the MESSY MIDDLE

WHAT NO ONE TELLS YOU ABOUT HEALING AFTER SERIOUS INJURY

A MEMOIR

ELAINE LOMBARDI

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The conversations presented in this book are reconstructed to the best of the author's recollection. They are not intended to be verbatim transcripts.

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To my husband Michael, who lovingly wheeled me through the hardest days and held me together when I felt broken. This book is dedicated to you and everyone still finding their way through their own messy middle.

Healing lives in the messy middle
not in the dramatic beginning,
and not yet in the triumphant end.

— Elaine Lombardi

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Preface

I almost did not write this book. Not because the story is not worth telling, but because I was not sure I had the distance to tell it well. Then I realized that distance is exactly what this book should not have.

So here it is, written close. Written from inside the thing itself, on the days when I did not know what came next, and on the nights when I did not want to find out. There are things in these pages I did not know how to say out loud for a long time, and things I am still figuring out how to carry. This is not a polished account from someone standing on the other side of hard. It is the account of a woman who is still in it, still learning to walk again, still surprised by what this experience keeps asking of her.

If you are somewhere in your own in-between place right now, I am writing this for you. Not because I have answers. Because I know what it feels like to need company in the dark, and I did not want you to be alone in it.

Acknowledgments

This book exists because so many people walked with me through the messy middle.

First and always, to my husband Mike, for carrying us both when I could not carry myself. For learning to give IV antibiotics with steady hands, for cooking meals, for sleeping in a separate room for months without complaint, and for loving me through the hardest version of myself I have ever been. You are the reason I could keep going. I see you. I love you. And I am endlessly grateful to be doing life with you.

To my vascular and orthopedic surgeons and the entire medical team who saved my leg that night. Thank you. I will never forget what you did. Even when we didn't always see eye to eye later in this journey, I remain deeply grateful for your skills and for fighting for me in the emergency room.

To the nurses and nurse's aides who cared for me during my hospital stays, your patience, your kindness, and your willingness to spend long minutes carefully combing out my hair meant more than you know. Especially Veronica, who talked Harry Potter with me, figured out I was a Ravenclaw, and solved the hair tie problem with nothing but a latex glove. You made me feel like a person when I most needed to feel like one. And George, your voice and kindness mattered.

To my children and their spouses, for showing up in countless big and small ways. For checking in and holding space for me, even when I didn't know how to receive it.

To my son Andrew, who started the family group text that kept us all connected across the miles and across an ocean. That thread was a lifeline I did not know I needed until it was there. And to his wife Dana, who was the one most hands-on through all of it. Your generosity and care meant more than I can say here.

To my son Joe, his wife Ann, and their daughter Avery for making the trip here for a special visit, and for the promise that keeps me moving forward: the Wizard

of Oz at the Las Vegas Sphere, as soon as I am ready. I am working on it, son.

To my daughter Kristina, her husband John, and their family, who always answered my calls no matter what time. Your encouragement on the phone kept me going, and that consistency meant so much to me.

To my son Daniel, his wife Jihee, and their son Ethan, whose love crossed the ocean even when the miles made it impossible to be here in person.

To Kris, a.k.a. Mimi, whose text messages arrived like steady heartbeats throughout this journey. Your encouragement to never give up reached me on the days I needed it most.

To my grandchildren. Your drawings, your prayers, your sweet voices on the phone, and your patience with a Grandma who couldn't play the way she used to. You all kept my heart soft on the hardest days. Joaquin, your music filled the room when nothing else could. Nora and Daphne, your counting to one hundred days reminded me that love pays attention in ways that humbled me. Ethan, Lacey, and James, you kept me entertained on FaceTime when I needed the laughs the most. And Amanda, your cheering made me feel heard every single step of the way.

To the physical therapists who worked with me throughout this recovery, each one of you brought something to the process, and each session, even the imperfect ones, moved me forward in ways I did not always recognize at the time.

To Cameron, whose hands found what needed finding and whose words, It is not too late, I carry with me every day.

To Liz, the Gadget Queen, and the woman who drove here to buy my van because she knew I needed to let it go. Thank You. Share the Land. Always.

To Margaret, whose simple act of generosity with a rollator walker changed the shape of my days more than she will ever know.

To Martin, our neighbor and my husband's golf buddy, who showed up at Thanksgiving with the most extraordinary meal we have ever had and asked for nothing in return. Your generosity fed us in more ways than one.

To the neighbors in the walking group who signed a card for Frankie. Your kindness reached Mike at exactly the right moment and meant more than you will ever know.

To my friends who brought food, sat with me, listened to me, and reminded me I was still me. Your presence meant more than you will ever know.

And finally, to everyone reading this who is living in their own messy middle right now. Your courage to keep going, even when it's hard, and slow and uncertain, inspired me to finish this book. We are in this together.

With deep gratitude, Elaine

Introduction

I am still healing as I write this. Still working toward things I used to do without thinking. Still having days when the progress feels invisible, and the distance between who I was and who I am now feels wider than I have the energy to cross. I wrote this book from inside the messy middle.

If you are somewhere in your own in-between place right now, you know what I mean by that. The way your life feels split, without warning or permission, into the before and the after. The way the person you were before can feel like someone you are no longer sure how to get back to. The way people who love you say the right things, and somehow that makes the loneliness worse rather than better.

No one told me it would feel like this. Not the medical team, not the books I found, not the people around me who wanted so badly to help. The loneliness of a long, slow recovery with no clear finish line is not something that shows up on any scan, and it is rarely the thing anyone thinks to prepare you for.

I am not writing this from the finish line. I do not have a tidy resolution to offer you, because I do not have one yet myself. What I have is eight months of living it honestly, including the parts that were not inspiring, the nights I was scared, the days I smiled and nodded and felt completely alone behind it, and the small, unexpected, sometimes ridiculous moments where something shifted, and I found my way forward one more step.

On an ordinary October evening, in the middle of an ordinary moment, everything changed. What followed became the longest, most humbling, and most unexpectedly clarifying experience of my life. I was a health coach and a Belief Coding® facilitator. I understood the mind-body connection. And I discovered, as perhaps you have too, that understanding something and living it when you are the one in pain are two entirely different things.

This book is about what I learned when I had to live my way through the messy middle of it all. Imperfectly. Honestly. Often, while still scared.

If that is where you are right now, keep reading. I wrote this for exactly where you are.

1

The Fall

I had a morning ritual that I loved. I would wake up, pull the curtains wide open, and step outside barefoot, often pausing near the magnolia tree in the yard to look up at the sky. Standing on the cool, sometimes damp grass, feet flat on the earth, breathing air that still felt fresh and untouched by the day. Some mornings I'd slip on my grounding shoes and take a quiet walk around the neighborhood, coming back inside carrying the sweet lemony scent of magnolia blossoms on my clothes.

It was a simple thing. But I had spent years studying how the body works, and I understood what those mornings were giving me. Morning light. Bare feet on the earth. Movement before the day made its demands. I believed in all of it. I still do.

The thing about a body that works beautifully is that it becomes invisible. My legs carried me from room to room without asking anything of me, without requiring my attention or my gratitude or even my awareness. My body was just there, steady and quiet in the background of my life.

And then everything changed.

The Moment That Rewrote My Life

It was one of those ordinary October evenings where everything felt simple and right. My husband Mike and I were settled comfortably on the sofa with our TV trays, enjoying a no-frills dinner of grilled ham with pineapple, sweet barbecue baked beans, and a crisp lettuce salad with bleu cheese dressing topped with feta cheese, because everything's better with feta. The door was open, letting in a gentle evening breeze that carried just a hint of the magnolia tree from the yard. We were watching a movie. I don't remember which one now, but I remember it hadn't ended yet. It was the kind of quiet, comfortable movie night at home that we both loved. The kind where we laughed at the same parts, passed little comments back and forth, and felt perfectly content just being together.

I remember moving my TV tray aside so I could stand, picking up my dinner plate, and turning back for the cup I had forgotten. I then turned toward the kitchen, my body still twisted in mid-rotation, and took one step forward with my right leg. Next, I distinctly remember wondering, *Where is my left leg?*

It didn't follow.

I fell to the ground. Whether my left knee hit first or simply absorbed the greatest impact, I don't know. But the damage it sustained left little doubt about where my body had landed hardest.

The plate flew from my hands, the cup tumbled after it, spilling what remained of my dinner across the floor. The knife and fork slid underneath the television stand. I saw it all happening, and I could do nothing to stop it.

The pain was so immediate and all-consuming that I let out a loud cry.

"I broke my leg. I know it's broken. I broke my leg," I screamed and cried, repeating those words in disbelief, lying on the floor, somewhat on my right side.

Mike immediately reached for his phone and called 911. He described my left leg as extremely bowed and bent, contorted on the floor behind me. There was no sign that a bone had pierced the skin, and only that my lower leg was not aligned with my knee, emphasizing the bowing he had noticed

most. I sensed his concern.

The paramedics arrived within minutes. I don't know how many came. Three entered the living room while others remained outside by the front door. They moved around me with the calm presence of skilled emergency responders. Their purposeful attentiveness felt both reassuring and terrifying at the same time.

One paramedic took my blood pressure while another asked questions.

"Did you hit your head when you fell? Do you remember blacking out?"

"No and no."

"What happened?"

I answered as best I could.

They placed several EKG tabs across my chest while most of the attention remained on my injured leg. They spoke back and forth about how to stabilize it and move me onto the waiting gurney. A narrow stretcher and hover mat were brought in and gently slid beneath me. Working in unison, the paramedics stabilized my left leg without moving or repositioning it. They placed ice packs and an airbag cushion around it, then lifted me straight onto the gurney and wheeled me out to the ambulance.

My husband followed in his car.

On the way to the hospital, I heard the sirens blaring as the paramedic monitoring me placed an IV in my arm. I told myself everything was going to be fine. It was a serious break, and it was painful, but I thought it was the kind of broken leg that gets a cast and you're sent home. I had no framework for thinking otherwise. I believed that right up until the medical language started coming at me from every direction.

The emergency room was bright, the kind of bright that blinds you when you are lying flat on your back, staring up at a ceiling of lights. A team of doctors and nurses moved around me with urgency, their voices overlapping as equipment was rolled in and out. It was a well-choreographed chaos, organized and practiced in a place that handles emergencies day and night.

Then imaging was done in the room.

Dislocated knee. Fractured tibia. Fractured fibula. As I absorbed each word being read from my chart, I told myself what I needed to hear: that broken

bones heal, that this was hard but not impossible, that people got through things like this, and that I would be fine.

My husband arrived.

In fifty-three years of marriage, I had seen him handle difficult things without flinching. But whatever he was looking at now was not something he knew how to arrange his face around. For a moment, his face was his face, and then it changed into something I had never seen before. He stood very still beside the hospital bed, holding my hand, unable to look away from my injured leg. That silence and stillness said more than any words could have.

The tone in the room shifted when the vascular surgeon entered. Not dramatically, not like in movies, just a subtle change with staff stepping back slightly and the noise level dropping just enough to notice. He introduced himself and immediately got to work, pressing a handheld vascular Doppler behind my knee. Slowly, he moved it down my leg and then to my ankle, listening as he went. The expression on his face and the way he compared both legs told me something before he said a word.

There was little to no pulse in my left leg.

I looked at Mike. A quiet free fall of understanding passed between us.

They moved quickly, wheeling me down the hall for a CT scan to evaluate circulation in my leg. No one was talking about a broken leg anymore. They were talking about whether I would keep my leg at all.

"When your knee dislocated, it did so with such force that the joint shifted completely around, cutting off the artery behind it." He said it the way you say something when there is no time for it to land gently.

I heard the words. My husband heard them too.

I looked up at the surgeon's face and understood, before my mind had fully caught up, that the story I had been telling myself about it just being a broken leg needing a cast was not the story we were actually in.

A team of vascular and orthopedic surgeons was immediately assembled. They wheeled me into the operating room and performed a ten-hour surgery that lasted through the night, ending at 3:00 am the following morning.

The vascular surgeon worked first, using a vein from my inner thigh to bypass the blockage caused by a life-threatening clot that had developed from

the injury and the compression, restoring blood flow to my leg.

The orthopedic team then went to work rebuilding the structure of my leg. They realigned my knee and used screws to piece my fractured bones together. A large external fixator device, with steel rods and pins bolted into my upper thigh and shin bones, held my leg in place.

When it was over, they walked to the waiting room and told my husband that they had saved my leg.

Nine Days

After my surgery, the nine days I spent in the hospital carried a weight of gratitude I had not felt before. My leg was still there. That alone made everything else manageable. The complications, the rough first days, all of it because the people around me handled what needed handling, and I was still whole.

Early on, hospital staff introduced me to the PureWick Female External Catheter, a non-invasive system that managed one of the most basic bodily functions without requiring me to get up or call for help. I mention this because it mattered more than it might sound. In a body that could not move freely, in a situation that had already taken away so many ordinary dignities, having something that worked quietly in the background was its own kind of grace. Better than the alternative, I learned quickly, becomes its own kind of mercy.

The first couple of days in the ICU became rough in ways not anticipated.

The narcotics used to manage my pain were causing my blood pressure to drop alarmingly low enough to warrant checking it often throughout the night. I would wake to the pressure of a cuff on my arm in the dark, lie there while the numbers registered, and drift back into whatever version of sleep I could get in a hospital bed with a metal frame bolted to my leg.

To bring my blood pressure back up, while still managing the pain, they took me off the narcotics and gave me extra-strength Tylenol and pumped me with extra fluids and electrolytes both through an IV in my arm. That solved one problem and created another.

All those fluids diluted my blood count. I have always tended toward anemia. Since childhood, my body and iron have never been on particularly good terms, and apparently, this was the perfect storm for that to become a problem. I have Type A positive blood, which requires specific agents to be mixed into any transfusion so my body won't reject it. They gave me two units. I remember lying there watching the bags drain into another IV line, feeling not fear exactly, more like a weary recognition.

One thing and then another thing and then another thing after that. Each one addressed. Each one a reminder of how much the body has to navigate after something like this. Once they had me regulated, they moved me off the IV and gave me extra-strength Tylenol in pill form. I was glad to be off the narcotics and the IV. The shift to something simpler felt like the first small step back toward myself.

And then they wheeled me out of the ICU to a room on the fifth floor.

The room was large, larger than I expected, the kind of hospital room that feels very generous by most standards. There was a sofa by the window, a couple of chairs, and space enough for two beds, though there was only one, mine. Along the ceiling ran a set of rails which might have been used for trapeze devices or limb supports, though nothing like that was ever set up for me.

Wrapped around my right lower leg was an electric compression sleeve that periodically squeezed my calf in a slow rhythmic pulse, used to prevent blood clots. It had been there since the ICU. I had gotten used to it the way you get used to things that are strange at first and then simply become part of the background of your days.

I could adjust the bed to raise my head, but not quite high enough to sit in an upright position, and the nurses would come in to accommodate me by placing pillows behind my back. I ordered from a decent menu, pushed a button when I needed ice, and let myself be taken care of.

2

Still Whole

There were so many different categories of care, each handled by different departments. One, being an occupational therapist. She walked in with the careful manner of someone who has helped many people do something frightening for the first time. She knew that the most important thing she could offer me was her steadiness.

The external fixator on my left leg was heavier than I thought it would be. This heavy metal frame was substantial in size and unyielding, and I could not move it by myself yet.

The therapist patiently instructed me to try to slide my right leg off the hospital bed. She then placed a chair with a pillow on it and carefully guided the fixator onto it, moving very slowly and deliberately, watching my face as she moved it onto the chair.

The angle felt strange but not painful exactly, more disorienting, like my body had forgotten what it felt like to be anything other than horizontal. She stopped to let me rest before proceeding to move it toward the floor in small increments. I remember having to lean slightly back, using my arms to manage it.

Then came the walker.

I was instructed not to put any weight on my braced leg. Toe touch only. Just enough contact with the floor to steady myself. When I placed my hands on the top handle, the height felt too tall. I didn't understand how to give

myself enough leverage to lift myself to a standing position from that height. She adjusted it and also raised the hospital bed to nearly a standing position for me, which then became manageable.

With the bed raised high and the lowered walker close, she placed a pillow under my left foot to cushion it and prevent me from putting any weight on it. She then instructed me to lean forward. To my surprise, I stood up on one foot fairly easily, holding onto a standard four-legged walker with both hands. It only lasted a few seconds before needing to sit back down. But I stood, and that mattered more than I knew how important that was.

I was then introduced to a physical therapist who came in twice daily during my hospital stay to teach me how to pivot into a wheelchair. He was a tall, strong man whose calm, methodical approach and steady encouragement were exactly what I needed.

One of our first tasks was figuring out which side of the bed I should use to get in and out. It took some trial and error before we settled on the best approach. That detail, which side of the bed, sounds small. It was anything but. Getting it right made every transfer safer and more manageable. Getting it wrong could have complicated everything.

The position of the wheelchair mattered, too. I needed to lead with my right leg, keeping it closest to the bed, and then drag my left leg off or on afterward. To make that possible, the wheelchair had to be positioned with the seat near the head of the bed when I was getting out and near the foot of the bed when I was getting back in.

We worked on the same sequence each time, standing, steadying, pivoting, and sitting, until the movements began to feel less like instructions I was following and more like something my body was starting to remember.

After just a few days, I had gotten good enough at moving my leg that I could do it without needing help. I became familiar with the bed's controls, raising it on my way up and lowering it on my way down. I learned how to shift my weight, where to place my hands, and how to position myself for each transfer.

One afternoon during our session, he placed a regular chair beside the bed. I followed the same procedure I had used with the wheelchair. The only

difference was that instead of using the wheelchair's leg lift to support my straight leg, he positioned a second chair in front of me to hold it.

It all felt like progress.

I never entirely understood the difference between the occupational therapist and the physical therapist because their work overlapped in ways that made the distinction feel more administrative than practical. What I did understand was that both of them were helping me find my way back to a body that had become as unfamiliar as a foreign country. For that, I was equally grateful to both of them.

The Great Bedhead Battle

In between all of it, there was the matter of my hair. I have long, thin hair that tangles easily, a fact of my life since childhood. I remember how my grandmother would work olive oil through it and braid it before bed to keep the knots from forming overnight. In a hospital bed, lying on a pillow for hours at a time became quite a situation.

Most of the nurse's aides were extraordinarily patient about it, spending long, careful minutes with a comb working through the tangles without pulling, which is not as easy as it sounds. At one point, I called the local beauty supply store and asked if they carried a product we could use to spray on my hair to make combing it easier. They did, and I asked her if she would put my husband's name on it and keep it at the counter for him to pick up for me, which she did, and he did. That solved the combing out the knots issue. Veronica, one of the younger nurse's aides, solved the problem of keeping the knots from forming in another way.

Veronica

Veronica had beautiful, long, thick, dark brown hair that she often wore in a side braid, and she had very strong opinions about Harry Potter. During our combing sessions, she would tell me about her obsession with the series in the enthusiastic, detailed way of someone who has found a kindred spirit

willing to listen.

I told her that two of my grandsons, Joaquin and Ethan, had read the entire series, which delighted her and gave us an instant connection. She even convinced me to go on the website and take the sorting test to find out what Hogwarts house I belonged to. I took it and reported my results back to my grandsons on our next video call. They are both Gryffindor, brave, adventurous, no surprise there. I came back Ravenclaw, which apparently means I am wise and curious, which I decided to take as a compliment. The look on their faces when they realized their grandmother not only knew what a Hogwarts house was but had one of her own made the whole thing worthwhile. We had a good laugh about that. Suddenly, I was the coolest grandma on the block.

Veronica understood the hair struggle. Her own thick, long hair was not something that managed itself without effort either. After one of our combing sessions, she pulled the top of a latex glove off and handed it to me. It made a perfect round hair tie, better, actually, than most of the ones I owned at home. She knew exactly what she was doing.

I then started wearing my hair up in a high ponytail on top of my head, which kept it out of the way and out of trouble. It also made me look, as I caught sight of myself in the small mirror Mike had brought, exactly like Pebbles from The Flintstones. I decided I could live with that.

Mike brought me everything I asked for. Makeup, because I was not ready to stop being a person who wore it. The long king-size pillows from our bed at home, because the smaller hospital pillows underneath my elevated leg kept shifting around, whereas the king-size ones stayed exactly where they were put.

Still Here

My heel had become sensitive from the constant pressure of the heavy fixator and tender in a way that surprised me. They had given me a soft, padded boot to wear to protect it, and wearing it reminded me of the booties they put on newborns. The soft, well-intentioned, and apparently impossible

ones to keep on. It slipped off constantly, not because I was kicking it off deliberately but because my ankle simply did not have enough to hold it in place. The nurses kept putting it back on. It kept coming off. We reached an understanding of sorts by placing an extra pillow under my calf to keep my ankle propped up in the air. Even then, the damage lingered in my heel, and I was still living with the consequences.

Every day, the vascular surgeon's nurse came in with the small handheld Doppler to check the pulse in my foot. The same kind of device they had used in the emergency room when the surgeon discovered there was little to no pulse at all. They had marked an X on the exact spot on my foot where the pulse could be found, so that any nurse who needed to check it would know exactly where to place the Doppler. That small X, drawn in permanent marker on the top of my foot, became one of the most reassuring things in my day. Someone checking for it meant the blood was still moving. The bypass was still working. The leg was still there.

My husband came every day.

During phone and video calls with family, I always tried to change the subject. I wanted to hear about their lives, not mine. I already knew about mine, and there was not much more to report anyway, when most of what I did all day was lie in a bed and wait for my body to recover. But more than that, I did not want to be the center of attention. I did not want to talk about my injury. I wanted to know what was happening out there, in the ordinary world that was continuing without me, and I wanted to remind myself and them that I was still interested in it.

During one call, I caught Ethan mid-song. He was on his electric guitar, the one I had given him for Christmas last year, playing something he had written, with my son Daniel watching the way fathers watch when they are proud and trying not to show it. When the song ended, Jihee wanted to say hello, so Daniel carried the phone into the kitchen, where his wife was at the counter chopping vegetables, her hands moving with the focused efficiency of someone who knows exactly what she is doing. She had just started a small business making kimchi, she told me, her face bright with the energy of someone who has found the thing she loves doing. I asked her everything

about it. The calls with Daniel always end up in the kitchen somehow. Some things travel well across an ocean.

On another call with my daughter Kristina, the door flew open, and my grandson Steven and his wife Kristyn came tumbling in, rosy-cheeked from an afternoon of apple picking at a nearby farm. Little Clara's pigtails had come half undone somewhere along the way, and Colton was working his way through an apple with the single-minded focus that small boys bring to eating.

My granddaughter, Lacey, came in right behind them, fresh from feeding her cows. Kristina's family has a farm, and Lacey takes care of the animals herself. I watched that small, ordinary moment from my hospital bed and smiled. The world was still going. The pigtails still needed fixing. Life was still moving forward.

