

I Got Better - The Latest Working Draft (27 December 2011) - TM Kearney

I Got Better

By

Tom Kearney

Oxford Street, in Central London, is Europe's "Busiest Shopping Street." It is also Europe's "Deadliest Shopping Street." With over 200 million visitors per year, Oxford Street is 35 times more dangerous than the average London street, with a bus collision typically taking place every 3.4 days in the area. Since 2000, over a thousand casualties have resulted from buses striking pedestrians; more than two hundred of whom have been killed or seriously-injured.

This is the true story of one of those victims.

CHAPTER I: Bus Day

Everybody's got plans. Until they get hit.

—Mike Tyson

Friday, 18 December 2009

Oxford Street

7:50pm

You do not see the sixteen-ton bendy bus moving toward you at 30 feet per second. You do not feel it hitting your head and body, your left lung bursting from the impact while the ribs on your right side break and pierce your right lung and also your liver. You do not feel yourself flying fifteen feet through the air, your head and body smashing on the street, your skull cracking on both sides. You do not see yourself lying on the street, blood flowing out of your ears and mouth, still smartly-dressed for the office, winter and your fine lunch at the Royal Automobile Club. You do not feel your eyes rolling into the back of your eye sockets while you instinctively suck for air to breathe through your punctured lungs. You do not feel yourself falling into deep unconsciousness, a coma. And you do not feel the crowd of people gathering around you and the snow falling softly on your bleeding skull and now lifeless body.

You won't be home in time to put your sons to bed.

Friday, 18 December 2009

Hampstead, London

5:00 am

It's fucking dark. The sun comes up very late in London during winter and most days it appears not to at all. I've always been an early riser and, here, summertime's a cinch: when the sun is high in the sky at 5 am, by the time you wake up the day already has a jump start on you. 5 am in December feels like you haven't really gone to bed yet.

Careful not to wake my wife and children, I creep downstairs to the kitchen, fire up my Blackberry and laptop to see what missives have come in from wide-awake Asia, just-waking South Africa, and just-going-to-bed North America. I rush through the overnight communication: breaking news about the coal markets in Oz, Indo, and China, more questions regarding my transaction in South Africa, some queries regarding the timing of my upcoming Christmas Holiday in Cape Town (and more meetings to arrange there with counterparties in-between some family time). I then scan through photos of our Christmas tree I had taken the night before to send to the family back in the US. Since we are not planning to be in the States for Christmas this year, we might as well show everyone that we are already in the holiday spirit in London.

From: Tom Kearney

To: Family & Friends

Re: Dreaming, White Christmas, Whatever

Sent: Friday, 18 December 2009

Good morning. We opted for a bigger tree this year. Lesia, Peter, and Daniel decorated it last evening. Yesterday, Daniel also had his annual Christmas Play – he read his lines beautifully.

We look forward to our trip to Cape Town on Monday. It's sunny and warm there.

It's definitely not sunny or warm here in London.

It snowed last night – commuter chaos beckons!

Love,

Tom

This Christmas holiday could not come any sooner – my wife (Lesia), my two sons (Peter, 11 and Daniel, 7) and I desperately needed some “family time” together. Only three months before, I had become CEO of a commodity trading company based Johannesburg, South Africa. Although my family and I were London-based, South Africa had become my home for three weeks out of every four. This new reality was very hard on us.

My last day in the office in London prior to Christmas turned out to be crazy-busy: two South African colleagues had flown to London for a lunch meeting I had organized for them with one of my long-time business associates, Adam Cunliffe, to discuss freight railway opportunities in South Africa. We meet at the Royal Automobile Club (RAC) and have, for the season and the industry, an unusually sober lunch: since it’s the last Friday before Christmas, we all need to return to offices afterwards to clear our desks before the upcoming holiday. Afterwards, Adam and I meet downstairs for a chat because it’s been a while since we had last caught up. Talk revolves around a recent Competition Tribunal Case in which I had been a witness for the defense (Adam’s main competitor), my upcoming family holiday in Cape Town and the amount of travelling I’ve been doing for my new job. We say our good-byes and I begin to make my way on foot for the twenty-five minute walk back to the office on Cavendish Square. It is bitter cold outside: an icy wind is starting to blow and it feels like it’s going to snow.

While en route through a New Bond Street crowded with shoppers, I get a phone call from a friend, Gareth Owen, who suggests that we grab a quick pint before I get back to the office. Gareth had just finished his business school exams and wanted to talk about post-graduate employment ideas. I meet him at the Blue Posts near Piccadilly for a quick one. We order a couple of lagers (Staropramens, to be exact) and talk about our upcoming Christmas holidays, the work he’s having done on his new house, post-graduate employment opportunities, and the emotional toll of my new job on me and my family. After promising to get an Omani flag for me during his holiday (my flag collection is huge, don’t ask why I collect them), Gareth and I say our good-byes near the Green Park Tube Station. I make my way up New Bond Street again on the trek toward Cavendish Square. The wind cuts into my face and I pull my scarf further up my neck. It is a fucking mob scene: I have never seen the streets and sidewalks so crowded and make a note to never come down to the Oxford Street area so close to Christmas.

My phone rings half-way up New Bond Street: it’s my wife.

“It’s late. What time are you getting home?”

“What do you mean, ‘late?’”

“It’s nearly eight and I’ll be putting the boys to bed in about an hour. Are you coming home before then?”

“Christ. Sorry. You’re right. I’m on my way back to the office now. I just need to grab my laptop and a cab. It’s insanely busy here on Oxford Street.”

“It always is at Christmas time. Come home when you can. Love you.”

“Yeah. You too.”

I still cannot believe how crowded Oxford Street is. The pedestrian signal across Oxford Street near the New Bond Street intersection appears to be out of order, so I turn right down the south side of Oxford Street. Masses of people are everywhere. Buses are everywhere too. My phone rings again. It’s my friend Clive Murray, London’s most active coal broker.

“Clivey. What up? Goddamn, it’s cold and crowded here on Oxford Street.”

“I know- we’re right near your offices. If you’re that close to us, why don’t you come out for a Christmas beer with Paul and me?”

“That would be very nice, but my wife just called and said I have to get home to put my kids to bed. So it’s back to the office and home for me.”

“C’mon Tom, it’s a Christmas beer...and we’re right near your offices.”

“No can do, man. But I tell you what: let’s meet for a coffee on Monday morning. We leave for Cape Town on SAA that evening. Is Starbucks at 10 am OK?”

“You Vallie! I’ll give you a call first thing Monday morning about that coffee. Have a great weekend.”

“Thanks mate. You too.”

I reach McDonald’s on the south side of Oxford Street. I can see my office building across the street. A quick jaunt upstairs to the office, check my emails, pack up my computer, and then catch a cab near John Lewis. I’ll be back in Hampstead by eight thirty – in time to put my boys to bed. I wait for the green man on the corner curb next to the stop light, jostled by massive crowd of noisy Christmas revellers and shoppers. Oxford Street is uncomfortably packed with people. I wish I were already home with my family.

From: Lesia

To: Family & Friends

Re: Tom

Sent: Saturday, 19 December 2009

I have some horrible news. Early yesterday evening while on the way home from work, Tom was hit by a bendy bus on Oxford Street. He has had a significant head injury and both his lungs were punctured.

He is in the ICU in critical condition. They have done a full body CAT scan and hope to have the results shortly. I will keep you posted as and when I know more (it's 4 am here).

Love,

Lesia

From: Lesia

To: Family & Friends

Re: Tom

Sent: Sunday, 19 December 2009

It's 9 pm and I just came back from the hospital. I have spoken with the neurosurgeon and the consultant doctor in charge of the ICU. Tom is in a deep coma. He had a Glasgow Coma Scale score of 3 out of 15 (15 being normal, 2 being fatal) when the ambulance arrived.

Apparently, Tom's brain was massively jostled when he was hit by the bus. In addition to his head injury, both of Tom's lungs have collapsed. His left lung collapsed upon impact and his right lung was punctured after his ribs were broken and driven into it. The ribs have also lacerated his liver, but that does not appear a major issue at the moment. The doctor said that Tom does have some things in his favour: he is fit and was in very good health.

I will be at the hospital tomorrow at 2 pm GMT (9 am EST). I will let you know how he is when I return in the early evening. Please do not call the hospital. They have asked for all communication to go through me as they do not have the resources to respond to everyone's calls. I will try to keep you informed as much as I can.

"ICU."

"Hello. I'm calling from Maine in the USA. My son, Tom Kearney, was admitted to your ward late yesterday evening."

"You should come to the hospital."

"We are getting our passports and plane tickets organised right now."

"I would recommend that you come as soon as possible. Your son is quite unwell."

From Peter Kearney's "Scrap Book for People Who are Away"

Chapter 1 – Dad's Bus Accident

Monday, December 21, 2009

Dad, today Louis came over today. We played on the Wii. Then we went to Giraffe. I had a beef burger with ketchup and BBQ sauce and chips. I was very concerned about you. Louis and I also watched 'Meet the Fockers.' After we dropped off Louis, I bought you this Scrap Book and mum's Christmas present.

From: Lesia

To: Family & Friends

Sent: Tuesday, 22 December 2009

I met this afternoon with the lead Consultant for the ICU. She told me that Tom has two life-threatening injuries:

A traumatic brain injury: a basal skull fracture and subarachnoid hemorrhaging (bleeding in the area between the brain and the thin tissues that cover the brain).

A severe lung injury: a punctured left lung which has now re-inflated and a bruised right lung with contusions to the lung tissue, which has caused Acute Respiratory Distress Syndrome (ARDS).

Each injury on its own is life threatening, and the combination makes it much worse for Tom. The doctors have to balance management of the head injury with the lung injuries, as the treatment required for the brain will have a negative impact on the lungs and vice versa. This is what we are dealing with now:

Brain Injury: the head trauma has caused Tom's brain to swell. According to the NHS Website (whatever information you can find, please send it to me!), "The pressure within the skull then increases as the brain has no room to expand, which sharply reduces critical blood and oxygen supply to the brain. This excess pressure, known as intracranial pressure (ICP), can cause further brain injury. Sudden ICP is a serious and often deadly condition and is the most frequent cause of death and disability in brain-injured patients. If the underlying cause of the raised ICP can be treated, then the outlook is generally better. If the increased pressure pushes on important brain structures and blood vessels, it can lead to serious, permanent problems or even death."

The doctors are trying to reduce the pressure of the swelling in numerous ways: heavy sedation, cooling him down, breathing through a ventilator, muscle relaxant, providing medication to increase the blood pressure and the blood flow to the brain. The pressure on the brain has fluctuated between 21 and 25. 7-

17 is normal and they are concerned if it goes over 25 because blood cannot flow to the brain at higher pressures. If it exceeds the mid-40s, it means no blood is flowing to the brain. It is currently at 21-22. If the pressure increases over 25, they will try other means to bring it down, because brain pressure above 25 is often fatal if it is allowed to continue. If the doctors cannot reduce the ICP in the ways listed above, they will have to perform a decompressive craniectomy (DC) which will remove part of the skull bone at the front of the head leaving the brain protected by the membranes and scalp. This creates an opening for the brain, helping to control swelling and high pressure. Later, they would repair the opening using the original bone or a synthetic plate.

Lung Injuries: they have given him antibiotics because they believe now that Tom also has Acute Respiratory Distress Syndrome (ARDS), which has been caused by the inflammation to his lungs when they were punctured. According to the NHS Website again, “ARDS (I never heard of it before) is a life-threatening lung condition that prevents enough oxygen from getting into the blood. ARDS leads to a build-up of fluid in the air sacs. This fluid prevents enough oxygen from passing into the bloodstream. The fluid buildup also makes the lungs heavy and stiff, and decreases the lungs' ability to expand. The level of oxygen in the blood can stay dangerously low, even if the person receives oxygen from a breathing machine (mechanical ventilator) through a breathing tube (endotracheal tube). The goal of treatment is to provide breathing support and treat the underlying cause of ARDS. This may involve medications to treat infections, reduce inflammation, and remove fluid from the lungs. A breathing machine is used to deliver high doses of oxygen and a continuous level of pressure called PEEP (positive end-expiratory pressure) to the damaged lungs. Patients often need to be deeply sedated with medications when using this equipment. Treatment continues until you are well enough to breathe on your own. About a third of people with ARDS die from the disease. Survivors usually get back normal lung function, but many people have permanent, usually mild, lung damage. Many people who survive ARDS have memory loss or other problems with thinking after they recover. This is due to brain damage that occurred when the lungs weren't working properly and the brain wasn't getting enough oxygen.”

They have now brought his temperature down to 36.2. Yesterday, the pressure on the brain went above 30, but it has been back to normal levels today. The brain injury remains stable as per yesterday's CT scan but the Consultant told me that he has a fracture to the base of the skull, which may get infected and could also be fatal.

Because of the ARDS, there has been a steady deterioration in his lungs. If Tom did not have the traumatic head injury, then lower levels of oxygen and higher levels of carbon dioxide would be an acceptable approach. But, because of the head injury (and the swelling which is reducing the amount of oxygen to his brain), they have had to push his lungs harder. They are going to put him on an oscillating ventilator, which will give relief to the lungs. Let's hope that this enables an improvement to the chest.

He remains in a deep coma, now medically-induced to keep his inter-cranial pressure down and to help the hospital treat Tom's ARDS.

Tom's parents and my aunt Oksana arrive tomorrow (Wednesday) from the United States. It will be good to have them here.

From Peter Kearney's "Scrap Book for People Who are Away"

Tuesday, December 22

Today we went sledding. At one point I did a flip. I felt like I was flying into the beyond so fast that I could barely see what was going on. At three o'clock we went in Alexander and Nico's house. We had a competition, played mini-golf and we played on the computer. We had pizza for dinner.

"Hi Tom. This is Oksana.

You are in the hospital. You were hit by a bus on Oxford Street and have been in a coma. You have been given drugs to keep you paralyzed and you can't move now because you have these drugs in you.

Lesia, your mother and father are here. Peter and Daniel are at home, they send you their love, and they cannot wait to see you."

CHAPTER 2 - The Wrong Way to Tipperary

Headmaster Kearney's mind is an elegant instrument, faultless in its logic, practiced in its idiom and beautiful in its metaphor. Frequent excursions into the realm of the supernatural have given it a warmth and a charity not of this world.

—Leonard Feeney (“Skeheenarinka” from *Fish on Friday*, 1934)

I find myself in the garden of my great grandfather's house in Skeheenarinky, Tipperary. It is a bright but overcast day – it may rain later. Typical weather for late Spring in Tipperary. Typical for any season in Tip.

The garden and landscape are very green and lush. I see my great uncle Tom Kearney kneeling down and pruning a rose bush. He holds some cut roses in his hand. Rhodo, the family home, is in the close background, and in the near distance I can see the Galty Mountains, blue and rolling. I cannot believe I am seeing Uncle Tom. He died over twenty years ago in Massachusetts. *But this was his boyhood home, he was a keen gardener, so there is no reason he shouldn't be here.* He looks exactly the same as I remember him: thick horned-rimmed glasses, a full head of hair and a long, handsome face. "Hello Tommy," he says, showing me the pale pink roses he has just cut.

I look to his left and see my grandmother Julia O'Brien and her husband, my grandfather Michael Kearney, standing by the side of the row of planted flowers. My grandfather's hand is lovingly clasping my grandmother's and their arms are interlocked. "Hello, Tommy," they shout while waving to me. I nod and smile back. I am filled with overwhelming happiness.

In the background, I see my great grandfather (also Michael Kearney) walking toward us. Behind him is Rhodo, the house built for him in 1896 when he became headmaster of the local school. Headmaster Michael Kearney is a bit of a legend in this patch of South Tipperary nestled between the Galty and Knockmealdown Mountains (if you step one foot south you'd be in Cork and one foot west, you'd be in Limerick). As Headmaster of the Skeheenarinky National School (the oldest continuously-operating National School in Ireland) for over forty years, he was a leading educator in the Irish Free State. He is very tall: at 6' 2" there have been no taller Kearneys since he passed away in 1944. While walking toward me, my great grandfather looked past me intently as if he was judging something. I bowed my head and mumbled, "Headmaster Kearney!"

He responded, "That'll be Michael to you, Tommy, Michael Kearney. And you're not supposed to be here. Did something happen to you?"

"It did Michael. I think I'm in trouble." I mumbled.

"You are in trouble. Do you know what happened to you?"

I stuttered: "It's kind of embarrassing. I think...I think I got hit by a bus."

A slight frown appeared on the man's kind face, "Hit by a bus? Well...that's not for you then."

"What do you mean 'that's not for me then?'" I answered, weakly.

"You see, Tommy, getting hit by a bus just won't do. My son, your grandfather, Michael, whom you see right there, was on a ship that was sunk by the Germans during the war, and he managed to float in a life raft for four days in the North Atlantic. And he lived." I then looked up at my grandfather, who waved and smiled.

“My other son, Eddie, whom you know was buried in Calcutta in India, was on a ship which was torpedoed during the war. He was rescued the very same day by another ship – which was then also torpedoed. He was sunk twice in the same day. Yet he lived. So...getting hit by a bus? That’s not for you. There is a time to die Tommy, but it’s not for you now. You must go back to your lovely wife and two sons – both with the surname Kearney I see - and leave here.” He pointed to a row of tall doors leading out of the garden.

