Episode 34: Diana survived a plane crash

Lexington, Kentucky. 1 pm on a Friday, Labor Day weekend.

Diana, a medical flight nurse, was sitting in a Lear jet. The pilot was unconscious. The co-pilot could not move because he had a broken back. Diana's patient had died on impact.

The plane was sitting on Versailles Rd in Lexington, after it had just slid across the road on it's belly. The landing gear was gone. The right wing had been ripped off the plane. And now that it had come to a stop, Diana knew she had to get the door open and get people out, because she could hear the crackling of fire, and the cabin was filling with smoke.

Except she couldn't stand up, because she had a broken back and two broken legs.

I think you'll hear from our conversation that Diana is pretty incredible. She's the type of person who arrives and takes charge. She's a natural-born leader who was born to help people who are in a bad situation. But for this story, that was turned around – she was the one in desperate need of help.

I want to thank our mutual friend Sandi for connecting me with Diana. I continue to be surprised at the people and stories that are right in my own network.

And hang around after the conversation for a couple more things that might be of interest. I now have bumper stickers available, if you'd like to let everyone know about your favorite podcast. And, I recently appeared on another podcast hosted by my friends Glenn and Jamie, where we talked about this show and other podcasting-related stuff. That's about a 15-minute interview that will play in full if you want to listen to it.

And if you'd like to be a supporter of this show, you can do that at WhatWasThatLike.com/support.

And now, please enjoy my conversation with Diana.

Scott
Have you ever been on a plane and told other fellow passengers the story?

Diana
Yes, actually. I have several times.

Scott
You're not worried that it might freak them out or something about flying?

Diana
That has been a concern of mine. Actually, I think it allayed a couple of fears, especially, for one specific passenger when we were having some turbulence.

Scott
I'm just picturing somebody sitting next to you that's kind of scared of flying and you saying, "Hey, let me tell you this story!"

Diana

Yeah.

Scott
Back when this happened, what was your job title? Was it a medical flight nurse?

Diana
I was the chief flight nurse for a nationally-accredited critical care air ambulance called CareFlight.

Scott
What was your typical day like? What did you do in that capacity?

Diana
Well, were fixed wing transports, we flew Learjets, and we actually flew domestically as well as internationally. A large majority of what I did was, anytime a call would come in for a transport, I would make contact with the hospital where the patient was to get a complete assessment report of the patient so that I knew what type of equipment and medical staff are needed. Then, I did a large majority of the transport. Maybe, I would do 3 or 4 flights in a week - it just depended.

Scott
This accident happened in Lexington, Kentucky, but you didn't live in Lexington at that time, right?

Diana
That's correct. I lived in Largo, Florida. Our main base was in Clearwater at the St. Pete Clearwater Airport.

Scott
So, you would always fly out of Clearwater, then?

Diana
Right.

Scott
Okay. Were you always on the same plane or the same type of plane?

Diana
Well, we had a 414, which was a twin-engine. Then, we had Learjets. At one time, we had 6 aircraft on our 135 certificate. After 9/11, aviation took a huge hit. Right before this crash happened, we were actually on another company's 135 certificate, which meant that the company maintained the Jets, provided the Jets, and provided the pilots.

Scott
The plane that you were on that day was a Learjet, right?

Diana
Yes, it was.

Scott

Okay. Can you describe the layout of the plane, who were on it, and where they were in this particular flight?

Diana
Yes. It was a Lear 35. You have a small cockpit in the front. The captain was on the left side, and the co-pilot was on the right side. Right behind that was a jump seat. Along the right side of the aircraft was a stretcher - that was equipped with oxygen and all kinds of monitoring equipment - and a backbench seat, which is where I sat 90% of the time, and 2 captains chairs, sort of, on the left side for family members or an extra crew member. Ironically, on this specific day, I did not sit in the back of the aircraft because when I picked up the patient, she told me that she did not want to lie down - she wanted to sit up. That was part of the miracle because if I would have been sitting in the back of the aircraft where I did 90% of the time, I would not have made it because it cracked and burned all the way through that part of the aircraft.

Scott
So we got a total of 5 people on the plane. You got the pilot and the copilot in the front. You and the patient were, kind of, in the middle.

Diana
Right. I was sitting right behind my copilot. She was sitting right in front of me by the door. Her husband was directly behind her - who, by the way, flew the P-51 Mustang in World War Two.

Scott
Wow. Can you tell us anything about the patient? Is there medical privacy?

Diana
Well, I will just let you know that I had called the day before. They had just wanted to use our aircraft and oxygen. This was an elderly woman who had end-stage lung cancer. They lived part-time in Marco Island and part-time in Lexington. They wanted to go from Marco back to Lexington so that she could see her specialists there. Because we were an accredited air ambulance, we had to follow certain guidelines. She had signed to “Do not resuscitate.” So, I went without my flight partner. I brought oxygen and all the other things that we would normally bring on transport. We tried to make it as non-medical as possible per her request. That meant that she got to sit up and didn't lie on the stretcher. We kept everything very low-key so that she could feel comfortable.

Scott
So, the general flight itinerary that day was you flying out of Clearwater - which is the Tampa Bay area - to Marco Island where they were, and then up to Lexington?

Diana
Right. When we landed in Marco, which is only a 6,000-foot runway - we touched down, there were no problems - we stopped and picked up the patient. Then, when we landed in Lexington, on a 7500-foot airstrip, that's where things went horribly wrong.

Scott
Let's start from when you were approaching Lexington and going in for the landing. Can you just take us, kind of, minute-by-minute of what happened?