Lying in that hospital bed with my king-size pillows and my own Pebbles ponytail and the X marked on my foot, I was still in the phase where I believed this was going to be straightforward. Hard, yes. Frightening, yes. But I was still telling myself a story that had a clear ending, and I was still close enough to the beginning of it to believe that story completely.

I had a private room, wonderful nurses who responded when I needed them, and a pain level that stayed manageable as I settled into a steady rhythm of Tylenol, ice packs, and gratitude. Real gratitude, the kind that comes from understanding how close things had come to being so much worse. I would look down at my leg in its metal cage, strange and foreign and nothing like the leg I had always known, and feel genuinely thankful that it was still there at all.

There is a moment that happens in the early weeks of recovery that is worth mentioning. The room is soft and quiet around you. You exist in that gentle space between sleep and waking where nothing has shape yet. Your body feels like your own again. The weight of what has happened has not yet settled back onto your chest. You are, for just that one fragile moment, free.

And then you try to move, and everything comes rushing back.

That heartbreaking half-second between sleep and remembering was one of the most disorienting parts of my early recovery. The distance between

those two versions of myself felt, on the hardest mornings, like I might never be the woman I once was.

Before the fall, I had built a life around showing up for other people. I was a health coach, a wife, a mother, a grandmother, and a woman who loved to travel, paint, and write. I was used to being the one people called when they needed help, encouragement, or someone to carry part of the load. I had never thought very much about it because it had always felt natural to me.

Lying in a hospital bed, dependent on nurses to help reposition my leg and therapists to teach me how to stand, I began to understand how much of my identity was tied to being capable.

Not perfect. Not fearless. Just capable.

I had been through difficult things before.

Years before, I had surgery for colon cancer. It was a major abdominal surgery, and the recovery was not easy. My husband stepped in and carried much of the responsibility at home. Kristina flew down to help. Even with a wonderful home health nurse, there was still plenty that fell on my family.

But in my mind, that chapter had a beginning, a middle, and an end. The surgery removed the mass completely. No chemotherapy. No radiation. I considered myself fortunate. Once I healed, I went back to living my life and rarely thought about it again.

This leg injury felt different.

I did not fully understand why yet, only that it did.

The Video

It was during this time in the hospital that I first came across Marisa Peer. I had been scrolling on my phone the way I did at two in the morning when the hospital was quiet, and my mind was not, when I remembered that one of the facilitators in my Belief Coding® community had mentioned her work in passing. Something about a method. I had filed it away the way you file things when your life is too full to investigate them, and then forgotten it entirely until that night when I had nothing but time, a phone, and the hum of hospital equipment for company.

I found the video easily enough. *Train Your Mind to Heal Your Body.* I clicked on it mostly out of curiosity, the way I click on most things that catch my attention, not expecting very much.

Within minutes, I was sitting up straighter in that hospital bed.

Marisa had broken her leg. Not a clean break, not the kind that gets a cast and sends you home. Her leg had been shattered, hit by a car, the kind of injury that comes with a long list of things doctors tell you not to expect to be able to do anymore. And she had healed it faster than anyone around her thought possible, not by ignoring what medicine had to offer but by adding something to it that medicine rarely mentions. She spoke to her body, directly, with authority, the way you would give clear instructions to something you trusted completely to respond.

I listened carefully.

Part of it was professional interest. I had spent years studying the connection between beliefs, stress, emotions, and physical healing. But knowing something and needing it to be true for yourself are two different things entirely.

The truth was that I needed hope. Not false hope. Not magical thinking. Just a reason to believe that my story was not already written.

I watched the entire video. Then I watched it again.

What stayed with me was the possibility that healing might be influenced by more than surgeries, medications, and physical therapy alone.

I saved that video in my favorites and did not say much about it to anyone there. I just kept it close, the way you keep something that feels important before you fully understand why.

Rehabilitation Plan

When the social worker assigned to my recovery came to discuss next steps, she recommended a rehabilitation center where I could begin physical therapy before going home. It sounded reasonable. It sounded like the right thing to do. What I did not know, what no one fully explained to me, was what kind of place I was actually being sent to.

Mike had been coming to the hospital every day since the surgery. He had sat through every conversation, every procedure, every frightening hour of those first days, and I could see the exhaustion on him even when he tried to hide it. When the transport was arranged, he assumed he would follow behind the ambulance the way he had followed behind the paramedics on October 22nd.

"You don't need to come," I told him.

"I'll just follow the ambulance," he said.

"I know you will. But I don't want you to." I meant it. He had given everything he had for nine straight days, and I could see it on him. "Go home. Rest. I'll call you when I'm settled."

He looked at me the way he does when he is deciding whether to push back or trust me.

"You sure?"

"I'm sure."

I did not know yet what I was walking into. But I had a video on my phone and a mind full of things I was determined to try, and that felt like enough.

"Take pictures of the kids' Halloween costumes tonight," I said as they were wheeling me toward the transport ambulance.

He smiled. "I will."

He walked alongside the gurney as far as he could, until the point where the paramedics took over, and there was no more room for him to follow. He stopped there. I watched him through the back window as they loaded me in, still standing in the same spot, watching the ambulance. He raised his hand once.

The doors closed.

I was on my own.

It felt like the right thing.

3

Behind The Mask

From the outside, the place looked like an estate. As the transport ambulance pulled around to the entrance, I could see it through the back window. Tall white pillars framed the entrance, with lush grounds and a garden off to the side, and broad front windows with smaller shuttered windows all around them. I took it in and thought, maybe this is going to be all right.

The ambulance driver glanced over at me as they were getting ready to unload.

"This is one of the nicer ones," he said.

He had clearly seen a lot of them.

Day One

I remember thinking, as they wheeled me through the entrance, that the atmosphere felt almost too scripted. The staff was in costumes. Decorations everywhere. A festive energy moved through the halls, making the place feel lively and welcoming in a way I had not expected. A nurse in a witch's hat smiled at me as I came through the door. Someone had set up a candy table near the nurses' station.

It was Halloween.

The place itself was wearing a costume. Everyone behind a mask.

The head nurse who checked me in was professional and organized. He

walked us through the facility to my room. It was small but looked adequate. An adjustable bed, a window, and enough space to maneuver around it in a wheelchair. I told myself this was temporary. A few weeks of early physical therapy, and then I would go home. That was still the plan, and it seemed reasonable enough.

That first night introduced me to what this was actually going to be like.

I didn't see any of the equipment I had relied on at the hospital to manage things through the night. I was dependent on the call button and the staff in a way I was not expecting.

A nurse came in not long after I had settled in and explained the rules matter-of-factly. I was not permitted to get up unassisted during the night. Staff could only be called for emergencies. And I would need to wear an adult diaper.

She said it the way you say something you have said many times and stopped thinking about, efficiently, without unkindness, and without much awareness of what it might feel like to the person hearing it for the first time.

I did not argue. I accepted it the way you accept something when you are too tired and too far from home to do anything else about it that night. She helped me with it and left, pulling the door partway closed behind her.

I lay there in the dark listening to the sounds of the facility settling into its nighttime rhythm. The whisper of voices coming from a television that the woman in the bed next to mine was watching, the footsteps in the hallway, and the murmur of a place that never goes fully silent. I thought about Mike at home, probably just now turning off the lights. I forgot to call him. I thought about the video on my phone. I did not reach for either one. I just lay there and waited for morning.

The night passed. It was not catastrophic.

Day Two

That second day was genuinely good, at least while the sun was up.

Mike and our oldest son, Andrew, came in the early afternoon. I said nothing about the night before to them during the visit. I did not want to

worry them, and the afternoon was too nice to spend on a complaint. We went out to the patio together. The garden was genuinely beautiful, well-kept, quiet, the kind of outdoor space that feels like it belongs to a different place than the one you just came from. The air was fresh, and the trees along the garden path were just beginning to turn, that first hint of autumn leaves changing color that tells you the season is quietly shifting. For a little while, it was possible to forget where we were.

Andrew pushed my wheelchair along the garden path while Mike walked beside us, and we talked the way families talk when the worst has passed, and everyone is simply glad to be in the same place at the same time. Nothing heavy. Just ordinary conversation about how everyone was doing, Andrew stopping to show me photos of the girls, my youngest granddaughters, Nora dressed as a Dalmatian dog, and Daphne dressed as a furry cat trick-or-treating the night before, what was happening at home, all the things that had nothing to do with broken legs or surgical wounds or any of it. I was soaking up every minute of it.

There was a mix of other people outside. Some appeared to be seasoned residents, others rehabilitation patients. Some in wheelchairs, some with walkers, and some with legs that ended where legs are not supposed to end. I casually looked at those amputations so as not to stare. Some things you just hold privately. What moved through me then was a fierce, private gratitude. They had saved my leg. Whatever this place turned out to be, I still had my leg, and I held onto that.

Physical therapy that afternoon was good too. The therapists were skilled and attentive, and I felt real progress during that first session. I went to sleep that night genuinely believing the road forward was manageable.

Then my body chose the middle of the night to begin letting go of everything it had been holding.

Because I had been given so much fluid in the hospital, to bring my blood pressure back up and address the anemia, my body was still carrying a lot of that fluid, and it was working through the night to get rid of it. What that meant practically was that I was urinating constantly. Without the equipment the hospital had provided, I was back to the call button and the diapers.

And this night was nothing like the first.

I soaked through diaper after diaper, calling for help each time. By the third or fourth call, I could feel the shift in the nursing assistant's attitude. Not cruelty. Just the barely concealed impatience of people who have too much to do and have quietly decided that my needs had become more than their fair share. I understood it. I did not accept it.

What I could not accept at all was what was happening to my incision.

The surgical wound in my upper thigh, where the vascular surgeons had harvested the vein for the bypass, was getting wet. The bandage was compromised. I had watched the nurses at the hospital change my bandages every day. The silver antimicrobial dressings they used were specialized, and the careful, deliberate protocol around the pin sites was specific. I knew enough from watching them to know that wet bandages on fresh surgical wounds were not something you left until morning and hoped for the best.

I pressed the call button again.

A nurse came in, assessed the situation, and peeled off the silver dressing. Then she produced a 4x4 band-aid.

"This is all I can do tonight," she said. "Ask the morning nurse to have the wound care nurse look at it tomorrow."

I looked at that band-aid that was supposed to cover. It didn't even come close to covering the whole area. I knew that, and she knew that. But she left before I had a chance to say anything.

I pressed the call button again and asked the nursing assistant who answered to please bring me an extra diaper. She did, without asking why. I wrapped that diaper around my thigh myself, pressing it against the wound as best I could. It definitely was not proper wound care. It looked crude, but it was what I had, and I was not going to just lie there and hope for the best.

Day Three

The third day began with the wound care nurse.

She arrived later than I would have liked. When she finally came and assessed the situation, she told me, in the same matter-of-fact tone I was

becoming accustomed to around here, that they did not carry the type of bandages my wounds required. They had gauze. Just gauze. Not the specialized silver antimicrobial dressings that had been used on my wounds at the hospital. She folded and taped the gauze in place without cleaning or putting any ointment on it first. Her lack of concern puzzled me. I felt uneasy, and didn't want to just dismiss that feeling outright, but I wasn't sure what to do yet.

I also wanted to find out about physical therapy. No one had said anything to me about a schedule, and I wasn't sure what time it would be that day. I wheeled myself down the hallway in the direction I had been shown the day before, following the signs until I found the gym. It was empty. Not between sessions empty. Just empty. Equipment sitting there in a quiet room, as if it had not been touched yet that day.

I wheeled myself back to my room, passing the dining hall on my way, as the reality of where I actually was began settling over me in ways I had not fully understood at first. This was not simply a rehabilitation center. It was a nursing home with elderly people living there as residents. I was not permitted to eat in the dining room. Meals were brought to my room instead. I was not sure if it was a different menu or just a policy. Either way, sitting in my room while the sounds of other people eating together drifted in from a place I was not allowed to go felt lonelier than I expected. It was a small thing, but it landed heavily anyway.

George

George was in the hallway on my way back, moving between rooms with the unhurried efficiency of someone who has learned to cover a lot of ground without appearing to rush. He was the attendant I had noticed the day before. tall, with slightly long curly dark brown hair, with a way of looking at you when you spoke that made you feel like he was actually listening rather than waiting for you to finish.

"There's no one in the gym," I said.

"Physical therapists don't come every day," he said. "They'll let you know

when you're scheduled."

I nodded. That was not what I had been told to expect, but I was learning that what I had been told to expect and what was actually true were not always the same thing around here.

He asked if I needed anything before he moved on. I said I was fine. He headed back down the hallway.

He brought my lunch an hour later. Set the tray down, lifted the cover, and I saw the small container of runny strawberry yogurt sitting next to a soggy grilled cheese sandwich and applesauce.

"May I have Greek yogurt or cottage cheese with lunch instead of the strawberry yogurt?" I asked.

He raised his hand to the side of his mouth, almost by reflex, and lowered his voice.

"I remembered from yesterday. I'm sorry we're out. This was the closest thing I could find."

I looked at him. "You remembered from yesterday?"

"You had mentioned it when I brought your dinner tray," he said. "Extra protein when you can bring it." He said it matter-of-factly, like remembering someone's preference was simply part of the job. Maybe for him it was.

I looked at the yogurt. Runny and sweet and nothing like what I had asked for.

"Does that happen often?" I asked. "Running out of things?"

He glanced toward the open doorway. The hand went back to the side of his mouth.

"More than it used to," he said quietly.

He did not say anything else. He had other rooms to get to. But something in the way he said it, carefully, like a person choosing their words the way you choose your footing on uncertain ground, made me think there was more where that came from.

He came back for the tray about an hour later.

I was sitting up, not doing much of anything, which had become the texture of most of my hours that day. He lifted the tray and was about to go when I asked him how long he had been working there.

He set the tray back down.

"Long enough," he said.

"Long enough to notice things?" I asked.

He almost smiled. He raised his hand to the side of his mouth again.

"The food has changed since I started," he said. "Little by little. Used to be fresh fruit in the mornings. Now it's canned. Not a lot of variety." He paused. "A new patient wouldn't notice. But I've been here long enough."

I looked down at the blanket I had been given the first night. Thin and scratchy, nothing like what I'd had at the hospital. I mentioned it.

He nodded. "There are better ones in the supply room. Thicker. I always try to get to them first for my patients." He paused. "There aren't many of them, but I'll try to get you one."

Someone called from down the hall. He picked up the tray.

"I have to go," he said. And he did.

He checked on me once more before his shift ended. Just knocked lightly on the open door and asked if I needed anything.

"Water, extra pillow, anything like that."

I said I was fine. Then I asked him something I had been thinking about since lunch.

"The families who come to visit," I said. "Do they know what it's actually like here?"

He was quiet for a moment. He looked at the doorway, then back at me.

"They see what's presented to them," he said carefully. "During visiting hours, things look a certain way." The hand went to the side of his mouth. "It's different at night."

I already knew that. Two nights had told me exactly what it was like at night. But I wanted to hear him say it, not because I needed the confirmation but because I could see that he needed somewhere to put what he was carrying.

"You're going to be a nurse," I said. It was not really a question.

He almost smiled again. "That's the plan. I need this job until then."

And there it was. The whole shape of it in one sentence. He needed the job. He had a conscience. And the distance between those two facts was exactly the size of everything he was not able to say to anyone who could do anything

about it.

"I understand," I said.

He nodded. He seemed like he believed me.

He wished me a good afternoon and disappeared back into the hallway.

I sat in the quiet of that room and thought about George. About what it costs a person to know something is wrong and need the job anyway. About how many Georges there probably were in places like this one, doing the small, careful, human things that the institution around them had stopped doing, holding the line between what a place is supposed to be and what it has quietly become. He would be a good nurse someday. I believed that completely. I hoped the people who would eventually work beside him knew how lucky they were going to be.

That afternoon, in the quiet after lunch, I found myself paying more attention to Anne.

She was in the bed next to mine. Younger than me, but somehow she seemed older, the way a person can when they have spent too long letting things happen to them without pushing back. She was not wheeling herself out to the patio the way I had been. She just lay there, still and quiet, accepting whatever attention came her way and not asking for more. When I had asked her earlier if anyone had helped her up that day, she said no. Just like that. No frustration, no complaint. Just no, the way you state a fact about the weather.

I did not know why she was there. I didn't want to pry. But after lunch, with nothing much else going on, I thought about the video I had been carrying around since those nights in the hospital as something worth passing on.

I showed her the video on my phone.

She watched it politely.

"Thank you," she said. Just that, and handed it back without much expression.

I did not push. You can offer something, but you cannot make a person ready to receive it. I hoped something in it stayed with her. I still do.

That night, late, after the facility had gone quiet, I called Mike.

He picked up on the second ring. Which told me he had not been fully asleep either.

I told him plainly what had been happening. The wound care. The wrong bandages. The nights. I told him I did not think I was getting what I needed here and that I wanted to come home. He listened the way he always does, quietly, completely, without interrupting.

When I finished, he asked for the social worker's phone number.

I gave it to him. A few minutes later, he called back. She had not answered. He had left a message. Then he asked if he should come.

It was late. There was nothing either of us could do tonight that couldn't be done better in the morning with the right people available. I told him no, get some sleep, and I would talk to the head nurse in the morning. He said he would try. I set the phone down and lay there in the dark listening to the facility around me. Anne's television was still on. A door opened and closed. The night shift moved through its quiet routine as if nothing particular had happened, because for them, nothing had. I am not sure either of us did much sleeping after that.

Day Four

On the morning of the fourth day, I wheeled myself out into the hallway just after 6:00 am.

The facility was quiet at that hour. The nurses' station nearby was empty. The halls were still. I positioned my wheelchair where I could be seen, and I waited.

I was not afraid. I was not angry, not in any hot, impulsive way. What I felt was steadier than anger. Determination. The clear, quiet certainty of a woman who has decided she is done waiting for someone else to notice that something is wrong.

Staff started arriving as the morning shift came in. They moved past me with the purposefulness of people who have a lot to do and have learned not to be distracted by things outside their immediate task. A few told me to go back to my room. I looked at each of them and said, pleasantly and without moving an inch, that I would wait right here until I could speak with someone in charge.

I did not raise my voice. I did not move.

Eventually, the head nurse appeared. The same one who had checked me in when I arrived. He took one look at me sitting in that hallway, and I could see that he immediately recognized and understood what kind of conversation this was going to be. He asked me to come with him and led me to a small room just off the hallway, the kind of plain, practical space with chairs along the wall that exists for exactly these conversations. He sat down, eye level to the wheelchair I was in, while I told him what I had told my husband the night before. The wound care. The bandages. The nights.

He was apologetic. Genuinely, I think, though there was also the caution in his apology of a man who is aware of what I might do next. The supplies were a corporate decision, he explained. His hands were tied. He was sorry the facility had not been equipped for someone with my kind of wounds.

I told him I understood about his hands being tied. I also told him I would not be staying and that I needed transport back to the hospital to have my wounds properly cared for.

He nodded and said he would arrange it.

Before I left that room, I said one more thing. I told him that, whatever my concerns about the facility, George had been a genuinely bright spot. That the care he had shown me had been kind and attentive, and I wanted that noted. The head nurse seemed both surprised and relieved to hear it. He said he would make sure George knew.

Back in my room, I started gathering my things. George appeared in the doorway not long after, clipboard in hand, going through the inventory sheet I had filled out on arrival, checking off my belongings one by one to make sure I was leaving with everything I had brought. He was efficient about it, the way he was about everything. When we got to the last item on the list, he looked up.

"I'm sorry to see you go," he said. Then, after a pause: "I hope it wasn't anything I said."

I shook my head. I told him there was a problem with the night staff and the wound care that needed to be addressed. That it had nothing to do with him, and that, in fact, I had just told the head nurse about the good care he

had given me.

He seemed genuinely relieved. He wished me well and slipped back out into the hallway.

I sat in my room and waited for the paramedics.

Before they arrived, I wheeled myself over to Anne's side of the room.

She was lying in the same position she always seemed to be in. She looked up when I came close.

"I'm leaving," I said. "I just wanted to say goodbye."

She looked at me for a moment.

"Good for you," she said quietly. And she meant it.

I reached over and touched her hand. Then I wheeled myself back to my side to wait.

The paramedics came with a gurney. I transferred onto it and let them take over, and as they wheeled me out through the hall, I did not look back.

The transport ambulance doors closed, and we pulled away, and every bump in the road sent a jolt straight through the fixator and into my leg, and I did not mind even slightly.

I was going somewhere that knew how to take care of me.

4

Coming Home

In the emergency room, a nurse took one look at my wound care and got to work. She was middle-aged, efficient, the kind of woman who has been doing this long enough to assess a situation in about thirty seconds and know exactly what it needs. She removed the gauze from around my thigh and examined the incision carefully, cleaning and redressing it properly with the right supplies. It was such a simple thing, the correct bandage, applied by someone who knew what they were doing, and I felt the relief of knowing it was being properly cared for.

When she was finished, she told me that a social worker would be coming to speak with me.

The Social Worker

The social worker was a small woman, older, with salt and pepper hair and the kind of quiet attentiveness that comes from years of sitting with people in difficult moments and learning to read what they are not saying as much as what they are. She introduced herself and pulled a chair close before she said anything, which I appreciated. She was not the kind of person who stands over you when she has something difficult to say.

"I want to make sure you understand what your husband will be taking on," she said at one point. "This is not simple wound care."

"He knows," I said.

"Has he done this kind of thing before?"

"He has," I said. "And even if he hadn't, he would figure it out."

She looked at me for a moment. Then she wrote something down.

She was not wrong to be thorough. I was not wrong to be ready. It took several conversations across several hours for those two things to find each other.

She came back more than once. Each time, I gave her the same answer with the same calm certainty. I understood what she was doing, trying to determine whether what I was saying was bravado or genuine readiness. I did my best to make sure she could see it was the latter.

When I told her about my husband, she listened carefully. I explained that we had cared for my elderly mother together in her final years, that he was steady and capable and did not flinch at difficult things. I explained that this was not his first time caregiving. That, seven years ago, I had surgery for colon cancer, and even with an excellent home health care nurse, he took on a great deal of it himself. He cooked for me, managed the household, and was there for me without complaint. I was sure our daughter and our sons would step in if need be, also. We had been through something like this before as a family. We knew what it asked of all of us, and I knew they could handle it.

A lifetime together had shown me that clearly enough. I told her, with the full confidence of knowing my husband and our family.

There was only so much convincing I could do on my own, though.

She called him.

They talked for a long time. I do not know everything that was said. What I know is that when she came back to me afterward, something in her manner had shifted. She was still careful. But she was no longer looking for reasons to keep me there.

The physical therapist she brought in to evaluate my readiness was efficient and matter-of-fact. He tested my ability to get out of bed, to stand, and to pivot myself into a wheelchair. I will not pretend there was no moment of doubt before I stood. My legs had not been asked to do much in the past two days, and I was aware, as I shifted my weight forward, that I was about to find

out whether the body I was counting on was going to show up for me.

