

Smokin' Weed With Jesus
The Gospel According to Cannabis
By Clifford Beck

Smokin' Weed With Jesus
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“I always try to share with others the idea that in order to become compassionate it is not necessary to become religious.”

-His Holiness the
Fourteenth Dalai Lama

“Selfishness is not living your life as you wish. It is asking others to live their lives as you wish.”

Oscar Wilde

For My Wife Sara

Chapter 1

The roads of Bridgeton were especially treacherous at night and with the outskirts of town poorly lit, anyone foolish enough to be traveling only invited

disaster. It didn't have much to offer, save for a quiet life in small-town, Maine. An out of-the-way tourist trap, Bridgeton was little more than a blip on the radar of Southern Maine. Unless something happened. And with the soaking rains of spring, Route 302 could quickly become a river's deathtrap, leaving one with the life-altering consequences of poor judgment and carelessness. For Richard, as though decided by fate or some rare alignment of the planets, the time of his undoing had arrived. But it would not be by any cosmic mandate that would lead him down the path of what was soon to play out. In fact, it would be his own damn fault.

Richard was a bankruptcy attorney who had the unpleasant task of relieving businesses from their assets. Recently, he had taken an active role in parting the owner of a porn shop from his hard earned money. Apparently, he had fallen behind on his taxes as the result of spending an inordinate amount on cocaine and prostitutes. And batteries. Richard couldn't leave the property quickly enough, having felt soiled from the moment he walked in. But, business was business. And business was good. The economy left many businesses, both large and small, on the everpresent edge of financial ruin and Richard always seemed to be there as the portent of corporate

doom. He represented a branch of law that people loved to hate. More so than others. But still, a job was a job.

That night brought the usual spring rain as the sky grew heavy with a sullen, gun-metal gray. Richard was on his way home from the porn shop in Bridgeton. His briefcase contained the last of the paperwork on the adult retailer, soon to close his doors. All of the I's were dotted. All the t's were crossed. He had been doing the job for, at least, fifteen years and as much as he tried to insulate himself from the emotional consequences of the financial trauma of others, he was never quite able to manage it. As a result, Richard had turned to

alcohol to medicate his conscience. By the time his career reached its ten-year mark, he had become a consummate alcoholic and the stress of his participation in a necessary evil was taking its toll. His appearance had aged dramatically, beginning with hair loss and the need for bifocals. Later on, he developed diabetes, brought on by his consistent consumption of alcohol. But, even this was not enough to extinguish his imminent self-destruction. Richard required an intervention and it would soon be delivered to him personally.

He was approaching Lake Sebago, the halfway point between Bridgeton and Portland. As usual, he kept a small cooler on the floor, behind the

driver's seat. Like a pirates chest, what it contained was, for Richard, of far more value than any hidden booty. In it was a fifth of three-year-old scotch. Just what the doctor ordered. As he passed the small beach to his right, he reached back toward the cooler and found it just beyond his grasp.

Continuing to drive, Richard turned back to locate the cooler and having finally put a hand on it, turned to face the road. But before he could lay his eyes on the pavement, he was startled by the headlights of an oncoming truck. In his hasty search for his favorite stress reducer, Richard had inadvertently crossed the centerline. What happened next was unavoidable. There was simply not enough time to change course, away

from what was clearly the result of a bad decision and the outcome would reach further than he could possibly imagine.

As death stared him in the face, every muscle in Richard's body stiffened while he tried desperately to recover. Time slowed to the pace of melting ice as he saw himself, as though from a distance, strike the front left corner of the truck. The force of the collision spun his car counterclockwise. But only a heartbeat later, the tires grabbed into the pavement and the car's momentum sent it rolling down the road. Fifty feet later, it had come to a stop, landing hard on its roof. Richard, however, had been thrown from the car, coming to rest

further down the road. But, before his body came to a stop, Richard slid a few yards down the wet asphalt, shredding his clothes and grinding his skin down to bare flesh. However, on his way down the pavement, Richard had, again, become victimized by fate. In his path, lay a small pothole washed out from under the road. It's furthest edge grabbed him by the shoulder, moving it away from its socket and tearing all it's supporting tissue. Muscles, tendons, cartilage. The only structures to remain intact were nerves and blood vessels. If he survived he would have, at least, a chance of keeping his arm. If he survived.

