

From Trauma to Triumph!

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Jack's world suddenly started spinning and flipping wildly. In a blur of chaos his body tumbled toward the earth. He deployed his reserve parachute but he was too low. A loud thump marked the sudden stop at the end.

A small wind-shear twister that caused the freak accident danced away across the drop zone as dust settled around his body. People assumed he was dead. He had to be. But he rolled himself over and started picking teeth out of his mouth. Medics were there within seconds. Thus began his long recovery from a few seconds of terror. Emergency surgery, intensive care, more surgery and critical care soon followed. Eventually he stabilized with 32 bone fractures and unknown tendon and ligament damage the prognosis was grim. His hip was broken in five places and some of his leg bone was still on the drop zone. The doctors were uncertain that the soldier would ever walk again. Miraculously his brain and spine remained undamaged and his spirit was strong and willing.

Then came the day a young second lieutenant came to his room. "Hello", she said with a great big smile, "I'm your physical therapist." At first moving the foot an inch was impossible. Raising the elbow off the mattress posed a major challenge. It was as if the body didn't remember how to do such simple things. Every successful movement

caused sharp pain. Tears were common but so was encouragement. Each brief session soaked the soldier in sweat and sometimes made him pass out from pain or exhaustion. The soldier looked forward to the therapy. It was the way back from the pit. He set goals like touching his left ear with his left hand and finishing The Great



Jennifer Sibble, Physical Therapist Assistant, attaches an electronic pulse machine to the shoulder of Capt. Richard Mindez, 1st Battalion, 487th Field Artillery Co.

Aloha Run. He could see progress measured in inches and degrees. He longed for the day the therapist spoke of when they would wheel down to the clinic. He knew that there was his ticket out of the hospital and back to his active lifestyle.

Physical therapists specialize in evaluating and treating movement problems related to pain, injury or illness. The seven therapists and six technicians at Tripler Army Medical Center see about 1,800 patients each month. The Physical Therapy ward at Schofield Barracks sees another 1,500.

According to Col. Megan Mills, director, TAMC Physical Therapy Department, knee and lower back injuries are seen frequently along with ankles and shoulder issues.

Mills said the therapists are called upon to treat a vast variety of issues with most of the treatments lasting from two weeks to three months-- some lasting twice that long or more. She said the most challenging cases involve neurological issues.

"It's so important that we teach the patients how to care for themselves as much as possible," Mills said. "We don't want them dependent on us. We teach them how and what to do for therapy and for day-to-day living. Our job is not to *do* for the patients but to teach, coach and be a cheerleader so the patients can do for themselves."

The staff uses a wide array of treatments including therapeutic exercise, functional training, mobilization of joints, soft tissue message, aquatic-therapy, electronic-therapy, heat, cold and more.

While in some ways many patients can be considered routine, each is unique and must be treated as such. Injuries, illnesses or surgeries that require long recovery and therapy often involve an emotional component, Mills said. "While telling some patients 'get up, get moving' might be enough, others require a very different approach because their way of life has been changed dramatically and they have to learn how to deal with the mental aspect as well."

Patients' lifestyles often need modification. It's part of the therapists job to connect with the patient by teaching them how to use wheel chairs, walkers, crutches or canes to maintain as much independence as possible.

“Connecting with the patients’ thoughts, listening and understanding how their physical disability effects them mentally and emotionally allows the therapist to better treat them,” said Lt. Col. David Ghodes, deputy director, TAMC Physical Therapy Department. “You’ve got to look them in the eye and really see where they’re coming from. It’s the big picture, the whole body and the mind,” Ghodes emphasized.

The TAMC staff uses motivation, support, encouragement a ton of knowledge and sometimes a good sense of humor to help the patients through what for some can be the biggest challenge of their life. For some the challenge continues for the rest of their life. Their success in physical therapy effects their quality of life and the lives of their families.

“We do all we can to get you back to normal or as close as possible, and I think how I would like my family to be treated,” said Sgt. First Class Stephen Clark, noncommissioned officer-in-charge, TAMC PT Dept. “Patients sometimes feel sorry for themselves and it’s hard to get them to do anything,” Clark said. “They’ve got to go through all the stages until they get to acceptance then we add one more.... *rehab*. “It’s disappointing to see a patient you know can do better but they’re not trying as hard for some reason,” he explained. “We got to keep them moving toward recovery. A lot of our job is motivator, and when I see someone months later and their up and around I feel I did my job,” the NCOIC said.

For military patients, an injury or illness can end their career. Full recovery can mean returning to service. Many remain assigned to their units with limited duty during treatment. For more severe cases soldiers are reassigned to the Medical Hold Company during recovery. When treatment is complete, a medical evaluation board determines if the soldier is returned to duty or medically discharged from the Army.

For Jack, he fought his way through. After weeks in the hospital, in a wheel chair, on crutches and months walking with a cane he was finally able to walk on his own again. Full recovery proved impossible but with an aggressive and persistent therapy he had achieved what many had thought impossible. Last February he was at the start line of the Great Aloha Run without his cane. He finished in two hours and sixteen minutes. He’s been there, done that and got the Great Aloha Run t-shirt.