



## GUILTY PLEA IN CUTIE'S DEATH?

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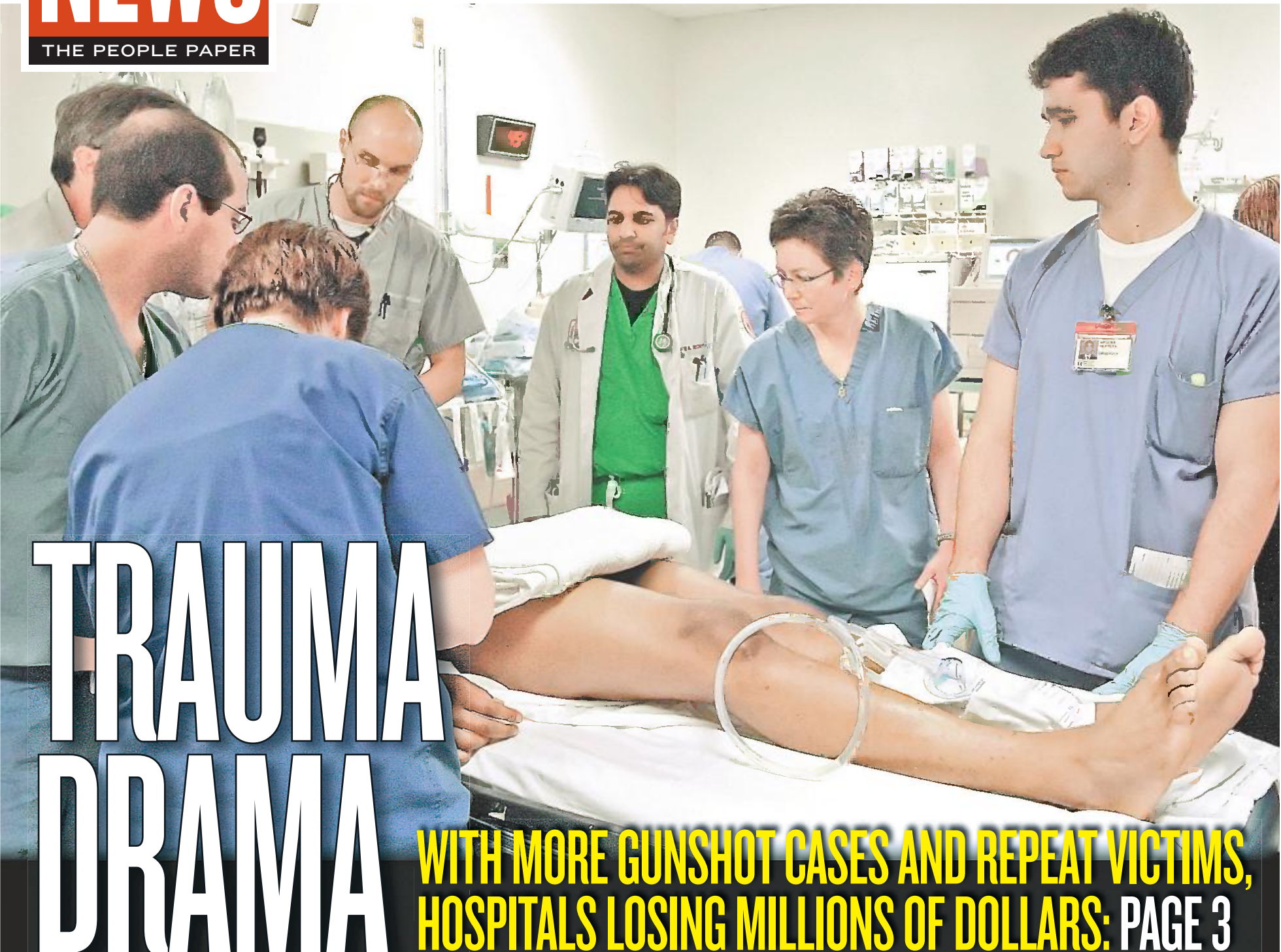
## GOLDEN OLYMPIC OPPORTUNITY FOILED

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## RETIRING AFTER 51 YEARS IN PHILLY SCHOOLS

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# TRAUMA DRAMA

## WITH MORE GUNSHOT CASES AND REPEAT VICTIMS, HOSPITALS LOSING MILLIONS OF DOLLARS: PAGE 3

STEVEN M. FALK / Daily News

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one shot," she said. "Psycho-socially, there's a window open to talk about the injuries, and to ultimately improve their outcome."