Diana

Certainly. About 20-minutes prior, we started our descent from about 41,000 feet. So, the captain lets me know that we were starting our descent. We called ahead to the FBO there to make sure that they know that we were bringing in a patient. Then, I secured the cabin. I made sure that the patient and her husband were secure, all medical equipment was secure, and that I was secure. It was a beautiful sunny day. Nothing seemed amiss. We touched down. When you touch down, you would go about 200-250 miles per hour and the brakes would come on on a normal flight, but we weren't slowing down. I immediately realized that something was wrong. From where I was sitting, if I look forward to my right, I could see my captain and hear him saying, “No brakes! Brake me!” So, at that point, my copilot tried to stand up on the brakes and said, “No brakes!” I didn't panic at that point because I know that we have a reverse thruster - its backup system, where when they pull back on the thrust from the engines, the thrust would reverse and stop you on a dime. When I watched him do that and nothing happened, my anxiety was rising as I heard my pilot scream, “Hold on! Hold on!” I couldn’t see what they could see at the end of this runway. Unlike most runways - most runways have grass or maybe gravel or even water - this one has a 60-foot cliff. So, we were going off that cliff. I just, kind of, tucked my tailbone down, pulled my knees up, braced, and screamed, “Hold on!!!” So, my patient and her husband-- there was nothing that anybody could do. We just tried to hold on.

Scott
Were all of your seat-belted in?

Diana
Yes, absolutely. We were all seat-belted in. All the equipment was seat-belted in. But the crash was so severe that it tore the plane apart. We were all still in our seats at the end of the crash, but the things inside the aircraft had gotten totally torn away. If she would have been on the stretcher, it probably would have killed me because the stretcher actually, kind of, came forward and hit me.

Scott
This is Scott. What you'll hear next is the last couple of minutes of audio for this flight from the cockpit voice recorder.

Pilots
Gear’s coming down. Three green, no red. Engine is off. Antiskid. Landing and lights are on. Eric missions are coming on. Flaps are set 10. Hydraulic pressure is good. 20 flaps. Flaps come in 20. Autopilots off. Dampener and full flaps complete list with the thrusters. Arming one and two. Waveclear. Rapid plenty. Holding steady. We’ll complete the list. Rev 15. Holding steady. Final three green, no red flaps full. Rev on 10. On rev. They're not deployed. They’re armed only. We're not gonna brake. We're going off the end. Okay. (Starts Screaming) (Radio silence)

Diana
The pilot and co-pilot would tell me later that there was no control over this aircraft - our nose was pitching right into a 15-foot ditch. When we came off the end of the runway, we headed into the ditch. As we came off that runway, there was a huge wooden ILS structure for instrument approach. Our right wing would crash into this because I remember smashing my head into the wooden partition between myself and my co-pilot from that impact that tore our right-wing away from the aircraft. So, half of the fuel was torn away from this aircraft. Then, we hit the highway and it sheared off our gear. We went across 6 lanes of this highway. At that point, we were on

fire. Amazingly, this is a 6-lane thoroughfare through Lexington, Kentucky. It was one o'clock on Friday before Labor Day. There were no cars that got hit. There were cars everywhere but there were 2 red lights that happened to be red at that exact time. We slid across the 6 lanes of highway screeching metal, smelling smoke, and feeling disoriented. Then, we came to an abrupt stop.

Scott
When you were going across the road, it was just sliding on the belly of the plane because the wheels weren't engaged anymore?

Diana
Correct. It was just metal on concrete. A horrific sound.

Scott
Let me take you back to the 60-foot drop. Yes. When you looked forward, could you see that drop coming?

Diana
No.

Scott
So you didn't know that you were going to drop?

Diana
I did not. They could see it. I was looking at the door that has the gear to open it, and there's no window in that door. I could look forward and see my pilot, but I couldn't see the front cockpit glass.

Scott
It's bad enough to see that you're going to drop, but to get that sensation of falling, literally, like going off the top of a 6-storey building…

Diana
Right. When we hit down, I felt intense pain in my legs and in my back. It did break my back - I had a fracture of a vertebra. The force of it was so great that my lower leg bones pushed up behind my upper leg bones. My tib fib went behind my femur and actually tore all the supporting ligaments of my knees, so I had no connection between my lower leg bones and my upper leg bone. In the process of doing that, it ruptured the huge artery that runs and gives blood flow to your lower extremities - the popliteal artery. So, actually, my toes were, kind of, turned opposite of my body. I had no ability to stand or move my legs.

Scott
So, you couldn't stand up. When the plane came to a stop, what did you do at that point? What sounds were you hearing?

Diana
I was hearing the distinct crackling of fire. I could smell smoke and the smoke was heavy inside the cockpit. I heard moaning and I looked forward. I could see my captain, but he was unconscious and, kind of, draped over the yoke. There was blood dripping from his head. Then, I could see my patient. She had just, kind of, collapsed forward and wasn't moving. I could not

see her husband who was directly behind her - I thought that was, maybe, because of the smoke. I don't really know why I couldn't see him. I had, like, the feeling of overwhelming terror just rising up inside of me. We've trained for these kinds of emergencies, so I said, "Okay, I have to respond. I have to get us out of the aircraft." I heard my co-pilot moaning. I said, "Jim, are you there? Are you okay?" He's like, "No, my back's broken." He could not move, so there was nobody else to do anything but me. That's when I tried to stand up with all of my might. All I had to do was stand up, lift the gear, push the door open, and I would have been able to get out and start pulling people out. Because of my leg injuries, I tried to stand up twice but I was, like, "Why can't I stand up?" I thought it was my buckle. I checked my buckle again and tried to stand up with all my might but I couldn't.

At that point, I realized that I could do nothing in my own strength. So, I just started praying and crying out, "Please say this. Dear God, in Jesus' name, please save us." My captain would later tell me that he felt somebody gently shaking him - it wasn't me and it wasn't my co-pilot. He could hear me praying behind him. He said that there was somebody saying, "Open the door." So, he came back now. The smoke was so thick that I couldn't see him. He stood right in front of me, opened the door, and fell out. People from the nearby cars came. One man had a fire extinguisher. He was trying to suppress the flames although that was, kind of, futile. However, he did take the fire extinguisher and smashed it against the cockpit because they could not open the door of this aircraft. The emergency door at the back was engulfed in flames, so the only escape out of this burning inferno was the front door right in front of me. They could not open it from the outside. One man broke his hand in the process. Then, Miles opened the door and fell out. By this time, there was Crash Rescue there at the airport. They had to come out and around onto this Versailles Road, the 6-lane highway. There was one firefighter who was in the truck that shot foam. He got down to the end of the runway right where the gate was - like, right at the hill that we came off - and was shooting foam across the 6 lanes of highway and trying to suppress the fire.