My great grandfather motioned to my grandparents and great uncle with a kind smile. “You see, Tommy, my task is to be with your dead relatives, and your task is to be with your living ones.” My grandparents and great uncle Tom smiled and waved to me. As I walked toward the garden doors, I remember the Headmaster shooping me along, shouting kindly, “Now go. Say hello to Agnes for me. And please say hello to Eddie for me.” I left the garden...and found myself in the kitchen of my wife’s family apartment in the East Village, New York City.

The kitchen was very warm (like it always is) and I smelled Ukrainian cooking. A large wooden cutting board dusted with flour lay on the kitchen table. I saw my mother-in-law, Zirka, sitting in a large, comfortable high-backed chair near the kitchen table. It looked like she had some kind of sewing and an open book on her lap. She was wearing glasses. I was surprised and delighted to see her: because Zirka had died over eight years earlier in the same apartment. “Mama!” I happily exclaimed.

Zirka smiled sweetly and said, her strong New York-influenced Ukrainian accent coming through, “Tom. I am so worried. You should not be here. You should be with Lesia and the boys. They are very worried about you. You need to go back to Lesia and the boys. When you see them, please tell them that I love them. And please tell Lesia that I still worry about her. I’ll always worry about her.”

I responded, “I think I’m in trouble.”

Mama repeated, waving me away, “I’m very worried about you. You have to go. You need to get back to Lesia and the boys.” She then looked up, her dark eyes peering from beneath her glasses, “Before you go, I need to ask you a question.”

I answered, “Please, what’s that Mama?”

“Do you need any money?” she asked sweetly with a smile on her face.

Mama always worries about that. “We are fine Mama. Please don’t worry about us.”

She smiled back, “I’ll always worry about you, Lesia and the boys.”

I then turned to Mama and said, “Can I ask you a question?”

Mama looked slightly apprehensive, but since she did not respond with a, “No,” I asked, “Do you need anything from us?”

It was then Mama's turn to laugh and smile. Holding up her hands and shrugging her shoulders, she exclaimed, "What can you do for me? I have everything I need here. There is nothing you can do for me," as she gestured toward the kitchen table which had the beginnings of some Ukrainian specialty already underway. She repeated sweetly, "But you must go now. Please go home to your family and tell them that I love them."

I left through the apartment's front door...and found myself back in the garden of Rhodo House, Skeheenarinky, Tipperary.

It was now less overcast and some sun could be seen streaming out from behind the white-grey clouds. Rain was less of a threat now. The haze would burn off and it would be sunny later. I looked up and saw Ray, my cousin Agnes' partner – who had died three years earlier - dressed in swimming shorts and with an unbuttoned shirt – like he'd just come from the beach. Ray had huge smile on his face and his arms stretched out. "Ray!" I exclaimed.

Ray gave me a big hug while saying firmly, "Tom, you are not supposed to be here!"

I answered, "I know, Ray, everyone seems to be telling me that. But enough of that– how are you?"

Ray smiled, "I am well Tom." He gestured generously with both arms. "I get plenty of rest here, I can read as much as I want and you'd be surprised, it's sunnier here than you'd think." He pointed to the sun beginning to shine behind the clouds. "And also, I have plenty of to read. Please tell Agnes I am resting...and I'm reading." Ray gestured toward a clean white towel someone had put out on the lawn, which was surrounded by a pile of books, some of which were open. "Please tell Agnes that I have a lot of books and that I now have the time to read them."

Ray then stated, "You have to go now Tom. You have to get back to Lesia and the boys. Please give them my love. And please give Agnes and your parents my love too. We'll have time to meet again and talk a lot in the future – not now though. You have to leave now. But before you go, you have to give me another hug."

As I pass through the garden doors, I remember thinking there are so many other people I want to talk to – that I can talk to and see - there. I turn around and begin to go back. I stop when I hear my great grandfather's voice. "Don't go back Tommy. It's time for you to get home. You will have your time to speak with us later. But not now."

CHAPTER 3 – A Busman’s Holiday

Let the dreamer awake, and you will see psychosis.

—Karl Jung

I'm trying to sleep and I keep hearing my mother's voice.

Why do I hear my mother's voice? What am I doing back in Maine for Christmas? I am supposed to be with my family on vacation in Cape Town. Something must have happened.

To my sister Julie?

Naw, we'd be in Washington, DC where she lives with her husband and daughter.

To Dad? I can't hear him over my mother's voice, so maybe he had an accident or a heart attack or something?

....now I hear him speaking to my mother. Nothing wrong with Dad. Thank God.

To my brother Michael? Did something happen to Michael?

Wait a second...I can hear my father sobbing while he's speaking. What is he saying? Why is he crying?

"I'm...not....gonna....lose...my.. son."

Christ. Something must have happened to Michael. Did Michael die? Is that why Dad's crying? Is that why we're in Maine for Christmas? Did Michael die?

From: Lesia

To: Family & Friends

Sent: Thursday, 24 December 2009

The ICU doctor told us this evening around 8 pm that she is 'cautiously optimistic' (with a large emphasis on the 'cautiously'). They identified the chest bug causing Acute Respiratory Distress Syndrome from blood samples and were able to give him antibiotics (vancomycin and amoxiclav) to kill the infection, which apparently had gone septic since the hospital was able to identify it from a blood sample.

Although the condition has slightly improved, Tom will likely need a tracheotomy before they wake him to help him with his breathing.

In summary, the doctor said that there will be ups and downs, but it seems to be progressing in a positive direction.

We are very lucky that Tom is still alive. We have no idea how his brain has been affected.

From Ed Kearney's notes

24 December 2009

The Police Inspector, Andrew Clark, arrived mid-morning Christmas Eve. We met in the living room. In attendance were Lesia, Oksana and me.

The Inspector described the accident in some detail producing pictures taken at the scene. The pictures showed damage to the bus at the stanchion that is between the door and the windshield, the left headlight and some body damage. I can't recall if the rear view mirror showed any damage.

What was described as a pool of blood appeared ahead of and to the left of the bus.

At the time of the accident, it is my understanding that Tom's injuries were serious enough to warrant an on scene accident reconstruction. My own reaction to the pictures was that damage to the structural stanchion probably caused by Tom's head was produced by a massive force and probably enough to kill him.

The Inspector said that the driver of the bus was "very upset" about the accident. He also stated with certainty that alcohol was not involved in the accident on the part of the driver or the victim.

Prior to the December 24 report, the Inspector did not have access to any video of the accident scene, but assured us that every effort was being made to secure videos from the proper sources including the bus company. He indicated that the bus company was sometimes slow to react to requests for videos but that he would persist in obtaining them. Because Oxford Street is such a busy thoroughfare, he was reasonably confident that there would be a visual recording of the accident. No videos have been brought forward.

During the interview, we discussed witnesses. The Inspector had taken statements from several people but expressed doubt as to their credibility. That is, all except one, a taxi driver. He vouched for the taxi driver's version because he opined that taxi drivers are vigilant and aware of their surroundings as part of their job.

The taxi driver, as explained, was heading east on Oxford Street and was stopped behind a bus at the corner of Oxford and Holles. The taxi driver stated he had observed that Tom was moving diagonally across the intersection heading from northwest to southeast and was hit by the bus just before he reached the sidewalk. He estimated that Tom was about a foot from the curb when he was hit.

How can the statement of a person whose view was possibly obstructed by the bus in front of him be considered to be reliable?

When questioned as to how Tom was hit on the right side by a bus coming from his left, the Inspector turned himself into a pretzel describing how Tom could have seen the bus and done a 180 degree turn to avoid being hit, thus exposing his right side to the bus.

He also estimated the speed of the bus (driver supplied) at 15 to 20 mph. At 20 mph, the bus is travelling at 29 feet per second. The driver claimed that he did not see Tom. One second before the accident Tom would have been 29 feet away from the bus and dead center to the bus. At 10 mph he would be 22 feet away from the bus and be to the left of center. In both cases he would have one second to make the curb. Although these calculations were not brought to the Inspector's attention, he again went to great effort to describe how it would be possible that the driver didn't see Tom.

This scenario is based on the Inspector's total faith in the taxi driver's statement. Lesia pointed out to me that if the taxi driver was correct about Tom's location when he, "ran diagonally across the Oxford street," he would have been heading in the opposite direction of his office.

During the interview the Inspector asked how the family wanted to dispose of Tom's clothing which he said were reduced to rags and were very bloodstained. The family instructed the Inspector to destroy the bloodstained clothing. The Inspector did retrieve some valuables from the scene and presented them to Lesia. Absent were Tom's briefcase and computer. Lesia became concerned when the Inspector told us that there was neither a briefcase nor a computer at the scene. Ms. Haliv said that she knew that Tom was preparing to come home because he had called minutes before the accident and that he would not be without his briefcase and computer since the family was scheduled to leave on holiday on Monday, December 21.

From Peter Kearney's "Scrap Book for People Who are Away"

Thursday, December 24

Today I went to Louis' house. We played on the playstation, played football in the snow and went on the trampoline even though it was covered in snow. I had fish pie for dinner.

SORRY

My pictures have not been so good. I cannot use colouring pens because of the paper. I am going to stop drawing pictures.

From: Lesia

To: Family & Friends

Sent: Friday, 25 December 2009

Tom's parents went into see Tom today. Aunt Oksana and I stayed with the kids.

The ICU Consultant (doctor) told them that Tom took a half step forward today which is good news. His intracranial pressure remained below 25 most of the day. They removed his chest drain as there is no more blood coming from the chest injury.

Tom's parents, my aunt and some of his friends will be taking turns visiting him in the ICU. The nurses told us to talk and read to him, they believe people in a state of coma can hear and that the voices of family and friends are reassuring. It is strange talking to someone who is completely unresponsive, but we are all acting as though he can hear us say, "Merry Christmas." Tom's old friend Arnold Holle has taken to reading aloud to him during his regular visits.

Merry Christmas.

Arnold Holle? Why do I hear Arnold Holle in Maine? And why is he reading to me? And what...exactly...is...he...reading to me?

A story about an American?...who grows up in Nazi Germany?...who becomes a Nazi?

Arnold. This is some bad shit, especially since your grandfather was a General in the Wehrmacht! I'm going to have to talk to you about this. Why can't I talk to you about this?

From Peter Kearney's "Scrap Book for People Who are Away"

Friday, December 25

Today I opened my presents. Thanks for the iCoaster and the iTunes gift voucher. I was playing on the iCoaster for about 4 hours. For lunch I had chicken, potatoes and cake. We went to Alex and Nico's house they got a Wii for Christmas and we played on it. For dinner we had goose, sprouts (well, one), beans and delicious cookies. I went to bed at 10:20 shhh...don't tell Daniel.

From: Lesia

To: Family & Friends

Sent: Saturday, 26 December 2009

Tom had a stable night. His temperature last night had gone up to 38 C but it is now down to 37.1. Yesterday evening they took off his cooling system (which can cool or heat).

His intracranial pressure was stable during the night (below 20). However, five minutes ago his intracranial pressure spiked to 50 but, it is coming down now.

From Peter Kearney's "Scrap Book for People Who are Away"

Saturday, December 26

Today I played on my icoaster until Imelda came at 1pm. We went to the zoo. We saw an ape pee then a baby ape drank it. After we went to Callum's house and we played assassin's creed. I went to bed at 11:00. Shhhh! Daniel!

Oksana? Is that Oksana? It is, but why is she speaking in Ukrainian to me? She must be talking to someone else...she doesn't speak in Ukrainian to me. We must be in New York at Lesia's place for Ukrainian Christmas. We must have gone there after Michael's funeral in Maine? When was that? Must have been around New Year's. Did I miss New Year's? Where did we celebrate New Year's?

From: Lesia

To: Family & Friends

Sent: Sunday, 27 December 2009

When they increased Tom's carbon dioxide level in the brain, it increased his intracranial pressure (ICP). As a result they do not plan on reducing the sedation further during the night.

The nurse on duty tonight told me that a few times, Tom has opened one eye slightly when they called him. I hope this is a good sign.

From Peter Kearney's "Scrap Book for People Who are Away"

Sunday, December 27

Today I played on my icoaster. Roman, Daniel and I went to winter wonderland. My two favourite rides were: a ride where you are going 50 MPH backwards!!! The other one was when a roller coaster Kart like 'vampire' or 'bazzaro' where there are 5 90 degree turns, 5 drops, and we went upside down about 20 times. We went on each ride twice. For dinner I had Chinese. I had shrimp, duck and rice. I went to bed at 10:00! Shhhh.

From: Lesia

To: Family & Friends

Sent: Monday, 28 December 2009

They stopped sedating Tom at 1pm. Around 3pm he coughed and partially opened one eye. The nurse asked him to blink if he could hear her and he did. Around 4pm, both of Tom's eyes were open. At 4pm they let him breathe for himself with pressure support from the ventilator. His intracranial pressure (ICP) remains stable and below 20 which is good. Tom parents and I talked to him and we think he heard us. This evening the nurse asked him to blink twice and he did, so we can be sure that it was not a coincidence. The nurse says that he seemed brighter. We are all excited that he is finally waking up.

We're on a plane. We're going somewhere for Christmas. The Rocky Mountains? Excellent. We spend New Year's with my college roommate Ken Rudin and his family.

This looks like the Alps though. Now Tibet. Now Kazakhstan. We are staying at a Tibetan village in Kazakhstan which is actually in the Rocky Mountains. With Ken Rudin and his family. And I can see Bennington, Vermont from here.

We are eating Raclette. Mmm. Raclette.

I don't ever remember eating Raclette in Kazakhstan or Tibet. But goddamn. This is good Raclette. Do they make it from Yak's milk?

I'm cold. I wonder if we can get some socks made of yak's wool. That's what I need: Yak socks to keep me warm.

From Peter Kearney's "Scrap Book for People Who are Away"

Monday December 28, 2009

I had an OK day today. I went Alex Orr's house. We went to the park, played DS, played computer, told jokes, played football and played hide and seek. I went to bed at 10:00. Shhhh!

From: Lesia

To: Family & Friends

Sent: Tuesday, 29 December 2009

At 10 am this morning they gave Tom clonidine, a mild sedative to make Tom calm as he was agitated (blood pressure going up, breathing fast and increased heart rate). His chest injuries are healing. His ribs have realigned back into place. It will take the ribs 4-6 weeks to heal completely.

Tom had the tracheotomy at 3 pm today. They gave him general and local anesthetic. They increased the oxygen to 70% for the operation but it has since been decreased to 40% at 4 pm.

After the operation, his eyes were open. On separate occasions, Tom squeezed his father's, mother's and my hand. We hope that it was a voluntary movement rather than involuntary. He also was able to move his right foot and his left foot. We are taking these as continued positive steps in his recovery.

"Hi Tom."

Lesia?

"I hope you can hear me. I miss you and love you."

Lesia?

"The boys miss you and love you. We cannot wait until you come home."

Lesia?

Now she's wiping my head with a cool towel. I am sweating like a pig. But the towel feels nice...feels very niiiice.

Thank you Lesia.

From: Lesia

To: Family & Friends

Sent: Tuesday, 29 December 2009

They plan on doing a tracheotomy on Tom tomorrow. It will make it easier for Tom to breathe as he will not have a tube going through his mouth down his throat. Removing the tube from his mouth will also reduce the potential for infection.

From Peter Kearney's "Scrap Book for People Who are Away"

Tuesday, December 29

Today I went to Asher's we played sing star, cops, and grand theft auto wii. We went bowling. We went to 'Ask' for lunch. We played darts in Asher's tree house. Played UNO and watched a movie. We watched Monsters versus Aliens. I would rate it 8.5/10. I went to bed at 10:30. Shhhh.

From: Lesia

To: Family & Friends

Sent: Thursday, 31 December 2009

There was a remarkable improvement from yesterday to today. Tom is quite responsive and more mobile. The physio said that he was a different person in terms of movement from the day before. He was able to lift and bend both legs and lift his right arm. He has movement in his left hand but not as much as it appears to have been bruised in the accident.

The ICU doctors, who saw him today, were very happy with his progress. One doctor said that he was a 'boy done good'. The ICU doctors felt that he was having this good recovery because of how they managed his treatment.

He cannot speak because of the tracheotomy but he tries. Unfortunately, I am unable to read lips. He will not be able to speak until he is off the ventilator and able to bring up air from the lungs up past the vocal cords. They will have to close the whole in his trachea.

At 1pm, they gave him codeine as he indicated that his head hurt.

They stopped the antibiotics yesterday.

We also learned that his pelvis is not fractured. Someone misinformed me. But that's good news!

I'm a toddler in the hospital in Bennington, Vermont. I'm about three or four years old.

Nurses are telling me to open my left eye, open my right eye, move my left leg, move my right leg.

I'm hungry. I see cartoon chickens and a lady who's making pancakes. I am eating pancakes. Mmm. Pancakes.

From: Lesia

To: Family & Friends

Re: Tom update

Sent: Thursday, 31 December 2009

Tom had his bolt removed at 7:50 pm this evening – another positive step forward. He remains stable.

Happy New Year!

