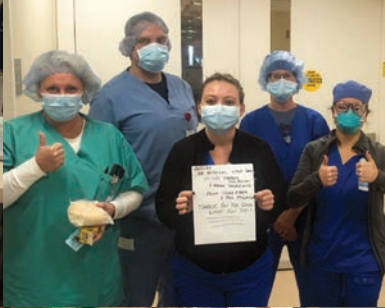
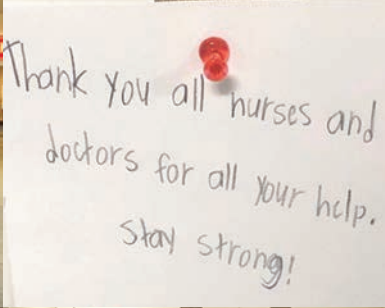




**Greenwich Hospital**  
**Emergency Department and COVID-19**  
Our voices. Our stories. Our journey.



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**Emergency Department and COVID-19**  
Our voices. Our stories. Our journey.



## In Gratitude

Words matter, and the words in this book not only represent a significant part of our collective history, but more importantly, how COVID-19 affected the heart and soul of a special group of people – the Emergency Department Team of Greenwich Hospital.

As you read the words of these amazing individuals, I am certain you will share the sense of true gratitude we owe to every member of the team as they forged ahead with the singular purpose of caring for those in need.

**Diane Kelly, DNP, RN**  
**Greenwich Hospital President**

# How Do You Thank Heroes?

It started with a piece of prose by Chris Davison, MD, our Emergency Department leader, that revisited his emotions, his challenges, and the harsh reality of the everlasting impression COVID has on those who worked in the Emergency Department during the pandemic. He said that writing down his recollections was cathartic. But the missive was also intended to serve as a gesture of gratitude to all of his colleagues who showed up every day during the most trying of times. He entrusted me to read it. He asked me what he should do with it: Submit it for publication in a Greenwich Hospital newsletter? Send it to a local newspaper? Submit it to an Emergency Medicine journal?

This was the inception for the idea of a book where others could share their experiences. Could we request similar contributions from Emergency Department staff members who worked during the peak of the pandemic? Could we create a book to remember? Would staff participate? At first, we coaxed, then listened to sentiments such as: "Sorry, no time." "No intention to revisit." "Fear of PTSD." "I'm not a good writer." "Does what I have to say really matter?" Would we get sufficient responses to see our vision for a book come true?

And then, first a trickle, then more steadily, the poems, pictures, Haiku and vignettes arrived. These were stories of fear and compassion, disbelief and anxiety, of being bewildered and overwhelmed, of hope and heartbreak,

of tears and tenacity. Yet all the entries had a consistent thread of family, unity, hope, and devotion to work and to each other.

With a pile of manuscripts, now we wondered how to bring this all together. It is, after all, a time to honor all those who came forward with words and pictures, a time to honor all those who were unable to contribute for fear of revisiting or reopening wounds too deep to fully comprehend. And most importantly, who will bring this all together? That's when our wonderful editor, Magaly Olivero, stepped in. She is amazing. She managed to consume all, reading and rereading to capture the essence of each submission. With incredible dedication, intellect and creativity, she produced a body of work that will forever be available for our Greenwich Hospital family, and for the communities that we serve and that support us. She brought alive the words of others, helped us all to better understand a unique time in history and in the lives of those stories she so lovingly transformed into a now permanent record. On behalf of Dr. Davison and me, we thank Magaly for her efforts to see this book through to fruition.

I also want to thank Greenwich Hospital's administrative leadership for recognizing the importance of this endeavor and providing support every step of the way.

**Spike Lipschutz, MD**  
**Vice President, Medical Services**

LEONA AND HARRY B. HELMSLEY MEDICAL BUILDING

Heroes work here. #inthistogether



THANK YOU





WE SUPPORT OUR  
HEALTHCARE WORKERS

Yale  
New Haven  
Health

#inthisogether

FORMS

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# On the Set of a Dystopian Movie

I remember the after-hours call from my supervisor to let me know that an Emergency Department patient had tested positive for the coronavirus.

“Here we go,” I thought. We knew media would pounce the minute the news became public. My mind was racing. “Were my ED colleagues going to get sick and die? What about their families? How could we treat a disease we knew nothing about?”

If Greenwich Hospital was ground zero for COVID-19 in Connecticut, then the Emergency Department was the front door. Of the more than 1,600 COVID-19 patients treated at the hospital during the pandemic, *every single individual* came through the ED. Within months, all beds were filled with COVID-19 patients and the ICU had tripled in size.

I remember being the only driver on I-287 while driving to work. The hospital lobby and hallways were eerily quiet and desolate. I felt like a character on the set of a dystopian movie. I would pass by the ED and wonder what was going on at that moment.

Thankfully, Teresa Delpeschio, ED office manager, provided a sneak peek. Each day, she would text me photos – staff members smiling, laughing, eating, dancing – to post on social media. I thought: “How can they look so happy in the midst of such misery?”

People who view the photos in this book may think the same thing – until they read the entries and poems. Pregnant nurses worried about their unborn children. Doctors frustrated by their inability to treat the sick and dying. Transporters bringing bodies to the morgue. Employees from all corners of the hospital – from clinical departments to Facilities and Environmental Services – worked selflessly in the ED despite the horror.

It didn't take long to recognize the façade, the stark contrast between what ED staff were thinking and feeling as opposed to their outward expressions. Camaraderie, collaboration and collegiality helped them navigate this challenging time.

As a hospital employee, I feel privileged to have had an insider's view of the pandemic. It's also been a privilege to have worked with Christopher Davison, MD, and Spike Lipschutz, MD, to create a book that celebrates the courage, tenacity and resiliency of our Emergency Department staff during one of the darkest periods in the history of our nation and Greenwich Hospital.

**Magaly Olivero, Editor**



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# Elbow Bumps and Fake Hugs Elaine Accorsini, PA

For me, 2020 was one of the most “changing” years of my life. January started out great with New Year’s hopes and dreams. We started to hear of a virus in China, but it was oceans away. Then February came and the U.S.A. was now part of the pandemic, although it was still 3,000 miles away. We all know what happened in March. Greenwich Hospital had its first COVID case, and we were all scrambling to figure things out. Do we send workers home on quarantine? For how long? How do we protect ourselves in the ED? How do we care for these patients?

EVERY DAY we would get updates on policies, procedures and treatments. If you missed a day reading your emails, you were WAY behind regarding NEW information. I had the advantage of speaking to my cousin in Italy, who is an anesthesiologist/critical care physician. She kept me up-to-date on what was going on there and sent pictures. She said it was a war zone. Everything in the country was shut down. She was seeing hundreds of people dying but could do nothing about it. She told me how they were changing treatments every day, and trying new things and medications to save patients, only nothing worked as planned.

I was still hopeful that it would not get this bad in Connecticut and New York. Boy, was I wrong! Our world CLOSED DOWN! The entire ED at GH was filled ONLY with COVID patients. No MIs, CHF, appendicitis, SBO, CVAs, lacerations, fractures, Fast Track patients? Where did they all go? Were they dying at home? Did they just disappear? We could not keep up with the flow, and the admissions soared. We set up tents in the parking lot and stretchers in the Noble Conference Room.

We donned and doffed PPE with every patient. It became exhausting. The worst for me was sitting in FT and seeing a patient who was being transferred to Yale for ECMO or because we did not have any more ICU beds and respirators. They were usually male and intubated, with six or more IVs hanging. All I could think was, “Is this the last hope for this patient and would this be his last trip?” It was heart-wrenching.

But through it all, we worked as a team. We kept our spirits up, and laughed and played when we could. We did elbow bumps and fake hugs. We received food all day for months from outside restaurants to keep us nourished (if you could call pizza nourishment). We took pictures of our silly PPE and new face shields; some of us looked like aliens.

My biggest fear was taking this unknown virus home. We still did not know how it could spread so easily and so rapidly. Did it only come from person-to-person contact or was it on our clothes, hands, mail or items that we purchased in the stores? I would go home from work, undress the second I stepped into the house, and wouldn’t touch another person until I was scrubbed clean.

