

Nothing happened but did it hurt.

This write up on my problem and trip to the hospital is to possibly help other people that may have to have any of these tests. It is also based on the advise I gave my mother. She wanted to tell people about her life but felt they would not be interested. I told her to write it up and then people could choose to read it or not. She ended up writing a book (it is in the Minnesota Historical Society) named SO BE IT. Here goes one chapter for my own book.

Wednesday, September 24, 2008

The Sometimes Arizona Hiking group (Phil/Peggy McLaughlin, Pat/Karon Foss and Tom/Mary Anne Arsenault) had decided to go on a fall pontoon ride before the snow fell. Pat and Karon came to our house about noon September 24, 2008 and I drove us to Phil and Peggy's house on the south side of Lake Minnetonka. We arrived about 1:00, talked and chatted for a while and then started to get ready for the ride. I carried stuff down to the pontoon while the rest used the bathroom. (I should have gone.) We must have left the dock about 1:30. Here is a picture of the crew on the pontoon taken about 2:00 pm.



Lake Minnetonka is large and we took a long ride around many of the interconnected parts. After a while on the pontoon, I felt I had to go but I thought I could hold it. Even when we could have stopped at Lord Fletchers, I did not say anything or think I should stop. Maybe around 3:15 I started to wish the ride was over. I was either sitting with my legs crossed or standing to move around. Finally I mentioned that a potty break would be a good thing. Phil said I could try the back of the pontoon but I was worried that I would fall off. Then they would be fishing me out of the lake (but I could have relieved myself). We must have gotten back to the dock about 4:00. I left my stuff in the pontoon and hurried up the stairs, two at a time, to get to the bathroom. I unlocked the house and went into the bathroom and closed the door.

As soon as I started to relieve myself I was hit with a massive headache. This is the worst headache I have ever experienced and was the most pain I have ever endured. I was able to finish ok, but I did not even zip up my zipper. Once I bent over the sink in the bathroom and could not believe the pain. I left the bathroom and went to the kitchen, and tried to get someone to get me some Advil. Karon called for Mary Anne to come up from the pontoon where she had been helping clean up and carry stuff to the house. When she got to the kitchen I was bent over the counter with this massive headache. She gave me some Advil and I went into the living room. I sat down on the couch. Next I moved to a chair. After about 10 minutes (maybe less) the pain started to subside. At that time I recognized that I also had a pain in the center of my chest and some in my

back. Even after subsiding some, this pain was the worst I have ever had. Someone said that I was very white (haven't been working on my suntan.) As I sat there hoping it would go away I heard Phil say he was calling 911. Good choice Phil – thanks.

Soon (I think) everyone started to arrive. The police first. A police officer started to take my blood pressure but I don't know what the results were. The firemen were next but I don't know what they did, if anything, because the paramedics were now on the scene. The paramedic took my vitals. My blood pressure was 191 over 100. (It must have been higher before).

(Note: When I had my annual stress test for my aviation medical, I passed the test. I completed the four step Bruce protocol in 11 minutes ending at my maximum heart rate of 152, doing 12.8 Mets. However my blood pressure was at 261 and the chart was marked hypertensive. Attending physician said he would have had to stop the test if I had not completed. I did not get to 12 minutes and a heart rate of 160 that was my goal.)

They finally packed me up on a gurney and took me to the ambulance. On the way out I remember saying good bye to Phil but probably did not thank him for the pontoon ride. This must have been about 5:15 pm.

I remember on the first half of the ambulance ride that I did not feel very good. The paramedic kept me talking and said that my vitals were getting better. At this time my blood pressure was 156 over ?. I still had a very bad headache and I thought I was somewhat confused. After about one half hour, when we were going north on Highway 169 I began to feel somewhat better.



I finally felt good enough to take some pictures. These were taken with my cell phone as I had left my camera on the pontoon. This is the paramedic that rode with me and was taking my vitals. She did a great job.



This next one is one I took out the back of the ambulance on 169 and one of me. I don't look very good but I am not sure I would look good in any picture at this angle. I also tried to take a picture of Mary Anne riding in

the front but it was really bad.

Next the ambulance got lost. Then both the driver and the paramedic were looking at map books. (Maybe I should donate a GPS to the ambulance service.) Mary Anne was very concerned when the driver got lost and then had to back track to get to the hospital.