Lesia

I'm in a large hotel dining room in Europe. It looks like the Metropol Hotel in Moscow. But it's not. They say I am in Riga. Riga for Christmas?

No. It's snowing. They're serving carp. It's Prague.

No. It's Ukraine. We're in Lviv. At the Grand Hotel.

Why aren't we in Cape Town?

Who booked this Christmas Holiday?

This food looks good though. When can I eat?

From Peter Kearney's "Scrap Book for People Who are Away"

Thursday, December 31

I went to Matthew's house. We played risk, played football and watched Avatar. It was 3 hours long but it was amazing. Also there's another shrek. They're also making a film about a book I really like called 'how to train your dragon.' Oksana and I stayed up until midnight.

From: Lesia

To: Family & Friends

Sent: Thursday, 1 January 2010

The nurse told me this evening that Tom is ready to go to the High Dependency Ward which is great news

Tom has been very responsive today and we even think we saw him smile at one of Michael's jokes.

John Kremer? Is that John Kremer? Why is he reading to me? Naw. It's a book on tape – I must have bought a book on tape at Waterstone's or something.

I don't listen to books on tape. It is John.

What's he reading? It's funny. It's disturbing. It's definitely American. My God, John is a great reader. What a great "book-on-tape" voice. I know he's an investment banker...but he should quit his job and read books for a living. He's awesome at it. I have to tell Erika about this.

And why is everyone reading to me? You only read to, like, people in comas or something like that.

I hear my brother. I hear my friend John Kremer. I hear my friend Arnold Holle. They are talking. They are laughing.

I start coughing. Jesus, this phlegm is choking me.

My brother starts sucking phlegm from my throat with a dentist's suction tool and keeps talking to Arnold and John. Where did he get that dentist's suction tool from?

This phlegm tastes awful.

I'm still really hungry though. When do I get some food?

From: Lesia

To: Family & Friends

Sent: Saturday, 2 January 2010

Great News - Tom was moved from ICU to the High Dependency Ward at 2 pm today. There was noticeable improvement from yesterday. He was able to laugh at jokes. He has not needed codeine since Wednesday at 5pm. He is still on clonidine but at a small dose of 5 mg. Tom's Glasgow coma score has moved from 11 to 14 out of 15. He is frustrated as he would like to get out of bed, take out the feeding tube that is going down his nose to his stomach and to talk.

The ward has 4 nurses to take care of 10 patients. It is a nicer and quieter environment and in the new part of the hospital.

I'm in the 1973 Volkswagen Bus we had when I was a child. I look out the window. We are on our way to Freeport or Brunswick on the Maine Turnpike. It is winter. I can see snow and Casco Bay in the distance. My dad is driving. My mother is next to him. My sister and brother are sitting in the two

seats in front of me. And I am up back with the basset hound, Frieda. I'm telling them that my nose bothers me and no one is listening to me.

I look down. There is a long tube coming out of my nose. I pull on it. It hurts my throat. Frieda looks at me quizzically, as if she's asking me, "How can something coming out of your nose hurt your throat?" It does not matter that dogs can't talk. That's the right question. Good doggy.

I pull on the tube again. It hurts my throat more. I don't like this thing. I want it out. I say I want it out but no one is listening to me. I say it louder. No one is listening to me.

My brother is pointing at me, looking quite amazed and alerts my mother.

Why does he care if I take this thing out of my nose? It shouldn't be there and I keep telling him that. He doesn't listen.

Fuck it. I pull. I pull again.

This sucks. This thing is long and it's making me gag as a pull it out.

I pull. I pull again. I pull again.

Out. Awesome. That thing is out.

I show it proudly to my brother. He's gaping at me. Why?

I wonder why we are going to Brunswick? Maybe we'll stop at the ice cream place off the Turnpike. The one with the chocolate dipped cones. Yessss. I'm hungry. I'm starving. Waitress!!!!

From Peter Kearney's "Scrap Book for People Who are Away"

Saturday, January 2

Today, I went to Pizza Express. Met a boy who Catherine takes care of called Daniel. We saw Alvin and Chipmunks 2. I would rate it 4/10. I went to bed at 10:30. Shh!

From: Lesia

To: Family & Friends

Sent: Sunday, 3 January 2010

Tom slept on and off during the night. He was restless when awake. He pulled out the feeding tube from his nose. As a result, they put a mitt on his right hand so that he would not pull out any other tubes.

I'm on a space ship. I hear some spaceship beeping all the time. Doo doo doo dee dee. Doo doo doo dee dee. Sky Lab. I'm on Sky Lab. I'm in a cryogenic sleeping tube on Sky Lab. Doo doo doo dee dee. Doo doo doo dee dee. When are they going to wake me up? I'm hungry. When can I eat?

What are on my hands? Space Gloves. Skylab Space Gloves. They must be preparing me to go out for a Space Walk. Cool. But maybe they should feed me first. I can't eat anything with these Space Gloves on. I have to take them off. Hey, I can take them off with my teeth.

Another fucking tube in my nose? Of course. I'm in a cryogenic sleep. How else are they going to feed me. I'll just pull it out.

Ah. Better.

Maybe I'll get some food now.

From Peter Kearney's "Scrap Book for People Who are Away"

Tuesday, January 5

Today I went to Charlie's house to play. We play on the Wii 20 mins. Went to the cinema and watched St. Trinian's again! I would rate it 9/10. After that I went to 'nandos.'

From: Lesia

To: Family & Friends

Sent: Tuesday, 5 January 2010

Tom slept on and off during the night. He was agitated when awake. They gave him codeine.

He pulled out his tube twice last evening and once at 2 am. He also tried to get out of bed. I hope that he will be able to talk today.

They have now put on the restraining mitten on his right hand and wrapped his left hand so that he cannot pull out the tube. Tom is very unhappy. They are going to try to put in a speaking valve in his trachea. I hope that it works.

I am at a party. People are drinking beer and it's very loud. I'm wearing Space Gloves still. I'm talking and no one is listening to me. Is this a party on the Space Ship? I look around to see if I can see anyone I know. Is that Mike? I think I see my brother. Am I at some Bowdoin College Party? Yup. It's Bowdoin College and I'm in some party in fraternity basement. Where's the food? These fraternity parties usually have chips or popcorn or something you can throw up easily later. I try to find the food. I can't eat and drink with these Gloves on. I have to get them off. I grab them with my teeth. They won't come off. Did someone duct tape these things? Is this some fraternity joke? At Bowdoin, anything is possible. I start biting the duct tape with my teeth. This is going to take a long time. A Chinese or Filipina girl at the party tells me to stop. She's smiling but I think she looks like she's frustrated with me. She heads off to someplace else in the party. I am going to get these fucking Gloves off if it kills me. I'm getting pissed now. I am very hungry. Where's the kitchen with that food? This frat party sucks.

From: Lesia

To: Family & Friends

Sent: Wednesday, 6 January 2010

The physiotherapists were able to get Tom to sit up and stand with some assistance today.

The size of Tom's tracheal tube was reduced which will help him in weaning him off the breathing tube. They deflated the cuff (a balloon around the trachea) to see if he could breathe easily but he was unable and coughed. As a result, they were not able to put in the speaking valve today: we hope that he will be able to talk tomorrow. They are also going to give him the swallow test tomorrow to see if he will be able to eat on his own so that they can take out the dreadful feeding tube.

Michael spoke to one of the neurosurgeons today who said that Tom's recovery is 'amazing'.

I'm in a hospital in somewhere in Africa. It's not South Africa. It's not Congo. I think it must be Congo-Brazzaville, that funny-shaped country next to Congo with a small seacoast. Maybe I'll get some chicken fried in palm oil with some peanut sauce. Yum. But no. I'm a hostage and I'm being tortured. Africans are sticking pins into my arms and I am in a great deal of pain. I have all kinds of things stuck into me. Why am I in Africa? What did I do to be tortured? Damn. This hurts.

From: Lesia

To: Family & Friends

Sent: Wednesday, 6 January 2010

A quick update:

The physiotherapist was able to give Tom a speaking valve so that we can hear him talk. It is not easy to understand everything he is saying since he is talking through his trachea and he has a build-up of phlegm. He did not pass the 'swallow test' today, but hopefully he will tomorrow.

The consultant said today that Tom is ready to be moved to a hospital nearer to us that has physio and occupational therapists that can work with Tom. We hope that it will be the Royal Free Hospital which is a 20 minute walk from our house. The move will also depend on when a bed is made available. I would prefer the move to happen when the tracheotomy is removed.

They put in a nasal feeding tube in this morning. Tom pulled it right out. He says the feeding tube is '[expletive] awful'. They plan on putting an oral feeding tube back in this evening. Tom is desperate to get out of bed and have a shower. The nurse told him it would be 2-3 days before he can shower. Tom is very unhappy being stuck in this bed and not being able to shower and put on normal clothes.

It snowed last night and today. There is an accumulation of a couple of inches of snow.

It is Christmas Eve by the Old Calendar, so we are opening presents tonight. Happy Ukrainian Christmas!

I see my brother Michael. He's standing right in front of me smiling but looking slightly uncomfortable. I am filled with joy to see him. He's not dead. I'm not dead. Or are we both dead? He's talking very slowly. Very Slooowly. But it is overwhelmingly good to see him.

Michael starts out uncertainly and keeps looking at me directly. This is uncomfortable. "Hi Tom.....You're in a hospital in London.....You were in an accident."

A flood of images and questions overwhelm me at once: What kind of accident? Car or plane? Where? South Africa or UK? Who was hurt? Was I driving in South Africa? Fucking crazy place to drive. I hadn't heard my sons' voices at all. Were they OK?

"Where are my boys?" I croak out.

He continues smiling and talking slowly, "Peter and Daniel are fine. They are at home with Lesia. Everyone is fine."

Why the hell is he talking so slowly? I'm not one of his clients (he's a child protection attorney for the State of Maine).

I am so hungry. My stomach is aching for food. Since it's Christmas and my brother is here, we must be in some kind of hotel. Why am I so hungry?

"I'm starving Mike. Let's get some food."

Mike responds, very slowly again, "You were in an accident. You can't eat."

I think that because it's Christmas and my brother is here and alive, that we must be in some kind of hotel. We always go away for Christmas. The hotel kitchen must be closed, hence my inability to get food.

"This hotel sucks. Let's go out for some Chinese then."

A huge grin. "You can't eat Tom."

Fucking hotel.

"You said we are in London? "

"Yes."

"Let's go out for fish & chips then." That's my ticket to food. My brother loves fish & chips and will move heaven and earth to get his hands on some. If I want to eat, I just have to go for the kind of food I know he'll bust his ass to get.

He laughs.

"Let's go out for fish & chips...and lot's of beers." Oooh baby, I've got him. I'm as good as eating food now. And I better be, because I am fucking starving.

"Is everything OK here?" an Asian woman asks.

Why is the hotel staff coming into my bedroom and just butting in? Who the fuck are these people?

"Who are you?" I ask.

"I'm your nurse. Is everything OK here?" she asks my brother.

Why is the hotel staff barging into my room and asking my brother if everything's OK? What about me? Christ, it's like she knows my brother already and needs his response. It's my fucking hotel. He's my guest.

"Who's he?" I motion toward my brother.

"That's your brother," she answers.

How does she know anything about my family? Who the fuck is this woman?

“That’s not my brother,” I answer.

My brother’s face drops. He doesn’t like my statement and he goes straight into slow talk mode.

“I’m your brother Tommy. I’m two years older than you. We grew up in Maine together.”

For Chrissake, tell me something I don’t know. Why the slow talk? I’m not an idiot. And why is that lady still in my room? He’s fucking with me. I’m going to fuck with him.

“You’re not my brother.”

“I’m your brother Tommy,” he repeats. *This is getting tedious.*

“You’re not my brother. I know my brother. You may look like my brother, but you’re not my brother.”

He stares intently at me.

“Look, I love my brother. But my brother would have gotten me some food. You’re just acting like an asshole!”

From Peter Kearney’s “Scrap Book for People Who are Away”

Wednesday, January 6

Today Rufus came over. We played on the psp, computer chess and we went sledging.

It Ukrainian Christmas Eve. I got: The Final Fantasy, Hitchhikers Guide to the Galaxy, Twilight

From: Lesia

To: Family & Friends

Sent: Thursday, 7 January 2010

Happy Ukrainian Christmas.

Tom is doing well. He was able to sit in a chair today. He keeps asking to see Peter and Daniel. They told me that it is dangerous to take children to hospitals with Noravirus about. I have been told that they should only see Tom for 5 minutes. I will take the boys to see him once the trache tube is removed and he can talk normally and hopefully be at the Royal Free Hospital in Hampstead.

Tom may be suffering from post-traumatic amnesia (PTA). PTA is a period of extreme disorientation. It is still difficult to understand everything that Tom says. Tom does not remember the accident and he

seems surprised to find that he's in a hospital. His short term memory is not good at the moment, but his long term memory is very good.

Unfortunately, Tom was not able to pass the swallow test today so the nursing staff continue to try to put in an oral feeding tube when Tom pulls it out.

Tom had another CT scan today and the results should hopefully be available tomorrow.

I forgot to mention that Tom was asking to go for Chinese food and ice cream. He says he is very hungry. He went to a restaurant in China Town with his colleagues the day before the accident – I wonder if that is what he is remembering, because he raved about the dumplings there.

Tom's friend David Katzinski visited him today all the way from Japan. David said that Tom recognised him and that he smiled at him. He also said that Tom seemed to be indicating that he was hungry.

I'm in the Lufthansa Business Class Lounge at the Zurich Airport waiting for a flight. I see my two friends from Enron, David Katzinski and John Metzler. I ask David if he knows where they serve food in the lounge. David doesn't know where the food is. He's just smiling at me.

There is a recurring scene in the movie "Twelve Monkeys" where the hero, played by Bruce Willis, is awakened by doctors while on a hospital bed. As he squints at the doctors while looking up from his pillow, they stare at him with bright lights on their foreheads while asking him questions.

I am in that scene now.

Every morning, I awake to hear medical personnel having conversations around me. I have no idea what they are talking about. Occasionally see them and they occasionally say, "Good Morning, how are you?" That is the extent of the discussion. It's "Twelve-fucking-Monkeys" alright.

My voice is fried. I sound like Gollum with a sore throat. OK, I sound just like Gollum with a sore throat and his balls cut off. But, I can work with this.

"Doctors," I bleat as the first scene of "Twelve Monkeys" rolls for the day.

"Good morning," they chant.

"I have a problem with my voice. It sounds different."

"How does it sound different?"

“Well, I kind of sound like a 1970s American Cop Show actor...but not like the main guy. I sound like the guy who they say, ‘Smitty, go fetch the K Car floating down the East River.’”

The doctors look quizzically at me. They don’t know what I am talking about.

Another morning. It’s “Twelve Monkeys” again.

“Good morning.”

“Masters is very good to me,” I croon, Gollum-like. “Tricksies hobbitses, tricksies....”

They just look at me.

“Where’s my precioussssss? The precioussssss.....”

They leave.

This next morning there are quite a few doctors nearby. I don’t recognise any of them, but then again, I don’t ever recognise them. They notice that I am waking up and one turns to me.

“Good morning,” he says cheerfully. It is my cue to start my scene.

“Gentlemen,” I say quietly “My voice. My voice is very strange.”

“What is the matter?”

“Ever since I woke up from my coma, I have this...strong American accent.”

This gets their attention. I am going to have some fun today.

The doctors start talking excitedly among themselves.

A female doctor gently inquires, “Do you watch a lot of American television?”

I mimic a careful thought and slowly answer, “I travel a lot in Africa...I should have...a Nigerian accent.”

They are excited. They jabber about studies, cases, some doctor from Oxford who should see me...plans are being made...I sense that my morning wind-up has hit too receptive an audience and begin to feel the need to pop the balloon.

“Guys. I’m taking the piss. I’m from the States.” I smile.

They do not think this is funny...at all. The doctors turn away and move off en masse with better things to do. Except one. One doctor is staring at me intently. He seems kind of angry with me.

From Peter Kearney's "Scrap Book for People Who are Away"

Thursday, January 7, 2010

Today I went back to school. We could not go on the yard because of the snow.

From: Lesia

To: Family & Friends

Sent: Friday, 8 January 2010

Unfortunately, Tom is still unable to swallow food or liquids. They are now giving him high protein food through a syringe into the oral feeding tube 3 times a day rather than continuously as Tom has not been cooperative with the oral feeding tube. The nurse has requested for an ENT (earn nose and throat) doctor to look at his trachea to see if there are any issues that are impacting his ability to swallow. Hopefully, they will be able to see him early in the week.

Michael talked to the consultant (doctor) who said that he is very happy with Tom's progress and that he has a good prognosis. It is good that he recognizes people. Michael said that the fact Tom is able to distinguish between the nurses/friends (with whom he behaves very well) and his family (with whom he can be quite difficult) is a very good sign because it shows that he has executive function. The next goal is to remove the trachea tube.

The occupational therapists at the hospital have assessed Tom and determined that he indeed has PTA. This is common with traumatic brain injuries. He is not able to recall information that was told to him a short time before (an hour or a day). He has a short attention span. The therapists woke Tom up to give him the assessment which probably impacted his score. They ask him the same 12 questions every day. He will be considered not to have PTA once he answers these questions correctly for 3 days in a row.

