

Finding Charlie Morecraft...a Burn Survivor's True Story

Submitted by [Shelley McKown](#) on September 22, 2010 – 11:36 pm



As [third-degree burned skin](#) heals, it develops a thick, scabbed surface called eschar. Around third-degree burns are usually first- and second-degree burns where several large blisters develop and then rupture as they heal. Meanwhile, a significant risk of infection sets in. Doctors often use a procedure called an escharotomy to cut through the charred skin and blisters so the healthy tissue underneath can receive the blood flow it needs. Normally,

there's significant bleeding during this process. For third-degree burn victims first entering the hospital, if their main arteries are at risk of losing blood flow because of their burns, doctors are often forced to perform this procedure to save the patient's life; and there's not always time for enough pain medicine prior. Then again, burn victims will tell you that it doesn't matter how much morphine is injected. They say the pain is so excruciating, that they have difficulty even finding the words to describe it. Burn pain can be one of the most intense and prolonged types of pain and is difficult to control because of its unique characteristic and changing patterns.

[Hydrotherapy](#) is another method used to treat burn victims. Known to many burn unit patients, "the tub room" or "the tanking room" can be described as a sterile room with lowering cranes above several stainless steel bathtubs filled with 200 gallons of Clorox, antibiotics and water. This room is where the cleaning and debridement of skin takes place. For third-degree burns to become healthy skin again, this skin scrubbing doesn't happen just once, it happens every day for continuous months. One burn patient describes it as "surreal amounts of pain, almost awe, as if they were taking ladies' stockings off of my arms and legs, only, it was my own skin." After awhile, everyone lying in the hospital rooms beyond come to fear this room. Morphine is kept in a locked chest nearby, in dozens of cold vials, and medical staff refill the chest every week.

Emotional distress on burn victims is significant. For many third-degree burn victims, their lives are dramatically altered after they "go up," and trying to return to a normal life is very difficult.

Then you find the diamond in the rough...a third-degree burn victim who has taken burn prevention and safety advocacy to a new level. Although you may not remember his name 15 years from now, you'll never forget his story. During one of his presentations, a man stood up from the audience and said, "Charlie – I heard you speak fifteen years ago and you have been keeping me safe ever since." Allow me to introduce you to [Charlie Morecraft](#).

Charlie worked in an Exxon oil refinery for twenty-seven years. He was an operator who refined raw products into gasoline. In the eyes of his management, Charlie was a good worker. He worked hard, met his marks, and often agreed to work overtime shifts if needed. Although they had daily safety meetings, Charlie never worried about safety procedures because they usually countered the efficiency in getting the job done. As a good worker, he wanted to always finish his tasks on time or early. "For fifteen of the twenty-seven years that I worked at Exxon, I thought, 'Accidents don't

happen to me, they happen to the other guy,” Charlie said. Unfortunately, this is a common perception in many workplaces.

It was a hot, humid day in August 1980, and Charlie was working his last shift before leaving for his family beach vacation with his wife and two daughters. He received a call on his radio asking him to drive out to one of the refinery’s manifolds and change out a hammer blank. In layman terms, they were asking him to relieve the excess chemical from an area where pipelines come together and remove a plank. “It was a job that I had done 1,000 times before,” Charlie said. He expected the valves to leak, since they were old, and he knew he’d probably never see the day where Exxon replaced them with new valves that wouldn’t leak. Exxon had established a procedure to turn off the valves safely, even while leaking, but this would take Charlie twice the amount of time. Like most workers, he chose to do it the way he always had and ignore the new safety procedure. As he continued to turn the valves, there was significant leaking. When many chemicals leak, there are vapors surrounding the liquid, and not always ones that you can see. Now Charlie was covered in both. When he pulled the blank out of place, he heard a burst, and a surge of chemical splashed up into his eyes. He was temporarily blinded as he stood there trying to remember where the safety shower was. Charlie never wore safety goggles. They weren’t attractive and never fit right. He remembered the safety shower was a few blocks away so he started moving in that direction.

One of Exxon’s standard safety policies is to never leave a vehicle running at a job site because it’s considered an ignition source. As Charlie continued toward the safety shower and gained some of his vision back, he suddenly remembered he had left his truck running. He remembered this because he had just run past it. “I could see it coming. I could feel it coming,” he said. The fumes from his chemical soaked clothes traveled to his truck, and before he knew it the truck exploded, the refinery was on fire, and so was he.

Charlie was covered head to toe in flames.

He put himself out in a nearby water puddle and, unbelievably, he went right back to work trying to shut off valves as half the refinery was on fire and explosions were all around him.

Emergency crews eventually arrived, and Charlie remembers wondering why they were all so emotional and concerned when they saw him. They say burn victims go into shock at first. It wasn’t until he was inside the ambulance when he looked at his arms. They were charcoal black with bubbling skin. Then the pain set in. He began praying to God to just let him die.

Over 50% of Charlie’s body was covered in third-degree burns. Where his clothing had burned off, the burns were to his bones.

I believe Charlie is the one of the most effective occupational and personal safety presenters in the world. His DVD’s are mandatory in hundreds of safety training programs and orientations as well as OSHA required training. He has done thousands of speeches across the world on safety best practices. You can hear a pin drop no matter how large the audience is as Charlie describes for you his extensive injuries from taking short cuts on the job and not following proper safety protocol. I remember when I burned ONE of my fingers on a skillet, just a first degree burn, and I couldn’t focus on anything until the pain stopped. I can’t even imagine the agony Charlie endured. Charlie survived “the tanking room” every morning for three months and says he doesn’t remember what was worse:

the hour countdown until his next debridement or the screams of the other burn unit patients as they went through their own. Of the twelve burn unit patients he was with, nine of them died. With over fifty surgeries, both orthopaedic and plastic, Charlie has survived years of excruciating medical treatments plus the drastic effect it had on his family. “I lived. If I can leave anything else with you — it is that you have that same opportunity,” he said. For more information, you can contact Charlie through his website www.charliemorecraft.com.

According to the [Centers for Disease Control and Prevention](#),

- Burn accident statistics show that at least 50% of all burn accidents can be prevented,
- Fire and burn injuries represent \$7.5 billion in costs each year, and
- Deaths from fires and burns are the fifth most common cause of unintentional injury deaths in the United States.

According to the Journal of Burn Care & Rehabilitation, burns are one of the most expensive catastrophic injuries to treat. For example, a burn of 30% total body area can cost as much as \$200,000 in initial hospitalization costs. For extensive burns, there are additional costs for repeat admission, reconstruction and rehabilitation to repair the permanent disfigurement. In the United States, approximately 2.4 million burn injuries are reported per year. Between 8,000 and 12,000 of patients with burns die, and approximately one million will sustain substantial disabilities resulting from their burn injuries.

Thank you, Charlie, for allowing me to tell your story. For the readers, if you need more of a reason to always wear safety goggles or follow safety protocol at work or at home, I’d suggest you Google “third degree burns” and just one photo image should do the job.

– Shelley McKown oversees the EHS Compliance Division for ICertainty INC and is a safety advocate who promotes her cause at twitter.com/coolandsafetychic.

- See more at: <http://thesafetyreport.com/2010/09/finding-charlie-morecraft-a-burn-survivors-true-story/#sthash.6cG2TmBn.dpuf>