he didn’t come much tougher than Rodman Tarr. He’s a former Recon Marine and Desert Storm veteran. He’s spent the better part of the last 20 years as a boilermaker, ironworker, and bridge builder. He’s put his body through enough pain and stress in his 44 years to last several lifetimes.

But one day last year, it all caught up with him. Nagging back, neck and leg pain was taking its toll. A visit to a chiropractor didn’t help, and he was referred to a specialist. Rodman figured he could tough it out for one more day. But no amount of grit or determination could prevent what happened next.

That night, he awoke unable to move. His body had seized up. “I couldn’t talk, my whole right side was completely numb, I couldn’t feel anything,” Rodman said.

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Dr. Wahba performed another laminectomy and fusion, this time on the whole length of the neck. Three days later, he left the hospital—hopefully for the last time. “I am 100 percent,” he said. “I have all my strength back like I’m supposed to. I’m very pleased with the surgery. There’s no pain anymore.”

Rodman’s job has since relocated him to Texas, where he’ll receive follow-up care. While he probably won’t see Dr. Wahba again, he’ll never forget him. “He is by far one of the best doctors that I’ve been around,” said Rodman. “He actually cares. I have highly recommended him to everyone I know in California. I was very, very impressed.”

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Back to Mercy’s Emergency Department he went. He had hyperextended his neck, reinjuring an area that was operated on a few years ago. Dr. Wahba noticed tightness and compression there during their first visit, and knew it would have to be addressed sooner or later. Turns out, it was sooner.

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Dr. Wahba diagnosed Rodman with thoracic myelopathy caused by ossification of the ligamentum flavum. It’s a relatively rare condition that occurs when the ligament next to the spinal cord becomes thickened and calcified. This leads to pressure on the spinal cord, causing it to stop functioning normally.

To relieve the compression, Dr. Wahba performed a delicate surgery known as laminectomy and fusion. Over the course of several hours, Dr. Wahba removed the thickened tissue and placed screws and rods between the vertebrae to support the spinal column. With the help of Mercy’s advanced neuromonitoring technology, Dr. Wahba and his surgical team were able to constantly monitor signals from the spinal cord to ensure no additional damage was being done.

“This can certainly be a high-risk surgery,” said Dr. Wahba, a Harvard-trained spine surgeon who recently joined the care team at Mercy’s Orthopedic, Spine & Hand Center. “The calcified ligament was like a piece of concrete that was stuck down on the spinal cord. The goal is to carefully remove it, one small piece at a time, without causing any further injury to the spinal cord. Precision is critically important, because if you’re just a millimeter off, you can paralyze the patient. The real-time feedback from neuromonitoring lets me know that we’re not putting more stress on the spinal cord while we’re working.”

To say the surgery was a success would be quite the understatement.

When Dr. Wahba visited Rodman the next morning, he was like a new man.

“He just did fantastic,” said Dr. Wahba. “The morning after the surgery, all of a sudden his legs were completely full strength. He was walking around. It was a very dramatic overnight result, as if nothing ever happened.” He had regained full strength in his legs and was even able to walk around the hospital.

“It was pretty dramatic,” Dr. Wahba said. “After a big surgery like this you usually expect somebody to be in bed for a couple of days just because of the pain.”

Just two days after major spinal surgery, Rodman was home. Two weeks after that, he was back at work in his job as a field supervisor for Chicago Bridge & Iron. “It was like night and day,” Rodman said. “I felt like an 18-year-old all over again.”

But the story doesn’t end here. Two months after surgery, Rodman slipped in the shower, tweaking his neck. He figured