Two Families, One Heart

by Louise Truong

AT 2:30 P.M. on June 7, 1997, Tommy Weiss arrived to the house of his best friend, Patrick. The fourth-grade boys decided to go buy soda at the nearby Lucky’s supermarket. Because the grocery store sat at the bottom of a hill, less than two miles from the house, the boys wanted to skateboard to the store. But Patrick’s mother felt it would be safer for her to drive them there. She loaded the boys into her red 1995 Mitsubishi 3000 GT at 3:30 pm. Tommy sat in the back seat as they drove down the steep hill of Pacific Island Drive. Despite the 45-mph speed limit, witnesses would later say the car was moving as fast as 55 mph as it continued down the curving road. Less than two minutes after they left the house, less than half a mile from Lucky’s, the car struck a signal pole at the intersection of Pacific Island Drive and Highlands Avenue. None of the passengers were wearing seatbelts, but only Tommy Weiss lacked airbag protection.

By the time his mother, Donna Telles, arrived at Mission Hospital, the regional trauma center, Tommy had already been in surgery for three hours. He’d suffered blunt-force trauma to the head and had slipped into a coma. The neurosurgeons were desperately trying to stop the swelling in Tommy’s brain. Sitting in the waiting room, his mother prayed to God to heal Tommy. Donna, a Delta Airlines stewardess, had last seen her son two days before when she dropped him off at Moulten Elementary School before flying to Guadalajara. She believed that Tommy would survive. When Tommy came out of surgery, with a shaved head – his hair had always been his favorite feature – both his sister and mother worried that when he woke up he’d be furious to find his hair gone. Three tubes protruded from Tommy’s shaven head. The doctors
had inserted catheters into the ventricles of the brain, where the cerebrospinal fluid was held. The catheters monitored the pressure in the brain and relieved it by draining excess fluid.

As soon as Donna could, she planted herself next to Tommy’s bedside. She refused to go home and rest despite the insistence of the nurses. She preferred to sit beside Tommy and hold his hand. Once, after she had just returned to the hospital, one of the nurses told her to bring socks for Tommy when next she came from home because his feet were getting cold. Instead, Donna whipped off her fresh black socks and put them on her son. For the rest of his time at the hospital, Tommy wore Donna’s black socks.

While Donna obviously was heartbroken, she still heard what the doctors tried to explain Tommy’s prognosis. She understood and did not deny the gravity of the situation. Donna’s religion gave her comfort and prevented her from being inconsolable. What most stood out to Nurse Nora was Donna’s calm, beautiful spirit. Both being Christians, the two bonded. Both being mothers, they formed a strong friendship.

Everyone who came to visit Tommy tried to remain hopeful. Family and friends held onto the fact that Tommy looked as if he were merely resting. He lay there on his bed unblemished. Tommy had no broken bones, no visible bruises, no scratches or bleeding. On the upper part of his forehead, the doctors had placed a small Band Aid. But other than that, Tommy seemed to be the same boy whom Donna put to bed every night.

For the first few days, doctors did not have a definite answer about Tommy’s fate. Donna felt exhausted from the constant changes in Tommy’s condition. One day doctors would say things were hopeful, then follow with a more negative message. Tommy’s health, all the while, slowly declined as the doctors were unable to control the inflammation in his brain. When Tommy’s brain started to swell, the ventricles collapsed and the pressure within his skull
increased. As the intercranial pressure intensified, it pushed the brain stem down into the spinal column.

On the fifth day, June 11, 1997 the Pediatrics ICU specialist and Nurse Nora pulled Donna and her ex-husband Peter from their son’s bedside to a corner of the ICU. The doctors explained that they had conducted a series of tests to determine if Tommy were brain-dead. In California, two doctors needed to independently declare a patient brain-dead before giving the final diagnosis. Using the apnea test, they evaluated Tommy’s ability to breathe on his own – something, as it turned out, he could not do. Tommy’s physician had to help Donna and Peter understand that despite Tommy’s hands still being warm, and despite his chest still going up and down, he legally was no longer alive. For Tommy, basic, rudimentary functions and reflexes had become nonexistent. He could no longer instinctively close his eyes to protect them from objects in the air. He could no longer start coughing and choking if food went down the trachea rather than the esophagus.

