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struggling like crazy to pull air from his tank, may not get any.

### **Bad Judgment**

A 47-year-old man was diving at 224 feet when his buddy saw him vomiting and coughing up blood with the regulator out of his mouth. Unable to assist, the

buddy surfaced to get help. The victim had filled his own tanks; the gas composition was not known, but a tank of 100 percent oxygen he carried for decompression was found later to have only 600 psi in it. His buddy thinks he accidentally switched to the pure oxygen regulator at depth and experienced a seizure.

### **Foolishness**

Two divers were trying to set “personal best” depth records. The victim was last seen at 400 feet. His companion survived by inflating his BC just as he lost consciousness.

Ben Davison

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# **Chamber of Horrors**

## *Divers check in, but they can't check out*

“We demanded to be released, and he [the chamber operator] just laughed and told us we would be released when he was done. When we insisted on being released, he began to yell at us, saying that we would use the oxygen masks or else. . . . He placed us in the hyperbaric chamber under false pretenses and then kept us there against our will. Was he experimenting with us? . . . My wife sincerely believed he was trying to kill us. The entire event became terrifying.”

On November 21, 1994, Indiana divers Jack and Sally Kramer were enjoying a dive at Belize's Blue Hole. As Jack explained it, “After the first dive my wife became nauseous. However, during the surface interval she began to feel better and decided to do the second dive. That dive went well, but on the way back to Ambergris Caye she again felt sick and began vomiting. I took her back to our room and put her to bed, but the vomiting continued. Finally we became concerned and I sought medical help.

“We were referred to Dr. Otto Rodriguez. Dr. Rodriguez checked

my wife over and started an IV to offset dehydration caused by the vomiting. Sally was still vomiting, so Dr. Rodriguez gave her a shot, which I later learned was a sedative. After about an hour, Dr. Rodriguez told us he suspected that Sally might have decompression sickness and that she should take a short half-hour chamber treatment. He told me that I should join her in the chamber to keep her company and a half-hour treatment would not hurt me.

“Sally did not want me in the chamber with her, but Dr.

Rodriguez was adamant, so I joined her. Sally was very tense about this. After the half-hour was up, I asked that we be released, and he told us we would be in for four or five hours. We demanded to be released, and he laughed and told us we would be released when he was done. My wife sincerely believed he was trying to kill us.

“When he let us out, we went back to our room and packed and came home. My wife had 98 dives up to that point and now she refuses to dive again and even the thought of an island visit is terrifying to her.”

Mr. Kramer wrote to the Belize Tourist Board and contacted DAN about their experiences. The Belize Ministry of Tourism met with Dr. Otto Rodriguez, then issued a report of their findings. Their conclusion was this:

“After reading the report by Mr. Kramer and comparing it with our findings, it is quite possible that Mr. Kramer and his wife could have over-reacted to the situation, particularly since it was noticed that there needs to be some improvement in terms of

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## *Chamber of Delights*

A new hyperbaric chamber has opened in Marathon, Florida. Unlike the claustrophobic quarters of most of the one-person chambers, which sometimes don't even allow for arm movement, this one has a bathroom, a television, a stereo, and reading material. Twenty-five feet long and six feet in diameter, it is said to accommodate a dozen adults comfortably, or two dozen in an emergency. However, at a cost of \$500,000, I don't think the new units will be popping up at many dive locations.

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relating to the patient what will happen to him or her in this type of treatment. However, one should understand that the first response is for the doctor to treat the patient. Secondly, as a diver myself, it is quite common that the knowledge and procedure of treating dive related accidents is very alien to most divers thus, at the time of treatment, it could become very frightening. I have thus concluded that Dr. Rodriguez followed all procedures properly and displayed no unprofessional conduct.”

When I contacted Joel Dovenbarger, DAN’s Director of Medical Services, about this incident, he told me, “I am familiar with this problem. I have talked with Mr. Kramer, Dr. Rodriguez and with Mr. Moreno who heads up the Sub-aquatic Safety Services Recompression Clinics here in the U.S. and have also been in contact with Dr. Rodriguez about the Kramers’ problem. I went back over all the records that we have of treatments conducted among Americans at the Belize chamber and found no record of any prior complaint, but I did find several compliments for Dr. Rodriguez. I don’t know just what to think. I wasn’t there at the time and all I can do is hear both sides. And what I hear is contradictory.”

I then called Mr. Moreno of Sub-aquatic Safety Services in Dallas, Texas, about what the Kramers experienced. Mr. Moreno told me, “Unfortunately, Mr. Kramer does not speak Spanish and Dr. Rodriguez’s English is not the best. When people have difficulty speaking with each other, there is often misunderstanding.”

When asked why Mr. Kramer had been enticed into the chamber, Mr. Moreno replied, “We try to have someone that the patient trusts with them while treatment

is going on. It seems to reassure them and make them more comfortable. . . . The fact is a patient came in with symptoms of decompression sickness and left free of any symptoms. We have done our job.”

The facts that English is the official language of Belize and that Dr. Rodriguez has been in practice there for 12 years don’t lend much to the theory of the the language barrier. In fact, Joel Dovenbarger at DAN told me, “I do not speak enough Spanish to save my life. And I could understand Dr. Rodriguez perfectly.”

I made several attempts to contact Dr. Rodriguez at his office

telephone number, supplied by the Belize Tourist Board, but the phone was never answered. Even had I been able to talk directly to Dr. Rodriguez, it seems unlikely that I could have drawn any hard conclusions. As Mr. Dovenbarger said, “I wasn’t there at the time and all I can do is hear both sides. And what I hear is contradictory.”

However, the Kramers’ bizarre incident has prompted me to back off a bit more from diving the limit, hang another minute or two at 20 feet, and discuss with my dive buddy where I want him or her to be in case of my hyperbaric treatment — on the outside, please.

C. C.



**DON’T LOSE YOUR BOAT ON DEAD MAN’S CHEST.** “Fifteen men on the dead man’s chest/Yo-ho-ho, and a bottle of rum!/Drink and the devil had done for the rest/Yo-ho-ho, and a bottle of rum....”

When Linda Sorensen wrote her *Guide to Diving and Snorkeling the British Virgin Islands*, she knew that the infamous pirate Bluebeard was said to have left 15 men with a bottle of rum and a saber to fight out their differences on the small island of Dead Chest. In the guide she speculates that the island’s name may have originated from the unsuccessful attempts of the sailors trying to make the half-mile swim over to Peter Island.

But, Linda, did you know that Dead Chest was the key to the age-old mystery of the lyrics to the sea chanty made popular by Robert Louis Stevenson in his classic 1883 novel *Treasure Island*?

In *Geographical*, published by Britain’s Royal Geographical Society, explorer Quentin van Marle says he found from local history and folklore that pirate Edward Teach, known as “Bluebeard,” punished a mutinous crew by marooning them on Dead Man’s Chest in the British Virgin Islands, which has high cliffs and no water and is inhabited mainly by pelicans and snakes.