

My husband John E. Fields succumbed to his illness January 15, 2007.

Gone before his time. John was the love of my life, my companion, best friend and soul mate, a loving father and grandfather. It was an honor and a privilege to accompany him for 30 years.

The aftermath:

Although Medicare covered most of my husband's medical expenses at the Mayo Clinic, we still went bankrupt paying for his care. And my husband would die before he could make it through the bureaucratic maze to obtain his Disabled Veterans Life Insurance benefit that he had been fighting for since 1992, when he was first rated 100% combat-disabled. It would take another two years and the help of my U.S. Senator's office to get this wrongfully denied benefit, a benefit he had earned and which is intended to sustain a family in transition following the death of a loved one. While my husband's death is considered service-connected and I now receive DIC payments, that payment is only half the amount my husband previously received as "Veterans compensation"; our mortgage payment was not cut in half nor were our other basic living expenses, except perhaps for the food bill. As a result, we lost our family home. This is how Agent Orange widows and our families are becoming "homeless".

The Vet Rep system is just as broken as the entire VA system which it is a part of. Prior to my husband's death, there was no one within the Veterans system who could talk to us regarding his benefits. His Vet Rep (VFW) had abandoned him... he went fishing, for real, the day I brought my critically ill husband in to meet with him and then refused to work with him.; it's a good ol' boys club, and no other Vet Rep at any other Veterans service agency would agree to see him either. There also were no social workers at the VAMC who could provide us with any "end of life" information. But, within two days of my husband's death, the VA was right on it, processing him out of their system and demanding repayment of his last month of Veteran's compensation. It's a cold cruel system. My husband's greatest fear was that he was just one more GI guinea pig. Had the VA intentionally withheld needed medical care? Was the VA simply monitoring the progression of disease in a chemically exposed population? Remember Tuskegee? Atomic Vets? Are they really just waiting for an army to die?

No disabled Veteran should have to beg for medical care.... and still not receive it. My husband had received community awards for his dedicated work in advocating for other Veterans and was more familiar with the VA system than most. If he couldn't get his needs met at the VAMC and get his rightfully earned benefits, who could? I was advised to follow VA protocol in filing a claim for the neglectful care my husband received which was denied, as was my appeal. The VA's legal counsel tried to intimidate me using cherry-picked notes from my husband's "confidential" psych file, threw bureaucratic hurdles in my way, and even accused me of identity theft after confusing my file with that of another Veteran with a similar name. In the end, the VA failed to follow their own "recommended" timeline guidelines in making a claim determination and told me to sue them in federal court, but by then they had almost run out the clock on the statute of limitations and no attorney would take the case. Even if I could have found legal representation, how was I to pay for it?

The VA is a closed system that polices itself and as such is subject to abuse and legitimate concerns are never addressed. Minnesota Senator Amy Klobuchar's office insists there is no problem at the VA because according to the VA's own study, 50% of Veterans report satisfaction with the care they receive at the VA. What about the other 50%? Are they like my husband? Dead.

I believe Minnesota Senator Al Franken will strongly support Veterans rights, but at the time of our crisis, he was not yet in office.

I share my story in the hopes that VA ineptitude and inefficiency and perhaps even malfeasance will not kill any more Veterans.

And I thank Mr. Jim Davis for collecting our testimonies in the hopes legitimate grievances will finally be heard and the VA will be held accountable to providing the quality medical care promised when our Veterans first enlisted.

Cheryl Fields, M.A.

TESTIMONY OF VA MEDICAL MALPRACTICE
(Only one case)



John E. Fields (1945-2007)

As we left the VAMC in Minneapolis for the last time, I said to my husband, "I can't believe they're actually just letting you all die." My husband corrected me, "They're not just letting us die. They're killing us. Denial of needed available medical care IS the same as killing."

My husband had served with the Marines 1/7 in Vietnam ('65-'66). He may have received his death sentence in Vietnam, but the shamefully neglectful care he received at the VAMC in Minneapolis is what killed him.

The VA had already treated him for two different types of cancers related to Agent Orange exposure, but when all the classic symptoms of cancer reappeared a third time, the VA refused to order medical diagnostic testing. My husband's VA physician, Dr. Maureen Murdoch, insisted he did not have cancer, dismissing his complaints with handfuls of Ibuprofen. Months later, and only after we sought assistance from Congressional representatives and medical help outside the VA, did his physician finally order diagnostic testing and by then, it was too late... the cancer was metastatic to almost every bone in his body. My husband wants to know, "How is it possible to miss diagnosing Stage 0 – advanced Stage 4 cancer"?

VA ineptitude

In 1999, my husband had taken ill while visiting family in Florida. The VA clinic there was closed for the holidays, so he visited a civilian hospital ER where a chest X-ray detected a spot in his lung and he was told he should have it monitored when he returned home to Minnesota. According to the VA's own study (1977) the Marine units that my husband had served with were at extreme high risk for lung cancer; but without any further diagnostic testing, Dr. Murdoch, his VA physician, concluded that "the spot" was inconsequential and attributed "cloudiness" in his lungs to some vague fungus usually associated with exposure to cow pasture that my husband probably contracted while growing up. My husband grew up half a century earlier, in East L.A., where the closest cow was an hour's drive away.

