyhound line in 1962,  
but my granny ensnared some off-duty taxi driver  
by promising him ten dollars if he would “carry us”—  
an eight-year-old boy with a Teddy bear, her, and  
her slate-gray Samsonite suitcase—from Jenkins,  
out of a blistering July-noon in eastern Kentucky,  
to Hell for Certain. Which was in Leslie County.  
Turns out, America Webb lived there. Her sister.  
America had a deep well with good, cold water.  
A widow with no kids. Raised tea roses in the  
postage-stamp yard of her white row house.  
America adored my granny. And my granny  
adored America right back. But I’m digressing—  
I must have left my bear there, near Hell for Certain:  
I don’t recall having it in my eight-year-old arms after  
waving goodbye to America through the back window  
of a cab. I’m 99% sure that’s what must have happened.  
However, it could have been something else altogether.  
The bear left in some drugstore café on the return trip,  
Kentucky to Ohio, its fake-glass eyes reversing **Dayton**.  
Regardless, I was told that Teddy bear would be my last.  
And I was asked, Can’t you hold on to anything? Until she  
died—Mazie Frances Collier Potter, my mother’s mother—  
I didn’t know that a death can make you feel what I felt:  
like you’d never leave off looking for that loved thing.

## Why They Shot the Bear by the Railroad Tracks

*“The arc of the Universe is long, but  
it bends toward justice.”*

*—Martin Luther King, Jr.*

They said it was an imminent threat, even minding its own business, sauntering out from the sanctity of landfill-forest to feast on the wild raspberries in summer bloom beside train tracks. A juvenile black bear by a state route. Someone had called. And the patrolman who responded got handed the job the others at Jolly Pirate, a donut place, didn't want. He was the freshest kind of recruit: shit-scared the other cops would think him soft. He had the stomach for it, for shooting anything, and still he took a zigzag route, hoping the bear would be gone. But the bear wasn't gone. And he shot. Missed and followed—is it something we're doing wrong or is wanting what we want a way of saying we don't expect to live in peace? Anyway, he hit the bear. Wounded, it walked in his direction. The cop waited until it was close enough—I mean, we're talking noon, broad daylight, and kids out of school for the summer watching and learning about the world. No calling the Columbus Zoo and Jack Hannah to make a short trip to Newark: 30 minutes, tops. The black bear was eating raspberries, for fucksake. Wasn't doing that thing humans do where they shove everyone else the fuck out of the way. Just lazily eating. One tranquilizer dart and everyone—and the bear—goes home in a limo. When things like this happen, I and people like me decide again what we feared: we may have always been this unwise. This sure. At least the last shot from his service revolver found its mark and he dropped the poor thing like the cop literature said he could expect to.

# Sandra Kolankiewicz



Art © by Hiram Lewis Silver City, NM

## Learning How To Travel

So for the hour that we waited for the train we set aside our petty grievances and beloved attachments to past insults. The newly-introduced cousins ran up and down the platform in a gaggle without realizing this would be the first and last time they would ever play together, the station tired and empty just past sunrise, gravel parking lots in the distance. Our silence was not of anger nor grief but rather the sound that comes upon you when you realize the nature of things. The world has shifted under your feet, or a great tsunami has scattered your beliefs far and wide with the flotsam and jetsam left behind in the wave's retreat. We sat on the bench, each aware we were about to begin a great sorting on both of our beaches, would end up retrieving pieces of our lives, accept new belongings to bear, cling to what we didn't want but which reminded us of home as we made our way

from there to here, marveling at the  
distance, still trying to learn how to travel.

# George R. Kramer

## Cavity

Your dentist, the cruel, kind one true dentist.  
All-seeing in her blindness, will see you at ten o'clock.  
Let her fingers feel the deep recesses,  
sorting good from rot,  
let her gracey curette pick inside the lip of your angry gingiva.

Let her help you find where you begin and where you end.  
When the shadow of pain falls across,  
let a mask seal in your breathing thoughts,  
the thin nitrous oxide barrier all that divides  
what is and what is not.  
The x rays will miss them, but let your blind dentist see  
all the forgotten truths about you.