At this time my 97-year-old mother lived with me. I was petrified that I would give it to her. I wore a mask in my home at ALL TIMES (except to eat, of course). I slept in a separate room from my husband and used my own bathroom for three months. No hugs, no kisses. There was no end in sight. The news was reporting hundreds of deaths a DAY in NYC alone. In GH, we had more deaths in three months than in the past five years.

Then I had a personal heartache that would forever change me. My mother developed severe congestive heart failure. I brought her to GH among all the COVID patients to get emergency treatment. Thank GOD for Dr. Renee Baranin, who cared for her. We did a COVID test, which, thank GOD, was negative, and placed her on high flow oxygen and stabilized her. There was no way I was going to admit her to the “COVID” hospital. There were NO visitors! And the rule was strictly enforced. If my mother was going to breathe her last breath, there was no way that she was going to do it ALONE, like all of those poor COVID patients. No one should EVER DIE ALONE!

So I set up an ICU in my home with oxygen therapy, BP and hourly pulse ox readings, daily weights to keep track of her fluid overload; I adjusted her medications daily to accommodate her changing status. It happened quickly, and only five days later, on May 16, she passed away at home. The COVID, as we now called it, did not take my mother, but my mother was taken among THE COVID. No wake, no family and no get-together among friends to celebrate her life. No Catholic funeral mass. We were not even allowed to go to the cemetery with her. She was laid to eternal rest ALONE. This was my COVID low point. It made me reflect on all of those COVID people who passed away ALONE without family or loved ones. How sad. How lonely. How inhumane.

When I returned to work, it was still COVID. Slowly I got back into my routine at work. Little by little, the numbers started to slow down and even reduce. By the summer, we were starting to see patients other than COVID returning to our ED.



**Elaine Accorsini, PA**

We were all getting vaccinated, at least those who were not afraid that the “new” vaccine would cause harm. (I tell those that refuse to get vaccinated that “I haven’t grown a tail yet.”)

Through it all, I must say that I was GRATEFUL that I was working at GH during this pandemic. I always felt that the hospital had our backs. They provided us with PPE when other hospitals were lacking. They gave us scrubs so we wouldn’t have to wear them home and clean them. They kept us informed with DAILY updates. Chris listened to suggestions and put them into motion when he could. I hope the end of this pandemic is soon. It was not my first – I lived through the horror of the AIDS epidemic – but I hope to God that it is my/our last.

# Just a Matter of Hours

John Beaujour, Technician



**John Beaujour, Technician**

In early March 2020, we all knew the virus was going to make its way to our ED once it started spreading in New York. Greenwich Hospital, located on the New York border, serves a big population of New York residents. We knew it was just a matter of hours before we would get our first patient. One night while working in the ED, I walked past a room and the patient asked me to assist her to the bathroom. I was

happy to help. A few hours later, that patient was confirmed to be our first COVID-19 patient! I was called to the main nursing station and told to go home. The same was being said to other colleagues. The ride home was the longest and most stressful of my life. I have two boys and my mother at home. My mind was going in a circle about what to do. I just got exposed to the virus and we knew little to nothing about it at that time. I cried on my way home. What do I tell my family? What am I to do? Where do I go? How lucky am I to be one of the very first staff members to be exposed to the virus? All these questions were surfing in my head. I went straight to the basement and isolated myself when I got home. That night I arranged an Uber ride to get my sons to school the next morning. It was an eventful night full of emotions that I will never forget.



**Michael Borrero, RN**

## One False Move, That's All It Would Take

Michael Borrero, RN

As I sat waiting to administer monoclonal antibodies to my next COVID patient, I thought about a recent question posed to me: What was my biggest fear during the COVID-19 pandemic? The answer was dying, having witnessed so many intubations, hearing so many stories of loved ones dying alone in the hospital, and not having the best lungs in the world due to a lifelong struggle with restrictive airway disease. Contracting COVID and dying was most definitely on the top of my list. One false move, one slip up, that's all it would take. There were so many times I was exhausted during a shift, so many call bells answered, so many trips in and out of patients' rooms taking blood, giving medications, answering questions, rounding on patients, giving more medications, taking more blood, and so on. "Come on Mick, stay focused!" Coworkers often commented on my wearing the P100 respirators. I was an early adopter. I simply wanted to give myself the best chance of surviving. Wear a head covering, gown up, put on respirator, lower face shield, don gloves, walk into room, and pray I don't catch COVID.

# Every Minute in Life Matters Jennifer Burns, RN



**Jennifer Burns, RN**

My takeaway from the last year as an ED nurse: The camaraderie in the ED during the height of COVID was unparalleled to anything I have ever experienced as a nurse, both in the ED and as a floor nurse. The nurses, doctors, techs, ancillary staff, etc. all communicated in a way that made care as safe and efficient as possible. Some providers

would swab patients for COVID, or take a set of vitals while in the room, to save the nurse/tech another exposure! Some went for X-rays and CT scans. If someone was gowned up, he or she would try to help with whatever possible to avoid someone else having to enter the room an extra time. That thoughtfulness and teamwork meant so much. Although there was a strong possibility of running out of disposable COVID gear (masks, shields, gowns, etc.), we never did. I felt I was protected as best as possible. This made me feel more comfortable coming to work and going home to my family. Most importantly, everything didn't always run smoothly, but we always worked as a team to care for our patients.

One day I was working in Fast Track, when a mom came in requesting that her toddler be tested for COVID. She and her husband had tested positive. Mom had mild symptoms, whereas Dad was fighting for his life in the ICU. They were in their mid-30s. I think at that time, I was still in a state of shock going through the motions. When the child was discharged, I remember someone asking if the woman could go see her husband because he might not make it another day. The woman (who didn't have her own car) had to call someone to pick up their COVID-positive baby so she could go see her husband before he was transferred to Yale. I saw him being transferred to Yale. From what I heard, he passed away. I was so thankful we arranged a last visit with her husband. I remember feeling so sad and angry for their loss. I was angry at anyone who didn't believe this was "real." It reminded me that every minute in life matters and can be taken away in a heartbeat.

# The Real Deal Michael Canter, MD



**Michael Canter, MD**

Don or doff?  
Which one means take it off?  
Don't touch this, don't touch that,  
Better Lysol everywhere you sat.  
Who found wipes, where's the paper towels?  
Can't find the TP for when you move your bowels?  
So many people so sick,  
So much hypoxia so quick.  
Send them home; come back when your pulse ox drops,  
Hospital is all COVID, even surgery stops.  
Strip outside the house and fumigate your clothes –  
How bad will tomorrow be...nobody knows?  
Mind racing before bed, did I contract it tonight?  
Wake up for another shift, N95 best be tight.  
Let's roll up our sleeves and take the vaccine,  
Hopefully God and science can get us out of this horrible scene.

We've trained our whole careers for pandemics that never happened – Ebola, smallpox, SARS and MERS. We never questioned taking care of patients with hepatitis, HIV or any other infectious pathogens. But for the first time ever, this was not a drill, this was the real deal. Every patient we saw – no matter what their complaint – for all those months, had one thing in common: They were all positive for coronavirus.

After intubating my first patient, I didn't sleep very well that night, wondering when I was going to get sick! Never had we seen something actually stress the entire healthcare system that we were a part of. The generosity of the community, the fear of the community – these are some things we will never forget.

# Quarantine Countdown Trista Cerlich, RTR

In my 28 years of working at Greenwich Hospital, March of 2020 was the first time I had ever experienced anxiety over everything in my life, but most importantly, about coming into work. I distinctly remember the internal emotional pull of wanting to perform my job vs. wanting to be safe for my family. I remember seeing my coworkers gowned up and only being able to see their eyes, which held so much emotion. I saw fear, confusion, exhaustion, and I saw eyes that I knew reflected my own. I am a healthcare worker, but I am also a mom, a wife, a daughter and a sister. I found myself worrying about literally everyone around me. My oldest son was set to graduate from nursing school and had already secured a job at Yale in the MSICU. How can I protect my child who now wants to protect and serve others during a global pandemic? My husband and I are both fortunate in that both of our parents are still living. We tried our best to keep them safe, doing all of their shopping and errands for them. At times, all four of them felt that we were imprisoning them. They could not fathom what we were telling them – that yes, Costco had zero toilet paper. I began to take pictures at Costco and grocery stores to show them that meat, milk, fruit and yes, toilet paper, did not exist! I then found that I had contracted and become sick with COVID. I isolated in the spare bedroom and even made myself a Candy Land-inspired chart to document when I could emerge free! Although this has been an emotionally tolling experience, I am so very proud to have emerged from it a better mom, wife, daughter, sister, and most importantly, healthcare provider. Quarantine Countdown! Five down and nine to go!