I meet a nice lady from Brazil. Her name is Zhulia. Zhulia from Brazil.

And she keeps asking me completely useless questions. Lots of completely fucking useless questions.

“What time is it?”

“I have no idea.”

Oh, it's after lunch? I didn't have any thank you. No one is feeding me anything.

"What day is it today?"

I have no idea. They're all the fucking same in this madhouse.

"Tuesday? OK if you say so."

"What year is it?"

Brain freeze.

"I...have...no...idea."

"It's 2010."

"Oh."

2010? What?!! How can it be 2010? Last I remember it was 2009. It can't be 2010 if I don't remember the year changing.

"What year were you born?"

"1965."

"How old are you?"

My brain freezes again, but not because I don't know...but because I apparently travel through time (how else do you explain remember 2009 and waking up in 2010?). It doesn't really make sense. I was injured during the London Blitz in September 1940. It was a German bomb that hit a bus I was travelling in. A bus that was serving Chinese Dumplings. I could really eat some Chinese Dumplings right now.

"How old are you?"

"I have no idea."

How does she know how old I am? Who is this Brazilian woman? I wonder if she ever read 'The War of the End of the World' by Carlos Vargas Llossa? I wonder if she knows about the Canudos Rebellion?

Christ, I wish Zhulia'd just leave me alone. You can leave now. Obrigado.

From Peter Kearney's "Scrap Book for People Who are Away"

Friday, January 8

Today I went to Olly Shinder's. We went sledding. I went to bed at 10:00.

From: Lesia

To: Family & Friends

Sent: Saturday, 9 January 2010

Tom was able to sleep on and off last night. He was not agitated today. He sometimes thinks that he is on vacation in a hotel or on a train (and he thinks it's a crappy vacation). He wanted hot tea and a cappuccino today (which means he's desperate to drink something, because he doesn't even drink coffee) and could not understand why he could not get one. He has moments of clarity when he seems like his old self, which is reassuring.

He refused the feeding tube today. I hope that he will be able to pass the swallow test soon.

I am sure that my hospital is somewhere near Victoria Station. I constantly am thinking about ways to get out of this hospital and home. The Tube isn't far from the hospital. If I had money, clothes, a jacket, and didn't have these tubes sticking out of me, I'd be home in Hampstead in a jiffy. How can I get these things? I'll keep asking Lesia.

Every morning we get on a train and head south to somewhere in Kent near the sea. We play games there. We have formal lunches in a dining hall with white tablecloths and fine silver. I am being fed by lobsters that put into my throat to deliver a syrupy sweet liquid. I choke on this liquid. Sucks.

The lobsters are torturing me. I can't swallow. But I'm so fucking hungry.

From: Lesia

To: Arnold Holle and John Kremer

Sent: Saturday, 9 January 2010

Subject: Tom's state of mind

Hi Arnold and John,

We talked to the neurosurgeon and occupational therapist yesterday about Tom's secret service mission and the German attack, etc. These fantasies are completely normal and we should "gently prod" him back to reality. For example, if he claims that he was in South Africa looking for spies, just redirect by

asking him about a trip to South Africa that he did for his business, etc. Even if he doesn't follow it, constantly try to activate memories.

They both opined that Tom's recovery has been impressive and that this fantasy stage is completely normal. We just need to get him up to speed as to "time and place" and that takes time. Just reminding him of past events in his life is very useful.

Lesia

"Hey John. You see those guys over there?"

"Yeah."

"They used to work for me in the Congo."

"Now Tom, why don't you tell me a bit about some of your trips to Africa?"

"Johnny. You know that I can't tell you about any of the 'wet work' I do in Africa."

Since we were in graduate school twenty years before, John has always felt that I was a spy (c'mon, can't an American learn to speak Russian pretty well without being labeled a spy?) He was expecting me to crack because I'm barely coherent now. Got'im!

"Hi Tom."

"Lesia?"

"How are you feeling?"

"OK."

"You were hit by a bus."

"Really? Where?"

"Oxford Street."

"That's impossible. Did anyone see it?"

"The police are trying to get witnesses and CCTV footage. You were in a coma."

"Really? A coma?"

"A coma of '3.'"

“A ‘3’ on what, the ‘Coma Richter Scale’?”

“No, the Glasgow Coma Scale.”

“The what?” I am laughing now.

“The Glasgow Coma Scale. It’s not funny. 3 is very, very bad. It’s almost dead.”

“Have you ever been to Glasgow on a Saturday night?”

“No. I’ve never been to Glasgow.”

“Well, between all the drinking and the fighting that those crazy Glaswegians do, it is no surprise to me that comas come from Glasgow. Hah! Glasgow has a Coma Scale named after it? I cannot wait to tell my friends that – The Glasgow - Fucking - Coma Scale!”

“Hey. Before you leave, I need my great grandfather’s pajamas - you know the ones I inherited? He wore them when he was a prisoner in Gibraltar after his plane was shot down near there during the Rif Revolt in Morocco. And, do you think you can get me some blue jeans, my Tube pass, and maybe some money? Yes. I need those things for when I am in the hospital.”

Where’d Lesia go?

Is anyone listening to me?

From Peter Kearney’s “Scrap Book for People Who are Away”

Saturday, January 9

Yesterday I had Raclette for lunch. I also went sledding with Daniel. I went to bed @ 10:00.

From: Lesia

To: Family & Friends

Sent: Sunday, 10 January 2010

Tom was in a good mood this afternoon. Among several conversations, he chatted up one of his nurses who is from Zimbabwe and recounted in perfect detail several parts of a trip he took there nearly a year ago. The nurse confirmed that he is clearly recalling the finer details of the country. Tom is desperate for, 'A hot cup of tea with sugar and milk.' Hopefully, he will pass the swallow test tomorrow, as it's really hard for us to keep saying, “NO!” (you know how persistent Tom can be when he wants something).

Yesterday, Michael, Tom's brother flew back to Maine and Julie, Tom's sister, arrived from Washington, DC.

Julie.

My lovely sister Julie's here.

I love my sister Julie.

I hear her mellifluous voice and see her sweet smile.

Julie'll get me a cup of tea? And some food too, maybe?

"C'mon sis. Get me something to eat and drink. How about blue jeans and some money? And a phone? C'mon sis. I need to get out of here."

"Hi John. Hi Arnold. I know, I was fucked. I have no idea what happened. I was just standing on the corner of the street waiting to cross like everyone else. It was fucking, unbelievably, crowded. What? It was in *The Evening Standard*? I haven't seen anything and I assume no one wants to show it to me right now either. What did the newspaper say?"

FROM THE EVENING STANDARD (19 December 2009)

Today 18 dec 2009 I saw a man who had got hit by a bendy bus in Oxford Street. It was terrible, very sad, poor his family at this time of the year xmas and new year. He was bleeding from head and his ear. One of the worst thing I have ever seen. How come it happened at this time in such a busy road. buses are driving not slow enough specially at xmas time when there are so many people in the streets. They know it is busy and they have no consideration for pedestrian. they think they are king of the road and they don't consider the consequences. I think that buses should be band of oxford street to allow more movement for people or there should be a very slow speed limit for them. If the driver was slower today, that poor man may have had more time to react . I hope he is ok and my thoughts are with his family. please let me know if any body has news about his condition.

- Nima Karimzadeh, London, 19/12/2009 04:02

18.12.2009 - does anybody know what happened to the man who got hit by the bus tonight? I gave a statement to police and they said they'd call me but still no word... it was terrible... it was really terrible..

- Neil, Tooting, 19/12/2009 00:19

I too saw the man get hit by the bendy bus on Friday 18th December. It was horrific and made me think just how vulnerable we are as pedestrians. I havent been able to stop thinking about him all weekend - if anyone has any news of his condition please post a message-

- Lh, London, 21/12/2009 11:27

I saw a man get hit by a bus yesterday 18/12/2009 down oxford street it made me cry :(it was my 17th birthday and all i could think about was that poor man he wasnt moving and was lying on the cold icy/snowy ground. He looked in peace and I'm not sure if he is okay. I really hope that he is! If anyone knows please leave a comment. Buses should be banned down this street! People crowded him and took pictures which made me really angry! Apparently he crossed before the red light showed so maybe it was his own fault? Who knows?

- Abi, UK sussex, 19/12/2009 13:11

“Christ guys. They took pictures of me? Those should be on the web somewhere. What kind of sick person takes pictures of a person with a smashed head and in a coma? Maybe the police will ask for the photos? Maybe the police will come and talk to me?”

From Peter Kearney's "Scrap Book for People Who are Away"

Sunday, January 10

Today I went sledding. Marcella & James came. We went to Jin Kichi for dinner.

From: Lesia

To: Family & Friends

Sent: Monday, 11 January 2010

The head nurse told us today that Tom is progressing well and quickly. But, if you think of his progress as the numbers on a clock, he is only at 5 minutes passed the hour in the stage of his recovery. In other words, it is early days in his recovery and there will be steps forward as well as backward as part of normal recovery process. The staff remain amazed by how fast he is coming along even though it feels slow to us.

Tom pulled out his trachea tube this morning. For those who remember Tom's jokes about 'self-surgery', this pretty much qualifies. He is breathing fine on his own now so they will leave it out. The nurse said that they would have probably taken it out soon any way. The problem the tube removal created is that they are not able to do the swallow test - to see if food goes down to his stomach or his lungs without the

tracheal tube. They have to wait for a 'videobidoflouroscopy' to be performed by an ENT (earn nose and throat) doctor before testing the swallow. The ENT doctor would put down a scope to see if there is any blockage or other issue that could be causing Tom not to be able to swallow. They were not able to schedule an ENT doctor to see him in the ward before Wednesday. They cannot take Tom out of the ward to do the scope due to the gastrointestinal virus that is still in the ward. They are still only allowing 2 people in total to visit per day.

On the food front, Tom did not allow a feeding tube this past weekend with the exception of midnight last night and 7pm this evening. They have made a request for a gastric feeding tube to be put directly into the stomach in case he is not able to swallow soon. Tom does not understand why he cannot go home and why he cannot eat. This morning, he talked about food non-stop. The nurses are very positive about Tom's yearning to eat a meal - it is part of the recovery.

Some highlights of the day:

- Tom sat in a chair for about 1.5 hours this afternoon. He tried to stand, but is still a bit weak.
- Tom asked the nurses for a bowl of soup. When we asked Tom to say something in Russian and he asked for a bowl of soup ... *in Russian*.
- When Julie said 'No soup for you!' and asked Tom where that phrase was from, Tom promptly responded: 'Seinfeld -- the Soup Nazi!'

Well, at least he remembers the important stuff!

I've been staring at the entryway door to the ward for a long time. It has a glass panel, so I'll be able to see my sister coming in. Where's Julie? Christ, I am hungry. And I'm coughing up some serious shit. And I am hungry.

I see Julie.

Finally. Julie.

I cough up some foul-tasting phlegm again.

“That doesn't sound too good.

“It's vampire virus.” I am certain that vampires are growing inside my lungs. “Can you get me some of that Guarana drink that the nurse is making it for me?”

“What kind of drink?”

“Some Brazilian drink. They’re giving it to the patients and one of the nurses is making it for me?”

“Umm. OK.”

“And can you get me a cup of tea? With milk and sugar?”

“I can’t get that for you right now.”

“How about Rooibos then? Rooibos should be fine. I can drink that. They swear by that stuff in South Africa. It’s really good for you.”

“I can’t get you anything Tom”

“Please? Please? Please?”

“I can’t.”

“Cunt!”

Why is Julie leaving the room? Damn. I probably shouldn’t have said that to my sister, especially to a sister who’s a Yank.

From Peter Kearney’s “Scrap Book for People Who are Away”

Monday, January 11

I went to cafe rouge for dinner.

From: Lesia

To: Family & Friends

Sent: Tuesday, 12 January 2010

Tom had a good day today. He is no longer hooked up to various machines, though he is still getting his meals via the dreaded feeding tube (which we hope will be ending soon). The chief nurse, a fiery Irish nurse named Grinnae (pron. 'Granya'), said that but for the stomach virus in his ward, he would be moved to the general ward. Fortunately, Tom has managed to escape this virus. He is talking about delicious chicken cooked in Palm oil, a specialty in some of the African countries he's visited. His nurse, Tony (from Nigeria) said Tom talked longingly about it and also the delicious cold beer to wash it down. On Tom's neuro assessment of his PTA (post traumatic amnesia) today, he scored a 10 out of 12. The test is basically a bunch of questions, including his year of birth, how old he is, picture IDs of various objects, and the time of day (impossible to get right, as it always feels like 'nighttime' in the

ward). He will be considered to be out of PTA once he gets a score of 12 three days in a row. Today, he pulled French out of his language vault. He continues to remember the intricate details of trips, history, etc. and is starting to remember some of the things that have happened since he arrived at the hospital. As you'd expect, Tom is getting a reputation in the ward as being the comedian and is cracking lots of jokes with the staff in addition to getting to know them.

“Hi Jules. I am freezing here. I wonder if Lesia can bring my yak socks. We bought them when we went to Tibet. They're the warmest socks.”

“OK. I'll ask her.”

“You know, it really hurts when I piss.”

“You have had a catheter for quite a while. Maybe you have a Urinary Tract Infection?”

“I don't know. I have had a catheter inserted though. It really sucks.”

“You can tell when you have a UTI, because it hurts when you pee and your pee really stinks.”

“OK. It hurts when I pee and my pee really stinks.”

“You might want to mention that to one of the nurses.”

“I'm pretty sure I have a UTI. It's not like I've ever had anything like this before, but god damn, it hurts to take a piss.”

The hospital is preventing patients from using bathrooms because of the Noravirus outbreak, which means that I have been hooked up to a catheter for nearly three weeks now. This is not comfortable or as convenient as it might seem. I can walk, I can talk, I just can't piss like a man...and that's not my fault.

I have commented on the UTI possibility to my sister (who kindly gave me a detailed description of the symptoms) and my friends (who have stressed the need for me to mention it to the nurses), and the nurses (who smile and fail to respond specifically to my statements, I assume because they think I am fried or they are dealing with crises that are probably bigger).

There is a nurse named Lucan. Sometime during these Jungian days, I have confabulated a story that he is from Maine and can help me. I have also had a dream about his beautiful blond sister who I snogged during a party in my hometown Portland. This is obviously a false memory, but the fact that I think I snogged his sister allows me to think I can act more casually with him. I can thus push the UTI issue.

“Lucan,” I call to him as he walks by. “I think I have a UTI.”

“What make you thinks that?”

“Because every time I piss, it feels like I have VD. And since the last thing that fucked me was a bus, I don’t think that’s possible.”

“OK. We are going to have to give you a urine test. And in order to do that, I’m going to have to remove your catheter.”

“No problem,” I answer. “Should I take it out?”

“No! Don’t touch it!” he stresses, perhaps mindful of my lack of inhibition about removing life-giving tubes hooked up to my body. “It is a more complicated process than pulling it out and it could be quite uncomfortable.”

He starts putting on rubber gloves. Eeww. This is not going to be pretty.

As he squeezes some lotion out of a tube he states, “I am going to put some anesthetic at the top and then I am going ask you to lie back while I take it out. It is not going to be comfortable.”

Lotion applied, I lie down, and Lucan gets to work. It is faster and less uncomfortable than advertised...or maybe brain injury has some fringe benefit. It is finally removed with a sharp quick tug.

“Just like pulling off a band aid,” I comment, pleased with my liberation from yet another tube.

“Now we have to get your urine tested.” He brings out a long plastic bottle, I assume specially designed for the purpose of tictination what is this word? “Once you have a urine sample, please give it to the nearest nurse and we can get it tested.”

“Thank you Lucan.”

I smile. “This doesn’t make me your bitch now, does it?”

“Definitely not,” he laughs (sort of).

And yes, I did have a UTI. A bad one, apparently, as they had to empty antibiotics into my cannula twice a day for the next week. I was still the hospital’s bitch.

From Peter Kearney’s “Scrap Book for People Who are Away”

Tuesday, January 12

I had a normal day at school.

From Peter Kearney's "Scrap Book for People Who are Away"

Wednesday, January 13

We had a snowball fight @ school.

From: Lesia

To: Family & Friends

Sent: Thursday, 14 January 2010

This morning, we saw the neurosurgeon who is handling Tom's case right after his visit with Tom. He said that Tom continues to progress quickly and well. Because of Tom's continued refusal to take the feeding tube, the docs have urgently requested the insertion of a feeding peg in his stomach. 'Urgently requested' means that he may get one tomorrow or definitely on Monday (despite our very vocal demands to the highest authorities at the hospital -- this being the public healthcare system, after all). There are a couple nurses who may be able to convince Tom to take the feeding tube until then. Fingers crossed.

Tom got 10 out of 12 questions correct on his post-traumatic amnesia (PTA) assessment today, which means that he remains in PTA but is improving.

I have received the referral for Tom to be transferred to the hospital in the neighborhood, which depends on the availability of a bed. I'm also working on his admission to an excellent private rehab facility called The Wellington Hospital that is within North London (closer to our home). There is a 2-3 week waiting list. If anyone has any connections there, please let me know ASAP.