We arrived at the emergency room of Mercy hospital about 6:20. I remember the ambulance backing up in the door. They wheeled me off the ambulance and into the emergency room. Here is a picture from the gurney. Cathy was there when we arrived. Sue arrived about 6:30.



Meanwhile Phil cooked hamburgers for the remaining sometimes hikers. Phil now owes us a hamburger. Pat and Karon drove Mary Anne's car back to our house and left it in the driveway.

Spent a long time in the emergency room. First they hooked me up with an EKG and a heart monitor. The male nurse in the ER was great. My blood pressure was??????. They asked me questions, like what is the year, that I had trouble coming up with the answer. Sue said that I seemed confused. After much discussion Dr. Cramer, the cardiologist on call came in and scheduled a CT scan of head and Aorta.

(Note: Computed tomography, commonly known as a [CT scan](#), combines multiple X-ray images with the aid of a computer to produce cross-sectional views of the body. Cardiac CT is a heart-imaging test that uses CT technology with or without intravenous (IV) contrast (dye) to visualize the heart anatomy, coronary circulation, and great vessels (which includes the aorta, pulmonary veins, and arteries).

The ER staff worked at regulating my blood pressure. It would go up whenever I moved around. The major headache went away when my blood pressure was down.



Cathy got to go home about 10:00 pm.

Here I am about to be transported (pushed down the hall) to have the CT scan. Time was about 10:30 pm. The orderly pushing did not want to be in the picture. This test was negative for any problems. (Why do they use such a negative term (negative) for positive results?)

The next test was a MRI with dye called a MRA.

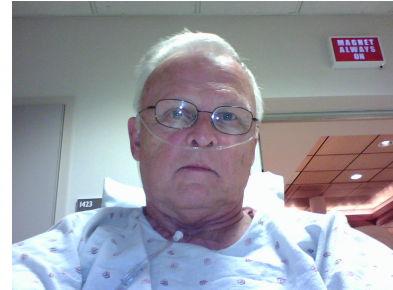
(Note: [Magnetic resonance imaging \(MRI\)](#) is a test that uses a magnetic field and pulses of radio wave energy to take pictures of the head. In many cases MRI gives information that cannot be seen on an [X-ray](#), [ultrasound](#), or [computed tomography \(CT\) scan](#).

For an MRI test, you lie with your head inside a special machine (scanner) that has a strong magnet. The MRI can show tissue damage or disease, such as infection, inflammation, or a tumor. Information from an MRI can be saved and stored on a computer for more study. Photographs or films of certain views can also be made.

In some cases, a dye ([contrast material](#)) may be used during the MRI to show pictures of structures more clearly. The dye may help show blood flow, look for some types of tumors, and show areas of inflammation.)

This test was also negative. Good news.

Here is a picture of me after these tests are completed taken about 11:30pm. I look better but still have those nose cones in.



I also had a Chest X-ray. The hospitals are looking for TB. They came right to the bed and took the picture with a portable x-ray machine. Some of the blood tests showed that the heart enzymes were elevated. This means that my heart was under stress before but the enzymes never got high enough to indicate a heart attack .

After the Chest X-ray, I was admitted to the hospital and taken to my room on the 4th floor Cardiac unit. (Nice place, Mercy is one of the top 100 heart hospitals in the country.) This was about 1:00 am. Sue didn't leave until about 1:15. I was allowed to go to sleep about 1:30. The nurse came in to draw blood during the night. Checking my heart enzymes that were somewhat elevated.

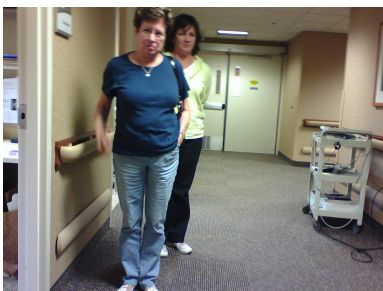
Mary Anne slept in this extremely comfortable (**not**) chair all night. What a trooper. Here is a picture of her about 7:30 am Thursday.



Thursday Sept, 25, 2008

I woke up late (at least for me) Thursday morning. Going to sleep at 1:00 does that. Maybe it was before 7:00 am. I do not remember much about that morning. I had breakfast with decaf coffee and lunch. We waited to talk to the Doctors. The internist from the ER came in. He said ??????? The neurologist came also. I had a dull headache all day. Sue came back in the morning. Jeff came in at noon and Cathy came in after work. Mary Anne called the entire family. Phil called to see how I was.