**Candy Land-inspired Quarantine Countdown**

# I Am Lucky

Robert Chang, MD



Robert Chang, MD

Looking back over this past year and a half, I consider myself lucky. Lucky to have dodged the bullets shot out from the double barrel of this nefarious, tricky, indiscriminate and mercurial virus. Lucky to have my family members avoid the shrapnel and collateral damage that took out friends and colleagues in its deadly wake. Lucky to count on one hand the number of difficult

resuscitations, intubations and codes that filled me with trepidation wondering if the PPE will withstand the assault; counting the hours of every day thereafter wondering if that snuffle or sore throat will metamorphose into full-blown COVID. Lucky that my training helped me develop the fortitude and mental stamina to face my challenges to do my job as best as I could. Lucky that when I close my eyes I am not haunted by the visage of ashen faces, dotted with perspiration, the unforgettable look from pleading eyes begging for solace, as each breath taken may be their last. Last, but certainly not least, lucky that I have some of the best damn nurses and techs who I can truly call my colleagues – their selflessness in times of unimaginable stress, donning and doffing PPE with each patient encounter, risking their lives each time I write an order (sometimes making the regrettable mistake of entering multiple orders in piecemeal fashion and thus subjecting them to repeated exposure). I am left speechless and in awe for their amazingness that goes beyond “just doing my job.” I am lucky to have them as my heroes.

# Support from God, Meditation and Coworkers

Rich Cohen, Security

During the COVID pandemic, one of my biggest fears was catching the virus and getting sick. I was also concerned about my family's health. Throughout the pandemic, not going to work never crossed my mind. Driving to work, my concerns were anticipating what to expect next, and the unknown. Watching how we functioned as a team and how we worked together were memorable. God, meditation and my coworkers provided great support during the pandemic. Getting sick was always on my mind. I was diagnosed with COVID in April 2021. During that time, I was extremely scared about not knowing what to expect.



Rich Cohen, Security

The human spirit is capable of overcoming  
even the darkest times.



## Do Heroes Get Scared Too? Ann Marie Cook, RN

I remember the evening that life in the Emergency Department changed forever. Word quickly spread as staff members were notified they had been exposed to COVID and were being placed on quarantine. I remember feeling scared for them and for myself. I remember thinking, “What if I bring this home to my family...my babies?” What then? How would I care for them if I become ill? This was a daily struggle for me. Then people started calling us heroes. I thought, why are they doing that? I don’t feel like a hero. Do heroes get scared too?

Uncertainty was the most prevalent and definitely the worst part of COVID. “We just don’t know” was a common refrain. As providers, we are expected to know, but with COVID we were the students *and* the experts – a walking contradiction. Day by day, listening and learning. Crying over those we lost, the enormity of the situation and fear of what was to come. We all developed our own rituals – how we dressed, how we decontaminated, how we coped with what we saw. It was our safety net. It still is.

One day, some of the floor nurses started getting sick and coming to the ED. I think I took care of three or four of them that day. I remember feeling as if I were doomed. It’s coming for me for sure. Every sniffle, sore throat...it’s definitely my turn. But it wasn’t. I never got it. Vaccination seems like the slide into home plate. SAFE! I am thankful for this ED team. I am thankful for the brilliant minds working to end this pandemic. I am thankful to be here to tell the tale. I am thankful.



**Ann Marie Cook, RN**

# The Year of the Nurse Marie Dalton, RNC

As I reflect back on the pandemic, certain memories arise.

- A dedicated, steadfast team worked hard and tirelessly in the setting of the perilous pandemic.
- As a post-discharge call-back nurse in the Emergency Department, there was a need for me to work seven days a week from early March 2020 until a much-appreciated day off on Memorial Day 2020. Mary Fitzpatrick-Brown, RN, worked consistently seven days a week in tandem with me at that time. The ED patient follow-up needs were great, as patients sought much-needed information and emotional support.
- The COVID test results in the early days of the pandemic often took 10 to 14 days and patients were fraught with fear; frequent phone call communication was warranted.
- The patients' follow-up needs remain bountiful and are responded to by a three-person call-back team, including me and per diem call-back nurses Mary Fitzpatrick-Brown and Evelyn Franco.



Marie Dalton, RNC

# An Easter Like No Other

Christopher Davison, MD



**Christopher Davison, MD**

I did not want to get COVID. I have had pneumonia twice in my life as an adult. My lungs are my Achilles heel.

## **April 1, 2020**

I returned from work and was sitting on my couch. I suddenly felt exhausted and took my temperature. Sh-t! 100.6. A fever. I immediately went upstairs and quarantined myself from my wife and three kids. The next morning I got tested for COVID and the test came

back negative. I figured it was some other virus and stopped quarantining. For the next three nights, I had high fevers and woke each morning soaked from my night sweats.

I called my doctor and suggested being tested again for COVID, and having blood work and a chest X-ray done because if it wasn't COVID, we needed to figure out why I was so sick. Again, my COVID test result was negative. My blood work was unremarkable. That night my official chest X-ray report stated I had "bilateral infiltrates" – this I knew was the hallmark of COVID. Damn it!

There was no point in quarantining from my family now. I had stopped quarantining three days earlier after my negative test. My wife and kids had already been exposed. I was prescribed hydroxychloroquine and azithromycin. I knew hydroxychloroquine could cause life-threatening cardiac issues. At times, this fact concerned me more than

having COVID. I also knew some patients did well, but then became extremely ill on days seven through nine. I counted down the days, praying I would get through this time frame. I showed my wife the "special filing cabinet" that held all of our important documents in case I ended up being hospitalized and dying.

## **March 19, 2021**

I had not seen my parents in 16 months because of COVID. I didn't want to be the son who infected his parents. They live outside Boston. Dad is 79 and Mom is 76. They took all of the necessary safety precautions to avoid contracting COVID, but now they were fully immunized and planned a weekend visit! A few days before their visit, my mother called to say she was having some "indigestion and mild abdominal discomfort." She is perfectly healthy and has been healthy her entire life. I told her not to worry about the visit; we will see them for Easter.

## **March 30, 2021**

My mother let me know she was still having some vague abdominal discomfort. I suggested she go to the local Emergency Department to be evaluated and get a CT scan.

## **March 31, 2021**

The PA from the Emergency Department in Boston called me. "You are an ED doctor, right? Then I'll cut to the chase... your mother has metastatic pancreatic cancer." How could this be? My mom was the healthiest person in my family. She was never a pound overweight and was the one to tell me to stop drinking diet soda, that it was bad for me. I immediately hung up the phone and drove to Boston. That Easter weekend was like no other. COVID stole a year and a half from me and my family, in the final years of my mother's life.

# It Was as if He Were Drowning

Servando De Los Angeles, MD

My biggest fear was getting COVID, being on a respirator, and dying. Also a big fear was possibly bringing it to my family and getting them sick. I remember my first COVID case was in room 6. Before I walked in, I thought, "This is it. I might get COVID and get sick, but I have to do it." Throughout the pandemic, my colleagues helped me with my gown, my head cap, my face mask and my goggles. They would help me gown up and made sure I was adequately protected. As I would go to see patients, they would stop me and tighten my gown and make sure my face mask was on properly. I am thankful for my colleagues because we were all there to help each other.

I also remember intubating a sick COVID patient. He was so sick and short of breath that he could not complete a sentence. It was as if he were drowning. We asked him if he wanted to call anyone before we intubated him, and he asked me to call his wife. I dialed his wife's phone number with my cell phone and I remember him saying, "Honey, this is it. This may be the last time you're going to speak with me." We were all teary-eyed but had to proceed with the intubation. As I left the room, I felt sad and hoped he would survive. I changed my scrubs, washed my face with soap and water, and wiped my face and hands with alcohol. I was afraid that I might have inhaled the COVID virus strain he had. The camaraderie of the ED staff and the need for a job to support my family kept me going. When I got home, I would remove everything I wore in the hospital and would take a bath. With time, I got used to it.

