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Chronicle & Character

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CHRONICLE & CHARACTER

A Thesis

Submitted to the Graduate Faculty of the
Louisiana State University and
Agricultural and Mechanical College
in partial fulfillment of the
requirements for the degree of
Master of Fine Arts

in

The Department of Art

by
Taryn Möller Nicoll
B.F.A., Otis College of Art and Design, May 2012
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Abstract

In this thesis paper, I argue that the works in the exhibition *Chronicle & Character* demonstrate artistic citizenship and aim to contribute positively to society by provoking conversation about universally applicable (but often uncomfortable) topics. Experts such as David J. Elliot state that being an artistic citizen means that one's concerns as an artist must shift from issues constrained to the artist alone to those of the artist's surrounding community. The exhibition *Chronicle & Character* contains works that serve as detailed chronicles of the medical or physiological experiences of my loved ones. This body of work presents how three different methods of art making –narrative oil painting, abstracted ink wash and collage– can represent physiological changes that I have closely observed. In doing so, the works can investigate the parallels of life and death; sickness and health; fear and bravery; and fragmentation and regeneration. These works aim to stimulate questions and dialogue about these challenging phenomena; a dialogue that can conquer loneliness among people who have or are experiencing similar ordeals. This can potentially forge unity that is beneficial to those individuals and their communities, exemplifying the power of artistic citizenship.

Introduction

“Because art has tremendous power both to effect social good and to subvert it—to shape healthy vibrant modes of human collectivity and to undermine them—I submit that artistic citizenship involves both remarkable privilege and tremendous responsibility.”

—Wayne D. Bowman (Artistry, Ethics and Citizenship)

Shortly after receiving a critical commission from the National Endowment of the Arts to create the patriotic composition *The War Prayer* (1984-85), American composer David Sampson followed his established production of political works with the composition of a decidedly personal piece. Performed by the American Brass Quintet for Summit Records, Sampson’s *Morning Music* (1986) recounts his emotional journey over seven years in the wake of the 1979 murder of his brother, William Evan Sampson, by the Ku Klux Klan and the American Nazis.¹ “As you will hear,” the composer states in his program notes, “The anguish over the death is as intense as ever, but strength and hope will gradually emerge from the despair.” After successfully securing his place as an artist concerned with national pride, Sampson’s willingness to share his story, render himself vulnerable, and to wade through the complexities of life in a very public manner is at heart the defining characteristic of the artist. This inevitable fusion of the bad with the good—how so often tragedy and transformation shoulder one another—is a primary concern within my own artistic practice. Specifically, my work endorses the

¹ "David Sampson Program Notes - Morning Music," David Sampson Program Notes - *Morning Music*, accessed January 10, 2017, <http://www.davidsampsoncomposer.com/program-notes-Morning.html>.

communication of these coexisting parallels—life and death, fear and courage, fracture and regeneration—in hope of contributing positively to society by beginning a conversation about these topics, and vanquishing loneliness among people who have experienced similar ordeals.

After observing the medical journeys of people for whom I care deeply, I merge various anatomical and surgical references specific to their cases to create new, ambiguous compositions representing each case. Interlocking allusions to human physiology with the intervention of surgical masks, gloved hands, and medical equipment allow for viewer participation while not relying upon an explicit narrative. This ambiguity aims to create a curiosity inducing, puzzling experience for the viewer: something akin to our divergent relationships with our own simultaneously familiar and mysterious bodies.

Through the physiologically-focused paintings, drawings, and collages I have chosen to display in my MFA Thesis Exhibition, I attempt to honour the emotive example set by artists such as David Sampson, Wangechi Mutu, and Louise Bourgeois. My pieces are intended to engage in very personal conversations with their viewers, addressing my responsibility as a cultural producer and harnessing my potential to effect positive change as an artistic citizen. At the core of my artistic practice is an urgent call to artists to offer refreshed, contemporary, diverse investigations into notions of the good and the beautiful.