Scott
Does it even shoot that far?

Diana
It's amazing. I don't know how far it shoots. My husband's a firefighter and he was, like, "Diana, that's amazing." The other amazing thing was that the wind direction changed within just a minute. We would see a security camera on the top of the runway there - there was a parking lot adjacent to it - that shot, like, every 30 seconds. There was a picture of the aircraft going off the end of the runway. Then, you see a fireball and smoke going from the front of the aircraft to the back. Then, when the next camera shot, the wind did, like, a 180. So, the flames and the smoke was going away from us. It was absolutely amazing. So, they grabbed my patient and pulled her out. I think I was in and out of consciousness at that point. I do remember this man picking me up. Then, I remember laying out there. I looked over and I could see that my patient was unconscious. I said, "Can somebody start CPR?" There was an off-duty nurse there and she was valiantly trying but it was to no avail. Then, I was screaming for my co-pilot, "My co-pilot! Get my co-pilot!" He was trapped inside that burning aircraft. They had gotten the patient out. They had gotten her husband out. Miles was out on his own strength. Then, they pulled me out. Jimmy is 6-foot and was about 280 pounds - a big guy.

Scott?
And that's the pilot?

Diana
That would be the copilot. Miles was the captain - he was the one that had the head injury but was able to open the door and get out. He was very disoriented. He didn't know where he was. He couldn't tell them how many people were on board. My co-pilot was very conscious. He realized that the flames were coming forward. He was also a firefighter and he was like, “Oh my god, I'm going to die in a fire in an airplane.” Right before the firefighters got there, there was an off-duty firefighter who worked at Lexington airport as a security guard - he was also a horse jockey. This guy is only, like, 5’6” and 140-150 pounds. A couple of weeks prior, he had failed a strength agility test at the fire station. He got in the aircraft - Carl is his name - put his arms around my copilot, and lifted him out like he was a rag doll.

Scott
Adrenaline is a heck of a drug.

Diana
Oh my gosh, yes.

Scott
I'm picturing these people that were at the red light in their car. One minute, they were just sitting at a red light on their way to work or, maybe, leaving work to go for a long weekend. The next minute, they're pulling people out of a burning plane.

Diana
Exactly. I can't imagine what they thought. It was amazing to me how many people ran to a burning aircraft. I don't understand why it didn't explode. Their bravery to help people whom they don’t know was amazing. We did get to meet some of them. They had a reunion ceremony months later to thank all the policemen, the firefighters, and the civilians that came. I was still walking with a cane at that point. I came back up there to say thank you, hug people, and have them retell what had happened because parts of my memory were just, like, little chunks. Because of the trauma and the shock of it all, it was hard for me to put all the pieces together. It was very helpful and emotional and spiritual healing to be able to talk with these people and just realize how miraculous this whole event was.

Scott
Oh, that had to be an incredible reunion. What happened after you and everyone else got out of the plane?

Diana
I remember lying there on this grassy knoll. One woman came and was praying over me. I was coming in and out of consciousness. I asked if I could use her phone - she dialed the number for Care Flight - and I told the dispatcher what had happened. At that point, I didn't know that we had gone off a 60-foot cliff. I didn't know everybody's extent of injuries. I told her, “I think I broke my legs. I just couldn't move my legs.” Then, I asked this woman to call my husband who was at the fire station. He answered and I told him, “Baby, we went off the runway. There was an accident. I'm okay. I think I broke my legs.” Then, the woman took the phone because she could see that my toes were going opposite of my body and I was going in and out of consciousness. She said that this is far worse than broken legs. Then, she laid her body over me because of the truck that was shooting the foam - she was shielding me from the foam getting all in my face. Then, I heard the helicopter. I mean, it's amazing that we were in Lexington. The week prior, I had gone to the Dominican Republic and there was nothing like that. There was no level one

trauma center in the Dominican Republic, so if it were to happen, it would have been a totally different outcome.

The helicopter landed. When you come upon a scene, you do triage. You go and look at the patient that has the highest degree of injuries - the most critically injured - but still has a chance to live. Obviously, my patient died on impact. They had gotten Jim out. We were all laying there. I was telling them that my co-pilot's back is broken. They were taking me, putting me on the stretcher, and I was like, "No, no, no." Then, I started thinking to myself, "My God, if I am worse than a broken back. This is not good."

Scott
You are a nurse - that's your job - right? Did you feel any obligation, from a medical standpoint, to help the others that were there?

Diana
Absolutely. It was so difficult to see my patient lying there and I could do nothing. I knew that my co-pilots back was broken. I had no idea about the extent of the patient's husband's injuries. He was critically injured as well, just not as life-threatening as my injuries were, so he, my co-pilot, and my captain were taken by the ambulance while I was flown out in a helicopter. I remember looking up and seeing 2 flight personnel in the same Bluejet flight suits that I use. They were starting 2 large bore IVs. It was, like, an out-of-body experience. I'm like, "No, no! That's what I do!"

Scott
Yeah, it's a role reversal.

Diana
It was insane. I went immediately from being a critical care nurse to a critically-injured patient. I'm an in-charge and take charge kind of person, but I can do nothing - it is all out of my scope of anything that I can do. I remember being on the aircraft in so much pain, so they gave me something for the pain. It was not a long flight at all - I think it was less than 10 minutes until we touched down. I was going in and out of consciousness because I was bleeding into my legs and hemorrhaging - that's called compartment syndrome. I was actually bleeding down into the tissues around all my muscles in my lower legs. I remember laying in the trauma bay and hearing a nurse saying, "She has no pulses in her feet." I was thinking, "Oh dear God!" They thought I had femur fractures because of the deformity to my legs, but what really made that deformity was my lower leg bones were turned around. In that process, it ruptured the arteries and I was bleeding down into my legs. So, I remember having intense pain. They were doing X-rays and starting IVs. In the process of fracturing my back, I punctured a lung, so they were bringing all the equipment to put a chest tube in. I have put chest tubes to save people's lives and, I was, like, "I'm alert! You are not putting a chest tube into me while I'm alert! Just hang on." I remember hearing my co-pilot, Jimmy. He was actually in the trauma bay next to mine. I could hear him and I said, "Please, can somebody give him something for pain?" The nurse that was taking care of me was Lee and the nurse that was taking care of Jimmy was Tammy. Tammy came over to my nurse, Lee, at one point. I guess she had medicated me, so my eyes were closed, but I could still hear. She said to my nurse in her sweet Kentucky drawl, "How she doing? You think she's gonna make it?" My nurse was like, "Damn, she's built like a brick shithouse. I think she's gonna be fine."

