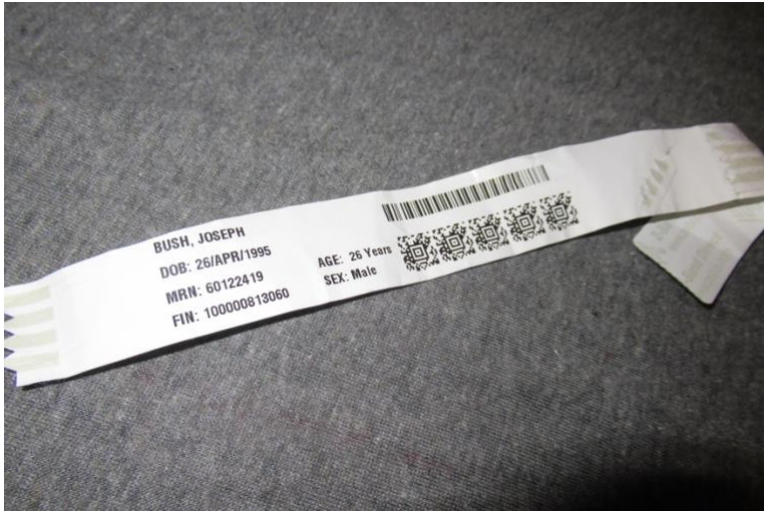


SEPTEMBER 29TH, 2021

A Full Day



Joseph Bush

Part I: A BAD MORNING

So I wake up earlier than usual, probably like 8:15 AM or so. Otherwise, things are regular, as scheduled. I have the yogurt and the cup of coffee. Twelve ounces of it. Mug I'd bought at a Wal-Mart sometime when I moved into my old apartment last year, Sporting KC logo on a blue background. I don't have a coffee maker so I use store brand instant coffee with water boiled in a kettle. I'm watching the show I always watch on the NFL Network to start the day.

I have another cup. Then I feel my heart race. Then I feel my stomach. I take a shower and try to convince myself that it's in my head, a minor issue. My heart's still racing. Too much coffee on a not-full-enough stomach. Maybe that's really what it was, maybe I got nauseated because my heart was racing. I have class at 2:30 so if I need a little time to recover from this, then I can take a little time to recover from it. It's about 10:00am now. I'm getting dried off and I'm in distress. Abnormal distress. Heart still racing. Hard to balance upright. Hard to think straight. It hasn't gone away. I drink a little water. I fill a different mug - this one a gift from my mom, personalized and has a cartoon image of a little dog with the name Teddy (which is our dog's name) beneath it - up with water and take sips from it every now and then.

I keep trying to convince myself I'm not going to vomit and I won't need to vomit. A need to vomit changes the trajectory of an entire day. This was the case during the Ketel and Pink Snapple (The Kimberly) Incident of the night before the dog's birthday of 2020. This was the case during the New Year's Eve 2019 incident.

But it hits me. I grab the trash can. I take the bag out of the trash can and set it on the counter but I feel too weak or too flustered to get another one in there and the ones I have don't really fit in the trash can all that well anyway so it'd be a stupid point and plus I know nothing's coming out, nothing ever comes out.

I cannot vomit.

In 2010, as a fifteen year old, I was diagnosed with an esophageal condition named Achalasia. Achalasia affects about 1 in 100,000 people, according to two Wikipedia citations that I'm not going to be able to check though I guess I could, I think I have access to JSTOR through this institution, but I trust the editors of the Esophageal Achalasia page on Wikipedia.

Basically, my lower esophageal sphincter does not open on its own. Yours probably does. You'll probably go your whole life never thinking about if your lower esophageal sphincter is going to open. I remember when it hit when I was fifteen, drinking a whole bottle of water and it just stopped there. I had to like strain myself, convince the lower esophageal sphincter to open and let the water down. If you've seen me eat that's why I eat that way. Doctors told me (well, told my parents, I was fifteen) that the condition was likely to advance at some point to a point that it would become incredibly painful to eat. They recommended surgery, a Heller's Myotomy.

Ernst Heller developed this surgery in the early 1910s, again according to Wikipedia, this claim uncited, so take it with a grain of salt, but again I trust the editors of the Heller's Myotomy page on Wikipedia. The Myotomy itself just involves cutting the muscles of the lower esophageal sphincter so that food can more naturally slide

down at 9.8m/s^2 , but this also makes it quite easy for anything else to get back up when it wants to. So often surgeons (as mine did) take the nuclear option and add the fundoplication, which involves sewing a part of the stomach to the bottom of the esophagus, so that anything that wants to come up hits the bit of the stomach sewn to the bottom of the esophagus.

And that means anything. And anything means vomit. I cannot vomit.

That's the definitive fact that I use whenever I get the "tell us a fun fact about yourself" thing when people introduce themselves to one another. I got the idea to do that from a guy I used to work with who lost his sense of smell and would tell everyone that. The other thing I would say is that I almost accidentally hit an NBA player with my car once. As of last month I can also say that a fun fact is that I talked to C.J. Brown once at a hotel. That might take over. But only among people who know about former USMNT and Chicago Fire players. Is that the most famous person I've spoken to? Maybe. I think I talked to Klint Kubiak once. I remember interacting with him in some capacity.