It did. I did all three with the focused determination of a woman who has been waiting for exactly this moment and is not going to waste it. The therapist made a note on his clipboard and told the social worker I was ready. She stepped back out to make arrangements for my release.

The nurse appeared in the doorway again. She stepped inside and pulled the curtain partially closed behind her, which told me this was not an official visit.

"I think you should file a report against that facility," she said. She said it quietly but without hesitation, the way someone says something they have been thinking about for a while and have decided needs to be said.

I looked at her.

"What I saw when you came in tonight is not acceptable," she said.

I told her I would think about it. And I meant it.

She nodded once, pulled the curtain back open, and was gone

There was still the matter of the equipment.

A hospital bed and wheelchair had to be delivered and set up at home before they could release and transport me. All this was arranged behind the scenes, without my input.

They moved me out of the emergency room, rolling me in that same bed, into a small, quiet room just off the main area to wait. Chairs along the wall. Nothing fancy. Calm. Removed from all the ER noise.

I lay there feeling something I had not felt in days, not quite peace, but the relief of a decision that has been made to send me home.

I was going home.

Everything else was just logistics.

I stayed in that bed in that quiet room and let myself feel it for a moment, not the fear, not the planning, not the next problem to solve. Just the fact that I was going home, and Mike was there right now getting everything ready for my return.

I could picture him doing it, moving furniture, putting craft supplies in boxes, making space for a life that was going to look different for a while.

I just sat in the quiet and let him take care of things from there while I took

care of things from here. It was, I realized, the first time in thirteen days that I had nothing urgent to fight for in that moment.

It took longer than I would have liked for the hospital bed to arrive at my house. I stayed the night, and I let myself simply stop for a little while. A nurse came in with a turkey sandwich and a small container of juice and set it on the tray beside me without making a fuss about it.

The following morning, someone else appeared in the doorway to ask if I would like to order anything from the breakfast menu.

I ordered eggs.

There was something almost tender about that small, ordinary exchange. The world outside that room was still moving at its usual pace, and in here I was being asked whether I preferred scrambled or over easy, and for just that one quiet moment, that was the whole of what was being asked of me. No decisions to make. No next problem to solve.

That felt like its own kind of rest.

Mike called when the bed was set up, and the room was ready. By the time the paperwork was signed and the transport ambulance had arrived, it was late afternoon.

Home

Mike was standing at the end of the driveway when the transport ambulance pulled up. He had Frankie, our black mixed terrier, tucked under one arm. Frankie has never once in his life understood why the appropriate response to someone arriving home is anything less than a complete celebration. Mike held him firmly and watched the ambulance back in. When the doors opened, and he saw me, his face did the thing it sometimes does, the thing he tries to control and cannot quite manage, where everything he is feeling moves across it before he has time to arrange it into something more composed. He reached for my hand as soon as they had the gurney close enough.

Frankie strained toward me and let out a whimper of pure indignant longing, which made me laugh in a way that loosened something that had been tight in my chest for two weeks. Mike leaned in close enough for me to

reach Frankie's ears.

"Hey Frankie," I said as I buried my fingers in his fur and just stayed there petting him as I was being wheeled inside.

They wheeled me into the spare room, which was now something else entirely.

The hospital bed stood where my craft table used to be. Along one wall, a few of my things were still visible, a shelf he hadn't gotten to yet, some supplies stacked near my paint easel in the corner still waiting to be moved. The rest was hospital equipment. The two things existed together in that room in a way that was slightly awkward and completely understandable, like a sentence that hasn't quite finished yet.

Mike had moved most of the supplies to the master bedroom and done his best to arrange things so I could maneuver the wheelchair without difficulty.

There was a commode set up beside the bed that I had not been expecting.

I looked at it with the expression I reserve for things I have decided I am not going to need.

"You might need it," He said.

"I won't," I said.

I was wrong about that sooner than I expected.

The toilet turned out to be the first surprise. A standard toilet is not designed for someone wearing a fixator who cannot bend her knee, and I discovered this on my first attempt and understood immediately that I could not do that again without something to raise the height. The commode I had dismissed so confidently turned out to be exactly what I needed for the first couple of days. I used it without mentioning it to anyone and ordered a toilet riser. The kind that lifts off and can be set aside discreetly when not in use. That detail mattered to me more than it probably needed to.

The nights were their own separate puzzle. Our bathroom is not close to the spare room, and navigating that distance in the dark of night, in a wheelchair, not wanting to wake Mike up and not wanting to disturb Frankie, who had appointed himself guardian of the hallway, added up quickly to a situation that needed a practical nighttime solution.

I was able to order the same PureWick system for my home use. It arrived

within a couple of days and handled the problem completely. I was grateful for it, and I did not think about it much after that because it simply worked, and I had enough other things to think about.

Mike had done everything he could to make the room work. The nightstand was positioned where I could reach it. The remote for the adjustable bed was right where I could reach for it. The small details that tell you someone has been thinking carefully about what you are going to need. I saw the love in every one of them.

Home health care had been arranged to start the following day, a nurse for wound care, and a physical therapist to begin working with me at home. We were not entirely sure how often they would come or for how long, but we felt between the two of us we had enough information to manage whatever came next.

Aside from all that, I think I'll always remember that first evening home.

Mike sat in the chair beside the hospital bed. He ordered pizza because neither of us had thought about dinner, and neither of us cared. We ate straight from the box.

We ate and talked, and somewhere in the talking, we got onto meal planning.

Hello Fresh, shopping lists, and what he said he was comfortable cooking.

Then, suddenly, I remember how he looked up from the slice he was holding and just looked at me for a quiet moment. I looked back at him, wondering what he was thinking.

"You're home," he said lovingly.

"I'm home," I said, smiling lovingly back at him.

That was the whole conversation.

Just a moment.

It was enough.

I realized partway through that we had been in logistics mode for so many hours straight and that we needed that moment to turn it off.

Eventually, the pizza was gone, the plans were tentatively sketched out, the house went quiet, and he went to our bedroom to sleep.

I lay in the hospital bed I was in and waited for sleep.

It came faster than it had in the two weeks I was away.

No nurses through the night.

No blood pressure cuffs in the dark.

No call buttons, no waiting, no institutional quiet pressing in from all sides. Just the sounds of my own house settling around me with my husband in our bedroom, and Frankie shifting and sighing somewhere down the hall.

And I whispered to myself, *I am home.*

Somewhere in Time

Joaquin came during that first week I was back home.

He had been waiting. That was the thing about it that got me. He had been waiting until I came home, counting the days the way you count toward something you have been looking forward to, and the moment I was back, he came. He is nineteen, my grandson, with long brown curly hair and the energy of someone who exists comfortably in two worlds at once, part rock star who plays guitar in a band, part traditional pianist who has been trained since he was small and carries that training in his hands the way musicians carry things brilliantly, always.

He sat down at my piano keyboard without ceremony, the way people who are at home with an instrument simply sit down, and he began to play. Classical pieces first, unhurried and precise, filling the room with something I had not realized was missing until it arrived. Then show tunes. The theme from La La Land, something from The Greatest Showman, the melodies moving through the room like light through a window you had forgotten to open.

And then Somewhere in Time.

His grandpa's favorite. I looked over at him sitting in his chair beside my hospital bed and watched his face do the thing it sometimes does when something reaches him before he has time to prepare for it. He did not say anything. Neither did I.

Joaquin played, and we listened, and the craft room that had become a hospital room became, for those few minutes, simply a room where something beautiful was happening.

I have thought about that afternoon many times since. About what it means to have someone show up for you not with food or medicine or practical assistance but with the thing they are made of, offered freely and without asking anything back. Joaquin did not come to check on me, help with anything, or run an errand.

He came to play the piano. He came because he knew it would help in a way that nothing else quite could, and he was right, and I am not sure I ever told him how right he was.

His presence is always a bright spot.

That day, it was more than that.

It was the sound of the house being alive again.

5

The Long Pause

Those first days at home had been good. Not easy, nothing about any of this was easy, but good in the way that forward movement feels good when you have been waiting so long for it. I had gotten surprisingly capable at wheeling myself around the house.

Mike had put a small ramp at the front door, and on the better days, he would wheel me out to the patio, where the fresh air alone felt like medicine. We'd play Scrabble out there, and I should mention that I am very good at Scrabble, consistently, reliably, and without apology. He is the gin rummy player in this family, which is fortunate for him, because Scrabble is not where he shines. I can occasionally win at gin rummy, but when it comes to Scrabble, I have the distinct advantage.

I was standing. Not elegantly, not for long, not without the silver walker planted firmly in front of me and both hands gripping it like I meant business. But I was standing on my own two feet, or close enough to it, pivoting myself into the wheelchair, and that meant everything to me.

The nurse had come twice that week, and the physical therapist once for a quick evaluation. I figured out what I could do from the bed on the days when standing was not on the agenda, lifting light arm weights, doing what I could to keep my upper body strong.

Then came the pain.

I had been home for barely a week when the pain came back.

Not the familiar pain I had already learned to work around, dull, persistent ache of bones held together with screws and metal and sheer determination. This was different. Sharper. It came on quickly and with a vengeance, shooting through my left leg in a way that left no room for negotiation. I could not move my leg at all. I knew immediately that something was very wrong.

There was nothing to do but call 911.

The ambulance ride to the hospital was one of the most intense experiences of this entire recovery. Every single bump in the road sent a jolt of sharp shooting pain straight through the fixator and into my leg. No repositioning helped, and nothing to hold onto made any difference. I could not move my leg even slightly, and every movement of the vehicle felt like it was being transmitted directly into my upper thigh bone. By the time we arrived, I already knew this was not going to be a quick visit.

Mike followed in the car again. I don't know which is harder, being the one in the ambulance or the one following behind it.

The doctors, nurses, and technicians moved quickly and carefully. Blood draws, one after another, with long stretches of waiting between the tests being run. Anyone entering my room was required to wear a disposable yellow gown. Swab samples were taken from every incision site and from the growing redness around one of the pin sites drilled into the bone of my thigh. More blood was drawn. More tests were run. Each result confirmed what the last one had suggested.

It was MRSA. Methicillin-resistant Staphylococcus aureus. A drug-resistant bacterial infection that had taken hold at the thigh pin site of the external fixator, the very thing holding my leg together, had become the source of the new crisis.

My husband was in the chair beside the hospital bed when the doctor told us. I looked at him, and he looked at me, and we absorbed it the way we had learned to absorb bad news by that point. You just take it in and wait to see what comes next.

What came next was complicated.

The infection proved stubborn. Over the two weeks I spent back in the

hospital, they cycled through several different antibiotics as new strains of the infection kept showing up that required different treatments. Some were administered intravenously. Some were in pill form. None of them worked quickly or cleanly. This was the nature of MRSA. Resistant, adaptive, not interested in cooperating.

The fixator would need to be surgically removed, but not until the infection was stable enough to operate safely. Operating too soon risked spreading it further, and that was a risk no one was willing to take. In its place, I would eventually wear a non-weight-bearing brace. But we weren't there yet.

I was admitted to the hospital, monitored closely, with no visitors allowed until the infection was under control. I lost my ability to stand, pivot, or sit in a wheelchair. I was bedridden. It was back to ice to relieve the pain, with nurses shifting me from side to side, placing pillows against my back to prevent bedsores from forming.

And we waited for the antibiotics to take hold.

Mike left to go home and sanitize the room completely. He washed the sheets with disinfectant soap and worked to clean the room where germs had been carrying something you do not want spreading.

Before I went home, a PICC line was inserted into my right upper arm. This thin tube had to be threaded through my arm and chest into a vein near my heart to continue delivering long-term antibiotics. These IV antibiotics would be delivered fresh to our home weekly, needing refrigeration upon arrival. The other antibiotic pills came home with us. Twelve weeks of daily treatment and weekly blood draws throughout was the protocol. I heard that number, did the math, and looked out the window without saying what I was thinking.

Once home, he continued to wear gloves when handling soiled linens, washed them separately from the rest of the household laundry in hot water with bleach when the fabric allowed, and dried everything on high heat. He changed the sheets more frequently than before while there was still drainage at the pin sites. The goal was not sterility; that is not achievable at home. The goal was to reduce bacterial spread and protect both of us from reinfection or transmission for a few more weeks.

We would not be able to have visitors during that time. It felt like Covid all over again. The house that had always had people moving through it, grandchildren underfoot, friends stopping by, the ordinary traffic of a life well lived, all of it stopped. Just the two of us, managing the protocols, getting through each day.

My daughter-in-law Dana filled the gap in the way that only someone who truly understands a family can. She cooked meals for us, and my son dropped them at the doorstep, often leaving cards with hearts drawn on them that the girls had made for Grandma to get better soon. I have those cards still.

Dr. Lombardi

Mike had become, by this point, something extraordinary.

He had learned to administer the IV antibiotics through the PICC line himself, which required a level of precision and care that moved me deeply every single time I watched him do it, which was every morning at 9:30 am. He took the antibiotic syringe out of the refrigerator thirty minutes before administering it. The instructions were specific about this because cold medication going directly into a vein near your heart is not something your body appreciates. Each time, he followed a sterile protocol with the focused attention of someone who understood exactly what was at stake.

But before any of that, he would put on music.

Oldies but goodies. The fifties music with the songs he has loved his whole life, and that I have heard so many times over fifty-plus years, that I know every word without trying. He would start singing along, not performing, just singing the way people sing when a song is part of them. Somewhere in the middle of the verse, I would follow his lead and sing along too. The two of us, in that room, while he carefully and patiently administered medication into my arm, both of us singing along to songs from before either of us was old enough to appreciate them.

I do not know if he planned it that way or if it simply happened and then became the ritual. Either way, it worked. You cannot be frightened and singing at the same time. At least I cannot.

He also learned to clean and dress the pin sites himself. Betadine. Sterile gloves. Sterile swabs. The meticulous wrapping of the long gauze bandages in exactly the way he had been instructed to do, because exactly was the only acceptable standard when you were dealing with an active infection. He did it every day without complaint, without drama, with the same steady competence he brought to everything.

Our kids started calling him Dr. Lombardi. He ate it up, every bit of it. And he had earned that title.

Physical therapy stopped for a while. And with it, so did standing.

Standing was not gone, I want to be accurate about that because accuracy matters when you are trying to hold onto hope. It was paused. The antibiotics were doing their work, and once the sharp shooting pain subsided, movement became possible again. By this time, though, my legs had become so weak that the only way for me to transfer into my wheelchair was to use a slideboard.

It took a lot of trial and error. The two of us soon developed the wordless choreography of people who have done something difficult together long enough to stop needing instructions.

My body was changing in ways that were hard to look at. My stomach was softer, rounder, puffier in a way that did not feel like mine. My hair had grayed more than I was prepared for. I looked in the handheld mirror one afternoon and saw a woman who was older than I felt, and I put the mirror down and did not pick it up again for a while.

No one warns you about this part. The medical team tracks your infection markers and your blood pressure, your wound sites, and tells you your circulation has slowed to a crawl from the inactivity. No one sits down and tells you that one of the harder things about a long recovery is watching your body become unfamiliar to you. That the face in the mirror might stop looking like your face. That this is its own grief, separate from the injury and the fear and the pain, and that it arrives quietly and stays.

6

Looking Within

I already understood that those twelve weeks were going to ask something of me that I had not yet been asked. Not physically. Physically, I knew what was required. Be still, good nutrition, take the antibiotics, let the medication do what medication does, and wait. I had gotten surprisingly good at waiting over the past few weeks. What I had not gotten good at was the silence of a body that was being managed by others. Somewhere inside all of that management, I was disappearing. Not dramatically. Just quietly. The way a fire goes out when there is nothing left to feed it.

I was no longer the one who kept all my plates spinning. I had become the thing being handled by others, while all my plates came crashing down, and I could not pick up a single one. Mike carried the weight for both of our lives, which felt like two things simultaneously. Gratitude so full it almost hurt, and that I was disappearing and taking him down with me.

People who know me know what I have always said, "Attitude is so important." I had said it to other people more times than I could count, and I had meant every word of it. It is easy to mean something like that when you are the one saying it from a position of capability, when your legs work, and your body is cooperating, and the hard thing is something happening to someone else.

When the people who loved me said it back to me, when they told me how strong I was and how inspiring my attitude was and how I would be back on

my feet in no time, I nodded and smiled the way you smile when someone is trying to help, and the words they are offering are the only ones they have. And then I lay in the dark feeling just a little more alone each time, because what they were reflecting back to me was not what was actually happening inside.

The truth was, I was struggling far more than anyone realized. Beneath the smiles and the reassuring nods, I was a mess. I was scared, angry, and losing hope in small increments every day. I was tired of performing the version of myself who still had a "good attitude," while watching my body become something I no longer recognized.

But here is the kicker. I knew, even then, that I was making it harder for myself. Not because having a good attitude is wrong. Not because hope was false or pretending to feel better than I did was inherently dishonest. But because I understood, intellectually, from everything I had learned and taught, that despair has a biology just as hope does.

I knew that the stories we tell ourselves about our circumstances have a direct and measurable effect on what our bodies are able to do. I was in the darkness, and knowing it added its own pressure, because I was no longer only suffering; I was also aware that my suffering might be amplifying itself.

It was an exhausting place to live.

The Night Search

Late one night, when the house was quiet, the kind of eleven-thirty quiet that leaves you alone with your own thoughts, whether you want to be or not, I opened my laptop. I was not looking for anything specific. I was just looking, the way you do when you are desperate and hopeful in equal measure and not entirely sure which one is winning.

I already knew about Marisa Peer from those hospital nights. Her video was still on my phone. But I needed more that night. Something that could reach the part of me that the circumstances had gotten to.

That is when Dr. Joe Dispenza kept appearing in my feed.

I had come across his work before, but never followed it closely. His videos

had a way of finding me anyway. The algorithm apparently had decided that a woman lying in bed at midnight searching for healing content was exactly his audience, and for once the algorithm was right. He talked about being the creator of your own life, about the difference between waiting for something to happen and actively choosing what comes next. I had always believed something like that. I had spent years trying to live it. But believing something in ordinary life and believing it from inside a situation like this one are two entirely different exercises, and I was only beginning to understand the distance between them.

And then he told the story of a man who had attended one of his retreats, arriving in a wheelchair, and walking out onto the beach in a single weekend. I am not an easy person to impress, and I do not reach for things I cannot find a reason to believe in. But that story blew me away. It still does. And in those weeks of stillness, with a PICC line in my arm and my muscles disappearing with standing a distant memory, being blown away was exactly what I needed.

The pieces to a puzzle I had been trying to solve were beginning to come together.

Marisa had spoken to her body the way you speak to something you trust completely to respond. Directly. With authority. Not asking. Telling.

I had taught versions of this truth to other people through my work in Belief Coding®, the understanding that early patterns and feelings of not being enough, of needing to stay small, of not wanting to become a burden, don't simply dissolve because circumstances change. They keep running quietly in the background long after the moment that created them has passed. I knew and believed this.

And Dr. Joe spoke about permitting yourself to stop fighting it. Lying there in the dark, listening to him talk about healing already happening inside the body, whether you could see it or not, cells working, tissue rebuilding, a process already in motion without my effort or interference, allowed me to see something in me that had been braced and managing and fighting for weeks. I found myself simply exhaling. His message underneath everything was simple. Get out of your own way.

I started writing.

At first, just affirmations. Short, specific sentences I could return to when my mind started arguing with me. Then I started writing my own scripts. I kept them simple at first, then slowly made them more direct. Gentle enough not to trigger resistance, but clear enough to get through to my body and my mind. I wrote them on my laptop and read them into a recording app on my phone.

Speaking those words was powerful. Hearing my own voice played back to me, especially in the dark at night, was different from anything I had expected. There was something about it being my voice, the same voice that had spent years coaching, encouraging, holding space for other people, now turned toward myself. It reached somewhere that watching videos and thinking hadn't quite reached. I believed it more when I heard it spoken to me in my own voice. I couldn't dismiss it the way I could something outside of me.

Speaking to My Body

I placed my hand on my thigh and listened.

"My immune cells move through my leg like golden healers, clearing, cooling, protecting, restoring," my own voice said through the speaker.

I breathed in slowly, then out.

"I direct my bones to rebuild strong, clear structure. Calcium and collagen weaving together."

Another breath in. I held it. Then, released it.

"My body settles into trust. It knows how to heal as I rest."

I let the breath fall out of me.

Some nights it felt like genuine peace. Other nights, it felt like a performance I was giving for an audience of one. Either way, I kept going

I do not know with certainty how much of it changed what was happening physically inside my leg. What I know is what it gave me, something to do with the stillness. A way to participate in my own healing when every other form of participation had been taken away. A conversation with my own body that was not about fear or loss or the next hard thing, but about

possibility. About trust. About the quiet radical act of deciding that I was going to meet this with everything I had, including the things that no one else in my recovery was thinking to offer me.

Still These Hands

I remember how I would lie in bed and look around at that room and feel something I did not always have words for. It was complicated. The easel was still there, pushed to one side of the corner, the painting on the canvas half finished. The sewing machine sat on its table, covered now. The paints, the fabric, the supplies of a creative life built over years, still visible, still present, all of it just out of reach. Not because it had been taken away. Because I could not stand long enough to use the easel or sit properly enough to use the sewing machine. And because the kind of creating I loved required space and mess and the freedom to spread out, to let a project take over a room. A hospital bed in a craft room did not leave room for that.

My legs did not work. But my hands and arms still did.

That distinction mattered more than I knew how to say at first. I kept coming back to it, turning it over the way you turn over a problem you have not yet solved but feel certain has a solution somewhere. I still had my hands. I still had my arms. I still had the part of me that needed to make something, that had always needed to make something, that grew restless and inward when there was nothing to create. What I needed was a craft that could come to me rather than requiring me to go to it. Something that could live on a lap. Something that did not need a table, or standing, or a room full of spread-out chaos.

I started watching YouTube videos. Crochet first, because I had a friend named Katie who had once tried to teach me. I remembered my impatience then, and thought maybe this time, with so much time on my hands, I could learn it by watching videos, pausing, and rewatching until I could catch on.

Katie was the keeper of the campfire on our girls' camping trips. The one who could coax a flame out of damp wood, who led us in the silly songs she had learned as a Girl Scout, strumming her guitar just enough to give the rest

of us a sense of rhythm even when we could not carry one ourselves.

She was the inventor of Smor-e-os, which is exactly what it sounds like, s'mores made with Oreo cookies instead of graham crackers, with marshmallows folded inside. The genius of it was in the Oreo flavors. Original, lemon, and peanut butter, all of them turning an ordinary campfire tradition into a matter that required genuine deliberation. We made smor-e-os at every camping trip after that first one, and it never got old.

When Katie had tried to teach me how to crochet, I had been what I can only describe as fumbly fingered. The hook, the thin yarn, the way your hands have to work together and separately at the same time. I watched several YouTube videos, hoping that seeing it slowly and repeatedly might make it click.