The Call

John Dewey argues that authentic art must offer more than simply visual or aesthetic appeal; it must also contain a purpose, a dualistic intent that can serve both the individual and the community. Dewey proposes that art in any form should possess both aesthetic value and the intent to work towards the betterment of others. David J. Elliot, in support of this idea, claims that “Artistry involves civic, social, humanistic, emancipatory responsibilities and obligations to engage in art-making that advances social goods.”² The arts ought to function as a medium for artistic expression, enhancement of empathy, advocacy of social justice, empowerment of the individual, and unity within communities.

This concern within art—the intensive consideration of not only the artist, by the artist, but also the community that the artist serves—is “artistic citizenship.” It builds upon the fundamental belief that citizenship revolves around a commitment to not only the individuals but to the community to which they belong. Artistic citizenship should not be misconstrued as being political, radical or activist. Rather, one’s concerns as an artist must relate to the surrounding community as well. Being an artist and a citizen means that one’s purpose is to enhance the world through the strengths and convictions that encompass one’s artistic ambitions.

In a cultural climate that increasingly favors the separation of art and its “genius” from everyday life, the concept of artistic citizenship poses many potential problems and provokes serious questions. In *Artistic Citizenship: Artistry, Social Responsibility, and*

² David J. Elliott, Marissa Silverman, and Wayne D. Bowman, "Artistic Citizenship," *Artistic Citizenship* (New York, NY: Oxford University Press, 2016), 64.

Ethical Praxis, coauthor Wayne Bowman contemplates a series of relevant, reasonable questions:

Is the notion of responsible citizenship a mere option, an elective addition to artistry—one that seeks to enhance or augment artistic value by introducing utilitarian concerns that lie outside the domain of art per se? Is “citizenship” a voluntary complement to the “intrinsic values” that are artistry’s “proper” concerns? Or are the responsibilities of citizenship concerns to which every artist whose actions truly warrant the label “artist” must commit in some manner or degree? Does the idea of artistic citizenship emphasize a dimension of artistic practice that is definitive of authentic artistry, or one that is additional, optional—“nice” for those with the time and inclination?³

From a passionate standpoint that elicits as many objections as it does agreements, Bowman suggests that analysis of art making in terms of its relationship to citizenship demands honesty regarding benefits and privileges that enable that artistic practice to advance. The acknowledgement of these entitlements instigates an analysis of the type of artist one ultimately wishes to be, what definitions of success or fulfillment he or she supports, and finally, what those beliefs insinuate about the relationships between the artist and his or her community. According to Bowman, an earnest study of how one’s artistic goals relate to the concept of citizenship “requires that we inquire into the ways artistic practice may help others realize and benefit from the conditions upon which it depends for its own successes.” Bowman goes further, though, arguing that “Artistic privilege is importantly linked . . . to artistic responsibility. As such, I submit that art and artistic practices should be regarded as fundamentally ethical enterprises and valuable ethical resources.”⁴

³ Elliott et al., *Artistic Citizenship*, 60-61.

⁴ Elliott et al., *Artistic Citizenship*, 66.

In stark opposition to the ethically bankrupt behavior that is so often excused and even celebrated by and among artists, I relate strongly to this suggestion that inspection of my individual artistic practice can challenge me to come to terms with not only the type of artist that I wish to be, but more importantly the type of person I aspire to be. As an artist, I should take pride in the cultural responsibility I possess, rather than denying it or demeaning it. For example, the Abstract Expressionist Philip Guston engaged in reprehensible behavior toward his family—but given his position as a “great artist,” history has been inclined to overlook his personal life while glorifying his work.⁵ This focus on the vital correlation between the artist and his or her essential character is further emphasized by Bowman:

On the view I have been exploring here, artistic practice is not something with a pure, immutable inner nature to which social and ethical concerns relate as mere options. Artistry as I have sought to portray it here involves character, and character consists in stable, reliable, action habits supported by convictions about how best to live: what kind of person it is good to be ... Artistic citizens pursue courses of action not because they are “correct” or required but because they are congruent with who they aspire to be and because they hold promise for lives lived well: their own and others.⁶

⁵ Musa Mayer, *Night Studio* (New York: Knopf, 1988).

