I have a story to tell. This story is about my personal breakthrough while working in the hospital from the perspective of watching just how many patients lost their lives, with no clear pattern of who this virus will take next. In reading this experience of a single moment while working in a COVID epicenter during the first peak, I hope readers will be able to step in the shoes of a healthcare worker and see what it was like during this time. Additionally, I hope readers will perhaps understand my concluding realization that COVID potentially has something to teach us. With this, I bring forth this philosophical scenario in which this virus sees more equal worth in people than actual people do in modern society.

A Healthcare Worker’s Breakthrough About the Pandemic
By Magdalena Chwedczuk

It feels like all the stars are falling from the sky. My mind can not comprehend that all of this is real right now. I am haunted by these humans around me, all lying in hospital beds, facing death, and any one of them is about to be taken away from this virus, a virus that doesn’t pick and choose who goes next into the unknown, anyone can be taken away from us. It’s a virus that has less discrimination of different kinds of humans than other humans I know.

I am sinking into my chair in the Nurse’s Station taking in the crisis unfolding. It’s been a few weeks now during the COVID pandemic. I do this every now and then when I work at the hospital, I just sit and observe the upheaval. This only happens whenever I have a moment to breathe and I don’t feel like I’m completely suffocating. It’s a moment where at last, no one is asking me for help, no one is asking me to retrieve supplies or worse, another body bag. Yeah, there’s that rewarding feeling that you get when you work in a place like this and you help others and all of that, but that doesn’t come anymore…Not like it used to. I’m not thinking about how I contribute to the pandemic, it’s just pure suffocation. It’s all just drowning and begging for a chance to be able to breathe again, it’s like being underwater with the enormous hope that a surface to break from is right above you.

The surface is nowhere near though. I look around and see nurses and doctors run from room to room, using the same N95 mask they were given for weeks now. I wonder if their noses hurt like mine, because mine is hurting so bad from the metal rim underneath the mask and I’m wondering if my nose will start to swell and bleed again like the other day.

I look more. More suffocation. Patient’s doors are closed, yellow caution tape is all over the walls, red NO CONTACT signs plastered on the room signs.
The thought that comes most often during a fleeting moment like this is how I realize that I spend everyday looking to the future, hoping that this pandemic will end soon. I’m using the thought of that future to escape this fear of the present.

As I’m sitting here to find a chance to breathe, Melissa, another nurse on the floor is running up to me. “Hey, um I need you to go downstairs to the Main Lobby if you have a chance.”

If I have a chance? It’s pure courtesy to say that now. I respond by saying that I can go downstairs now, because during a pandemic you’re not allowed to have moments to look around what’s happening. I cease my observations of people drowning around me. I wish I could stay home like everyone else, I wish I could see people outside the hospital again, I wish I wasn’t faced with around 5-7 people dying in front of me everyday, I wish I wasn’t seeing these sick people suffocating to death. As I talk to Melissa, I hear a Physician’s Assistant talking to a different nurse about how they just worked tirelessly to save a patient. It was a Code Blue that happened about a half hour ago, and I overheard that the patient is hanging on a thread right now. I hear him talk to the nurse, “I know, he was such a sweet man, he might survive after that brutal code but we’ll wait to see how he does overnight,” his voice is breaking now, “no one deserves this...” He looks down at the floor with sorrow, tears welling up in his eyes, trying to process what just happened. But his pager is going off, and over the loudspeaker, we hear “Attention, Code Blue ICU, Room 11, Code Blue ICU, Room 11.” We all look at him with our eyebrows turned up, a look of worry on everyone’s face.

“Sorry, excuse me,” he says quickly while rushing out of our unit and out to the ICU. I see him run down the hall and out the door with his hand near his face, wiping his tears.

I turn my attention back to the nurse and she’s looking down on the Code Blue report, rubbing her finger on the pen gently, and mumbles under the sound of chaos, the chaos of people changing in and out of gloves, phones ringing constantly, “Good thing he was here for our old man.” She writes down the patient’s name on top of the report, probably knowing he won’t survive the night.

I realize his patient probably started to crash at the same time as our patient was on our floor. I’m starting to worry that we might have to change our policy of a Code Blue soon. Instead of doing our usual rounds of CPR and injecting epinephrine, we might only be able to do one round of CPR and one injection...because I fear next time we won’t be able to get to the other

An interruption of me trying to think all of this through happens again, Melissa warns me, “There’s a lady waiting downstairs who wants to give her phone to her husband who’s in room 2, so yeah, when you get a chance, can you get it for me and I’ll give the phone to the patient?”

I nod, I look up the patient’s last name that’s in room 2 on my computer to know, so that when I go downstairs, I can ask who the wife of that patient is. I go downstairs. No one takes the elevators anymore, you just run everywhere in the hospital now. I run involuntarily down the stairs, it’s an instinct now, because you don’t know if you’re going to get a call on your pager to have to run back upstairs and completely abandon trivial things like getting a patient’s phone from the main lobby. I didn’t even know if that patient in room 2 was awake, getting worse, getting better, or better yet, cared enough to have his phone with him. I’m thinking how people are probably already looking for me to try and get more supplies for the floor and I have to go downstairs to get a freaking cell phone.