It did not. Crochet was not my forte, and no amount of watching was going to change that.

But then something else appeared in my feed.

Chunky yarn blankets.

I had not been looking for them. They appeared the way things do online, one interest leading quietly to another, crochet videos opening into the wider world of yarn crafts. Somewhere in that widening path, a YouTuber named HolyMolyDane was demonstrating how to finger knit a blanket using nothing but thick yarn and your own two hands instead of needles.

I watched the first video all the way through, then watched it again after ordering the first of what would become many skeins arriving at my doorstep.

HolyMolyDane had a presence that came through the screen in a way that made you want to keep watching. She was warm, clear, and patient in the way of someone who genuinely wants you to understand rather than impress you. She gave just enough information in each video to take in before moving on to the next step. Not too much, not too little. The techniques were simple enough for me to follow, and forgiving enough that fumbly fingers would not ruin them.

And the yarn itself. Thick and soft and substantial in a way that reminded me of something childlike. Chunky crayons. The ones children use before they are ready for the smaller ones. Easy to hold, easy to grip, and the right

size for hands that are learning something new.

That was me.

My legs did not work, but my hands still did, and all the colors were like the chunky crayons of the yarn world. I could hold them in my hands, work with them on my lap, and make something real, and warm, and useful from a hospital bed in winter.

The first blanket I made was for my youngest son Joe, for his 40th birthday, both of us stepping into a new decade of sorts, both of us figuring out what came next. I made it in colors I thought he would like. For the first time in months, I felt like I had something that I could give rather than only receive.

After that came blankets for my two teenage granddaughters, Lacey and Avery, for their birthdays. These teenage cousins are like two peas in a pod, and making them matching blankets just felt right. I planned the design carefully, the way I plan the crafts I love most, with intention, with a clear vision, and with the pleasure of knowing what something will become before it exists.

This one became a giant bag of popcorn when it was rolled up. White and red stripes for the bag, yellow for the popcorn kernels. Unrolled, it became a throw blanket, warm and generous, made for movie nights on the sofa.

I loved making them and plan to mail them off in time for each of their birthdays.

I am planning blankets for everyone now, birthdays, Christmas, and any occasion that gives me a reason to reach for the yarn.

I will still paint, and I will still sew, and I will return to both when my legs allow it. The easel is waiting. The sewing machine is patient. But the chunky blankets are something that I can do with the limitation of not being able to stand or sit at a table or spread my mess across a room. These new works are me reaching forward, adding to what I can do, while the old me waits quietly in the corner

I was in a hole. Somewhere inside it, I found that even in the falling, I was not without resources.

Looking back at those weeks now, I can see something I did not realize then. The recordings I made in the dark and the blankets I finger knitted in

the light were the same thing. Not similar. The same. At night, I spoke to my leg, told it what I needed it to do, asked my cells to work, my bones to find their way back together. During the day, I sat with chunky yarn in my hands and made something warm and real and giveable. Both were the same refusal. I was not going to be only a body waiting to be fixed. I was still a person with something to offer, something to say, something to make.

Healing in the dark.

Creating in the light.

I held onto both of those things with everything I had.

7

Season's Change

The light outside turned gold and then gray the way it does in late November when the days shorten, the air shifts, and the world begins quietly preparing for winter. The decorations, the shopping, all of it was once mine to do and mine to love doing. That was me. One of the ways I knew myself was through the rituals of the seasons, and through showing up for the people I loved in all the small and meaningful ways that add up to a life.

I was grateful. I want to say that clearly because it is true. I will always be grateful for my leg, and for my husband, and for every small sign that my body was trying to heal. But fear was there too. So was sadness. I had not yet learned how to let myself feel either one without pulling back from it.

That year, I would experience the season differently.

There would be no family dinner that year. No table to plan, no grandchildren underfoot in the kitchen, no the-more-the-merrier chaos that I had always loved about the holidays. Just Mike and me, the protocols, and the doorstep deliveries from people who loved us and could not come in.

There is a kind of grief in that which is hard to explain to someone who has not lived it. Not the sharp, sudden grief of an emergency room, but something slower. Quieter. It arrives in small waves rather than one blow. The holiday you do not host. The table you do not set. The cart you do not push through a store while searching for the thing each grandchild would love most. Each one was a reminder of what was different now, but also of what still matters.

A life continuing, even if I am not moving through it in the same way.

That autumn, I watched the season change from a wheelchair, and I learned it did not stop changing just because I was sitting still.

Thanksgiving

Thanksgiving had arrived quietly, the way holidays do when you are not well enough to meet them the way you normally would. No fanfare. No preparations humming in the background. Just the calendar turning to a day that suddenly meant something different than it ever had before.

We would have normally gone to Andrew's house. His wife Dana would have cooked, and the kitchen would have been warm and loud and full of the kind of cheerful chaos that comes with a house full of people who love each other. I would have brought my yams with marshmallow topping, a dish I had been making for so long that it had become part of our family rhythm. It was expected now, the way certain things become expected when food becomes more than food and traditions become something you share with the people you love.

I liked that. I liked being the person who brought the yams. There is something deeply satisfying about having a thing that is yours to bring, your contribution to the table, your thread in the larger fabric of the day.

That year, I would not be bringing anything anywhere. Even though the antibiotics were doing their job, we felt it was just too soon to take a chance. My immune system was still recovering, and we weren't ready to risk exposing me to a lot of people yet.

The holiday that usually poured outward toward family, noise, appetite, and togetherness had shrunk down to just the two of us eating in a modified spare room that had become my world for longer than I wanted to count.

I will be honest. The mood was low. There is no use pretending otherwise. When your body has been through something serious, when you have been told your leg was in real danger, gratitude and grief can sit side by side in a way that is hard to sort out. I was grateful. Profoundly grateful. Bone-deep grateful that my leg was still there, still mine, that I had not lost it. That

gratitude was not small. It was enormous. But enormous gratitude does not cancel out longing. I longed that day for my normal life, for the noise of my son's house, for the drive over with a dish of yams covered in foil.

Then came Martin.

Martin

Martin is Mike's golf buddy and lives just a few blocks away. He is also a former chef, which is the kind of detail about a person that turns out to matter enormously at exactly the right time. He insisted, and I mean insisted, in the way good people insist on things when they can see you need something and know you are not going to ask for it yourself, on making us a full Thanksgiving dinner. Not a gesture. A full dinner. He cooked it in his own kitchen, and Mike drove over and brought it home.

What he came back with was extraordinary. The smell reached me before the food did, warm, savory turkey goodness filling the room and making it feel, just for a moment, like a real Thanksgiving. There were all the traditional dishes, prepared with the kind of confident seasoning a professional chef carries in his hands after decades in a kitchen. Not fussy. Not overdone. Just right. The way food tastes when someone knows exactly what they are doing.

There was also ambrosia, fruit with marshmallows folded together into something both festive and comforting, along with side dishes that felt familiar and surprising at the same time. The whole meal seemed to say, This is Thanksgiving, and this is a gift.

Mike set up our TV trays the way he had set up everything during my recovery, without complaint, without fanfare, with the steady and unhurried care that I had come to understand was its own kind of love language. He shows it in the doing. In the TV trays. In the drive over to Martin's and back. In the way he arranged the dishes as though we were sitting down to something that mattered. Because it did.

We ate together in the spare room, just the two of us, with Martin's dinner spread out between us. The food was remarkable, warm and generous, and tasting somehow of both effort and friendship, but what I remember most is

the stillness of it. No crowd. No noise. No passing dishes down a long table. Just the two of us, the quiet hum of the house, and a meal that someone who did not have to care had cared enormously about.

I looked at Mike across those TV trays and thought about everything he had carried without wavering once through any of it.

This was not what I had pictured. Not even close. But there is a kind of grace that only arrives when things go sideways, a gratitude you cannot manufacture under ordinary circumstances, and I felt it fully in that room. More than I deserve, I thought.

And more than enough.

That night, we had a Zoom call with the whole family. Everyone in their own homes, some still eating around their own Thanksgiving tables, celebrating a holiday that looked different for all of us that year. Our children are scattered across states, one calling in from another country, everyone navigating time zones and turkey timers. The screen filled with faces, one rectangle at a time, until the whole family was there. Voices overlapping. Frankie jumped onto the bed and wandered through the frame. Our grandson James darted past the screen with a Lego airplane he had constructed, sound effects and all.

The ordinary, beautiful mess of family.

We have our traditions, even on screens. The way certain people always talk too much, and certain people mostly listen and smile. The way the little ones lose interest while the older ones linger. The food comparisons. Who made what? Who tried a new recipe? Who stayed loyal to the one recipe that cannot be changed. We are a family with deep opinions about Thanksgiving food, and distance does not diminish that.

I watched all of it from our quiet spare room, Mike beside me, Martin's dinner still warm in our hearts if not on our plates, and I felt the full weight of what that call was. This was not the Thanksgiving I had planned. But these were my people, loud and scattered and wonderful, calling in from their corners of the world to be together the only way we could that year.

And we were all there.

No turkey or mashed potatoes or yams or green bean casserole could

compare with the thankfulness that filled all of our hearts that night. We were separated by distance and circumstance and a bacterial infection that had changed our plans, and none of that mattered against the simple fact of seeing each other's faces on those screens. We were looking at each other across miles, and the gratitude I felt was not the polite, seasonal kind. It was the kind you feel in your chest. The kind that comes from knowing how close things came to being different. We were all in separate houses, but our hearts were together, and that was more than enough.

That year, I understood Thanksgiving in a way I do not think I ever had before. Not the table or the food or the traditions, though I love all of those things and intend to bring my yams again next year and every year after. The meaning underneath all of it was simpler than that. I was there. The people I love were there. That was the whole thing. That was everything.

One Brace at a Time

After Thanksgiving came a milestone I had been waiting for.

The removal of the external fixator device. It would be an outpatient surgery.

A transport ambulance brought me back to the hospital for the procedure. The frame had been on my leg since October, metal pins drilled into bone, holding everything in place while healing continued underneath. It was being removed earlier than planned because of the complications it had caused.

It was finally coming off.

The surgeon was in good spirits that morning. After the procedure, when he came to check on me in the recovery room, he made a joke.

"Your husband can pick you up in the car now," he said.

I knew it was a joke. I also knew it was more than a joke. It was a reminder that the things I could not do yet were not permanent.

"One brace at a time," he said.

This was the next step. The fixator was gone, and in its place was a brace that kept my leg straight.

I was still in a wheelchair. I was still non-weight-bearing. But something

had changed. The metal cage that had held my leg together was gone, and with it the daily reminder of how close everything had come to being so much worse. What was left was just my leg. Still healing. Still mine.

I rode home in the transport ambulance, the same way I had arrived. Mike met me at the door. There was no reason for him to accompany me to the hospital for this procedure. He did not make a big production of it. But I had noticed him looking at my leg differently as the paramedics helped me back into my wheelchair. I understood what he was seeing and feeling. The cage was gone.

Christmas

By Christmas, we could have visitors.

That sentence alone felt like a gift.

Andrew, Dana, Joaquin, and the girls came in the afternoon. Before they arrived, I dressed with intention, long pants to cover the brace, and a festive red and green blanket draped across my lap that I thought looked rather cheerful and served the dual purpose of hiding the bulky brace underneath. I had thought about what I would wear. I had thought about how I would look. Those things matter, and I do not apologize for that. No pins sticking up through the fabric anymore. Just me in my wheelchair with my Christmas blanket, which felt like a significant improvement over where I had been just weeks earlier. I was more significant than I could have put into words that day, though I understood it completely in my bones.

Mike had done what he could with the decorations. I want to be clear about that. He did what came naturally to him, which was thoughtful and sufficient, and I did not direct him to do more. Decorating has always been my domain, the way the yams are my domain, the way certain things in a long marriage become quietly, permanently yours. I had always gone all out with decorating the house. If I am honest, there can never be too many lights. But this was not that year, and he was not me, and the house looked like Christmas, and that was what mattered. Decorations sparse but present. Enough.

What I wanted to contribute was cookies.

I have always made round snowball cookies at Christmas. They are simple and powdery, and the kind that disappear at a gathering before you have a chance to arrange them properly on a plate. They are not complicated to make, which was exactly the point. I wanted to make something to serve when my son's family arrived. I wanted there to be evidence on the table that I was still in there, still the grandmother who shows up with something homemade, even when showing up looks completely different from how it used to.

Mike moved a couple of chairs out of the way and set me up at the dining room table with my left leg sticking out in front of me. He brought me the ingredients one by one, because reaching across a mixing bowl from a wheelchair requires a kind of logistics that no one thinks about until they are in the middle of it. We figured it out together, the way we have figured out most things during these months, not without improvisation, but together. I mixed the dough. He put the cookie sheets in the oven. We waited.

When they came out, I added the powdered sugar.

I will just say that powdered sugar and wheelchairs are not a natural combination. It got everywhere. On my blanket, on the table, in the air, on Mike, probably on Frankie, who was investigating the situation from the floor with the focused interest he brings to anything that falls. We laughed about it, which was the right response and also the only reasonable one. The cookies were good. The mess was worth it. There were snowball cookies on the table when they arrived, and that felt like something, like proof that the holiday was still happening even if it was happening differently than it ever had before. Like proof that I was still happening.

It was the first time our grandchildren Nora and Daphne had seen me in a wheelchair. I watched their faces when they came through the door, that flicker of uncertainty that little children carry when something about the world does not match what they expected. You can see everything in their faces for just a moment before they adjust. I wanted them to adjust quickly. I wanted them to see their grandmother, not the wheelchair. I was still there. Still interested in everything they were doing, every story, every joke, every question they had brought through the door with them. Still the

same person underneath all of this, even when the outside of things looked different from how it used to be. I hoped they could see that. I believe they could. Children are also more resilient than we give them credit for, and they find their footing faster than adults do if you let them.

There was no dinner together that year. Just a visit, a real one, full in its own way, quieter than usual but no less ours. We exchanged gifts in the living room, and then the children did what children wanted to do when they had been patient long enough.

They wanted to go outside.

Dana disappeared for a moment and came back carrying a large tote bag. Inside were pop-up rockets. Out they all went, my son, my daughter-in-law, my husband, and the kids, all spilling out into the backyard with the kind of excitement that only little children can generate from a bag full of simple toys. Before long, they were stomping rockets into the air, chasing them across the grass, resetting them, and launching them again.

I watched from the window as they all played on the grass. The same grass I used to walk out onto barefoot in the mornings without thinking about it. The same magnolia tree in the corner of the yard, the same flower beds, the same familiar winter light falling across the same yard. All of it exactly as I remembered it.

Our grandchildren ran and laughed and argued over whose turn it was next. Mike helped retrieve rockets from impossible places. Joaquin and Frankie ran from one end of the yard to the other. Everyone was moving. Everyone was laughing. I was laughing too, though they probably could not hear me.

I did not want to slow them down with my presence or make them feel like they needed to be careful around me. So I watched from the window, and I let that be enough, and it was more than enough. I watched them stomp the rockets into the air and chase them across the grass and laugh the way children laugh when they are completely inside a moment, unburdened and fully alive to the joy of having fun.

There is something about watching your grandchildren play that reaches a part of you that nothing else quite touches. That afternoon, watching them through the glass, I felt the future in a way I had not let myself feel it in some

time. They did not know what that grass meant to me. They did not need to. They just played on it, and I just watched, and it was one of the best things I saw all year.

I mean that completely.

Frankie

Frankie had been slowing down for a while.

He was twelve years old, which is a good long life for a small dog. He had been on heart medication for the better part of his final year, the kind of medication that costs more than it should and that you pay without hesitation because that is what you do for a dog who has been part of your family for over a decade. You treat him like the family member he is. You do whatever the vet says for as long as it helps. And then you face the moment when the vet tells you there is nothing more to be done, and you make the decision that no one wants to make, but that love sometimes requires.

We had adopted Frankie when he was a year and a half old. His name at the shelter was Houser, which did not suit him at all. I named him on the drive home. He just looked like a Frankie, small and black and full of personality, with an energy about him that the name Houser could never have contained. Mike took one look at him and agreed immediately.

He was a mixed terrier, pure black with long hair, and genuinely difficult to photograph because his features disappeared into all that black. You would try to take his picture and get back something that looked more like a shadow with eyes than the vivid little character he actually was. He was a small star who loved to perform for treats, which I always thought was endearing.

Shortly after we brought him home, I discovered that he loved to stand on his hind legs and spin completely around for treats. Not just once. Several times in a row, twirling like a little dancing ballerina who had found his calling. I entered him in a dog show on the strength of that alone. He had the moves. He had the personality. He was made for an audience.

He loved to chase the squirrels that ran up the magnolia tree in our yard. He would stand at the base of the tree and wait with a patience that surprised you in a dog so energetic, certain that eventually the squirrel would have to come down. The squirrel never did. Frankie never stopped waiting.

As he got older, he developed grayish-white eyebrows, a white chin, and a white chest with the distinguished markings of a dog who has lived long enough to earn them. His eyebrows in particular became quite something. Full and straggly, sticking up in places, giving his face a character that made you look twice. They were, and I say this with complete affection, exactly like Mike's eyebrows. Mike also has jet black hair that is turning gray. You know what they say about dogs resembling their owners. In Frankie's case, it was simply true.

He was part of a neighborhood walking group. Mike and Frankie were regulars on the daily route, known to everyone. Frankie greeted the world the way he greeted everything: with his whole body, jumping toward whoever he was glad to see, unable to contain his own happiness. He kept his puppy spirit until close to the end. That is the thing about a dog like Frankie. The body slows down, but the spirit does not get the message.

Mike noticed the change first, the way you notice things in someone you walk with every day. The hacking cough had been getting worse. Frankie was slowing on the route. And then one day on their walk, Frankie simply stopped. He lay down on the sidewalk and did not get up. Mike picked him up and carried him home, this small black dog who had always been the one pulling ahead on the leash, now practically still in his arms.

Frankie passed away on December 26th. The day after Christmas.

Because of my limitations, Mike had to take him to the vet alone. I said goodbye to Frankie before they left. I will not describe that in detail because some things belong only to the people who lived them. Then I lay in my hospital bed and waited. There was nothing else I could do. I could not be there. I could not go with him to carry some of what he was carrying. I could only lie there and feel the specific helplessness of loving someone and being unable to show up for them in the moment they need you most.

When Mike came back through the door, he did not say much. That was not always his way. He could fill a room when he wanted to, but that day the quiet was what we both needed. I could see it on him, the stillness of someone who has just done something necessary and hard and is still somewhere inside it. I reached for his hand and held it, and we stayed like that for a while without talking.

The Card

The neighborhood walking group sent a card. Everyone signed it, heartfelt words from the people who had seen Frankie on that route every day, who had watched him greet the world with his whole body, who had loved him the way neighborhoods love a dog who belongs to everyone a little. The card was left in our mailbox. He brought it inside and opened it. I noticed that they misspelled Frankie's name. They wrote Franky by mistake. A minor detail we decided to overlook. What mattered was the truly heartfelt words they wrote inside the card. I watched what the words of that neighborhood walking group did to him, and I was grateful for every person who had taken the time to sign their name.

The house was very quiet after Frankie.

Mike had built his days around those walks in a way that I had not fully appreciated until they were gone. The morning and evening daily routine with the neighborhood group, the simple rhythmic purpose of a dog who needs to go out, and a man who is glad to take him. All of it disappeared in a single December afternoon. I watched him move through the house in the days that followed, and I could see him feeling the absence the way you feel a missing tooth with your tongue. Always finding the space where something used to be.

Before Frankie passed, Mike had started going back to the golf course. I had been nudging him in that direction for weeks, gently at first, then more directly, the way you sometimes have to be direct with people you love when you can see what they need more clearly than they can.

"Go. Play. See your friends. I will be fine," I told him.

He resisted the way he always resists being told to take care of himself. But eventually he went. First, once a week, then his usual twice a week schedule with his golfing buddies. Each time before he'd leave, he'd pack me a lunch, place it in a small cooler, and set it on the table beside my bed. Everything I needed was within reach while he was gone. It was such a practical and loving thing to do, so completely him.

There was something renewed in him when he returned after golfing, like an essential part of him had come back, and witnessing its return felt like its own form of healing. That outlet became more important than ever after Frankie's passing. Golf gave him back the movement and the company and the sense of himself again.

We would get another dog eventually. But in the days after Frankie's passing, that felt far away. Mike was trying to find his footing in his own messy middle while I was still deep inside mine. So we leaned into one another the way we always had, with love, with patience, and the kind of understanding built over fifty years together.

8

Kindred Spirits

We watched the New Year's Eve ball drop in Times Square three hours before it officially became our new year.

That is the reality of living on the West Coast. New York reaches midnight while we are still sitting in the middle of the evening, watching it happen somewhere else first and waiting for it to arrive here. We had done it every year for as long as I could remember. Usually, it felt festive and lighthearted, a borrowed celebration before our own began. That year, it felt different.

Years earlier, we had actually stood in that crowd ourselves once, bundled into winter coats with leg warmers in our shoes, among thousands of strangers waiting for midnight in Times Square. I remember it fondly. Somewhere in a drawer, I still have the ridiculous 2009 glasses to prove it.

Mike remembers it somewhat differently. He complained the entire time that it was too cold, too crowded, too many hours standing in one place with nowhere to move and no easy solution if you suddenly needed a restroom. I was always the adventurous one between us. He preferred the comforts of home and often joked that he held a self-proclaimed PhD in T.V. In his opinion, major events were best experienced from the sofa with a blanket nearby and a bathroom within walking distance.

That New Year's Eve, home was where we stayed.

He wheeled me into the living room the way he did most evenings,

positioning me in front of what used to be my side of the sofa before settling into his side of the sofa, with chips and soda in hand. The room was dim except for the glow of the television and the flicker of Times Square filling the screen. Thousands of strangers stood shoulder to shoulder in the cold, confetti already drifting through the air before midnight had even arrived.

The ball began its slow descent. And we counted the last ten seconds out loud the way we always had, and the second New York crossed into the new year, he reached around the wheelchair and kissed me.

"Happy New Year," he said.

"Happy New Year," I said, squeezing his hand.

Neither of us needed to explain what those words meant. We had made it through the fall, the surgery, the nursing facility, the MRSA, the holidays, and the grief of losing Frankie. There had been moments hidden inside those months when the future felt uncertain in ways neither of us had known before. And yet there we still were, holding hands together in the quiet glow of our living room at the edge of another year.

That counted for everything.

Before going to bed, we called Kristina, who lives on the East Coast. We exchanged sleepy Happy New Year and listened to the noise and laughter of her family on the other end of the phone. They were still outside, her husband John shooting off the last of the fireworks. I asked how our grandson Alex's wedding plans were coming along. October. A year since my fall. I was going to be walking by then. And for a few quiet minutes, the distance between our coasts did not feel very far at all.

When midnight finally arrived on the West Coast, we were already asleep.