Upon hearing the diagnosis of Tommy’s brain death, Donna headed to the waiting room and told her supporters that instead of asking for Tommy to get better, they needed to change their prayers. They needed to pray that God would take him.

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Only one percent of people who die at a hospital can donate their organs because an organ donor must be free of all infections. Most people die from infections, cancer, or organ failure, preventing them from being potential donors. People who die of brain death fall under that one percent that can donate their organs and tissues. As soon as doctors declare someone brain-dead, the hospital, by federal law, must notify the regional organ procurement agency. In 1997, in Orange County, that agency was SCOPC (Southern California Organ Procurement
Center). (It has since then become OneLegacy.) Once SCOPC’s headquarters received the phone call from Mission Hospital about Tommy’s being brain dead, it dispatched a family specialist coordinator. The coordinator’s sole job was to invite Tommy’s parents to consider offering their son as an organ donor.

The family specialist coordinator approached Donna and Peter as they sat with Tommy in his hospital room, holding his hands. Once in a private office, the coordinator told Donna and Peter that they would “always have a Tommy-shaped void in [their] hearts.” Donna had never thought of her son as a potential organ donor. She had considered it for herself, but never for her children, never for Tommy. If Tommy was dead, then Donna only wanted to preserve his image. She didn’t want anyone to dissect him. Couldn’t he just be left alone?

Peter thought differently. He told Donna: “If someone were to come along and donate an organ to Tommy if he had needed it to survive, we would have been most appreciative.” Both parents had to sign the consent form. Both Donna and Peter had to accept that Tommy no longer remained in his body. If he survived and came out of his coma, it would not be the same Tommy that they’d been crying over for five days. It would not be the same Tommy whose life’s ambition was to meet the lead singers of Sublime, Blink-182, and Social Distortion. It would not be the same Tommy who loved hockey, surfing, and skateboarding. Peter’s unselfish attitude convinced Donna – but she had one condition: Tommy’s eyes. Donna did not want anyone else having his honey-brown eyes. Those would be buried with Tommy.

There was only a small window of time. If no hospital in the area claimed one of Tommy’s organs for a patient by the end of June 12, then Mission Hospital would pull the life support. SCOPC now took over the costs of keeping Tommy on the artificial respirator. Much was at stake. A donor can potentially save eight lives: providing a heart, lungs, liver, kidney,
pancreas, spleen, small intestine, and large intestine. SCOPC’s procurement transplant coordinator needed to quickly find suitable recipients for Tommy’s organs. She started looking at the list of patients waiting for organs. Those sickest and closest to Orange County had the best chances of receiving one of Tommy’s organs. Little did the coordinator know that an outside force had already decided where one of Tommy Weiss’s organs would go.

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Neither Christopher Truxaw nor his parents ever had a reason to believe that he had a heart condition. No one in their family had been diagnosed with heart disease before, and Chris had always been an active boy. He may not have been the most athletic kid, but he still played Little League and soccer. On March 6, 1997 – four days after Tommy Weiss turned 10 years old – Christopher went to school at St. James Academy.

Around 8:15 am that day, Chris started running laps during his 7th grade P.E. class. His mother, Liz Truxaw, was deciding whether she should go to the grocery store before a birthday lunch with her girlfriends. His father, Tim Truxaw, had just arrived at his law office. (He had been at St. James earlier in the morning, as one of the coaches for the school’s math team.)

Now, in P.E. class, as Chris ran around the courtyard, he collapsed. The coach found his student in cardiac arrest. Trained in first aid, he started performing CPR on Chris. Doctors later said that if the coach had not reacted so quickly, Chris would have died that day in his class. The fire department paramedics, called by the school officials, arrived within minutes. One of them originally thought a student had just fallen off the monkey bars, but instead they found the coach performing CPR on a lifeless, purple body. They hooked up the boy to a heart monitor only to find that his heart had gone into ventricular fibrillation. They shocked the 12-year-old’s body with the defibrillator paddles. He was barely alive, with an irregular heartbeat. The paramedics
intubated Chris, because he could not breathe on his own, and transported him to the local Scripps Encinitas Hospital. His parents and sister soon joined him there.

The first person to approach the Truxaw family in the waiting room was one of the firemen who had answered the call about Chris. Still in his firefighting gear, and with tears in his eyes, the firefighter told Tim that Chris had been in cardiac arrest. Seeing a shaken-up fireman – who faced life-and-death situations all the time – only made the Truxaws realize how grave the situation had become.

