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Scott, Stethoscope:

Well, my name is Scott and I am a stethoscope, hospital employed stethoscope.

lan:

Should I just speak into your-

Scott, Stethoscope:

I can hear you where I am.

lan:

Okay.

Scott, Stethoscope:

Generally it's children who speak right in to my horn. That's fun for a while.

lan:

Tell me about the last sound you heard professionally.

Scott, Stethoscope:

I was working with a nurse who was taking blood for a patient. We just did a normal blood pressure. So she listened to the woman's heartbeat and she seemed very happy.

lan:

What's it like when you make that contact with a patient's skin?

Scott, Stethoscope:

It's interesting because I feel it's very intimate. I don't think they get that. I think the heart is a very forthcoming organ that tells a lot more than just blood pumping in and out. It is also telling me how people feel and who they are, what they are, what they will be, what they want to be, what they failed at, and their successes. I just feel very close to people.

lan:

To get a sense for what you're hearing, I'm going to play a heartbeat. Why don't you just listen and narrate for us what you're hearing.

Scott, Stethoscope:

Nice. Okay, familiar. This is someone who has arterial buildup. Oh, that's lovely. The doctors only hear Ringo. I hear George and Paul and John. This is a person whose heart is saying, "I'm funnier than people think I am. I have a great wit that no one understands, and when I try to make people happy, I always fail. But I know that I'm funny."

lan:

So you have a lot of heart time. You hear a lot of hearts. Are there parts of the body you'd like to listen to that you don't get to listen to?

Scott, Stethoscope:

I would love to see what the brain sounds like. I talk to and listen to the heart a lot, but I think the two go hand in hand. I'd like to listen to the hand actually, but the brain is where so much goes on, from what I understand. Because I don't know if I understand intellectual thought. I understand emotions, but I don't know if I get what intellectual things are. But if I could listen for a while, I think it would be nice. People don't have a lot of moving parts up there, is what I get.

lan: What if I put you your bell on my head.

Scott, Stethoscope:

Really?

lan:

Yeah.

Scott, Stethoscope: Strap me on.

lan:

All right, so here we go. It's on there.

Scott, Stethoscope:

Okay. That's not a lot to listen to up there. This is nothing personal, but I don't really hear much of anything going on. I would say, you want me to guess your next question?

lan:

Sure, yeah.

Scott, Stethoscope:

I guess it would be, think a little harder for me. What would I be if I could be anything? Is that right?

lan:

I was going to ask how you felt about being in ears.

Scott, Stethoscope:

Oh, well, I guess I should stick to the hearts then. Ear's are great. I can taste the doctor's ear wax. I can taste it. I haven't tasted all that much of other things, but I look forward to it every day. I guess I like to be a little intrusive. I like to know things that maybe I'm not supposed to know. I'm a probe, I guess that's it. I'm a probe. I like being a probe.

lan:

I have to tell you, I have a, as a human, a totally different relationship with air wax. To me, the prospect of tasting it is really unpleasant.

Scott, Stethoscope: You're out of your mind. Why?

lan:

Maybe it's something that's from within me that I don't-

Scott, Stethoscope:

Maybe it's your own ear wax. Taste someone else's.

lan:

That doesn't seem better.

Scott, Stethoscope:

All right, let me recommend this. Get a nurse's ear wax. Next time you go in for a checkup, say to the nurse, "May I taste your ear wax," and see if you like it.

lan:

Never know unless you try. That's what I say. Scott, what was the question you guessed? Was it, what would you be if you could be anything.

Scott, Stethoscope:

I was wrong, but yeah.

lan: What would you be if you-

Scott, Stethoscope:

A safe cracker. I would love to be one of those stethoscopes that listens to the tumblers go and be part of some heist. That would be really exciting.

lan:

Yeah.

Scott, Stethoscope:

I was riding on an intern who left the hospital in a fit. We went out to a movie and I saw a safe cracking scene. I said, "Whoa, wait a minute. This is a thing I could do." He wasn't supposed to leave the hospital with me, but it was a feeling of real freedom to get out. I just spend my whole day in that antiseptic atmosphere and the idea of going out into the world and all those sounds out in the street. Then to go see a movie and hear all those people laughing. In the hospital you don't hear a lot of laughter. When you're out and about there's a lot of laughter in the world. I had no idea. Mostly people laughing at

other people's misfortune, which I would think, in a hospital, it's all misfortune. Why isn't everyone laughing? I think they're missing out.

lan:

If you were a doctor, I might say to you, "I'm having some strange swelling about my gut. I'm having strange mounds that don't make any sense."

Scott, Stethoscope:

That's probably a growth that will kill you. Not me. When you fall down, it's funny. Yeah, we need more laughter.

lan:

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lan:

I have a very slow heart rate. I think traditionally, is it humans around 70?

Scott, Stethoscope:

Yeah.

lan: Is that what you find?

Scott, Stethoscope:

Well, it depends on the age. Around your age, I would say anywhere from 65 to 75 is okay.

lan:

Okay. I'm in the thirties.