⁶ Elliott et al., *Artistic Citizenship*, 75.

Character

The act of practicing artistic citizenship is the continuous pursuit of courses of action that reinforce the type of artist and person one wishes to be –courses of action that aim to enhance the lives of those around you, and that effectively demonstrate the artist’s character. This definition is demonstrated in outrightly political works such as the sprightly, Pulitzer Prize-winning patriotic ballet score *Appalachian Spring* composed by Aaron Copland, or Honoré Daumier’s damning exposure of King Louis Philippe’s corrupt governance in his lithograph *Rue Transnonain le 15 de Avril, 1834*. However, I aim to practice artistic citizenship from a different angle: through the care and support of individuals as they undergo challenging physiological change.

Art history archives contain many centuries’ worth of art created in direct response to the world around it. These works document the lives, thoughts, and reactions of people undergoing massive change, triumph, and turmoil, often eliciting tension and even controversy. For example, Gustave Courbet’s *The Stonebreakers* (1849) flew in the face of bourgeois artistic sensibility for its depiction of physical labor. The art world’s high society, faced with this discomfiting narrative, was forced to confront its own detachment from hard physical work. Rather than accept this script, it labeled Courbet a “bad” artistic citizen to repress his influence. However, over the past century, art has smugly pursued a conversation about itself without acknowledgement of the weighty influences that the world around it has. This type of art maintains that its power and value are intrinsic, and that its sophistication is bolstered by its distance from the world

intellectually beneath it. Bowman addresses this convention and puts into perspective the effects of the separation between fine art and reality:

According to [this] misguided idea, the true or legitimate values of art are “intrinsic”—residing exclusively in supposedly internal or aesthetic properties of entities considered to be “works of art.” ... Values that relate to concerns outside the work are extrinsic—merely subsidiary or subordinate. Their significance is extra-artistic, perhaps even non artistic. Unfortunately, this relegated many of art’s most powerful social, political, ethical and moral values to residual or extra-artistic status ... leading us to trivialize or marginalize some of art’s most powerful contributions to our shared humanity.⁷

It seems to me that as cultural producers, we should be delighted by the prospect of seeking out interdisciplinary connections and commonalities between art, life, and human conditions—being active researchers, explorers and adventurers— rather than waiting for those connections to find us only in the stillness of our studios. My solution is to get out of my studio, invest in conversation, get into the operating room, and to turn to the body—or rather, the *bodies* of people who make up my community.

The site of physiological change—the human body—is the common ground between every human being. The body is an irresistible source of artistic inspiration as it represents that most irrefutable bond between all people; it is the extraordinary “casing” that renders us equal: equally vulnerable, equally tenacious, and equally unpredictable. The relationships that we have with our own bodies symbolize a mutually experienced complexity, a relatable platform that will allow me to connect to a broad audience. The multi-layered, mysterious tensions that our bodies present are succinctly described by sociologist Chris Schilling in the book *The Body and Social Theory*: “Our bodies are *constraining*, as well as *facilitating*, while they are alive and not simply because they die,

⁷ Elliott et al., *Artistic Citizenship*, 75.

and can be harnessed to social inequalities, as well as forming the basis of positive, enabling experiences.”⁸

The greatest priority in my life is people. While my passion for art and art making is immense and impossible to quantify, my first and most true love is—and always will be—people. Rather than people being my subject and oil paint or ink being my medium, the care of and emotional investment in people is my subject and art itself is the medium through which I approach that subject.

A lifelong goal of mine has been to create some sort of real change (and positivity) through my work, and to help the people around me in the most concrete way possible. I have no medical training, limited biological knowledge, and no official certifications that position me as an authority on matters of health or medicine. Even so I can listen, observe, and learn, and I'm willing to be present during the worst of times. The “social good” that I advocate is the intentional connecting with people: the non-obligatory offering of love, intimacy, and care even when it is most difficult to do so.