Every day it was like going to war against this deadly virus. We risked our health and our lives. Any one of us could have gotten COVID. Some of us got sick and I would think, "Are they going to get short of breath and end up on a respirator?" Some of them went home and one got admitted on oxygen.



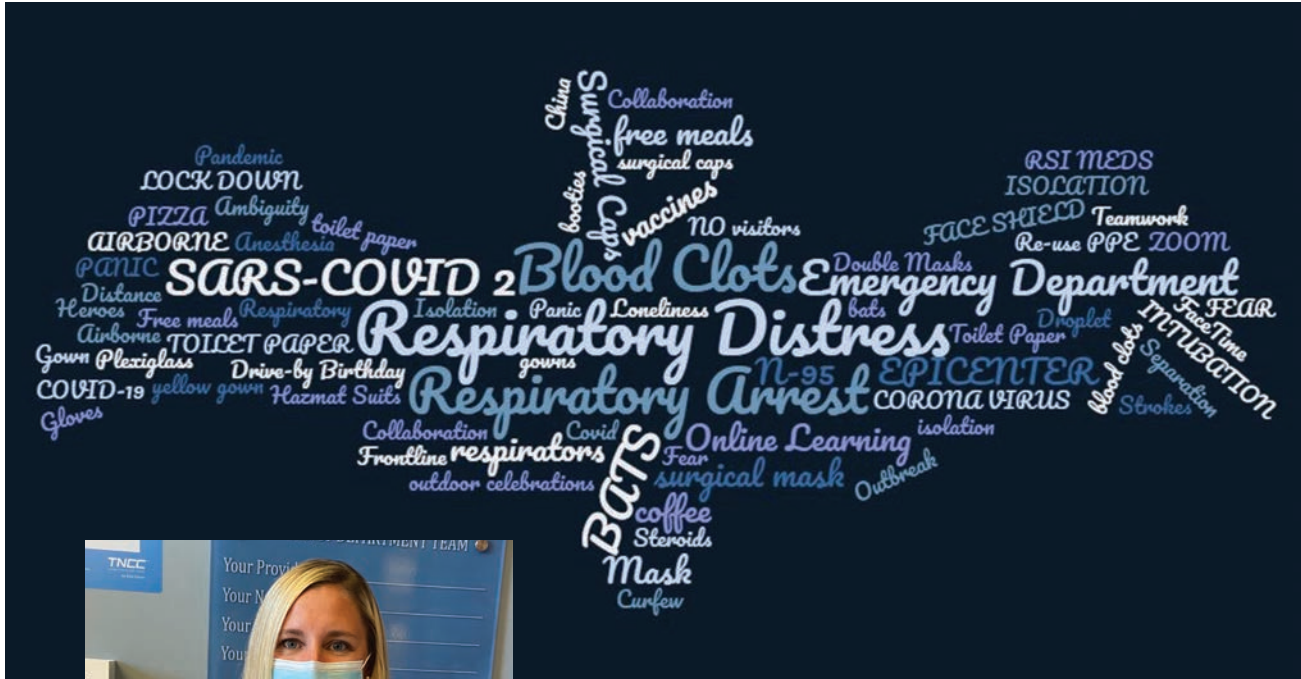
**Servando De Los Angeles, MD**

At that time, there was no treatment. We were all going through the same danger and hardship. All of us were risking our health, and sometimes I would think how lucky all the other professions were that they did not have to risk their health or life. My family and neighbors felt that we possibly had COVID and stayed away from us, but I understood why. My wife and I spent all of our holidays alone because we were also afraid to possibly transmit the virus to our loved ones. I could not visit my family or loved ones. Even when initially vaccinated, I was still unable to see my children due to the uncertainty of the efficacy of the vaccine.

This moment in time is unforgettable to me, and my contributions during this pandemic are ones that will stay with me for the rest of my life.

# Respiratory Distress

Lauren DiCairano, RN



Lauren DiCairano, RN

# The Cloud Became Purple

Jean Marie Junior Dorismond, Environmental Services

Spring became winter  
While the sky hid the sun  
All seemed dark and cloudy  
From the roads to our rooms  
Quarantine was required!  
The street was out of the daily crowd.

All became virtual,  
Yet our human body couldn't escape the suffering  
The sorrow, the loss and the heartbreak were painful  
We just couldn't forget any moment!  
Nothing could close our doors  
Nor change our love and passion – we stood up!

There was no special name  
To describe healthcare workers  
But all of you know it!  
Coronavirus, the COVID-19 is the killer  
In fact, we all gather around for one purpose  
To defeat the fears and tears.

Masks became the trend  
As smiles were cast in shadows  
When social distancing  
Transformed our normalcy  
Shaking hands and hugging became rare  
But we never forgot to look out for each other.

Heroes,  
Essential workers  
Frontline workers  
All of them with one purpose  
To prevent and to cure  
We are just a chain of solidarity.

When our soul was desperate  
Our hopeless spirit in the wave of uncertainty of COVID-19  
Love, compassion become our ultimate sense of living  
In fighting against different variants  
Despite all, we have learned from that solidarity  
And it's on us to crush COVID to the end!

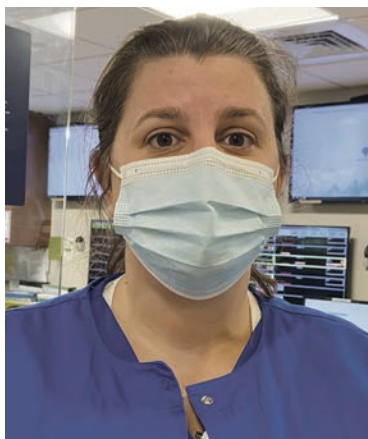


**Jean Marie Junior Dorismond,  
Environmental Services**

*Dedicated to all the healthcare workers, especially to my wife, Valerie Lauture Dorismond, CNA, in ICU/Telemetry, who had a four-month-old newborn. She stood up and did not want to abandon her job.*

# COVID Was Here and It Was Terrifying

Christina Cannone Epstein, RN



**Christina Cannone Epstein, RN**

Last March, I came to work excited because it was my first day to train in triage. I had nervous anticipation, as I did not know what challenges lay ahead. Would there be a child with an allergic reaction? Would a patient present with an active MI? I did not expect the beginning of the wave of something none of us were

prepared for. While training in triage, several patients in a row presented with chest pain, fevers and a cough. Patients were feeling short of breath. They looked exhausted and scared. One young man had just come off a plane from Germany. Another mother and daughter had recently returned from the state of Washington. We knew COVID was in other parts of the country, but watching patient after patient appearing in front of me, it became real. COVID was here, and it was terrifying. I left that day knowing we were in trouble. On the drive home, I cried, knowing that life was going to change.

# Frontier Fear: A Nurse's Poem

Maria Galizi, RN

Is this the day I get the Rona?  
Is this the day I get the big "C"?  
Was I wearing enough PPE?  
What's it going to take to save me?  
When I'm pounding on her chest to get  
her heart to beat again,  
Will the virus get me too?  
I have to admit some days I feel invincible  
and other days...not so much.  
I don't want to lose my human touch.  
So I pray to the Universe and to my Earth  
mother...to be with me,  
To walk with me.

I did dream of a wolf with big red eyes.  
I thought it would rip my throat out.  
But it just walked past me – it took what it wanted  
and went back into the woods.  
So I go again tomorrow dressed in mask and gloves.  
Watching for the wolf with the red eyes...  
To take what it wants and be done.

*I wrote this in April 2020 at the height of the coronavirus when everything was so uncertain. I started writing poetry to make myself feel better.*

# A Mini Garden in a Dark Time

Luciana Gizzo, Medical Scribe

One day when I was working in the ED, a local florist donated bouquets of flowers to everyone, and we all went to the main lobby to select one. All the bouquets were unique and bright, so when we returned to the ED and put them at our desks, the entire nurses' station looked like a mini garden. I appreciated all the kind donations we received during that time – but those flowers provided a moment of vibrancy in an otherwise dark time.



Luciana Gizzo, Medical Scribe

# Looking Out For Each Other

Gladys Gonzalez, Access Operations



Gladys Gonzalez, Access Operations

My biggest fear was bringing COVID home to my husband, Edwin, who is a cancer survivor and doing well. The entire family took precautions, such as taking off shoes at the door, washing hands, and constantly cleaning doorknobs, fixtures and surfaces. I'm grateful I work in a place where we were taken good care of, including having enough PPE, being able to work remotely, and looking out for and helping each other. Thank you all for everything you did to take care of everyone, including patients and each other. And thank you to all who donated food during this hard time.





