Annika Hansen Management, Policy, and Strategy 13 April 2020

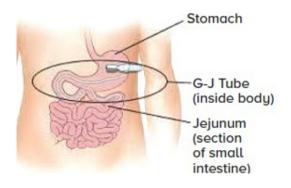
The Leader I Will Be

I consider myself to be very different from most college student for an abundance of reasons. Firstly, I took a medically necessitated gap year between high school graduation and starting at St. Olaf. Then, instead of choosing an offered major, I decided to take advantage of a program the school offers, and create my own, entitled "Business, Ethics, and Economics in the Practice of Law." This major allowed me to create a combination of classes and experience that will best prepare me for law school in the future. I'm 22 years old now, I've had 23 surgeries, and I'm lucky to be alive, let alone a Junior at St. Olaf College in Northfield, Minnesota.

For most graduating high school seniors, the hardest decision is *where* to go for college. On top of that decision, I also had to decide *if* I could go, and *when* it would be medically feasible. When I was 17, my Junior year of high school, I was diagnosed with chronic Pancreatitis, and progressive pancreatic failure. Most people have no idea what a pancreas is, let alone what it does, which usually means theirs is working just fine; congratulation, I'm envious. I'll spare you the pages of medical jargon I endured.

In essence, the pancreas allows you to absorb nutrition from your food, as well as regulate blood sugar levels in the blood, but when it fails, eating becomes not only excruciating, but none of the nutrition is absorbed, causing a zero-sum situation, with no way to win. Eating results in pain, and no absorption, so you get as much nutrients as if you hadn't eaten at all. I was 17 years old when I was diagnosed, and subsequently told the only option would be major invasive surgery.

Because I was in such poor health, not only was I told surgery would not be an option for at least another year, but I spent six months of my Junior year of high school in the hospital, receiving nutrition through a GJ tube to stay alive. It wasn't until my senior year that a surgeon at the U of M agreed to remove my pancreas, despite the elevated health risks associated with my already pretty pathetic health status.



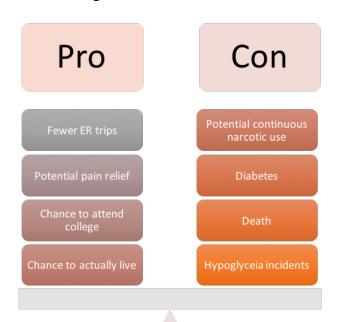
A GJ (or gastro-jejunal) tube is a means to provide nutrition to someone who is unable to tolerate oral nutrition, or unable to absorb nutrients (I was both). The tube is surgically placed with an external port to inject nutritional supplements, which then bypass the stomach and are absorbed directly into the jejunum. By skipping the stomach, the body is able to absorb some nutrients directly, and thus receive more nutrition than if I'd just tried to eat each meal. Without this, I would not have lived through my Junior or Senior year of high school.

The down side? Recovery from a surgery of that magnitude was a year to a year and a half, minimum. The potential complications included continued pain, higher risk of infection, as well as diabetes, which has its own set of complications. I would be insulin dependent for the rest of my life, would certainly be on narcotics for eight months after surgery, and potentially

forever. I would have to defer from St. Olaf for a year, and might not ever be recovered enough to attend, or live an independent life. I learned at the age of 18 how to perform a cost-benefit analysis, as well as evaluating not only personal or internal factors, but external environmental factors as well.

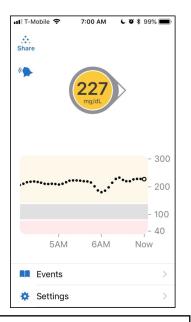
After months of consultations, several notebooks worth of potential pros and cons, color coded charts, potential timelines, alternate paths, and scenario analyses, I decided the potential benefits outweighed the possible risks, and I plotted my final strategy:

- 1. Defer acceptance to St. Olaf for one year
- 2. Undergo Total Pancreatic Auto Islet Transplant (TPIAT)
- 3. Recover
 - a. Allow for three months of pain medication, then commence with self-weaning schedule
 - b. Be active as soon as possible; even if it is short, do whatever I can to regain strength
 - c. Learn to control my diabetes, and remain in the desired range 90% of the time
 - d. Failure is not an option.
- 4. Attend St. Olaf in the class of 2021
- 5. Earn a degree, attend law school, and live an independent life

