

Reflections for March

C. William Britt, Jr., MD

A CLASP OF LIFE

Doctor Robert Kraus dictating one EEG report. Put it in the usual format and add all proper punctuation.

Patient: Cullen Hicks.

Age: 17 years.

Date of examination: March 8, 2009.

EEG case number: 09-063.

Referring physician: William Harvey, MD, Neurosurgery.

Reason for referral: Gunshot to the head.

This patient's electroencephalogram recorded at both standard ($7 \mu\text{V}/\text{mm}$) and maximal ($2 \mu\text{V}/\text{mm}$) amplification, shows (pause) no evidence of electrical activity of cerebral origin (pause) either spontaneously or in response to stimulation (pause) during a 30-minute recording–isoelectric EEG.

End of dictation. Sign my name at the bottom.

He pushed “#” and then “9,” heard the feminine machine voice say, “You have specified high priority,” and returned the handset to the cradle. Despite the pauses, the words came out more easily than he had anticipated.

Dr. Kraus took the staff-only elevator down three floors into the ICU. As he approached the nurses' station, Kelli, a pretty young woman wearing a floral pink top and light blue scrub pants, hurried toward him. “Sherry has finished cleaning up after the EEG. She said it looked flat to her.”

“It is,” Dr. Kraus replied.

They walked by the long counter built for writing while standing. The unit secretary, seated behind it at her desk, called to him, “I printed the Apnea Test Protocol off the Intranet and gave it to RT like you asked.”

They walked past the ICU manager's office and heard, “Dr. Kraus!” Both paused while Melissa rose, skirted the corner of her desk, and rushed toward them. “We tried to reach both doctors. The answering service said you were on call and they couldn't be reached.”

Dr. Kraus replied, “I called the cell and home numbers I have and didn't reach anybody. Either one would have done it. I guess they're out of town.” Tears came to his eyes as he said, “We loved that boy. He has been a close friend of my son since elementary school.”

After a noticeable interval Melissa said, “We know. But it happened on Friday. Dr. Harvey told the family he was brain dead yesterday afternoon. We had to wait until this morning for the EEG. Life Center talked with the family last night. Everyone is just waiting for you to do the . . . the second . . .”

She stopped talking when Dr. Kraus pulled out a handkerchief and began wiping his eyes. A vision of Cullen holding a pistol to his head in the hallway just outside the school cafeteria, bustling and noisy during an ordinary lunch break, and the imagined nightmarish sound of the gunshot echoing through the concrete and metal-lined halls came back into his mind.

The plate glass door to room 23 was open. Both nurses went in, but Dr. Kraus stopped at the entrance. He put the handkerchief back in his pocket, felt the tightness in his throat intensify, and stepped inside.

The overhead lights were bright. Clint, a respiratory therapist, was standing on Cullen's left near the ventilator. On the other side of the bed several bags of IV drips were suspended at eye level on metal poles, and a bag of pale urine hanging on a knee-high bedrail was partly visible behind a tray table. Over the head of the bed, a monitor displaying multicolored wavy lines, numbers, and words seemed to hang unsupported.

The head of the bed was elevated for the mechanical ventilation. The strokes of the ventilator beat a slow, regular rhythm and gently shook the ruffled tubing.

“How long has the FIO₂ been at 100%?” Dr. Kraus asked.

“Ten minutes,” Clint replied. While supinating Cullen's left wrist he continued, “I'll draw the gas.”

Dr. Kraus turned to Kelli and said, “I need an emesis basin filled about half an inch with water and ice, a towel, and a 6-cc syringe, a . . .”; before he finished, she went to a cluttered counter at the side of the room and began moving items to the tray table.

“Lower the whole bed a little,” he ordered Melissa, who reached to a panel at the foot of the bed, pushed an icon, and briefly activated a motor.

Cullen was covered up to the mid-chest by a single white sheet. A loose bandage covered the back half of his head. His lids were closed onto yellow,

The neurologic case, the characters, and their interactions described in this story are fictional.

fluid-filled conjunctiva bulging through narrow palpebral fissures. His lower face was contorted by the tape that secured the endotracheal tube; his mid-face looked puffy and wide. Matted, damp areas from the electrode gel and dry blood splatter were interspersed in his wavy, light-brown hair.

Bob remembered watching “Diehard” at home with Jeremy and Cullen when they were 10. “Cullen, don’t tell your parents we watched an R-rated movie,” he had said. Cullen cackled in high-pitched laughter and said with his clipped impediment, “I can’t wait t’ teow ‘em!”

Dr. Kraus took the flashlight from the tray table in his right hand, leaned over the edge of the bed, and elevated both upper lids with his left thumb and index finger. The eyes and pupils were mid-position. He shined the flashlight on the right eye and then the left; neither pupil constricted. He returned the flashlight to the tray table, reached to Cullen’s chest with his right hand, and rubbed his knuckles brusquely on the sternum; neither pupil dilated. Then he picked up a tiny wisp of cotton and stroked each cornea in succession; neither eye blinked.