Here's that list of the most famous people I've ever interacted with, if you're wondering:

1. Don Fambrough (former Kansas football head coach who I shared an elevator with once when I was ten)
2. Klint Kubiak (current Minnesota Vikings offensive coordinator, not sure if I 'met' him really. I think just brushed by him and maybe said something when he was an assistant at KU. I was at a bar where Landon Donovan was once but like I never spoke to him so I don't know if that counts. I don't think it counts.)
3. CJ Brown (Former Chicago Fire and US National Team player)
4. Sarah Z from YouTube

Anyway, because of the fundoplication necessitated by the Myotomy undergone because of the Achalasia, I am unable to vomit. This does not mean my body doesn't try, and if it starts trying, it becomes a lengthy ordeal to get it to stop. Very little gets it to stop. As I learned during the 2014 Sugar Bowl Stomach Flu incident, it typically only ends with diarrhea. Whatever the road it takes to get there, it ends with diarrhea. The whole game is to induce diarrhea. Really by any means necessary.

But on this morning, I start trying to vomit, and naturally, because I can't vomit, nothing comes up. At one point I get a heel of bread from a loaf of bread I bought from Sobey's grocery store (For the purposes of this piece, think of it as Chekov's grocery store) And I bit into it. I don't buy bread with like seeds in it all that often but I did in this instance, I thought it was just normal multigrain but it's got a Rye flavour to it which is normally fine but I know I'm gonna make PB&Js with it while I've got it. Anyway, that flavour really didn't sit well with me so it made me try to vomit more. There was like a half eaten piece of bread next to the cup of water on the desk mocking me.

The big problem with being unable to vomit is that the exigence to vomit is unchanged. My body still knows that it wants to vomit, and it still tries. Lloyd Bitzer called an exigence anything that could be altered by the injection of rhetoric, which is constrained by outside factors, the effect of which is measured by its impact on the audience. The inner workings of my body are very similar to this. I believe this is what people mean when they refer to "Body Rhetorics". My body has the exigence of stummy hurts, which could be altered for the better by the injection of vomiting, which is constrained by being unable to vomit, which affects the audience of myself with negative feelings and constant dry-heaving.

At a certain point I lay down in bed after a comically difficult time trying to get my shoes off. I realize it's very eerie laying in a completely silent room feeling like I'm going to die so I play a CD copy of Joanne Brackeen's album "Havin' Fun" on the boombox I bought at Value Village for 6 dollars a few weeks ago. It did not help really with anything but you can look it up if you want to hear the same music I heard when I was at this part of the story.

At this point, it gets to be too much. I grab the trash can and try to vomit. It's a kind of wishful thinking, grabbing the trash can. I know nothing will come out. I could just sit on my bed and dry heave at nothing but it's nice to hold the trash can. Plus, in the off-chance that I do one day actually projectile vomit (which I believe would mean I'd have to get another myotomy done, or at least another fundoplication done), I'd be better off having the trash can than having no trash can.

I do that for a few minutes, probably like six heaves in total (generally it's between four and eight or so) and then I feel a little bit better. This is another part of a day like this, it's generally all bad, like I'm typically at between a 1/10 (during the active heaving bits) and a 3/10 (during the bulk of the rest of the time) but immediately following the heaving, I feel like I'm at around a 5/10 or so for probably a fifteen minute period, give or take. This is the peak among valleys. I can remember that these peaks, when they happened during the period of my life when I could vomit, typically resulted in much shallower valleys, as once what was causing the ailment was purged, the illness became less intense. I think back wistfully upon those halcyon days, age fourteen, carsick and just puking, just everything coming out that was supposed to come out. I hated it back then but I'd give so much just to feel the sensation of something evacuating my stomach again,

heaving my body so hard that I feel a sensation in my pelvis, blood vessels bursting in my cheeks.

At this point I have minor flashbacks to a box of Nauzene that I know I've seen at some point recently. I check in the box I keep all my medicines in and it's not there. I check behind the mirror in the bathroom, I check under the sink, I check the box I kept a bunch of auxiliary stuff in that's under my bed. Not there. I keep thinking. At points like this when I'm in intense intestinal distress I tend to slip in and out of consciousness of the world around me and into a sort of mental existence, probably best compared to the museum from the [DK Eyewitness VHS tapes](#), you know where the parrot flies around and there's the little panflute tune playing, and at some point I see the box of Nauzene and I'm trying to tease out what the scenery around it is, and I see the beige vinyl seating of a 2015 Toyota RAV4 and the CD case for Bloc Party's Silent Alarm.

It was in my car, is what I'm getting at. It was in the back seat of my car. I have to leave my room. I should also preface that I live in a dormitory in a single room on the sixth floor. I put on my shoes and I go down the stairs and I get to my car. I find the nauzene tablets. I take them back up to my bedroom. I feel like I'm going to die climbing up the stairs. I get back to the door and I take a tablet of Nauzene.

This is the watershed moment of the day. There have been many days (such as the Day of the Dog's Birthday 2020, which immediately followed the aforementioned Ketel and Snapple night) where taking the Nauzene represented the final valley. There have been days when it was not the final valley, and the heaving continued for a few hours.

There's a very tense thirty minute or so period that follows taking the Nauzene, where i stay seated on my bed, and then an absolutely devastating moment where I again feel the urge to vomit, and end up dry heaving towards the trash can. The recognition that the stuff I have will not do the trick is what moves this from difficult morning (It's like... 12:30 PM by this point probably) to probably the rest of my day ruined. I email the professor teaching the course scheduled at 2:30 that I'm not going to make it. I begin searching for a walk-in clinics.