Scott

Did you tell them that you could hear what they said?

Diana
Oh, yes. We're, like, best friends now. She laughed so hard. This nurse was unbelievable. She went with me up into X-ray because they had to do an arteriogram where they inject dye to figure out where I was bleeding. Sure enough, it was bad - it was my popliteal arteries. So, they have to send me to emergency surgery. Lee stayed there with me. She held my hand. She was the ER nurse. She didn't have to do that. She came up there with me. At that time, I remember a phone ringing in the background. My son, who was 18 at that time, was dating a girl whose father was a fireman. That sweet girl is now my daughter-in-law.

They got through to the trauma center and they actually put the call through. My nurse Lee said, “She needs to talk to her son before she goes anywhere.” I could hear my son and he was just sobbing. He said, “Mom, tell me you're gonna be okay.” I said, “Baby, I love you. I'm gonna be okay.” He said, “Mom, listen. We've called the church and the prayer chain has started.” When things happen, people call our church, then the deacons would be notified, and then they would notify people under them. It was, like, one person calling the next person and then the next. So, I felt this enormous peace that passes all understanding. I had to sign a consent that said, “I am going into surgery. They are going to try to do what we call a femoral popliteal bypass where they would take a vein out of my leg to make a new detour around the broken arteries to restore circulation to my lower legs. But, if that is not successful, they may have to amputate my legs.” So, having to sign that felt really heavy. Then, I remember saying, “Can we pray?” There were people running around in surgical garb and everybody were freezing. “Yes, we can pray.” Then, they all looked at each other and said “You pray”, “No, you pray!” I was thinking, “Oh, my God. Not a Baptist in the bunch. Come on, somebody pray!” I think I remember praying out loud. Then, I think they gave me something. I was just probably praying in my mind, but I remember saying, “God, you brought me this far. I know that you are with me. If it is your will, let me have my legs when I come out. If not, God, then just give me the grace to handle it.” That's the last thing I remember.

I was in surgery for 13 hours. They had to replace my circulating blood volume. I had about 12 to 13 units of blood and plasma. They almost lost me twice because of the extensive bleeding. While this was going on, my company flew my husband and Jimmy's wife up. My husband said, “Every hour, somebody from the OR would come out and give an update on Jim and myself. After 13 hours, they came out - the vascular surgeon and the orthopedic surgeon were there. The orthopedic surgeon told my husband, “That's the worst injuries I've ever seen on somebody's knees. I doubt that she'll ever walk again. She got a broken back. We haven't even been able to address that.” Then, the vascular surgeon said, “Oh, my word. Her veins are bigger than most people's arteries. I was able to get a good bypass. Her toes are pink. I'm really happy with that.” My husband just fell to his knees and thanked God that I was still there.

At that time, my pastor, Dr. Scott Boggs, actually felt led. He flew up and got there not long after I got my surgery. A friend that I went to high school with had heard what had happened. She actually lived in Lexington. She had been taking chemo treatments for breast and lung cancer. She actually showed up at the hospital and was there with my husband. When he saw me for the first time - I was on a ventilator, so I don't remember any of this, obviously - he was telling me, “Babe, I'm here. The kids are on their way.” And they just prayed over me. Then, she took him outside. My pastor told me that he prayed the Psalms out loud over me for a long period of time.

They had to put steel fixator rods - they drill them into your leg bones. They're connected to a long steel rod on the outside called external fixators because, again, there was no connection between my upper and lower leg bones - all my ligaments were torn away. So, they had a way to keep my legs intact. There was bleeding that would not stop. He said that they had to change the bandages, like, 2-3 times while he was there. He felt that peace came over him and that I was going to make it. He was able to go out and see my son who was distraught in the hallway, thinking that I wasn't going to make it. At that point, he told my son, “Chad, your mom's gonna make it. Not only is she gonna make it, she's gonna dance at your wedding.” Years later, he was there at my son's wedding to see me dance with my son, which I think is a beautiful thing.

I was in ICU for a week. I told you that I had a punctured lung. They had me on a ventilator. Because of the smoke inhalation and all the massive amounts of fluid, my lungs took a terrible injury. I was on what we call acute respiratory distress syndrome. They had to have me on high levels of oxygen. My muscles broke down because of the massive trauma - it's called Rhabdomyolysis. Then, as that circulates through your blood, it gets into the kidneys and clogged up my kidneys. I went into Acute Renal Failure. My blood was having a hard time clotting and I had excessive bleeding, which is called Disseminated Intravascular Coagulation. As a critical care nurse, I know that each one of those things has an 80% mortality. If you put them together, it's called Multiple Organ Dysfunction Syndrome. It has a 95% mortality. At one point, I also shot a temperature of 104. They were afraid I was septic. So, what I'm saying is, I went against all odds because I should not be here - I should not be here.

Scott
13 hours of surgery. You said that they didn't even address your broken back.

Diana
They did not. After I finally got out of ICU, I was in a step-down unit. They thought that they might have to do some surgery on my back. At that point, they wanted to go back and open up my knees because all the ligaments were torn away. All I could keep thinking was, “I want to go home. I just want to go home.” My best friends had flown up with a nurse and a respiratory therapist. At one point, they were actually able to get me in a wheelchair with my legs extended on the ramps of the wheelchair so that I could go and see my co-pilot who was paralyzed from the waist down. One good thing about being a flight nurse is I knew where all the great trauma centers and rehab centers are - we've flown to most of them. So, they flew him to a Shepard Spinal Institute in Atlanta. He was there for months and months and I just wanted to go home. So, they got it together. My medical director, Dr. Mike Mazza Farrow, Linda, my respiratory therapist, and Michael Lin, another flight nurse, flew up on another jet and brought me home - that was September 12, 2003. I was in a trauma center here at Bayfront. The orthopedic surgeon came in and said, “Diana, I've never seen somebody with that injury live.” He had taken care of a young man who jumped off the Skyway and had those injuries - he didn't live. Anyway, he said that the force that rip those ligaments apart was so intense that it took bone fragments. He said, “If we just let your body heal for a while and give you rehab, let's see how well your knees will do. Let's see if the ligaments will scar down, and then we'll reevaluate it. The vascular surgeon was very pleased with my progress.