Let your dentist not be dead.  
Let her live inside, playing you in her imagination,  
as you imagine her hands playing over her ivory work.  
If you do not know if she lives in you,  
just know that she knows nothing unknown also to you,  
but she overwhelms your nothingness,  
light mixing in darkness and darkness in light.

Later, let her billing office go unpaid.  
The letter sits before you,  
its cancelled forever stamps,  
and outstanding deductible clamoring  
for the emptiness of your cavity.

Let her recall how every moment is a mystery  
according to her diploma above the porcelain spittoon  
silently watching over you, agape and helpless,  
mourning your extinct cavity,  
amen.

# Stephen Massimilla

## INTERMEZZO

Failing to amplify and punish  
my failings, a quiet easy person floats  
into your instantly Buddhist location.  
That's still untrue, but nobody notices.

Among the unmindful and unmusical,  
love means scraping for reassurance,  
finding the answers lost.  
Somewhere you have lived as other people

in a sepulchral city, a lacy  
swan-cluttered blur of turrets, I suppose,  
as darkness steals in through moving cracks.  
My thief, you're coming home

to terrorize me. Meanwhile, this epiphany  
comes to you: We were not born  
in locomotion, nor does it feel that way  
on this train. We are not making

memos. This is not Keats' autumn.  
You and I are not reinventing the quatrain.  
No one in the boxcar is rhyming or inseminating anyone.  
No one is arguing about ontology

or claiming one's diction is predictable,  
or watching a final crucifixion pass us by  
at that last  
quick intersection.

# Rick McKenzie



“3 *musicians*” Art by Hiram Lewis Silver City, NM

## EMPLOYEE POLICY

It's really quite persuasive, but it isn't what it seems.  
The deal that you believe you got is stretched over the need  
That torments the corporation. Where you think you stand  
But don't, and all that you will end up finally doing,  
Are masked by your perception of quite substantial gains.  
As this corporation pursues its ends through time,  
When necessity demands, its form will slowly change.  
No one will be missed, not you, your boss, nor CEO.  
There will be different ants and brand-new ways for cash to flow.

# Pamela Rader



Art © by Hiram Lewis Silver City, NM

## After Rain

Asphalt castaways form a U or sometimes S. Or sometimes they are an underscore (or a sans-serif \_ on its side). Ship-less shapes strewn on sealed surfaces. Hairless and sexless bodies: I wonder how they made their way to tar-plains. An ejection? Or carried abroad upon flowing lava of water & mud? Bathing in air not soil, some whole, some severed, waiting to reform and begin a new

# Stan Sanvel Rubin

## You Can't Belong Nowhere

You must belong somewhere.  
That's the nature of things.  
Everything has a place,  
even if nothing is forgiven.

The not-forgiven is a place  
of expectation. Of always  
waiting to be forgiven.  
It's a kind of ecstasy,

kneeling on a shore while  
waves pound to the rhythm of your heart  
and you constantly await  
the next wave's coming

which could bring with it  
a remedy, a way to acknowledge  
that it was not for nothing  
you came here to kneel

where the rim of salt  
is endlessly swept away  
by the water  
as it vanishes

and leaves you bent  
under the chatter of sea birds  
and veering sun  
where you were always meant to be.

## Apocalypse 2018

If this is epilogue for us all,  
let it be as splendid as the consuming fire  
crazed Nero watched from his battlements,  
his murderous father and mother long dead,  
playing a lyre, they say, maybe singing.

# Sanjeev Sethi

## Transference

Internalizing exertions is one way.  
Dry-heaving in dreams is another.  
Or regurgitating to ready and will-  
ing ears. Finding them is hazy and  
hazardous.

Expression of anger is proportional  
to the perception about object of ire.  
Positioning on the scale of success  
determines where the needle of inner-  
vations skids on the anger-meter.

## Restlessness

In miasma of many-flavored options  
we chose what we consider as the  
most appropriate: hindsight settles  
this, often telling us how little we  
know. From this mew I extend my  
presence by phrasing on fault lines.  
Filmic expanse doesn't excite me.  
I look for nuggets in narration. Has  
poetry turned into carriage trade?

