

Totally Hip

by Judith Zielinski Marshall

You are too old, too fat, too poor, and too crippled. No one will ever go out with you. Besides, your husband just died. Shame on you.”

Nothing like an old girlfriend to point me in the wrong direction. I hopped on the Internet anyway. Perhaps hop is too strong a word. I limped onto the Internet. The dotcoms were loaded with men seeking women. I met a few of them for coffee but no planets collided or stars exploded.

Then I found David and from his first words on the telephone, I just knew he was delicious. We spoke on the phone for a week and met for dinner in a restaurant parking lot. He slid into my car because I had two things to tell him. I told him that later that month I was scheduled for a serious biopsy. It could be cancer. He gazed at me quietly and said he would be there and what else? I told him the total hip replacement (THR) was scheduled soon. In the trunk I had a walker and a cane but that afternoon I held his hand and walked into the restaurant.

He simply said he would be there. And he was. Nothing fazed David. He liked me and I liked him. He loaded my walker into his car and for the next couple of months, we went to museums and zoos, wineries, movies, and shopping, sightseeing on the Maine and Rhode Island coasts. He was with me from 5 a.m. the day of the first surgery and brought me home and took care of me. The biopsies were negative.

Nothing really prepared me for the hip surgery. Not even the excellent classes the hospital offered or the Internet web sites. In on Monday, out on Thursday, maybe even home, no rehab—that is what they told me. The idea of a foreign body in my body was not uncomfortable, since I already had metal, mesh, and plastic. Why not titanium and ceramic? The best surgeon, the best hospital, the best anesthesiologist—what was there to fear? The worsening pain over seven years made the decision for me. Either buy a wheelchair or have the hip replaced. The surgery was booked nine months ahead. So I had time to lose over 100 pounds, join a gym, get a nutritionist, and join a weight loss support group. And chase men.

Except for David I was virtually alone but strangely calm as September 22 dawned. After surgery, medication dulled the initial pain, and that first evening I was surprised at how ravenously hungry I was. A superb supper was served by lovely people in long white-sleeved shirts, black vests, and bow ties. If it were not for the catheter and the IV running, I would have thought I was in a Las Vegas bistro. Then David appeared next to my bed wearing a black suit and a Roman collar. For a moment I thought I was dead. He called me Sister Mary Catherine and asked if I would like to make a

confession of my sins. Since he could not find a rosary, he used Mardi Gras beads. In retrospect I wonder how much I confessed in that Dilaudid dream. We still play Sister Mary Catherine and Father Dave and there usually is some penance involved. But that is another story.

Yes, they really do get the patients out of bed the second day. I told the physical therapists who looked about 12 years old that I really did not care too much about how soon I would be walking but more importantly when I could have sex. They blushed and giggled. I had to ask the surgeon, who raised his eyebrows and said “in about a month.” He was absolutely correct about that.

David arrived the second night as Uncle Moishe, a character he developed with a voice which took me back to my childhood in the old neighborhood. Uncle Moishe soothed me. Medical personnel hovered near the door listening intently as they heard a heavily accented man tell jokes and stories, wondrously peppered with Yiddish phrases. Uncle Moishe knew I loved herring in sour cream so he brought along an 8-foot stuffed fish-shaped pillow with brilliant speckles and red and black coloring. When I was sitting in a chair, I put Solomon (the fish had to have a name) with his head on the pillow and his huge tail partially covered by bedclothes, then I would wait for various personnel to come in and do a double-take or laugh, and it amused me through that difficult day. I had such great fun with that fish.

Hospital day three was a hundred years long. A petite female aide tried to prop me up so that I could sit and stand. The hip prosthetic weighed more than she did, and as both of us were about to topple to the floor, I saw a bulbous red nose under an enormous multi-colored wig and a clown with balloons walked into the room. David entertained me and the astonished aide while the hospital room doorway filled with delighted nurses. He knew I had a fear of clowns (*fearus clownus* in medical terms). I find them sinister but not that clown, not that night.

Day four brought the ambulance drivers and they strapped me into the stretcher and Solomon the Fish lay on top of me. We paraded out of the hospital and the two wisecracking attendants enjoyed every minute. “Waddya gawkin’ at, never seen a fish before?” “Look what we caught in the Charles River!” “This mermaid is going to rehab!”