One surgeon did note that they had to do what we call fasciotomy to save my life up in Lexington, where they have to slice down both sides of your calves to allow the pressure to release. So, I had, like, 4-inch deep gouges that were 8-inches long down both sides of my lower legs. In doing so they cut through one of the major nerves down there - your peroneal nerve - so my right foot was dropped. So, nobody really thought that I was going to be able to

regain a normal function. So, they wanted me to stay there for rehab, but I said, “Please, I just want to go home.” So, they arranged for me to come home. They got a hospital bed here. They had all the equipment they needed, and my family took care of me. Three times a week, this wheelchair van would pick me up and take me to an outpatient rehab facility where, for two grueling hours, they would try to get function back into my knees and strength back into my muscles. There was a pool there. They would lower me down in this contraption - it was like a plastic chair - and they would slowly lower me into the water. Once I was in the water, I was buoyant, so I didn't have to hold up my own body weight and I would slowly learn how to take steps again, but it was excruciating. It was not easy.

Scott
So, this was the process that you were going through to, hopefully, be able to walk again.

Diana
Exactly. I remember saying to the orthopedic surgeon up in Lexington, “How long will it be to walk?” I remember him saying, “I don't know. I don't know if you'll walk again.” I remember very clearly that I said to him, “I'm gonna go back to teaching aerobics. I want to run again. You can doubt me, but don't you doubt the God that pulled me out of that burning aircraft when I called on His name. If He says ‘Walk’, I’ll walk and if he says ‘Run’, I’ll run.” I think that was such a challenge for me. I've always been a person that likes to be very athletic and would rise to the occasion of a challenge, but this was by far the hardest thing I have ever had to do in my life.

Scott
From his standpoint, I can Imagine that when you tell him that, he would think, “Well, that's great. You can think that, but from a medical standpoint, it's not too likely.” I understand why he would try to manage your expectations.

Diana
Of course, absolutely. I don't blame him one bit. In fact, I think that helped and inspired me. It was great to go back there later and actually walk in with a cane and show him that I was able to walk. He said, “I love when patients prove me wrong!”

Scott
Yeah. You started on quite a journey of getting back on your feet again. I saw that in the video - and I'll post a link to this video so that people can watch it - as you were starting to learn how to use your legs again, you had these rods that were embedded in the entire length of your leg. What was their purpose? What do they call them? What did they do?

Diana
Okay. Those are called External Fixators. So, because the supporting ligaments in my knees were torn away, nothing held the lower leg bones to the upper-lower leg bones. So, they drilled 2 holes in my femur and 2 holes in my lower leg bones, brought rods out, and then one long, straight rod, through all of them - it was, kind of, like, an erector set.

Scott
That's exactly what I was thinking - you look like a walking erector set!

Diana

They are very painful. Every time you move, the metal would just rip your flesh from your bone out to your skin. I still have scars from where those were in my legs, but they did what they were supposed to do and, for that, I'm grateful.

Scott
Those rods are what held the top part of your leg to the bottom part of your leg. So, they had to be there long enough for those 2 sections of the leg to, kind of, grow back together

Diana
For the ligaments to, kind of, heal down in order to give enough strength for me to stand again. I did have 4 more surgeries. In one of those surgeries, he had to give me a cadaver ligament from a bank, and then he was able to use a thermal probe which, kind of, shrink. Your ligaments are, kind of, like, rubber. If you stretch them too far, then they would be too lax and no good. Because the orthopedic surgeon, Dr. Coco Eaton, was so amazing and gave me the time for it to heal, he only had to replace one of them - prior to that, they wanted to replace all 4 in both knees. Then, he had to just, kind of, shrink down the other ones. Then, one of the most difficult things was trying to get your knees to bend again. I mean, there was so much damage done to the knee itself. They told me that I will probably have a couple of knee replacements, but I haven't had one knee replacement, and I am running and biking.

Scott
That's incredible! It's amazing! The knee itself is a very complex joint. People have to have them replaced just from wear and tear over time without any knee injury. Back to that video that I was watching… one minute, you were creeping along or trying to hold yourself up with your hands on the bars and learning to walk. Then, in the video, it kind of flashes forward and you were instructing an aerobics class like nothing ever happened. How much time went by before that could happen?

Diana
It was over a year. I had the external fixators for at least 8 weeks. Then, it was rehab for over a year. At one point, I convinced work comp that it would be cheaper for me to just go to one of the gyms that I taught at and work with a physical therapy assistant one-on-one than for them to keep paying for this rehab. I was actually at the gym where I taught aerobics. One day - this was probably about a year after - somebody didn't show up to teach a step class, so I just smiled and I said, “Well, let me just see what I can do.” I remember putting the step on the floor and saying, “Ladies, if I have to stop, just keep going. I'll just talk you through it.” When I got to teach that class, that was, probably, one of the best days of my life. Sweat was pouring off my body and it was painful, but it was amazing because I realized that I had come so far. Like, I had really done what I shouldn't have been able to do. It was miraculous.

Scott
I can imagine the ladies that were in that class-- not one of them better complain about how much it hurt.

Diana
Exactly. And you know what was cool? Some of those ladies in that class and people from all over just stepped up to help us. There were several groups that put spaghetti dinners together to raise funds for my family. My best friend, Linda Turner, who worked with me as a critical care nurse years ago at a hospital - that hospital had a bake sale to raise money. The guys at the Pinellas Park Fire Department would work for my husband so that he could be at home with me.

In our church, everybody just stepped up and really filled in the gap. It was so… I don't even know - there's not even a great word for it. It just blew our minds. We were just in awe of the outpouring of goodness from so many people.