The doctors initially had no idea why Christopher Truxaw had gone into cardiac arrest. They asked whether Chris was a drug user, a question that offended Tim. But the doctors were trying to figure out why Christopher’s heart had stopped functioning properly. Thinking it might be a lung problem, they decided to transfer him to Children’s Hospital, home to pulmonary specialists. Before Chris’s transfer, his family saw him for a few minutes, but he was unconscious and remained that way for the next week.

At Children’s Hospital, the doctors soon discovered that Christopher had Hypertrophic Cardiomyopathy (HCM), a disease of the heart in which portions of muscle thicken without any obvious cause. As the heart muscle cells increase in size and the heart muscle thickens, HCM also disrupts the electrical functions of the heart. Christopher Truxaw was in the 0.5% of the general population that had HCM. Half the time the disease is genetic and half of the time it is idiopathic, meaning there is no known cause. Christopher fell under the idiopathic category.

Doctors made Tim and Liz aware of how fortunate their son was even to be alive. A cardiologist mentioned that HCM usually was diagnosed on the autopsy table – meaning most people die of HCM without ever knowing they had it. Looking back, Tim realized that the signs had been there. Chris oftentimes would come home from school and mention that his chest hurt
in P.E. Two weeks before, during President's Day weekend, Tim had taken his son to
Wrightwood early in the morning to go skiing. Around lunchtime, Chris asked to go home.

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His parents now knew, but Chris didn’t grasp the severity of his condition. He
understood something had gone wrong with his heart, and he made some sense of all the doctors’
technical terms. But just like any 12-year-old, he never feared for his life. Upon waking for the
first time in the hospital, Chris had no recollection of what had happened on March 6th. With
tubes and I.V.s stuck to his body, he started to curse everybody and everything. He did not
notice the display of presents in his room. Hundreds of stuffed animals and flowers from friends
and family, dozens of get-well projects from every class at his school, a signed poster of the San
Diego Chargers, and a signed magazine photo of Julia Roberts – all had found their way to
Christopher's room in the ICU.

Once the doctors diagnosed the cause of Chris's cardiac arrest, they knew that their
patient's heart would give out again. They had to implant a pacemaker and a defibrillator into his
chest. If Chris's heart ever started slowing down, the pacemaker would send an electrical
impulse to speed it up. If Chris' heart ever went into V-fib, like the day of his collapse, then the
internal defibrillator would shock his heart back to a regular beat. The Truxaws and the doctors
believed that with the high-tech gadgets and medication, Chris could go on to live a semi-normal
life with a compromised heart. The doctors, however, warned that the pacemaker and
defibrillator might not be a lasting solution. Chris eventually might need a new heart.

After a month in the hospital, Chris finally returned home, right before his birthday.
Chris faced a sedentary life compared to how he lived before the collapse. Doctors warned
against playing any active sports, but walking, golf, and other low-energy sports were allowed.
The newly minted 13-year-old, however, never had a chance to live out this plan. Instead, for the next three months, Chris kept getting sicker and he spent more time in the hospital than in his own house. Though his life consisted of hospital rooms and tests, Chris never shied from needles or blood. He directed his nurses, telling them which vein would be the best for drawing blood. Tim and Liz took turns staying overnight at Children's Hospital, in a cot provided by the ICU. Their lives started to revolve around the hospital and anything medical. Tim, a real estate attorney, even held conference calls at the nurses' station in the ICU.

Friends, family, and acquaintances constantly visited Chris at the hospital and at home, allowing no time for the Truxaws to feel sorry for themselves. Neighbors cleaned the Truxaw's house, mowed their lawn, and made meals for the family. Jacquelyn, 10 years old at the time, still had to go to school, dance class, and gymnastics. Relatives took turns shuttling the girl back and forth to school, the hospital, and to her activities. It became routine for Jacquelyn to leave school at lunch, spend an hour every day with her brother at the hospital, return to school, and eventually go back to her friend’s house. Tim and Liz wanted to protect their little girl from her brother’s situation, but as a result, she oftentimes felt left out and would constantly worry about him.