⁸ Chris Shilling, *The body and social theory* (Los Angeles, CA: SAGE, 2012), 11.

Chronicle

Each of my paintings serves as an intimate chronicle of the medical or physiological experiences that people in my life have undergone. I have had the unique opportunity of working alongside several incredible individuals as they persevere through various physiological struggles. Above all, one of the most damaging non-biological phenomena that I have witnessed in each of these individuals' stories is loneliness—a sense of isolation.

The effects of loneliness during sickness and healing have been extensively recorded but not widely addressed. In *The Body and Social Theory*, Schilling aptly describes how the disorienting state of living with illness can make patients feel as though they have been left “alone with their body.”⁹ Many patients encounter altered relationships with their family and friends. For example, some individuals desire support but inadvertently avoid contact with their loved ones or other survivors so that they do not have to be constantly reminded of the implications of their illness through answering questions and explaining their current status.¹⁰ Patients frequently observe withdrawal from relatives and formerly close friends who are terrified by the possible trajectory of their illness and struggle with the threat of mortality. Loved ones often distance themselves from the patient, particularly during periods of rapid decline, as they wish to preserve their memory of that person in happier, healthier times. The resultant social

⁹ Schilling, *The Body and Social Theory*, 167.

¹⁰ Kate Wilson and Karen A. Luker, "At home in hospital? Interaction and stigma in people affected by cancer." *Social Science & Medicine* 62, no. 7 (2006): 1616-627.

isolation, loneliness, and lack of support have been directly linked to negative effects on health outcomes.¹¹

Art can present a story without apology and, in doing so, break through the stifling boundaries of loneliness. These breakthroughs can create allegiances and kinships between people who have trials in common, but who are usually discouraged from sharing their stories. To confront the isolating stigma that often prevents survivors and caretakers from sharing their stories, I chronicle and make public the stories of patients and people close to me through observation and documentation.

Acting as visual chronicles, my works examine the transformations that are evidenced between a specific human being and the “events” that his or her body experiences. These physiological events could be considered negative (such as cancer or traumatic injury) or positive (such as reconstructive surgery). The many ways in which the individual is changed by his or her particular physiological event amalgamate to form an overarching, unified transformation. Each transformation is represented through a combination of three things: (1) the physical souvenirs of that event in the form of scars, grafts, alterations to movement, and so on; (2) the day-to-day adaptations made by the individual in response to that event, such as restrictions in mobility, physical therapies, responses to medications; and (3) the individual’s emotional journey during and immediately following the event. These resultant transformations combine of all of the parts of the human experience that I am so deeply interested in: medical science, care, biological adaptation, empathy and psychological responses to change.

¹¹ Joe Tomaka, "The Relation of Social Isolation, Loneliness, and Social Support to Disease Outcomes Among the Elderly," *Journal of Aging and Health* 18, no. 3 (2006): 358-394.

In order to detect and then represent such transformations, I turn to those with whom I am very close – individuals who permit me to examine their lives and bodies from an intimate perspective. My husband, military rescue swimmer Stephen Nicoll, has undergone seven major reconstructive surgeries; at least three of these have required a bitter six-month recovery period, and one of them involved his right femur being broken and his leg then being rebuilt completely. In 2015, my mother developed a rare, frightening autoimmune disease that attacks her liver and necessitates the daily use of side-effect inducing steroids and anti-rejection medications. My dear friend, Richard Colton, has permitted me to observe, in person, three of his surgical procedures over the course of his battle against cancer.

The modes through which I observe cases such as those mentioned above range greatly, although my attention to detail is consistent regardless of my degree of involvement. Through daily long-distance conversations, my mother has confided in me her most subtle emotional reactions to her inexplicable, often bewildering autoimmune disorder. Her medical team shares with me her updated charts, X-rays and CT scans and, by combining references to her emotional state with these visual indicators of biological change, I attempt to communicate her medical story through painting and collage.