During those early January days, my thoughts kept drifting back to the woman I had been before the fall. Not with grief exactly. More with curiosity. The way you study an old photograph of yourself and try to understand what remained the same and what no longer fits.

Before the injury, I had built a life that moved.

I called myself Travel Grandma because that's what I thought I'd most likely be doing, traveling to visit my grandchildren, who were spread all over the place.

But then it became more than that. It was as if traveling was in my bones. It was something I genuinely enjoyed, and it became part of how I understood myself. I loved planning trips, packing bags, catching flights, and heading alone toward someplace unfamiliar without hesitation.

For road trips across the states, I bought a minivan and named her Little Dove. The name felt right immediately. There is something about the quiet steadiness of a dove, the way it moves without rushing, landing softly wherever it chooses to go.

Traveling took me to places that made my heart sing, and my world feel larger. Europe. Asia. Egypt. From the East Coast to the West Coast. To beaches. The high desert. The mountains. Nature restored something in me that ordinary life often could not. Under open skies and among towering trees, I felt lighter, freer, more awake to my own life. Knowing there was always another road ahead, another place waiting to be discovered, filled me with a sense of possibility that felt almost limitless.

For a long time, I believed that freedom was the truest thing about me.

I even had a saying: "If Not Now, When?" Nowhere did those words feel more true than when I was traveling with the whole world stretched out ahead of me.

But I was not always honest with myself then.

Travel brought me joy, real joy. But somewhere beneath all that movement was another truth I rarely acknowledged. Even in beautiful places, there were moments when the experience felt incomplete because the person I most wanted beside me was not there to see it too. I could come home with photographs and stories and memories to share, but retelling a moment was never the same as turning toward someone you love while it is happening.

Some experiences expand you. Others quietly reveal what you are missing.

We had taken trips together before my Travel Grandma years. We traveled to wonderful destinations he meticulously planned, but even then, I knew Mike had never needed to chase the world to feel fully alive. He knew where home was, and he was content there in a way I did not yet understand. I told myself for years that we were simply different that way. I was the adventurous one, always reaching toward the next horizon, the next experience, the next

version of myself waiting somewhere farther down the road.

What I did not understand then was that I was also running.

Not from him. Never from him.

I was running from stillness. From quiet. From the ordinary dailiness of a life that did not always look exciting from the outside, even though it was already full of love and meaning. Somewhere along the way, I had convinced myself that aliveness existed somewhere else, waiting for me in another destination, another photograph, another journey.

Liz

Before the injury, there was Liz.

We met online, the way so many of the best friendships begin now, through a shared interest, a comment that turns into a conversation, and a conversation that becomes something real. Liz lived in Colorado, owned land, and carried a generosity of spirit I recognized immediately as genuine and sincere. Younger than me, an Army veteran and a nurse with a dog named Friday, found on a Friday and named accordingly. The kind of naming logic that tells you everything you need to know about a person's practicality and warmth.

I called her the Gadget Queen. She earned it. While I was the one who loved touring other people's vans and talking about life on the road, Liz was the one who tested the gear that made that life possible, reviewing it honestly, sharing what worked and what didn't, and caring deeply that people in the van life community were properly equipped. And when they weren't, she didn't just notice. She acted. If someone showed up at one of our meetups without a power station or a camp stove, Liz would quietly make it right, sometimes with one of her extras, sometimes by ordering another one and having it sent anonymously. No announcement. No credit. Just the simple belief that if she could help, she should.

Share the land. That was Liz.

She hosted our first Travel Grandma meetup on her property in Colorado, and it was a success in the truest sense of the word, not just in numbers, but in feeling. From that gathering grew something none of us had fully anticipated:

a circle of women with keys in their hands, and then circles beyond that circle. Jan came too, along with her own following, the Butterfly Tribe, and the whole thing expanded in that organic way it does when something is built on generosity and creating space for more people to belong.

My fondest memory was the trip we took to the Redwoods.

Liz had never been to Redwoods National Park. She had dreamed of standing at the base of an ancient tree and wrapping her arms around its trunk, just to feel what it was like to be that small against something so old, so immense, so enduring. We drove up together with her in her red truck with the camper shell, and me in my minivan, which by then was my little house on wheels. We settled into camp with an ease that only exists between people who move through the world at a shared frequency. Jan joined us. She, too, had never been, and the door was always open.

And then there was Harriet.

Harriet was a Steller's Jay. Deep blue in color, bright-eyed, and entirely at home in our campsite in the way wild things sometimes are when they decide a particular group of humans is worth tolerating. She would hop onto the table and peck at whatever crumbs were left behind, watching us with an intelligence that felt almost deliberate, as if she had opinions about us and had decided we were acceptable company. We never fed her. We simply made space for her presence, named her, and felt each time she appeared that small, unmistakable flicker of being chosen by something free.

That is what those years were. Not extraordinary in the way they might look from the outside, but full of quiet moments like that.

My minivan had been sitting in the driveway while I was inside, rebuilding myself one small distance at a time. The life it represented was no longer the one I was moving toward. Not entirely.

The months of stillness were teaching me something the road never had. That home is not the opposite of living. Home is where life deepens when you let it. The man I kept leaving behind in search of something more was, in fact, the most steady and sustaining presence in my life. I had not been wrong to love the road. But I had been looking past something that had been here all along, and it took losing the ability to go anywhere to finally see it.

For Sale

I had been thinking about selling my minivan for longer than I wanted to admit to myself. When Liz found out it was for sale, she called and told me she was coming to buy it. Not a question. A statement, delivered with her usual certainty.

On the day she arrived, Mike wheeled me down the ramp, and Liz took over from there, guiding me down the walkway and across the driveway toward where the van was parked. She had a new gadget to show me, naturally, she always did, and we talked the way we always had, easily, without effort, the way you talk with someone who has logged enough miles beside you to simply be yours in friendship.

She handed me a check. I held it without looking at it.

"Are you sure?" I asked. "You've got the motor home. You don't need this van, too."

She looked at me the way Liz looks at you when she has already made her decision and considers the question unnecessary.

"I'm sure," she said.

I turned back to the van, Little Dove, the one I had renovated with my own hands, the one that had carried me across highways and deserts and coastlines, outfitted with a bed, solar panels, and the high-top that once meant possibility. It sat there now in the driveway like a version of myself I was no longer living inside.

I thought about Harriet on the picnic table in the Redwoods. I thought about the first Travel Grandma gathering, and the unexpected sisterhood that grew from it. I thought about all the miles it had carried me, and the life I was beginning to understand I was no longer chasing.

"Promise me you'll make it yours," I said.

She nodded once. She understood exactly what I meant.

I don't know what made Liz want it, whether it was practical, sentimental, or simply a continuation of what we had built together out there. Maybe she knows. Maybe she doesn't need to define it either. What I do know is that watching her drive away in that van felt like the closing of one chapter

without resistance, and the opening of another without urgency.

I wheeled myself up the walkway. Mike wheeled me up the ramp and back inside.

I sat in the quiet of the living room for a long while and let it settle. Not grief. Not relief. Something softer than both, a kind of alignment. The quiet understanding that a decision had been made, and it was the right one, not because it was easy, but because it was complete.

I was home, and for the first time in a long time, I did not feel as though I had left anything behind that was still asking me to return.

A week later, Liz messaged me. She had named the van *Matilda*.

I smiled when I read it.

Matilda. Of course she did. Liz would never just own a van. She would give it a name with history and character and a hint of mischief, the kind of name that belongs to something already on its way somewhere new.

Share the Land, I wrote back.

It was all I needed to say. It was everything I meant.

9

Finding My Footing

The minivan was gone, the PICC line was still in my arm, and January moved in slowly, gray at the edges, neither the old year nor quite the new one yet. I was still not standing. Still waiting. But the waiting felt different now.

For so long, it had felt like something being done to me. Now it felt more like something I was doing, actively, intentionally, one day at a time.

Every night, I listened to my recordings, visualizing healing as I listened to myself speak quietly to my own body. It was slow, deliberate work, choosing day after day to believe it was going somewhere. Choosing to trust a process that offered no guarantees and revealed itself only in the smallest of ways.

Because it was going somewhere.

Not quite optimism. I had learned to hold hope carefully, without gripping it too hard. But it was something. A direction. The sense that the road was still there, even if I could not yet see very far down it. I was not always sure. Some days were easier than others. Yet something had shifted. I could feel it in the way I was approaching my days, spending less time enduring them and more time inhabiting them.

I did what I could with what I had.

Lifting arm weights every day without fail to keep my upper body strong. I began doing leg raises to rebuild strength in my right leg. On days when I felt energetic, I wheeled myself around the house just to feel like I was moving through my own life rather than watching it from a fixed point.

100 Days

Andrew called to tell me that Nora and Daphne had asked how Grandma was doing now that it had been 100 days.

One hundred days. They had been counting. Nora is five. Daphne is four. I do not know how they knew. I do not know who had been talking, or what they had overheard, or whether someone had simply been marking the days in a way that small children absorb without being told to. What I know is that somewhere in the ordinary days of being four and five years old, they had arrived at 100 and decided that was worth asking about.

Out of the mouths of babes.

Frankly, I had to look it up and count backwards to October 22nd, because I had lost track somewhere inside all of it, the way you lose track of ordinary things when the days stop having their usual shape. I cried when I saw that they were right. Not the overwhelmed kind of crying. The good kind, the kind that comes from being loved in a way you did not see coming and did not know you needed until it arrived.

February arrived, and with it the first real signs that my body remembered what it was supposed to be doing.

I was getting stronger in ways that were small enough that no one watching from the outside would have noticed, but that I felt from the inside with the attentiveness of someone who has been paying very close attention to her own body for four months.

Then one afternoon, a delivery arrived at our front door.

Becoming Untethered

It was a kit, a carefully packaged medical kit delivered ahead of the nurse scheduled to remove my PICC line.

This nurse was not like the others who had come to the house. She was a vascular access specialist, trained specifically in the management and removal of PICC lines, and one of the only clinicians qualified to perform the procedure at home.

She arrived with a quiet professionalism that immediately put me at ease, the kind of manner that tells you, without words, that the person standing in front of you has done this before and knows exactly what they are doing.

She opened the kit with care.

"Put this on first," she said, handing me a mask.

I put it on. She put on her own.

Then she began unwrapping the kit, each layer looked like it revealed another sterile surface, another carefully packaged instrument. The whole thing seemed assembled by someone who understood that a single moment of carelessness could undo everything.

She laid out sterile placemats on the surface beside me, one at a time, building a small protected field on my chest.

"Look away," she said. "Don't breathe toward any of the equipment, even with the mask."

I turned my head.

I heard the soft sounds of her careful hands moving through a precise sequence, unhurried and methodical. I did not watch. I just breathed beneath the mask and waited, listening to the rustle of packaging and the quiet rhythm of someone completely at ease in her work.

It did not take long, but just enough, which is the thing about people who are genuinely skilled at something. They do not rush, and they do not stall. They simply do the work at the pace the work requires.

And then it was done.

She showed me the PICC line, that thin tube that had been threaded into a vein near my heart since November, the physical reminder every single day of those twelve weeks. It had tethered me to a schedule that never took a break, a constant presence that had become part of the landscape of my days.

Now it was out. It was over.

She dressed the site, gave me instructions, rolled up the remnants of the kit and left.

I sat there for a moment after she was gone.

Mike appeared in the doorway.

"How do you feel?" he asked.

I thought about it.

"Lighter," I said.

He smiled.

"Good."

Without the PICC line, I could almost pretend, for a moment, that I was just a woman sitting in her craft room rather than a woman in the middle of the most prolonged physical experience of her life.

Almost.

Medical Appointments

I had not been in a regular vehicle since before the fall. Transport ambulances had taken me wherever I needed to go. But the upcoming doctor's appointments were all routine follow-ups now, and transportation was no longer included.

We were on our own.

My leg was still locked in a straight brace. There was no way I could sit in a regular car. One of our neighbors suggested the Age Well agency. I looked them up and made the call. They offered wheelchair van transportation and were able to get me to the appointment and back.

The first time the van pulled up in front of our house, I felt a strange mix of gratitude and something I can only describe as embarrassment for needing something I had never imagined I would need. It was one of those things I had spent a lifetime noticing without really seeing. I had watched them pull into parking lots. Seen the ramps lower. Seen wheelchairs go in and out. Then I would continue with my day without giving it another thought.

Now it was parked in front of my house.

Mike helped wheel me down the walkway to the waiting van. I remember feeling exposed somehow, sitting lower than everyone else, waiting while the driver lowered the ramp. Nothing about it was difficult. Nothing about it was undignified. Yet I was acutely aware that this had become my reality.

The driver was patient and kind.

"Take your time," he said as my husband helped maneuver me into position

before taking a seat himself.

"Thank you," I said, meaning it more than my words conveyed.

The driver secured my wheelchair to the floor with heavy straps and seatbelts bolted directly into the van. He checked each one carefully before standing up. Only then did I allow myself to relax.

As the van pulled away, Mike sat nearby in one of the passenger seats, coming along as my caregiver. I looked out the window and watched my neighborhood go by. Streets I had driven a hundred times, maybe a thousand, now appeared from a different angle, a different height, and with a kind of attention I had never given them before. There was the coffee shop on the corner, the park where people were walking their dogs and going about their ordinary Tuesday afternoon lives. That ordinary outdoor world, continuing exactly as it always had, indifferent to the fact that I had been absent from it for four months. Strangely, I did not resent that. I was happy just to see it. Even from a wheelchair van. Even through a window. For the first time in a long time, I felt connected to something beyond the walls of our house.

I had two appointments scheduled in the same week. One with the vascular surgeon and one with the orthopedic surgeon to check on my progress.

I had not seen the vascular surgeon since the surgery. I was asked to arrive 30 minutes before the appointment for an ultrasound and a series of blood pressure checks.

The technician moved from one measurement to the next, wrapping cuffs around my thigh, ankle, and foot while the machines hummed softly. I heard the rushing sound of blood flow through the Doppler speaker, the same sound I remembered from the emergency room, from the night the surgeon had pressed that same device behind my knee and found almost nothing. Hearing it now, steady and present, was its own quiet relief.

There was something else on the agenda that day, too. The stitches. They had been in far longer than originally planned. Then again, everything had been longer than originally planned. The MRSA had pushed this particular milestone back until the infection had resolved, and it was safe to proceed.

My orthopedic surgeon had mentioned them when he removed the fixator. He could have removed them himself, but he said he would not. It was a

matter of ethics, he explained. The surgeon who made the initial incision should be the one to close that chapter.

That felt right to me, and there was something meaningful about hearing him say it. A professional courtesy that spoke well of both men. So it was the vascular surgeon who removed them. The man whose hands had restored circulation to my leg that October night. The man who had stayed up until 3:00 in the morning to give me back something I had come within hours of losing permanently.

I had not seen him since the surgery, and sitting across from him in that exam room was its own quiet experience. Not dramatic. Not tearful. Just the particular feeling of being in the presence of someone to whom you owe something that cannot be adequately repaid.

How do you thank someone for saving your leg? For the ability to walk again someday and all the ordinary things you may never fully appreciate until they are nearly taken away?

As I sat there smiling while he worked carefully and without ceremony to remove the stitches, the way skilled people do things they have done thousands of times before. When he finished, he reviewed the ultrasound results and the blood pressure readings from up and down my leg. Then he examined my ankle himself and took a careful look at my toes. The numbers were good. The bypass was holding. Everything the surgery had fought for was working exactly as it should.

When we left that appointment, Mike and I carried something home with us that we had not felt in quite a while. Evidence. Concrete, measurable, undeniable evidence that the bypass was holding strong. The leg was mine to keep.

Later that same week came the appointment with my orthopedic surgeon.

Before I ever made it into his exam room, I was taken down the hall for X-rays.

The technician looked at the order and asked if I could stand against the imaging machine. I remember looking at him for a moment, almost startled by the question itself.

Stand? The word felt oddly foreign. I could not. Not even close.

He disappeared for several minutes to get the orders changed. When he returned, he gave a small nod.

"Change of plans."

Then he pulled a walker from the corner and moved me close enough to help me pivot onto a narrow table beneath an adjustable overhead imaging arm that reminded me vaguely of the X-ray machines used in a dentist's office. Mechanical. Impersonal. Suspended above me with deliberate precision.

Everything about the process required planning, assistance, and repositioning. Nothing about movement was simple anymore. By the time I finally made it into the exam room, I was exhausted.

The room itself was small and crowded, barely enough space for my wheelchair to clear the doorway. Everything looked perfectly arranged for bodies that could climb, pivot, stand, and adjust themselves without having to think about any of it. The nurse adjusted the height of the exam table and helped me onto it while my husband supported my braced leg. Then she rolled my wheelchair back out into the hallway because there was nowhere else to put it.

I watched it disappear through the doorway. The feeling surprised me. For months, that wheelchair had represented everything I could no longer do. Yet watching it leave felt strangely unsettling, as though my only means of getting around had temporarily been taken away.

A few minutes later, the orthopedic surgeon entered the room.

He carried the same calm steadiness I remembered from the hospital, the quiet confidence of someone deeply familiar with difficult things. He greeted me, shook my husband's hand, and moved toward the illuminated X-rays. For several moments, he studied them in silence, one hand resting lightly against the frame while the white light reflected across his face.

He was neat and composed, precise in both movement and speech. Nothing about him felt hurried. He examined the images carefully before turning his attention to my outstretched leg. I watched his face the entire time. The brace came off. He asked questions. He checked swelling, movement, angles, and toes for the outward signs of healing, too. And all the while I watched his expression for clues before he ever spoke.

Finally, he declared it was time for the next brace.

His nurse stepped out and returned carrying it. At first glance, it did not look dramatically different from the previous one. The same general structure. The same side bars, supports, and Velcro straps.

She secured it in place.

The doctor adjusted the dial on the side for a slight knee bend and showed me how to lock it straight for standing and release it for sitting.

"This will allow 50% weight bearing," he said.

He demonstrated as he spoke.

"Even weight on both legs. Controlled side-to-side movement. Nothing rushed. About six more weeks before full weight bearing."

Then he looked up at me.

"Ready to try it?"

I glanced at Mike in the chair wedged into the corner. He did not say anything. He just gave me a look that said, You can do it.

I looked back at the doctor.

"I think so," I said.

His nurse positioned a walker in front of me.

The doctor extended his hand. I took it, holding on a little tighter than I intended.

"There you go," he said.

He guided my other hand to the walker and placed a steadying hand against my back.

I leaned forward. Pushed through my arms. And stood. It wasn't steady. It wasn't graceful. It wasn't certain. But I was up. For a second, maybe less, both feet were on the floor. The walker stood firm in front of me. Mike sat only a few feet away.

And the leg held.

After everything that had happened, after surgeries and infections and months of wondering what would come next, the leg held.

"How does it feel?" the doctor asked.

"Strange," I said. "Good. Both."

Even as I answered, I could feel the effort catching up to me. My arms

strained to keep me upright. My hands gripped the walker handles so tightly that my knuckles turned white. When I lowered myself back onto the exam table and scooted into place, I realized how much strength I had lost. Not just in my legs. Everywhere.

It felt as though strength had quietly slipped away while I wasn't looking. I sat there for a moment, letting that settle. But more than anything else, my thoughts kept returning to one fact. I had stood. Only for a second. But it was something I had not done in a very long time.

On the way home, I looked out the van window at the same streets I had watched on the way there. They looked different. I am not sure I can fully explain why. They were the same streets. The same houses. The same intersections. But I was not quite the same person who had looked at them an hour earlier.

I could stand again. Only briefly. Only with help. But I could stand.

"You did great in there," Mike said.

I looked out the window and smiled.

"I can stand again," I said.

He laughed.

The sound filled the van.

And I let it.

10

Becoming Mobile

Physical therapy started again, this time from a very different starting point. I was returning to a body that was no longer capable of what it had been before. It was weaker, with new hesitations, a new and unfamiliar way of moving through space. I had to learn it the way you learn a person rather than a skill.

Carefully.

Without assuming you already knew it.

The first time around, before the MRSA, I had been building from a real starting point. I was not bedridden. I had one good leg. There was something to work with.

This time, I was further back than that, and I knew it. The frustration of it sat underneath every session.

A different therapist showed up most weeks, each arriving with my file and a version of me that didn't match the one in front of them.

We would cover the basics. I would show them what I could do.

They told me there was nothing more to work on. And then they would leave. When the 50% brace came, the sessions still felt like they were covering the same ground. Some weeks, no one came at all. What I didn't know until later was that insurance had set a limit on how many visits I was allowed. The sessions I did get were being counted down against a number no one had told me about, and the weeks when no one showed up were weeks I would never get back.

The system had flaws, and I was the one absorbing them.

The real work happened between sessions, in the spare room, with Mike standing in front of the walker, holding it steady so it would not move.

Small Victories

The hospital bed still had to be raised high enough to give me leverage to stand. I sat at the edge of the bed and got ready, leaned forward, and pressed down through my arms. For a moment, nothing happened. My body seemed to pause, as if it had to remember what came next. Then, slowly, I began to rise.

Not smoothly. Not all at once.

My right leg would hit the ground as I leaned forward. My left leg, braced and uncertain, took the weight awkwardly but held. I could feel how much I was asking of it. Standing was not just getting upright. It was finding my balance in a body that no longer knew the routine. Once I was there, everything had to adjust. My grip. My stance. The way I placed my weight.

The brace allowed me to begin putting weight on the left leg, but I still had to feel my way into it, shifting carefully, finding the line between enough and too much, between trusting the brace and overtaxing it.

Physical therapy had shown me where to place my foot and how to move my weight from side to side. But knowing and doing were not the same thing. Each movement took focus. Each adjustment took patience. And slowly my body started to understand the pattern, even if it didn't fully trust it yet.

Then came the first step.

Not quite walking. More of a small hop forward with my arms and my left leg carrying enough weight so my right foot could come along one careful hop-step at a time. It felt tentative at first, testing it before you put your full weight on it.

Then another step.

I stayed close to the bed, practicing just a few steps each day, moving forward and back with Mike nearby. I soon began to lean into it more with less hesitation. I found myself thinking less about what might go wrong and

more about what might be possible. I could feel the first stirrings of trust returning. And that is how it started.

The first time I tried to make it all the way to the spare room door, he followed so closely behind me I could feel his nervousness in the air between us.

"Don't hover," I told him.

"I'm not hovering," he said.

He absolutely was.

I pushed the silver walker forward and fixed my eyes on the door. My arms trembled from the effort of holding myself up longer. My left leg still seemed uncertain of its place, and my right leg, weakened from months of not using it, was no longer the steady partner I had always counted on.

"You okay?" he asked.

I nodded. I wasn't entirely sure.

It wasn't until I turned around and made it back to the hospital bed that I could speak.

"Yes, I am okay," I said. "I made it." And let out a breath I did not realize I had been holding.

It sounds small until you have lost the ability to do it. Making my way to that doorway and back felt like such a huge accomplishment. Recovery is built out of moments like this that most people would never think twice about.