While Jacquelyn despised being away from her family, Chris despised being at the hospital. He felt jealous of his sister for being able to leave the hospital and spend time with her friends and family. He just wanted to be a normal kid again. Being a shy kid, he did not enjoy the attention he constantly drew from everyone. People always asked him “How are you doing?”, and he would always reply with the standard “fine.” Never would he say that he felt like crap. He did not want to be the special kid with the heart problem. When Christopher finally did visit his school, he even tried to play handball in his wheelchair.
As with Tommy's situation, the doctors went back and forth between good and bad news about Christopher. Eventually, hope diminished; his heart continued to fail and his weight dwindled to 74 pounds. He had become so skinny that the pacemaker and defibrillator, the sizes of pagers, protruded from his body. He could not go to school because of his condition, and missed the last half of 7th grade. The few times Christopher was at home, television became a constant fixture. Because he could barely walk from the living room to the kitchen without his lips turning blue due to the lack of blood circulation, *the Price is Right*, soap operas, and cartoons became his few sources of entertainment.

Christopher Truxaw joined the national transplant list on May 1, 1997. To Chris, getting a new heart would be just like every other procedure he had endured in the past. His parents remained optimistic about Chris’s finding a heart. They did not really understand how the transplant list worked, and therefore had naïve hopes. On the nights Liz spent at the hospital, Tim would stay up till 2 a.m., surfing the internet to learn more about the organ donation process. The statistics and stories he read about bodies rejecting the organs, and about the death rates, scared him. He did not then know how far immunology and organ transplant surgeries had advanced. With new discoveries daily, transplant patients had even better chances of living normal lives.

The Truxaws soon learned the somewhat perverse rules of the transplant world. The sicker Chris became, the farther up the list he would go and the sooner he would receive a heart. However, the sicker he became, the sooner he could die. Whenever Chris started to get better, the hospital would have to send him home. Once home, the farther down the list he would be. It got to the point where the doctors almost did not want Chris to show any signs of improving because he badly needed a heart. His life expectancy was less than six months.
On June 7, 1997, the day of Tommy’s tragic auto accident, Christopher could do little without becoming tired. Chris still did not understand that his body was failing him. He always just thought that he felt very sleepy. His dad had to give him piggyback rides up the stairs to bed every night because of his lack of strength. Oxygen deprivation left Chris with terrible muscle and back pain.

On June 12, the day doctors officially declared Tommy dead, Tim Truxaw received a phone call from his father, Joe. Tim had been in his office trying his best to get some legal work done. His dad excitedly relayed to him something that had happened earlier that day with Tim’s aunt, Kathleen. She learned from a neighbor – who happened to be Donna’s uncle, about a horrible tragedy that had occurred to his grand-nephew Tommy. At some point, Donna’s uncle had mentioned to Kathleen that Tommy might become an organ donor. Immediately, Kathleen thought of her own grand-nephew, Chris.

Tim, though touched by the report, told his father that it did not work that way. There were lists, blood types, a whole protocol that the organ procurement agencies have to follow. But Tim’s father refused to listen to his son’s rationale. He made Tim call his aunt and her neighbor. Tim next found himself calling Donna’s father Joe.

When Joe picked up, he had no idea Timothy Truxaw existed. After hearing Chris’s story, he immediately wanted to help, but he did not know whether or not Tommy had been taken off life support. Joe did not want to call his daughter, knowing her current state. So Joe insisted that Tim call Mission Hospital instead.

After hesitating, Tim did call Mission Hospital. He managed to get transferred to the nurses’ station at Mission’s Hospital Pediatrics ICU. Nurse Nora was at the station with the
SCOPC procurement transplant coordinator when the phone rang. Her normal shift usually fell between 7:00am to 7:30pm. But for some reason that day, she was still there when Tim called at 8 p.m. Tim made it clear to Nora that Donna did not know him but that a connection existed between the families. In the end, he wanted to know whether or not Tommy Weiss’s heart could go to his son, a boy who lived in San Diego. Nora put him on hold and turned to ask the coordinator if a family could designate an organ, specifically Tommy’s heart, to someone. She had never heard of it before, but the coordinator said yes, it could be done. Nora handed the phone over to the coordinator.