# You Are all Heroes to Me Izabela Horzempa, Technician

As a new college graduate, I was excited to begin my job in the Emergency Department in January 2020. In addition to my goal of helping patients, another motive of mine was to specifically work at Greenwich Hospital due to the excellent care that patients, often like me and my parents, receive when treated in the ED. I did not think that I would be, in fact, helping patients during a pandemic. However, I am very glad I was able to make such an impact at the start of my career in health care.

At the beginning of the pandemic, I was worried I would infect my parents, as I had moved back with them after college. At that point, the staff at the hospital did not know what exactly the coronavirus was, and it was scary to think that I was indirectly putting my parents on the front lines along with me. To help with our worries, my coworkers and I kept a positive attitude by enjoying good meals or by practicing various TikTok dances during our breaks.

One of my friends entered the ED in a raffle for a trip to Hawaii. Out of all the entries, we won free coffee and deluxe candies, which we enjoyed among ourselves and our families. Along with wonderful donations, I was spoiled at home too. My family and friends from college and high school sent chocolate-covered strawberries, teddy bears, balloons, etc. to keep my spirits up during this mentally and physically exhausting time. In addition, my neighbors put signs in my neighborhood thanking me for my “service.” It was very special to feel appreciated. It helped me get up in the morning to go to work. I will always remember the amount of love I received.

The moment I felt most loved and appreciated was at 8 pm every day. I would step outside to my neighbors banging their pots and pans, kids cheering and clapping, dogs barking,



**Izabela Horzempa, Technician**

teenagers whistling, and cars beeping. They were applauding for us: the healthcare heroes. From those who could not applaud within my vicinity, I received videos and voice memos, cheering me on. Gestures like these helped us get through the difficulties of the pandemic.

I am so thankful for my fellow technicians, nurses, physician assistants, doctors and all of the workers at Greenwich Hospital. I will always remember to carry the strength and perseverance you all displayed during the pandemic as I venture out into the world of medicine. You are all heroes to me!

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# Pregnant During a Pandemic Amanda Jagodzinski, RN

In January of 2020, my husband and I received a big surprise: We were expecting our third child. When the shock wore off, we were super excited and thrilled to be expanding our family. We felt this was a blessing. Our boys, 5 and 7 years old, were also thrilled. It seemed as though 2020 was going to be an extraordinary year for our family. Little did I know what was coming.

By March 2020, I was four months pregnant. I had not been feeling great, but as a working mom you learn to suck it up and continue doing what you do day to day. I remember sitting at the park at my boys' school on the afternoon of March 12. They were running around the playground with friends and I was chatting with the other parents. One mom mentioned that she heard schools were going to shut down on Monday due to the COVID-19 pandemic, which had made its way to the tristate area. I thought to myself, "This can't be happening!" I tried several times that night and weekend to reassure myself that it wasn't going to be as bad as they were saying, as bad as the headlines were making it out to be. So many things went through my head that night; over and over, I had to stop myself and my mind from thinking the most extreme thoughts.

Sunday night rolled around, and we received an announcement from the school district stating that school would not meet in-person on Monday and all students needed to pick up their supplies. At this point, no parent or student was allowed in the building. Explaining to your children that what they have always known as school was no longer going

to be is indescribable. I knew they were disappointed, and as much as I wanted to make them aware of the seriousness of the situation, I didn't want to alarm them.

On Monday, I arranged for my boys to stay with my dad and headed to work. This was the day they announced masks would be mandatory. All the nurses and doctors on duty that morning gathered at the nurses' station at 7 am for an "emergency safety huddle." The vibe was quiet, and even with the masks, you could see worry in everyone's eyes. We reviewed the protocols and procedures for that time, which changed many times over the next few hours. It was a revolving door; each hour we didn't know what was going to happen and what it was going to bring. By 9 am we received a call from EMS that we were receiving a patient in respiratory distress. We set up room 7, which was our negative pressure room, and gowned up. When the patient arrived, I knew this was the start of the pandemic.

Over the next few weeks and months, things evolved very rapidly. The ED was seeing a decrease in census, but mostly all of our patients were COVID-positive and having difficulty breathing. With four pregnant nurses in the ED, we had another added level of fear. This virus was killing people at a rapid rate; and if they weren't dying, they were ill, very ill. My worst fear was contracting the virus and placing my unborn daughter in jeopardy. Or contracting the virus and passing it along to my children or any of my family members. I was fortunate that while I was working in the ED, my colleagues did all they could to keep me safe and out of harm's way.



**Amanda Jagodzinski, RN, center**

They made sure I didn't go into any rooms with sick patients. I was allowed to help outside the room and from the nurses' station. It made a difficult time feel less intense. I was at work, helping and doing my part to assist, but at the same time I was able to protect myself and my unborn child. Living through a pandemic was truly life-changing. Coming to work was not easy, but in an odd way, I felt a sense of security. I knew my colleagues had my back and were looking out for me at all times. I am truly blessed and thankful for my work family. I am fortunate to work with the most caring, compassionate group of individuals.

## Here Comes the Sun

### Steven Johnson, Information Technology Services



**Steven Johnson, Information Technology Services**

All I can recall is that when COVID hit, it started out slow but picked up speed very quickly, forcing everyone to readjust their processes in the hospital. Rooms were reconfigured, doors were replaced, departments swapped floors, increased MHB devices were deployed, and Zoom between patients and family members became the norm for a while to say goodbye to loved ones. It was a very stressful, depressing, sad time. Everyone did their part in making sure the hospital was safe, clean and functioning on all four cylinders around the clock, from Environmental Services all the way to upper management. Then came the day that brought a little hope and light to all this – the day we heard, “Here Comes the Sun” every time a patient was discharged. The song signified that someone had beat COVID and was going back to their family. The song signified that all our efforts had contributed to someone being able to see the Sun another day.

# Defeating the Enemy

Mensud Kurjakovic, MD



**Mensud Kurjakovic, MD**

Over the course of the past year, a few of my close family members – sister and brother-in-law – were diagnosed with COVID-19 and required treatment and hospitalization. Since they lived overseas, I felt helpless and uneasy. With regard to my experience at work doing psychiatric consultations throughout the hospital, I saw COVID and non-COVID patients

in the ED and medical/surgical floors, including the ICU. I did not feel any panic, anxiety or frustration, and I did not take a single day off. Although my director informed me that I could interview patients via telephone or iPad, I was not comfortable doing that. Through this time, I would put my mask and gown on to see all my patients face-to-face. I never felt in danger, and I had no fear and no doubt we would defeat this enemy. COVID-19 was my second epidemic experience; the first was the 1972 smallpox outbreak in the former Yugoslavia when I was 17. At that time, I was attending military school in Belgrade. That was the last major outbreak of smallpox in Europe. The spreading of the infection was contained by quarantine and mass vaccination. I am so glad we are containing this epidemic, and I am looking forward to a return to normalcy. At the same time, I am not comfortable with people calling health workers “heroes.” We are not heroes. We are just doing our work, and that is what we are supposed to do.

# Then It Hit

John P. Magnan, MD

I remember being flippant about an email I received in late 2019 about a respiratory syndrome in China stemming from a province I had never heard of. Then I received another work email from the head of Infectious Diseases that solidified it on my radar. Family members asked what I thought about the new virus. “Probably gonna be like a bad flu,” I said. Then it hit.

Early on, my friend in Seattle (another ED doctor) called me about his colleague who was on a vent and ECMO from this “new flu.” This doctor was usually an emotional rock, but was now shaken. I took heed and tried to learn as much as I could about this new virus. Unfortunately, there was not much information out there.

Then news from Italy poured in. I became very concerned. But the care in remote parts of northern Italy couldn’t be advanced, I told myself. I read about young Chinese doctors who succumbed to this new disease. Advice poured out of China. Intubate early. Don’t use steroids, wipe down all surfaces with bleach. Don’t treat with Motrin; hydroxychloroquine works. “Life is going to change dramatically” was the word from the CDC. The WHO kept quiet. The U.S. government said schools would have to close for two weeks. What?! How will the kids learn during those two weeks? Pictures of healthcare workers with Tyvek “bunny” suits filled the news. Abrasions on their faces from the lifesaving (soon to be scarce) N95s were burned into my memory. I became frightened.