"I heard Mom and Dad, Julie."

"What?"

"I heard Mom and Dad when they were here."

"You were in a coma when they were here Tom."

"She talked to me while she was wiping my face with a towel."

"I heard Lesia."

"She wiped my face too. It was nice. She said she loved me."

“Why are you crying, Julie?”

I cry too.

We look at each other, tears in our eyes.

We both start laughing hysterically.

A South African accent catches my attention as I’m waking up.

“Are you from Durban or Cape Town?”

“That’s pretty good. I grew up in Durban and went to Medical School in Cape Town. But you didn’t guess that I was born in Mozambique, so I can’t give you full points.”

“Great places, all of them.”

“Have you ever been to Mozambique?”

“I was just in Maputo last year. I was in Durban and Cape Town in December, just before my accident. I’ve spent the last 10 years working in South Africa. A great country and I’m glad to see its doctors in this hospital. What’s your name?”

“Tiago.”

“Nice to meet you Tiago. See you ‘just now’ which, in South Africa, means within fifteen minutes or fifteen days.”

“I can see you’ve spent some time there. See you just now.”

From Peter Kearney’s “Scrap Book for People Who are Away”

Thursday, January 14

Today I had drama, it was fun.

From: Lesia

To: Family & Friends

Sent: Friday, 15 January 2010

Tom was not able to get the PEG procedure to put in a feeding tube (called a 'gastrostomy') through the skin of his abdomen to his stomach today. He is scheduled for the surgery, which is done under local anesthetic, on Monday. Fortunately, the night staff were able to convince Tom to accept an oral feeding tube for one feed last night. Tom remains positive although tired.

The hospital is still only allowing a maximum of 2 people a day to visit Tom due to the 'Nora' gastrointestinal virus. The Infection Control team is supposed to evaluate on Monday whether the ward is clear of the virus.

Tom said that he remembered hearing people talk to him when he was in his induced coma. He remembers his parents talking to him as well as my aunt speaking to him in Ukrainian.

Julie, Tom's sister, left this afternoon after visiting with Tom. We will miss her.

I am getting a lot of cards.

A huge number of cards from my youngest son Daniel's school.

"Wow, that is a lot of cards from Daniel's class. Why?"

"Daniel told the teacher that he didn't do some homework because his father was in a coma...I think the teacher felt bad about it and had the class make cards for you."

"I'll discuss it with him when I see him. When will that be?"

I am getting a lot of books.

Thankfully, they are real books and not comic or coloring books (my friends are incredible optimists).

Simon Sebag Montefiore's book, Stalin: The Court of the Red Tsar, grabs my attention.

"Who brought this one?"

"I don't know. It was left with a card at the nurses' station."

"Well, it's someone who knows me and exactly what I would like to read. I can't understand the writing of who sent the card though."

I start reading The Court of the Red Tsar immediately. It's a great book.

Later that day, a doctor noticed my head buried in the book and asks me, "Stalin? That's quite a book to be reading right now."

I look up and smile, “Just looking for some good ideas.”

He doesn't ask me anything else.

From Peter Kearney's "Scrap Book for People Who are Away"

Friday, January 15

I went to Alexander's and Niko's. Each day I'm hearing good feedback about you.

From Peter Kearney's "Scrap Book for People Who are Away"

Saturday, January 16

We had homemade pizza today.

I love u.

XOXOXOXOXOXOXOXOXOXOXO

From: Lesia

To: Family & Friends

Sent: Sunday, 17 January 2010

Tom was in good spirits and agreed to have the feeding tube down his throat again for a meal. He read the emails that I have been sending over the last 4 weeks and said it sounded scary.

Tomorrow, Tom will have the peg inserted in his stomach so that he will not need to have these dreadful feeding tubes down his throat.

I'm being wheeled on gurney to the hospital basement. A patient in my ward told me that The Elephant Man used to live in this hospital. I wonder if I'll be able to see his remains, just like the Crash Test Dummies sing about? It's time to get my stomach PEG inserted. I have no idea what this means except, supposedly, that strange people will stop waking me up and forcing stuff down my throat. I have decided that not eating is better than that and the hospital is worried.

They wheel me into the operating room. I ask when I am going to “go under” I am told that will not be possible, and that they will be applying some local anesthetic. I am not sure what the procedure is.

Turns out, it involves sticking a tube into your stomach. Guess what? It feels just like sticking a knife into your stomach. I think it hurts like that because that's exactly what they are doing. I am screaming for drugs. Any drugs, even recreational ones. I am told to swallow something. I am not excited by this because I can't swallow. They spray something on my throat and down it goes. They are watching something that is blue and blinking on a television screen. Whatever went down my throat is now live and on TV. Some more stabbing into my stomach and then the doctors says, "Good," and the tube is retracted from my throat. There's a tube sticking out of my stomach now.

Fucking glad that is over. Why can't I have any drugs? This sucks. Drugs would be good.

From Peter Kearney's "Scrap Book for People Who are Away"

Sunday, January 17

Today I went bowling. We went for pizza for lunch. I had four cheeses, pepperoni and olive. Went to Marcella's house and played on the PS2. We went to cafe rouge for dinner.

From: Lesia

To: Family & Friends

Sent: Monday, 18 January 2010

Tom had the peg (gastric tube) surgically inserted in his stomach today which has made his stomach sore and it will probably remain sore for a day or two.

The ward still has the gastric virus which is frustrating as I would like the boys to come see Tom and Tom would like to have more than 2 visitors per day.

From Peter Kearney's "Scrap Book for People Who are Away"

Monday, January 18

We had our first day of rugby.

From: Lesia

To: Family & Friends

Sent: Tuesday, 19 January 2010

Good news! Tom scored 12 out of 12 on his PTA (post traumatic amnesia) assessment although he was only able to get the question on his age correct when given a choice of three numbers. He will be considered to be out of PTA once he gets a score of 12 three days in a row. The occupational therapist said that now he has a longer attention span.

I hate this stomach PEG. Whatever they are putting into it makes my stomach burn and belch forth acidic bilge that I wake up choking on. I don't feel like being an item in that college game, "name ten people who choked to death on their own vomit." They wheel the food bag to fill up my stomach for a couple of hours. I reject it. I say that I am not going to eat whatever they are putting in that bag. Emmanuel, the nurse from Zimbabwe (been there, done that) says, "We have a food issue," and asks for the doctor. I tell the doctor that the food they have been putting into the feed bag is killing me. He arranges a meeting with the nutritionist.

"I cannot eat whatever gerbil food you are putting into my bag. It gives me acid reflux and I end up waking up at night choking on my own vomit. This is a very unpleasant situation for me. Although it wasn't a problem in the past, perhaps I am lactose intolerant or something?."

"This is the only food that we have for you."

"Well, there must be other kinds of gerbil food that you are feeding patients. I cannot believe that, in the entire UK National Health System, there is not another kind of gerbil food for people that are lactose intolerant or whatever I have."

"We only have a fruit food that contains no lactose, we can try that."

I've learned one thing from my sons. If you make dinners miserable enough, you'll eventually end up with only dessert. I can live with that.

From: Lesia

To: Family & Friends

Sent: Friday, 22 January 2010

Tom was in great spirits today. He was thrilled to see the kids and vice versa. The kids almost did not recognize him as he has lost so much weight from not eating over the last couple of weeks. Tom said he lost 7 stones (?) (98 pounds) which would not be possible but I would guess he has lost about 30-40 pounds. Tom is able to walk around unaided now although he gets tired quickly. Tom's friend Charles

Veley visited him from California today. He told Tom that he was, "Very glad that the 'Old Tom' was still there." That made Tom's day. It made mine too ☐

PS. Tom found out from a fellow patient that John Merrick, "The Elephant Man," used to live at the Royal London Hospital in the 1800s and that his remains are located in the hospital. He's been asking to see them a few times, using the excuse, "As long as I'm here, I might as well see The Elephant Man." Only Tom...

I see my boys, Peter (11) and Daniel (7). I am so happy to see them I feel like crying. If I had died on 18 December 2009, I would have only seen them for four weekends out of the last four months of my life. That is fucked up. My outlook has changed. *That kind of life will not happen again.*

"We saw Avatar!" they exclaim.

"Was it any good? I really wanted to see that movie with you."

"It was a great movie about blue aliens on a planet called Pandora. There's lots of fighting."

"I'm glad I didn't see that movie before I was hit by a bus."

"Why?"

"I watched a lot of the World at War when I was in South Africa the weeks before the accident. I believed I was a survivor of the Blitz when I woke up here in the hospital. I prefer that to thinking I was a blue alien fighting on a planet called Pandora."

"I can't believe you got hit by a bus Dad," says my son Peter. As if to get me back for all the times I've told him to be careful of cars when I've walked him to school. At least he was listening to me.

Daniel won't let go of my hand. "Daddy. When Uncle Michael came a few weeks ago, I heard him and ran downstairs. I thought it was you." I fight back tears.

I ask Daniel about all the cards I got from his class and just how he told the teacher.

"My teacher asked us for our homework, I told her that didn't have it. Then she asked me, in front of the class, why I didn't have it and I told her the truth."

"What do you mean, 'The truth?'"

"I just said I didn't do my homework because my mother was not home to help me. My mother was not home to help me because she was in the hospital visiting my father who is in a coma."

"That might have made her feel bad, Daniel. Couldn't you have told her after the class?"

“She asked me why I didn’t finish my homework in front of the class. That made me feel bad. So I just told her the truth. And besides, she doesn’t give me any more homework now.”

I’m learning some more from my sons...

From Peter Kearney’s “Scrap Book for People Who are Away”

Friday, January 22

We went to see you today.

Yaaaaaaayyyyy!

From: John Kremer

To: Annette Kearney

Sent: Saturday, January 23, 2010

Subject: Catch up

Hi annette. I wanted to give you a short catch up , just saw tom after having been away for a few days. He looked well - arnold had been in to see him earlier and marcella and her husband came when I was there , what a difference for him to have unfettered access to visitors!

I find it remarkable to say this , but he seemed for all intents and purposes totally his old normal self. Plus, we walked the wards (!) Unbelievable.

His spirits are good. He has the place totally wired too, sort of like the local mayor. As we walked around, he was greeting patients and their family members by name, everyone seems to know him, he was radiating big smiles and positive energy ... I think for some, he has become a sort of talisman of good luck.

What a difference, also , to have him in the new room! He said he shaved himself this mrng, and has taken a real shower. And looked very comfy in a rugby shirt, black sweatpants , and running socks. And he's reading a bio on stalin. Only your son would find reading about stalin to be a relaxing afternoon.

Hear you and ed will be here from feb 12 - look forward to seeing you. And with smiles this time!

Best , john

From: Lesia

To: Family & Friends

Sent: Saturday, 23 January 2010 23:18

Tom was in great spirits again. Yesterday he saw his colleague Mike Neale from work who told him that he was glad to see that Tom's sense of humour was still the same as before...and maybe it was even worse! Today, one of his best friends from college, Todd Watkins, is flying in from Washington DC to spend the week with Tom at the hospital.

Todd Watkins is sitting by my bed.

Lesia told me that Todd was coming to visit. He's one of my best friends from college and, incredibly fortuitously, we share the same birthday. We are the exact same age. Maybe he'll tell me how old I am. If he doesn't know, I really am fucked.

"I don't know how old I am."

He looks at me with amazement.

"You honestly don't know how old we are Tom?"

"I do. I do. We're.... Fuck it. I don't!"

"We're forty-four Tom. In April, we'll be forty-five."

Forty-four. Forty-four. Forty-four. Forty-four.

From: Todd Watkins

To: Family & Friends

Sent: Sunday, 24 January 2010

Lesia has gone to bed and Todd Watkins from the U.S. snuck in and stole her keyboard. Here's what I saw: Cognitively, Tom continues to improve at a remarkable rate. He correctly guessed (to the extent I could tell) the nationality of each attending nurse who entered the room today. Unfortunately, he didn't sleep well last night because a roommate talked all night in his sleep – in Moroccan. Tom has asked another roommate to do the same tonight to keep the ambience going. He is still on a feeding tube, his voice is somewhat muted and he is still experiencing pain, but he walked up and down the hall two times and he appears to definitely be on the road to recovery.

“How old are we today Todd?”

“Forty-four. Just like yesterday.”

Forty-four. Forty-four. Forty-four.

We hear a bell ring. A gurney manned by doctors and nurses wheels by quickly. More white-coated personnel run behind it.

“What the hell was that?”

“Kidney for sale. Level 3. Half price off.”

We laugh because, yes, Todd and I are immature, sick bastards. But this place is fucking crazy and it turns you into one.

From: Todd Watkins

To: Family & Friends

Sent: Monday, 25 January 2010

Hello Kearney-nation:

Lesia was concerned about the tenor of last night’s message, so today I’ve waited until I’m sure she’s asleep before sending this out. With that caveat, let me give you my impressions from Day 2. Tom was in better spirits today. He had a good night’s rest and was dressed, showered and shaved before we arrived for visiting hours. He was in less pain and he walked the hallways several times this afternoon. He was also bolstered by a visit from his cousin Francis. Tomorrow he will be assessed for admission to the Wellington rehab hospital.

Todd

It is very early in the morning. A nurse has wheeled in a robot with a single blinking red eye and has hooked it up to the Moroccan. He screams. I see blue sparks fly out. It is electrocuting him. It is killing him. She’s finished. She wheels the robot next to the sleeping Pakistani guy. Blue sparks fly. He screams. It is killing him. I know I am next. My heart is pounding. I am going to be electrocuted by this nurse and that robot. I manage to get myself out of bed, get to the bathroom and close the bathroom door and lock it. I am sitting on the toilet lid and hyperventilating. *I am going to die. I am going to die. I am going to die.* The nurse knocks on the door.

“I’m....I’m going to the bathroom.”

“I need to...” I can’t hear her, I am breathing too loud. “I need to...” I can’t hear her. I won’t hear her.

“I’m going to be in here for a while. Leave me alone.”

“I’ll come back.”

I’m safe now. I’ll just wait here until I am sure that she is gone and I’ll make a run for it. That fucking robot is not going to kill me.

No noise. I sneak out of the bathroom. The red-eyed robot is in the corner of the room by my bed. The Moroccan and Pakistani guys are lying still. They’ve been fried.

I poke my head out into the hallway. In my pajamas, I start walking down the hall. I pass other wards. It is very early in the morning.

I make it to the nurses’ station. A kindly Indian nurse looks up at me and smiles.

“You are up early. Is everything OK?”

“There’s a robot that a nurse brought into my room. She’s using it to kill people and I don’t want to die.”

“What?”

“It is a robot with a red eye. I saw them being electrocuted and now she wants to electrocute me.”

There nurse gets up and holds my hand.

“Aww. You poor man. I am going to take you back to your room and make sure that nothing happens to you. You are disoriented a little. I am going to protect you.”

We start walking down the hallway. She is holding my hand while I’m dressed in my pajamas. I think of my sons.

“Where are you from?”

“I’m from India.”

“Where in India?”

“Kerala, in Southern India.”

I know about it. The God of Small Things. So you speak Malayalam?”

“Yes. How do you know of Malayalam?”

“I used to work at the World Bank. I had two secretaries who spoke Malayalam. Angana-inakendu. I think that means ‘hello or something.’ Pini ka naam. I think that means ‘good-bye.’”

The nurse smiles at me as we go into the room and see the nurse and her robot, “I am here to protect you, don’t worry. Now, do you see? It is not robot, it is only a machine to measure your blood pressure. It doesn’t have an eye – the red you saw was just the light showing your blood pressure. I am going to take your blood pressure now. You don’t have to worry. You can lie down in your bed now and go to sleep now.”

“How do you say thank you in Malaylam?” I am still holding the nurse’s hand.

“Nanni.”

“Nanni.” I go back sleep. I’m safe now.

“How old are we today Todd?”

“Forty-four. Just like yesterday and the day before.”

“You realise you are helping me cheat my way out of Post Traumatic Amnesia.”

“What else would you need your Harvard friends for Tom?”

Forty-four. Forty-four. Forty-four.

From: Todd Watkins

To: Family & Friends

Sent: Tuesday, 26 January 2010

Tom had a good day today. He met with the people from the Wellington Hospital and was told he would be an ideal candidate. Unfortunately, their wait list is 2-3 weeks for an open bed. He also passed his PTA assessment test for the 3d straight day which means he is officially no longer suffering from post traumatic amnesia. He starts a cognitive assessment tomorrow which will help determine the course of his therapy going forward. I am also bringing him his phone and Blackberry. He has been insisting on getting these since he woke up, but I was reluctant to give him them until he was well enough to use them. You might end up getting an email from him.

From Daniel Kearney’s School Diary

Tuesday, January 26, 2009

Dear Dad,

I just had lunch and I'm thinking of you. I'm feeling very tired today. I'm doing Art today.

I hope you enjoy my diary.

To: Annette Kearney

From: John Kremer

Sent: Tuesday, 26 January 2010

It was great to hear tom on the phone. He always makes me guffaw at least once per conversation, today no exception. Whatever we might worry about in terms of his recovery, his sense of humor factor is high ...it's sophisticated, it's wicked, and it points to very good cognitive recovery.