Part II: THE WALK IN CLINIC

I find a walk-in clinic on Google Maps. It has a 4.5 star rating. I begin to drive there. It's at the intersection of Albert street and Hazel street. Albert and Hazel, I repeat to myself. Sounds like a nice children's television program about a friendly owl named Albert and his friend Hazel who is a squirrel who get into misadventures because Albert's friends are all owls and they like to eat little mice and things of that sort and Hazel is only a little bit bigger than the mice that the owls like to eat but Albert says "no, she's my friend don't even think about eating her" and on the other side there's Hazel's friends and family, all squirrels, who don't trust an owl because owls eat rats and mice only somewhat smaller than her (I sincerely hope that owls actually do eat rats and mice, now that I'm writing this, I can't say for sure if owls eat rats and mice, and I'm not fucking looking it up at this point I've already done all the research about what a fundoplication is, but I think that owls eat rats and mice. Squirrels just seem too big for an owl to eat. But it's not out of the question, though, right? I don't think it's out of the question, I'm sure a few owls have thought about eating squirrels before) but love and friendship win out in the end and Albert and Hazel have lovely adventures in the forest. It could be a racism allegory, teach kids to love one another's differences and the common ground upon which they find between themselves. The final episode would be like how Dinosaurs ended where Albert accidentally causes the forest to be chopped down by a beef processing plant.

So I find Albert street. The most fucked thing about this town, maybe really this part of the continent because it was a problem for me during the Three Days in Detroit as well and I don't remember it being a problem when I was in Quebec, is that the street signs are just miniscule. I'm constantly searching out for them on a good, regular

day. At one point I see the Albert sign on a lamppost and I get into the left turn lane but I keep looking at what I thought was the lamppost where I saw the sign, but I don't see the sign, and I just have to put my faith in the idea that it was the right street sign and I didn't just hallucinate the street sign. (It turned out that I had seen the street sign, it was on the lamppost that was suspended above my car, and I was making the right turn).

I have not changed the CD in my car since I arrived here at the beginning of September. It is Bloc Party's Silent Alarm. I am in an emotional state too volatile to listen to Bloc Party's Silent Alarm. If we get to Little Thoughts I will crash the car. I press the RADIO button. It's on SiriusXM 157, SXMFC. Jason Davis's show about American soccer is on. The USMNT roster for the upcoming World Cup qualifying window is to be released tomorrow. He's talking to Matt Doyle about who they think will get called up. I can appreciate both of these men in controlled doses but cannot handle both while I am in this state of near-death. If we get to Matt Doyle and Jason Davis arguing about Gyasi Zardes' form I will crash the car.

I turn the stereo off.

I pull into the parking lot and I'm just overcome with the need to vomit. I open my car door after parking and heave towards the pavement. Nothing, obviously. I remember reading from a guy on a Facebook Achalasia support group a long time ago that he had success by laying himself out across the front two seats of his car and getting into a position where his head was at a lower level than his stomach, like his feet laid on the passenger seat, his waist right at the threshold of the door, and the torso angled downwards towards the pavement, and he had success because the gravity helped overcome the bit of the

stomach in the way of the esophagus. I tried to replicate what he said to do, awkwardly repositioning myself. Boy did I heave. And you know what? Something came out! Just a bit, like not a lot, but more than nothing! I will have to find a method of replicating this in the future because I think if I practice at it more it could provide a sort of pseudo antidote that doesn't end with me going to the hospital. Regardless, I'm here, so I should at least try to get help.

I go into the clinic. They tell me to sign in on a little clipboard and sit in the waiting room. The waiting room is a collection of six chairs stanchioned off by a chest-high wall. The time I sign up for is 2:30pm. It is 1:35pm. I take my seat in the waiting room well aware that I'm going to feel the need to vomit at some point in that 55 minute period. There is a man who leaves the doctor's office. There is a cab outside to take him back to the nursing home where he lives. The man denies that this cab is for him and comes back in and asks them to call another. They remind him that the cab outside was called for him but he does not agree. I am at the peak of my post-heave decent period but I realize I'm not going to get helped in time. The cab drives away without the man. It is 1:48 PM.

I stand up, cross my name off of the clipboard, and walk out. I walk across the parking lot to Dollarama. I need water. I hold the door for a guy and he says nothing - Really way more people say nothing when you hold doors for them here, way more than anywhere in the US where I've lived. I always heard about how polite the Canadians were, maybe it's just in this city but many have them have been very cold to me, not to take that specific circumstance of somebody not saying thank you when I hold the door as microcosmic but it's been interesting, people really look right past you here. Many have been very pleasant and interesting people, though, I do not mean to paint

the people of the KWC region of Ontario with a broad brush, but it's that sort of very surface-level politeness that I thought was a stereotype of Canadian people. (And this is not to say that politeness is evidence of one's total quality of character, either, I've known very polite people who turned out to be cruel in their actions and brusque people who I found admirable. I remember reading a Cracked dot com article in like 2011 where the columnist called "not thanking people for holding doors" like his number one red flag about whether someone was going to be a good romantic partner or not. I didn't agree with him then but I get the point.) Anyway I get a bottle of Aquafina and a bottle of Schweppes Ginger Ale from the cooler. They're both a Dollar. Total cost is 2.25. I give the lady at the counter one of the big 2 dollar coins and root around and hand her what I pray to god is a quarter because I don't know for sure and I expect at any moment someone's gonna point at me and yell FOREIGNER whenever I slip up and give someone a nickel instead of a quarter. It was a quarter. I leave with my two bottles. I take sips from the Aquafina and start my car. I am going to the emergency room.

PART III: APPROACHING THE HOSPITAL

The hospital is on King Street just south of Union street. King Street is the big street of downtown Waterloo, half of which is taken up constantly by pedestrians and the other half of which seems to be under construction. I pull on to Albert street, adjacent to King Street, which was a smart decision because if I'd pulled on to King Street I would've had to wait out the pedestrian traffic while also dry heaving as I drove. Because I had the urge to dry heave as I drove. I took Albert to its end, pulled off on Caroline (I want to pause for a second and give a juvenile snicker at the fragment immediately preceding this parenthetical) and then took that street past the Willis Way station, which I remember vividly because it's at that point that I start dry heaving. At this point, I've reached a state of self-acceptance, because there is no bucket, nor any trash can, and were I a normal guy I would have to accept vomiting into my own lap.