The transplant coordinator asked Tim pointed questions. She needed to know: What hospital placed Chris on the list? How long ago? Where was he on the list? What was his blood type? Never did she reveal any information about Tommy or whether he had been taken off life support. Looking through her registry, the coordinator told Tim that the two boys matched. They had the same blood type, O-positive, and the same chest sizes. Tim could not believe that his son had a chance of receiving a heart. Until then, he had been unwilling to believe that the series of phone calls had any real purpose. But Tim still had to get the consent of the family. He had to somehow get the parents to agree to give their son’s heart to his son. With nobody else to contact, Tim called back Tommy’s grandfather Joe. Joe could not make any promises, and he did not assure him that he would even call Donna. When Tim got off the phone, he did not know if he would ever hear from Joe again, if he would get the consent.

What he didn’t know: Joe had already called his daughter Donna while Tim had been talking to people at Mission Hospital. Joe had distressed Donna when he told her about Tim and Chris. Her father was making it too personal. True, she had consented for Tommy be a donor,
but she did not want any details about the people who were receiving the organs. She did not want a picture in her head of Tommy being cut open.

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About an hour after talking to her father, Donna stepped out onto her balcony to greet the cloudless summer night. Even with tears in her eyes, she could see all the shooting stars. Tommy must have been throwing them across the heavens for her. Just hours before Donna had had to say goodbye to Tommy, to her 10-year-old son. Her only comfort was that someday she’d see him again when she, too, part ways with the world.

The grieving mother, looking up at the sky, sipping white wine, could only ask, “Where are you? Where did you go Tommy?” It had been eight days since she saw Tommy alive. The phone rang in her bedroom. Everyone important knew that Donna needed the night to grieve, and that she would not be answering any calls. Donna ignored the ringing, permitting the answering machine to pick up the call. From her balcony, she heard the message.

“Hi Donna, I really need to talk to you. This is Nora at the hospital and I just need you to call me back right away.” For Nora to call and disturb her, it had to be urgent. Donna returned the phone call right away. If anyone else had called, she would not have bothered to respond.

“You don’t need to come down to the hospital; you don’t need to sign any papers. Just tell me if it is OK for Tommy’s heart to go to a boy somehow connected to your uncle.” It did not register in her mind that the boy Nora had just mentioned happened to be the same boy her father asked about an hour before. Donna answered yes without hesitation because Nora did not make it personal as Joe had. Donna felt as if she was only reconfirming her consent for Tommy’s being a donor. Nora had only needed one parent’s consent; because of their close relationship, the nurse had chosen to call Donna rather than Peter.
On June 12, Chris sat on the living room floor, next to the fireplace, playing with his Legos. Tim had just been notified of the consent. The father sat next to Chris and looked him straight in the eye. He said, “You’re not going to have time to finish this Lego project tonight. Your new heart has come and tonight you are going to receive it.”

Chris did not want to leave; he was working on his space shuttle. Could his father not see that he was in the middle of something? However, always being an obedient, shy kid, Chris nodded his head and got ready to go to the hospital. On the way, the Truxaws dropped off Jacquelyn at a close friend’s house. Chris had always carried two stuffed dogs with him to the hospital, Spot and Blue Eyes. When saying goodbye to Jacquelyn, Chris now gave Blue Eyes to his sister. Jacquelyn understood better than Chris did the severity of the heart transplant. Jacquelyn, though just 10, knew that her brother could die on the operating table.

Even though Children’s Hospital had doctors trained in transplant recovery, the hospital itself was not a certified transplant center. Thus the transplant surgery had to occur at Sharp Hospital. After receiving Donna’s consent, Sharp sent a team to Mission Hospital to retrieve and recover the heart. The doctors had to see Tommy’s heart and make sure it could be used for transplant. Even though they did not yet know that Tommy had a healthy heart, Chris still had to be readied to receive it. Arriving at the hospital around 9 p.m., Chris was prepared for surgery by the hospital staff. Shaved from head to toe and placed onto a gurney, Chris had to remain right outside the entrance to the operating room. The Truxaws had to wait for the phone call saying that the heart was adequate. Christopher’s longtime nurse knew that for every procedure, Spot had always accompanied Chris, tucked under his arm. The transplant room had to be
completely sterile, and Spot was far from being sterile. To make Chris happy, she placed the stuffed dog into a sterile zip lock bag, so it could be wheeled into the operating room as well.