He and mike together ...?! Your house must've been like saturday night live when they were growing up.

"Hey Todd, I think I know why I can't swallow anything. Did you see the footage of my throat when they were filming me eat that blue yoghurt yesterday?"

"Yeah. That was grim."

"It looked like there was, like, a baboon's ass down there. I think I can't swallow anything because I've got a baboon's ass shoved down my throat. How come nobody's come up with that explanation? I think I'll tell the doctors about that."

"I don't think it was a baboon's ass...it looked much more like a mandrill's ass to me. Tell the doctors that there's a mandrill's ass stuff down your throat."

"Do you think the NHS can treat someone with a monkey's ass shoved down their throat?"

"I'm damn sure it wouldn't be covered under any medical plan in the US. C'mon Tom. They'd just say, 'If there's a monkey's ass down your throat, that's your own damn fault.'"

From Daniel Kearney's School Diary

Wednesday, January 27, 2010

I went to the JB for ICT when we were in the library. They was a fire alarm we had to stand outside for a long time. I was cold.

Love Daniel

From: Todd Watkins

To: Family & Friends

Sent: Thursday, 28 January 2010

Citizens of Kearnesia:

This is my last night at the editors desk and I learned something very important today. It turns out that Lesia reads these messages when she wakes up in the morning. So no matter how late I send them out I can still get in trouble. That creates a conundrum. On the one hand, I can give a staid account of the day. On the other hand, I have a boarding pass dated tomorrow that's screaming "go for it, what's she going to do, kick you out of the country sooner?"

What to do? What to do?

I was going to ask supper-nanny Marcella for advice but then I remembered the advice that Tom himself had given me when I'd lost my family on the Tube and sought his help. He said (and I'll never forget these words) "you went to Harvard, figure it out".

So with that, let me tell you about the events of my last day in London. Tom had a very good day. He was given a cognitive assessment in which he had to answer a bunch of questions most of which he got right. I'm embarrassed to say that I'm glad that I wasn't assessed because the questions he got wrong were ones I would have had problems with as well. (e.g. They gave him 7 or 8 letters and then asked him to repeat them. And then later they asked him to repeat them again... only, backwards. Go on, try it at home. See if you're not in a rehab hospital in the morning).

He worked with another therapist on his physio. Again, he did well but missed a couple of things. In particular, he was unable to stand straight and balance on one leg for a full minute. It's not the Macarena but it is difficult and when he spontaneously retried it at the nurse's station later he got much closer to the one minute mark; that's a sure sign of progress. Also, the speech and language people took x-rays of his throat as he tried to swallow different things (water, yogurt, etc.). They were pleased to see that the areas where he is weak (throat muscles that are needed to open his esophagus) are the areas that they had been targeting. That means the exercises they have given him seem to be the right ones. Alas, until he gets better in this area, I fear he'll continue being fed by a tube in his stomach. On Friday Tom will be asked to cook something simple to see if he can handle himself in a kitchen.

In short, Tom is making progress but still has a way to go before he's truly "back". In addition to his various assessments and therapies he is spending a lot of time out of bed walking around talking to the staff and to the families of other patients he's gotten to know who haven't progressed as quickly as he has (I told him I thought he was running for mayor).

I'll return you now to your regularly scheduled message but before I go I have two more things to say. First, Tom asked me to let all of you how he TRULY appreciates your thoughts and prayers for him. Second, I hope I didn't offend any of you by inserting my own, admittedly, off-beat sense of humor into these message. Of course, if I did offend you, take solace in the fact that no matter how much you dislike me, they like me far less on Tom's floor.

Take care,

Todd Watkins

I see Emmanuel, the nurse from Zimbabwe.

"Where's your friend Todd today?"

"Todd is a good friend, but he had to go home. He has a wife and daughters and came all the way from the USA to spend time in the hospital with me."

"Yes I am sure you will miss him. But we won't miss him here. That Todd. He's a naughty boy!"

"Dr. Tiago."

"Hi Tom."

"It looks like I might be moving out of here."

"I've heard."

"Can I ask you something?"

"Sure."

"What can I expect about my condition?"

"Do you know what happened to you?"

"I was hit by a bus. I know that."

“I was in the emergency room the day you came in. GCS of 3. Your lungs had collapsed. You were in bad shape.”

“So what can I expect?”

“You recognised my accent when you were still in Post Traumatic Amnesia. We’ve spoken every time I’ve been in the ward. You know a lot about South Africa and the region and I’ve been impressed that you not only recall those memories, but you can recall the conversations we’ve had earlier. One of the key effects of a head injury like yours is that patients have a difficult time forming and retaining new memories. From what I have seen though, I can honestly say that I have no worries about you.”

“Did you operate on me?”

“You’ll have my autograph on your skull for the rest of your life. I put the intracranial bolt in your head.”

“The spike? My friends told me about a spike I had in my head. You put the spike in my head?”

“It’s called an intracranial bolt...that’s my specialty.”

“I can’t believe I’m meeting Dr. Spike. Thank you.”

To: Mom & Dad

From: Tom Kearney

Date: Thursday, 28 January 2010

Dear Mom & Dad

My wif gafe mb blakbery so emales canbe seding to u. I dount no wer i be write now.

Luff

Tom

“Tommy?”

“Hi mom. Did you and dad get my email?”

“Very funny Tom. I thought it was serious at first and it scared me to death.”

“So much for that Harvard education Tommy!”

“Hi Dad. I’m glad you got the joke. Did you know I heard you guys when I was in my coma.”

“Really?”

“Yeah. Mom was talking a lot and Dad was crying.”

“I did cry when on the day we were leaving. I was crying because I was happy. They told us you weren’t going to die.”

“Shit. I think I might have died or at least came pretty close. I saw Uncle Tom.”

“What?”

“I saw Uncle Tom, your father and mother and your great grandfather too – at Rhodo.”

“In a dream?”

“When I was in my coma. They’re fine. Your grandfather said to say, ‘Hi to Eddie,’ for him. I saw Lesia’s mom and Ray Bolam too. They all told me to come back home.”

“I was only four years old when I saw my grandfather Tom. He would have known me as ‘Eddie.’”

From: Tom Kearney

To: Andrew Heller

Sent: Thursday, 28 January 2010

Hi Andrew -

Just checking my BB after a month or so and saw your txt message. Sorry for the delayed response - I was run over by a bus! (It would have been great to have this excuse for homework!) I am very lucky - try to have any major head trauma in London if you can. Still it was a very close thing and the last two weeks of December were as close as I want to get to meeting our maker for a while. I did have some very realistic dreams and discussions with deceased relatives and friends (all of whom told me that I needed to wake up and get home to my waking life - which is interesting in its own right). I really am grateful for your (and the whole office’s) support, cards, advice and good wishes. It looks like I will be moving to a more rehab oriented hospital (most likely the Wellington) which will get me transferred back home sooner.

I must say, your expression "in case someone goes under a bus" occurred to me more than once in the last 30 days. It's relevant! We will grab that dinner - sooner than you think.

It's good to be back...alive!

With kind regards,

Tom

To: Family & Friends

From: Lesia Haliv

Sent: Friday, 29 January 2010

Great news – Tom is being transferred to the private wing (12th floor) of the Royal Free Hospital today. The Royal Free is on Pond Street in Hampstead where we live so it will be easier to visit. Tom is very happy to get into a private hospital. He'll have his laptop there so he'll be able to catch up with work and personal emails. Tom will stay at the Royal Free until there is a bed available at the Wellington Hospital, a rehabilitation hospital.

It is early in the morning. The sun is just beginning to rise. I'm on the 12th floor of the Royal Free Hospital in Hampstead.

Positives: I am alive. I have my own private room. I have my own private bathroom.

Negatives: I am hooked up to a bag of food for my two-hour feed of lactose-free gerbil food. I am forty-four years old. I cannot eat or drink through my mouth and no one can tell me why. I don't know when or if I can ever work again. And I have a family to support and we live in the most expensive city in the world.

I stare out the window. The rose-orange tint of the winter sun rising in the east can be seen behind the dark teeth of the London skyline.

This is the "is the glass half full or empty?" conversation with myself that can go one of two ways. I can be self-pitying and just lie here all day looking at the window and watch the world go by; or I can get my ass out of bed, shower, shave, and start reading my book and enjoying my life.

I get my ass out of bed.

From Daniel Kearney's School Diary

29 January 2010

Dear Dad

How are you. I am having fun at school.

We are caring about Greek Myth at school. Do you now Myth?

I am glad it is fridy.

Daniel

Dr Saeed is in my room. He is checking out why I cannot swallow. He inspects my throat.

“Stick your tongue out straight.”

I can't. It veers sharply to the right.

“Try it again.”

It veers sharply to the right again.

“You had a back-of-head injury. This is a Vagus nerve problem. Your vocal fold paralysis is caused by nerve damage emanating from your Vagus nerve. This is typical nerve damage from a back-of-head injury.”

“Is that why I cannot swallow food or drink without gagging?”

“Yes.”

“Is it fixable?”

“Possibly. You will need time. The nerves will have to repair themselves. This can be helped with exercises. You'll work with a voice and language therapist on this. Let us try that before we think of anything like surgery.”

I am so relieved. Dr Saeed has put a name on what keeps me from swallowing. If he can name it, they can fix it.

I can think about using my mouth to eat and drink again. If I can't work, at least I can eat and drink through my mouth again.

I am within walking distance of my house.

I am going to walk home.

My wife is not impressed with this idea. She orders a taxi to pick me up at the hospital.

It is both strange and comfortable to go home.

This is the home I left over a month ago.

This is the home I left a lifetime ago.

I spend time with my sons.

I lie down on our bed.

Lesia hands me the items turned over by the police from the accident scene: my wallet, all my money and credit cards.

“What about the suit and the clothes I was wearing?”

“We told the police to destroy them.”

“Why would you do that?”

“They were covered in blood. Your clothes were in shreds. We told them to destroy them.”

“What about my gold cufflinks?”

“This is everything the police gave back to us that wasn’t covered in blood. There were no gold cufflinks.”

“Someone nicked my gold cufflinks?”

“Probably not. The paramedics cut your clothes off you on the street so that could they re-inflate your lungs. Perhaps the ended up in the street and you made someone’s Christmas.”

“It’s time for me to go back to the hospital. You know what? I think I’ll walk back to the hospital on my own.”

And after my visit home the next day, I do.

From Daniel’s School Diary

Monday, February 1, 2010

Dear Dad,

It was nice to see you on weekend.

I am back at school because it is Monday.

I had a spelling teste today and got 6/10. I ges I half to stud harder.

Love,

Dniel

I'm waiting for a CAT Scan in the basement of the Royal Free Hospital. As I'm sitting there, I look up and see Andy Bingham. I've known Bingo since we both lived in Ukraine back in the mid-1990s. We're both in the coal trade and now he lives in Switzerland. *So what the hell is he doing in the basement of the Royal Free Hospital in Hampstead?* The doctors told me about hallucinations. The doctors told me this might happen. I look at Bingo. *That is fucking Bingo.* He's looking right at me and he's not saying anything. Is that Bingo then? He knows what I look like. What? Is it a Bingo Doppelganger? *The doctors told you about this Tom. It's called an hallucination.* Why couldn't I just hallucinate seeing Rachel Wiesz? My Imaginary Bingo leaves the room.

I get my CAT scan and return to my room about an hour later.

On my bed lies a model London Bus with a scribbled note attached to it:

Tom, came to see you at the hospital when I was in town from Swiss. Went downstairs to look for you but couldn't find you. Hope you get well soon, so stay away from this bus! Look forward to seeing you back soon. Bingo.

From: Tom Kearney

To: David Kent, Work

Sent: Wednesday, 3 February 2010

RE: Visiting Hours

Hi David,

It is great to hear from you. You and the guys from work are welcome to visit anytime. It would be great to see you. I am now in the Royal Free private unit (12th Floor) which is about a 10 minute walk from my house. The unit focuses on physical rehab which is what they will be focussing on until I am good to go. I am going to be transferred to the Wellington soon, which is nearby, has great rehab, and supposedly, much prettier nurses.

"Hit by a bus" is a pretty stupid way to go. The police are investigating the driver and the company as a number of eyewitnesses should have seen me at the pedestrian crossing and the bus may have moved too

quickly out of the intersection. Whatever happened, I was lucky enough to get hit in London, home of the best trauma hospitals in the world.

I was flattened by the bus ("jettisoned is probably more accurate"). I was taken to the Royal London. The guys got to work very quickly and spent 10 days or so working on my brain and lungs. I also had a huge number of tracheal tubes jammed into my throat - which has affected me a bit, but it did save my life. Besides, I've always wanted to give my wife a Christmas Cactus for Christmas-why not be one too!

After a couple of weeks waking up (and refusing to eat), I finally did conclude that I was in a hospital and not on some lousy package tour (I kept asking my wife and brother when we were going to check out of this crap hotel!).

The last couple of weeks of Jan have been pretty much dedicated to rehab. I think the insertion of the tracheal tubes and the actual impact of the bus have altered my voice box and esophagus - as a result, I cannot eat or drink using my mouth and my voice has changed to resemble that of a 1970s US cop show character; all, thankfully, curable. They inserted a Stomach PEG into me so now I have meals piped into me three times a day: I also believe that I am living Homer Simpson's dream.

In the next couple of weeks, I'll be focussing on physical exercise (balance and leg and arm strengthening) and linguistics (sorting out this accent and my voice box!). The guys at the Wellington tell me two weeks of that and I'll living at home and working soon thereafter.

Despite the bad luck of being hit by a bendy bus, I feel like the luckiest person in world. This could have been it, and here I am worrying about some physio and throat repair. One thing you'll be glad to know is that the admitting doctor at the Royal Free who, after going over my medical records and conducting various tests like asking me, "Who is the Prime Minister?" then wanted to know what I did for exercise. When I told him that I'd been swimming regularly for years and, most recently, a kilometer a day, six days a week at about 2000 meters altitude in Johannesburg, he simply responded, "That saved your life." First time I've heard that being in Joburg was good for someone's health! □

I've lost 40 pounds in the hospital (my story is that most of that is swimming muscle lost in the time void). But if I hadn't had the extra weight, that bus could have inflicted, well, much worse damage.

I cannot wait to get back at it. I cannot wait to get back to the office and grab some lunch (for me, baby food!) with you.

Great to hear from you and kindest regards,

Look both ways!

"Mr. Kearney?"

"Yes."

“It’s time for your MRI scan.”

“I didn’t order one.”

“The doctor said you needed an MRI scan.”

“Well, he didn’t tell me anything about that.”

“But he scheduled it.”

“Not with me he didn’t. During the past two months, my brain and body have been scanned more times than I have ever been in a lifetime. You have those records on file. Look at those. Nothing has changed since the last MRI was done one week ago.”

“But it has been scheduled.”

“Not...by...me. If the doctor wants another MRI of me, he needs to tell me why and in person. Otherwise, he’ll just have to work off of last week’s MRI. I’m still glowing from it.”

“Mr Kearney?”

“Yes.”

“Time for your blood test.”

“Wah? It’s 5am. I didn’t order a blood test.”

“The doctor said you needed a blood test.”

“Which doctor?”

“The doctor.”

“If I need a blood test, whatever doctor it is will tell me to my face. And you can tell that doctor that the next time someone is sent to my room to poke me with a needle, they will have had to have told me beforehand what they need it for.”

“Ok, you’ve got another appointment this afternoon.”

“With whom?”

“It says here Dr. Miller on your schedule.”

“Oh yes, that’s very important. That’ll be at least an hour. ”

“Ok, we can shift your therapy sessions around to accommodate Dr. Miller.”

“You have to - he’s the most important doctor I’m seeing today.”

Dr. Arthur Miller is not a medical doctor at all. He’s a professor emeritus of the History of Science at UCL and a close friend. And we only talk about movies, books and history. So, I wasn’t lying: he really is the most important doctor I’ll see that day.

My Stomach PEG hurts like a bitch. I wonder if there is an infection around where the tube hits my skin. Blood tests are taken. My temperature is monitored. Dr Shawdrawi, the gastroenterologist is summoned.

“Hmm. Please lie back. I am going to rotate your tube. It is going to be very uncomfortable.”

“It is. It feels like things are ripping apart in my stomach.” I am groaning, pussy that I am.

“OK. You had a lot of adhesions growing on the tube. When was the last time you had your PEG tube rotated?”

“Never.”

“What? You’ve had this in for a month and no one rotated this for you?”

“It didn’t come with instructions I guess. What was happening to me to make it hurt so much?”

“It was growing into your body. That is what happens when scar tissue forms adhesions within your body. This should be turned once a week to keep that from happening.”

“Can you tell the nurses this information? That would be helpful.”

Trolling through my work emails in the hospital from the past couple of months, this one grabs my attention:

From: Belinda Hollway

To: Tom Kearney

Sent: Monday, 21 December 2009

Subject: EWS/Enron judgment

Dear Tom,

We now have the Tribunal's decision and, simply put, EWS won. The Tribunal found that EWS's conduct did not cause Enron to lose a 4 year coal supply contract, so no damages were awarded to the liquidator.