In my husband's case, I take on the role of caretaker throughout each of his procedures; some of which include osteotomy, bone graft, partial meniscectomy and microfracture. Sometimes lasting over eight hours, every knee surgery reduces my ordinarily impermeable husband to a dependent convalescent for six months. Post-surgery, we attend countless appointments with my his doctors and physical therapists, which yield a substantial, informative collection of microscopic photographs, detailed x-

ray sheets, titanium plates and screws. Simultaneously observing and assisting with the recovery process of this unusually vulnerable rescue swimmer grants me raw insights into both the humbling demands of rehabilitation and the extreme regenerative capabilities of the body. Because of the recurrent nature of my husband's injuries, I have been able to, at least seven times, witness a distressed body heal and transform with such vigor that the body itself has become my ultimate symbol of progressive adaptation.

For the past five years, my friend Richard has invited me to accompany him as he fights an exceptionally aggressive case of squamous cell carcinoma. During every one of his three surgeries at Johns Hopkins Hospital in Baltimore, Maryland (which range from six to thirteen hours in duration) I have been present in the operating room from start to finish in order to witness and document the remarkable work of his unmatched surgical oncologist. Richard's procedures include anterior craniofacial resection, lymph node dissection, radial forearm free flap, and partial removal of the mandibular condyle and zygomatic arch. While these procedures are underway, I am permitted to use the surgeon's camera to photograph every minute incision, stitch and maneuver that takes place. I make note of environmental and chronological details, such as the music that is playing in the operating theatre, the topics of conversation among the surgical staff, and the exact times when surgery begins and ends. In addition to personally observing Richard's surgeries, I join him at his doctors' visits, at his physical therapy appointments and at his home to talk with him about his progress. By being present at each critical step of Richard's path towards healing, I can begin to identify the innumerable ways in which his life has changed while simultaneously dispelling some of the isolation he may experience during those times.

My current works aspire to portray the physiological and emotional transformations that I have observed in individuals such as those mentioned above. My goal is to create physical representations of the intertwined factors which comprise each individual's transformation in the form of a biological portrait or landscape. I often choose to integrate naturalistic representations of the facial features and/or characteristics of the individual persons mediating these life-changing events, whether this means depicting their portraits or revealing obscured glimpses of the characteristics unique to them. It is fitting that they should be portrayed as they occur in reality: the identity, the body and the "event," coexisting with one another, each in quiet, subconscious entanglement with the other.

My application of paint is a practical exercise in trust, hope, and dedication. During the manual act of painting I am systematically uncovering fragments of a collage, working part to part rather than in even, traditional layers. My technical approach is surgical: dissecting and dividing the significant sections of my compositions, operating on each part, and then sewing them back into the larger "body" of the painting. Each disparate section points to a unique stage in my subject's procedure or experience, and my goal of fully investigating each stage through painting results in my preference of working to completion in sections and building the work up in chapters rather than layers. I find myself committing completely to each area that I work on, developing and nurturing a relationship with each section until each one has matured and come to fruition.

Working to completion this way can certainly yield surprises (or catastrophes) during attempts to maintain overall compositional unity, and the control that I exert over

the rendering of each component is well neutralized by the element of that risk. Once I have fully completed a segment of a work, I am forced to step back, take in what I have just done, and respond to those decisions accordingly in the next area of my painting or drawing. The completion of a particular section may fill me with triumphant pride, or it may leave me wrought with confusion and embarrassment. This uncertainty—and the hope required to keep painting in spite of it—feels authentic and sincere to me. It provides a microscopic taste of the vast amount of hope and resilience shown by my subjects as they march forward on their medical journeys.

The concept of consistently responding to a situation rather than purposefully manufacturing a situation is one that is explored further in my collages and ink paintings. The technique of collage allows me to survey a large selection of found media, which includes anatomical textbook diagrams, bridal magazine cutouts, botanical illustrations, and commercial jewelry photographs. I present myself with the compositional challenge of stripping those recognizable image fragments from their original contexts and combining—or resuturing—those pieces in a way that transforms them into a new, ambiguous organism that draws the viewer in to study those pieces at close range. In the same way that I approach my oil paintings, once I have placed a fragment of a collage, I must step back, review what I have just done, and respond to that choice through the placement of my next fragment. This intentional back-and-forth between disorientation and improvisation is very relevant to my perception of the ever-changing human body that demands its occupant to respond constantly to its own new state.