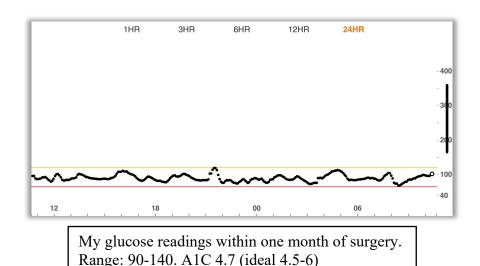


Overview of the Pros and Cons I considered for surgery. Although the scales look even, each "pro" and "con" factor was given a different weight, indicating how important or influential the factor was. "Potential pain relief" outweighed both "diabetes" and "hypoglycemia risk" making surgery the preferable option, despite the rather drastic and detrimental potential risks associated with it. This list is far from exhaustive.

I'll be the first to admit that I set high expectations for myself. You'd be hard pressed to find a doctor, family member, or professor who expects more from me than I do, I think. Let's put it this way; after the TPIAT surgery, it can take months to years to learn how to control blood sugar levels. The perfect range for a diabetic is 90-140, but most people end up in the 200-300's for months, years, or even indefinitely if they don't follow strict rules. I was told the long-term goal was to keep my values below 180, but above 70, which translated to a personal expectation of between 90 and 140, since that was the "perfect" range.



Average diabetic glucose readings after 1 year. A1C 9.7



I'm a perfectionist. I had always been told, as good as it may sound, being a perfectionist is neither a beneficial nor desirable trait. "It creates unattainable goals", "you'll never be satisfied", and "perfection is unattainable; why set yourself to an

impossible standard?" I've heard all of these comments on several occasions, from a multitude of people, from surgeons to family members and doctors. But through my medical journey, I've learned perfection isn't a standard; it's doing the best you individually can, driven not by a desire to be "perfect," but to succeed, and to do what others thought was not possible. I don't want to be remembered as a perfectionist, but as a leader, someone who leads by example, someone with irritating persistence, unquestionable work ethic, and proof that often it is the hardest situations that help us realize who we want to become.

The recovery from surgery took a full year. After several complications, many emergency room visits, several dangerous low glucose episodes and one instance of a (temporarily) deadly narcotics overdose, I was down a pancreas and spleen, my life depended on guessing the correct amount of insulin to take with each meal, and one miscalculation or moment of distraction would mean the end of my life. As I said, I'm damn lucky to be alive.



Right after surgery before I was awake to tell people not to take pictures...



48 hours after surgery. PICC line with oxygen and heart monitors. Me forgetting that breathing was necessary was a major problem with all the narcotics flowing through my system

As difficult as my medical journey has been, it has also shaped me into who I am, and helped me see who I want to become in the future. It began with the decision that failure was not an option. 15% of people don't make it through surgery, 40% remain on narcotics their entire lives, and 40% rely on disability insurance as they are unable to work or function independently, either because of post-operative complications or pain. After making the life changing decision to undergo surgery, I dedicated myself to succeeding; to proving that a full recovery was possible, and that I was the one who would decide the outcome, to lead by example.



(Left) Dr. Beilman and me post- surgery, after 10 days in hospital before being discharged to recover at home under strict guidelines and care. (Right) Dr. Beilman, Louise, the transplant coordinator, and me 6 months post-surgery for a routine check-in. At this stage, most patients are still unable to walk and function independently.



I have learned many skills throughout my battle to stay alive, the first and most important of which is to lead through example. I was told constantly that recovery would be difficult, that I would have setbacks, and limitations. So I succeeded through dedication, commitment, and achievement of goals. It was my surgeon who taught me to lead through example. His dedication and commitment to my health and success drove me to succeed as well. His compassion, caring nature taught me that not all lessons are learned in a classroom taking notes. Through his example of compassion, commitment, dedication, and refusal to accept defeat, I learned what being a leader means.

I've come to realize I have more strengths than I may have recognized; Adaptability, forward thinking, flexibility, self-advocacy, and analysis of both internal and external factors. As we've learned in management policy and strategy, a good leader needs to be able to scan the external environment, as well as the internal environment of their corporation. But, a corporation isn't always a business, a firm, or a store. I've come to learn that in an unexpected way, it is *me*, my *body*, that I lead.