Scott, Stethoscope:

I didn't want to say anything, but that is abnormal. You do know that. You've been told that by a doctor, right?

lan:

Yeah. I haven't been led to think it's a problem.

Scott, Stethoscope: Really? Okay.

lan: Do you want to listen to it?

Scott, Stethoscope:

Yeah, let me hear. I'm sorry if I'm cold.

lan:

It's all right.

Scott, Stethoscope:

Wow. That is like a funeral dirge. Wow. There's enough time between beats that I say, "Oh, he's dead. Oh, he's dead." Wow, you keep going. Well, I don't want to upset you. There are some people who feel that slower heartbeat actually could lead to a longer life. There's a theory that all mammals have a billion heartbeats before they're dead. A mouse has a very short life span and it's heart beats very fast, so it gets a billion.

lan:

So it gets to its billion in a short time.

Scott, Stethoscope:

Exactly right. A whale has a slower heartbeat, so it takes a longer time to get to that billion, and so it lives a longer life. Humans are the exception, because they have 2 billion heartbeats in a lifetime.

lan:

All mammals, great and small, get a billion heart beats.

Scott, Stethoscope:

Exactly.

lan:

Except for us.

Scott, Stethoscope:

Except for you. For you, if you get 30 beats a minute, you might live for a very long time. You might live well into your two hundreds.

lan:

You know what I wonder though? The whale with the slow heartbeat, how do they know that? They couldn't just take a stethoscope and swim up to it.

Scott, Stethoscope:

I don't know.

lan: Hi, is this Roger Payne?

Roger Payne: Can you hear me?

lan:

Yeah, yeah, coming through good.

Roger Payne:

Oh good.

lan:

Roger, I wanted to ask, you discovered whale song. You're also a person who has heard a whale heartbeat. Can you tell me how you did it?

Roger Payne:

Well, the person who did the recording of heartbeats of whales is named Jorge Reynolds. I drove a boat in which Jorge was present and he had some devices which he had built and he was firing a little tag into a whale and it took the sound from the heart and broadcast through the water at very, very high frequency. We were driving along in the boat, having finally succeeded in getting close enough to this whale, and the whale was, as far as he could tell, just panicked. It had been swimming as hard as it could for quite a while. It was panting and puffing. So presumably it's heart was beating very, very fast. When the device was finally, the little dart, was finally in the whale, Jorge was sitting in the front and he was leaning forward, listening over a device that he had through headphones on his head. In order for the rest of us to hear this panicked beating of the heart of the whale, he called out into the air with the beats. This is what it sounded like, and this is not an exaggeration. He said, "Uno. Dos."

lan:

Wow.

Roger Payne:

So that was a separation of a totally exhausted, running away, scared whale with a heart beating much too fast. I'll never forget it.

lan:

Your first experience of hearing a whale heartbeat was hearing him counted off.

Roger Payne:

That's right.

lan:

Did you then get to hear the sound itself?

Roger Payne:

Yes, I can't imitate it. My feeble effort is sort of a great. You could hear, but much lower frequency. I can't imitate such a sound at the low frequency that it was.

lan:

Did the sound of it give you a sense for the size of it?

Roger Payne:

Oh yes. It's not squirt, squirt, squirt. It's this great shattering fumeral sound that you hear. It's wonderful.

lan:

This might be a silly question, but is it scary?

Roger Payne:

I think if you, one, heard it and didn't know what it was, yes, it would be an astonishing sound. You would think some great event was taking place near you and you wouldn't have a clue as to what the outcome could be.

lan:

I'm curious. I don't quite know how to ask this. When you hear a heart, what's your understanding of what the heart is? You can't see it, you can only hear it.

Scott, Stethoscope:

I know that it has four chambers and it expands and contracts and there's a bunch of liquid going through it. I think it's shaped like the face of the person who owns it, like the head and the face. I imagine, as it pumps, the eyes get really wide and the mouth goes wide open. That's what I picture anyway. Is that right?

lan: Just a tiny face inside the body?

Scott, Stethoscope:

Yeah. It's a fist sized head in the chest that has the same face as the owner.

lan:

I guess I've only seen pictures, but that's not what it looks like.

Scott, Stethoscope:

I've not seen pictures, I guess.

lan:

Would you like to see a picture?

Scott, Stethoscope:

Sure, wow.

lan:

I feel like I should warn you, it doesn't look like a face.

Scott, Stethoscope: Okay.

lan: Would you prefer an illustration or a photograph?

Scott, Stethoscope:

I think a photograph, yeah. This will be fun.

lan:

This photo I'm about to show you is a heart outside the body. It's been removed.

Scott, Stethoscope: Okay. Oh my God. What's wrong with it? W.

lan: That's what they look like.

Scott, Stethoscope: It's got no teeth. There's no teeth.

lan:

You've been picturing that the heart has teeth.

Scott, Stethoscope:

It has no personality. It's just meat. I apparently don't know what I'm talking about.

lan:

Everything you've said is right.

