Larry and the Contraband Lo Mein: A Case Report

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Larry was a truck driver who came from out east. In the spring, after 30-years of smoking Marlboro Reds he decided to quit cold turkey—like he had done a hundred times before —but this time, he actually did. He put out his last cigarette while staring at the swing set he made for his kids from scrap steel and a stick welder, back when they were little. With his kids grown, he decided he would like to be around long enough to see some grandkids playing on that swing set, and he never bought another pack. Stunned, his wife also quit. By summer, they felt good. They started exercising daily and eating better. With more energy they made plans for their upcoming retirement, and traveled clear across the country to the Florida Coast to see if beach life suited them—something they never did before as Inlanders, and it certainly did suit them.

Around Thanksgiving, while rigging up cargo on his trailer, Larry felt short of breath. More so than usual. He figured he was just getting old, hell he was only two months away from retirement. Stoic just like father, he said nothing. He didn't complain. He made jokes instead. But by Christmas he could barely breathe, and people noticed. He was having regular coughing fits, and when his wife and kids saw him at the dinner table with blue lips and a blood-streaked handkerchief, he finally went to see a doctor—though it did take some convincing, or "goddamn nagging" as he put it.

In the local urgent care, a chest x-ray showed a large mass nearly obstructing his right lung. He was sent to the big hospital in the city with the fancy scanners, just over six hours away, and of course Larry drove himself. When he arrived late in the evening, he learned that he drove the whole way with a collapsed lung and cancer in his brain. "See! That's why I am stupid," he said to his wife with crossed eyes and a comical voice between rapid shallow breaths.

While in the elevator, on the way down to the MRI, that mass in his lung started to bleed. Drowning, he went into cardiac arrest and died at least twice that night. But Larry was a stubborn guy. In the following days, as he laid unresponsive, machines forced borrowed time into his chest. His wife and kids stayed by his side, keeping him on life support for family and friends to come from out east say their goodbyes. After almost a week, they decided to take Larry off the vent.

The next day I found his ICU bed surrounded by his loved ones. Assuming he drifted off peacefully in the night, I was surprised to find everyone in the room laughing. I was even more surprised to find that everyone was laughing at Larry, who, as it turns out, was very much not dead. Instead, he—with his freshly brushed mullet and hoarse voice—was busy putting on a show, cracking jokes, just as he did when he was admitted; just as he did when he found out there was cancer in his brain and no chance of cure.

As I approached his bed, he became serious, and gave me a stern look. He said, "Doc, sit down. I have to talk to you about what I saw when I died…"

"What did you see, Larry?" I asked, taking the seat beside him, all eyes in the room turning to me, the anxious medical student.

“Well Doc, everything went dark at first, and I got scared. Then I felt a hand take mine, and it guided me from my hospital bed into a long, dark corridor. And there at the end of the hall, far off in the distance, was an object illuminated in all its glory. It was…It was a steak! Thick cut, about 3 inches tall, dry aged and really well marbled. It was in a red cooler. So it must have been medical grade. It was medical grade steak, Doc! The good stuff. The nurses were going to cook it up for me, but then you came in and woke me up. And I still haven’t had any steak.”

I rolled my eyes and advanced his diet orders. He was the first patient to ever call me “Doc.”

Two years later, as an intern, I cared for a former college athlete who injured his knee jumping on a trampoline at his daughter’s birthday party. Damien and I were the same age when his minor knee laceration turned into toxic shock, severely scalding his skin and nearly destroying both his kidneys. In between his dialysis treatments, I peeled off his many dressings and scraped the necrotic tissue from his open wounds. His six-foot five-inch, 300-pound frame lay still, tears in his eyes, as I removed more and more skin from his legs each day.

“How’s it looking, Doc?” he would ask every time I replaced his dressings, and we would celebrate any new skin growth, no matter how small. Despite going through this torture day after day, he remained upbeat—with seemingly unbreakable optimism—insisting on thanking everyone who came in to care for him. After debridement, he learned to walk again on what little skin remained on his feet, motivated to get back home to play with his daughter.

But that all changed during his second month in the hospital. As the autumn leaves became buried beneath the winter snow, the daily treatments and slow progress finally broke his spirit and he became increasingly withdrawn. By the third month, when he refused physical therapy and stopped eating his meals, we really started to worry.

Around that time, I started visiting him after my shift. We talked about sports. We talked about music. We talked about his family who lived three hours away, and could not see him regularly due to Covid restrictions. When they were able to visit, his buoyancy returned briefly, but as they left, his spirit crested and crashed down, and defeat washed back over him again.

One Friday, I asked Damien, “What are you looking forward to the most about going back home?”

“Getting some decent food for the first time in 3-months,” He said.

In that moment, the ghost of Larry took me by the hand, walked me into that same long, dark corridor, and showed me the answer illuminated in all its glory. This guy needed a medical grade steak. And stat!

“Damien, if you could eat anything right now what would it be?" I inquired.
“Panda Express,” he said, like he had been waiting his entire life to be asked that very question.

And that is how I ended up smuggling a styrofoam container heaped with General Tsao’s chicken, pork lo mein and fried shrimp onto the surgical floor for a patient in kidney failure—on a strict renal diet. I told him, “if the nephrologist asks you where you got that, a guy named Larry dropped it off, you don’t know me, we never met.” When I slept that night, I thought about the dialysis machine trying to remove the sweet and sour sauce from

his blood. But deep down I knew that denying this man his takeout pork lo mein would have done irreparable harm. And who am I to question Hippocrates?

When I returned to work on Monday, Damien was his old self. He sat up in bed laughing as he told me, “the nurses came in and tried to take away my lo mein, but I put up a good defense. You’ll have to tear it from my skinless hands,” he said.

After I finished examining him, not finding anything that required further debriding, he asked, “Hey Doc, do you think Larry will stop by again this week?”

“Count on it” I said. Eventually his legs healed, his kidneys recovered, and after months of rehabilitation, Damien made it home to play with his daughter again.

Larry never got to see his grandkids, but I am fairly certain that he made it possible for Damien to see his own.

About the Art and the Artist

The story is about coping with grim situations through humor and pork lo mein. The author is currently a fourth-year Radiation Oncology Resident who used to have hobbies but he can’t seem to remember what they were. Writing maybe? In his years of medical training, he never imagined that swearing an oath to “do no harm” would involve the emergency purchase of General Tsao’s chicken. The Author has no conflicts of interests to disclose; he has no financial relationship, past or present with Panda Express, but is open to one. Terms and conditions may apply.