Sharp’s team of doctors and SCOPC’s team opened Tommy up at around 11:30pm. Pulled off of life support, Tommy’s body had to be put on a machine to keep the blood flowing to the organs. While Sharp only cared about the heart, SCOPC’s team also wanted Tommy’s liver, spleen, and pancreas. Despite Donna’s wish, doctors removed portions of the eyes as well. As soon as the doctors discovered that Tommy’s heart remained healthy, they called Sharp Transplant Hospital. With the heart in a cooler, the medical team drove down to San Diego in an ambulance. The heart had only four to six hours before it could no longer be used for transplantation.

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On June 13, even before Tommy’s heart arrived at the hospital, the transplant team wheeled Chris into surgery. He had grown accustomed to general anesthesia. Usually he tried to see how long he could stay awake before his eyes closed. However, this night – fearing he would still be awake when they opened up his body – he quickly succumbed to the anesthesia. The transplant doctors, forced to place their patient in a vulnerable position, had to cut open Chris’s body and put him on a bypass machine before the new heart had even entered the hospital.

The transplant operation began. Tim and Liz knew that this was their son’s last chance. It had to work. Waiting and praying in a small room provided by the hospital staff, Chris’s parents knew that they had no control over how things would turn out. Holding each others’ hands, they remained silent because talking would only cause them to cry.

The doctors had said the surgery would last three to four hours, but after only two hours, at 2 a.m. on June 13, the nurses’ station received a phone call. Liz immediately thought Chris
had died. Too little time had passed; Chris had barely gone in. As it turned out, the doctors had good news. Surgery had gone better than expected; it had not taken as long as usual to do the heart transplant.

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Thomas Robert Weiss died officially at 11:30pm on June 12, 1997. Forty-eight miles away in Encinitas, Christopher Truxaw woke on June 13, 1997 with Tommy’s heart beating in his chest. With two large tubes coming from his sides and two wires straight into the heart, he felt Tommy’s heart beating almost too strongly through his chest. His heart had been so weak during the first thirteen years of his life that a normal heartbeat scared him. Still, Tommy’s heart did its job. Blood moved through Christopher’s body, and his color had already improved in the one day after surgery. However, his immune system was barely functioning. With the immune system of a newborn baby, he had to be kept in isolation.

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Five days after Chris’s transplant, Tim’s mother, Louise, and his aunt, Kathleen, attended Tommy’s funeral at Pacific View Memorial Park. The black clothes of Tommy’s family and friends stood out against the bright colors of green and blue on the warm, clear day of June 18, 1997. The funeral was held one day after Tommy’s sister Marissa’s birthday. The hundreds of guests, who had made their way to the Newport Beach cemetery, came to pay respects to the five-foot-tall, 86-pound boy resting inside the gray coffin. Donna did not have the strength to pick out the casket. While in the room full of coffins, Donna had to excuse herself and go to the restroom to compose herself. She let Peter choose the coffin on his own.

An elaborate wreath of white and red roses laid on top of the closed casket. The coffin housed a body wearing a variety of clothing styles, exactly how Tommy would have wanted to
be dressed. He had always wanted a snazzy bowling shirt. On this day, the boy wore a yellow bowling shirt with his name, Thomas Robert Weiss, engraved on the sleeve and brand-new white Dickies pants. Dickies had always been a constant in his daily wardrobe. Lastly, his mother made sure that Tommy wore his favorite green knit hat, a hat he usually saved for bad-hair days.

To the left of the coffin stood an enlarged photograph of Tommy taken only two weeks before. Even with his curly brown hair, and matching honey-brown eyes, it was Tommy’s perfect smile that drew the most attention. Donna had wanted a family picture with Tommy and her daughter Marissa. Despite her children’s protests, she’d had her way.