By some miracle, Richard became conscious

enough to open his eyes. He was remarkably free of pain but was unable to move. His mind was heavily obscured by the fog of trauma and shock. He was approached by quickly moving footsteps as he hung on the edge of unconsciousness.

"Hey!" a voice yelled. "Can you hear me!?"

As his mind began to dim, Richard saw the man take out his phone. The next time he opened his eyes, he found himself staring up into the spinning rotors of a helicopter. As it left the ground, a flight nurse inserted an IV into his arm and hung a bag of fluids from a stainless steel bar welded into the ceiling. He felt the sting of the needle as his consciousness, again, drifted off.

The next stop for his broken body and displaced mind was the critical care unit of Maine Medical Center's emergency room. There, he would be assessed and stabilized by a team of trauma doctors and critical care nurses. Their goal would be to pull Richard away from the door of death and to help him recover as much of his life as possible. But, they could only do so much. And eventually, the one thing Richard would need for a speedy recovery was the will to live. Even before his carelessness led him sliding down route 302, the necessary part of himself, that makes life worth living, had been in short supply. Richard would have to recover much more than his shattered body.

Within thirty minutes, the life flight helicopter touched down on the helipad of Portland's Maine Medical Center. The trauma team waited nearby as the helicopter's rotors spun down to a stop. He had been placed on a backboard at the crash scene and a cervical spine collar carefully applied around his neck and as the doors of the helicopters medical bay opened, the doctors were able to get their first look at Richards injuries. Those who had recently begun their trauma residencies were clearly disturbed by what they saw, while more seasoned doctors and nurses, found their zone, blocking out any emotional reaction. This allowed them to think quickly and get the job done. The assessment of

Richards condition began as soon as the teams laid eyes on him.

His injuries initially led the doctors to assume that Richard was in grave condition. Upon impact with the road, Richards' head landed on its side and as his body slid down the pavement, the rough asphalt grabbed his ear, ripping it away and down the side of his neck. Had his skull struck the road at a more acute angle, his brain would have quickly turned to the consistency of a bloody stew. His life prematurely cut short. But while the remains of his ear were recovered, this was not the most serious of his injuries. Richard had been thrown from a rolling car and skidded down the road like a pebble

across a lake. His shoes had been pulled from his feet, his shirt torn from his body as his pants were forced down around his knees. Had he remained fully conscious, he would have certainly suffered the indignity of being helpless while in an almost complete state of undress. The skin on his chest, stomach, shoulders and the side of his face had been ground off by the pavement, leaving his raw flesh exposed. In some places, his body had been burned down to its musculature. But, it was his neck that gave doctors the most concern. On his way down 302, Richard had left the drivers window partly open and not wearing his seatbelt only contributed to the potential for serious injury. As he was ejected from his car, his neck became

nearly folded before his body's momentum shattered the window into a snow storm of glass. But as quickly as the event had passed, his perception of time had slowed enough that he momentarily heard the crack of fracturing bone, leaving the underlying spinal tissue at risk of permanent damage. If he survived, he would be told the true severity of his injuries only upon his discharge from the hospital.

Accompanied by the flight nurse, the trauma team rolled Richard into the first bay of the critical care unit. They placed another IV, took X-rays and began a more detailed examination. The x-rays confirmed those injuries suggested by his mangled body. But,

they also told of additional problems. His jaw had been both dislocated and badly broken and many teeth on his right side had been shattered. Oddly enough, it had been his right hand that held the bottle of scotch. And although he had left it far behind, he received something to take his place. Pain. Unless he left the operating room in a shroud, Richard would be guaranteed a painful recovery. Hopefully, most of it would be masked by the gently consuming haze of drugs.

The CT showed no evidence of brain injury. In this respect, Richard was lucky. But the injuries to his jaw as well as his remaining teeth jumped off the computer display. And given the injury to his neck,

Richard was rushed to surgery so the fractured bones could be stabilized. With his brain intact, Richards mind rose from the depths of unconsciousness. Unable to move his restrained neck, he was only able to look up at the fluorescent lights on the ceiling as he passed through the hallway leading away from the emergency room. They had identified him from the contents of his wallet, leaving a nurse to contact his family.

The trauma team took advantage of his wakefulness and proceeded to barrage him with questions. Did he know where he was? Could he move his fingers and toes? Could he follow commands? He was urged to remain as still as

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