The application of my ink wash paintings follows a similar sequence. I allow the ink wash to bleed into the paper as it will, pooling in areas of wet, bowing paper and

spattering across drier surfaces. Once I see the resultant marks of ink, distributed across the paper by chance, I respond to the ‘situation’ that has presented itself by incorporating obscured anatomical elements and vague slivers of the portraits of my loved ones. This method enables me to relinquish total control of the outcome of each composition, and refuses to allow me the comfort of complete reassurance as I proceed with the evolution of each work.

Through both narrative and technique, I find myself relating more closely to the individuals whose physiological transformations and trials I have observed, as they too can only respond to the biological lottery numbers with which they have been confronted.

Conclusion

Art should work toward the betterment of not just the artist but those who the artist renders, and their communities. Artists possess great responsibility and privilege, and should be aware of their critical role in shaping others. My works express these views via a syntheses of figurative allusion. The body function as a visual analogue—an invitation to consider life and who we are as human beings. The regenerative capability of our delicate yet indomitable bodies is something we can learn from. From relentless aging to the slightest scratch, to invasive surgery, every encounter reminds us of the ever-present vulnerability and tenacity of our bodies. These are the disobedient souvenirs of entropy, of mortality—details and inevitabilities from which we instinctively run.

The people who comprise my community have provided me with first hand insights into both the facile distance from the intensely human that has pervaded contemporary art, and the beauty and integrity of the human corpus – physically and metaphysically. I am interested in the body as a marker and teacher of both of these modalities. These are the arenas I aim to investigate and renovate. I do this to emphasize its function as a symbol of our sameness, our uniqueness, our fragility, and our shocking return to unity under the most pressing forces of duress.

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Appendix I: Artist's Images



Image 1: *Frontal Eminence*. Oil on canvas. 50x50 inches.



Image 2: *Visceral Layers*. Oil on canvas. 36x48 inches.



Image 3: *Tegmen Tympani*. Oil and paper on panel. 18x12 inches.



Image 4: *Tendons of Flex*. Acrylic and paper on panel. 18x12 inches.



Image 5: *Spinous Process*. Acrylic and paper on panel. 18x12 inches.



Image 6: *Capitulum*. Acrylic and paper on panel. 18x12 inches.



Image 7: *Acromion*. Oil on panel. 48x36 inches.



Image 8: *Digitorum Longus*. Oil on canvas. 26x40 inches.



Image 9: *Great Trochanter*. Ink on paper. 20x16 inches.



Image 10: *Tuberosity of Tibia*. Ink on paper. 20x16 inches.



Image 11: *Crux of Helix*. Acrylic and paper on panel. 18x12 inches.



Image 12: *Intercondylar Eminence*. Acrylic and paper on panel. 18x12 inches.



Image 13: *Indexical Relations*. Ink on paper. 20x16 inches.



Image 14: *Semilunar Notch*. Ink on paper. 20x16 inches.



Image 15: *Olecranon Process*. Ink on paper. 20x16 inches.



Image 18: *Spine of the Ischium*. Ink on paper. 22x15 inches.



Image 17: *Foramen Magnum*. Ink on paper. 20x16 inches.



Image 18: *Margin of Acetabulum*. Acrylic and paper on panel. 18x12 inches.

Appendix II: Accompanying Poetry by Tyler Sheldon

The following are four poems that Tyler Sheldon created in response to the concept of the exhibition *Chronicle & Character* in April of 2017. As part of the design of the exhibition, the poems were installed amidst my visual works, as physical works in their own right.