# Stevan Cavalier

## BACON

### I.

F. called me and wanted to talk about something. He desperately wanted to talk. When I arrived, he wasn't at home.

Two weeks later, he collapsed on the street in Madrid. I warned him not to go to Spain. It was just a holiday he said. I was destroyed. It was a heart attack, everyone thought. He'd had a row with his current lover. But that was nothing new. F. was always prepared for things not to work out. Still, it was inevitable I suppose. Drugs. Alcohol. Exhaustion. Isolation. Impossible to calculate.

F. was attended by Catholic nuns in a Catholic hospital. I was not there.

He was reckless about his own life and the lives of his friends. He was a gambler and gamblers always lose. In the end.

He returned to dust. The dust that, mixed with life, turns into paint. The dust that turns into words. These words turn back to dust as I write them.

It was a time of Existentialism. We all loved Sartre. We all lived on the edge. Like every moment was going to be our last.

This came out in his work. Risk amused him. Chance. Accident took over his paintings. Every brush stroke was a gamble. Every umbrella must be terrifying.

Tomfoolery and twisted horrors, both poured out. Not just in the glistening sides of beef. The glaucous eyes. The crippled tripods. And there was the great central enigma. Where did all that bloody darkness come from?

Surely from a great well of guilt and grief. F. dredged up some of the most profound images in painting. He thought about death every day, always while painting, regardless of the subject, even the landscapes.

Painting mattered then. Journalists made careers writing about it. In those days, noses were broken in galleries.

F. was, of course, self-taught. He drew badly and was very self-conscious of it. And so he lacked a foundation. He never got over the shock of the human body. Its beauty terrified him. That was a part of his success.

What is it now what, five years later? His life seems even more monumental.

He always used his lovers as models. Dyer, his first, sang sweetly and played the piano.

A bourgeoisie, he was soft-spoken, straight-forward, soberly dressed. F. knew better. Dyer turned out to be one of the most sadistic men I ever met. They were often violent. Neither had any control over his emotions. F. was beaten up, regularly, which he invited and seemed to enjoy. His lover once pushed him through a plate glass window and he fell a full story into the garden, suffering permanent disfigurement, a recessed eye, that crooked upper incisor.

F. had the money to cover the dental work, to have his teeth fixed, of course, especially in those last years. But he liked to watch your eyes trying not to look at his mouth. The puckish smile. We can't resist imperfection in others, can we? We stare at it until it turns into art.

Why he painted teeth, I think, rotted from howling, later on from meth. Gray stubs, filed daggers in vicious sooty slots. Bloodied lips, smeary crimson coronas, as if the subject had just dragged the back of a hand across his wounded mouth, the hand he'd used to punch another drunk. Likely someone bent over a pool table, whose shot he'd ruined nuzzling their bum.

You could count on F. to make you feel safe in a bad bar.

## II.

Let me show you the walk-in fridge.

He liked to paint in meat lockers. He actually rented one. He painted in boxers and a coarse wool cardigan that stank of mutton. He painted meat. On the meat, I mean. It was always too gray for him. He glazed or scumbled on crimson where he needed to. Kept a hair dryer on a shelf.

Which brings me to the paintings. The fatted arches of maroon meat, draped over ivory scaffolding. Hacked and flayed, glistening. Ribs stacked or hooked on chains. Then he added a pair of clouded eyes to chill the viewer with his judgment.

He kept almost all his of paintings at the studio. Entering his apartment, final abattoir, I was thinking about his best known triptych, *Three Studies for the Crucifixion*. Featuring Dyer. Banished in the first panel. Darkly beatified in the third. In the middle, a bloody, mangled horror. F. described it as someone shot to pieces on a bed. It was then hanging at the Tate.

I looked for a note, evidence. The apartment was still locked up, two days after he died. A dark, disheveled warren. More days went by. No one ever came but me. No note. But no lack of evidence.

