

The Toughest Fight

Written by Bob Ryan



30-year old, Jesse Gurecki, revisits his past, where a collision with a bus could've ended his life if it hadn't been for the courageous doctors at John C. Lincoln hospital.



(Jesse's physical therapy has allowed him to recover some use of his leg muscles. Dr. Mangram checks his ability to flex his thigh muscle during a recent checkup.)

"I owe her everything. She's one of the best doctors I've ever seen."

Jesse Gurecki, now 30, is the first to admit he is lucky to be alive. And he's the first to give credit to Alicia Mangram, MD, medical director at the Level I Trauma Center at John C. Lincoln North Mountain Hospital, along with the rest of the skilled medical team who saved his life.

Gurecki had been honorably discharged from the United States Marines in 2009, after serving his country with a tour of duty in Iraq and being part of a training mission in Afghanistan. Although his family lives in upstate New York, he'd come to Arizona to attend school.

Then, on Nov. 16, 2011, while riding his bicycle on a clear, beautiful day in a north Phoenix neighborhood, the unthinkable happened.

Ahead of him, he saw a stopped school bus, so he began to go around it, on the left.

That was when tragedy struck and Jesse found himself on the ground, directly in the path of the now-moving rear wheels of the bus.

Unlike many trauma victims, Gurecki remembers nearly everything about the accident with astonishing clarity. "I tried to push away from the bike and out of the way of the rear wheels of the bus," he recalls, "but the back tires rolled right over my pelvis and my femur."

Once the bus was stopped, someone was at his side quickly, calling for emergency help while assuring the young man that he would be all right. A policeman arrived shortly thereafter.

Despite his injury, Gurecki remembers getting angry with the policeman for cutting the straps of his backpack to get it out of the way.

"I told the cop not to cut the straps – that I could undo the buckle – but he cut them," the young man recalls. "The EMTs showed up at that point and they were laughing because I was such a mess, but I was mad at the cop for cutting up my book bag."

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He then remembers a bumpy ambulance ride that took him to the doors of the Level I Trauma Center at John C. Lincoln North Mountain Hospital.

"As soon as they pulled me from the ambulance," he continues, "I remember the doors of the Trauma Center opening, I saw people and then I passed out – my blood pressure had dropped to 60 over 40."

On seeing Jesse for the first time in the trauma room, Dr. Mangram says that he was pale, breathing with difficulty and that he had lost a lot of blood. Jesse's hips and pelvis had been smashed and significant damage had been done to the perineum. Because of his massive blood loss, it was difficult to immediately determine the extent of damage to the area, but it was obvious that his injuries were life threatening.

Jesse was immediately given a couple of units of blood to help stabilize him so he could be taken for a CT scan to determine the extent and nature of the damage to his pelvis.

According to Dr. Mangram, "The CT scan showed significant fractures. I knew that he would need to go to interventional radiology, so that some of the pelvic blood vessels could be embolized to prevent further blood loss. I could also tell that at some point he was going to have to have a colostomy."

Fortunately for Gurecki, a Level I Trauma Center has the resources ready at hand to deal with such a massive and severe trauma. He was quickly taken into an operating room where Dr. Mangram's team performed what's called a peritoneal "packing," which helps to control bleeding until the interventional radiologist can begin sealing off the vessels with embolization.

"When you have the extensive injuries that Jesse did," Dr. Mangram observes, "bleeding is extremely hard to control. That night, he was pretty much all we did."

"Coming out of the operating room," she continues, "he still needed major resuscitation and damage control while interventional radiology got his bleeding more stabilized. But he was not declared stable for about 18-20 hours and after receiving more than 40 units of blood."

Dr. Mangram also mentions that, along with the massive blood transfusion protocol, Jesse received a drug called Factor 7, developed by the military to deal with severe combat injuries. It is a very expensive drug but one that has been shown to reduce bleeding and save lives.

The trauma staff rates a patient with what is called an "injury severity score." Patients with a score of more than 25 have an incidence of mortality that can range as high as 30-50 percent. Jesse's score was significantly higher than that. But he pulled through.

After losing consciousness in the Trauma room, Jesse's next memory is nearly a month later.

"Next thing I remember, I open my eyes, I'm hooked up to all kinds of tubes and wires, and my mom's standing there. I had a tube down my throat so I couldn't really speak. I just waved at her, she started crying and then she told me it was December."

But a significant part of Jesse's fight was still ahead of him.

"He needed extensive orthopedic surgery, and plastic surgery as well," Dr. Mangram relates. "He needed just about everything."

Gurecki was at John C. Lincoln for two and a half more months. "I got stable enough come out of ICU," he says, "and they started talking about what kind of therapy and care I would need post discharge. My mother and father and I contacted the Veterans Administration." But the VA said that he was not eligible for coverage. It's still unclear exactly why Gurecki's application was denied. But, at the time, the problem seemed insurmountable.

"It hit me like a bombshell," the young vet recalls.

Dr. Mangram refused to let the matter go. "It just didn't make sense to me," she says. She began contacting everyone she could think of who might be able to help find a solution to the situation.

Jesse recalls the doctor's tenacious efforts on his behalf with a smile. "Without her, I wouldn't have gotten the follow-up care I needed. ."

Jesse eventually got VA coverage and got the help and support he needed. Bit by bit, miraculously, he began to make progress. He's worked harder at his recovery than most of us will work in a lifetime. This young veteran had risked his life in a war zone, only to face the toughest fight of his life back here at home. His recovery in the trauma center was touch and go for weeks, but his tenacity and courage have him not only healing, but winning his way back to a more normal life.

Speaking with him today, one is struck by the firm, positive attitude with which the young man has chosen to approach his future, despite his injuries.

When asked her impression of Jesse as a person, Dr. Mangram is effusive. "He's one of the kindest young men. Even with all he's been through, he's never been bitter, always very grateful for everything that's been done for him. Just the kind of kid you'd want to know is overseas representing us somewhere."

"He'll do well," Dr. Mangram says, confidently. "He'll overcome this tragedy."

Summing things up, Jesse shifts the focus from himself and says, "I owe so much to John C. Lincoln. It's an amazing facility. If something ever

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happens to me, or if someone I know needs help, I'm taking them there. That's the place I'd want to be treated."

To learn more about John C. Lincoln Health Network, visit www.jcl.com.