Tyler Sheldon earned his MA in English at Emporia State University, where he taught Composition and received the 2016 Charles E. Walton Graduate Essay Award. His poetry has been nominated for the Pushcart Prize, and has appeared in journals throughout the US and in Canada, such as *Quiddity International Literary Journal*, *Coal City Review*, *The Dos Passos Review*, *The Prairie Journal*, and others. His chapbooks include *First Breaths of Arrival* (Oil Hill Press, 2016), and *Traumas*, forthcoming from Yellow Flag Press.

Post-Trauma

The invisible hand that lace tight our nerves,
that hold us after the dark god-bombs come—
bombs that fall heavy through our upcast eyes—
we call these hands the Entity, and they
wait for us to call them forward.

The hands know that sinking below consciousness
is normal, our greatest bomb shelter.
They hold us still until we are ready to move
on our own. They flex our stolen legs,
stand before us on spread fingertips like armor.

The hands with their great green thumbs
garden our bodies with gentle rains.
We erupt in flowers the shade of new skin
and the frequency of hesitant heartbeat.

We learn to walk these gardens
with arms out to the rain. One socked foot
slides forward. We learn to balance
with our hands.

Consolation Prize

After Grandmother's chemo
her hair came back like cinnamon,
how she wore it at twenty, thirty.
At the piano she looked younger,
back straight, fingers dancing
on the black and ivory keys.

Only later came the gray tank of air
she needed to get through her day.
She wheeled it from room to room
and it squatted by her rocking chair.
In the fifties all nurses smoked, a habit
she still polished like a badge.

Grandpa had traded smokes for peppermints
back when. He got thinner. He brushed
his teeth more often. Grandmother got thinner too.

They wrote letters every few weeks.
They said everything was good.
The new doctor was the best they'd had
in years. Grandmother's dusty voice,
always bouncing, told me she stayed
young because she wanted to.

When she threw away her cigarettes
Grandpa brought her a jar
of peppermints in cellophane wrappers.
They learned slowly to empty the jar
together. They brushed their teeth
more often, a habit they kept
polished like a badge.

After a Crash

How ambulances lapse
 into silence
 (not doctor visits
 or cat scans or therapy)
after air bags
 knock you to sleep
 in the driver's seat

how a truck fender
 can fold a door in
 like foil
 and can spill your car
toward the only
 culvert in town
 without a fence

(how now you flinch
 each time anyone
 turns left, stoplight
 or not toward you)

that whistle (really a scream)
 is how you sound
 when others hear you
 only once the steaming car
 is stopped

only once the cops
 pry open your door
 can you hear your voice
 again for the first time

 like a kettle on fire

OBE

*“...an unusual group of experiences occasionally reported
by some people awakening after general anesthesia.”*

—Australian anesthesiologist G.M. Woerlee

In the operating room where we learn
about cold metal and the flavor of gas,
a surgeon saves his first patient
finally from some malady (we
also learn the man's family had
prepared a tombstone) and collapses
asleep to the table like a lung. The patient
will resurface soon. He knows
exactly how the surgeon's eyes
flickered like lamps, full
with half-lit fire. He breathes
not a word to anyone, but floats
above his doctor's shoulder,
last actor in a dark theatre
where the curtain holds itself up.

Vita

Taryn Möller Nicoll plans to receive her Master of Fine Arts, in Studio Art at Louisiana State University in May 2017. She works with doctors, scientists and patients to depict the physiological and emotional transformations experienced during reconstructive surgery, neurodegenerative disease, cancer and more. Her paintings and drawings are included in the permanent collection of the Johns Hopkins University School of Medicine, and have been featured by media outlets such as *The Times Picayune*, *The New Orleans Advocate* and *WWL-TV Channel 4 Eyewitness News*. Ms. Nicoll is the founding Artist in Residence at Louisiana State University Neuroscience Center of Excellence, and a guest lecturer at universities throughout the United States, Germany and South Africa. She earned her Bachelor of Fine Arts in Painting from Otis College of Art and Design in Los Angeles, California. Her work can be viewed at www.tarynmoller.com.