A year later, the VA would treat my husband for prostate cancer and subsequently for skin cancer. But the discomfort in his lung persisted and he again complained to his physician of unusual weight loss, increased fatigue and sharp and unusual pain – all the classic symptoms of cancer. Dr. Murdoch referred him to a dietician for weight loss and for "physical therapy" gave him limited access to the VA employee gym (Disabled Veterans apparently don't have a gym) and prescribed Ibuprofen for pain. Because my husband's annual PSA reading (for prostate cancer) was normal, Dr. Murdoch insisted he did not have cancer and refused to order further diagnostic testing because according to her, "a single patient rarely, if ever, gets more than one type of cancer", even though the VA had already treated my husband for two different types of cancers.

Most frustrating for my husband, who also had PTSD, was that he knew his physician was not believing him. Research shows that physicians tend to disregard complaints of patients who have a primary diagnosis of MI

(mental illness) often resulting in misdiagnoses, inadequate treatment, and often, as in my husband's case, death. My husband told his physician that it felt like his rib had broken and like his ribs were tearing away from his sternum. "Nonsense," Dr. Murdoch said, chiding him as though he was a child and it was all in head. "Ribs don't just break". Apparently they do.

Months later, and only after we had sought Congressional assistance and medical help outside the VA, did his physician finally order a CT-scan, but by then it was too late. The cancer had become metastatic to almost every bone in his body. His physician, whom I'd yet to meet, would deliver my husband's dire diagnosis over the telephone and with no treatment plan in place. He would have to wait a month for a consult appointment in VA oncology to find out what, if any, treatment was available, an eternity if you are in great pain and possibly only have weeks to live.

They would need to take a biopsy from the diseased broken end of his rib, the one his VA physician had insisted was not broken. My husband fasted the evening before his surgical procedure scheduled for early morning but due to VA scheduling errors, he would not be brought into the OR until mid-afternoon; he was denied food and even water for almost 24 hours. The cancer had been in my husband's body so long, the cancer cells had become almost completely undifferentiated, making it difficult for the VA to finally make the diagnosis of non-small cell lung cancer.

We requested to see another VA physician but Dr. Murdoch told us there were no other VA physicians my husband could see and that there was no medical supervisor above her. We decided to seek a second medical opinion at the Mayo Clinic in Rochester, MN, and asked Dr. Murdoch's if she would make one short, 5-minute telephone call to expedite my husband being seen there. She agreed but would delay in making that phone call for an entire month, despite our repeated requests; her last shameful excuse (and it's in my husband's medical records) was that she had a head cold and hadn't been in to work for a week. According to VA legal counsel, the VA is under no obligation to assist disabled and ill Veterans in getting urgently needed medical care at a non-VA facility willing to assist them.

The day after receiving Dr. Murdoch's call, the Mayo Clinic scheduled my husband for an oncology appointment two weeks out, but after triaging his medical records they received from the VA, they immediately moved his appointment up to the following week. They understood the criticalness of his condition. Our biggest regret was not getting the hell out of the VA sooner.

The VA still insists my husband had not been in any pain and that Ibuprofen is adequate pain management for someone with cancer to the bone; the Mayo Clinic, however, could not begin cancer treatments until they got his out-of-control pain managed as he was expending all his energy dealing with the pain, leaving little to fight the disease itself. My husband would never have to convince his Mayo oncologists that he was in pain... it's a given with this disease. By the time we arrived at the Mayo, my husband's spine was almost completely eaten through by tumors, putting him at great risk of paralysis, just one wrong move, something the VA failed to tell us. The VA also failed to inform us of lesions they had previously found in his liver and an abnormal kidney.

After so many misdiagnoses, missed diagnostic opportunities scheduling errors and delays at an obviously overwhelmed VA, and Dr. Murdoch's cruel cold indifference, we decided to have my husband treated at the Mayo Clinic, a 75 mile trip each way, brutal in Minnesota winter, rather than return to the VA which was just minutes from our home. When my husband arrived at the Mayo, he had a 1% chance of surviving two months. He miraculously clung to life for another 12 months. Once a Marine, always a Marine.

Even though the VA repeatedly proved they were incapable of providing urgently needed quality care for my husband, the VA refused to pay for outsourcing his care to a non-VA medical facility willing to assist him. Only after my husband had already completed his first round of chemotherapy, and radiation and Zometa treatments to strengthen his spine and was scheduled that week for his second MRI and a CAT-scan at the Mayo before beginning his next round of chemo, the VA called and said they were now willing to schedule him for an MRI. My husband told his VA physician, "If I'd waited for you to order an MRI, I'd already be dead by now."

Even though my husband was 100% combat-disabled, the VA would not provide us with any homecare/hospice assistance, unless he was willing to forego all cancer treatments and palliative radiation treatments for tumors in his brain. The VA was not willing to help my husband live with the disease, but willing to help him die from it. There was also no nursing staff available to call as medical care questions arose and I'd have to bundle my husband up to transport him to an ER in sub-zero weather. The VA would not provide us with a hospital bed, a walker or even a commode, although we did liberate a VA wheelchair, since repatriated. It's shameful that a disabled Veteran should have to steal a wheelchair from the medical facility that is supposed to be serving his needs.