Scott
Did you go back to being a flight nurse?

Diana
I did not. Unfortunately, it was at a time when the company ended up folding, so I think that this was, kind of, the nail in the coffin. I did fly. I have flown since I'm not afraid to fly, but it's wild. While this was going on, one of the physicians or cardiologists that I ran into said, “Hey, Diana. You really should think about going back and finishing your degree. You would be an awesome teacher.” So, I applied for a scholarship and I got the scholarship. At that time, while I was doing physical rehab, I was doing my Bachelor's online at the very college where I had graduated - St. Pete college. Then, I started working there part-time and went and finished my Master's at the University of Central Florida. So, for the last part of my career, for over 10 years, I was a professor of nursing, which I absolutely loved. I just retired from full-time in December, and I'm still an ed junk and I still do some online teaching. So, I was able to use my years of experience and education to, now, hopefully, inspire and empower the next generation of nurses coming after us.

Scott
Do you have any lingering injuries or reminders of the crash?

Diana
I do. I've gotten great blood supply to my legs, but my veins were damaged. So, if I stand for prolonged periods of time, I get what I like to call ‘cankles’, where your thighs look like your ankles or your ankles look like your thighs. I just get swollen down there and that's painful. If I sit for any period of time, my knees get stiff. On occasion, my knee will, kind of, shift out of place and that's painful.

Scott
When that happens, do you kind of just pop it back into place? What do you do?

Diana
I stretch and move until I feel that it's back in where it needs to be. I get massage regularly. I have my chiropractor and best friend, Dr. Steve Wycoff. I never did have to have surgery on my back. Thank God! With lots of therapy - massage, chiropractic, acupuncture, and physical therapy - I really am back to where almost I have no lingering injuries from that. Another thing that is amazing is when I really think about it is… we talked about the Gate Theory of Pain, where you have the perception as it rises up to your brain, then you feel it, and then you respond to it. When I feel that pain, it's almost like I can go in mentally and say “I'm just going to choose to not focus on that pain. I'll focus on something else.” And then, I don't feel it.

Scott
That is great! That's a talent!

Diana
It's a gift. There's no other way to say it because I'm not on any kind of medication.

Scott
How about the other people - the pilot, the co-pilot, the patient's husband? What has been their long-term outcome from this?

Diana
Yes. I got to see the patient's husband again 17 years ago - I went out to lunch with him. He had knee surgery, but he was mobile and getting around. He told me that he was a P-51 Mustang pilot and that he had been shot down twice in World War 2. I jokingly said to him, "Everything happens in threes. You should have told me. I wouldn't have gotten on the plane with you!" He's such a nice man. My captain was back to flying. He had a concussion but no lingering long-term effect. Unfortunately, my co-pilot lost his career as a firefighter and a pilot. He does walk but he walks with a cane. So, his injuries were the most life-altering, if you will. He's a great guy. We're still buds. And yeah, it was very tough on him.

Scott
You guys have all been through an incredible experience together which, kind of, bonds people. It does. Did they ever figure out why did the brakes fail?

Diana
Well, so the NTSB did a thorough investigation and they determined that it was a pilot error. This was only the third time that I had flown with this captain. He was an F16 pilot and F-16 pilots aerodynamically brake. I told you that this Learjet was not my company's, it actually belonged to another company. Just a side note, the bin Laden family actually owned this aircraft at some point in history - not Osama, but the other bin Laden family here in the United States. This company - I won't state who it was - was managing this aircraft, so the captain worked for them. Mr. Babs, who was a pilot said, "Don't you remember, when we touched down, we touched down too light." We actually came up and came back down. In a Learjet, you have to land with enough force that enables what we call a squat switch - that would allow the brakes and the reverse thrusters to deploy. So, because we landed light, we didn't do a go-around, there were no brakes and no reverse thrusters. That is what the NTSB's final decision is.

Scott
So even though it was considered a pilot error, he was still able to get back and continue flying?

Diana
Right. Again, I don't blame anybody. I'm not a pilot. I just know that I am grateful that we're all alive.

Scott
I know you're a person of faith. Can you, kind of, just summarize how you survived and why you survived? Did it, maybe, your outlook on life?

Diana
Yes. I had accepted Jesus as my Savior as a young child aged seven. I walked with him, loved him, and have been a disciple of Jesus for a long time. I realized that I was the kind of person that was very much in control. I prayed for God's strength and grace and stuff, but I did things in my own power a lot. I just remember that I had tried everything in my own power to get up and get out of that aircraft, but I could do nothing on my own. At that point, I realized that the only thing I could do was cry out. Verses came to my mind that said, "Cry to me in your day of trouble, and I will hear you, and answer you, and show you great and mighty things which you

do not know.” (Jeremiah 33:3) God has proven himself so faithful. He met all of our needs. He met our financial needs. He met our emotional needs. He proved to my children and to my family that He is a God of miracles, that He is still in the business of miracles, that He keeps His promises to many generations, and that He's a loving God. I remember, so many times at night, I would get these doubts and I truly believe that it was Satan whispering in my ear, “You can't. You won't. This is the end of this.” and I would just start fighting back with God's Holy Word. I would start quoting the Scriptures, “I can do all things through Christ who strengthens me.” (Philippians 4:13) There's power in that. So, I realized that I had walked this life of faith, but it wasn't a very easy life. I had a blessed life. I had a charmed life, if you will, and it took this to make me realize that my faith is everything - I am nothing without my faith in Jesus - that my faith is real, that He's there, and He just proved it beyond a shadow of a doubt. I don't take any day for granted. I try to take joy in the small things. I love sending out my husband in the morning, seeing the sunrise, and having a quiet time of prayer and devotion together. We've been blessed now with grandchildren and we try not to take anything for granted. I've been able to use this story to share with many people on many different occasions, and it always tends to give people hope. I want that beyond anything. I want people to realize that there is hope, no matter what situation we are in. There is a God that loves us so much that He sent His Son to come and die for us so that, through His precious blood, we can have a personal relationship with the God of creation. To me, that's what it's all about.

