

Dr. Mom – part 1*~ Fear ~*

March 1st 2014, Saturday

Elisa's dad, Al, and I sat talking at our kitchen table when the door pushed open and it was Steve. I remember thinking, "This is not good. Why would he come over here at 9:30 at night with such a serious look on his face?" As soon as Steve entered he said, "Elisa has been in an accident." "It's what I've always feared," said Al.

Steve sat down at the table with us and strangely enough my memories of the actual conversation are somewhat dim. He didn't really know Elisa's condition. He just knew there had been a bad accident. I felt almost isolated from the conversation. Somehow all I knew was that it was bad and I didn't want to absorb it. It was there, it was the facts, but I didn't want to internalize it. I just kept listening to what they were saying. I didn't participate in the conversation. Al was saying, 'Well you can talk to *blab, blab...* you need to do *blab, blab...*' Steve was saying 'Well *blab, blab, blab* happened....' And they were going back and forth.

Somehow Steve knew to call Wesley Medical Center in Wichita, Kansas. Al eventually reached the charge nurse, Susan Christensen, and put her on speakerphone. We sat at the kitchen table listening to Susan and, as a retired physician, what I heard was 'She's not going to make it.' That's what I heard; that's not what Susan said. I remember her saying, "It's a bad accident, a really bad accident...but of course there's always hope. We're doing everything we can." My doctor voice thought, "That's what you say when there's no hope." Susan was very kind, very compassionate, and said all the words that are reassuring to somebody who doesn't know medicine. But I wasn't reassured; Elisa wasn't going to make it.

They were taking her to the operating room and Steve was able to talk briefly with one of the trauma surgeons, Dr. Hunt. She again said, "We're doing everything..." but short and sweet. She had things to do. It was clear she didn't have time to talk to Steve, which also told me that Elisa was really bad. I came away from that short conversation on the phone with the perception that my daughter, my first born, was going to die. That was just a given.

I felt helpless. Truly helpless. Steve felt it was important to get to Elisa's side as soon as possible. I didn't have that same sense because I didn't think she'd make it. I thought, "Race there if you will, but she's going to die on the way." I didn't even have a mental image of Elisa because there was nothing to picture except that she wasn't going to exist. The feeling of racing to her side with this hope, then getting there and finding her dead, was somehow a more horrible thought than just accepting her death right then. But I felt an imperative need to help Steve get to Elisa's side.

Steve wasn't crying. None of us were, although we might have had tears in our eyes. We were so focused on first finding out how bad it was and then what were the details. Elisa was alive, just barely.

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We finally found Steve a flight and booked him in the only last minute seat available, in first class on a 6:00 a.m. flight, which meant he and Al had to leave at 4:00. I don't know how late we talked. At some point we called our two other children, Matt and Allison, who also live nearby with their families. I was detached, feeling like “It doesn't make any difference what we do, she's going to die. It's just hopeless.”

The night was long. Long. Long and dark. I tried to block my imagination. When you're faced with the loss of a loved one, if you go beyond imagining their death and imagine life without them that's the real pain. I left myself in this limbo of believing she would die, but refusing to go the next step beyond into the void. I couldn't sleep, but at the same time it was a form of control. There was an intellectual knowledge but I wouldn't allow myself to follow it with the emotional knowledge of what that meant. I thought, “I'm going to have to go through it sometime, but I don't want to do it right now.”

The next morning I bought a ticket to Wichita. I thought, “No, I'm going to get there and she's going to be dead.” But there was a little bit of hope. I was convinced that she would die, but she wasn't dead yet....

That day, Sunday, was terrible. Somehow the whole family just showed up. Circle the wagons. That's what you've got to do, circle the wagons.

Steve arrived in Wichita and we received news that Elisa was unconscious, on a ventilator, with multiple IVs going. She seemed to have stabilized a little. He didn't understand the significance that a nurse was in her room 24/7. Continuous 1:1 care is only given to a patient in an extremely unstable condition. It didn't matter to me what he said because he couldn't assess the complexities. Nothing reassured me except that she was still alive.

