COVID 19 in New York City

This is my story of the last year in NYC during the COVID-19 epidemic.

I am an alumni of the University of Nebraska-Lincoln and Nebraska Medical Center with bachelor's degrees from both institutions received in 1995. After leaving the farm in southwestern Nebraska in 1991, and my 4 years in Lincoln, I went to Florida to get my Master's degree in Physician Assistant Studies in 1999, and came to NYC in 2003 to work in oncology and bone marrow transplant.

I have lived in NYC for the last 18 years, the longest I have ever lived in one place, and it is now my home. The diversity, excitement, constant activity of the city is a palpable force, and there is no other place I would rather be. I still feel this way even after I have seen my city get torched by COVID, and start its slow comeback on the other side.

I live in Brooklyn and commute daily by subway into "the city" to work in Manhattan's Mount Sinai Hospital. I work as a Physician Assistant there, and normally do hematology consults for admitted patients in the hospital.

By February of 2020 the information about COVID was very limited, and a few reports from an outbreak of a new respiratory virus China and Europe were in our news, but no serious consideration of it was made. We had our first case in NYC on February 29. At that point, more reports were stating things could get worse. We had no idea how fast it would happen. Treatment protocols were non-existent, and medical information was scarce, despite the fact it was already ravaging Europe and China.

I was still riding the subway without a mask, although there weren't any disposable ones available to purchase anyway. We routinely wear them in the hospital per policy at all times around patients to reduce infection risks, but we still had colleagues and patients getting ill with respiratory illnesses that weren't flu, and for the most part, our colleagues were young and healthy and did well. By March 13, my birthday, we knew it was coming. Hospital preparation for the outbreak was already in full swing, and were were told we would likely get redeployed to handle the surge of COVID patients. PPE was scarce, but at work they did their best, although I never handed over an N95 without receiving another into my hand!

That was the last day my children went to school in person that school year, and the last time we would eat in a restaurant and sing happy birthday without the fear of catching COVID.

Full shut down of the city happened March 17, and I was taken out of my regular role at work and redeployed to the medicine department to do admissions and front line care of admitted COVID patients. We had webinars and resources were given about proper use of PPE, the pathophysiology of the COVID patient, and an outline of treatment protocols.

Overnight the city became empty. Tourists were gone, school children and teachers were off the streets, businesses were shut to keep COVID contained, but it got worse. By the first of April I was again reassigned to a dedicated COVID unit for patients who had both cancer and COVID, and I remained as a front line provider in that unit until the first wave ended in mid May. Doctors, Nurses, Physician Assistants, and Nurse Practitioners were pulled from outpatient to help us treat the hospitalized patients.

I carried about 7 patients per 12 hour shift. The ER was so full, you couldn't even turn around. If a stretcher had to move, you had to move a dozen others like stretcher Tetris. People were afraid to go to the hospital, and testing was limited and very slow, although at that point, literally EVERYONE in the ER had it. We had no playbook, no experience with the virus or what

it did. That was the most unique experience of it all, that we had no idea how to treat it! We did our best, had trials of hydroxychloroquine, azithromycin, but it was evident they didn't work well. Steroids at that time were thought to be detrimental from studies done in Europe, so they weren't used, and intubation was routine. It was all ages of patients, many with minimal medical problems and around day 10 of symptoms they either got better and went home, or they crashed and got intubated, and sadly we lost many no matter how hard we tried to save them. We managed abnormal blood chemistries, kidney failure, blood clots and on the fly began to see what helped and what didn't, and the recommendations for treatment were altered as we went. We did get better at management, and documented our success and tested new drugs and protocols that I'd like to believe saved COVID patients in successive waves of disease all over the country.

As a worker, I was afraid of catching it, but when your job is taking care of sick people, well, you put on you big kid pants (and top it off with a gown, booties, hair cover, N95, surgical mask, gloves, and face shield) and go to work. Hotels in NYC donated hotel rooms for front line workers so I scheduled my shifts in a row and stayed in the hotel on working days so I would't bring it home to my family.

On the home front, my 12 year old twins were now home alone trying to figure out remote school because my husband and I both had work in person. The teachers and kids did their best, but it was still very difficult, and they didn't learn well. We didn't ask for help from my husband's mother because we didn't want to expose her unnecessarily, so I ultimately scheduled my work for every Friday, Saturday, and Sunday so I could be home as much as I could to help with school during the week.

The virus raged through the city, the death rate was high, and my patients were so sick I couldn't set foot off the unit during a 12 and a half hour shift in case someone crashed and I had to intervene. Volunteers donated meals, small gifts, cards and letters of gratitude, and the firefighters and the people of the city would clap and cheer for us every day leaving shift at 7pm. It was moving and much appreciated, and it is one of my clearest memories of that time.

The city opened an overflow hospital at the Javitz Convention Center, the ship *Comfort* came, and we had a tent hospital in Central Park out out Sinai's back door. Our huge lobby became filled with cubicles for patients. Somehow eight weeks passed, the spring weather, Easter, family birthdays, Mother's Day were all celebrated in the walk past Central Park to and from work, and eventually the pandemic curve started going down.

By the middle May, rates were down enough I was pulled off front line and went back to my regular job, although I would still see COVID patients in consult if they had a hematology issue in the hospital. The city remained locked down, and Broadway, nonessential stores, hotels, movies, were closed. I had trouble getting takeout food at 8 pm on my way back to the hotel, so many places were closed. I explored the empty city and took photos of the most iconic, normally crowded places of the city to remember what it was like without people.

By the summer, our rate was less than 1%, and restaurant takeout began in earnest, and people began to have outdoor workouts by the thousands, exercising, walking, running, and outdoor picnics. Our beloved parks were filled with those who stayed. I began to run in earnest, a sport I'd never done before, and almost every day off was spent running on along the NYC waterfront.

As things began to open in the fall, museums, gyms, stores began to open with restricted numbers inside, masking, and strict cleaning protocols, and subways were shut down and sanitized every morning. Public schools opened to in person learning to those who wanted to

be in the school, but due to the distancing requirements, they were able to attend only 1-2 days per week. We put our kids into private school so they would be in school 5 days per week, since we both were at work in person every day. The impact on the children for remote learning is sad. Our kids have friends that became depressed, and learning was difficult or nearly impossible in households with limited wifi or one or fewer computers in households with multiple children. Of course those of us with two working parents or kids with parents that are non native speakers had different difficulties, although many had all of the above.

We had a smaller second wave in December to mid February due to holidays, but nothing nearly as severe as the first wave, and I was never redeployed, although I did volunteer several shifts in our hospital's vaccination pod helping to vaccinate my fellow Sinai employees in January and February.

The city is opening again, and life has flashes of normalcy again, with vaccinations now at about 25 % for at least one dose, although we have lost nearly 50 thousand New Yorkers, and over 30 thousand of them in NYC. We have also lost thousands of jobs, restaurants, businesses, dreams, and livelihoods, but NYC is poised for the next reincarnation. I mourn so much from this pandemic, but new dreams will have the chance to grow in this city, it is what happens here.

Photos of the empty city April-May 2020



