You will see that the CAT makes some specific comments about your evidence at paragraph 70(c). It then goes on to rely on your evidence on a number of points.

Thank you yet again for all of your help with this matter. Both the team at Freshfields and EWS really appreciate all your help. Do please feel free to call either me or Jon if you would like to discuss - otherwise we will no doubt speak in the New Year.

Merry Christmas and best wishes for a good holiday season.

Kind regards,

Belinda

Unbelievable! The result of the case I was a key defense witness for gets released only a couple of days after I am bendy-bussed. I have to call these guys.

"Hi Belinda."

"Tom?"

"Yeah. I just read some old news."

"I can't believe you are calling me! Aren't you still in the hospital?"

"Yes, but I'm talking to you, so I'm alive. Congratulations on the victory!"

"Thank you. Your testimony was key to the judges' decision. Given your past relationship, EWS is very pleased with you."

"That's a change. I used to be EWS's most-hated Enron employee. They paid their fine for doing what they did to the marketplace but they didn't do what Enron accused them of doing though. Funny how things change. I'm a chief witness for the government against EWS for violating competition law and then I'm a key witness in defence of EWS against a £20 million pound damages case launched by Enron as a result of the government ruling against EWS. I'm glad my testimony before the Tribunal was scheduled before December 18th – which is why I am talking to you."

"Can we do anything for you?"

"I would love a personal injury lawyer. Any recommendations?"

“You know that is not our firm’s specialty. But I will come up with a list of recommendations after talking to my colleagues.”

“I’m at the Wellington Hospital for the time being. There’s the small matter of teaching myself how to eat again. But since I have access to email, I’d love to get to work on this thing while I have some free time.”

“I’m Simone, your neuropsychologist.”

“Hi Simone. You’re from Oz?”

“Yes. Let’s start with you. Is there anything you want to tell me about how it’s going.”

“I’m ready to tell you my secret now. I see dead people.”

“What?”

“Sorry. It’s from that movie “The Sixth Sense.” It’s an inside joke.”

Good start Tom. Simone must think you’re nuts.

12 February 2010

From Daniel Kearney’s School Diary

Dear Dad,

I have half term Holiday. I am very happy. I will play Wii.

Love Daniel

Learning how to eat and drink through your mouth is not a matter of instinct. You learn how to do it. I have two sons. It occurs to be that the “switch to solid food” when they were infants is a much bigger milestone than it seemed at the time. I have a back-of-head injury. As a result of nerve damage to my Vagus nerve network (a bit of the nervous system’s transmission network that controls everything from lungs, bowels, and other important bodily functions), I have vocal fold palsy.

What is a vocal fold? In simple terms, it’s the flap that either covers your trachea when you are eating and your esophagus when you are breathing. If you’ve ever had “food go down the wrong pipe” and spit your meal all over your plate, you’ve encountered a vocal fold problem. My vocal fold was up all the time, even when my esophagus was open. Since the nerve controlling my esophagus was damaged,

my food pipe was only opening just a little bit while, at the same time and still exposed, my wind pipe was fully open and ready for action. Taking the path of least resistance (i.e., the widest open hole), food had a tendency to go into my lungs and I would gag. This is most unpleasant and explains why I thought I was being tortured when the nurses were trying to feed me with a tube in the Royal London Hospital. It also explains why I kept on pulling out the various tubes that they were using to feed me.

Along with the vocal fold palsy, my stomach seemed to be upset all the time. I was feeling the effects of acid reflux all the time. The hospital had taken to putting anti-ulcer medication in my PEG, and that did seem to reduce the churn. Acid reflux with vocal fold palsy (is it a vocal fold palsy or just vocal fold palsy?) is very unpleasant – you get the twin sensation of acid erupting from your stomach and then choking on it as it tries to make its way into your lungs. Did I die and go to hell?

Back to learning how to eat and drink through your mouth. The therapists assigned me a host of throat routines called Shaker Exercises. Boring, these. You lie flat on your back and nod your head. Do this so many times that it hurts your neck and lower jaw. It's working. "Kegels for the throat," I called them (a reference to the helpful pelvic floor exercises that pregnancy nurses tell women to do when they are of child-bearing age). In order to assist my swallowing, I have electrodes attached to my throat which measure the force of my swallowing. "Forceful swallows," they call them. This goes on day-in, day-out for a week. I try to see if it is helping me swallow and I try sipping a small amount of water from a glass. The sensation of water going down my throat after a month's drought felt like heaven. I am tempted to try more. I choke. Disappointed. More kegels.

It is Saturday morning. A beautiful Iranian therapist is in my room.

"Stick out your tongue."

It goes to the right.

"Try sticking it out straight."

It goes to the right.

"OK. I am going to put some yoghurt all over your lips."

"Wah?"

"Now lick it off."

I manage the right side – that's the only way this tongue rolls.

"Up."

"Can't do."

“Try it.”

“Jesus, this is tough.”

“Keep trying. Lick it all off your lips. Keep trying.”

“Jesus, this is tough.”

I’m ready for my first meal. This is a big deal. My therapists and I have been working on this for a week and one of them has written bullet points on “how to eat” (take small bites, drink lots of water, forceful swallow) and pinned them to my wall so that I can read them for encouragement. I can take small sips of water now, so at least I am able to get a little bit of liquid down the old fashioned way. Once I am taking food through the mouth for a week, I can think about going home and, more importantly, getting rid of this Stomach PEG.

The very nice Filipina “food lady” brings me my chicken soup.

Soup. No worries about soup. Very small sips and lots of time.

“*Maraming Salaamat sa manok sabaw,*” (I’m picking up some Tagalog).

The food lady smiles and leaves me alone.

I pull off the cover.

Damn. The soup has chunks in it.

DISAPPOINTED!

I have to eat this chunky soup...

AND I AM ALONE.

What if I choke on a piece of the meat?

Where’s that buzzer?

I CAN’T BELIEVE THEY LEFT ME WITH CHUNKY SOUP. I AM GOING TO DIE ALL ALONE.

I get up. I start pacing. Yes, I am fucking hungry. But there is NO FUCKING WAY that I am going to die eating that FUCKING CHUNKY SOUP.

I leave the room.

I start walking around the floor to see if I can find anyone I know to bitch too.

I see Katie, the physical therapist from Oz. Katie is very cool.

“What’s up Tom? You look kind of stressed?”

“I am. They brought me some food. My first fucking meal. And I can’t eat it.”

“Let me see it.”

Katie comes into the room and sits down by the window.

She inspects the soup.

“I know nothing about what is wrong with your throat, but, if you have a sports injury and had been out of practice for a while, I’d work with you on using the muscles that are out of shape and, slowly and surely, you’d get back into shape. You haven’t eaten through your mouth for a month. You’re out of shape there. What you have to do is start very slowly and surely and start getting your swallowing back into shape. You won’t eat through your mouth again if you don’t start. So eat what you can. And do it slowly. Let me watch you.”

I take a sip of the liquid.

It goes. Just like water. I’m used to that.

“Now try a chunk. A small piece. Chew it a lot.”

I take a small piece of chicken.

I chew it.

I chew it more.

I chew it until it is practically liquid.

I swallow it.

“Good. Now I’m going to leave and you are going to eat as much of that soup as possible. Remember. The only way to get back into shape is to put the muscles that have got out of shape back into use. Slowly and surely.”

I point the spoon at another piece of chicken.

Lunch is served.

Manok sabao masarab!

My friend John Kremer is visiting me. I've seen him about every other day since I've been in the hospital. We have been friends since graduate school nearly twenty years ago. He's brought a beer with him and says he wants to have dinner with me. Seeing that the last dinner we had was an uproarious and completely debauched evening with grad school classmates only two days before December 18, this dinner with John is a bit of a milestone. At least he's having beer. I get a bowl of soup again.

"Maraming salaamat sa sabaw e sa tubig." (Thank you for the soup and the water.)

John and I talk while I eat my soup and he drinks his beer.

Work, people, politics, family, books, the usual things boring middle-aged farts talk about.

He does most of the talking, while I concentrate on eating my soup.

It takes me over an hour to eat it.

John congratulates me when I finish the bowl. He says that it is the most he has ever seen me or anyone concentrate in their lives.

My tongue is beginning to straighten out. Where is that beautiful Iranian speech therapist when you need her?

I have a beautiful Australian speech therapist in my room now. That'll do just fine.

"I've come to fix your tongue." Boom chicka WAH WAH. "We are going to try to pronounce some phonetic sounds to assist your tongue recovery.

I am going to say the sounds and you just repeat after me."

"Ti - ts."

"Ti - ts."

"Ti - ts."

"The last sound is a Russian letter. I know that sound."

"OK you can try it."

"No. Why don't you just repeat it for a bit and let me see if I can figure out how to say it."

"Ok, Ti-ts. Ti-ts. Ti-ts."

"Can you say it faster now? I can't hear you very well. Perhaps you can stand up a bit?"

"OK. Tits. Tits. Tits."

“Do you realise what you are saying? Now this is some therapy that I can get used to. If you keep this up, forget about eating, I’ll be able to anything you want me to.”

“Christ! I think we have to change these phonetic exercises.”

There are a couple of lawyers in my room. My father is with me too, because my parents have come back to the UK to see their son, alive, walking and just-about-eating.

The lawyers explain to me how the UK is different than the US. In the UK, there is no such thing as automatic liability for personal injury. The fact that I was simply hit by a bus does not mean that the driver of the bus is automatically responsible. Who is responsible and by how much will depend on the evidence collected and witnesses interviewed by the Met.

“They haven’t spoken to me yet.”

“They will. That is their job. The police will conduct their investigation and your ability to file a claim will rest on the Police Report and Witness Statements.”

“The accident happened on Oxford Street during the busiest shopping day of the year. What about CCTV evidence?”

“The Police will have recovered CCTV evidence from shops, the bus, nearby buses and Westminster CCTV. There should be plenty of CCTV evidence to show exactly what happened and who was at fault.”

“I have lived in the UK since 1997. I have walked my sons to school every day possible since they have been going to school. I have owned three cars in the United Kingdom and work and drive in South Africa, and have never been involved in an accident in my life. I lived in Ukraine for four years and saw plenty of people get hit by cars. I am the most careful and conscientious street-crosser you’ll ever meet. My wife, sons, and friends will testify to that.”

“But that is not important. What is important is what the witnesses and CCTV evidence shows. This is not the US. Just because you are injured, does not mean that you have an automatic right to compensation. In the UK, the injured party that brings the lawsuit against the injuring party must be 100 percent certain of his or her claim and bears the risk of paying for both sides’ legal fees if they lose. This is not the US. Judges and not juries determine whether or not the injured party’s claim has merit and the party launching the lawsuit bears the full risk of failure.”

“This system sucks. I assume a lot of injuries go uncompensated then? Why would I take the risk of ever filing a claim?”

“It all depends on the Police Report, which will include analysis of CCTV evidence and witness statements. We can operate on a “No Win, No Fee” basis, which will involve the law firm undertaking

up to several hundred thousand pounds worth of expenditure to bring your case to trial. However, we would need to get an insurance policy to protect us against an adverse outcome. Our ability to get that insurance policy to allow us to underwrite our expenditure will depend on the strength of the Police Case against the bus driver.”

“The Met has three months to file a Criminal Charge against the driver of the bus. They will base their filing of a Criminal Charge on the evidence they have gathered, including CCTV and witness statements. If a Criminal Charge is filed by the Met, your compensation claim case is much more easily pursued.”

“So, let me get this right. If the Met files a Criminal Charge against the bus driver, we have a case. If they don’t file a criminal charge, we’re screwed?”

“No. The threshold is much higher for a Criminal Charge. Based on the evidence collected by the police during their investigation (which would include witness statements and CCTV footage), they would have to be one hundred percent certain that they had the ability to prosecute the driver of the bus for a criminal act.”

My father chimes in, “But he bus driver claims that he didn’t see Tom. That’s what Officer Clarke told me.”

“Of course the bus driver said that. That’s what they always say.”

“In America, if the driver of a vehicle nearly kills a pedestrian and says that they didn’t see him, the driver is automatically at fault.”

“That is not the way it works in the United Kingdom.”

“You must have some pretty shitty bus drivers that are still on the road then. Officer Clark also said that he came to the scene right after the accident because he thought Tom was a fatality. If the Met thought that Tom was a fatality, shouldn’t there be a lot of evidence and witnesses whom they would have gathered from the scene after it happened.”

“They should have, yes.”

“I only ask you this because Officer Clark seemed to be relying on the testimony of a Taxi Driver who, as far as I recall it, was parked behind a bus and described Tom walking the opposite direction from where he was standing at the time and pirouetting in the middle of the street and then being hit by the bus. As described to me, it seems like the police are building a scenario that could not have possibly happened. And, it seems strange to me that Tom has never, not once, been contacted by the Met to tell his side of the story.”

“He will be contacted by the Met. They cannot release a final report unless they interview the victim and, it is clear to me, he is competent to be interviewed. All I can say is that we cannot do anything until

the Met makes a decision about prosecution, and, failing that, when they issue the final police report, which, I believe, is due within six months of the accident. So, March 18 and June 18, 2010 are the key dates we need to follow. Until then, there is nothing we can do.”

“What about the people who wrote into *The Evening Standard*?”

“Only witnesses identified by the police will be used in the Police Report.”

I’m getting my PEG taken out today. I’m a bit nervous since it hurt like a bitch being put in.

“Are you going to put me asleep this time?”

“Yes. You don’t have to worry about that.”

“Doctor Shadrawi, my stomach has been bothering me since I woke up and I’ve been on daily doses of ulcer medication. If you are going to perform a gastroscopy – which I think you are – can you just check under the hood and see if everything is OK?”

“Yes. I will.”

I go to sleep and wake up back in my room. I’m tubeless for the first time in two and half months. Almost home.

“Dr. Shadrawi.”

“I am so glad you asked me to take a look around.”

“This can’t be good.”

“Your stomach and duodenum were inflamed with a pre-ulcerous condition known as a helicobacter infection.”

“The ulcer bacteria?”

“Exactly. You have a very bad infection but we caught it in time. You will only need antibiotics for a couple of weeks and not an operation, plus a follow-up test three months after you have completed the antibiotics. If you had waited much longer, you would have needed treatment for a bleeding ulcer.”

From: Kristin Amerling

To: Tom Kearney

Sent: Sunday, 21 Feb 2010

Subject: Greetings

Jesus Christ, Tom! I've heard of attention getting devices but you really took the cake this Christmas. I could not get my family to focus on ME throughout the holidays because down the line, my sister, parents, even my grandmother, kept up a constant refrain: "What's the latest report on Tom?" Thankfully, I'm finally getting an occasional question about my own well being now that news on your front is good.

BUT SERIOUSLY I am so so very glad to hear that you are doing well. You've been in my thoughts, and I'm relieved, happy, impressed, and amazed by your recovery from what sounds like an unimaginably horrific accident. How are you feeling? Are you getting good treatment? Are you bored out of your mind by the recovery process?

It was not surprising to me how this incident underscored that many people all around the world care about and think very highly of you. I know you are probably swamped with messages from your fan club but this member would love to hear how you are doing whenever you get a chance.

Kristin

To: Kristin Amerling

From: Tom Kearney

Date: Sunday, 21 Feb 2011

Dearest Krissy,

There is no need to call me Jesus Christ Tom. Because you knew me "PC" (pre coma), you may simply use Tom.

Congratulations on having sussed out the attention getting-aspects of my bus accident. This was done not merely to ruin everyone's Christmas – I was playing a longer, more sophisticated game. You'll be pleased to know that because I've been in a coma (did I tell you that already? No biggy, because sometimes I forget to wear trousers too!) that there a lot of memories that have gone missing. For example, I no longer recall the time that you, I and my roommate-to-be, Kenny Rudin, were sitting in the Freshman Union eating dinner when you, suddenly, got up to go to the salad bar. As you were leaving, you sweetly said "I'm just going to the salad bar. You two will be alone now so you can finally talk about crotches." I have completely the look on Ken Rudin's face which revealed a thought pattern akin to "I can't believe she read my mind? Is she a lesbian?"

And I no longer recall anything about that “So You Are A Geek and You’re Applying to Williams?” session we went to in Falmouth during our senior year in High School. We all sat rapt listening to one of the hosts pontificating how his son really enjoyed the winter session when he spent days travelling in trains studying the “life of the American hobo.” We all nodded earnestly, except you, who asked, in all seriousness “why would anyone need a winter session to ride trains to study the life of the American homo?” Gone forever that.

One of the advantages of almost dying is that you get to throw phrases like “when I was in my coma” randomly in every conversation. This startles the few people who remain unmesmerized by the long string of drool cascading off my chin.

I won’t get into the vagaries of hospital life: two months is enough! I hope your annual Christmas festivities were not too bothered by my near death. Hopefully I am going to be discharged this coming Friday. I can eat and drink again (I lost about 40 pounds – there are easier diet methods!) and my physical condition is still very good (I only broke all my ribs on my right side and put a few unnoticeable fractures in my head [i.e., if you can see them, you are too close!] – no broken bones or fractures anywhere else). I am lucky as I was hit by a 16 ton vehicle going about 20 miles per hour. Good thing I was in a clearly marked pedestrian crossing. Nothing like the right-of-way to make you recover sooner!

