

Chapter One:

The Surgery Journey Begins — But First, Work Calls

For much of 2025, I was part of a small team of AI pioneers, quietly working for months on a project few people knew about. On the evening of December 1st, we submitted a groundbreaking sixty-second video depicting the near future of AI-animated avatar agents. That night, the team delivered the commercial to our partners, including an eighteen-person team from Mastercard. It was the culmination of a six-month sprint for a startup I'm a partner in, called ClickZero.

It had been a remarkable run to the finish line — getting the commercial out before the holiday shutdown, when much of the entertainment world goes quiet for the season. Those months were an exhilarating stretch of work at the edge of a new frontier: personal AI agents built for retailers and consumers, promising to save people time and money while making everything more convenient. The world of personal AI agents is arriving faster than most of us can quite grasp, and it was thrilling to be part of its dawn.

This is the dawn of what we call “agentic character commerce” — a new category that shifts retail from passive browsing into a vibrant, two-way dialogue. The technology may feel transcendental, but its mission is simple: bring human warmth into the digital world, and make every interaction feel more personal, more intimate, more tailored to the individual in front of it.

The next morning, December 2nd, two things were set to happen. Our PR firm would push the video and press release out over the business wire, announcing ClickZero's new AI avatar technology to the world. And my scheduled open-heart surgery would begin at 8:30 a.m., promptly.

I went in expecting a defined procedure. What I got was far more extensive than planned. There was an aortic regurgitation that had turned severe, meaning the valve needed to be repaired and replaced. There was an aneurysm that had grown and needed to be removed. There were three arteries blocked at 100%, 95%, and 90%. And there was an ablation needed to treat my AFIB. I hadn't fully understood how serious things had become until the test results came back and made it impossible to ignore.

Still, I trusted my surgeon completely. He was confident in the plan, and I was confident in him — an expert in valve-sparing techniques he had performed hundreds of times, trained under the head of Cardiology at Stanford. I had every reason to believe things would go well.

Seven and a half hours of surgery and anesthesia later, I woke up stable. Everything had gone as planned, and my prognosis for a full recovery looked strong from day one. By Thursday, though, things had turned — my intestines weren't functioning the way they should have been. On Sunday the 7th, I went in for emergency surgery on my intestines. On Monday, a second emergency surgery followed, also on my intestines.

A bowel perforation — likely caused by the extent of the anesthesia combined with a predisposition to diverticulitis I'd had about seven years earlier — meant my bowel had literally burst. I was in serious trouble.

By Monday night, my entire body was toxic. I had been through it, in every sense: my chest had been cracked open and my heart repaired in multiple places, and now my belly had been cut open too. I woke from the intestinal surgeries with an ostomy attached to my abdomen, a wound vac that gurgled constantly, and an IV tree of fluids and medications working to prevent and fight infection. My doctors called my condition extremely critical.

That's when I knew, in my own mind, that I was done fighting. It was time to move on. The promising future I'd glimpsed with ClickZero just a week earlier — a future that had seemed wide open — now felt like nothing but an unreasonable set of obstacles between me and whatever came next.

