Thursday Memo – October 1, 2015

As the Lights Dim – by Rebecca Lubelczyk

I love history and I greatly acknowledge the need for record keeping so that what we’ve accomplished continues to be recognized and what mistakes we made do not get repeated.

In my moments of reflection, I keep coming back to one of the first TMM articles I ever wrote. It was about my older Vietnam Vet who developed chest pressure while playing basketball with some of the “younger” guys. He denied any care, like he did for his HTN and his cholesterol, and only was in front of me because “they made me”, referring to the officers who thought he didn’t look well. My Vet wrote off my concern as an elbow to the chest that one of the players delivered to him and he was well enough to go back. He wasn’t and four hours later presented with an evolving IMI requiring emergency send out, stent, and hospitalization. I wrote the story to underline how meaningful I found my work, how we can each make a difference, and how I found compassion amongst the officers who brought him down, anxious to know if he was going to be okay.

He survived and I took care of him for several more years, until I left that prison being assigned to help out at other sites where I was needed most. Just this past month, I saw him again after several more years, at the prison where I am now because our facility where we met and I took care of him for so long had closed.

The nurse who was evaluating him saw me walk by and had a pleading look on her face. I saw it was my Vet patient and I came over to say a quick “hi” and briefly re-connect as a patient-physician relationship was resumed. I realized quickly however why the nurse looked a little frustrated and desperate.

Dementia had consumed my patient. Apparently he was getting along “okay” back at our old stomping ground, but the change of venue clearly disoriented what little routine he had and now he had decompensated.

“Will you please tell this lady here to take my money. I need to give it to her so she can help people who need it,” was what he kept repeating. We both tried to reassure him that he didn’t need to give any money away (and that his wallet was in a “safe place”), but he would have none of that. “Doc, you gotta help me get my money to those who need it more than I do”.

I asked him where he was. Some hospital somewhere. No, not a prison. No, he didn’t remember the name of the prison where he spent the last 20+ years. Did he remember my name? Of course, it’s Ms. Lubelczyk (and yes, he pronounced it correctly). The nurse nearly fell over as did
I. What about your wife? She could use the money? She’s gone. What about your daughter? She’s sick and won’t be around. What about your granddaughter that I heard you have? She definitely could use it. Oh no, she’s well taken care of. She wants for nothing. “I need to give the money to you. You’ll know what to do with it.” Despite the disease that consumed his brain, somehow he still trusted me.

I left the room, reassuring him I would look into the money situation and I pulled his chart. After looking in a few folders, I found the form I needed – the referral to our Skilled Nursing Facility unit/ADL units. My Vet couldn’t be independent and he needed more direction, oversight, and care than we could provide here.

Upon reviewing the chart to check all the right boxes (“history of HTN, increased cholesterol, IMI with stent….”), I found a portion of the record from decades ago that I had never seen before despite all the years I took care of him. It was the medical records from the army hospitals. Faded copies recounted the initial appearance of the injuries he sustained when a grenade exploded close to his face, causing severe brain damage and a loss of an eye. He also had multiple fractures from the force of the explosion. I read the surgical reports, realizing how close he came to not surviving. He did survive and received an honorable discharge from the service. He had never talked about it. I had never known how he had acquired those injuries. Now I did. I never knew what happened between discharge from the service and his prison term. I never want to know.

As the light dims on his memory, I hope he finds comfort in the services at one of our assistive units. Depending on which one he goes to, I might bump into him again. He may remember me then, he might not. Either way, that’s okay. I won’t forget him.