On Monday, as I sat in first class, in an aisle seat with people boarding, I clenched my teeth until my jaws ached. While people walked by me I thought, “They're going to think I'm crazy; I'm not going to cry,” but I struggled mightily. I can still picture clearly – there's music playing over my head and it's driving me crazy. I'm actually thinking the song is in my head. I can't get the song out of my head, but all I'm thinking about is my daughter dying. Feeling overwhelmed, it's all too painful. And this song just reverberates in my head; it's driving me crazy! Finally I think, “I know that song...what is it...what is it...?” I look up at the speaker still thinking, “What is that song?!” 'Tis So Sweet to Trust in Jesus' is playing. I've never heard a hymn on a commercial airline. God was sending me a message: “Trust me...trust me.” It seemed to ease this terrible urge to cry and I was finally able to get some rest.

My brother Dan met me at the airport in Wichita, as he had for Steve. He had come through the same storm driving from Kansas City that Elisa had hit in Oklahoma. His wife, Jan, was reluctant for him to go because of the risk, but he couldn't allow us to go through this alone.

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We drove straight to the huge hospital covering an entire city block. In a Level I trauma center, such as Wesley Medical Center, specialized trauma doctors staff the hospital at all times. The night of the collision highly skilled trauma surgeons worked round-the-clock in the emergency room because there were so many motor vehicle accidents from the storm - about 100 in the region that night.

I've been to lots of ICUs so that was not a new experience for me. It wasn't a new experience walking into a patient room. But I wasn't prepared for this....

Elisa's room was directly across from the nurse's station where she could be watched at all times through a clear glass wall and door. I could hardly see her for all the apparatus. We could see about an inch of 'normal' skin above her eyeballs. That's all. She had goggles on to protect her eyes because, even in a coma, she was sleeping with her eyes open. It's hard to believe, but we found humor in the ordinariness of that small fact because weirdly Elisa always slept with her eyes open. Although that at least was normal we never did convince the nurses. She was on a ventilator with a tube in her mouth that was taped across her cheek. A hard collar made it impossible to see her neck. The whole left side of her face, including her left eyeball, was purple and swollen.

I could only hold the tips of her fingers and toes. She had IVs running in both arms and a sheet covered her entire body, with splints on her broken left hand and left leg. It was impossible to see the damage to Elisa's pelvis because by now her body was wrapped in a mass of surgical dressings and bandages.

They had split her open lengthwise from the sternum all the way to the pubic bone and widthwise from hip to hip. Big sterile pads, soaked in IV fluids, had been packed down into her abdomen to stop the bleeding that seemed to come from everywhere. Much later another one of the trauma surgeons, Dr. Vasquez, confided that the only other time he had seen that much of the inside of a body was on a corpse.

Instead of sewing Elisa's abdomen back up, the incisions were left open. They couldn't be closed because the tremendous swelling and bleeding would rupture them. But even with hoards of antibiotics the reality is that an actively infected wound like that can't be closed up or it will form abscesses. Infection was a huge black cloud hanging out there because she had a 'dirty' injury, meaning she had received open wounds in massively dirty conditions from getting hit on the road. We didn't know at that time that the EMTs had actually found Elisa 90' feet from the point of impact, impaled on a cable guardrail in the center median of the highway.

A 'dirty' injury is particularly bad news. Elisa's pelvis was shattered so there were lots of surfaces where bacteria could lodge. Once bacteria starts growing in bones it's incredibly hard to get rid of the infection. I knew that possibility loomed out there, but I didn't discuss it with anyone. It was of no value for our family to worry about and the medical staff was well aware of those issues. So I said nothing.

Bleeding to death was the immediate problem.

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Elisa's pelvis had shattered in an 'open book' fracture. In simple terms - it folded it half. Her left ilium, the big wing of the pelvis, broke into four detached pieces protruding out her left side. Both of her pubic rami, the pelvic bones that come around front, broke in multiple places. And her sacrum, the triangular bone at the base of the spine above the tailbone, was...well that has its own miracle. It was simply, "mush."

Blood gushed not just from the bones and damaged organs, but also from three major arteries that had torn. Surgeons could not stop the bleeding during surgery so the only lifesaving option was embolization. Specialized coils were injected into the arteries to permanently stop blood flow. They did three of those in her pelvis - two on the left and one on the right.