Dr. Kraus straightened up and said, “Clint, loosen the supports for the tubing. I’m going to move his head.” Clint adjusted a clamp carefully. Then Kelli elevated the upper lids while Dr. Kraus placed one hand on each side of Cullen’s head and rotated it swiftly side to side; each eye remained centered in its orbit.

After looking over the tray table Dr. Kraus picked up a white, terry cloth towel and fitted it into the angle between Cullen’s neck and the anterior border of his right trapezius muscle. Setting the emesis basin on the towel, he scooted one end under the ear. While pulling up and back on the pinna with his left hand he repeatedly drew ice water into the syringe with his right, injected it into the ear canal, and caught the returning stream in the basin. Neither he nor Kelli, who was elevating the upper lids again, saw movement of either eye.

Dr. Kraus paused to extend his low back. He recalled arriving at middle school late one afternoon to find Jeremy and Cullen quietly playing chess. When Cullen, wearing a tie-dyed T-shirt, plaid lounging pants, and house shoes, had noticed him, he jumped up, ran to him with shoes flopping, stuck out his right hand, and said gleefully, “Hi, Bob!”

Tears filled Bob’s eyes again. He could feel that coarse, dexterous little hand in his. *Why had he done this? Why?*

Holding the towel, basin, and syringe, Dr. Kraus moved to the other side of the bed. With Kelli’s help he repeated the cold water irrigation on the left side; the result was the same.

After putting the syringe and basin on the tray table, he picked up the reflex hammer, grabbed the

topsheet at the foot of the bed, and tossed it off Cullen’s legs. Then he crisply tapped each knee and ankle while gently flexing the joint. After that he stroked each plantar surface with the pointed end of the handle. The testing did not elicit movement of the legs, feet, or toes.

He put the hammer down. Between his right thumb and index finger he squeezed the nail bed of a digit on each limb. Then he pressed firmly on Cullen’s medial left eyebrow. The last time Bob touched Cullen was to compress his right supra-orbital nerve in its foramen. The pain-inducing stimuli elicited nothing.

Dr. Kraus asked Clint, “Are you ready with the oxygen cannula?”

“I’ve got it right here,” Clint said.

“Go ahead,” the doctor said, looking at his watch.

While Clint disconnected the ventilator’s tubing and inserted the cannula into the endotracheal tube, Bob thought of Cullen bringing his computer, its speakers, and a travel case of CDs to the house last weekend. He could hear the clatter of dueling keyboards, the staccato machine sounds of digital battle, and the whoops and chatter of two boys that had filled the basement. Cullen had never revealed his pain to Jeremy. Would Jeremy feel responsible? Would he feel that he had failed Cullen? Would Jeremy take his own life?

After repeated glances at his watch, Dr. Kraus said, “It’s been 10 minutes.” Cullen had not breathed.

In a moment Kelli said, “I’ve got the gas,” and Clint reconnected the ventilator.

The deathbed ritual completed, Dr. Kraus left the room.

After reviewing the ABG results, Dr. Kraus walked out the main entrance to the ICU and saw David and Anna sitting in a corner of the waiting room. They saw him immediately, rose, and took a few steps forward.

Feeling tightness in his throat and pressure in his orbits, Bob could not speak. He looked at them, shook his head slightly, and began to cry. He did not reach for his handkerchief.

David, short and thin, had never looked so gaunt. Neither had Bob ever seen Anna’s blepharospasm to be as severe.

They stood on the gray carpet in a silent triangle of grief. Then David spoke, addressing no one. “On Thursday night when he went to bed, he walked by my chair and touched me on the shoulder. I thought he meant, ‘I love you.’ I know now . . . he was . . . saying goodbye.” Bob and David both sobbed.

Then Anna spoke during long, forceful squints, “They said seven . . . seven people . . . would get a

better chance to live.” David stepped closer to her, and they embraced.

When Bob thought he could talk, he said, “I’ll go back in now. Someone will come tell you when it’s over. I . . . can’t” David moved away from Anna and squeezed Bob’s forearm. Then Bob turned and walked slowly, stoop-shouldered and head down, back into the ICU.

Melissa said, “Life Center wants to know when you’re going to pronounce him so they can call the surgeons.”

“Now,” Dr. Kraus replied, and returned to room 23 with Melissa and Kelli. The three stood at the foot of Cullen’s bed.

“I’m pronouncing this patient dead on the basis of brain death criteria.” Dr. Kraus looked at the wall

clock with its black case, two stationary black hands and a thin line speeding around its radius. “The time of death is 11:20.” Kelli approached the body, and Melissa rushed out to her office.

Dread overcame Bob as he envisioned the gruesome harvest. Then he pictured David and Anna in their clasp of Life, heard her serene words again, “seven . . . seven people . . .,” and the horror passed.

While walking away from the room, Bob removed a pen from the inside pocket of his jacket. He longed to be with Jeremy, not to talk about Cullen now, but to be near, and to hold his son close. Dr. Kraus stepped up to the counter at the nurses’ station, found the blue binder with “HICKS” printed on the spine, opened it by the Progress Notes tab, and began to write his note.

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