The following week, as I got a little better at shifting my weight, I set my sights on the living room.

I asked Mike to place chairs along the route before I tried it, just in case I needed to stop. He did it without comment, moving each chair into place with the quiet resignation of someone used to my changing needs.

I stood in the doorway for a long moment, gathering myself. Then I took the first small step into the hallway. Then another. I moved through the dining room, one careful push of the walker at a time, and into the living room.

When I reached it, I looked up and saw the afternoon light pouring through the front window. I stood there for a moment, just breathing. Just looking.

"You did great," He said, lifting a clenched fist in the air.

"Thanks," I said, and I meant it.

My gaze drifted to the sofa. *One day,* I thought. Not today. But one day.

The days kept building on each other the way recovery does when it is finally moving in the right direction. The walker was getting easier to manage. The transfers from bed to wheelchair were becoming more fluid. The distance I could cover before the fatigue set in was incrementally longer each week. I was getting stronger, and I could feel it not just in the doing but in the wanting to do more.

The Sofa

The sofa had become something I wanted to reach, not just as a milestone. If I could sit there, in my own living room, in the place where my husband spent his evenings, where Frankie would curl up at the end of a long day, I thought I might feel like I was back inside my own life rather than watching it from a distance.

Most evenings we spent in the living room, watching television. Mike wheeled me into the living room and parked my wheelchair at a reasonable angle in front of the sofa.

One evening, I asked him to measure the distance from the floor to the sofa cushion. After that, I practiced at the edge of that bed for weeks, lowering it a little at a time and using the controls to bring it closer to that same height.

Stand. Sit. A little lower each time.

The brace wasn't what limited my knee flexion. My knee would barely bend at all. Still, I thought I might be able to manage if I could slide my left leg far enough forward to compensate for what my knee could not do. The real challenge wasn't sitting down, it was getting back up. If the sofa sat too low, I would be stranded there with no bed lift controls to raise me back to my feet.

When I thought I might be ready, I wanted to try. I asked Mike to stack pillows on the sofa cushion until it was high enough for me to attempt it. He looked at the sofa, looked at me, and started stacking without saying a

word. By then, he had learned that questioning my logic only prolonged the inevitable.

I wheeled myself over, got close enough to hold the armrest, and with a small pivot, lowered myself carefully onto the pillow tower.

It felt a little absurd. It also felt extraordinary. I sat there in disbelief. There I was, on our sofa, like I had returned to a small corner of civilization.

Mike sat next to me, trying not to make a production of it, which was its own kind of love.

The Shower

The shower was its own education.

I had been cleared to take a shower, but was waiting until my legs felt strong enough to attempt it. Our shower is located within the bathtub. Getting to it would require using an over-the-tub shower chair, a long one that fits across the bathtub wall. I had been managing with sponge baths, and the prospect of a real shower was enormously appealing. What I had underestimated was the logistics of it.

It proved to be more of an ordeal than first anticipated.

Once seated, Mike helped me remove the brace. Being out of the brace felt strange. I wasn't sure what to expect. He carefully lifted my leg in an attempt to move it over the tub side wall, both of us moving slowly like we were trying not to startle the whole situation.

"I can't bend it enough to fit inside," I sighed, both of us struggling to find a comfortable way to set it down on the top of the tub wall.

He pulled the shower curtain close to it and carefully lifted my leg, tucking the shower curtain underneath.

"There, that should work," he said, with a satisfying grin.

He pulled the remainder of the shower curtain closed around me and stepped away, leaving me to manage on my own, knowing that becoming more independent was important to me.

What followed was an extended negotiation between me, the shower hose, and the shampoo bottle.

The shower hose had a mind of its own. Trying to keep hold of it with one hand while opening a shampoo bottle with the other, all while staying balanced on a shower chair with my leg propped on the edge of the tub and somehow managing to wash my hair, was far more complicated than it sounds. At least it was when you were doing it for the first time in a body that had been through what mine had been through.

Water was getting everywhere.

"You okay in there?" he asked, poking his head in.

"I'm sitting in a chair to take a shower," I answered. "Define okay."

He chuckled softly, the sound that has always been able to loosen something tight in my chest.

"I think we need shampoo bottles with a pump for next time," I remarked.

"You think?" he replied, eyeing the water on the bathroom floor.

We bought the pump bottles. They helped considerably. I still use the shower chair. I have not tried to do without it yet, and I am not in a hurry. There is no prize for rushing these things. Mike quietly removes it when I am finished, like this has become just another part of our day. Some moments in recovery are humbling in ways no one prepares you for. This was one of them, and I would not trade it.

Then there was the matter of the front door step.

The Step

Our home does not have stairs, but it does have a raised front entrance to step up and down from. When I thought of asking one of the physical therapists, he was on his way out the door, and simply, matter-of-factly said, "Always lead with your injured leg."

Without question, I did my best to follow his instructions. I placed the walker on the ground in front of me, just outside the doorway, pulled down the brake handles to lock it, and stepped down with my left leg. I could climb down okay, but leading with my injured left leg hurt so badly when attempting to step up that I could not do it, and I resigned myself to feeling that I just wasn't ready yet.

It was not until I happened to come across a YouTube video, one of the many I had been watching as a supplement to home health physical therapy, that I heard the phrase that explained the process so much better.

"The good go up to heaven. The bad go down."

Lead with your good leg going up. Lead with your bad leg going down. It sounds simple because it is simple, and the moment I corrected my approach, the difference was immediate. I had been putting the full burden of the ascent on the leg least equipped to handle it.

Now it could very well be that I misunderstood the therapist, who said, "Lead with your injured leg," as he was in a hurry on his way out the door. Either way, what it taught me was something I had been learning throughout this entire recovery. Professional advice is not always correct, and our job is to stay curious and trust our instincts enough to question when things seem harder than they should.

Group Chat

Our family is scattered across different places, with our children in different states, and one living in another country entirely. Andrew had started a group chat that had become the thread that held us together during my time in the hospital and has continued to be a running conversation of updates, questions, and small reassurances sent back and forth across time zones.

I'd text updates like, *Made it to the spare room door and back.* They cheered for every single accomplishment. My granddaughter Amanda cheered the loudest.

You might think that sounds small. I thought it sounded small, too, right up until I realized that their cheering was part of what kept me going. They understood what those milestones meant to me. Making it to the doorway. Sitting on the sofa. Standing for a few seconds longer than the day before.

To anyone else, they might have seemed like ordinary things. To me, they were hard-won victories. Having people who recognized that made all the difference. In a recovery that offered very little external validation, where progress was measured in degrees on a goniometer and steps taken between

a bed and a door, the group chat was its own kind of physical therapy. It reminded me that the people who loved me were paying attention, that my small victories were landing somewhere, that I was not moving through this invisible and alone. Some days that reminder was the thing that made me try again.

The Last Brace

We took the wheelchair van to my appointment.

I came home walking.

Not far. Not confidently. Not without the silver walker steady in front of me. But walking.

The last brace was a soft one.

No sidebars. No rigid structure. Full weight bearing.

When the doctor fitted it and stepped back, I looked down at my leg, and it looked almost normal. Not completely, not yet, but closer than it had looked in a very long time.

I stood up slowly and just stood there for a moment.

When I looked over at Mike, his eyes were wet. He looked away quickly, the way he does when he does not want to make something into a moment.

But it already was one.

Sometimes the quiet says everything. He is not a quiet man. Ask anyone who knows him. But he knew when to let a moment simply be what it was. This was one of those times.

During that appointment, the doctor had me follow him down the hall of the doctor's office, Mike and the nurse just ahead, the doctor turned around watching me from the other end, and me bringing up the rear, the way I always seem to be doing in this recovery. Slow and determined and not stopping.

He watched me walk and then came toward me.

"The walker is too low," he said. "You're leaning over it. That means you're holding on instead of just using it for balance. Understandable, but let's correct it now."

He had me place my hands at my sides to measure my wrist against the height of the walker. Then he raised it one notch, stood back, and had me walk again.

"Much better," he said.

It was a small adjustment. It changed everything about how I was moving. I had not realized how much I had been compensating, bending forward, gripping, bracing against the walker rather than simply walking beside it. One notch up and suddenly I was standing straighter.

On the way back to the exam room, I told him I was feeling pain. Not the vague discomfort I had gotten used to managing, but something more specific, a pain in the middle of my left leg, and a twinge in my right one too, which surprised me. My right leg was supposed to be the reliable one.

He listened. And when we were back in the exam room, he told me what he was seeing on the x-ray.

Arthritis. Some of it is age-related. Some of it was post-traumatic osteoarthritis from the injury itself, which he was careful to say was entirely expected with the kind of trauma my leg had been through. The pain when bearing full weight was consistent with that. It would take about a year, he said, for things to resolve somewhat.

A year.

I absorbed that the way I had learned to absorb information, I was not entirely ready to hear by nodding and continuing to breathe and saving the full weight of it for later when I was alone with it.

I also told him about my foot. It had been tingling since the surgery, a persistent sensation that I could not ignore and that worried me more than I had been saying out loud. He was direct about this in a way I appreciated. He told me he had been in the operating room throughout the entire procedure, watching alongside the vascular surgeon specifically to make sure none of the nerves in my foot would be compromised. That can happen, he said, with an injury and surgery of this complexity, and he had wanted to be certain it did not happen to me.

He spoke highly of the vascular surgeon, saying that although he had not been there long, he was someone whose work had consistently impressed him.

He said it with the confidence of a doctor who does not give compliments casually, and I received it the way it was intended. As reassurance. As a reminder that the people who had been in that operating room knew what they were doing and had been paying attention to every detail.

Before I left, he told me something that stayed with me. The soft brace was mine to wean myself off of when I felt ready. No fixed timeline. No specific instruction about when or how quickly. Just when you feel ready, start doing without it for short periods and build from there.

I nodded. On the surface, it sounded like freedom. Underneath it, I felt the weight of being handed a decision I felt unsure about. How would I know when I was ready? What would ready feel like? What if I misjudged it?

He trusted me to figure it out. I was going to have to learn to trust myself the same way.

"Motion is lotion," he said as I was leaving. "Keep moving. Movement is what heals."

I held onto that because it was something I could do. Practical and true and pointing in a direction when everything else felt uncertain.

I left with mixed feelings that I did not quite have words for on the drive home.

It was both enough information and not enough. My mind wanted to know everything, what to expect, when to expect it, what the road ahead actually looked like in specific and honest terms. But I do not think I was ready to hear how much longer this recovery was going to be. A year. Said so matter-of-factly, as if a year were a reasonable and manageable thing to absorb on the way to a wheelchair van. As if I had not already been at this for five months.

11

No Shortcuts

Some days, I felt excruciating pain in the middle of my knee the moment I stood and put weight on it. Not when I was sitting or lying down. Those moments were fine, peaceful even, the leg cooperative and quiet, as if it had made a temporary truce with the rest of me. But standing was different. The pain arrived without fail, not always the same kind, not always the same intensity, but always there, always present, always reminding me that this leg was still very much a work in progress, regardless of whether I was wearing the brace or not.

No one can really tell you what full weight bearing actually feels like. It is different for everybody, and every day.

What I wanted, underneath all of it, was to walk the way I used to walk. Without thinking about it. Without calculating the distance and negotiating with my own body before committing to a simple movement across a room. The idea of that felt both exciting and distant, and that was exactly enough to keep me going.

I did what I always do when I am facing something I do not have a solution for. I started looking.

What followed was, I can say with the honesty of hindsight, a witch hunt for a magic potion.

Chasing Magic Potions

I tried the kinesiology tape first, the kind you see on athletes, those brightly colored strips running along muscles and joints. I had seen it enough times to be curious, and curiosity at that point was as good a reason as any. I applied it carefully, following the instructions, hoping it might give me something to lean on while I tested the leg without the brace.

It did not do much for me, if anything at all. Maybe it works differently for different bodies. Maybe I needed someone to apply it properly. Maybe I just needed it to be something it was not. I set it aside and kept searching.

Then came the topical salves. Several of them, each arriving with promising descriptions and enthusiastic reviews from people who had apparently found exactly what I was looking for. Some of them did nothing at all. Some of them felt like they were doing something for approximately five minutes before that feeling faded and the pain returned exactly as it had been. I spent money I did not need to spend on things that did not work, and I did it repeatedly because the alternative, accepting that nothing was going to make this easier in a simple and immediate way, was not a conclusion I was ready to reach.

That was the loneliest part of it. Not the pain itself, as difficult as it was, but the absence of anyone who could tell me with confidence and finality what was going to work. My doctor told me what was medically appropriate. My physical therapists gave me exercises. The internet gave me opinions ranging from the genuinely useful to the completely unhinged. And I was somewhere in the middle of all of it, trying to sort through the noise, trying to find the thing that would make a real difference, spending money and energy and hope on possibilities that mostly turned out to be exactly that. Possibilities. Not solutions.

There was no shortcut. There was nothing to rub on it that was going to change that reality.

I just had not been ready to know that yet.

There was one exception worth mentioning. Not a potion, not a salve, not something ordered online with high hopes and low results. An ice ball. A metal sphere designed to stay cold longer than a standard ice pack, which

can be rolled across a painful area rather than just sitting on it. It has become genuinely indispensable. Something about the rolling pressure combined with the sustained cold reached the pain in a way that flat ice packs never quite managed to do. It did not fix anything. But it helped consistently and reliably, which put it in a category almost entirely by itself during those weeks. Some solutions are not dramatic. They are just quietly, dependably useful. The ice ball was that.

New Wheels

What ultimately helped the most was simply learning to move differently.

One afternoon Mike and I decided it was time to practice getting into the car. Not going anywhere. Just getting in.

He shifted the front passenger seat back as far as it would go and placed a pillow on the seat to raise the height enough for my knee to manage the angle. Then came the leg. Getting my left leg up and over the door frame required both of us, his hands and my cooperation, and more patience than either of us knew we had that day. We worked at it slowly, without speaking much, the way people who have been through hard things together learn to work. Reading each other without words. There was nothing graceful about it and nothing quick about it.

But eventually I was in the car.

Sitting in the front passenger seat of our own vehicle for the first time in five and a half months, looking out through the windshield at the ordinary street in front of our house.

I sat there for a moment before saying anything. Something about being in our car again, seeing the world from that familiar angle rather than from a bed or a wheelchair van, felt quietly momentous. Like another small piece of myself had been handed back to me.

We figured it out, the way we had figured out everything else. One small problem at a time. Together.

Margaret

Margaret, one of our neighbors, offered to lend me her rollator. It had belonged to her husband, a four-wheeled walker with a seat and hand brakes, and she brought it over one afternoon and said it might help me get around more easily than the silver walker I had been using.

She was right.

There is a difference between pushing a walker and rolling one, and once I felt it I understood immediately why she had thought of me. Something about the way it moved with me rather than in front of me changed the whole experience of getting from one place to another.

The seat turned out to matter more than I first anticipated. On the days when I was in too much pain or my legs felt like they might give out before I reached my destination, I figured out that Mike could push me on it rather than going back for the wheelchair. It was not as safe as the wheelchair. There was a warning sticker on it that said so plainly, and we ignored it plainly, because sometimes the thing that works is the thing in front of you. It came in handy more times than I can count, and it was one of those simple kindnesses that changes the shape of a day when you are living inside limitation.

I wanted to thank her in a way that felt like me.

I made her a sunflower pillow out of chunky yarn. Bright golden petals, the kind of thing that sits on a sofa, bringing sunshine into the room. Margaret had brought so much sunshine into my days with that one simple act of generosity, showing up at my door with the rollator and saying here, this might help, that I wanted to give something back that carried the same energy. Something warm. Something made by hand. Something that said I see what you did, and it mattered more than you know.

She seemed genuinely delighted with it, which delighted me right back.

That is the thing about being on the receiving end of kindness for a long time. When you finally have something to give, even something small, it feels enormous. The sunflower pillow was just an afternoon's work. But to me, it felt like reclaiming something I had been missing. The ability to give.

The Italian Market

Joe was coming.

My youngest son, his wife Ann, and their daughter Avery were coming for a visit. We called Andrew to see if his family could join us too, gathering at the house the way our family does when someone gives them a reason. Our kids had grown up eating Italian food, and I wanted to bring that tradition to the day by purchasing the good stuff from the Italian market nearby.

Getting into the car was still a production. Mike shifted the passenger seat back, placed the pillow, and we worked my leg in the way we had practiced, slowly, the two of us reading each other the way we had learned to do over these months. But once I was in, and the door was closed, and we were moving through streets I had not moved through in months, I felt such a spark of joy. The world outside the windshield looked the same as it always had. I was the one who had changed.

The Italian market smelled the way it always had, which is to say it smelled like somewhere my grandmother would have felt immediately at home. That particular combination of cured meat and aged cheese and something faintly briny hits you the moment you walk through the door, before you have even looked at a single thing on the shelves. It is a smell that does not exist in ordinary grocery stores. It is its own world entirely.

The Parmigiano Reggiano wheels were stacked and tagged near the front, whole rounds of them, the size of something that means business. Alongside them hung the aged cheeses, some wrapped in cloth, some in wax, the rinds dark and serious-looking. Mike pushed the cart slowly while I moved alongside him, in my new rollator wheels, taking it all in. Pasta covered one entire wall. Every shape imaginable, the kind of variety that makes you realize how limited your usual options are. Rigatoni, cavatelli, vermicelli, the small ones, the wide flat ones, and the ones that exist for no reason other than to hold sauce in a particular and satisfying way.

I made my way to the deli counter.

The butcher knew what he was doing. He sliced the salami the way it is supposed to be sliced, thin enough to see through, each piece laid carefully

across the paper. I watched him and felt something I had not felt in a long time. Not just anticipation, but intention. I was here for something. I knew what I wanted, and I was getting it, and there was nothing in me that was going to settle for less than exactly right.

We moved through the market the way I used to move through any store, stopping, choosing, deliberating. The olives came from a case near the back, the kind you spoon yourself into a container, bright green ones, the darker wrinkled ones, and the ones stuffed with things that make the whole jar worth buying. Red peppers, the marinated kind, the kind that goes on the antipasto platter and disappears before anyone has even sat down properly. Artichoke hearts. Mike carried everything. He knew what this trip was for. He had always known what things were for.

By the time we reached the car, I was tired in the good way, the way you get tired from doing something rather than from simply enduring something. There is a difference, and by that point in my recovery, I had become very familiar with both kinds.

The day everyone arrived, the house was full in the way I had been waiting for it to be full again. Voices in every room. Avery's laugh carried from wherever she had landed. The table was set with everything I had chosen at that counter, the salami fanned out the way it deserved to be presented, the olives and the cheeses arranged the way my mother would have arranged them, which is to say with care and without apology for the abundance of it.

We ate for a long time. The way you do when everyone is together, and no one is in a hurry, and the food is so good. Joe had grown up at tables like this one. I watched him reach for the salami the same way he had reached for it as a boy.

The house was loud and warm and smelled like food and family.

The Clinic

I had been watching YouTube videos in the weeks before my first outpatient physical therapy appointment. In those videos, I saw therapists working hands-on with patients, manipulating the knee, massaging the connective

tissue, coaxing stiff joints back toward their natural range of motion. I arrived at my first session expecting something like that.

The therapists who worked with me were both women. They explained that the goal of physical therapy was to help me achieve my orthopedic surgeon's target of a 90-degree knee bend. The first session was mostly an evaluation. I believe my starting point was 55 degrees.

The second session, which took place two weeks later, was the most hands-on. She showed me how to use a yoga strap to stretch my knee. She would press my knee toward the table, measure the bend, then push for a little more several times throughout the session. That part hurt, which told me something was actually being asked of my knee.

Then came the machines.

The sessions that followed were no longer private. Four patients per therapist, each of us working through our own rotation while she moved between us, walking over to help someone onto the next machine, explaining the next exercise, then moving on to the next person. The therapist working with me was attentive. She was organized. There just wasn't very much of her to go around.

I started each session on the NuStep, a recumbent machine that moves forward and back, because my knee wouldn't bend enough yet to ride a stationary bike. The stationary bike was the next stop. I could manage it, but only at the top of the rotation, pushing the pedal back and forth rather than all the way around. That full circle was where I was trying to get, and it sat there for weeks just out of reach every session. On the leg press and other machines, the weight was sometimes too much, and I would have to stop and rest midway through. She would see me, come over, and lower it without comment. That mattered. From there, it was the table for leg raises and bending stretches with a yoga strap, my leg tight and stubborn through all of it.

Then, after most of the sessions came the bending and measuring. That was its own ordeal. Every degree of flexion had to be fought for, and the fighting was breathtaking in the least pleasant sense of the word. The therapist would press my knee toward the table, and we'd both watch the goniometer, a hinged

instrument, like a large protractor, as the needle moved. Or didn't. 65 degrees. 70 degrees. 75 degrees on a good day, back to 72 degrees by the following week. I watched those numbers the way you watch a dial you cannot control, but cannot stop watching. Each degree felt earned. Each one that slipped back felt like something taken.

No one warned me about the exhaustion afterward. I was completely depleted after the hardest sessions, needing hours to recover, sometimes still sore the following day, unable to practice at home the way I was supposed to. As a result, the next session often felt like starting close to zero again. Three steps forward and two steps back. I kept showing up anyway.

And I kept feeling, quietly and persistently, that my knee was not getting what it actually needed. I had learned by then to pay attention to that feeling rather than dismiss it. There is a difference between the discomfort that comes with work and the frustration that comes from something not being addressed. I was feeling the second one, and it was information worth acting on.

That is when I remembered the pool.

The Pool

Our community has a pool with a ramp on one side, an accessible entry, which meant I could hold the railing and walk in rather than use the steps. When I called to check their hours, I was told the pool was closed for maintenance and would not be reopening for another six weeks. I was not surprised. This was how the recovery had gone. Every time I found something that might help, there was an obstacle between me and it. I had gotten good at going around obstacles.

I found a gym that had a pool with a chair lift. I joined it. Mike drove and followed me in. We made our way to the pool area, navigating the fitness center with its weights and treadmills and people who were doing all the things bodies do when they are working properly. This was an indoor pool, and the humidity in the air hits you in the face the moment you walk through the door. He took a seat on one of the side benches. I sat and waited for the

mechanical lift to lower me into the water.

I will be honest with you about what that was like. Walking into a fitness center with a walker, being visibly different and visibly limited in a place built around physical capability, sitting in a chair lift while people around me were actively moving, asked something of me that I was not sure I could give. I was aware of being looked at. Maybe people were not staring as directly as it felt, but the awareness of being seen as diminished in a place built around ability sat heavily on me. I had to swallow my pride. So I smiled at the stares. It was all I could do.

And then I was in the water.

I do not have words that fully capture what that first moment felt like, but I want to try because I think anyone who has spent months in pain and limitation deserves to know that this feeling exists and is waiting for them.

