

Becoming Appendixless

*This is the whole truth and nothing but the truth with the exception of where it is not.
There are liberal amounts of poetic license taken and applied.
Please accept with the humor intended. Exaggerations abound.*

Well, the consensus was, after the experience of the colonoscopy, was to have my appendix removed as there was something detected that should be extracted before being allowed to turn into something that has the potential to ruin my future days.

Surgery was scheduled and I was relieved to know that the nighttime horrors associated with the night before the colonoscopy would not need to be repeated. The level of relief cannot be overstated. This benefit was somewhat offset by my understanding that piece of my body, that has served me well for all my days, would need to be '*surgically removed*'. Now, I am not a student of physiology or medical science, but I had always maintained that what was in me at birth was intended to remain within throughout the entirety of the life cycle.

I am not a huge fan of such activities that fall beneath the umbrella of '*need to be surgically removed*' but also recognize that throughout the length of my early life to present I have respected and submitted to the recommendations of those '*in the know*' within the medical community.

It is generally well known that I tend to overreact to forthcoming medical procedures and there is always a nagging and inescapable proclivity to envision the worst. Well, enough of that for now.

As we pulled into the parking lot of the hospital on Wednesday morning Tim McGraw's song, "*Live Like You Were Dying*" was playing on the radio and I thought to myself, "Too late," with a deep sense of regret as I turned the car off and exited the vehicle.

We walked into the hospital at 11AM for a scheduled 1PM surgery and I go through the process of check-in, and then am escorted into the pre-op room and my pre-assigned curtain walled waiting room. The attending nurses are beyond nice and ask me how I am. Of course, I am NOT all right but realizes

the futility of expressing my true response. I simply say, “ I am nervous” and am told that is normal.

I ask one of the attending nurses what function of bodily maintenance does the appendix deliver? I, again not a medical professional, have heard rumors suggesting the appendix serves as assistant switch manager for the neural network and directs messages to the 5 senses. The rumor further suggested that should the appendix be removed the full functionality of selected senses would be diminished. I have given thought to this and have concluded that I would sacrifice smell and touch should I be given a choice. I kept this thought to myself and was somewhat surprised when the nurse responded. “The purpose of the appendix is to supplement the doctor’s salary,” she said with a smile. I think for a moment and grant that this makes sense. God and all those mysterious ways and unexpected gifts.

I disrobe, put on that gown that engulfs me and defies my attempts to tie the ribbon in the back, leaving my backside uncomfortably exposed. I lie down on the bed and call out that I am ready. The nurse brings two wonderfully warm blankets, goes through a series of tests and questions, pokes and prods but gets the IV going, and, as all appears ok, heads to the waiting room to get Pat – *identity purposely concealed throughout*.

Now one of my many interpersonal weaknesses is the ability to recognize faces out of context. You will see a blank stare if I encounter you outside of the environment where we typically associate. So, the Doctor comes in to talk, wearing a mask, but I think he is the anesthesiologist and carry on the conversation in that vein. We finish our talk, and he exits the room.

The nurses come back in and provide a brief update on post-surgery behavioral requirements. I tell them I am quite sure that I will remain bedridden for 3 to 4 weeks and would prefer to be accommodated within the hospital in case medical emergencies arise. They summarily ignore my request and say, “You will be leaving today.” They reassign their attention to Pat and say, “You will be sure he gets up and about within the 2nd day?” Pat nods her head in affirmation. I turn toward Pat and plead, “Pat?” She gives a wave and shakes her head in dismissal. “Good girl,” says a nurse to Pat with emphasis. I slink into my abandonment.

Then a person comes in and introduces himself as the anesthesiologist and I immediately think he is an imposter as I have just recently had a discussion with the anesthesiologist. Is it possible there is an imposter in the pre-op that is not recognizable because of the practice of mask requirements? My fear factor rises to a level near 10 on the scale. I seem to recall an episode of Gray's Anatomy where Dr. Meredith quietly alerted Dr. Webber that she suspected an imposter was 'scrubbing up' just outside the O.R. So, I know my suspicions are not outside the realm of possibility. Pat senses the change and looks at me quizzically and asks, "What's the matter?" I tell her my fears and she again simply waves them off with a dismissive shake of her head.