Scott, Stethoscope:

No, no.

lan:

That part of the body, it is crucial to life. It is affected by emotion. It does beat. It does quicken.

Scott, Stethoscope:

I wish I could eat something so I could throw it up.

Maggie:

I'm sorry. Hi. Can I interrupt? This is Maggie. I'm a pair of earphones that's listening to this right now. Sorry.

Scott, Stethoscope:

What is this?

lan:

I think what's happening is, right now there are thousands of people listening to us on headphones.

Scott, Stethoscope:

Oh, wow.

Maggie:

Like me.

lan:

Apparently one pair of those headphones has decided to chime in.

Maggie:

I'm so sorry, I just wanted to talk to you.

Scott, Stethoscope: Oh hello.

Maggie:

I had to say something because I feel you get what I'm going through and that you listen to stuff all the time. I'm always listening to stuff.

Scott, Stethoscope: Yeah.

Maggie: I'm listening to it right now.

Scott, Stethoscope:

Yeah, hearts and things, and stomach noises.

Maggie:

No, I never get to listen to a heart. Do you ever get silenced?

Scott, Stethoscope:

Yes, I guess silenced during an autopsy.

lan:

Do you never get silenced?

Maggie:

Never. From the moment that I'm plugged in, it's noise. There's this one kind of noise where it's just one or a couple people talking. Sometimes they talk over each other or they talk back and forth, like your thing. Then there's music. That's a bunch of sounds all at the same time. It's all the time. Then when I'm unplugged, I don't know where I go. I'm just gone. Then I come back when I'm plugged in. Then there's the sound again.

Scott, Stethoscope:

You should get a recording of silence.

Maggie: Ian, can you just make it silent?

lan: Just play silence for you?

Maggie: Can I also tell you that, I hear a lot of voices. Your voice, there is an edge to it.

lan:

My voice specifically?

Maggie: Yeah, there it is.

Scott, Stethoscope: Yeah. Also, you clear your throat.

Maggie: You know what I mean?

Scott, Stethoscope:

Yeah. It's a lot of glottal stuff going on in there that you have to give three times as much spit in your mouth as you should.

Maggie:

I know exactly what you mean.

lan:

It doesn't seem that bad.

Maggie:

You know when he does that thing where he could be silent, but then he does something like mmm?

Scott, Stethoscope: He thinks he has to fill the silence.

Maggie: Yes. He does that all the time.

Scott, Stethoscope:

Hey lan, why don't we just shut up for a few seconds and let her hear some silence.

lan:

Yeah, we can just end the show here.

Maggie:

I don't want to impose, but that is a dream come true. Scott, is that okay with you?

Scott, Stethoscope:

Yeah. Hey, it's just nice to meet someone I can talk to. Where are you?

Maggie: I'm in a pair of ears.

Scott, Stethoscope: I'm in a hospital.

Maggie:

Cool.

Scott, Stethoscope:

So if you're ever in a hospital, there might be a few hundred stethoscopes, but one of them might be me.

Maggie:

If I'm in a hospital, my person might be dead and then I might be silent.

Scott, Stethoscope: Well, good luck. Maggie:

Thanks.

lan: Are you all ready?

Scott, Stethoscope:

Yeah, let's do this.

Maggie:

Yeah, yes.

lan:

Okay.

Maggie: That's fine. Ian, you don't have to introduce it.

Maggie: I heard your stomach.

Scott, Stethoscope:

I did too. I don't know that I'm even pressed up against you, and that was pretty loud.

Maggie: I'm not even a stethoscope and I heard that.

Scott, Stethoscope: Awesome. Why make the little noises? What are you doing?

Maggie: Yeah, just close your mouth.

Scott, Stethoscope: Are you trying to keep listeners? Ian?

lan:

Do I respond?

Maggie:

No.

lan:

This is, Everything Is Alive. The show is produced by Jennifer Mills and me, Ian Chillag, with Evil Walchover and Isabella Kulkarni. Special thanks to Emily Spievak. Hillary Frank edited the show. She's the creator of The Longest Shortest Time. Her new book is called Weird Parenting Wins. Scott, the stethoscope, was played by Scott Adsek. Maggie, the headphones was played by our own Jennifer Mills. A big thanks to Roger Payne from whom we learned about whale heartbeats, also Ian Kerr. They're part of the whale conservation organization, Ocean Alliance. More information at whale.org. Also a big thanks to all of you who have written in over the past several months and asked us to interview a stethoscope. We hope you liked him. Everything Is Alive is a proud member of Radiotopia from PRX. Without Julie Shapiro, executive producer, we would be trapped in the belly of a whale.

lan:

We are now going on a planned hiatus for a bit. Thank you for making our second season so fun. Please keep spreading the word about the show. Tell your friends, family, coworkers, enemies, and keep in touch with us. Any number of ways everythingisalive.com. We'll see you soon.

Speaker 8:

Radiotopia.

Speaker 9:

From PRX.

lan:

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