The weight was simply lifted. Not metaphorically. Literally. The physical weight that had made every step a negotiation for so many months was gone. My left leg, which had been stiff and reluctant and full of protest for so long, moved differently in the water. It floated. It drifted. It began, slowly and tentatively, to remember something.

I held onto the side of the pool at first, before asking anything more of myself. Just being there, held by the water, my leg moving in ways it had not moved in months, without asking permission from the pain first. The relief of that first suspended moment reached places I had forgotten were there.

And then I let go.

I walked back and forth across that pool, my left leg still stiff but softening with every pass. Something was releasing that I had not known I was still holding. I stayed in the water until I was ready to get out, and then I stayed a little longer.

Getting the pool covered by my health insurance became its own battle. Our health plan had no facility with a pool and would not contract with any out-of-network facilities that did. I argued. I submitted documentation. I paid out of pocket for a few aqua therapy sessions when the arguing did not work quickly enough.

I learned the basics from those sessions and began to understand something

the pool was teaching me that the clinic had not. Everything I practiced in the water, the stepping, the shifting of weight, the careful negotiation between what my left leg could give and what my right needed to provide, was also practice for what I would do on land. The movements were the same. The water just made them possible first, giving my body a chance to learn the pattern before gravity was added back into the equation.

Mimicking on land what I did in the pool became the bridge between aqua therapy and walking. One informed the other. The pool was not separate from the recovery. It was teaching the recovery what was possible.

When you find something that is genuinely working, something your body responds to in a way that nothing else has quite managed, you find a way to keep doing it. The system had its limits. I had learned by then that my job was not to be angry about those limits but to work around them, which is its own full-time occupation when you are already using most of your energy just to heal.

Our community pool finally reopened, and I went as often as Mike could take me.

When noticing a couple of people wearing waterproof headphones, I purchased a pair online so I could also listen to music in the pool. Putting together my own playlist of motivational songs was fun, and Mike uploaded them for me.

When I first put the headphones on in the water and heard Miley Cyrus start singing *The Climb* I want to say I held it together. I did not entirely. *I Hope You Dance* was on there too, sung by Lee Ann Womack, and Rachel Platten singing *Fight Song*. By the time those came on, I was moving back and forth across that pool with tears running down my face into the water where no one could tell the difference anyway. Some songs find you at exactly the right moment. Those three found me in the water at the community pool, and they said exactly what I needed to hear.

The more I practiced in the pool, the more I progressed. That growing momentum made it clear I needed to find a way to go more often on my own, which is ultimately what led me to a mobility scooter.

The Mobility Scooter

I hated having to ask Mike to take me every time.

He had been extraordinary. He had reorganized his entire life around my needs for months, without complaint, with a generosity that still moves me when I think about it. And precisely because of that, asking him for one more thing, even something as important as the pool, felt like adding weight to a person who was already carrying so much.

So I did something that required more swallowing of pride than I had anticipated.

I bought a mobility scooter.

I suspected I would get some pushback from him, but I forged ahead without telling him first. I had taken my time researching the models, figuring out which one would get me to the pool and back reliably without requiring his assistance in any way. I told myself it was just a tool, a temporary bridge to freedom while I worked toward the kind of independence that did not require any tool at all. I told myself that firmly enough that eventually I believed it. And so did he.

The first time I rode the mobility scooter to the pool by myself was not nearly as simple as it sounds. At this stage, nothing ever is.

I had figured out in advance that I would need something to hold onto between the scooter and the pool railing, since I could not bring the large walker with me while riding. After thinking it through, I decided on a small cane. Just solving that problem felt like a quiet victory, the kind no one else notices but that means everything to the person living it.

I worried about whether one cane would be enough. Could I keep my balance using just one hand? Would I need two? My mind spun through every possibility the way it always does when I have to make these kinds of decisions. It can be exhausting.

In the end, I chose a sturdy quad cane, the kind with four legs that stands on its own and will not fall over if I drop it. I strapped it to the scooter and set off.

The moment I pulled out onto the walkway, something in me exhaled. The

afternoon light was warm on my arms and the neighborhood was doing what neighborhoods do on an ordinary afternoon. Someone was walking along the path up ahead. A sprinkler was running somewhere nearby. A few neighbors were out, moving through their day with the unhurried ease of people who had nowhere pressing to be. None of them were paying any attention to the woman on the mobility scooter making her way down the path, and that, in itself, felt like a gift.

The paths inside the community are quiet and familiar, and I moved through them the same way, past the houses I had looked at from my car window, past all of it, but this time under my own power and at my own pace, with the afternoon sun on my face and no one to ask and no one to wait for.

I rode to the pool, it was not fast, parked the scooter beside the lounge chairs, grabbed my cane, and walked to the railing.

All on my own.

Something shifted inside me that I had not felt in a very long time. Not quite the old freedom, not the barefoot on the grass at 7:00 in the morning freedom I was still working toward. But something just as real and just as specific and entirely mine. The ability to decide where I was going and get myself there without asking anyone for help.

Such a small thing. Yet, an enormous one.

Stairs

Then something unexpected began happening during those sessions at the pool. I continued to use the ramp as usual, but once in the pool, I walked over to the actual stairs on the other side, the ones I had assumed were still beyond my ability.

I repeated the saying I had used to conquer the one doorway step in my home: the good go up to heaven, the bad go down.

At first, I only managed three steps, holding the railing tightly with my right hand. I moved slowly, one step at a time, pausing after each. Going up, I led with my stronger right leg, then brought my left leg to meet it. Going down, I led with my weaker left leg, then followed with the right.

That is how I did it, one careful step after another. Once I could handle three, I added a fourth, then a fifth. Eventually, I made it all the way up and down the five steps, starting from the water and climbing onto the pool deck.

It was not graceful. It was not easy. But I did it.

In the water, my body found the freedom and confidence that land therapy had never given me. Buoyed by the water, my leg discovered a better range of motion than it could manage on solid ground.

No Map

There are things about this stage of recovery that no one tells you. Not the medical things, those you can look up if you are determined enough. The other things. The things that do not have a protocol.

When is it time to return the hospital bed and sleep next to your husband again? No one scheduled that transition for me. I felt my way toward it, and one day the longing for ordinary life was stronger than the fear of not being ready, and I tried it. Getting used to a bed without side rails and lifts wasn't easy, but I figured it out anyway because the hospital bed was gone and we were both finally in the same room again, and that mattered more than perfect.

When is it time to try a cane? No one handed me that answer either. I bought a cane, held it, took a few steps, and felt the difference between what my body could do and what it needed. Sometimes those two things matched, and sometimes they did not yet, and I took the walker back and tried again in a week. Living inside that kind of uncertainty is its own full-time work.

The cane turned out to be the key to something else I had not expected. Standing beside the open car door one day, holding onto the cane for balance, I lifted my left leg by instinct and not instruction, stepped it past the door frame and onto the floor of the car before sitting down. It was smoother and faster than sitting first, the way I had been doing before, and something about doing it that way felt more like getting into a car the way a regular person would. I had not been told to try it that way. My body had simply been waiting for when I was ready, and the cane provided what I needed to

move in that way.

This is what recovery actually looks like from the inside. Not a triumphant march toward wholeness, nothing as clean or linear as that. A series of small decisions made in the quiet, ordinary, often very messy middle of days that did not feel like anything special while I was living them.

The decision to try the cane. The decision to go to the pool, even when I was tired. The decision to lower the bed one more inch and practice getting up one more time. The decision to keep going when the system failed me, the timeline extended, and the progress felt invisible.

No one advocated for my forward movement the way I did. No one felt the urgency of my recovery from the inside the way I did. The decision to reach for the next thing, to try it even when I was not certain I was ready, to get back in the water one more time, to ride the scooter to the pool alone for the first time, that decision was mine and only mine.

I made it. Again and again, in ways that were sometimes large and sometimes so small that no one watching would even notice. I made it because I had already been making it every day since the moment everything changed.

I was already doing it.

12

Without Warning

I had been stuck at 75 degrees for two weeks.

Not inching forward. Not slipping back. Just stuck, the way a door sticks in humid weather, the kind where you push and push and it gives you nothing and you start to wonder if something has changed that you do not yet understand. Every session, the physical therapist would press my knee toward the table, the goniometer would come out, and the number would sit there. 75 degrees. Same as last week. Same as the week before.

The six-month mark was coming. I knew enough by then to know that mattered, though I was not yet sure exactly how much.

What I did know was that something felt wrong in a way I could not put into words. Not the pain, though there was plenty of that. Something underneath the pain. A resistance that felt different from the resistance of a muscle that was weak or a joint that was swollen. It felt like something was in there that should not be there. Something holding on that had no intention of letting go on its own.

Even the pool, as wonderful as it was, as free as my leg felt when the water took the weight off of it, even there I could feel it. A ceiling. A place where the movement stopped, where the joint simply refused what I was asking of it, and I would push gently against it and feel that resistance push back, solid and patient and unmoved. I was getting stronger. I could feel that. But something was still holding me back, and no one was naming it.

I asked my physical therapist. I asked my orthopedic surgeon. I got answers that were careful and kind and that did not satisfy me. It takes time. Every recovery is different. You have come so far. All of that was true. None of it told me what I actually needed to know.

So I did what I always do when the answers stop coming from the people around me. I went looking for them myself.

It was late. The house had been quiet for hours and I could not sleep, which had become its own familiar problem by then, lying there in the dark with my leg doing what it did at night, this low, persistent conversation of ache and pressure that never quite went loud enough to be unbearable and never quite went quiet enough to let me rest. I reached for my phone the way you reach for something when you are tired and restless and not quite ready to give up on the night yet.

I was not looking for any particular word. I was looking for a way to understand what was happening inside my own body. I typed things in. I read. I followed one thread and then another. And somewhere in that late night searching, I came across the word arthrofibrosis.

I want to be honest about what I know and what I do not know. I am not a doctor. I cannot say with certainty that this word names exactly what is happening inside my knee. What I can say is that when I read what it described, something in me went very still and very quiet, the way you go still when something reaches toward the thing you have been carrying without a name for it.

What it described was this. When the body goes through significant trauma, or surgery, or a long stretch of immobility, it responds by producing scar tissue around the injured area. That is what the body knows how to do. It is trying to protect. It is trying to stabilize. But sometimes that scar tissue keeps forming after the protection is no longer needed, layering into the joint, filling the spaces where movement should be, quietly becoming the reason the door will not open all the way no matter how many times you push.

I lay there in the dark of my room and I thought about my knee. The fall. The surgery. The weeks of stillness while my body fought the infection, the joint barely moving, the body doing what bodies do when nothing else is

asking them to. And then the long road back into movement, with no one ever raising the possibility that what had formed in the stillness might itself need to be addressed.

I thought about the degrees that came so slowly and sometimes slipped backward. The gap between what my knee could do floating in the pool and what the goniometer measured when I was on the table. I had wondered about that gap for weeks.

That night, I started to understand it differently.

The anger arrived quietly. Not hot. Not sharp. The steady, solid kind that settles in and stays because it feels justified to be there. I want to be careful here, because I mean what I have already said about my surgeons. They saved my leg. I will be grateful for that for the rest of my life because every single day I look at that leg and I know what it cost to keep it. The surgery was extraordinary and complex in ways I am still only beginning to fully understand. The artery behind my knee had been compressed so severely that there was little to no pulse below it, and restoring blood flow had to come first, before anything else, before any thought of protecting my range of motion or preventing what stillness might cost me later. There were real reasons the priorities were what they were.

And still. I lay there, and I wished someone had told me. I wished someone had said what scar tissue does when a joint is held still and what you might face on the other side, and here is what we can try to do about it now, before it becomes harder to address.

No one said that.

When I eventually brought my own questions to the people treating me, I encountered what I can only describe as a gentle pivot. A shift in the conversation that felt like the door being moved away from what I was pointing toward. It takes a year. Every recovery is different. Some of what you are experiencing is simply what happens as we age. Each of those things was said to me with kindness, and each of them landed with the weight of being true in a general way while not being quite the truth of my specific situation.

I am not ungrateful. But I am also not a woman who is prepared to be

finished yet. I am not ready to accept that a knee that will not bend fully is simply what 74 years old looks like and leave it there.

There is a lot of confusing information out in the world about knee recovery. I have had to learn to be careful about what I let in, to sift, to test what I read against what I am actually feeling in my own body. And the thing I kept coming back to was this. My body is the expert on my body. The doctors have knowledge, training, and clinical experience that I cannot replicate. I am not dismissing any of that. But what I am feeling from the inside is also information, and no measurement taken in a clinic can fully account for it.

The six-month mark frightened me when I understood what it meant. I had read that many who work in rehabilitation believe that if the joint has not reached a sufficient range of motion by that point, the scar tissue can become much more difficult to address. That scared me in a way that went deep and stayed there. What it also did was make me more determined. Not panicked, though panic visited me when I first sat with what I had learned. Something steadier than panic. A decision, made quietly in the dark with my phone in my hand and my knee aching and the house asleep around me, that I was not going to stop moving toward this.

I was at 75 degrees, and the six-month mark was close, and I was not going to accept that this was as far as I would get.

The goal the doctor had set was 90 degrees, the point at which a person can sit in a chair, use a regular toilet, and get in and out of a car. I was still short of it, and I could feel every one of those missing degrees in the ordinary moments of my days. What the pool had given me was a kind of functional movement that the clinic numbers did not fully capture. In the water, I could do things my knee could not quite do on land. That gap told me something. The scar tissue, or whatever name was most accurate for what had formed in there, was not the end of the story. It was the obstacle I was still in the middle of.

So I kept going. I found a therapist who works with hands, specifically, who does manual work on tissue that has become stuck and rigid, who addresses things that machines and exercises do not reach. It costs money that my insurance does not cover. I pay it.

Those sessions, combined with the pool, felt like the first time in months that my knee was getting what it had actually needed all along. Not just movement. Specific, patient, skilled attention to what had been allowed to build up in there during all those weeks of stillness.

I may not be able to do everything I used to do. I have made a kind of peace with that, though peace is perhaps too settled a word for something I am still sitting with. What I will not do is decide in advance that I am finished.

My doctor looked at where I started and saw someone who had come remarkably far. He was not wrong. But we were measuring from different points. He was measuring from the emergency room. I was measuring from the woman who still colors her hair, which is not vanity. It's me refusing to become older than I feel.

My knee is stiff. It is not stuck.

There is a difference between those two things, and as long as that difference exists, I am not finished.

Giggles

We were going to Andrew's house for Easter and spending time with family. I had been looking forward to it. There was something else, though. Something underneath the wanting that I was less willing to look at directly. The grief of knowing I could not show up the way I always had.

I always read to Nora and Daphne on the sofa. That was ours, the three of us piled together, a book open across our laps. I knew I could not do that. My knee would not bend enough to sit on their sofa, and I could not stack pillows in their living room the way I did at home, and there was no version of that afternoon where I was the same grandma they had always known, curled up with them over a picture book. I think I put the walker between myself and that truth before I even walked through the door. It was easier to be embarrassed about arriving with a walker than to sit with what the walker actually meant about what I could and could not do that day.

The mind does that. It hands you a wall to stand behind when the real thing is too hard to face straight on.

Andrew had thought through the logistics the way he always does. I would not be able to climb their front steps to enter their house. The plan was for me to enter through the garage and straight into their family room. He opened the garage door, cleared a path with his foot, kicking the children's toys aside, and I came through the garage with my walker. We hugged in the doorway.

"I've got this," I said.

He stepped inside, turned back, and watched me lift the walker, set the brake, and step through. Mike followed behind me. Whatever my son was feeling in that moment, he kept to himself, the way the people who love you learn to do when they understand that what you need is not their worry but their faith.

Joaquin, who had been playing a classical piece on the piano in the living room, stopped mid-piece and rushed over to hug me.

Dana had placed a sturdy chair in the middle of the family room. I understood immediately why, and I loved her for it.

"Would you mind moving that chair against the wall?" I asked.

She did it without question. The chair was thoughtful, and I could have used it. But sitting in the center of a room in a chair placed there for me while everyone moved around me was not something I was willing to do. I did not want to be the person that the room had been arranged around. I wanted to be their grandmother who happened to have a walker. There is a difference, and it mattered to me more than I could have explained in that moment.

Nora and Daphne were too caught up in the Easter egg hunt to give the walker more than a passing glance, which was exactly what I needed from them. The Easter bunny had hidden eggs in the backyard filled with fairy garden treasures, tiny benches, a miniature slide, and little accessories for the fairy houses they tended with the absolute seriousness that small children bring to magical things. They wanted to show me everything.

I navigated the step down into the backyard and sat on the seat of my rollator walker while they spread their treasures out before me, explaining each item with the authority of children who know exactly where everything belongs. A bench goes here. The slide goes there. The fairy who lives in this house would definitely want the yellow flower pot. I asked questions. I

shared every bit of their enthusiasm. I was completely present for all of it, and for those minutes in the backyard with those two little girls and their fairy gardens, I forgot about the walker entirely.

Then came lunch.

I sat at the dining room table on the rollator seat because my knee still could not manage a regular chair. I was higher than everyone else, which I was trying not to think about, when Daphne looked up at me with the frank honesty that four-year-olds deliver without warning.

"You look too tall in your seat," she said.

I looked at her for just a second.

"I guess that makes me the Grandma Queen at the table today," I said.

Nora considered this with the full gravity it deserved.

"Does that mean we're princesses?" she asked.

"Obviously."

The giggle that followed was the kind that starts small and takes over completely until the whole table is laughing with them and you are laughing too, the real kind, the kind that comes from somewhere deep and has been waiting a long time to get out.

I sat in my rollator seat at their dining room table, and I was their grandmother. Not the grandmother I had always been, not yet, but theirs, completely and without question, presiding over her princesses from an unusual height on an ordinary Easter Sunday. That was enough. More than enough.

I had made them each a chunky yarn Easter bunny in the shape of a Peeps marshmallow, one pink and one yellow. They loved them. I loved giving them. The ability to give something made by hand, something thought through and created just for them, felt like another small piece of myself finding its way back.

On the drive home, I looked out the window at the late afternoon light and thought about the sofa I had not sat on, the book I had not read, and the version of myself that was still waiting somewhere ahead of me.

Not gone. Just not yet.

13

Chicken Wings

Getting back into the kitchen was its own separate recovery.

Not the kind with milestones and clinical measurements and a doctor nodding approvingly from across an exam table. Just the daily, slightly chaotic process of learning to function in a small space with a body that was still figuring out what it could and could not do.

Mike had been doing all the cooking since October. He had risen to it in ways that genuinely moved me, following recipes I found online, shopping for ingredients, putting meals on the table every single day without complaint. But there came a point where I needed to contribute. Not because he was not managing. Because I needed to feel like I was part of our life again rather than simply a recipient of it.

The first solution was the camp stove.

I still had it from my van life days, a small portable stove that had traveled with me to campsites and parking lots and wherever my minivan, Little Dove, happened to be parked. Mike retrieved it from storage and set it up on the dining room table, and I sat in my wheelchair and cooked from there. He'd bring me the ingredients, and I would do the rest. It was not how either of us had imagined our kitchen life looking. But it worked, and working was all we needed it to be.

Progress, not perfection. I have always said that. I was learning to live it.

Eventually, I graduated to standing and cooking in our actual kitchen. Our

kitchen is small, which turned out to be an advantage I had not anticipated. Everything was within reach. The counter runs along the wall in a way that permits me to hold on as I move from the refrigerator to the stove to the sink, one hand always touching something solid. Mike had reorganized the refrigerator early on so that the things I used most were on the lower shelves and in the door where I could reach them without stretching or straining. Small adaptations. Each one, a deliberate act of love.

The rollator became my kitchen companion. I would load things onto its seat, ingredients from the pantry, items from the refrigerator, whatever needed to move from one end of the kitchen to the other, pushing it carefully along.

The problem was that things did not always stay where I put them. A jar would slide. A container would tip. Something would topple over and land on the floor with the clunk of an object that has decided it is done cooperating. Mike would appear and pick it up. No comment. No sigh. Just picking it up and putting it back and moving on, simply because I was trying. That patience, steady, consistent, never once making me feel like a burden for the mess I was making, is one of the things I will never forget about those months.

Chopping was its own adventure. I would hold onto the counter with one hand and work with the other, which is not the most efficient system, but it was what I had. Things would fly. A piece of vegetable would slide across the counter and off the edge. A utensil would clatter to the floor. Mike cleaned up after me every time, every single day, without making a production of it. I was clumsy and messy, and I attempted it anyway, because where there is a will, there is a way, and I needed to believe that badly enough to keep going back into that kitchen to keep trying.

I also bought a Magic Bullet. The Vitamix I had always used was too large and too heavy for where I was in my recovery. Lifting it, managing it, and cleaning it required more than I could reliably give. The Magic Bullet fit on the counter, fit in my hand, fit in the life I was currently living. I adapted. You adapt. That is what this whole recovery has been. A long series of adaptations, each one a small surrender to the reality of where you are and a small act of

defiance against the idea that where you are is where you will always be. It's not.

By the time Mike started going back to the golf course regularly, I had gotten reasonably capable in the kitchen. Not the way I used to be. Not the confident, efficient, standing-for-hours version of myself that had cooked in that kitchen for years. But capable enough. Capable enough to make myself lunch when he was out. Capable enough to inch my way from counter to counter, holding on, making my way to the different appliances, managing the small geography of a small kitchen that had become, in its own way, a daily training ground.

One Wednesday afternoon, when he was off playing golf, I had been in the kitchen making myself a chicken sandwich when I realized I had forgotten to grab the mayonnaise from the refrigerator. I looked at my walker parked beside me and decided to just make my way to the end of the counter to the refrigerator by holding onto the counter along the way. I felt safe loosening my grip and just tapping the counter with my fingers for balance as I went.

I'd done this several times, but on that day, doing so made me wonder why, when I was barely holding on, I could walk alongside the counter, but when I tried to let go completely, my legs stubbornly stayed stuck to the ground.

Today I was determined to find out why.

I let go of the counter and just stood for a moment. The refrigerator was just a few feet away. I stood there looking at my reflection in it, thinking.

Since tapping my fingers helps me keep my balance, what could I do instead?

All of a sudden, I felt my right arm twitch, as if nudging me to lift it. So I raised my right hand, and my forearm followed with a bent elbow. Then I shifted my weight with a slight shoulder jerk, and, to my surprise, my leg took a step forward. I caught my reflection in the refrigerator door and almost laughed out loud at what I saw. My forward-bent arm looked exactly like a chicken wing.

Ridiculous. Undignified. And strangely effective.

I finished that first step, took a breath, and lifted my left arm the same way, elbow bent like a chicken wing, my body tilting just enough for my other leg to move with it. I was making my way across the kitchen in a slow, determined

waddle that looked, if I am being completely honest, like a 74-year-old woman doing the chicken dance in her kitchen just to get the mayonnaise.

And it was working. I was freestyle walking to the refrigerator.