"We know that period does exist, but it will be different for someone shot in the thigh than for someone shot in the chest and abdomen."

Goldberg says that it's impossible to not bring her work home. "A death will stay with you, for sure, as it should," she said. "If it didn't, [the surgeon] is in the wrong business."

Surgeons like Goldberg and Riley can't think "dollars and cents" while trying to save lives. They sometimes see a kid's tough, street-wise exterior disappear while lying on a gurney in a trauma bay.

"Many are very frightened," Goldberg said. "They ask for their friends, or call out for their mothers. Once in that room, the kids aren't resigned to death."

"No one wants to die."

"It's definitely a wake-up call for many, especially when they are sitting there, really hurting, and contemplating their own demise," said Scott Charles, who works at Temple and heads the "Cradle to Grave" intervention program, which tries to steer young people away from violent situations before they are discharged.

"The trauma bays are stark, sterile, cold, unloving places. There is no one rubbing your head or holding your hand. You're naked and surrounded by strangers, and realize these might be the last faces you see," he said.

Those who die before they reach 18 are particularly haunting.

Like Lamont Adams, killed at the age of 16 after a dice game in September 2004.

"Lamont was very ordinary, and most kids can see themselves in Lamont," Charles said.

He was shot multiple times with a .45-caliber handgun near 26th and Cambria streets. He was taken to Temple where he was pronounced dead about a half-hour later.

"When you can't save someone, it's very disturbing and upsetting," Goldberg said.

"These are young people that would have had their whole lives in front of them," she said.

"The families' response to the death is the most intensive grief one could imagine." ★

# 18 fighting roosters seized in Kensington; SPCA tracking owners

## Many of the gamecocks were injured

By **REGINA MEDINA**

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The group of sturdy, tough athletes got almost everything they needed from their coaches.

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If only they could talk, the 18 roosters found by authorities in a raid Saturday afternoon might have asked their owner-coaches to relieve them of their cockfighting duties, which involved injury and the deprivation of certain body parts.

The birds, instead, have an informant for the Pennsylvania Society for the Prevention of Cruelty to Animals to thank for relief from the grueling fights. Philadelphia police and SPCA officials found the roosters, many injured, in a home on 2nd Street near Diamond, in North Philadelphia.

Cops and SPCA officials also found steroids, antibiotics to treat infections from injuries, and drugs that are used to make the roosters more aggressive, said George Bengal, director of

investigations for the SPCA.

Marijuana also was found on the premises, he said.

The raid was staged before Saturday night's cockfighting matches. The property owners, whose names are known to officials, have yet to be located, Bengal said. No arrests were made.

The birds were found in clean cages, and a ring for their fights was nearby, he said. It was dismantled by the SPCA.

NFL quarterback Michael Vick's arrest and subsequent jail sentence over his involvement in dogfighting has actually resulted in an increase in local animal bouts, Bengal said.

Before Vick's arrest last year, Bengal served such warrants an average of one every two to three months, he said.

"Now we're doing it an average of one to two times a week," he said. "It seems that ever since Michael Vick, this has escalated and it's out of control. It's like a badge of honor."

Sixty roosters were confiscated a few weeks ago, he said.

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STEVEN M. FALK / Daily News

Temple's Goldberg checks medical records after looking in on a victim of violence.

## 2 dead, 3 wounded in spate of weekend violence

By **CHRISTINE OLLEY**  
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Arguments were fought with guns instead of fists this weekend and ended with two men slain and three wounded in three incidents yesterday morning, police said.

A 26-year-old man was shot in the lower back and buttocks shortly after 1 a.m. on Market Street near 39th in University City, cops said.

The man, identified by police as

Nathaniel Crawford, of Fitzwater Street near 21st, in South Philadelphia, was pronounced dead at the Hospital of the University of Pennsylvania at 1:25 a.m.

The slaying stemmed from an argument, said Lt. Mark Deegan, of the Homicide Unit.

The murder weapon, a .40-caliber handgun, was also recovered, Deegan said.

A 27-year-old man was shot on Germantown Avenue near Westmoreland Street in North Philadelphia shortly before 2 a.m. yesterday, police said.

The man, identified by police as Christopher Lomax, was shot multiple times after an argument inside the nearby Rumors Bar, Deegan said.

Lomax was pronounced dead at Temple University at 2:02 a.m.

The weapon used in his slaying was a 9 mm handgun, which was recovered by police, Deegan said.

A triple shooting in Kingsessing on 52nd Street near Baltimore Avenue shortly before 1 a.m. left one man seriously wounded and two others injured, cops said.

