

Seeing the miraculous, first hand.



No longer paralyzed, Jonathan Jogerst is back on course, worried about only one handicap – golf!

"It was amazing. I could not believe it. He came to my office and I honestly...." The veteran surgeon stopped speaking, at a loss for words. He shook his head and said, finally, "I could not believe my eyes. Never in my wildest dreams would I have anticipated what I was seeing."

For someone who has lived with pain, or with a debilitating medical condition, the word "miracle" may not seem too strong a term when medical science is able to provide relief.

"But this was not that," said Gianni Vishteh, MD, a neurosurgeon at John C. Lincoln North Mountain Hospital's Level I Trauma Center. "This was not the case of someone who has an elective neck surgery and feels like the results are miraculous. This was the real deal – a true miracle in every sense of the word."

The patient Dr. Vishteh spoke of was Jonathan Jogerst, a good-looking young man who had graduated from Bradshaw Mountain High School in Prescott Valley and gone on to study at local Yavapai College. Already a junior pro golfer, Jonathan hoped his athletic abilities and academic concentration would earn him a scholarship to a larger college or university. His future looked bright.

Then, on a clear afternoon in June 2011, everything changed. Jonathan and a friend were on their way home from a late breakfast at a local restaurant. His friend was at the wheel of a mid-sized SUV, on Glassford Hill Road in Prescott Valley.

"There was nothing unusual," Jogerst said, thinking back. "It was just a normal road, a very familiar road that we drove on every day."

For some reason, Jonathan's friend momentarily lost concentration and the SUV went off the road. The boy over-corrected in trying to steer back onto the roadway and the vehicle flipped – ultimately rolling over 3 times, killing the driver in the process. Jonathan, not wearing a seat belt, was ejected from the open passenger side window. The heavy vehicle came to a rest directly on top of his bloodied and broken body.

Passing motorists saw the wreck and immediately called for help. Police and fire personnel knew, as they pulled him from the mangled mass of metal, that the boy's survival was far from certain. He was quickly transferred to a helicopter that whisked him away to the Level I Trauma Center at John C. Lincoln North Mountain Hospital in Phoenix, some 70 miles away.

Jonathan remembers nothing about the crash itself. "They say I was conscious at the crash site and asking them if I was going to die, but I don't remember it. At the hospital, I was able to give them my mom's phone number, apparently. So that's how my parents were notified."

When he arrived at North Mountain Hospital, the trauma team concentrated on stopping his bleeding and getting him into a stable enough condition for the ensuing workup. That's when Dr. Vishteh was called in.

"When someone comes into the trauma room," Dr. Vishteh said, "we check their vital signs, send labs and they're given fluids, blood if needed – and as soon as possible, they are taken for the routine set of scans that trauma patients get. If it's an automobile accident, they get a spine CT, usually a chest and pelvis scan. Those were the tests that Jonathan had."

The young man was alive and responsive, but he could not move.

The Real Deal

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"What the trauma team saw was that he was a quadriplegic," Dr. Vishteh relates. "He had no function in his arms or legs and, taken in conjunction with what his MRI showed, which was a fracture dislocation, compression and bleeding inside the spinal cord, this would unfortunately mean quadriplegia for life. End of story. It's extremely rare for someone who comes in quadriplegic to ever again move a limb, much less walk again."

At that point, though, even beyond the issue of quadriplegia, Jonathan's very survival was in question. His injuries were extensive and serious. He was suffering from neurogenic shock, in which the damage to the spinal cord is so severe that blood pressure cannot be maintained. His lungs had begun to fill with fluids as well.

Dr. Vishteh's voice grew softer as he recalled how he broke the news of Jonathan's condition to the boy's father, David. As the surgeon arrived in the room Jon's father was at the head of the bed with him, gently stroking his son's hair. The look on his face was one of anguish.

"Jon and his father were both just very nice, very lovely people. It was just very heartbreaking. It is gut wrenching, but the buck stops with the neurosurgeon in these cases," Dr. Vishteh said.

"I have to deliver the heartbreaking news to the patient and family. The look on Jon's father's face was one that I have seen before . . . many times in tragic cases.

"Forgive the analogy, but it's referred to as 'delusions of reprieve,' when referring to a death row inmate who's looking for a last-second stay of execution. Jon's dad was just hoping against hope that someone is going to come in and tell them that everything's going to be okay, that his son's condition is just temporary."