After grabbing the mayonnaise and setting it down on the nearby counter, I stood for another moment thinking. I can't go through the rest of my life walking like a chicken. There has to be a better way.

So I experimented.

I began to swing my arms up and down naturally, the way arms swing when a person walks. Left arm forward while the right leg takes a step. Then the right arm forward with the left leg step. The most basic human motion for walking.

And so I tried it. And this way was so much smoother than walking like a chicken. I was walking without holding on. That forward motion of the arms created the counterbalance that my body recognized immediately. And maybe deep inside, my muscle memory did too, responding to this rhythm even when my conscious mind had forgotten the mechanics of it.

I did not count the number of steps I took. I did not think about my knee or wonder about how many degrees there were in the bend, or any of those things. I was just walking. Wobbly and slow and not at all graceful, but walking. Without holding on. Without the walker. Without anyone there to help, witness, or cheer.

Just me in my quiet kitchen doing this small, enormous thing my body had just shown me.

And then I stopped, took hold of the counter again, and just stood there for a moment, thinking about all the appointments, all the physical therapy sessions, all the times I had told the therapists I wanted to learn to walk again, and all they did was give me stretches and machines and exercises for my knee. Not one of them had mentioned the arms. No one had said the words that now seemed so obvious they were almost funny.

Swing your arms the way arms do when you walk.

It was not until this Wednesday afternoon in my own kitchen, alone, making a chicken sandwich, that my body remembered something that everyone around me had overlooked. And I want to say this not with bitterness but

with genuine wonder, because it is one of the clearest examples of everything this recovery has been trying to teach me.

The answers are not always where you expect to find them. Sometimes they are not in the clinic, the therapy session, or a late-night research video. Sometimes they are in the ordinary middle of an ordinary afternoon when you simply decide to try. And sometimes it turns out you have to be willing to look like a chicken before your body can show you how to walk like a person.

I finished making my sandwich and set it on the seat of my walker, because I was alone in the house and not ready to test this new discovery too far from the safety of something to hold onto.

I made my way to the dining room and sat down at the table to eat my sandwich. From where I sat, I could see it. The spot in the living room on that ordinary October evening. The moment I had taken one step forward with my right leg, when my left leg did not follow, everything had changed. I did not look away from it. I just sat there with my sandwich and looked at it for a moment, the way you look at something that has been large in your life and that you are slowly, carefully, learning to make smaller.

Then I ate the chicken sandwich.

It was a good sandwich. The chicken was tender, and the mayonnaise was exactly right. The house was quiet and mine for the day and full of the afternoon light that comes through the windows at that hour. I sat there and ate and felt, in a way I had not felt since before any of this began, completely ordinary.

Completely, gratefully, tearfully ordinary.

I had found something real in that kitchen, something my own body had shown me without a single therapist in the room, and it mattered enormously. But mattering and trusting are two different things, and I had not yet learned to trust my body. That was going to take more than a Wednesday afternoon in the kitchen with the mayonnaise. So I tucked it close and kept practicing.

14

The Missing Piece

In the kitchen, I felt safe. The counter was within reach in every direction. The walls were close by. The space was small and familiar, and the counter was always there if I needed it. I took those steps with my arms swinging and felt something that resembled the memory of walking.

But then I looked out toward the living room. That open stretch of floor between the kitchen doorway and the sofa. Nothing to hold. Nothing within reach. Just space. The counter was safe. The open floor was something else entirely. Underneath every step I imagined taking across it lived the memory of one ordinary October evening, a plate in my hand, one step forward, and a leg that was not there. My body had not forgotten that. Neither had I.

Mechanics of Walking

Almost seven months had passed. I walked into my next physical therapy session and met a therapist I had not worked with before. As I warmed up on the NuStep machine, he stayed beside me instead of walking away, and he asked how I was doing in a way that meant he actually wanted to know.

I told him the story about my chicken wings walk. About finding my way across the kitchen with my arms bent and my body figuring out its own compensation. About feeling ready for whatever came next, but not quite knowing how to get there. He listened in a way I had not always experienced

in that clinic. I was not moving through an appointment. I was naming something, and someone was helping me think it through.

"Strength training is important," he said, "but if you do not functionally use those muscles, the brain does not fully learn how to coordinate the effort."

I had felt that truth in my kitchen with the mayonnaise. But hearing someone in that clinic finally name it, finally connect what I had been doing in my body to what was actually happening between my brain and my legs, was something different. It was the first time I felt like someone in that room was thinking about me specifically, rather than working through a protocol.

"Walking is not only physical. It is neurological. It is a learned pattern, a conversation between the brain and the body."

He had me stand and try to lift my right leg. I could not do it without holding on. That single moment made the picture clearer than weeks of sessions had. My left leg was not strong enough yet to carry my full weight alone, so my arms had been compensating without my understanding exactly why. The chicken wing walk had not been wrong. It had been my body solving a problem my mind had not yet resolved.

What my hips needed to remember, he explained, was how to transfer weight from one side to the other rather than locking in place and bracing against the movement. We spent most of that session working on exactly that. Weight shifts, exaggerated at first to wake everything up, then smaller, more normalized, until the movement started to feel less like an instruction I was following and more like something my body was beginning to remember.

He told me I would be sore. He was right.

He also said something that surprised me with how simple it was.

"It is better to do less at one time so you can do more throughout the day. Five repetitions every hour will do more for you than twenty all at once if twenty leaves you too tired to move for the next three hours."

That idea felt both practical and freeing.

"Stand on one foot while you brush your teeth," he said.

That was it. That was the homework. And it carried more wisdom than most of what I had been given, because it understood that recovery does not happen only in a clinic. It happens in the small ordinary moments of a day,

woven in, quiet, consistent, the body learning its way back to itself between all the other things that make up a life.

It was the best session I had in that clinic. Not because it was the most intensive, but because for the first time, someone was not only strengthening me. Someone was teaching me how to move forward.

Wow, Look at You

The day before our grandson Joaquin turned twenty, I did something that was entirely me. I made my husband drive me to the restaurant where the birthday lunch was being held. Not for lunch. Just to look. I needed to see the entrance, the distance from the door to the table, whether there were steps, what the floor looked like, and where I would be able to sit. My son is good at logistics, and I trusted that he would not have chosen somewhere impossible. But I needed to know for myself.

Javier's sat across the street from the beach, with large windows overlooking the ocean, palm trees just outside, white cushioned chairs and booths, the kind of place that feels warm and unhurried and entirely itself. No steps. Clean pathways. Room to move.

I went home satisfied.

What I did not tell anyone was what I was planning to do when I got there.

The next afternoon, Mike dropped me off at the entrance while he parked the car. I was holding a cane. Not the walker. This cane is lighter with a curved handle and a single rubber tip on the bottom, the one my therapist had given me just a few days before. Mike carried the gift inside, a large wrapped bag with the chunky throw blanket I had made for Joaquin, and something small to mark his turning twenty.

Our family was already seated when I walked in.

My son looked up and saw me coming toward the table, and something moved across his face.

"Wow," he said. "Look at you."

Just that. With a smile that said everything the words did not need to.

I sat down in the booth beside Kris, our grandkids' other grandmother, the one they call Mimi. A regular booth. White cushioned. At a restaurant near the beach on a warm afternoon, on my grandson's twentieth birthday. No walker. No wheelchair. No pillow tower or furniture rearranged, or chair pulled to a careful angle. Just me, walking in with a cane, sitting down like a person who sits in booths.

I picked up the menu and looked at it, and no one in that restaurant had any idea what it had taken to get me to that table. That felt extraordinary.

The afternoon moved the way afternoons are supposed to move with food and laughter, and me handing Nora and Daphne each a big, happy face sticker for their party dress, and the joy of watching someone you love turn twenty while knowing everything it took to be sitting at that table.

It was my first real outing. Not a medical appointment. Not a therapy session. Not a careful visit with furniture moved and pathways cleared, and everyone quietly watching to make sure I was all right. A restaurant. A celebration. An ordinary Saturday that felt, from where I was sitting, like the most extraordinary thing I had done in months.

Cameron

Cameron was different from the beginning.

He had short dark hair with gray at the temples and a neatly trimmed beard, and he had the particular confidence of someone who is genuinely skilled and has no need to announce it. He made you feel safe before he said a word.

I had come to him specifically because the scar tissue was still a problem, and I was willing to do whatever it took to address it. Insurance would not cover it. I went anyway.

He explained he would be using a specialized scraping tool along the sides of my knee and across the front of my thigh. I expected discomfort. I was not prepared for how strange the sensation would actually feel.

The tool was smooth, cool stainless steel. As he moved it across my skin with firm, deliberate strokes, it felt less like a massage and more like someone

quietly excavating something buried. There was a bumpy, almost knotty resistance beneath the surface, layers of tissue that did not want to move. Every time he passed over a stubborn area, a sharp, deep ache bloomed and then slowly released, something tight finally being asked to let go. My leg twitched. I gripped the edge of the table and breathed through it. It was not unbearable. It was honest. The kind of pain that says this is where the damage has been hiding.

Then he pressed his fingers into my inner thigh just above the knee and asked me to tighten the muscle there. I tried.

He shook his head slowly.

"This one has gone quiet," he said. "The outer quad is still strong, but your vastus medialis, the inner one, has really atrophied. Significantly smaller and weaker than it should be."

I lifted my head to look. Once he pointed it out, I could see it clearly. My outer thigh still had some shape to it, but the inner part looked almost hollow. A quiet shock moved through me. No one had ever said this to me. All the focus had been on the knee itself, the swelling, the flexion numbers, the goniometer. But here was something else entirely, a part of the support system that had gone quietly missing while everyone was looking somewhere else.

It explained things I had felt but could not name. The strange instability. The sense that my knee was working harder than it should for what I was asking of it. My body had been compensating for so long that an entire section of the structure had simply shrunk away.

By the end of the session, my thigh was warm and red and humming with blood flow in a way that felt like something waking up rather than something hurt. Cameron gave me new exercises targeting that inner muscle specifically, slow, focused movements that looked almost too simple and felt immediately challenging when I tried them on the table.

I left that appointment understanding something I had not understood before. It did not feel like symptom management anymore. It felt like finally hearing the real story my leg had been trying to tell me.

The second session was more intense.

He examined my foot first, turning it slowly, pressing into the tissue, his face focused in the way of someone reading something carefully.

"Your calf muscles are extremely tight," he said. "Both of them. That tightness is pulling on everything below the knee. That is why you have been getting the tingling, the heel pain, that strange disorientation in your foot and toes."

He walked me to a small wooden step, barely two inches high, with a handle for balance.

"Stand with just the balls of your feet on the edge," he said, "and let your heels drop down."

He demonstrated, first with straight legs, then with a slight bend in the knees, showing how each position reached a different part of the muscle. It looked almost too simple to matter.

"Six minutes a day," he said. "One minute at a time. You can spread it throughout the day. Not more. Not less. Just six minutes."

I stood on that small step and felt something shift, and with it came a wave of emotion I had not expected. After everything, after two surgeries and the infection and the PICC line and the months of therapy and the pool and the scooter and all of those degrees on the goniometer, six minutes a day on a two-inch step might be part of what finally gives me back real walking. It seemed almost too small to be true.

I believed him anyway.

"It is not too late," he said quietly. "The scar tissue can be reorganized. New pathways can emerge. We can still improve your range of motion."

I have held onto those words every day since he said them.

Then came the cupping.

He warned me. "This is going to hurt," he said plainly, and I appreciated the honesty. I was lying on my stomach. He applied oil to the back of my leg, placed the cups, and began moving them slowly across my skin with the vacuum seal still active.

The moment the suction pulled my tissue upward I tensed completely. A sharp burning ache flared deep in the back of my leg.

"Is it okay that I am tense?" I asked through my teeth. "Should I be trying

to relax?"

"I expect you to be tense," he said, calm and even. "So let us do this together."

He guided me into a visualization, his voice low and steady, telling me to picture the sensation not as damage but as movement. Stuck tissue is finally being asked to let go. He invited me to breathe into the cups instead of bracing against them.

"Imagine warm light moving into the area," he said. "The fibers are softening. Lengthening. Like tight ropes slowly unwinding in the sun. Your body is responding to something it needs. Stay with it."

It was excruciating. And then something shifted. Not the pain, the pain stayed. But my relationship to it changed. I stopped fighting it and started moving through it, breathing into the heat, letting the image of those unwinding fibers become something I was participating in rather than enduring. I thought about the recordings I had made in the dark all those months ago, speaking to my own body, asking it to cooperate, to heal, to trust me. This felt like a continuation of that same conversation. My body and I are still working things out. Still figuring out what the other one needs.

When he removed the cups, I lay there breathing, my leg hot and alive and almost vibrating beneath me.

"That was amazing," I said, and I meant every word of it.

He asked me to bend my knee. I pulled my heel toward me and felt it. The joint moved more willingly than it had when I lay down. Not dramatically. But unmistakably freer. Like a door that had just been oiled.

He nodded. Then he said the thing I wrote down the moment I got home.

"I think you can get to 120 degrees. That will give you the kind of movement you seem like you'd like to have."

90 degrees was the finish line I had been running toward with everything I had. And here was Cameron, after two sessions, telling me calmly and without drama that there was more available to me than the number I had been measuring my whole recovery against.

I took Cameron's advice and see a massage therapist every week. She has healing hands in the truest sense of the word, the kind that find what needs finding without being told where to look. She works slowly and deliberately,

moving through the layers the way someone does who understands that what is on the surface is rarely the whole story.

The scar tissue is slowly releasing what it has been holding, and my knee joint is finding more willingness than it had the week before. Some sessions leave me tender in ways that tell me something real was asked of the tissue. Others leave me feeling lighter than when I arrived, as if something that had been gripping quietly for months finally decided to let go. Either way, I leave knowing the work is being done.

Physical therapy happens every two weeks now, and I go to the gym in our community center several days in between. At my last session, I was at 88 degrees. I am not measuring myself against 90 anymore. Cameron told me 120 is possible. None of it feels like a burden anymore. It has become the texture of my days, woven in the way that I learned movement should be. Not separate from living. Part of it.

15

Living Forward

I want to be honest about something before this chapter begins.

I cannot carry a plate. Not anymore. Not yet. I am not sure which of those is more accurate, and I am not sure it matters. What I know is that picking up a plate and walking with it is something I have not done since October 22nd, and something I think about every time the moment arrives and I find I am not able to. The distance does not matter. The destination does not matter. It is the act itself, the plate in the hand, the walking, the not knowing what the next step will bring, that I cannot yet bring myself to trust.

It was such an ordinary moment. The kind that does not announce itself. An easy evening, a nearly empty plate, a step toward the kitchen. And then the specific terror of reaching for a part of my own body and finding it was not there. Not the pain that came after, not the landing. That one moment. The not finding. That is the part that does not let go.

When I have no explanation for something, my mind goes looking for one anyway. Mine went to a blood clot. More than once. Not because I had evidence but because I had nothing else, and something felt better than nothing. I carried that wondering for a long time, turning it over in the dark, unable to put it down.

I asked both of my surgeons. Independently, and without hesitation, they both said no. There was no pre-existing blood clot. The injury was consistent with a fall, nothing more and nothing less. They were in that operating room

for ten hours. They saw inside my leg in ways I cannot see inside myself, and they found nothing that was already there waiting. I believe them completely, not because I have no choice, but because they saved my leg, and they are not people who look away from what is in front of them.

The wondering took longer to release than the question took to answer. Fear does not follow the same logic as facts. But I have done the work of setting it down, and I have made my peace with the part that may never be fully explained.

What I have instead is a body that is healing. A life that is finding its shape again. And the understanding, hard-won and now genuinely mine, that you do not have to wait for the fear to go quiet before you start living forward. I carry it alongside everything else, and I keep going anyway.

And then we brought home Molly.

Molly

We adopted Molly on Saturday, May 2nd.

She was seven months old, a Red Heeler and Australian Shepherd mix, with an expressive face, amber-brown eyes, and large upright ears that give her the look of a dog who is always listening for something just beyond what the rest of us can hear. One ear tilted slightly outward, the way young dogs' ears sometimes do before they fully grow into themselves. Her coat is short and dense, mostly warm reddish-tan with white markings along her muzzle and chest, and a blaze between her eyes. She looked, from the moment we brought her home, like a dog who had already decided she was in charge and was simply waiting for the rest of us to catch up.

She is nothing like Frankie.

Frankie was small and black and social and famous in the neighborhood for his greeting style and his patience at the base of the magnolia tree. Molly is large and reddish and intense and has the intelligence of a working dog who needs a job and will invent one if you do not provide it. She has already learned to sit, stay, and shake hands. She retrieves a tennis ball with the focused efficiency of someone who takes fetch very seriously, dropping it at

my feet and looking up with an expression that says clearly: again, and do not make me wait.

She has one favorite toy. It has a rope on one end and a soft ball on the other. She throws it into the air herself and catches it on the way down. Every time. She will do this for as long as anyone is willing to watch, which in our house is quite a long time because it never stops being funny.

She likes to snuggle. She also likes my side of the sofa.

If I get up for any reason, to get something from the kitchen, to use the bathroom, to simply stand and move the way my physical therapist tells me I need to do every hour, Molly will move there and take up residence in my spot. She settles in with an almost audible satisfaction, resting her freckled face on the arm of the sofa like it is a pillow she has owned for years, and then looks at me when I return with an expression that contains no apology whatsoever. I have tried everything to reclaim my seat. I usually give in and move to the other sofa. We are still working on this, and I suspect she knows that.

I made her a bed out of chunky yarn. Red with a white border, with two paw prints to decorate the inside. She loves it, but her favorite place is still my side of the sofa.

It took a while for her to find her place in the neighborhood walking group. She is the biggest dog among them and the youngest, and I think the other dogs were initially uncertain about her size and her energy. But she is genuinely and surprisingly gentle for a dog with her build and her breed, and she sits patiently beside Mike while he talks to the other dog owners, watching everything around her with those amber eyes, learning the rhythms of a community that Frankie spent years becoming part of.

She will earn her place. She is already earning it.

There is one more thing about Molly that is worth mentioning.

Molly has a limp. Her left hind leg. The vet does not know exactly why. She was found as a stray in the hills, full of fleas, and had been at the shelter for a month, going through her own kind of rehabilitation before we ever saw her. The vet thinks she may grow out of it. She does not seem bothered

by it in the least. She runs and retrieves and throws her toy into the air and steals my side of the sofa with the full confidence of a dog who has no interest in being defined by her limp.

I understand her completely.

Seven months into something. Both of us have a left leg that does not always cooperate. Both of us are figuring it out anyway. I do not think that was a coincidence.

Watching Mike lace up his shoes in the morning and head out the door with Molly beside him is one of the best things I have seen in a very long time. He has his walk back. He has his morning and evening routine, his neighborhood group, and the simple, purposeful rhythm of a man and his dog on a familiar route. Frankie gave him that for twelve years. Molly is giving it back to him now.

Molly has brought so much joy and laughter back into this house. Not Frankie's twirling spirit. That was his, and it belonged to him and to the twelve years he spent with us, and it will not be replicated. But her own. Entirely her own. The thrown toy and the stolen sofa cushion and the focused amber gaze and the way she drops the tennis ball at my feet and waits.

Again.

The Life I Am Walking Back Into

It is mid-June now, and mornings look almost the way they used to. I open the curtains and let the light pour in. Most days, I make my way outside with the cane and stand on the grass, feet on the earth, the day beginning around me the way it does when you are present enough to notice it. Not the effortless barefoot mornings I used to move through without thinking. But I am out there.

And some mornings that is everything.

Epilogue

In the road ahead of me, there's still work to be done, and discoveries I have not yet made, and ordinary afternoons in ordinary rooms where something unexpected will happen and teach me something I did not know I still needed to learn.

I am not finished. I want to say that honestly because I think it matters. This book does not end with a tidy resolution because my recovery does not end with one either. The plate is still something I think about. The fear of falling is still something I carry. The six-month window for scar tissue that frightened me so much has passed, and yet Cameron is telling me there is still room for new pathways to emerge, still room for improvement, still reason to keep going.

It is not too late. He had said that clearly, and I am choosing to believe it every day.

The most important thing I have learned in these eight months is not any single piece of medical information or any particular exercise or protocol. It is this: our body is worth listening to. Not performing for, not managing at arm's length, not enduring. Actually listening to. It has been trying to communicate with us our whole life and it will keep trying. I spent too many years being too busy to hear it. I am listening now.

If you are reading this from inside your own hard thing, I want you to know that I am writing this book for exactly where you are. Not from the finish line. From the middle, where it is still messy and still uncertain and still, on the hard days, frightening. You are not alone in that place. I am still in it with you.

Keep going. Not because someone told you to, but because somewhere underneath all of it, your body is still trying to find its way back, and it needs

you to stay curious enough to help it.

Find your pool. Find your Cameron. Find the thing no one prescribed that your body has been waiting for you to give it. You will know it when you find it because it will feel like something releasing that you did not realize you were still holding.

And if you happen to find yourself doing the chicken dance in your kitchen one day, just to get to the refrigerator, know that you are right on schedule.

About the Author

Elaine Lombardi is a writer whose work spans memoir, self-help, children's literature, health, and personal transformation. Her books reflect a lifelong commitment to helping others navigate the full arc of human experience.

A former teacher and director of education, she brings a natural gift for making complex ideas accessible and a deep understanding of what people need when life asks something hard of them. She is the creator of t*he G.I.F.T.S.* series, beginning with her signature method book and continuing into an adventure series with *A Voyage Home to Yourself* for women navigating life's major transitions.

The Messy Middle is her most personal book to date — written from inside her experience, for everyone still finding their way through their own.

Trained as a Certified Holistic Health Coach and Belief Coding® facilitator, she graduated from the Institute for Integrative Nutrition in New York City and is board certified by the American Academy of Drugless Practitioners.

Married for more than fifty years, she is a mother of four, grandmother of ten, and great-grandmother of two. She loves writing and spending time in nature.

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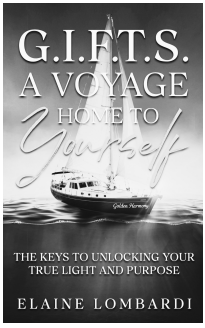
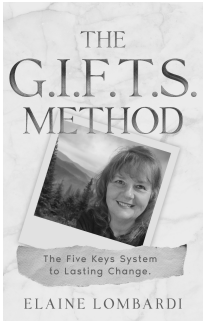
Also by Elaine Lombardi

Elaine is the author of several self-help and wellness titles and has built a loyal following by sharing the principles behind her signature G.I.F.T.S. method books.



G.I.F.T.S. A Voyage Home to Yourself

A tender and inspiring story for any woman navigating an empty nest or major life transition, ready to release old identities, reclaim her inner light, and chart a wholehearted new course. The first book in the G.I.F.T.S. adventure series, it gently weaves lessons of gratitude, intuition, connection, purpose, and self-care into a journey designed to awaken the gifts that have been within you all along.



The G.I.F.T.S. Method

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