My new oncologist asks about my family history 
as she kneads my breasts with her fingers, searching.

Her mouth opens into pamphlets
I've read before, stiff folds of light pink paper

glossed with pictures of faceless women rubbing

circles around nipples too symmetrical to be my own.

How can I locate one strand in a life spun
so much thicker than the flimsy cotton of this gown

brushing my skin like the last thing to touch my
mother's heavy breasts before they were cut away?

The doctor asks me to sit up, hands me a
print-out fortune, prophesied by a risk calculator

that knows the density of my breasts and that I was 12
when I got my first period but could never know

the sweetness of the raspberry tea my mom brewed
when I had cramps, the salt of the chips we'd share.

We go over the High Risk Plan. I am 35 now,
my mother's age when I was growing in her womb.

Mammograms, MRIs, monitoring, manual exams.
I get dressed when it's over, fasten the clasp of my bra,

remember my mother leaning against the bathroom sink
to empty the drains hanging from her smooth chest—
a thin red lymph fluid bubbling out,
so unlike the white immunity of milk.

Mother and daughter, breast oncologist and patient:
the poem “Thirty-Five” brims with loaded dualities
that deftly illuminate the poet’s layered feelings
about her increased risk of breast cancer. The
alchemy of poetry allows her to inhabit 2 places at
once, present and past, in the doctor's office
undergoing a clinical breast exam and at home with
her mother as she helps her recover from having her
“heavy breasts...cut away.” The poet's unerring eye
detail communicates the particularly unnerving

tension between risk and intimacy, in such lines as
“The doctor asks me to sit up, hands me a/print-out
fortune, prophesied by a risk calculator/that knows
the density of my breasts and that I was 12/when
I got my first period but could never know/the
sweetness of the raspberry tea my mom brewed/
when I had cramps...”

Breasts are the locus of
connectedness and warmth, and the objects of
 impersonal medical scrutiny and intervention. Even
the poem's form, unrhymed couplets, underscores
the wrenching sense of ambivalence here, between
her love for her mother and her fear of what their
shared genetics declares she may have inherited.

The poem reminds clinicians that our patients and
their stories can never be reduced to risk factors and
diagnoses. More than experts counseling patients
on “the High Risk Plan,” as physicians we are called
to recognize each “…strand in a life spun/so much
thicker than the flimsy cotton of this gown.”