However I am not a normal guy, as established many times before in this work. I begin just screaming as I dry-heave while also trying to not drive the car off of the road. The thought crossed my mind to pull into a parking lot and crawl out of the car and yell "call an ambulance, please" at somebody, but I was only a kilometre away from the hospital and I don't know that anyone here would call an ambulance for me as I lay dry heaving in the parking lot.

I continue driving. The urge to heave subsides. I pull into the very small parking lot of the Grand River Hospital Emergency Ward. I try to figure out how to pay for parking but I can't and I just accept I'll get ticketed. It's really kind of a cruel thing to do, make people pay for parking outside of the emergency ward. Don't they realize I feel like I'm going to die and cannot possibly figure out how to work the parking ticket machine in this moment of distress?

I walk up to the booth. They give me a new mask and tell me to put on hand sanitizer. The guy there asks for my health card number. I have only the health card that they give to international students, and only a digital version of it saved on Google Drive anyway. Regardless, I tell him the number I have. He instructs me to sit in the waiting room.

Part IV: THE SEVEN ROOMS OF THE HOSPITAL INTERIOR

ROOM 1: THE TRIAGE WAITING ROOM

It is 2:20 PM and I am in the triage waiting room. It hits me that I don't know what triage means. I have reached the age of 26 and couldn't tell you what the word triage means. I know it's a word associated with hospitals. I looked it up after I wrote the first sentence of this paragraph, so I know what it means now. This is what I mean when I tell people that I like to think of the rest of my life as an opportunity to learn as much as I can about the things I don't know. If this day hadn't happened, maybe I wouldn't have needed to learn what triage means. Maybe I would've made it to 27, or 30, or 40 before I learned what the word triage means. As I wait in the triage waiting area, where they determine the severity of my ailment and prepare to send me to the proper place to receive treatment, I think of the future. I think the thought that I often think, in particular that I've thought a lot since I came here, which is "this will be interesting to look back upon in like a decade." It also dawns upon me genuinely how terrifying this situation could be if I choose to look at in this specific way:

I am alone in a new city where I know nobody. I have the phone number of two people who live in the region, one is the director of the residence hall where I'm supposed to start working my first shift tonight at 7pm, and the other is a classmate who, while very kind, I do not know well enough to ask to take me to the hospital. My closest relatives by proximity are in Nashville. My closest friend by proximity is either in Illinois or Kentucky (I haven't done the measurement of which is closer). Regardless, everyone I know and really have ever known, save for a few people I met in Quebec five summers ago, lives in a different country. There is still a restriction on

who is allowed to cross the border between the two countries that separate me and them, so even if they wanted to help, they realistically could not.

I am alone.

Before I can consider this thought any further, I am called in by a very friendly nurse who asks me basic information about myself. They had a Joseph Bush on file but he was born in 1949. She assumed he was not me, correctly. I explain my situation, my symptoms, how I can't vomit, I ask if she's heard of achalasia and she says no so I have to explain to her the whole deal. She asks me if I'm okay with doing some blood work before I move on and I answer honestly that I could not handle blood work at this moment. I passed out during the last time that I got blood work done. I don't know if passing out while also not having been able to eat any food and also being very dehydrated over the course of a day could kill someone, but with my luck being how it was on that day, I was uninterested in taking the chance

Thankfully I was allowed to decline. They sent me to another desk where they had me fill out a pen and paper form of my insurance information. Apparently this did not go through where it was supposed to because I got a call on the subsequent day asking for all of that information again. After this point, they send me to the second, more general waiting room

ROOM 2: THE MORE GENERAL WAITING ROOM

The general waiting room is larger in size than the triage waiting room is. There is a television on one wall playing a very grainy feed of CNN. The headline is that someone wrote a book about the Trump administration. I don't remember who it was specifically, someone

from the inside, but all the big bombshell information drops I could see from the subtitles were like that Melania didn't care about being first lady, which I feel like we all could have gleaned. I'm surprised to see anyone still writing books about the Trump administration at this point, honestly, I feel like everybody moved on from buying books about the Trump administration about as soon as he was out of office. It hits me that I don't know what the current first lady is named. I've just looked it up. Her name is Jill.

At this point, not prompted by what I just discussed, moreso prompted by whatever within me has prompted every one of the events today, the urge to vomit returns. I stand up and try to find the washroom. They call them washrooms here. That's the biggest difference I've seen between here and back home. We say restrooms back home and they say washrooms here. It never made sense to me why we called them restrooms. I remember my PE teacher Mr. Ufford from elementary school asked that question once, "Why do they call them restrooms? You don't rest in there." That planted the seed. He said that to a class of first graders. You know, he was probably about the same age that I am right now back then. I couldn't imagine asking a question about why we call restrooms restrooms to a group of first graders at this stage in my life. But that's why I teach college students instead of elementary school students. I digress.

I walk to the washrooms. There are two of them. I put my hand on the handle and try to turn it but it's locked. The one next to it is also locked. I utter an expletive and stand back to wait for someone to vacate them.

“There’s nobody in either of them” says a voice from behind me. I turn to ask him if that’s true and he says yes. “It’s strange, you just have to press the button that opens it automatically.”