Peter could not believe that Donna had the strength to speak at their son’s funeral. Donna initially doubted her ability to stand up and speak about how great her son was. But, Tommy would have wanted this. She thanked everyone for their overwhelming love and support for her son and his family. She reemphasized how much she would miss her son and how she always enjoyed getting up in the morning to get his hair just right. At that point Donna broke down, which caused everyone else to start crying as well. She wished she had brought tissues for all her supporters. She knew, and she reminded everyone, where Tommy now resided. She told her fellow mourners:

“Don’t sweat the small stuff. Everything in this life is small stuff. Put your life in God’s hands and He will faithfully see you through. Don’t be sad for Tommy. Tommy is having a blast in heaven!” Before sitting down she ended her speech with a passage from Elisabeth Kübler-Ross:

*When we have done all the work we were sent to earth to do, we are allowed to shed our body, which imprisons our soul, like a cocoon encloses the future butterfly. And when the time is right, we can let go of it and we will be free of pain, free of fears, and worries, free as a very beautiful butterfly, returning home to God.*
At the end of the service, Donna and Peter stood in front of the coffin for people to line up and individually give them hugs. The funeral director had told the parents this gave people a connection and a chance to tell Peter and Donna that they were there for them. The entire process drained Donna; she nearly passed out from exhaustion. On top of being strong for herself, she had to be strong for everyone else, too. People would cry and hug her, and they all wanted to say something. However, most of the time people would not know what to say. Although Donna managed to stick it out and hug every person who attended the funeral, Peter left early. He did not have the ability to hug and talk to every other grieving person; he had already wanted the funeral to be as short as possible. Neither Donna nor her family stayed to watch Tommy’s burial. Donna knew it would be too difficult to hear the gravel slam against the coffin. Only Pastor Chuck Smith stayed to watch. He could not believe that one of his son’s friends had died.

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Donna went to her son’s room often following his death. She left everything the way Tommy had it, even his fingerprints on the mirrored sliding closet doors. Donna bought the plot next to Tommy’s. She plans one day to lie beside her son at Pacific View Memorial Park. She had to take three months off of work before returning to Delta Airlines. Even then, while on flights, she would often break down and the other flight attendants would have to cover for her. One time she had a visual image of her son on the operating table, mangled and cut open. Distraught and mortified, she started sobbing on the plane. She felt guilty that she had not left her son’s body in peace.

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As Donna and Marissa tried to adjust to their life without Tommy, Christopher Truxaw’s health slowly improved. The entire house had to be germ-free. Liz constantly walked around with Lysol and hand sanitizer. Chris had a shower all to himself. Whenever he left the house, he had to wear a surgical mask. When visitors came to the house, they had to stay outside and talk to him through the screen door. As Chris recovered, Tim found himself thinking of Donna and her family. He wanted to meet them and express his gratitude. He had wanted to attend Tommy’s funeral, but had feared that his presence might take the attention away from Tommy.

It is suggested by the organ procurement agencies that the recipient’s family wait a year before contacting the donor family, to allow both groups time to grieve and adjust to life. Often, the donor family does not wish to know the recipient family. But Tim knew of Tommy’s family, so he wanted to contact them sooner, and meet with them. Liz wanted to postpone the meeting for as long as she could. As a mother who had watched her son live through a near-death experience, she could not even begin to understand Donna’s situation of losing her son.

On July 11, 1997, less then a month after Tommy’s death, Tim decided to write to Donna. He thanked her for Tommy’s gift and shared with Donna, for the first time, information about Chris and his heart condition. Until reading this letter, Donna had not grasped that she had specifically designated her son’s heart to Christopher. Only now did Donna register the connection between the two families. The letter inspired her to want to meet the Truxaw family. The families finally arranged to meet each other for the first time in October at Salt Creek Grille. Tim’s brother, Peter, owned the restaurant, and so the party would have their own private room. As the day approached for their meeting, both families grew more apprehensive. Donna and Liz did not know if they were ready to meet one another. Donna brought along her daughter, her parents, her sisters and their families to meet the Truxaw’s family of four.
Tim had many questions about Tommy, and the Telleses had many stories to share. Christopher remained quiet throughout the entire dinner. As he listened to the many stories of Tommy, he could tell that the boy who gave him his heart had been truly loved. Chris felt intimidated. He felt that he had a lot to live up to, because Tommy seemed to have been such a great kid. He knew from then on that no longer could he live his life only for himself, but for Tommy and Tommy’s family as well.

Near the end of the dinner, Tim had a spontaneous notion. Without consulting his son, he looked over at Donna and said:

“I know I should not be asking you this, but would you like to hear a sound that you are very familiar with?” Tim invited Donna to come over to Chris and place her ear on his chest. Chris did not mind. Without hesitation, Donna walked around the table, placed her head on Chris’s chest and started to cry. It was Tommy’s heart all right.