



Practice, Policy & Education

Rise

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“How many did you lose?” he leaned over and whispered.
 “Two,” I said. “You?”
 “Three,” he replied.

This had become our ritual, our way of honoring the dead; of making sure they had all been accounted for in our mutual grief.

Every morning we would sit side by side huddled behind layers of protective equipment and recount the night’s losses.

It was in those first minutes of the day that the knife of reality cut the deepest. In the quiet. Before the monitors and codes and crying. Before the hustle and hum that permeated everything. It was in those moments when you took that first big breath before calling a husband of 63 years to tell him his wife was gone, before you helped a patient navigate their medical order for life sustaining treatment (MOLST), or held their hand through your gloved fingers while they FaceTimed their family one final time.

It was in these moments humanity felt the most holy and the ground the most sacred.

I have tried for many weeks to put into words my experience with the COVID-19 pandemic. As I am sure many of you have found, looking back on those months it is as if you are looking at a photograph of a face you can’t quite remember clearly. The days were fast yet never ending and time seemed to both stand still and speed up without direction until one day it was June and the fog was lifting and you were hearing word of Florida and California. No longer was New York front and center.

When COVID-19 first touched down in our home I vividly remember all sitting down together before masks and social distancing. So many of us, in our naiveté, said things like “It’ll be over by April,” and “I’m sure you can still go to that conference,” or “You shouldn’t cancel your wedding in May. It’ll be fine.”

Within a week we knew it would, in fact, not be fine and you should definitely cancel that wedding.

Before we knew what was happening we were redeployed to Intensive Care Units, COVID floors, and emergency departments. On days when we weren’t on other services we were putting in PICC lines and gastrostomy tubes on COVID positive patients. First there was one, then 10, then 50, then 100, then 1000s. Overnight we were practicing a whole new type of medicine; medicine aimed at efficiency and focused

on trials. We weren’t sure how to fight this new enemy but we knew one thing, these patients needed our help.

Never before had I felt the full weight of the Physician’s Oath. What was once a bunch of words we muttered on graduation day now felt like a flag we had to haul up a hill and plant anew every day. It was both our battle cry and our privilege.

During the initial days on the COVID unit I felt physically weak from the uncertainty of it. The night before I was set to act as a medical resident I fished out my old “Pocket Guide to Medicine” book with the misguided idea that it could somehow prepare me for what was to come. I clung to that book, with its crinkled pages and hastily written notes, as if it were a life raft that could keep me afloat.

On the first morning I tentatively stepped on to the unit covered in my two masks, a white coat, a face shield, and my layers of self doubt. I went through the motions of reviewing overnight events, speaking with nurses, seeing patients and writing notes, all the while wondering “is this what I’m supposed to be doing?” I did only what felt right, following the old rhythms my body knew by heart.

It still amazes me how terrifying, yet familiar, it had felt to go from reading chest radiographs to ordering them. True to the old adage- it felt like riding a bike, albeit a wobbly one with a flat tire. But I had done it. We all had. We had stood side by side, solitary in our fear. Every day, relentlessly, we had recited overnight events, oxygen levels and pathophysiology to three stern faced attendings as they listened on. We had followed up lab results and placed nasogastric tubes. We had suctioned airways and ordered medications we hadn’t touched in years. We had transported patients down hallways and up elevators and later paced those same hallways alone as we relayed the day’s events to family members. We had shown up, in all of our inadequacy and doubt.

We were not expert intensive care physicians with a vast knowledge of ventilation settings. We were not infectious disease doctors who specialized in treating viral pneumonia. We were radiology residents studying plain films and trying to learn the physics of computed tomography. But most of all, we were willing. And maybe that was the best, truest thing we could have been.

When the clock struck 7 and the cheering would start it was like a beacon in the night. It picked you up off your knees and it called out

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“You are not alone in there. I see you.”

It cried “That is my mama in bed 19.”

It shouted “That is my son whose IV you’re starting.”

It reminded “We are out here. We need you in there. Keep showing up for us.”

I would sit with the windows open and weep. I would crumble under the weight of it and then I would get up and go back to work the next day.

On the days when I was not working I spent a lot of time lost in the thoughts that seemed to simmer in the back of my mind. COVID-19 was less like an explosion and more like a slow burn. It was felt by everyone all at once and then never left.

It seemed like an eternity we would be forced into isolation. But, over the course of months, just as steadily as those feelings of fear and loneliness crept up, another feeling began to stir. You could see it in the eyes of the woman at the market, or the delivery man riding by on his bike. In the eyes of your neighbors and family. We were rising. In the midst of it all, one by one, we were looking around us and realizing, as if for the first time, that we would be okay. On wobbly legs and with

hurting hearts we began to stand.

I don’t believe there will ever be words to describe what it felt like to be a New Yorker during this time. It was heartbreaking but in many ways it was also beautiful. I saw people reach high and hard towards the most selfless version of themselves, both inside the hospital and out.

Although the hospital was our battlefield, the war was waged far beyond those four walls. It was waged in homes and on the street and we would never have won if it wasn’t for our decision to care. To look our humanity square in the face and decide that we are all in this together. To decide to rise.

Declaration of competing interest

None.

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