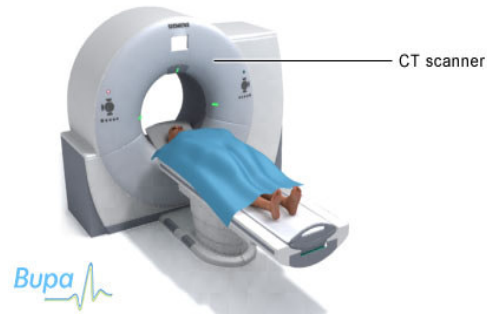
Tests Thursday afternoon.



Here I am being taken to the procedure room with Mary Anne and Sue saying good bye. This is close to 2:00 pm. I am about to have a CT scan with dye of my brain.

CT scan with dye.

(Note: A CT scan, sometimes also called a CAT scan, takes pictures of the body and uses a computer to put them together. CT stands for computerized tomography. A CT scanner uses X-rays and is a painless procedure. A series of X-rays are taken of your body at slightly different angles, to produce very detailed pictures of the inside of your body. The pictures produced by CT scans are called tomograms and they provide doctors with information to help them reach a diagnosis about a variety of conditions. The CT scanner is a large machine. The pictures are taken while you lie on a couch, which moves backwards and forwards through the hole of the machine that is shaped rather like a giant doughnut.)



This test went well. After the technician moved me into the scanner she injected dye into me. That made me quite warm all over. (No I did not pee because of it) After the test as I was moving from the machine to the gurney, I had a monster cramp in my left calf. Even standing on my leg did not remove it. The technician was concerned and wanted to get rid of me. The cramps finally subsided and I was able to lie down. This was the second worst cramp I have ever had.

The results of this test were also negative meaning no problems found (that is a positive result?) The results of my having the cramp were that I did not take any pictures.

Echocardiogram test

This was a relatively simple and quick test. The procedure was done by the consultant pictured on the right about 2:00 pm.

(Note: An electrocardiogram — abbreviated as EKG or ECG — is a test that measures the electrical activity of the heartbeat. With each beat, an electrical impulse (or “wave”) travels through the heart. This wave causes the muscle to squeeze and pump blood from the heart. A normal heartbeat on ECG will show the timing of the top and lower chambers. The right and left atria or upper chambers make the first wave called a “P wave” — following a flat line when the electrical impulse goes to the bottom chambers. The right and left bottom chambers or ventricles make the next wave called a “QRS complex.” The final wave or “T wave” represents electrical recovery or return to a resting state for the ventricles.



Why is it done?

An ECG gives two major kinds of information. First, by measuring time intervals on the ECG, a doctor can determine how long the electrical wave takes to pass through the heart. Finding out how long a wave takes to travel from one part of the heart to the next shows if the electrical activity is normal or slow, fast or irregular. Second, by measuring the amount of electrical activity passing through the heart muscle, a cardiologist may be able to find out if parts of the heart are too large or are overworked.)

No problems found. Lucky guy.



This is after the EKG and after Mary Anne and Sue talked to the Neurologist. Mary Anne is carrying her lunch which she hasn't gotten to eat yet. Time is about 2:30 pm.

Lumbar puncture

The last test on Thursday was a Lumbar Puncture. Now I did not want to have this done. I was convinced that this test was like having bone marrow drawn which is very painful. The doctors, nurses and my family convinced me (the chicken) that it would not hurt (much). They wanted to check the spinal fluid to look for blood from a possible small bleed in the brain that they could not see in the other tests. The picture on the right is the nurse that wheeled me down to the procedure room.



Here is some information below.

(Note: A lumbar puncture (also known as a spinal tap) is a procedure to test a sample of fluid from the spinal cord. This fluid is called cerebrospinal fluid (CSF) and it surrounds your brain and spinal cord. It helps to support and protect the brain and spinal cord, and contains proteins and sugars. Lumbar puncture is performed by inserting a hollow needle into the lower part of the spinal canal to draw out a sample of the cerebrospinal fluid.

Why it is necessary

Spinal fluid can also be used to investigate several conditions, including bleeding around the brain, tumors of the brain or spinal cord and inflammation of the brain. Sometimes CSF can show up conditions affecting the immune system, such as multiple sclerosis (MS).