I do want to take this opportunity to wish you, your lovely daughter, and all Amerlings (including those descended from the Viennese court painter of the 19th century) a happy and healthy 2010. I know it’s a little late, but you see, I was in a coma!

With kind regards, love and kisses,

Tom

From: Tom Kearney

To: Mom & Dad

Sent: Sunday, 21 February 2010

Subject: Welcome Home

Dear Mom and Dad,

I hope you all had an uneventful trip home. I hope you are not too "knackered" from the trip. Thank you for coming out and spending time with me these past few (long) days. I am glad that you were able to see me in a conscious state, even if I was all piss and vinegar some or a lot of the time. I spent a few hours at home yesterday afternoon and managed to identify what suit (and maybe cufflinks) I lost in the near fatal fly-by. Lesia managed to keep my shoes, which I find amusing (a woman with her priorities!). I am glad I did not have to go through a bloody bag of rags, so thank you for sparing me that fun.

I think we exhausted the issues that remain before me. I am not going to charge at any windmills right now - I am going to take my time going back to work and will get slowly back into shape, too. I want to restart my life now. The bus robbed me of a lot of time - and I want to get it back. I am of the opinion (and I am not brain damaged here!) that maybe something good will come of this. Hell, I can order chicken and gravy on Luzon with ease!

Love and thank you,

Tom

23 February 2010

From Daniel's School Diary

I can't wait until you come home. I am coming to visit you today.

24 February 2010

From Daniel's School Diary

Today we made pancakes. I am coming to visit you today.

Notes from Exit Interview with Dr Richard Greenwood, Neurologist, The Wellington Hospital

"How do you feel now?"

“Fine. I slept fine. I did 10 k on the bicycle in the gym. I think I am more than ready to go home this afternoon.”

“Except for the antibiotics to treat the stomach condition, I see that you are not on any medication now and have not been on any since you woke up from your coma.”

“That is correct.”

“It is my view that you do not need any medication. The only thing that I can prescribe is rest and exercise. It is important that you get plenty of both and studies have proven that the medical benefits of both for someone in your condition is as good as medication. If you find that you are having problems sleeping or experiencing anxiety, we should meet sooner than the session that I would like to have with you in thirty days. Do you drink alcohol?”

“I am not opposed to it, but I don’t need to.”

“You can start drinking alcohol three months after the date of your coma. But, since you have had a head injury, you are at an increased risk of seizure, and, lack of sleep and alcohol consumption can contribute to that risk.”

“So if I rest and don’t drink at all, that seizure risk is eliminated?”

“Yes.”

“Then I will rest and give up drinking.”

“That would be the best for you. Do you have any questions?”

“Yes. The neuropsychs keep on talking about the positive effect of developing and using “coping strategies” – can you explain what that means?”

“Because you are recovering from a traumatic brain injury, you will find a lot of things more difficult for you than previously, especially as a high achiever. You will need more rest than you used to. You’ll need to take more time to recover from a hard day’s work and commuting back and forth to work. A coping strategy is just a way of approaching problem solving by applying techniques that allow you to achieve the same result without overtaxing your energy or running into dead ends.”

“Applying that definition, I think I can say that my entire life has just been a well-executed series of coping strategies.”

“I’ve never heard it expressed that way before, but I suppose that is true for all of us. Enjoy your return home and see you in thirty days.”

From: Tom Kearney

To: Friends & Family

Sent: Saturday, 27 February 2010

Subject: Home

Dear Family and Friends,

I was discharged from the hospital on Friday, 26 February. After ten weeks of living at the hospital, I am grateful to be home and resuming my life with my family again. Given the scale of and nature of my injuries, I am extremely grateful that I can walk, talk, remember, and still speak (and read the languages I spent so much time learning in my youth!). For the next few months, I will still be an outpatient at the hospital continuing with the various therapies I have been carrying out for the past month that have accelerated my recovery. I look forward to these sessions because I know that they are effective and will continue to positively influence my recovery. I also look forward to getting back to work – initially this will be from home (I am lucky to live in the age of phones and emails) with a transition back to the office (in London and in Johannesburg) within a reasonable time frame.

When I returned home yesterday, I walked with Lesia to pick up both Peter and Daniel at their schools and walk them home. It was a rare, sunny and almost-spring day (I attach a couple of photos to prove it), and was a good reflection for my overall mood and outlook. I would like to thank everyone for the all the support, care and prayers you have given to my family and me during this short but incredible time. I am both humbled by and grateful for this display of unbounded emotion and caring – it has given us an immense amount of strength and has no doubt quickened the pace of my remarkable recovery. We are truly fortunate and are very grateful.

With much love and kindest regards,

Tom Kearney

From Daniel's School Diary

Friday, 26 February 2010

WELCOME HOME DAD

Love, Daniel

CHAPTER 4: SECOND WIND

“...everyone needed a good fall before starting on the second stage of their lives . . . perhaps this is the price we have to pay before we can get our second wind.”

—Amin Maalouf, from *A Century after Beatrice*

To: Everyone

FROM: Tom

RE: Wake Up Call

SENT: Sunday, 30 October 2011

When I look over this collection of words, I realize that I've really just written a witness statement (note to self: that's something the Metropolitan Police have yet to ask me for). One thing I have learned from this whole experience is that perception is indeed reality, and all reality is defined by how it enters the mind and how it is then retained in memory. I have tried to remain as true to my perception of reality during my coma and waking states as much as possible. I am grateful to the nurses at the Royal London Hospital who told my wife to get family and friends speak to me while I was in a coma. I clearly heard them and, even though I could not respond, hearing familiar voices was calming and supportive. I heard you and it made a difference.

Please understand that although I believe my recollections are clear, exactly how these memories conform to reality might seem slightly confabulated: that is unavoidable. During my coma, my "waking periods" were sporadic: I think that audible sounds kicked off an internal monologue and stimulated fleeting but intense dream cycles. Later, during the period of Post Traumatic Amnesia (PTA)—when the mind is "rebooting" after a traumatic brain injury—you are, essentially, "dreaming while awake." PTA is a time when waking and sleeping states are seamlessly intertwined: real and dream memories are consolidated and recalled and it is difficult to distinguish which is which. I know it sounds like a "bad drug trip." (My good friend Colin Smith joked with me during a visit to my hospital bed while I was still in PTA: "10 days of sleep, paralyzing drugs, and wild dreams? You bastard! I've been trying to have that experience all my life!") Yet, as the conscious and unconscious perceptions of reality battle for control, I can only imagine the unsettling impression it makes on those who have to observe it. For instance, I know now that I have never piloted a plane, that I was not injured during the Blitz, that my great grandfather was ever a wounded prisoner in Gibraltar, or that nurses at the Royal London Hospital were ever making me refreshing Brazilian fruit drinks. But those memories *seem* real. Thankfully, they are now filed in the "dreams category" in my memory bank. I cannot say the same about that "trip to Tipperary." I am sure that there are all kinds of biochemical and psychological explanations for my time in Tipperary and Greenwich Village, but there are enough similar tales in my family and elsewhere to suggest it was something more than just a dream. I believe I witnessed something mystical and perhaps inexplicable (but not to the Irish, however, who are not surprised by this kind of thing).

If wisdom is just knowledge gained through painful experience, then allow me to list what I have learned so that you don't have to go through what I did to become any wiser.

The Met's so-called investigation of my accident starkly reveals why so many vehicle-inflicted pedestrian and cyclist casualties occur on Oxford Street and elsewhere in London: *the very authority that is supposed to protect people doesn't seem to be doing its job.*

According to the final photocopied, handwritten "report" the Met released nearly eight months after my accident, the Met Police claim:

- the Bus Driver did not see me;
- there is no CCTV evidence from the Westminster camera which overlooked the scene (according to the police it was recording at the time but did not pick up any footage until after the ambulance arrived a half hour later);
- there is no CCTV evidence from the 8-16 CCTV cameras mounted on the brand new Mercedes Citaro Bendy Bus operated by Arriva— or from any of the three buses near the scene either;
- there is no CCTV footage from any of the many shops adjacent to the scene.

I think that the fact that there is no CCTV evidence from Oxford Street is, frankly, unbelievable: in addition to the dozens of CCTV cameras mounted on buses and stores near the scene, the area is covered by a vast network of CCTV cameras operated by the Met. I also think the fact that there is no evidence from the front-facing camera on the bus, which, according to the Met, "takes a picture every other second," is even more suspicious. The police offered the implausible story to my wife that, "the accident must have happened between the seconds." Hmm. If a bus travelling at 15-20 mph (as reported by the bus driver) is 30 feet a second, how fast would the bus have to be moving for its camera not to capture the accident? Remember, it was icy, snowing, and very crowded at the time, which might just indicate that the bus was perhaps travelling too fast or unsafely for the conditions.

The "witnesses" found by the Met weeks after the accident appear not to have been near me at the time and, based on their wildly-diverging and contradictory testimony recorded in handwriting by the Met, none of them saw the accident; and all but one of the witnesses actually say exactly that. The sole witness who says that he saw the accident identified me (in a written report submitted some two weeks after the event) as having gray hair (I don't), wearing glasses (I wasn't), and remembered that I was standing across the street while looking the wrong way in a moving crowd of hundreds of shoppers after it had begun to snow...in the dark. The evidence that many witnesses heard a "loud bang," that they reported that the bus was moving at an excessive speed, and that police photos show that the nearside bus headlight was knocked out (but I suffered no impact injuries below my three top rights-side ribs) is ignored by the Met. The Met is so satisfied with the sole witness's testimony (detailed above), that it has not ever bothered to interview me. *Not even once.*

On 30 March 2011, I sent a letter to Mayor Boris Johnson highlighting some of the publicly-available facts about pedestrian safety and buses on Oxford Street and the peculiarities of the police investigation in my case. The Mayor has never responded to (or even acknowledged receipt of) my letter. I suppose Boris Johnson has bigger things on his mind than the more-than-two-hundred human beings who have

been killed or seriously-injured by buses on Oxford Street within the past ten years. I guess he doesn't consider their votes very important.

I have no doubt that the casualty figures are something that the Mayor and Oxford Street merchants are reluctant to advertise. In stark contrast to the Mayor however, the areas merchants have come out publicly in favour of pedestrianising Oxford Street to make it safer for the vast majority of its visitors who see the area as an attractive shopping destination and not as a final one. Apparently, TfL does not even keep statistics on how many of its bus drivers have been prosecuted for killing or seriously-injuring pedestrians in London. During Mayor's Question Time (cf. Question No. 2167/2011) in July 2011, LA Cllr Victoria Borwick asked the Mayor to provide her with an annual breakdown for how many bus drivers have been prosecuted for KSI ("killed or seriously-injured") incidents over the last five years. The Mayor's written response is telling: "Drivers are employees of private bus companies and TfL does not hold comprehensive details of the outcome of such legal proceedings." Let me get this right: TfL — the public body controlled by the Mayor that is supposed to be in charge of London's buses—has no idea how many of its drivers under its contracts have been prosecuted for killing or seriously-injuring pedestrians? If that is indeed the case, then, as far as pedestrian and cyclist safety is concerned in London, at least we know "who's driving the bus" on this issue: and it's certainly not Boris Johnson.

In an effort to make the most of my recovery time and to reach some closure, I have attempted to publicise the carnage from bus-caused pedestrian and cyclist casualties on Oxford Street with little success. London newspapers (*The Evening Standard* is an exception) seem remarkably indifferent to the appalling frequency that human beings are injured by buses and other vehicles in London. Since 18 December 2009, there have been a number of accidents (including fatalities) from buses on Oxford Street and around London. The cases seem eerily familiar to mine: witnesses are called for, the bus driver is not arrested, and nothing more is heard about the incident. In the very rare cases where the bus driver is taken to court and prosecuted for dangerous driving, the bus driver is then cleared.

Recently, the case of bus driver Luigi Albertelli was heard in Crown Court. According to reports about the trial, in August 2010, Mr. Albertelli was driving a Route 141 double-decker bus when he hit father-of-four Ibrahim Tejan in Moorgate, central London. At the time of the accident, Mr. Ibrahim was on the pavement talking on his mobile phone. Mr. Albertelli admits that he was not looking out of the front window of his bus when it mounted the pavement and struck Mr. Ibrahim in the head. Mr. Ibrahim died at the Royal London Hospital sixteen days later. After a recent trial that lasted a week in autumn 2011, Mr. Albertelli was cleared of the charge of dangerous driving.

Just a week before Mr. Albertelli walked free, a man was struck in a pedestrian crossing on Theobald's Road and dragged under a bus. Again, no arrest of the bus driver was made, witnesses were called for, and the victim was left fighting for his life at the Royal London Hospital. I have since learned that the victim, a 67-year-old solicitor named Mr. Alec Melville who was loved and revered by his friends and family, died after a month's struggle.

When I was in my coma, two more victims of London bus-pedestrian accidents were in the ICU with me. I owe my life to Dr. Ian Sabin's trauma team at the Royal London Hospital, one of the best trauma hospitals in the world (and the recipient of a lot of these bus-pedestrian accidents). I suspect that Dr. Sabin's team of trauma specialists at the Royal London Hospital has more reliable statistics than even those horrifying numbers produced by TfL and reported by the London Assembly.

In closing, I should mention that the Met have continued to play (for what reason I cannot understand) a peculiarly obstructive role in my case. With the assistance of my MP (Glenda Jackson), I filed a complaint with the Independent Police Complaints Commission (IPCC) in early 2011. My IPCC complaint was officially accepted by the Met on 4 March 2011. On 15 March 2011, when *The Evening Standard* was doing some research for a story about my accident, the reporter was told by the Met that my IPCC complaint had been rejected, a statement which was subsequently reported when *The Evening Standard* article came out the next day. The Met's statement to the reporter was the first I had heard about the rejection of my IPCC complaint and came as a complete surprise given that the Met had just accepted the complaint a few days earlier (and besides, wouldn't the Met be obligated to inform the person filing the complaint before it informs *The Evening Standard*?) The Met's behaviour here raises my suspicions even more: since it had taken the police nearly eight months to come up with a handwritten "final report" about my accident, how could it have competently investigated my complaint *in less than two weeks*? On 17 March 2011, I received a letter dated 11 March 2011 from David Vidgeon, the Senior Traffic Criminal Justice Unit Manager of the Met informing Glenda Jackson and me that it had rejected my complaint. *But, as it turns out, the Met had not investigated my case at all*: the IPCC wrote to me in June 2011 stating— notwithstanding any statements the Met had already made or correspondence that I had received to the contrary— that I could not submit an appeal because the Met had yet to start the investigation. So why did the Met feel compelled to tell *The Evening Standard* reporter that it had rejected my complaint and to manufacture post-dated correspondence to indicate that it had investigated it in March 2011? It seems obvious to me that Mr. Vidgeon was under considerable pressure to rush out a rejection letter to justify the Met's comments to *The Evening Standard*. *Pressure from whom? And why?*

Unlike every other legal jurisdiction in the democratic world, in the United Kingdom, the pedestrian victim of a bus must prove that he or she was not responsible for the accident: if the victim's family (because the victim is typically dead or horrifically-injured and can't speak for himself) cannot prove the bus driver is at fault (and much of the victim's case is based on the police report), then the bus driver walks free. And they walk free most of the time: try Googling "bus driver convicted, London" and "bus driver cleared, London" to see what I mean. To paraphrase the words of Franz Kafka: if you find yourself in a struggle where it's 'you against the world,' bet on 'the world.'

The dead (both in my family and from Oxford Street) talk to us for a reason: they want us to learn from their painful experience, to keep us alive, and to make sure justice is served. The KSI's from Oxford Street and elsewhere in London want everyone to know that the Mayor's, TfL's and the Met Police's witting indifference about the bus companies' horrific toll on pedestrian and cyclists' lives is

unacceptable. We —individually and collectively—are better than our public officials reflect. I am hoping that this real story is enough to convince people in London (and elsewhere) that the number of pedestrian and cyclist fatalities from buses and other vehicles in London is horrific and that the people we entrust with responsibility for public safety should be doing something about it.

And before I go, you'll be glad to know that I fully understand the elusive (for us Americans, anyway) term "irony." The railway company (English, Welsh & Scottish) I helped to successfully defend as a witness in a multi-million pound lawsuit (brought against them by the administrators of Enron rejected by the Competition Tribunal on 18 December 2009) is owned by the same parent company (Arriva) whose bus nearly killed me on the same date. Since the parent company is the German national railway company Deutsche Bahn, perhaps, my initial post-traumatic conclusion that I had been injured by "a German bomb" is not that far off the mark. At least I received a thoughtful "get well soon" note in the hospital from English Welsh & Scottish. My family and I have heard nothing from Arriva, the bus driver, or TfL.

As usual, I had an early start this morning. I ran a 5k in the Hampstead Heath and then went for a swim in the 11 degree water in the Highgate Men's Pond with my fellow Highgate Lifebuoys (some of whom, like my friend and neighbour Al Alvarez, are over 80 years old). I got home in time to put the finishing touches on this bit of writing. I hear movement upstairs. Lesia, Peter and Daniel must be getting ready to come down for pancakes, a Sunday tradition. I gotta go. Everybody's waking up...