## III.

*In Lying Figure with Hypodermic Syringe*, he'd nailed Dyer's image to the bed with a hypodermic needle. This offended his model. Fucking God, Dyer said. What's that? F. clapped

his hands, one, two, three, his face split open laughing. Spewing fog and spittle, propped against a lamp post, he pushed harder, howling at Dyer, hoping to be slapped. Dyer had seen plenty of him like this, and simply turned back. As usual, an eerie calm, cool and beautiful, settled on the scene. In fact, this time they'd had enough. F. lit a cigarette. Dyer was at last gone. It was to be the beginning of a new period. The late landscapes.

There were only ten before F. died. Some of his greatest works. Of course, there were scores more he had me take a carpet knife to. Every time I cut up a painting, there went a million pounds. I would give the man at the dump a fiver and make sure he burnt them right before my eyes.

#### IV.

Dyer had moved to Tangiers years before. F. received word of his suicide at the opening of the 1971 retrospective at the Grand Palais. Dyer was found slumped on a filthy toilet in a squalid hotel room, asquat the cuckstool, as Joyce so memorably put it in *Ulysses*. News of Dyer's death arrived like a manifesto. F. decided not to mention it in his celebratory remarks and discussed the triptych as if its subject was still alive. The thing was, the news in all its grim horror had traveled fast, like any bad news, and everyone at the reception knew of his lover's suicide and correctly assumed that F. knew as well. F. was anecdotal, animated, engaging, speaking in French as he always tried to do at French openings. His accent was very bad which would have otherwise charmed and amused. No one was really surprised about Dyer, but to hear F. speak of Dyer's currency in his life was deeply strange and unsettling.

#### V.

I'd come knocking at least once a week. I'd wash his dishes, straighten up if he let me. Sometimes he would invite me in and sometimes he wouldn't. There was always something private happening, even if no one was there. Whatever it was that occupied him, he had to devote himself to it completely. Never any TV going, no radio. He kept no books in his studio, and just a few were scattered around his apartment. I'd offer to play something I'd composed. It was harder to turn me away with a guitar slung over my shoulder. That usually got me in.

F. was aggressively clever, always on, almost giddy. At times, in the driven banter, I felt an underlying strain of melancholy. I told him some of the saddest music ever written was composed in C major.

You could rarely tell if he had been drinking, but it was always safe to assume he had.

He looked to his friends who knew little or nothing of making paintings, for answers to impossible questions. He asked us. Is this one done? I think I finished it Monday. Over here, did I get this part right? How do you trap reality without making an illustration of it?

He knew his models inside out. They were, after all, his lovers. And that's how he painted them, inside out. When you paint someone, he told us, you are of course painting yourself as well.

He told everyone he painted all night, and I think that was mostly true. If he had to lie down, he got up immediately and began to paint again. Clearly, he was chronically under-slept. If

dreaming is essential to mental health, as they say it is, I think he put in his dream time while painting. But, if the paintings reflect his waking dreams, I understand why he never wanted to let himself go to sleep.

I got 4 million in US dollars and two paintings out of all those years. Everyone assumed I was gold digging, and, although I don't think it ever crossed my mind, that still troubles me.

# LITERARY BIOS

## Fall 2018 – Volume 6 Issue 2

**Cathy Allman** entered the writing field as a reporter after attending the school of Cinema and Television at the University of Southern California. While her career shifted gears from writing to advertising and marketing, she never stopped writing or attending workshops, eventually earning an MFA from Manhattanville College. She's reinvested in her writing, teaching creativity workshops at high schools and at her Connecticut office. Allman's poem, "Not in the Wonder Box" has been nominated for a Pushcart Prize.

**Dean Baltesson** is a poet and musician living in Victoria BC Canada. He is currently working on a volume of poetry entitled *There Must be Words To Describe This*. His poetry can be found in a number of online and print literary journals or on his recent CD "Covering Ground."