They had to get that bleeding stopped because they couldn't get new blood into her fast enough. It was pouring out faster than they could pump it in. She received 15 units of blood in just the first six hours, plus saline and plasma. To put this in perspective, her total blood volume is approximately 8 units. Saving Elisa's life commandeered a tremendous amount of the hospital's supply of blood products.

In addition to the bleeding from her crushed pelvis, her diaphragm on the left side had ruptured. The sacrum, the ilium and the diaphragm. Those were the three big ones.

But the list of complications went on. Her left kidney was lacerated which eventually sealed on it's own, but her total kidney function was exactly zero. Rhabdomyolysis - that's a big medical term for the crush injury that halted Elisa's kidney function. It's basically the release of very large proteins into the blood stream from damage to muscles. Those proteins, or myoglobins, stop up all the tiny filtering parts of the kidneys called nephrons. So she was on 24-hour dialysis.

Her left lung was collapsed and her intestines were up there instead. It's hard to imagine that something like "bring the intestines down out of her lung area" was a less critical issue, but it was because she was on a ventilator and didn't need that left lung at the moment. They eventually brought the intestines down and later removed a section of the bowel plus a good-sized blood clot that was creating a blockage in her bladder.

Amazingly the MRI of her head turned out relatively not too serious. Elisa had received a mighty blow to her skull and, although there was no evidence of bleeding in the brain on the MRI, there was still the question of how badly that would impact her brain function. This was a serious concern for the doctors, but we never talked about it.

Her hair looked like a helmet of dried blood clots, just a mass of clots. They had already washed her hair once before I arrived but dark red, dried blood clots still caked solidly to her head. They tried again to wash it off, but even with deep sedation for pain she moaned and groaned so much that Steve and I finally asked them to quit. We couldn't stand seeing her in agony just from trying to wash her hair. Over time it took four painful, slow attempts to get that mass of dried blood and broken glass out of Elisa's hair.

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I didn't have faith in the ability of the medical system to bring my daughter out whole. My despair wasn't lack of faith in the medical system; the severity of her injuries was simply too overwhelming. And I wasn't just a mother; I was a doctor.

My position when I got to Wichita was that I would tell people that I was a retired physician, but I would not quiz them as a physician. I wasn't overseeing Elisa's medical care, nor was I attempting to second-guess anybody. I wanted to hear information like any mother would with the option that, if I wanted to question somebody, I would ask like a physician who knew a little bit about what was going on. The staff responded to that very well.

I carried a lot of the fear by myself, not sharing it with my family, but it wasn't so much a burden as it was training taking over. As a doctor I had learned to withhold a certain level of knowledge as private, not from the patient but from the family, especially whenever there are serious potential problems. There are the facts and then there's this great big black side of those facts that is potentially very real. But there's also this nice, potentially real rosy side. And as a physician you're always making a decision which side to present a little bit.

Do you present the facts plus a little on the rosy side or the facts plus a little on the black side? It depends on the individual, family members, how much they can tolerate, how much they know, how black the black side is, or how potentially rosy the rosy side is. You learn to judge that automatically. It's part and parcel of addressing tragedy in human beings. You present some of the black side because if you don't there's a tendency for people to say you never told them. Truthfully even then they'll say that. But on the other hand they cling to the rosy side because they want hope. You can't prevent that and you shouldn't even try. Never take hope away from people.

I had felt very strongly that I was flying to Wichita to bring my daughter's body home. I had believed it and yet at the same time I wouldn't allow myself to dwell on it. Neither did I dwell on hope. I couldn't go there because it would have been dishonest to myself. So I tried to stay in the moment and not go beyond. Where I always got into trouble was when I went beyond, like on the plane crying. I went beyond staying in the present moment and couldn't bring myself back. And that's what the song did; it brought me back to trust. Staying in the now, is trust. Right now we can be okay.

I had believed that I was going to bring my daughter back in a box. When I got to the hospital and saw her alive it isn't that I had hope. I didn't. But at least in the now she was alive. By seeing her I could live in that now and be okay. I wasn't thinking into the void beyond. She was in the ICU, so was I, and we were okay now.