Then it hit our ED. There were a few cases initially that weren’t very sick. Scattered positive patients for a few days. The containment zone of New Rochelle was just a few miles away, and we all knew we were heading toward the devastation we saw in other countries.



**John P. Magnan, MD**

I left the ED one night after having one or two “coronavirus” patients. Like a bomb that had just exploded, I returned the next morning to an ED in full isolation mode, chock full of respiratory patients. As I entered that morning, every patient room I passed had a biohazard/respiratory

isolation sign on the door. The ED was flooded with people carrying a deadly disease that we had no clue how to contain.

In trying to recall what fear and despair I must have felt, I only remember an overwhelming call to action. As a department, we devised new ways of patient evaluation that were hopefully safer for the healthcare team. We learned new methods to reuse and repurpose PPE. It was all becoming scarce and there was fear of having to let patients suffocate to death for lack of resources. There were colleagues and hospital staff who began to have symptoms of the disease. Initially there was no testing. Pleading with the state to approve a test on someone not directly connected to Wuhan became a daily burden.

People soon became VERY sick. The charge nurse ran to me one day and said, “Please come see the guy in room 3. He’s satting 55 percent.” This was incredible! Who could be walking and talking with their oxygen at half capacity? There he was, sitting in bed – a middle-aged Asian male, pale gray. “He just felt ‘unwell,’” the triage nurse told me. “Not really short of breath,” he said. WHAT?! How could this be? I’m writing this one year later, and we still don’t know.

Blood clots, cytokine storm, blood types, obesity, race, socioeconomic status? We don’t know. This disease took what we knew as solid truths about human physiology and made us question a lot of it.

We learned that many recommendations coming from other countries were not working for us. We began using high flow nasal cannula and rotating patients on their stomachs to improve oxygenation. We found that holding off on intubating may improve outcome (if we could just get through days seven to ten of illness). In those patients who were too sick to breathe for themselves, we performed intubations under cumbersome transparent boxes with the help of video monitors. HEPA filters were attached to the endotracheal tubes, anything to help minimize the aerosols of the virus.

Those early months were trying. I remember heading into another shift, walking through the parking lot and seeing other employees sitting in their cars crying. Were they leaving their shift or forcing themselves to walk in and work another shift? I couldn’t stop and ask.

We also had to shift gears at home. I adopted a new “decontamination process” – stripping down out of my scrubs, essentially naked on the porch. Clorox wipes became my best friend. I wore a mask around my kids for days after each intubation I performed. I slept in a different room. I wiped down every door handle, light switch, cabinet I may have touched. I didn’t want to be responsible for bringing this disease home. (I won’t begin to touch upon the homeschooling, days of quarantine, and social isolation, because mostly every one of us experienced that!)

Now that a year has passed and vaccines have become more available, there is a sense of general improvement. Not normalcy. Not yet.

I’m not sure that will ever return.

## By Everyone, I Mean Me! Tania Mariani, MD

My first critical COVID patient was on the morning of March 7, 2020. I was seated at my computer and read the chief complaint of “36 y/o female with shortness of breath.” I looked at the vital signs and saw that the pulse oximeter was documented at 39 percent. I thought, “That’s odd...clearly a typographical error. I will ask the tech about the vital signs and take a look at the patient.” I walked to room 11 and looked through the window in the door and saw a woman who looked ashen. She was tachypneic and using accessory muscles to help her breathe. My eyes immediately moved to the monitor, and the pulse oximeter was reading 50 percent. Again, I thought to myself, “That can’t be. There must be something wrong with the monitor.” Despite changing the pulse oximeter, her O2 saturation persistently read 50 percent while on a non-rebreather. Her breathing was labored, and she was working hard to breathe. I knew what needed to happen next.

We began to prepare for intubation. Glonni brought over the glide scope, which I rarely, if ever, used in the past. I began putting on my PPE. First, my N95, which I tried to press so tight onto my face that it would leave an outline on my skin for several hours. Next, Dr. Santucci was standing to my right, helping me put on a surgical gown. Glonni handed me a plastic face shield. I placed it over my head and began to pull the side tabs so that it would be securely adhered to my face. My adrenaline was going strong because as I pulled the tabs, the face shield ripped. At that point, I shouted, “Everyone, just calm down!” Dr. Santucci, Glonni and others all stared at me



**Tania Mariani, MD**

with blank faces, not knowing how to respond. So I then clarified, “By everyone, I mean me!” After my little outburst, we went right back to work. Glonni got me a new shield, the nurses had the intubation meds drawn up and we were ready to go. I remember staring at the patient through the glass window and taking a few deep breaths getting ready to enter the room. Taking one last breath to steady myself, we entered the room to intubate a 36-year-old woman who would remain on the ventilator for weeks.

# Each Other

Tracy Martin, Radiology

That one day that changed our lives forever

It took our smiles

But we always had each other.

Every day more challenging than the next

It took our hope

But we always had each other.

Fear of the unknown as each day passed

It took our trust

But we always had each other.

Endless days turned into endless months

It took our clarity

But we always had each other.

The light in the days started to shine

It never took our faith

Because we had each other.

Each day beginning to heal our hearts and minds

It never took our courage

Because we had each other.

The days are so much happier now

I see your beautiful smile

We will always have each other.



Tracy Martin, Radiology

# I Could Feel the Love

Kerry McCabe, RN

I was out the first month of COVID due to an illness.

I remember most nights the other nurses would call after their shift to vent. We would sometimes be on the phone for an hour. The stories, the fear, the concern for each other and their families was overwhelming. My heart was broken for them. What struck me most was the amazing support from the community and staff. It was truly a team effort all around. When I returned to work, I could feel the love and concern among everyone. It was truly heartwarming. Not that I want to ever do it again, though!



Kerry McCabe, RN



# Nothing Ever Prepares You for a Pandemic

Andre McCray, Materials Management



**Andre McCray, Materials Management**

“Be careful.” These are the two words that come to mind when thinking of a year that changed our lives forever.

“I love you.” The three words that are shattered into the soul of any and all healthcare workers. What we thought initially was going to be a passing phase turned into the most life-changing event that we could never have thought.

“What is it that you need?” A phrase that on any other occasion would seem like a nice gesture. But those words again hold more weight and meaning now more than ever.

The word “breathe” by definition means to take in and to exhale. But it took on a role in our lives, providing a sense of mental clarity and release in a world in which we could no

longer handle what was happening right in front of our eyes. And with that word, we knew nothing would be normal again.

My job as an Emergency Department transporter was to do all the things that would come along in the job description, but nothing ever prepares you for a pandemic.

I no longer followed the role of my job description. I went to work every day intent on being there for every Emergency Department personnel.

I won't lie. The shifts were long, compelling and heartbreaking. But I wouldn't trade them and trade whom I was in the trenches with – my fellow coworkers and definitely my fellow transporters. This group of guys stood shoulder to shoulder, not knowing what was going on. But if there was a task at hand, we leaned on each other to get it done.

I'm sure there were moments when we all wanted to walk off the job, and some did. But during every moment that seemed dark, there was an outstretched hand as if to say, “You are not in this by yourself.” Even from the moment when our department saw our very own coworkers get sick and unable to return to work, all the guys said “The job has to be done.”

So from working some weeks and some months six days a week to even seven, there was no complaint. It was just, “Hey, let's do this.” I saw a full waiting room every day for four months straight. We did everything, from bringing people you didn't know to their rooms, and some to our downstairs holding area so the mortician could bring them to their final resting place.



**A parade of first responders salute hospital frontline workers.**

There were times when it was hard to even maneuver through the hallways filled with code carts, numerous IV poles and a waiting respirator when bringing someone upstairs. I told my supervisor that I had never seen the hallways look so grim and dark. There were days when all you could manage was the strength to finish your shift, then carry yourself to your car where you just felt broken from what had occurred that day. Then after that moment, you had to make sure you were together enough to make it home and put on a face for family to be there for them.

But I don't take the bad days and forever remember them. I take the good days, the good moments, the good communication and the respect that we all developed for each other. If there was a gown we needed to tie before we entered a room, there was a coworker. If there was something to be handed to a person, we were waiting beside the door. If there was a mask that a nurse or a doctor needed, we were there to make it happen. There was a moment when some said, "I can't take it." I remember the nurses who were pregnant and bore the weight to be a great nurse.