Roy Bentley is the recipient of a Creative Writing Fellowship in Poetry from the National Endowment for the Arts, and fellowships from the Florida Division of Cultural Affairs and the Ohio Arts Council. Books include *Boy in a Boat* (University of Alabama Press), *Any One Man* (Bottom Dog), *The Trouble with a Short Horse in Montana* (White Pine Press), *Starlight Taxi* (Lynx House Press); as well as *Walking with Eve in the Loved City*, a finalist for the Miller Williams Poetry Prize and published by the University of Arkansas Press.

**Stevan Cavalier** is a retired physician, writer, artist, photographer, professional pianist. BA (cum laude) English Amherst College. American Academy of Poet's Prize.

**Sandra Kolankiewicz** Over 300 hundred of Sandra Kolankiewicz's poems have appeared widely, most recently in *Adelaide*, *London Magazine*, *New World Writing*, *Per Contra*, and *Appalachian Heritage*. *Turning Inside Out* was published by Black Lawrence. Finishing Line has released *The Way You Will Go* and *Lost in Transition*. Her novel *Blue Eyes Don't Cry* won the Hackney Award, and her collaboration with artist Kathy Skerritt, *When I Fell*, a novel with 78 illustrations, is available from Web-e-books.

**George R. Kramer** Entering his seventh decade on this strange orb, George R. Kramer finds that the shadows of late middle age add a different depth to the world that he perceives, and tries to offer that altered perception in his recent works. His most recent published poem is in *Sincerely Magazine*.

**Hiram Lewis**, MFA, lives in Silver City, New Mexico.

**Stephen Massimilla** is a poet, scholar, professor, and painter. His multi-genre volume *Cooking with the Muse* (Tupelo, 2016) won the Eric Hoffer Book Award, the National Indie Excellence Award, and several others. Previous books and awards include the poetry collections *The Plague Doctor in His Hull-Shaped Hat* (an SFASU Press Prize selection); *Forty Floors from*

*Yesterday* (the Bordighera/CUNY Prize winner); the sonnet sequence *Later on Aiaia* (Grolier Prize winner); a Van Rensselaer Award, selected by Kenneth Koch; and translations of books by Neruda and others. His work has appeared recently in hundreds of publications ranging from *Agni* to *Colorado Review* to *Denver Quarterly* to *Poetry Daily*. Massimilla holds an M.F.A. and a Ph.D. from Columbia University and teaches at Columbia University and The New School. (For more info: [www.stephenmassimilla.com](http://www.stephenmassimilla.com) and [www.cookingwiththemuse.com](http://www.cookingwiththemuse.com))

**Rick McKenzie's** work has appeared in *Yale Review*, *Mantis*, *The Round*, *Minnetonka Review*, *Wisconsin Review*, *Pearl*, and the anthology *Hipology* from Broadside Press. He taught preschool for many years, then worked as a park ranger. He and Barbara enjoy camping, canoeing, snorkeling, and just about anything outdoors.

**Pamela Rader** was a transplant to the Rocky Mountain region where she felt at home in the open spaces and earned her Ph.D. in Comparative Literature. She teaches literature at Georgian Court University, a small liberal arts university in central New Jersey. While she has published in the field of literary scholarship, Rader is thrilled to publish again in *Red Savina Review*.

**Stan Sanvel Rubin's** work has appeared, most recently, in *Poetry Northwest*, *Sheila-nagig*, and *Shanghai Poetry Review*, and is forthcoming in *One* and *Agni*. His fourth full collection, *There. Here.*, was published by Lost Horse Press in 2013. He lives on the northern Olympic Peninsula of Washington.

**Sanjeev Sethi** is the author of three books of poetry. His most recent collection is *This Summer and That Summer* (Bloomsbury, 2015). A Best of the Net nominee (2017 & 2018), his poems are in venues around the world: *The Best of Mad Swirl: v2017!*, *Poetry Super Highway*, *48th Street Press*, *The Metaworker*, *The Broadkill Review*, *The Five-Two*, *Pyrokinecton*, *Unlikely Stories Mark V*, *A Restricted View From Under The Hedge*, *Ink Pantry*, *Amethyst Review*, *Beakful | Becaquée*, and elsewhere. He lives in Mumbai, India.