I thank him for the information and press the button. The door opens. It takes like five seconds to open. It remains open for like ten seconds. That might be an exaggeration, but it’s agonizingly long. The door remains open and I stand there like a dope because I don’t want the helpful person on the other side of the door to see what I’m about to do, which is that I’m going to lay down on the floor of the washroom and try in futility to vomit into the toilet. I stand straight up, all-out warfare raging in my stomach, and wait for the door to shut (even once it begins to shut, it takes a comically long time to shut), and as soon as it latches I hit the “LOCK DOOR” button and I lay down on the floor of the washroom and try in futility to vomit into the toilet. I do not vomit into the toilet. I only heave about three times.

I accept my fate and stand up, wash my hands, and as soon as I leave the washroom, a nurse calls my name to go to the next waiting room, among a group of four others.

ROOM 3: I DO NOT REMEMBER WHAT THIS WAITING ROOM WOULD BE CALLED

This was like a secondary waiting room after the primary waiting room. I sat on a chair next to a trash can, well aware that I will likely feel the urge, well aware that the trash can would be pointless but also I don’t want to freak anyone else out by just dry heaving at nothing out of nowhere.

At this point, I make a decision that will come to define the day for me. I feel significantly better laying down than I do sitting down, but

in the prior waiting room, I was too embarrassed to lay down. But in this situation? It was either lay down or suffer. I looked around at the other people.

What would they think? We're in a hospital. Are they going to complain that I'm being uncouth by laying down at the hospital? I'm not taking up any personal space from anyone else, not kicking anyone or anything. I am simply going to lay down on the floor, which I acknowledge is relatively dirty, and put my head next to the trash can, really just for appearances at this point. it's an emergency room. You go to an emergency room in cases of emergency. In this case of emergency, I needed to lay down. Nobody around me says anything. If this is uncouth, then so be it. If any of them needed to lay down and decided to lay down, I would think nothing of it, I would support them fully. We're all suffering here.

About now was when I lost track of time, accepting that the need to lay down on the floor superceded my need to fit social norms I believe threw many other mental concepts out as well, one of which was my internal clock. I could not give you an estimate for how long it was that I laid on the floor, nor pretty much anywhere else. I wouldn't look at my watch again until I reached the sixth room. I laid stationary on the floor, fully clothed, head in proximity to one of those beige wastebaskets that I only ever see in industrial settings. There was an uneaten half of a Tim Hortons breakfast sandwich in there. Sausage and egg, probably. I heaved about twice into that trash can, to no avail.

I suppose the most accurate statement here is that I stopped perceiving time. The hands on my wristwatch moved as I laid there motionless, surely, but I paid no attention to them. If they had remained in their

position and suddenly snapped to the position that I saw them at next shortly before I looked at them again, I would not have known. I could guess that this did not happen, because watches don't work like that, certainly not watches I got from the internet for twenty-five dollars, but if it had, I wouldn't have known. The internal structure of my thinking also seemed to slip away along with the perception of time and my recognition of whether or not it was an acceptable idea to lay on the floor.

Lines of thinking started, stopped, intersected with other lines of thought. Every now and then I'd remember two things - first that I was going to die one day and that it could be this afternoon, second that I needed to e-mail my manager and let him know I was probably going to miss my shift this evening. I had a sense that it wasn't yet evening.

Eventually my name was called. I stood up very quickly, more quickly than I should've, but I was embarrassed about being on the floor, and they led me to Room 4.

ROOM 4: THE ONE WITH THE BED

Part of my reasoning for going to the hospital was the negative emotional aura within my room at the time. I somewhat believe that a few more Nausea tabs would have eventually worked out, but the negative emotional sensation of being in that bed in that room might have outworked whatever medicinal benefit the nausea would have had. I wanted to be in a bed. I wanted an IV as well, but really I wanted to lay in a bed. I just wanted to lay on something for a while, something that wasn't my bed in this cramped room in student housing at this institution I shouldn't have come to.

This desire came to its most intensive in the form of a vision I had at some point, either before I left for the walk-in clinic or while I was in the waiting room at the walk-in clinic or while I was driving from the walk-in clinic to the emergency room: A memory of getting the flu in the tenth grade, laying on the couch in my parents' living room, figuring out what the Roku box they'd just bought did, and watching the entire first season of the Twilight Zone on Amazon Prime on said Roku box. Simply the feeling of that entire day.

This vision had unlocked a free-flowing yearning that was counterintuitive to making it through the day without completely losing my emotional composure. A yearning for childhood, certainly. I suppose a yearning for safety, though I never felt unsafe during the day, and I developed a complete revulsion for the word 'safe' and 'safety' and all its offspring over the course of the pandemic (I can't listen to Hyperballad anymore. It was my second favorite song on Post behind Possibly Maybe before 2020 but now it's like well down the list, I just don't want to feel a yearning for safety anymore, fucking everything was about something not being safe or something being not safe enough and it was all the fucking time that nothing was safe. I think my second favorite song on Post is I Miss You, now, which is a great song, but they got Jon K to do the video, and I have a visceral hatred for all of his work so I can't watch the video but I don't really watch that many videos anyway), so even if it was safety for which I yearned, I will not admit it.

I think I really yearned for something to make sense.

When I zoom out from my life (I hate the word "zoom" too now, for the same reason), years from now, when I think about this day, when I see this post on the site still, I'm going to have to remember it in its

place among the days which build upon each other to form the entirety of my life. September 29th, 2021 happened during the point in my life that made the least sense in the broad scheme. Very little I've done in the lead up to this day makes sense to me any more and I cannot imagine what I in the future will remember about this time. I stunted my life for a year and a half chasing an opportunity that I regretted being offered. I lived in Canada for four months when I was supposed to live there for four years, and I knew I no longer had the desire to do what I was there for when I moved there, and I knew only like two weeks in that it wasn't going to work out and still (probably) spent the remaining three months there despite this recognition.