As chapter 9 mentioned, a corporation consists of a CEO, president of the board, and shareholders. I've simply taken CEO duality to the extreme, of being the CEO, chair of the board, and the shareholders. When making the decision whether to risk surgery or not, everything had to be considered, from the internal factors, including physical health, potential benefit or cost, emotional strain, and personal preparation to take such a risk. I also had to

consider external factors, such as financial cost, availability of a doctor to perform the surgery, strain on my parents and siblings, potential technological changes that may be developed in the future and negate the need for a surgery, and the legal complications of liability if something were to go wrong.

Making this decision really engaged my core competencies; organization, forward thinking and planning, scenario analysis and construction, as well as understanding and developing interrelationships. All of these skills are invaluable in becoming a better leader for the future, and setting attainable goals is the best way to ensure growth, as well as maintaining and strengthening the skills I already have. I want to be seen and remembered as being soft spoken and gentle, someone who leads by example, and proof the impossible is never truly impossible if you're willing to put in the time and effort.

Success starts with attainable goals, which thankfully, is one of my strong suits, given my life has been a series of goals:

- 1. Live through my Junior year of high school
- 2. Survive surgery, and fully recover
- 3. Become strong enough to attend college without doctor intervention (minimize the trips to the ER and impromptu lifesaving surgeries. Only two in three years is pretty good for me!)
- 4. Travel abroad over an interim someplace warm that was unimaginable three years ago
- 5. Succeed

Each goal can be broken down into manageable steps, be it one class success, one trip, one doctor, or one day at a time. Because of my continued health struggles, I recognize the importance of small successes and minor achievements. Sometimes, something as simple as being allowed to walk out of a doctor's office after an appointment, or living in a dorm independently is worth celebrating.

Through class readings and discussions, as well as my medical experience, I have learned that leadership is not simply a role, but a way of living your life. A good leader cultivated interrelationships and creating bridging relationships between people who otherwise would never connect. My medical experience has allowed me to connect not only with doctors and specialists, but to connect them with friends and community members in need of medical advice. Through my connections, I was able to direct a friend from Turkey whom I met during an impromptu hospital stay, to the same doctor who performed my surgery that he needed to reclaim his life

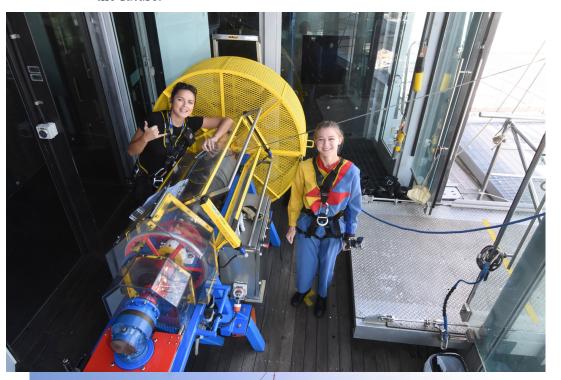


(Left): Can, (pronounced like *John*) and I, meeting for his 1 year post-op check-in with Dr. Beilman. (Right): Can's wife, Nil, me, Can, and my mother commemorating Can's full recovery and A1C level of 8.2 and not needing a check-up for another year!



By leveraging my core competencies, I have been able to regain a life I was afraid I would lose. Through setting achievable and realistic goals, perseverance, and working within my extensive physical boundaries and constraints, I was able to travel to New Zealand over Interim of 2019, successfully complete the rigorous program, establish connections with several entrepreneurs in New Zealand, and fulfill a dream of bungee jumping off the Sky Tower in Auckland; a 192 meter drop with 11 seconds of free falling.

Being a leader means leading through example; show that success depends not on others, but on the effort and time you are willing to put into it. My dedication and commitment to lead by example not only defines me as the leader that I am today, but also as the leader I will be in the future.



Fulfilling my long-held dream to bungee jump off a tall building, after being told by several doctors I would never be strong or well enough to travel, let alone jump off a 192-meter building in New Zealand. It is still the most exhilarating and exciting thing I have ever done, and I look forward to the next thing I was told I would never be able to achieve because of my medical difficulties: graduating from college and attending law school out East.