The rehab was paradise compared to the hospital. A huge private room with a shower big enough to accommodate a horse in a hoist and a grand window with a view of autumn foliage. Whatever I asked for, David brought to me, including gallons of coffee. The worst problems for me were filth

and constipation. The nursing staff said they were too busy to give me a bath. David, always unfailingly polite, ordered them to find a chair with wheels and he and an aide rolled me into the shower room. I clung to the safety rails while David hosed me down like a pig at a county fair. Then he washed my hair and rinsed it. He patted me dry, blow dried my hair, and powered my bottom. If that is not love, what is?

When I went for physical therapy, he became a Marine drill instructor, a coach, a personal trainer, and a general pain in the neck. He forced me to go farther and faster. He walked backwards while I walked towards him with the walker, cursing him and whining. We went to occupational therapy together and he did the exercises with me, shouting encouragement for me to walk stairs. I had enough gas to fly to Chicago but he never complained.

On discharge, he loaded my belongings into the car and took me home. He fed the cat, went food shopping, made supper, and then sat by the bed until I fell asleep and he went home. The next day I went back to work in my home office. We visited several zoos in the autumn, went mall-walking and sightseeing in museums all winter. He booked New Year's weekend in a Cape Cod hotel with a heated pool and hot tub. The surgeon said to walk in the pool and so I did, with David wearing goggles, swimming around like Jaws and yelling, "One, two, three, four, march." By month six I was dancing at Bavarian night, stepping tentatively and clinging to David. A month after that I was wearing my new green ballerina flats, doing the twist, the foxtrot, and jitterbugging. I sold my walker and threw out the cane.

Each major surgery is a journey for the patient. In the age 65-70 range, hip replacement surgeries are increasing, and approximately 120,000 are performed in the United States annually at a cost of \$43,000 to \$63,000, depending upon which Internet site one reads. According to an article in the 2000 *Journal of Radiology*, patients with THR report satisfaction rates of over 90 percent while knee replacement surgery satisfaction runs about 70 percent.

If a person is contemplating THR, some hints and caveats.

1. If the hospital holds a class for patients, take it.
2. Do not make yourself crazy reading Internet stories and blogs. The same people writing them are the ones who terrorized you decades ago with horror stories of childbirth or gallbladder operations.
3. Choose your spouse and your children wisely (well, too late for that) because you will need them. Not everyone can find a David. Cultivate many friends, especially younger people.
4. Try to have an efficacious bowel regimen early on in your postoperative phase. One Colace a day is not going to suffice. Do not wait until the situation becomes a matter of explode or die. Be vocal, be assertive and totally without shame as you perch upon your throne euphemistically called the bedside commode. Discontinue pain medication as soon as possible. And try to familiarize yourself with the proper medical terminology used on the road to recovery. "Did we poop and pee today?" chirped the morning aide every single morning.
5. Appreciate that any form of bathing which does not include a shower in the postoperative period is not enough. Line up friends and relatives to help or hire strangers in advance. Maintain your dignity even though stark naked and soaking wet.
6. Send thank-you notes and letters to the people who helped you through this process, especially the physical therapy and food service folks.

David often said he was sent to me. I tell him it is because I believe in "The Secret" or the law of attraction. The surgery was a miracle for me after years of dreaming of walking and dancing. David was a miracle for me.

Judith Zielinski Marshall, Wakefield, MA, has been in the medical transcription field for over 30 years as an educator, business owner, and medical transcriptionist. She is the author of two books of humor and satire, *Medicate Me* (1987) and *Medicate Me Again* (1994), and scores of essays and articles published in *Perspectives* magazine over more than 20 years.

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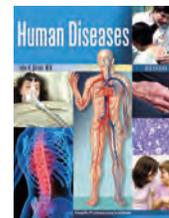
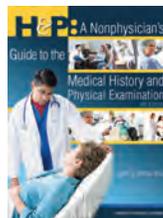
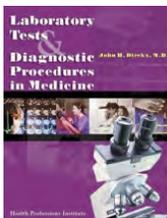
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