I suspect that I'm going to think "how fucking stupid" of myself during that time, how I knew it didn't make sense and did it anyway. This time, I mean. The time I'm living in right now. I had mental health professionals tell me what I was going to do didn't make sense, remind me that I was an adult, that this wasn't some Sisyphean requirement, I wasn't cursed to do this, to move to a new city in a different country during a time to undergo a strenuous research-focused academic endeavour like this when everything was still so heavily affected by the pandemic, I could've just said no and moved on with my life.

That day on that couch at my parents' house made sense. I was sick so I couldn't go to school, so I could go downstairs and lay on the couch and nap and rest for a while and watch an old TV show for five hours. If it got to the point where I needed to go to the hospital, my mom or dad could drive me. That's what I yearned for. It all made sense. If I felt bad, I could lay down in another room instead of my bed.

Room 4 had a bed. It was one of those beds that was tilted upwards a little bit. I sometimes wonder if I would sleep better night-over-night in a bed like that compared to completely flat beds I've slept on all my life. I heard once that in the pre-renaissance days people used to sleep in a position like that, sort of inclined upwards, head above the rest of the body - I don't know if this is for sure something that people did back during Medieval times or not. I've just spent the last twenty minutes looking to see if this is true and I've found a guy on Reddit who says that the Swedes in the mid-17th century thought that laying down prone might cause the contents of one's stomach to leak to their head, which is sort of funny given the whole situation I was in.

I should also clarify that Room 4 was less of a room and more of an alcove with a screen that could be slid across for privacy, which was not slid across for the entirety of my time in there. I placed all of my belongings on a table next to the bed and laid on the bed. What followed was another period that seemed out of time. The angle of the bed had me looking upwards at the ceiling and I could only vaguely make out what was going on around me through sound. All of that sound sort of blended together to make a very nice ambient soundscape which worked perfectly with the state of half-delirium into which I had descended while laying on the floor in Room 3. In Room 4, a comfortable warm bed beneath me, a charmingly dull white noise surrounding me, and a beige ceiling the only thing in my field of vision, I descended back out of time. This was more than half-delirium, I think I may have broken the threshold of two-thirds delirium there. While earlier I could sense where trains of thought started and stopped, here they all seemed to be constantly running at a slow speed, with me sort of randomly tumbling without intention between them at different intervals.

It was kind of fun. It was a little like the first times I tried marijuana, when it was still new and fun, and I could just sit on the couch and let whatever came into my head come in and whatever left leave. I was drifting in and out of sleep. I don't think I ever fully fell asleep, it was like living in that space right between consciousness and unconsciousness when you start thinking things that signal towards real things but follow no real logic, when your brain's started to accept dreaming and your body's shortly to follow, but my body never really followed.

Scenes play in my mind with little of my control over them. Scenes from movies, lyrics of songs, conversations I have in my head. I see visions from seasons in sports video games I played through years ago, the lines blur between whether events I recall happened in reality or in the games. Did Dylon Smith ever start in a bowl game or did I make him do that in a video game once. It was against Illinois. Alamo Bowl. We beat them badly I think... Could be Rotterdam or anywhere, Liverpool or Rome... Oh what if Salt Lake got to play against Freddy Juarez and Seattle in the first round... Time to deliver a pizza ball... But wouldn't it be more interesting if Vancouver gets in again and they have to play their rivals Seattle in the first round... Mr. J really is the one writing the posts... I know it would make sense that the landlady is writing them but I think Mr. J's really writing them... Cowboys 3... Cowboys 4... Cowboys 5 Back At It Again...

Then there would be a loud page over the intercom that would keep me from falling asleep fully. A doctor would need to report to a different room. I would then briefly slip back into the stream of semiconsciousness. Then something would disturb me, then I would slip back into it... This continued for as long as it continued, until a man walked into the alcove and called me by my name.

“Joseph?” He was probably as tall as I am, a little heavy-set, gray hair, probably like ten-fifteen years older than me, blue scrubs, teal mask, goggles. “So, how’ve you been feeling?”

I explain my situation, my symptoms, how I can’t vomit, I ask if he’s heard of achalasia. He answers in the affirmative. He is among the first people I’ve ever met to answer in the affirmative. He may be the first person I’ve ever met to answer in the affirmative. I explained to him that I had a Heller’s Myotomy.

“Ah, so ya probably can’t throw up much, eh” He did have a significant Ontario accent. I’m not playing that up. Said throw up like “throah ahp.” He was very informal. Used words like “poops” and “farting.” I don’t know if that made things feel better or not. I’m very skittish about things like that. I very rarely will use the “farting” in conversation. Really it’s mostly rectally-related things that I’m skittish about, I find urine and semen very funny but I shy away from humour relating to shitting and farting. Probably something psychological about it. A Freud’s Boys thing. If I ever get wealthy enough I’ll have to hire a psychologist, one of the ones that doesn’t take insurance and it’s a couple hundred dollars per session, and see if we can figure that sort of thing out. It’s of no bother really if I never figure it out but I’m interested to know.

Anyway, he sort of pokes me in the stomach a little bit, asks if it hurts, I tell him no, and then he says they’re gonna take x-rays. He leaves the room. Another doctor, the one in charge of the x-ray stuff, comes into the room and hands me a gown, closes the gate thing on the partition, tells me to put it on. I do so. I don’t tie it up well, so everybody can

see some of my bare back, but again I'm in such gastrointestinal distress that I don't think about it.