The two hours pass ever-so-slowly and ever-so-quickly if that makes any sense. I flounder about within a distorted time continuum as I witness several patients being ushered back into the room after surgery. They each appear fully vanquished. The fear level bubbles upward.

The nurse comes in and tells me I will need to go the bathroom and comes alongside the bed to carry the IV tube. I get up but realize the sun is shining on my backside and fumble about trying to close the gap of the gown. "We've seen it before," a nurse says. Nonetheless I hold the back of the gown with my hand behind my back as I complete the walk of shame to the bathroom, passing in front of the nurses gathered at the primary station. The nurse follows me into the bathroom, and just before I say something, he hangs the IV bag on a hook and exits the room allowing me to close the door — and I lock the door. I complete my business, unhook the IV bag, wash my hands (2x), and proceed on the walk of shame back to my curtain walled room. I can sense the eyes but do not look up.

I climb back on the bed and am given two, brand new, heated covers. I listen to a post-op conversation across the aisle. The gist of the talk is like the 4 pages of possible side effects that follow the splash page of the couple walking through a field of flowers, sharing a beatific grin resulting from ingestion of this wonderful, new medicine that cures what ails you. The grin would be short lived if they only would take the time to read the tiny print on those 4 pages. For those 4 pages, reflected in 8-point font, include: *severe nausea, explosive diarrhea, suicidal tendencies, loss of vision, inability to speak, uncontrollable tremors, organ liquification, night sweats* and the list goes on

and on. I listen closely to the litany of *'things to watch out for'* and conclude that the odds are not in my favor.

The O.R. nurse comes in to talk and assures me that everything will be fine. I am not sure but say nothing.

The real – *I do so hope* – anesthesiologist comes in the room and administers a shot of what he says, “Will make you feel all right.” Imposter or not he is correct, and I begin a drift into calmness. “I am a brave soldier,” I say to myself, through mumbled thoughts. I sense my bed being moved into the O.R. but I am not fully sure until I see the bright lights and the collection of masked individuals in their medical scrubs. “Is that the imposter or is he the real doctor?” I think to myself before being enveloped by the awesome gravitational powers of the black hole. I crossover the event horizon and disappear.

I awake in the pre-op room to a loss of self and place but gradually realize with extreme gratefulness that I survived. I am alive and given a chance for renewal. I will change my life for the betterment of mankind. God be blessed for He / She has surely blessed me on this most perilous day. I slowly regain full consciousness. The nurse greets me and tells me everything went as expected. I am given a short time to rest, and another nurse comes in and recites the litany of peril. Things to ‘watch out for’ and to call them immediately if any of these are experienced. There is a slight feeling of impending doom that darkens the day. Who reads those 4 pages of possible side effects so carefully expressed in 8-point font? How can one escape so many lurking health hazards?

I am told that I must go to the bathroom before being allowed to leave. This is the concluding step to the process. “I don’t feel a need to go,” I say. “You have to go,” they say with professional politeness. “I just went before, as you asked,” I say. “You have to go,” they again politely say. I lie there for a few minutes, am assisted up and given time to regain my balance. I take a deep breath, fumble to grasp the open back of my gown, call up courage in my weakened condition, and begin the walk of shame once more. I hold my head up high and think to myself, “They’ve all seen it before, be brave.”

I get dressed and am wheeled out through the waiting room, there is no sense or display of celebration. I think to myself that I am leaving the facility appendixless, without the services of that lifelong friend, one that surely must've possessed purpose. Rumors, I think to myself, are sourced from fact. *'Vaya con Dios my old friend.'*

Pat has retrieved the car and is waiting just outside the door. I mention that I intend to fully bedrest for weeks. "That's not happening," she says with authority as she begins to drive.

I mention that I won't be able to lift anything over 10 ounces and she will need to hold my coffee cup so I can take sips.

Pat turned toward me and said, "The limit is 10 pounds, and I will not be holding your coffee cup."

"I'm pretty sure it's 10 ounces," I counter weakly.

"10 pounds," Pat answers some element of exasperation.

I slink into a mild sulk, still stuck on 10 ounces.

After a short time, Pat says, "I am happy that everything went well, and I love you," as she reaches over and holds my hand.

Life is SO good.

*I do hope my eyesight, hearing, smell, taste, and touch are not affected;
but if they are I hope smell and taste are the ones diminished, and then only slightly so.*