

Monastery Response

By Kristin Keyes

Last fall, Marek offered an invitation for a small group retreat at **Holy Cross Monastery**, an unforgettable Anglican monastery nestled on the banks of the Hudson River. Just as few are called to monastic life, a handful of St. Thomas' parishioners opted for this weekend retreat.



Except for Marek, none of us had experienced life in a monastery and the questions about "What will we do?", "What do we bring?" and "What have I gotten myself into?" were fast and furious as Feb. 6-8 approached.

With the bells' chime marking the daily rhythm calling you to prayers at Matins, Eucharist, Durium, Vespers, Compline; and to the exceptional meals; free time for rest, reflection, study; the Great Silence from late evening through breakfast; and the worshipful chants of the Psalms in prayer, we offer you this response to our monastic experience:

Sally & Andy: *We accepted the invitation in the light of the many opportunities presented by our brand new "empty nest."*

Kristin: *Since I didn't know what to expect, I decided to expect nothing and just be open to God.*

Arlene: *My impressions: chanting at all services, a comfortable room, how privacy had been incorporated into the community bathroom, Marek's movie (!), simple, but elegant meals, new and deeper personal associations and connections with other retreatants and the monks, a different rhythm to the day.*

Andy & Sally: *The monastery, its surroundings and the monastic community were extraordinary. The culinary delights – delicious, bordering on dangerous. The stillness*



and rhythm of the days and nights, the long periods of silence, the tolling bells, the subtle waft of incense made by the monks, unobtrusive hospitality, comfortable housing and a

library filled with possibilities all contributed to a stay that nurtured peace, reflection and a deeper appreciation for the many gifts and blessings in our lives.

Marek: *I am deeply touched by Benedictine spirituality, the rhythm of the daily life, the regular hours of prayer and the simple structure of the monastery and common life. I find God's presence speaks deeply to me in silence and solitude and holy places, where we can get away from the rush and business of our ordinary daily lives and pressures.*

Kristin: *The profound experience of the weekend became entirely real as we emerged back into the world at the service plaza on the New York State Thruway. The cacophony of sound and the crowds made the quiet, meditative experience so real to me.*

Arlene: *This retreat had more of an impact on me than the more intellectual guided retreats I have taken. It was more challenging and a very worthwhile experience.*

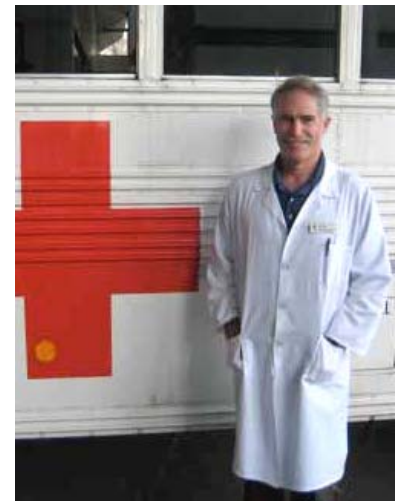
Sally & Andy: *We will join our friends in recommending a monastic retreat to any one seeking a richer life.*

Marek: *Over the coming years, I hope to help to orchestrate an annual monastic retreat for our parishioners, even if only a few are able to join us. It's a life transforming opportunity to get in touch with ancient spiritual practices. It is also a superb way to spend time with others in our parish and either create or deepen friendships.*

Germany

By Dr. Terry Sullivan

On September 11th, 2001 the world changed for all of us in an instant. With the exception of the families of those that died, the first responders, fireman and police officers on the scene as well as the survivors, no group of Americans was affected more than the members of the U. S. military. With the initiation of Operations Enduring Freedom (Afghanistan 2001) and Iraqi Freedom (2003), all branches of the military were mobilized for war with over 175,000 troops ultimately deployed in the Middle East. As the hostilities in both countries transformed from conventional to guerrilla warfare and sectarian violence mounted, American casualties and devastating injuries amplified the demands on the military medical community including medical reservists to the point that they were running short handed at home and abroad in many medical centers in certain specialties including vascular surgery. In early 2007 the Society for Vascular Surgery put out a call for *(over, please)*



civilian surgeons to fill areas of need and this developed into the opportunity for me this past year to volunteer my services through the Red Cross to help the Army surgeons in Landstuhl, Germany. Landstuhl Regional Medical Center (LRMC) is Europe's American Army central receiving hospital adjacent to Ramstein Air force base through which all injured American soldiers pass en route to either Walter Reed, Bethesda or Brook Army Medical Centers. With the blessings of Brenda, Casey and Emily I signed on for two weeks in November at LRMC, and the experience will be with me forever.