Scott
There may be people listening to this who are going through a similar situation where they're having a hard time with therapy after an accident or injury. So, on the show notes for this episode, I'm gonna put a link to that video that I mentioned so that people can, kind of, get an idea. It shows, sort of, a cartoon depiction of the plane, how it crashed and went across the road and everything. We'll also have your email address on the website. So, if anyone wants to contact you, you're okay with them emailing you, right?

Diana
Absolutely. If I can encourage anybody, if I could come alongside and pray for anybody, if there's a group that would like me to come to speak, I'd be more than happy to do that.

Scott
You're right here in the Tampa Bay area where I am. So, we're not too far from each other.

Diana
Yes, we are not. All right.

Scott
Well, Diana, I sure appreciate you coming on here. I'm glad you made it through. What an awesome story! Thanks so much for telling us!

Diana
Thanks, Scott. I really appreciate you having me.

Scott
Thank you for listening. I hope you enjoyed that conversation as much as I did. As I mentioned in the interview, Diana lives not far from me. I was able to meet her and her husband, Ed, in person recently. Ed told me about getting that phone call from the crash site. They are pretty amazing people. As promised, I want to let you know that this podcast now has merch - that's

short for merchandise if you didn't already know that. The first thing we're offering is a bumper sticker. If you get a bumper sticker, what I'd like you to do is put it on your car and send me a picture of it. I'm gonna have a place on the website where I show a picture of your bumper sticker on your car - your license plate would be blacked out though. You can see what it looks like and order your own bumper stickers at WhatWasThatLike.com/merch.

In this episode, I'm going to play a conversation I had recently on another podcast. My friend, Glenn Hebert, is the owner of the Horse Radio Network. It's based in Ocala, Florida. He does a morning show with his co-host, Jamie, called “Horses In The Morning.” Yes, it's all about horses. So, if you're into horses, you should definitely check it out at horsesinthemorning.com. Originally, Glenn was highlighting some other podcasts and show hosts and they had me on to talk about What Was That Like. They're great people. We had a fun conversation. It's about 15-minutes long. That's what we'll end this episode with. So, thanks again for listening and I'll see you in 2 weeks.

Glenn
We're gonna switch gears a little bit. Let me call the next guest on Skype - we're gonna add him into the conversation. This is a podcasting friend of mine. We've actually had him on the show before - I'm not sure if Jamie was on that time or not. It's international podcast Day coming up and we do like to highlight other podcasts as well. Well, coming up is a friend of mine out of Florida by the name of Scott Johnson who does a cool podcast, and he wants your help. So, that's why we're gonna get him on now. Hi, Scott!

Scott
Hello!

Glenn
How are you?

Scott
Doing well. How are you?

Glenn
You're on with Jamie and I, and we are on live. So, thanks for joining us.

Jamie
Hello!

Scott
I'm happy to be here!

Glenn
It's always nice to have a podcaster around. Yours sounds a little better than the last guest, so that's nice. Scott, there are a couple of shows. First of all, tell everybody about your computer show for the nerds out there.

Scott

Well, I have been doing a computer business from here in my home office in Safety Harbor, Florida for about the past 20 years. I have a podcast called The Computer Tutor. I just do some, kind of, computer tip or trick or security alert or something like that every couple of weeks not so much for computer people but for regular everyday users. I do everything in plain English.

Glenn
I listened to it and I understood it. So, it's gotta be for regular people.

Scott
That's my criteria. I gotta make it simple enough for Glenn.

Glenn
Yeah, that's right. By the way, I need a cord for an IBM monitor or a Dell monitor - I need to talk to you about that.

Scott
All right, we'll talk.

Glenn
Now, there is another show that you do that I've been addicted to since day one. I can get through most episodes. Unlike our show, Jamie, where you have to listen to several of them to, kind of, get the hang of it, that's not the way with this show. It's called “What was that like.” I know that we've had John before, but please remind people who haven't heard what the show is about.

Scott
Well, the basic premise of the show is that, in each episode, I talk with some regular person who has been through some type of extremely unusual situation. We cover a huge variety of situations.

Jamie
We had somebody on - maybe, it was you - who had been bitten by a snake.

Scott
Yes., I was the one who was on that show and talked about that. My guest had been bitten by a rattlesnake. They were just out working in the yard. Then, 30 minutes later, he was, literally, saying goodbye to his family and thinking that he wasn't going to survive.

Glenn
The one that stuck with me is about a lady who is an expert parachuter and her chute didn't do so well, but she lived through it. For some reason, that just stuck with me.

Scott
I think part of the reason for that was that her teenage daughter was there with her at the landing zone that day. She saw her mom hit the ground. The funny thing is, her primary concern was for her daughter to not see her groaning in pain rather than, “Am I going to be paralyzed for the rest of my life?” That was her concern - “Don't let my daughter see me scream. Let me know when she's getting close and I'll stop moaning.” But yeah, she survived and has gone to complete a lot of other amazing things.

Glenn
These shows go from the guy who ate his own foot - which I did not get through because I just couldn't do it - to people who have been held hostage for years and have been involved in mass shootings. I mean, it has a wide variety of stuff and it's called “What Was That Like.” If you look at any podcast player, You do such a good job hosting this. You've done your research. You've talked to the people. Then, you get people on to talk about what their experience was. So, it's very well done. I know this one takes some work.

Scott
It does. It takes some work, but I love it. It was created out of my own curiosity about the story that I wanted to hear. I couldn't find any other podcasts doing stuff like this, so I figured, “Okay, I'll make it myself.”

Glenn
Now, we need our listeners' help because you want to get a horse story, but it can't just be any “My horse fell on me” story. This has to be, like, “We fell down a canyon together. Then, we hiked out” or “My horse dragged me back”. It has to be a little tiny bit bizarre. Am I getting that right?

Scott
A lot bizarre!

Glenn
So, we need your help, if you have one of those kinds of stories. What exactly are you looking for?

Scott
The best way is for people to look at my past episode titles and see if their story would, kind of, fit in with how crazy those stories are. I was trying to think of what would be a bizarre horse story - maybe your horse saved your life in some way.

Jamie
Or if it tried to kill you.

Glenn
Yes, that happens more than saving.

