

Lightning Patient Medical Advocate

When a patient presents to your clinic with a suspected lightning injury, you will be dealing with a different sort of patient. This person may appear to be fully mentally functional, but may initially or subsequently struggle with cognitive tasks. They may answer questions in the exam phase of the assessment with varying degrees of difficulty, but may later have little or no recollection of the initial assessment. Therefore, it is recommended that a family member or close friend should be present and ideally even taking notes during the initial exam and treatment, such that any details discussed between the patient and the physician can be documented by a third party who will continue to help the patient once treatment has concluded.

Why is this important?

Lightning injury may be counted as among the most difficult to endure and treat in the long term. Any external signs of injury usually resolve over a short period of time, leaving a person who appears physically normal, but who may have lasting sequelae that are difficult or even impossible to treat.

Because these impacts may be invisible to the naked eye, friends, family and especially insurance companies will often question or doubt the veracity of the very real experiences of the patient. Persisting impacts may be lifelong and debilitating. The patient may have cognitive impairment which greatly reduces their ability to navigate and meet the coming challenges of the injury.

By having a second trusted person involved with the treatment, one can improve the chances that the patient will be understood, and that someone with full cognitive ability will be there to fill in the gaps that may exist for the patient. In other words, this advocate will have first hand experience with the patient at the time of the injury, and what was discovered and discussed as part of the treatment process. In this way, someone outside of the treating facility will "have the back" of the patient as they move out of the clinic and back into the life they had before the injury.

Tasks for the Advocate:

1. Listen to both patient and physician and take notes. Do not assume anything will be remembered. Document recommended treatments in as much detail as possible.
2. Record the telling of the incident by the patient on audio or video as soon as possible.
3. Photograph any injury related marks on the patient, and on clothing and shoes worn at the time of the incident. Look for anomalies and photograph those close up.
4. Return to the scene of the incident if possible and look for evidence of the strike - marks on trees or the ground, bark thrown, magnetized objects. Photograph any physical evidence found.
5. Help the patient with ongoing treatments and with paperwork associated with the incident.
6. Help navigate the purchase of "lightning strike data" from the time and place of the incident. If necessary, it may be possible to purchase scientific documentation of the lightning strike that caused the injury. Purchasers will need the date, time, and approximate location of the incident to provide to the company that collects lightning data. They will, for a price, pull up their records of all lightning activity in that area at that time, and provide specific times and locations of detected lightning strikes in a text format that can be compared with your incident. In this way a patient can validate the known activity, and possibly even the exact strike that caused the injury.

Detected lightning data can be purchased from a company called Vaisala by calling 855-257-8360 or following this web link.