



ICU Heroes Award Winners Recognized During 2019 Congress

The Society of Critical Care Medicine's (SCCM) ICU Heroes Award recognizes that patients and families are an integral part of the intensive care unit (ICU). This award is given to an adult and a pediatric ICU patient and their families, as well as to the multiprofessional team who delivered the care.

Darrell Raikes and his wife Sarah had no concerns as Mr. Raikes prepared to have his left knee replaced. After all, Mr. Raikes, who is 52, had his right knee replaced two years ago, and he was back to work as an engineer four weeks later. Why should this time be any different?

On the other hand, 16-year-old Cheyenne Vandergrift knew something was wrong when she could not shake a fever and constant chills. She had the flu, but that was only the beginning.

Neither Mr. Raikes nor Ms. Vandergrift had any idea that they would each spend more than two months in the hospital, much of it in the ICU. Thanks to persistent and compassionate work by their medical teams, both survived. They are the recipients of the 2019 SCCM ICU Heroes Award, along with their medical teams. The awards were presented during SCCM's 48th Critical Care Congress this past February in San Diego, California, USA.

Darrell Raikes

Mr. Raikes' knee replacement was supposed to be routine, and the surgery seemed to be just that. On extubation, though, it was clear that something was wrong. Mr. Raikes bled into his lungs, which led to respiratory failure and difficulty breathing. He was transferred to the University of Kentucky medical ICU, where he developed pneumonia, a blood clot in his leg, and sepsis and had to be paralyzed for five days and placed on life support for several weeks.

Mr. Raikes spent 34 days in the ICU before being transferred to long-term acute care and then to an acute rehabilitation center. Seventy-eight days after his knee surgery, he was able to return home.

While in the hospital, the medical ICU staff made sure to support Mr. Raikes and his wife. They gave them continual updates and threw Sarah a birthday party. As for Mr. Raikes, he made a variety of goals for himself, such as eventually doing a headstand and finishing a 5K race.

Within 3 months after his discharge, he accomplished both of these goals. It quickly became clear, though, that life was never going to be the same. He tried to return to

work but was blindsided by anxiety and memory issues. He spiraled into deep depression. "For a year and a half, I thought I would go back to being the same as I was," Mr. Raikes said. "I always thought there would be some magic pill that would make me like I was, but it never happened."

Thanks to the continued dedication of his medical team and his wife's unending support, Mr. Raikes found his way out of the depression and discovered a new purpose—becoming a voice for ICU survivors. Today, he volunteers at his local hospital. He visits the University of Kentucky once a week to talk with patients and families about surviving critical illness. He even petitioned the Kentucky State Legislature to declare September "Sepsis Awareness Month"; a state resolution was passed

in his name.

"He has become a champion for patients and families, and is always looking for ways to advocate for ICU survivors," said Ashley A. Montgomery-Yates, MD, the team leader in Mr. Raikes' care. "He will tell anyone who asks that he still has 'bad' days, but that mostly he just wants to use his days to help other patients and to make the ICU a better place."



Pictured is SCCM Past President Jerry J. Zimmerman, MD, PhD, FCCM, presenting Mr. Raikes and University of Kentucky critical care team members with the ICU Heroes Award at the 48th Critical Care Congress.

Cheyenne Vandergrift

Ms. Vandergrift was diagnosed with influenza A at an urgent care clinic, but despite starting to take oseltamivir, her condition worsened. She had shortness of breath and chest pain and felt ice-cold. Her heart was malfunctioning, which caused her body temperature to drop far below normal, with low blood pressure and an extremely elevated heart rate.

In the Greenville Memorial Hospital pediatric ICU, she had two brief cardiac arrests. She was too unstable to transport to the nearest pediatric extracorporeal membrane oxygenation (ECMO) center, so ECMO was started on a heart-lung bypass machine at Greenville Memorial instead. Two days later, she was transferred to the Medical University of South Carolina, where her heart function slowly improved. The improvement, though, was only temporary.

She had a massive aspiration event and was started on

ECMO again because her lungs were not functioning properly. Five days later, ECMO was discontinued and she was transferred to the pediatric ICU.

She spent a total of 77 days in the hospital, 65 in the pediatric ICU. She had heart failure, lung failure, kidney failure, and more. But she persisted. And when she was discharged, she walked out on her own with no medications.

"She was a mature teenager before this journey began," said Cheyenne's mother Tina Vandergrift. "Now, she is on a completely different level with the way she processes

people, situations, and life itself. She has morphed into this confident young woman who doesn't feel the need to cover her visible scars." ▲



Pictured is SCCM Past President Jerry J. Zimmerman, MD, PhD, FCCM, presenting Cheyenne Vandergrift and Medical University of South Carolina critical care team members with the ICU Heroes Award at the 48th Critical Care Congress.