Scott
Okay, that would be even more unusual.

Glenn
In the horse world, that's normal.

Scott
Maybe your son, Timmy, was out riding the horse one day and, somehow, fell off the horse into a well. Then, the horse came back and alerted grownups. I mean that sounds more like a Lassie story. It’s something that would get people to be “Oh, wow, I've got to hear that story.” when they see the title of it.

Jamie

I feel like I should have plenty of topics for you, but they're all escaping me right now. I think I've talked about them for 10 years on this show, Glenn.

Glenn
I'm gonna get some of the titles… “Kevin saved a life while golfing”, “Westin survived a boat propeller”

Jamie
Oh my god.

Glenn
“Shiny are his own zone” - that's the one I couldn't do. “Luke survived a fatal crash.” “Kasey married a wrong number” - that is a happy story, though.

Scott
Yeah. Every once in a while, I put a happy story in there. There are some good ones in there.

Glenn
“Marina was stalked” was… (groaning)

Scott
That's one of my most popular episodes.

Glenn
Really? Yeah, you gotta be ready to listen to that.

Scott
That was the first time she had actually told that story verbally since it had happened, and you can hear the emotion in her voice when she was doing that one.

Glenn
Well, that's the thing. Let's talk podcasting a little bit here. We've been doing this for a long time. Earlier in the show, Scott, our first guest was a listener who started in junior high school and is now in her master's program. She has been listening to our show that long. So, let's talk podcasting a little. One of the things that Dave Jackson, who does “School Of Podcasting”, always says, “If your podcast can elicit some kind of emotion, whether it's fear, laughter, crying your eyes out, or sheer terror, that's a good podcast. That's one of the things podcasting does that radio couldn't do.

Scott
Yes, I agree. A lot of those are because of radio’s time constraints - you've got a certain schedule that you got to keep. But, on my show, I tell people to take as long as they want because people love the details. So, that's what they do. Then, those shows that elicit emotion - whether you're crying happy or sad tears, or laughing - are the episodes that you remember.

Glenn
In my case, I was cringing. We're going to add ‘cringing’.

Scott
Well, you’d remember that too, then.

Glenn
Yeah. Keep that on your list because I spend a lot of time cringing. Your show is one of those you'd go, "I don't know why I listened to this show, but I would go back and listen t it again next week."

Scott
Good. I'm glad to hear that!

Glenn
He knows that I'm his biggest fan, actually, since I started listening. So, where do you see podcasting going? I will make that the last question for you. Where do you see it going in the future?

Scott
I haven't listened to commercial radio in the car, literally, for years because there's absolutely nothing on there that is of any interest to me. I'm always listening to podcasts, whether it's in the car, or if I'm out riding my bike, or whatever. There's just so much more to offer. It's not that you can say, "Hey, listen to podcasts because there are no commercials" because, obviously, there are commercials. However, on some of my favorite shows, you're able to fast forward through the commercials, but I don't do that for some of them because it's stuff that is specifically of interest to me. I think that it just tailors so much to what people are looking for, as opposed to the morning zoo goofballs that nobody wants to--

Glenn
We're, kind of, that way.

Jamie
Be careful! (Laughter)

Glenn
Yeah. (Laughter)

Jamie
I did that for 10 years. (Laughter)

Glenn
You notice that you're not doing it anymore, right?

Scott
But you're not doing it anymore, right?

Jamie
That's true.

Glenn
During those 10 years, you didn't have a great time with those guys.

Jamie
I'd say the entire 10 years I didn't have-- (Laughter)

Glenn
I think women too... I think there was one big change we've seen when you were doing radio in Atlanta there, Jamie. The woman was, sort of, the joke all the time, right? I mean, you were the girl who they had a certain role on morning radio

Jamie
Yes. So, the girls are always, like, the entertainment reporters. I was the traffic reporter, but I didn't mean to be a joke - that's just how my life is. There was another girl - the news anchor - and she was always very serious, but the rest of the girls were just, kind of, amassed typically.

Scott
It's interesting that you say that. Here in the Tampa Bay area, there's this very popular talk radio station and it's always the same thing. There are 2 male hosts who usually agree on everything. Then, there's the third female host who would disagree. Then, they would, kind of, team up on her a little bit. So, it's kind of the same thing.

Glenn
That's, like, the morning zoo formula for since I can remember.

Scott
Well, maybe that's because it works.

Jamie
Well, they never let the women be the funny ones - that's just the way it is. I don't know. I mean, I don't love that concept. I don't like girls sounding stupid. I don't like men sounding like they're the coolest or they're just that amazing. And

Glenn
See. We switched roles here, Scott. I'm the one that sounds stupid now. She's the one that sounds… (Laughter)

Jamie
Yeah.

Scott
That's why the female listeners love your show, right?

Glenn
That's right. Exactly.

Jamie
That's what I wanted this show to be and what your show is - I just wanted it to be honest. I tell people this all the time. They're like, "Well, you've been doing podcasting for 10 years. What is your advice?" Be yourself. You cannot pretend to be anybody else. I think what you do is lead people to be honest and be honest yourself. So, congratulations.

Scott
People love vulnerability, not just in the guest, but also in the host, because that makes them feel a more intimate connection there.

Jamie
Mission accomplished, people! (Laughter)

Glenn
It also interesting that podcasters - I just saw the numbers - consist of 40% women hosts. In our network, it has been 99% women hosts since day one. Minorities couldn't get radio gigs a lot probably because there were just very few of them. Now, you're seeing minorities in podcasting. I mean - we say this at all the conferences - it's giving everybody a voice. It really does. I mean, I'm not just saying, because it really does.

Scott
Absolutely, yep. That's one of the beautiful things about it. Yeah.

Glenn
Well, it's whatwasthatlike.com. You can go check it out. By the way, Scott, we don't encourage people to fast forward through our commercials - I just want to throw that out there.

Scott
Of course not.

Glenn
No, I just wanted to get that in.

Scott
I don't think anybody ever actually does that.

Glenn
No. Not in our show. They love our commercials. Thanks, God. We appreciate it.

Scott
All right. Have a great day.

Glenn
All right. Take care.