How it is performed

The procedure involves putting a needle into your spine to draw out some of the surrounding fluid. So that the doctor can get access to your back, you will probably be asked to lie on one side with your legs pulled up and your chin tucked down, so that your spine is curved. This separates the vertebrae (bones of the spine) allowing the needle to be inserted more easily. The procedure can also be performed when you are sitting up but bent over. The area of skin at the base of the spine is painted with an antiseptic solution and local anesthetic is injected to numb the area.

The doctor then pushes in a hollow needle between two of the vertebrae and into the space around the spinal cord. The anesthetic should stop you feeling pain, but you may feel pressure as the needle is pushed in. Some people feel a sharp sensation in their back or leg.

It then takes a few seconds for enough CSF fluid to drip back into a sterile pot underneath the needle. If the doctor needs to measure the pressure of the CSF, they attach a special tube to the needle to check the pressure of the fluid coming out. The needle is in place for around 1-2 minutes and after it's removed, a plaster is put over the site.

Side effects

Some people develop a headache after a lumbar puncture, although this usually goes after a few hours. You will probably be advised to lie down for a while, as this can help to prevent it. Other problems, such as bleeding around the needle site, damage to the spinal cord or the brain as a result, are very rare.)

My description of this procedure which I told everyone who wanted to hear is this:

The doctor takes a long needle and shoves it up your spine (I used another orifice name in the hospital) to find a small hole in your brain.

The procedure was not too bad. Some pain as the small needle was inserted but not bad. They had me on an incline board on my stomach so the spinal fluid would drain out. I felt that I was going to slip off the table onto the floor but they said that there was a platform below my feet to keep me on the table.

A visual inspection of the spinal fluid found no blood. (Good news) The fluid was to be tested further to look for small particles of blood but the doctor said it looked good.



Picture of the Doctor and the technician assisting the doctor. Note the lead coats

After the procedure I was wheeled back to my room on a gurney. I was back in my room about 4:00 pm. Had to stay on my back for two hours to keep the wound closed and so it would seal. No pillows.

Dr Kramer came in soon after that.

End of tests for today.

All tests done so far were negative. That means that I did not have a stroke or heart attack. So far so good but **WHAT CAUSED THE HEADACHE?**

Cathy gave Mary Anne a ride home about 8:00 pm. I watched some TV and then slept from 10:00 to about 4:00 am. The bed was very comfortable and has an auto adjust feature to change the pressure point to prevent bed sores.

Friday, September 26, 2008

I remember more about Friday than Thursday. After going to sleep about 9:00 pm, I woke up about 4:00 am. I watched the news on TV for a while and still had this dull headache. I finally talked the night nurse into giving me some regular coffee. I had two big cups and the headache went away. Caffeine withdrawal is what caused the small headache. Like Pat says, coffee fixes everything. I wandered around the fourth floor and found a guest computer (surprise). I sent out some email with my gmail account because I could not remember my password to my regular account.

Sent following email.

Pat/Phil

Friday morning about 7:00 am at Unity Hospital. Found a guest computer. They still do not know what the cause of my headaches is but have ruled out most of the serious stuff like heart attack and stroke. I have none of those. So many tests. Last one a lumbar puncture to take spinal fluid. No blood so not even a small break in my head. I hope to get out of here today. We were supposed to close the cabin this weekend. Mary Anne and Sue do not want me to do the docks.

I continued to have a small headache all day yesterday. Finally talked the night nurse into giving me some regular coffee and now my headaches seem to be gone. I can now feel my sore tooth.

Phil you still owe me a hamburger.

Bill - forward this to John as I do not have his new email address in gmail.

Hanging out in the hospital conference room.

Tom Arsenault

Today, I plan to get out of the hospital after the final test. Mary Anne came in about 8:00 am. She got up early to get here at that time. She looked great and I was very happy to see her. She also brought my camera so I now can take pictures with it rather than my cell phone. I had breakfast with decaf coffee. In general I liked all the hospital meals. Sue came in after that.

The cardiologists, Dr. Cramer, came in about 8:30 and said all the tests were negative. He was going to send me home but Sue and Mary Anne were concerned about what caused the headache. They mentioned that I was a pilot. The Doctor then decided to schedule an angiogram for as soon as possible to make 99.9% sure nothing was wrong with my heart. This was because I am a pilot.