The departure day arrived and I made my way to the airport as the Phillies were parading down Broad St., heroes in full regalia. I watched with joy and apprehension as the crowd cheered on these young men who had made their city so proud. I thought of the time my father had taken my brother and me to Connie Mack stadium where we met up with my grandfather and great grandfather, a spry eighty-four at the time, and watched Ritchie Allen hit a three-run homer over the center field scoreboard only to be outdone by Roberto Clemente throwing Johnny Callison out at home on the fly from the warning track. Johnny, like Dad, was my hero as a kid and ironically near the end of his life he became my patient. Watching the parade from the airport bar it was the summer of nineteen sixty-five and I was ten, again for a moment reconnected with my father. I then boarded an airplane to Germany unaware that I had no idea what the word "hero" really meant.

I arrived in Germany the following morning tired but anxious to get involved. I reported to the Surgical Trauma Unit of the Landstuhl Regional Medical Center about the same time that a C-17 Critical Care Air Transport (CCAT) plane arrived from Bagram, Afghanistan, carrying three critically injured soldiers. The most seriously injured was the Army "Ranger of the Year" last year, and while on patrol he protectively went ahead of his men to check out an abandoned vehicle that exploded on approach (improvise explosive device, IED) resulting in traumatic amputations of both legs, catastrophic hemorrhage, a major brain injury, a collapsed right lung and blunt abdominal trauma. After rapid helicopter evacuation and within an hour he was being operated on by a Forward Surgical Team (using a Mobile Army Surgical Hospital equivalent) and underwent "damage control surgery" including completion amputations, both leg arteries tied off, a right chest tube placed to re-expand the lung, and open abdominal packing for a liver laceration. He was then airlifted to Bagram Air Force base and a level 3 hospital where he was re-operated on within the first 12 hours for ongoing bleeding. The blood transfusion requirements were enormous and a "whole blood drive" was initiated where all available blood type compatible personnel will directly donate units of blood for immediate transfusion. Within 48 hours he was en route to Landstuhl, Germany in the C-17, an airborne fully equipped mobile Intensive Care Unit, for further stabilization more surgery and additional preparation for the trip back to Walter Reed or Bethesda. I took him to surgery with an Army trauma surgeon for the third time where he needed a "washout and debridement (cutting away of dead or infected tissue)" in preparation for the long trip over the Atlantic. It was the Ranger's third tour of duty and he and his wife had both had a bad premonition about this "last tour", she told me in a strangely cheerful, matter of fact tone on the Red Cross bus to Ramstein Air Force Base. The Ranger's young wife and

his Mom were going to be flying back with him to Bethesda. As he was loaded into the C-17 one would scarcely know there was a patient on the stretcher packed with a portable ventilator, oxygen tank, ICU quality monitors, chest tube collecting system, and numerous IV fluid and medication pumps. The preparation, checks and rechecks by the CCAT team were impressive and underscored the highest priority given to the safe transport of the wounded. Ironically, the airbrakes on our empty bus failed on the trip back to the hospital and the driver was glib in his assessment that the U.S. military is unrivalled in its response to crises but does a "mediocre job" of taking care of the routine such as vehicle maintenance.

As more CCAT planes arrived, and others took off for the States I heard story after story of incredible heroism all framed in the context of "just doing my job, doc"; many multiple amputees, some with devastating traumatic brain injury, severe burns, disabling hand injuries, colostomies, disfiguring facial wounds and tracheotomies. The most astounding story was of the young medic on patrol with his unit investigating an abandoned house where a booby-trapped refrigerator exploded causing the unit Captain to suffer massive bleeding from his missing right leg as well as severe blinding facial burns. The medic himself was down on the floor with bleeding compound fractures of both legs and left arm, but still managed incredulously to drag himself across the floor to the Captain. With only one functioning arm and in spite of his own menacing pain, the medic was able to get a tourniquet on the bleeding limb and saved the young Captain's life.

It became clear to me very early in the experience that these soldiers and their families are something more than special. Their sense of mission, focus and moral clarity is astounding. The implicit subtext of the mission is always to get each other home safely. Although they would never see themselves as such, they are the real heroes putting their own lives and self-interest at greatest risk to defend, protect and serve our country in the name of freedom. Now off the front pages these dedicated men and women are taken for granted by the majority of Americans and we owe them more than simple gratitude. It's more than the standing ovation at the Inauguration or the fly over at the football game, certainly meaningful symbolic gestures of support, but by God not enough! We owe them the long term commitment to their recovery, rehabilitation and return to a fulfilling civilian life, if possible free of pain, guilt, depression and poverty, after they have given their all for this great country, our country. This is about faith, human decency and kindness as well as the societal duty to support the soldiers and their families for the balance of their forever altered lives.

I will always be humbly grateful for having had this unique and profound opportunity to use my gifts to help our soldiers wounded in battle. I will remember their courage in the face of unspeakable pain. I will remember the fear in the faces of families trying to deal with the uncertainty of survival or severe disability. Although tested at times my faith has been strengthened in ways that I still have not fully understood. I will be forever deeply moved by this remarkable glimpse into the uniquely human experience we call sacrifice, an impulse that could only be driven by love; the love that comes with camaraderie, humanity and faith as well as the love of liberty, God and country.