I remember my transporter brothers bringing in water and saying, "Hey, go on your break."

My fellow nurse, Hannah, said, "Andre, keep swimming, keep going, we got you, we got this. Just remember *Finding Nemo*. We can't wait for the light to shine on this particular hospital." We had that light – it was each other. It was the laughter if a gown became undone. It was coffee being delivered. It was Glonni's pictures on our very own bags where we kept our PPE. It was the laughter about my makeshift fanny bag to carry my goggles. It was a night when the Greenwich Police Department and Fire Department and EMS gave all the great workers a parade of light and sound that made you feel you were making a difference. It was a light that the community of restaurants brought in every food imaginable because in our world we relied on each other and relied on food to carry us to our next shift. It was the light of every traveling nurse and every tech and every Environmental Service employee, every CT scan tech, every X-ray tech and everyone in higher management who said, "Hey, you are doing great and whatever you need, I'm here." It was the moments when someone would say, "Be careful. Are you okay? How are you doing?"

We were scared. We were nervous. We were unsure. We were drained. But we took advantage of every moment because we were not sure of tomorrow. We thought we were choosing a job; but no, this job chose us. We are not the same. We are careful. We are love. We are the breath. There is no real return to normalcy for these healthcare workers. We are stronger. We are wiser. We are family. We are Greenwich Emergency.

Every minute in life counts.

# Just Oxygen and Prayers Bonnie McGuire, MD

The sickest patient I have ever seen in my career had COVID. I knew he was in trouble when I saw him tripodding on the stretcher, his skin the same color as the navy blue shirt he was wearing. How a person can walk into triage with an oxygen saturation of 40 percent is still beyond me! People became walking anaerobes. I saw this patient during the beginning of our understanding of COVID. At the time, the general feeling was to delay intubation because people were dying on the vents, so we did 100 percent oxygen and self-proning. I even remember trying to teach the guy how to use an incentive spirometer while on his belly. He actually did well like that; got him up to 92 percent or so. But he would quickly desaturate with the tiniest exertion. I wanted BiPap, high flow oxygen...anything else besides the vent to stabilize this guy. But none of that was available. For a moment, I felt as if we had taken a step back in time: no ability to support the sick, no vent, no BiPap, no high flow... just oxygen and prayers. I felt helpless. Upon transfer to the ICU, I remember telling the resident to do everything possible to avoid intubating the patient. "If you intubate him, he will code." Fifteen minutes later I heard, "Code Blue, ICU," announced overhead. They tried their best, but he died.

This was a young, healthy man with a young family. As I was leaving my shift, the waiting room had three people: two young women and a child. They looked like my patient's family; scared, uncertain, pacing. They had just dropped off their loved one at the hospital, and they would never see him again. COVID was difficult and tragic. But the isolation from family and loved ones was, in my opinion, by far the most heartbreaking.



**Bonnie McGuire, MD**

# The Dichotomies of the Pandemic

Stephanie Morency, RN

Most of my memories of the past year, plus dealing with COVID-19, have become a distant blur of vagaries, likely due to the brain's naturally protective reflex to suppress memories of traumatic or stress-inducing experiences. What does stand out vividly are the stark contrasts of pre- and post-COVID times, the various little dichotomies that came about due to the pandemic.

Instead of expecting a quiet night shift based on lower patient volumes, I could barely find a minute to sit down because each patient coming through our door was desperately ill and in need of stabilization right away. Dealing with this novel disease process that would have patients walk into triage able to maintain a relatively normal level of alertness even though their oxygen saturations dipped below 65 percent. Reconciling the opposing ideas of being called a "healthcare hero" with the overwhelming guilt I carried knowing I could potentially be bringing home this deadly virus to my family, since I was not in a position to make arrangements to quarantine alone. The feelings of immense pride in being a part of the fight against COVID, alongside the twinge of jealousy knowing so many of my friends and relatives were able to take refuge in the relative safety of working from home. The frustration I felt toward people who wouldn't "just stay home" to reduce COVID's seemingly unrelenting spread, balanced against the privileged position I held in having job security and uninterrupted income at a time when many were struggling to make ends meet.



The last year spent battling this pandemic has pulled my mind and heart in so many different directions and left an astonishing amount of destruction in its wake that I will, like many, be unpacking for years to come. Yet, one thing holds true through it all: I am genuinely blessed to be called to do such important, lifesaving work alongside some of the most selfless and incredible clinicians one could ever hope to meet.

# Spreading my Muggsy Magic

Marie “Muggsy” Muller, Respiratory Services

COVID-19 2020. Where do you start?

This infection was a rare test for healthcare professionals across the world and was truly uncharted territory.

Although these were some of the most trying times that I have ever been a part of in my 39-year career as a respiratory therapist, the Greenwich/YNHHS team responded in the most incredible and inspiring ways. Everyone stuck together as a cohesive and caring unit even though the conditions were unlike anything we had ever come across. The care, passion, and effort that everyone put forth was truly the most astonishing thing I’ve ever been a part of.

Our leader, Gabriel, and hospital leadership couldn’t have done a better job ensuring the teams were able to function at the highest capacity, especially when resources were nearly impossible to obtain.

It was truly an honor to be on the front lines with such an affectionate, devoted and compassionate team.

My personal experience was one of initial fear, having never dealt with a situation of this magnitude. However, I truly cherished being face-to-face with these special patients and having a direct impact on them and their families’ lives. Through all this, I was honored to spread my Muggsy magic.



Marie “Muggsy” Muller, Respiratory Services, second from right

# Privileged to Help COVID Patients

Elizabeth Mulligan, RN



Elizabeth Mulligan, RN

I decided to move out of my permanent home and into a temporary home with my fiancé in March of 2020. I feared exposing my two very young grandchildren to COVID. I also worried about potentially exposing my fiancé. To decrease the chance of exposing him, I would go to my basement and take my uniform off and wash it right away. I'd shower before touching anything or anyone. I did

feel I was not one of the lucky workers who had to stay home during the pandemic at one point. Thinking back, I felt privileged to have been in a position to help COVID patients as an ED nurse for so many long months.

One particular case made me so happy. A patient with COVID came to the ED and quickly decompensated. I made sure to FaceTime her relatives so they could share their love with her prior to being intubated, especially since intubated COVID patients did not fare well in many cases. I recently saw a photo of this patient, shown to me by one of her relatives. She is now in a rehabilitation facility, making very good progress. She had such a beautiful smile on her face, which in turn made me grateful for the amazing progress. COVID has definitely reshaped my view of life and death.

# Compassion and Grace

Danielle Neuberth, PA

Trying times for all

Fear aside, we worked as one

Compassion and grace.



Danielle Neuberth, PA

# COVID Eyes Timothy O'Keefe, RN

Working as the triage nurse at the beginning of the COVID pandemic was a roller-coaster ride, to say the least. I recall it starting with panic-stricken people coming to the window with flu-like symptoms who wanted to be tested, only we didn't have tests to administer in the beginning. At that point, the plan was to put the suspected COVID patients only in rooms 6 and 7 because they were the negative pressure rooms. As the weeks pressed on, this became impossible, and soon we were putting them wherever we had a spot.

I remember one day working in triage and seeing patients walk down the hall from the ED deck entrance to the triage window on the security camera, one after another, unrelenting. Once they were in triage, I would look at their vital signs in disbelief, thinking something must be wrong with our O2 probe, as young patients would be sitting and talking to me with a pulse ox reading in the 60s or 70s. We would whisk them off to a room so they could be on a non-rebreather mask immediately.

Absorbing the fear and anxiety of the patients who were sick, as well as reconciling my own fear of contracting COVID, was intense. Fortunately, our amazing ED team made things easier, and there was a feeling that we were all in this together; we were going to be okay.

One day in triage, I began to notice that all the suspected COVID patients had the same glassy, glazed-over, exhausted look to their eyes. So prevalent was this observation that I was certain I could tell they had COVID just by looking at their eyes. "COVID eyes," I would think to myself. And then the song "Hungry Eyes" by Eric Carmen came into my head, with the lyric replaced with COVID Eyes. This song played over and over in my head whenever I would see another



**Timothy O'Keefe, RN**

suspected COVID patient. It served as a distraction from the pain and suffering I was witnessing, as music always has a way of mitigating stress.