(Note Angiogram

An angiogram is an [X-ray](#) test that uses a special dye and camera ([fluoroscopy](#)) to take pictures of the blood flow in an artery (such as the [aorta](#)) or a vein (such as the vena cava). An angiogram can be used to look at the arteries or veins in the arms, legs, chest, or belly.

Common angiograms can look at the arteries near the heart (coronary angiogram), lungs (pulmonary angiogram), brain (cerebral angiogram), head and neck (carotid angiogram), legs or arms (peripheral), and the aorta (aortogram).

During an angiogram, a thin tube called a catheter is placed into the [femoral blood vessel](#) (femoral artery or vein) in the groin or just above the elbow (brachial artery). The catheter is guided to the area to be studied. Then an iodine dye ([contrast material](#)) is injected into the vessel to make the area show clearly on the X-ray pictures. This method is known as conventional or catheter angiogram. The angiogram pictures can be made into regular X-ray films or stored as digital pictures in a computer.)

After hanging around in the hospital bed, I was told I had to be prepped for the procedure. This involves having my groin shaved. Here I am waiting for this embarrassing procedure.



Here is the nurse doing her work. She was good and did not embarrass me.



That can not be me. It must be somebody else going thru this.



I am finally ready to be wheeled down to the operating room. Mary Anne and Sue saying goodbye and the orderly taking me away. Everybody is smiling because I was shy of being shaved.



That is a view (a bit small), behind the orderly above, of my room in the cardiac unit. I was wheeled downstairs to the 3rd floor and put in a holding pattern for about ½ hour.

Then the operating room nurse, named Dan, came and brought me into the operating room. Both pictures here.



Here are more pictures I took of the operating room staff.



They are about ready for me. Here I had Dan take a picture of me on the operating table.

And below are pictures of Dr. Chambers (extremely good) and the clinical technician that runs the cameras (I think). Everybody ready?



They gave some kind of drug that did not put me asleep but made me relax. I remember when having my stent put in in 2003 that I did not remember anything of the procedure. This time I vaguely remember that I thought I heard or felt Dr. Chamber pushing the catheter up my artery. The sensation was one of sliding the tube in and out and it scraping or rubbing. I did not have any pain or discomfort. Just after the procedure was over, Dr. Chambers said that my heart looked great, the stent was clear after 5 years and that the partial blockage from 2003 had improved from 50% to now only 45 %. (Cholesterol medication on the job).

Here is the operating room staff cleaning up. This is about 12:30 pm.



Dan wheeled me back to my room and I had to stay flat for 2 hours. Here I am back in my room with the head nurse from the Cardiac unit checking up on me.



Here is a xray picture of my heart. I think the arrow points to my stent which looks good.



I had to stay flat for 2 hours. After a while I had to go to the bathroom but they had told me I would have to use a bedpan. (How are you going to lay flat and sit on a bedpan?) Wasn't a pan after all but a container like a quart plastic milk jug that was much like the ones I have in my plane for long trips. It worked great. I put out 700 ml while the norm is only 300. (Hmm!!! Not sure what that means.)

This is the internist, Ryan Else that was on duty. (I did not remember his name but got it off of his coat.)





After the 2 hours I am starting to get ready to leave. Here is Sue, the day nurse that got me ready to check out. We left around 3:00 pm and were home before 4:00.

Results

I did not have stroke. I have no heart problems and have even improved from 2003. I seem to have a blood pressure problem (hypertensive).

Cause of massive headache – UNKNOWN – thought to be blood pressure spike.

Conclusions

The new heart unit at Mercy is great. This is now one of the top 100 Cardiac units in the country.

The hospital staff was great. Everyone from the personnel in ER to everyone that handled discharge was exceptional.

Sue also thought that this was not usual for hospitals.

I can not imagine what this cost.

I was told that I was not allowed to drive or lift more than 5 lbs for 24 hr.

Also the cardiologist (maybe the neurologist) said that I should not to take docks out by myself .

To control my blood pressure they:

Upped my Metoprolol from 25 once a day to 50 extended release each day.

Found that I had been on only 25 a day and not extended release.

Start taking 81 mg aspirin again each day.

Stopped taking Caltrate as Cathy said I did not need it.

Found out I have a big bladder.

My advice

Don't let your bladder get too full – causes massive headaches