ROOM 5: X-RAY ROOM

This one doesn't really deserve a full section. I spent 90 seconds in here, tops. She put a big metal X-Ray thing up to my stomach and told me to hold my breath, then I'd wait a few seconds, then she'd say "you can breathe." Very ship-shape, efficient operation in the X-Ray room there.

ROOM 6: THE FINAL WAITING ROOM

They lead me out of the x-ray room and to another waiting room, this one sans bed, this one only with three chairs, two of which are taken up by other people.

A nurse comes and hands me a blister pack with two pills. "This is Zofran," she says. "You can just put it under your tongue and it'll dissolve, so you won't need any water. Take both of these and I'll come talk to you again in about a half-hour and see how you're feeling, then we'll try to drink some water." I take the tablets. It's a little tough to get them out of the package. She doesn't give me the package, she holds on to it. I can't tell if I'm supposed to like pop them out with a finger or if she's supposed to let them just fall into my palm. I'm supposed to pluck them out with the thumb and pointer finger. They both dissolve under my tongue. I don't feel an immediate reaction and I'm feeling cynical given what happened with the Nauzene earlier. Zofran, from what I can tell from limited research online, is more powerful stuff than Nauzene. It didn't have an immediate effect, I still felt the pain in my stomach.

I look at my watch. It is 5:25 PM. I am probably going to miss my shift. I e-mail my manager from my phone and tell him I'm probably going to miss my shift. For some reason up until this point, I really believed I was going to be fine and would be both discharged and feeling well enough that I wouldn't have to miss my shift at 7pm.

Things did not improve after about ten minutes. I felt something odd, like a chill running through my whole body, and after a few seconds I found myself laying on the floor again. I couldn't tell if this was from needing to lay down in order to stop myself from vomiting, needing to lay down because I felt very weak as I had not kept much water down all day, or needing to lay down because it felt like the thing to do at the moment. Regardless, I laid down.

This was finally when the pain and nausea began to subside. It wasn't as triumphant as I would have liked, especially because I was still on the floor. Eventually I had to sit back up, I forget what prompted it, I think it was mostly a test to see if I could. I set myself to be absolutely crushed if the nausea would have returned upon sitting up, but thankfully, I didn't.

I've been unfortunately forced into using a smartphone again as my institution requires the use of the "CanAlert" application for COVID tracing measures. A whole significant chunk of why my brain turned out the way that it did I figured out was due to a sort of social media dependency that I was able to assuage through the use of a series of feature phones between January and August 2021 shortly before the move to Canada. A Nokia 225, then a Palm Phone, then an AGM M7. These phones each were very adept at not doing the things that I don't like in a phone while also not doing many of the things I do like, but I

made do. As a result of prolonged use of these, I became really good at going long periods without looking at my phone.

This is basically what I did over the thirty minute period, I heavily engaged in staring off into space. I'm really good at staring off into space. The one thing that I did on my phone during this thirty minute period was read a Matt Doyle article on the just-released USMNT roster. What stupid synchronicity, the rejection of his voice in audio as I was driving down to the hospital and the acceptance of his voice in text as I felt I might finally be close to leaving it. It is absolute bullshit that Matt Doyle presents the poetic bookends of this part of the story. I could have lied and said I looked up the lyrics to Little Talks by Bloc Party and kept staring at the chorus, "I'll go back if you ask, I'll go back if you ask me" and felt something deep within me but obviously I didn't do that, any reader could tell I would've made that up, just as those of you who know me can easily believe that I read an article on the MLS website. It is the sad and beautiful reality of life that I did genuinely read Matt Doyle's opinions on Shaquell Moore getting a call-up over Joe Scally at left back while I was finally seeing the metaphorical end of the tunnel here.

The nurse returned and asked if I thought I was ready to try some water. I said that I was as ready as I ever could be. She handed me a twelve ounce paper cup of water with a lid and a paper straw. It was so pleasantly cool, the water. Like when you let the faucet run on cold a little longer than necessary to ensure it's at the right temperature. The relief that overcame me when I kept the water down was... my goodness, how wonderful. Rarely do I feel moments of pure, unbridled appreciation anymore. I don't know if that's a brain problem or what but outside of the frosty plastic mugs of ice water I threw back at the Chili's To Go in O'Hare Airport after a month in the

UK where they never serve ice water, I've never appreciated water like I appreciated that water, in the little cup, sipped diligently, never too much at once. I wasn't even bothered by the paper straw's state of constant dissolution on my tongue.

The doctor from earlier, the ribald one, he returned and took me to the final room of my hospital experience.

ROOM 7: ANOTHER BED

I merely sat upon this bed. I was only in here for a brief moment. I could've skipped over this part, pretended it didn't happen. I left so many details out of this already - I didn't mention reading through my old blog posts from late 2020 on my bed in the mid-morning and crying because I'd put a quote from Cloudbusting in one of them and then I listened to that song, I didn't mention the parallels of how a moment in my life I consider sort of a beginning happened on the floor of a room in a hospital back in September 2020, that I felt mild attraction to the X-Ray doctor, I thought she had pretty eyes, that I'd had an experience at the Willis Way station only a few days prior which colored why I expected people to reject me if I asked them to call me an ambulance. The doctor asked me how I was doing, asked me if I had any pain still, if I'd kept the water down.

"The X-Rays just found a lot of air in 'ere" He started pressing down on my stomach. "That could mean nothing, but it could mean there are lesions in your stomach lining. Does this hurt?" He continued to press down.

I told him it didn't hurt any more than the dull residual pain still emanating from the pain that'd been there all day.