A 26-year-old man was shot once in the head and was listed in extremely critical condition at the Hospital of the University of Pennsylvania; another man was shot in the neck and the shoulder and was listed in critical condition; and a woman who was shot in the left knee was treated and released.

A fist fight that erupted on the same block earlier in the day may have been the catalyst for the gun battle that occurred later, police said. ★

### CORRECTION

One of the survivors of Joseph I. Gradel, a news librarian for the *Daily News* and *Inquirer* for seven decades who died Thursday, is a daughter, Nora Root. Her name was incorrect in his obituary in Friday's *Daily News*. ★



When we've made an error, we'll say so. If we need to clarify a point, we'll do that as well. If you have a concern about our coverage, please call Lorenzo Biggs at 215-854-5030 or e-mail DNcorrection@phillynews.com



# STAYING ALIVE

Local hospital trauma units fight to save victims of violence . . . and their own fiscal health

By **DAMON C. WILLIAMS**  
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**I**N A STERILE, bleach-bathed room filled with rib retractors, tracheal tubes, oxygen, sodium chloride, saline and paddles — instruments used to save lives — Dr. Amy Goldberg often stands between death and a gunshot victim.

Goldberg, chief trauma surgeon at Temple University Hospital, has worked on countless victims riddled with bullets. Some are repeat patients; most are young black men.

“These are not criminal masterminds; these are our children, ordinary kids,” said Goldberg, who last year testified before the state’s Health and Human Services subcommittee about young men destroyed by gun violence.

“I get angry,” she said. “Some think it’s like watching TV or playing a video game. They don’t realize that they just got lucky enough to make it to the hospital alive.”

The fight to save a life takes its toll. There’s the emotional strain on the victims, their families, their surgeons.

There’s also the financial drain on the five area trauma centers.

According to data released by the Delaware Valley Healthcare Council of the Hospital and Healthsystem Association of Pennsylvania, the city’s five Level 1 adult and pediatric trauma centers — Temple, Albert Einstein Medical Center, Hahnemann University Hospital, Thomas Jefferson University Hospital and Hospital of the University of Pennsylvania — collectively lose an esti-



STEVEN M. FALK / Daily News

**Amy Goldberg (center), chief trauma surgeon at Temple University Hospital, takes a time-out on the front lawn of the hospital to discuss issues with her ER trauma team.**

mated \$8 million annually in caring for victims of violence who cannot pay for health care.

In 2004, for example, 786 Philadelphians were hospitalized for gunshot wounds. About 13 percent of those victims had no insurance at all. A little over a third had Medical Assistance coverage, which reimburses the hospitals about 85 percent of the cost of care. But the hospitals must absorb the remaining 15 percent. Some of these costs are passed on

to consumers through increased health-care costs and insurance premiums.

Except for a slight decrease last year, the numbers of gunshot victims have been climbing since 2004. In 2005, 883 were treated, and in 2006, city trauma wards treated 987 victims.

Last year, when 977 victims were treated for gunshot wounds, HUP was one of the most active trauma centers, caring for 401 victims.

“There have been very modest peaks and valleys, but there hasn’t been a big decrease” in the number of gunshot victims over the years, said Dr. Pat Riley, vice chief of trauma and surgical/critical care at HUP. “We don’t know what the cause is, really; just too many conflicts resolved with guns.”

So many, in fact, that doctors on the battlefields in Iraq have come to Philly to learn better ways to treat the war-wounded.

“A number of visitors come here to learn how to care for gunshot wounds,” Riley said. “It’s a little sad that my hometown is proving to be an urban battlefield.”

In war, the seriously wounded typically don’t return to combat. The streets are different.

“We do see patients shot once, have an operation and come back again, shot again,” Goldberg said. “It is very frustrating for the care-providing team.”

Each time, Goldberg knows that the ending could be tragic: She may not be able to save them.

It’s difficult to track how many are so-called repeaters. They may get treated each time at a different hospital, Riley said.

“But the numbers of gunshot victims coming in is substantial,” he said.

“Intentional injuries, particularly those due to gun violence, exact a terrible cost on the lives and health of Philadelphia residents,” said Priscilla Koutsourdis, spokeswoman for the DVHC. “Young black men have the highest hospitalization and death rates for gun-related injuries.”

Koutsourdis also said that gunshot victims who make it out of the area’s ERs often face a lifetime of care, including rehabilitation, which further escalates the cost.

The first hours after the shooting are the most important to save a life and make an impression on a young man struck by bullets. In these so-called “golden hours,” victims reflect on their own mortality, Goldberg said.

“The surgeon has 60 minutes to reverse the shock state of some-

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