The woman travelling north in the Honda CRV abruptly made a left turn in front of Colby Fillman’s south-bound motorcycle. With no time to brake, Colby collided with the back of her SUV, crashing through the window. His right shoulder smashed into the post between the windows, wrenching it backwards and tearing out from his spinal cord the nerves that operated his right arm. He also broke his left forearm and injured both legs as he collapsed, unconscious, to the pavement.

A few moments later, Colby, unaware and in shock, attempted to get up. He was determined to re-mount his motorcycle, so he wouldn’t be late for his job at Tennessee-American Water, but neither of his arms functioned. Police and ambulance struggled to restrain him, and that’s when he regained consciousness, looking up from the pavement into the face of a police officer forcibly holding him down and shouting at him to be still.

Colby spent four days in the hospital where his physician told him he’d never be able to use his right arm again. Uncomprehending, Colby asked, “And how long will it take before my arm works?” The physician replied, “Never.” Still not understanding, Colby asked when he would be able to move his arm, and received the same negative response. After several back-and-forths, the physician sternly said, “Look, you’ve had a complete avulsion. Your nerves are torn out of your spinal cord. Your arm is dead. It will never move again. In a year, you’ll be asking me to amputate your arm because you’ll be tired of it hanging lifeless at your side.”

Colby couldn’t grasp this dreadful prognosis as his life sentence because, even though unable to move his right arm, some function in his hand remained. His mother implored the doctor to at least give them a referral for physical therapy, and eventually Colby came to Siskin Hospital for Physical Rehabilitation for outpatient therapy.
Though aware of the prognosis Colby had received, his therapist, Dr. Cheryl Giest, OT/L — a specialist in hand, wrist, elbow and shoulder therapy — knew the medical world had grown by leaps and bounds in this area. She also knew that time was in Colby’s favor since the accident had occurred recently. Often, nothing can be done if a year or more has elapsed. She recommended a surgeon at Emory University, and Colby made an appointment for a medical consultation.

When the surgeon met him, Colby says, he was so excited because Colby presented as a perfect candidate for the new procedures available. He told him that he had performed many surgeries for people in his condition and that Colby would be his poster child. He cautioned him, however, not to expect to ever be able to touch the back of his head or raise his arm over his head. Despite this limitation, Colby felt hope revive.

Colby underwent surgery almost exactly six months after the accident. The surgeon told Colby to expect a six-month recovery period with no sign of improvement, but after that he would see incremental improvement. During the six months’ recuperation period, Colby continued his outpatient therapy at Siskin Hospital.

Almost to the day, Colby says, he saw improvement when his baby boy, Barrett, was born six months later and Colby raised his arm to hold him.

Now, Colby can do most everything he did before, including touching the back of his head and raising his arm above his head. Besides the surgery, he credits the almost two years of therapy plus his own doggedness in following Dr. Giest’s instructions with assigned homework.

Since the accident, Colby has met other people with amputated arms and found out they’d had the same diagnoses with the same prognoses of arm death and inevitable amputation. Colby is happy to share with them that there are other options besides amputation.

“Because of Siskin Hospital,” says Colby, “I can play with my children again.”

This story was originally published by Siskin Hospital for Physical Rehabilitation.

For more information on the life-changing services provided by Siskin Hospital for Physical Rehabilitation, visit them at siskinrehab.org.

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