“That’s good. If there are lesions there, you’d probably be screaming out in pain. If you wanna be sure, we can do a scan, but we’ll have to keep you overnight and there’s a 1 in 50,000 chance that you get cancer from it.”

I told him that I thought I’d be fine, I trusted him that there probably weren’t lesions. I asked him what I should do, if I should eat anything this evening.

“Well the orthodoxy for years was that you should only have bread, rice, and bananas to keep things down, but frankly that’s bullshit, you can probably eat whatever ya want and be fine. I’d say probably don’t have a steak dinner with a load a french fries but you’ll probably be able to judge what’s best for ya. Most important thing is to keep the fluids going, remember, humans can survive weeks without food but only a few days without water.”

I nod in understanding. He prescribes me two of the Zofran tablets mentioned earlier. There’s some hassle in actually getting them to me, and I end up trading rooms with someone else briefly, ending up back in Room 6 briefly, but for a matter of two or three minutes and it doesn’t warrant another section in this piece which is well-past running comically long. I am given the go-ahead to leave.

PART 5: EXIT

On the way out, I thank everyone that I see who I recognize as having helped me, the doctor, the nurse who gave me the water, the X-Ray doctor. I turn down the wrong hallway initially and I'm directed to the correct exit. I pass Room 4 and 3 in reverse order, open the door back to the larger waiting room, passed the bathroom I'd laid down in briefly, then walked down the corridor separating Rooms 1 and 2. The man from the booth who checked me in initially is still there - who was very pleasant and calming, I don't think I mentioned that but if the hospital management somehow reads this I want to mention everyone who made the experience as comfortable as possible and that person was definitely helpful, really everybody was, I give Grand River Hospital a big thumbs-up!

I exit into the out of doors. The sun is setting. It is 6:30 PM. I had spent four hours in the emergency room. It didn't feel like it had been four hours, I can't tell you in which direction. Biologically it felt like it had been fewer than four hours, mentally I felt like I'd spent a significant portion of my life there, 10,000+ words worth in all likelihood. I got in my car and drove back towards campus. I actually could make it to my shift on time, and I was intent on doing so. I'd never seen an e-mail back from my manager, so I had assumed he'd never seen it and there wasn't going to be a replacement for me.

I had left the bottle of water from Dollarama in the cupholder. I figured it'd be hot from sitting in the sun, but it'd cooled down to a comfortable level. I drove back through residential streets, crawled through at 20 kmph. If I knew the city better, this would have been an ample time for reflection, but I genuinely didn't know where I was and like half of the streets are labelled wrong in my car's built-in GPS.

I made it to the parking lot of the building where I work (which is directly adjacent to the building I live in) at 7:00 exactly. I decided to walk in and try to explain myself. I hadn't seen an e-mail back from my director but I also hadn't checked. This was the most awkward time that I could've got there, if I'd been five minutes earlier it wouldn't have been an issue, if I'd been late it would've been something where I could explain why I was late. Instead I got there on time, holding a half-drunk bottle of Aquafina and a warm bottle of Schweppes Ginger Ale.

The guy's name is Jay. He was very nice to me, listened to me tell him that I had gone to the hospital with something wrong with my stomach, *nothing contagious*, which is what you gotta tell people out of courtesy just given the general climate of the moment, and then he told me that they'd found somebody to cover the shift, who arrived in the middle of him telling me that. I introduced myself to her, thanked her for covering the shift, I told her I could work it if she wanted, and she declined that, thankfully, though I would have done it if she'd wanted me to.

I walked back to my room. It was just as I had left it - Blankets all bunched together on the bed, blister pack of Nauzene next to my pillow, the Value Village boombox still on. The Sporting KC mug stained with instant coffee sediment, the Teddy mug still half filled with water on my computer desk, the half-eaten slice of bread next to it, which I immediately throw away. I sit in my chair. I microwave up and then eat some rice from one of those little single-use Minute Rice cups and I sip from the Aquafina bottle. The Giner Ale bottle fizzes over when I open it for the first time, probably due to having sat in the car for four hours. I know not what to do with the three extra hours now open in my evening. I had not planned anything.

DENOUEMENT:

It was probably the grocery store sushi that got me. I had a very good workout on Tuesday afternoon and I felt like it was acceptable to treat myself to the big sushi platter from Sobey's grocery store - California roll, spicy tuna roll, a few pieces of salmon nigiri. I'm guessing the salmon nigiri was the culprit. It did taste somewhat off but I just chalked that up to it being grocery store sushi.

I will go to bat for grocery store sushi. I 100% trust grocery store sushi. I had eaten that particular grocery store's sushi at least twice before and I had no problems. I used to get a discount on sushi at the grocery store I worked at, I could buy rolls for \$6.00 instead of whatever they normally cost, so I ate grocery store sushi most shifts. Grocery store sushi is probably the meal that I've eaten the most for lunch or dinner over the course of 2021. This was probably the first time out of something like 100 rolls of grocery store sushi that I've eaten that's got me sick.

And I'm not gonna stop eating it, either. I'll probably not order from that specific stand at that specific grocery store anymore but I'm sure there's gonna be a day in the future when I'm at a grocery store in a new city and I'm gonna have some of the sushi. The most obvious lesson that I could take away from this was not to eat grocery store sushi, but I refuse to take that away from this experience.

I wouldn't say that I learned anything. Maybe I got experience with the Canadian healthcare system, I learned the general layout of the Grand River Hospital emergency room. I learned the difference between Nausea and Zofran. I learned that if you lay down on the emergency room waiting room floor nobody will say anything...

Really, I think I just had a full day. I think that was it. Just a full day in a life full of days. Wednesday, September 29th, 2021.