Dr. Vishteh examined Jonathan and found that the boy had no serviceable function in his arms or legs. He was, at that point, what is technically called a C5 complete quadriplegic. What little evidence of function he had would not be enough even to allow him to control a motorized wheelchair.

The news rocked father and son both. David asked the doctor whether the situation was reversible, was there hope that his son would walk again. The answer was devastating. Dr. Vishteh had to tell him that in the vast majority of patients function doesn't come back, unfortunately, but that miracles do sometimes occur..

Dr. Vishteh recalls the reaction. "Both father and son were crying and the father said to me, 'I just want him to live. If this is what was intended for him, we'll overcome. I just want you to keep him alive for me and this is what we'll deal with.' There was no anger or hostility. It was just a very touching moment."

The doctor recalls that he, the trauma nurse and trauma surgeon Peter Ferrara, MD, stepped out into the hall to give the father and son privacy. "Out of sight of the patient, we all shed a few tears together because it was just a very sad situation. All of us are parents and were so touched by Jon's father's courage.

Dr. Vishteh had done close to a thousand complex spine surgeries like the one Jonathan needed. The team went into action quickly.

"We went in and as quickly as possible got the pressure off the spinal cord, reduced the dislocation, fixated it and fused it. It required a two-stage front and back approach.

"Immediately after surgery, I noticed that he regained some biceps function. Although it was a small gain, it's a huge gain for a quadriplegic because the ability to flex the forearm toward the body means they can use a motorized wheelchair with a specialized joystick."

At the time, that was the best that anyone thought could be expected for Jonathan's life. "He could flex the biceps muscle but that was it. Nothing else," Dr. Vishteh said.

But Jonathan wasn't out of the woods yet. After the surgery, he went into lung failure and had to be intubated. For a period of time, the boy hovered close to death because of his failing lungs. He required a tracheotomy and a feeding tube, and there were a number of very critical days in the ICU during which his father never left Jon's bedside.

Through the darkest days and hours, his medical team pushed on, believing he would make it. And throughout all

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of it, David Jogerst never left his son's side.

"For three weeks, my dad was there every moment. He slept in a chair next to my bed the whole time," Jonathan remembers.

It was touch-and-go but, ultimately, the lung situation resolved. Jonathan was able to go to rehab, though he did so as a quadriplegic.

Dr. Vishteh pointed out just how critical timing of surgery was in Jonathan's situation. "There are different sub-types of spinal cord injuries. In some cases, speed is of the essence. In others, you have to wait for cord swelling to subside. I'm convinced that because of the very fast and expeditious approach to take all the pressure off the spinal cord, it gave the spinal cord a chance to heal. That's a rare thing."

Nearly always, when the spinal cord is damaged as badly as Jonathan's was, it simply does not heal. In this case, help got to Jonathan right away, he was at the trauma center very soon after the accident and the trauma team did exactly the right things with practiced speed, skill and efficiency. That made all the difference.

When Jonathan was discharged from the hospital on July 19, 2011, he still had no movement in his lower body and hands. He continued to heal, however, and as he did – miraculously – he began to regain movement throughout his body. It was no easy process. He had to relearn everything – to roll over, sit up, stand, speak, eat and control his bodily functions.

Eventually, though, he stunned the entire hospital staff in December when he was able, on his own, to walk into the ICU at John C. Lincoln to deliver a Christmas card to the staff there.

"Dr. Vishteh's tearful greeting when he first saw me walk let me know how much he cares," Jonathan said. "I can't imagine making the recovery I did without a staff who really cared about me."

For Dr. Vishteh, his "real deal" miracle is one he recalls with a real sense of satisfaction. "Dealing with this kind of trauma makes what I do for a living worthwhile. This is the first of my patients that has had this kind of miraculous outcome, to be able to so fully recover neurologically. After all, Jonathan's first words to me were, 'Doc, I went jogging today.'"

Today, Jonathan is nearly fully recovered and is back on the golf course working on his game in the hopes of regaining the skills he once had. Once again, the future looks bright.

"We have experienced a true miracle and the doctors' great work made it possible," added David Jogerst. "We are very grateful for the outstanding medical professionals who helped care for Jonathan at John C. Lincoln."

To find out more about the John C. Lincoln Health Network, visit www.jcl.com.