I reach the first floor and I see a mass of people in the lobby. There is an ocean in front of me. Tears streaming down, tensions are around me, all of them seem like they’re willing to run over staff just to see their family members upstairs. The whole hospital is now a COVID epicenter, and the only people in it are employees, and people who have COVID. It’s regular fish in the ocean, and fish who can’t breathe in the ocean. I look at the crowd in front of me, they’re all yelling at security that they demand to go in through the barrier, and I see one by the front desk holding a phone in a ziploc bag. I walk to her with caution, she seems to be a likely candidate as the wife of the patient in room 2. I say with caution because anyone who’s there in the lobby will ask me if I know anything about their own family members lying down in a hospital bed suffering. I know what you’re thinking, how can I be so avoidant of people who are just fearing for their loved ones? I’m avoidant because I don’t know what to say anymore to them, I don’t have answers, I don’t know how to stop the overwhelming grief and waves of tears around me.
The lady is shorter than me, looks older and wiser than me. She’s dressed in all black, and has a dark haired ponytail. Her accent and the color of her skin makes me assume she’s from some part of Asia, Pakistan perhaps.

“Hey, are you Mr. S’s wife?,” I ask. Immediate tears pour down her cheeks as she looks up at me. I can’t touch her or get too close. I’m in light blue scrubs that we change into for the day so that these scrubs get infected with COVID, and not the ones we usually wear. I’m wearing a scrub cap and goggles and two huge masks over my face that block my look of compassion. I can’t touch her, I can’t show my expression. I’m appearing as this heartless monster.

I let her take the time she needs for her to respond, she says, “Oh yes! Yes I am, please tell me is he okay? Is he okay? Please, I have to know!”

See, that’s the tricky thing here, Melissa sent me down to just get the phone for the patient. She didn’t tell me anything about the patient. I only know his last name. I have to think of something to say. “Yes, I haven’t heard anything right now and I work on the same floor where your husband is, but we will call you for any updates as soon as we can.”

She just keeps crying as she tries to formulate her next sentence. I speak for her and say, “Okay so I’m here for his phone, and you would like me to bring it to him, right?”

She says, “He hasn’t been awake for days. I know he won’t answer if I call. I just wanted him to hear this playlist I made for him, it’s all the prayers from the Quran.” I look at her and think, wow, she’s really thinking about how he might die soon. She continues to say, “I’m going to show you the passcode to unlock the phone, and how to get to the playlist, but please please, just do this for me, please, I just hope he hears these prayers somehow.”

I nod and let her speak, that’s all you can really do in a situation like this, you just have to let her tears fall. I’m slightly envious that she gets to do that right now. I wish I could cry. I let her show me the passcode on the iPhone she’s holding and she clicks to the music application, and I see her scrolling through the playlist.

“As you can see,” she says, “This is the playlist, and start it from the beginning. And just let it play by his ear.”

At this point, I realize I’ve been down here for a bit too long and more people are building up tensions with the security guards. I want to leave. I say, “Okay, I promise you the phone will be right by his ear as soon as I go upstairs back to the floor.” I start to walk backwards
slowly as I’m preparing to say some pathetic, seemingly heartless goodbye. It’s not like I can let her walk up to the floor with me.

But before I could start to leave, she went down on her knees in front of me. She starts screaming, “PLEASE GOD PLEASE HELP MY HUSBAND, PLEASE HELP THIS YOUNG LADY, PLEASE MAKE IT STOP, PLEASE!” She continues to yell, now praying in a language I can’t understand. Everyone else is silent around me and looks at her kneeling and yelling at me. I was embarrassed. I didn’t know what to do. I didn’t know how to take the pain away from her. I was embarrassed because she was yelling and screaming at me in a different language and yelling about God. I was embarrassed because I didn’t know what to say or do. I can’t even hug her. I was embarrassed because I didn’t know what she was thinking and how much she decided to depend on me or God. Was I some kind of an oppressor for feeling embarrassed and scared? There’s this white girl looking down on someone praying in a foreign language, and feeling embarrassed for both of us. Why? Why would I ever feel embarrassed to be in this situation? I let her yell and yell. I was scared too at that moment, because of the pandemic, and of her.

Then, silence. She stands up slowly. She thanks me for letting it out. She thanks me for working during this time and calls me a hero. I don’t feel like a hero, I feel confused. People are dying all around me constantly. We as staff are always being named heroes, but we really don’t know what we’re doing. We would walk around the whole hospital from unit to unit looking for supplies, and the worst was when we ran out of body bags…and even worse than that? When the morgue was as full as can be, and we were still putting bodies in there. Even with an additional temporary trailer as a morgue, that was full too. We saw the worst of it and couldn’t stop it from happening, we didn’t feel like heroes. My friends and family didn’t even believe that this was actually happening inside the walls of hospitals. It was a war zone and I’m putting it lightly. We just don’t talk about the bad moments, the moments where you questioned life and came to a realization that death was for certain. We don’t talk about them because people look at you like you’re crazy and exaggerating what it was like. COVID didn’t pick and choose who it took away. It didn’t discriminate. It came for you if you were 90 years old and had issues already of heart disease. But, it would also come for the roommate of that 90 year old, a 23 year old athlete who was healthy as can be, and dropped dead. The 90 year old would survive somehow.

I heard that across the country, hospitals were running out of ventilators too. The choice of choosing who gets a better chance at surviving from COVID might be facing us soon too. We
might have no choice but to pick and choose one person who gets the ventilator, and well, they would have a better chance of seeing their family again, that’s just that. The other person wouldn’t have that chance, a chance we would take away from them. How can we pick and choose? How do we pick a person’s life over another’s? Where is this existence of equal worth?

COVID has no oppression like this. COVID discriminates less than I do, has less associations of different kinds of humans than I do. Sex, age, race, religion, COVID has a better idea of how those things don’t matter more than humans. COVID doesn’t pick and choose who deserves a second chance at life. My waves of reasoning during this time made me realize one thing. A lot of people died, and died alone. Sometimes you get to say goodbye to people and sometimes you don’t. It’s why you have to be good to people.