I suppose you could say it was gallows humor, something nurses are very familiar with. When faced with so much suffering, stress and anxiety, it's only natural that our minds would try anything to lift our spirits. So the song "COVID Eyes" became my personal anthem for the pandemic, not in a way that diminishes the pain, suffering and loss of our patients, but in a way of honoring that the human spirit is capable of overcoming even the darkest times.



# Intertwined with Other Countries

Langley Partridge, MD

I was working a shift sometime in mid-January of 2020. My patient was a middle-aged woman with fatigue and a fever and a hacking cough she just couldn't shake. She otherwise looked well – her X-ray and oxygen were normal, and her flu test was negative. I went into her room to deliver the results and the TV was showing images of the patients ill with COVID in Wuhan, China, with the announcer rattling off statistics about the magnitude of the outbreak in that city. My patient, her husband and I all gazed at the TV for a few minutes. She turned to me and said, "Do you think I have coronavirus?" Of course, she was wondering if she had contracted what we've come to call COVID-19. Naively I said to her, "Oh no, I don't think so. There hasn't been a case here in the U.S. yet." Within two months, the EDs of New York City, and ours in Greenwich, were overflowing with patients hypoxic, often dying of COVID. As the tide of COVID patients rose, I saw countless people with cough, fever, chest pain, and profound fatigue; and then countless people who were hypoxic, hypotensive and critically ill or nearing death. By April, it was apparent to me and too many of my colleagues that we had been caring for patients with COVID well before anyone knew what it was, and before anyone had in fact even acquired a mechanism to test for this new virus in the EDs.

When I think about that patient I saw in the Greenwich ED, I am often astounded by how insular our thinking was as medical providers and a nation regarding global health, especially as seen through the movement of infectious diseases. I truly believed in that moment that the novel COVID virus was only really an issue across the globe where it was first documented in China. We knew it was starting to affect people in Europe, but we behaved as though the flight the COVID was on hadn't yet landed, and that we were



Langley Partridge, MD

"safe," based on distance alone. If there is anything that this pandemic has taught me as a medical provider, it's how closely we are intertwined with other countries on this planet. It is saddening to know that it has taken a global pandemic to highlight this simple truth to me and many others. I can only hope that we take this lesson away with us as a nation, and moving forward, pay greater attention to the healthcare needs and events in other parts of the world.

I will never know if the patient I saw on that afternoon in January did in fact have COVID; odds are she didn't. However, I will always recall that moment as profoundly pivotal in my thinking as an Emergency Medicine physician regarding the global nature of our practice and the interconnectedness of people across the world.



# One Day at a Time

Sasha Peets, Technician



**Sasha Peets, Technician**

I remember coming back to work after being out for an injury. It was about a week into the ED completely changing everything to address COVID. I was extremely nervous to have to work with sick patients. Everything looked different; everyone was in lots of PPE, the hallways lined with carts and wipes. I had worked in this ED for seven years.

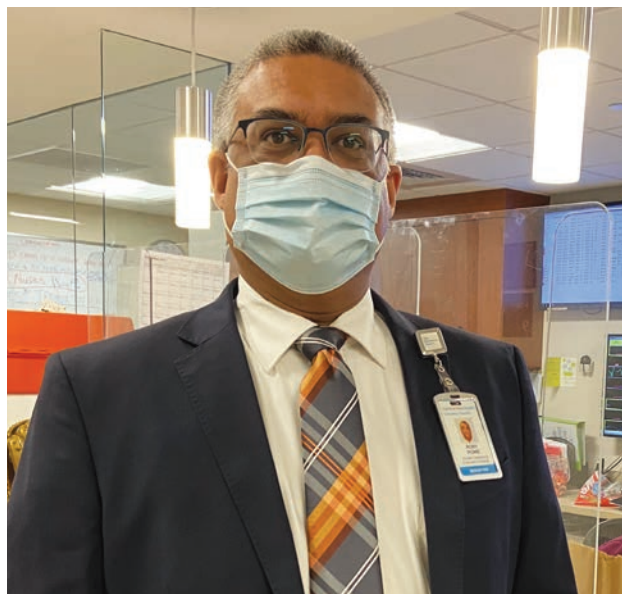
I knew it like the back of my hand. Walking in that day, I felt completely lost. I was worried about getting sick. I was terrified of getting my children and my husband sick. I was worried about my coworkers and all the patients that were so sick. It was all so overwhelming.

That first night back, I was stationed in the Behavioral Health Unit. I have to admit, I was happy to be there. But I still felt very anxious. I texted my husband and said, "I don't know how I'm going to be able to do this once I have to work on the floor." He told me, "Just take it one day at a time." I felt a little better, but was still feeling nervous. Then Glonni came in. He handed me a paper bag with the Lion King drawn on it. We discussed what PPE I needed to put in the bag and other changes that took place while I was out. I could have cried at that moment. That small thing of giving me a paper bag made me feel cared for and part of the team. After that, I knew the one thing that did not change was our bond and that COVID actually made it grow stronger. I knew that with my coworkers by my side, through happy and sad, through being stressed and tired, we still had each other and that COVID was not going to change that.

# No Answers

Rory Powe, Access Operations

My team and I were a bit scared, to be honest, about the uncertainty of the COVID virus: Who has it? How can we get it? How can we protect ourselves? These were some of the questions my staff was asking. I, myself, had no answer to give them. At least, nothing of comfort. Thankfully Dr. Davison, the ED medical director, came to our rescue. He said that from a safety standpoint, and in the interest of protecting everyone including the registrars, my team should register patients remotely using telephones. He had the triage nurses enter the patient's or their loved one's cell phone numbers into the triage notes so the registration team could still work from wherever they were located. It worked out beautifully!



**Rory Powe, Access Operations**

# Fear of the Unknown

Karen Rummel, DO

At the beginning of COVID, there was so much unknown and fear. How do you catch it? How do you treat it? Could I go to work and catch something that I might die from? Will I catch something that I can bring home to my family?

There were so many unknowns, and yet I would show up for work and all my colleagues would be there! It would amaze me on a daily basis that I would show up and everyone would be there. Staff wasn't calling out sick. Everyone showed up! We were, and are, an amazing, amazing team!

This was demonstrated daily throughout this pandemic. We all dealt with the fear of the unknown. One morning at work, we intubated four people in two hours. They just kept coming in. We went from one room to another intubating them.

As a department, we took measures early on to protect ourselves and our patients. We all wore face masks from day one. Facilities put windows into the doors of patient rooms so we could check on our patients without having to enter the room, decreasing exposure. We had telemedicine set up so we could communicate with patients remotely from the main nursing station to limit exposure and conserve PPE. We have such an amazing team. We got through this together, and I take pride in the amazing care that we were able to provide to our patients.

Most of the patients did not have any pre-existing medical problems. The patients I took care of were mostly 50-year-old men, and they were deathly ill. As a human being, it was horrible to see. This was accompanied by the helpless feeling of not having any real treatment to offer other than to put someone on a ventilator. This was emotionally challenging. Most of the patients were still talking when they came in.



**Karen Rummel, DO**

Family members were not allowed into the hospital. The patients were scared and alone.

Unfortunately, as an Emergency Medicine physician, we are used to seeing people die. But the sheer volume of what we were experiencing is hard to describe. The only thing that I could try to compare it to was the AIDS crisis.

At the end of your shift, you couldn't even go home and hug your loved ones because you didn't want to contaminate them. When I returned from work, I got undressed in the garage and then went directly to the shower. I slept in the office of my house. I ate my meals there too. I didn't mingle with my family initially. It was just too scary and unknown.

We supported each other. What an amazing team! We all came together.

## Up for the Challenge

Carlos Salguero,  
Environmental Services

On Christmas Eve 2019, I received a devastating “Christmas gift.” After 33 years of working at Doral Arrowwood, hotel management announced they were shutting down all operations. More than 200 employees were let go. Two weeks into 2020, I was officially jobless. Fast-forward to March 2020 on the precipice of what we now know as the global pandemic. I had applied to Greenwich Hospital in hopes of being hired. On March 30, 2020, I was hired and given the opportunity to work in the Emergency Department with Environmental Services. I was nervous and apprehensive. I had never worked in a hospital and I was unsure of how this pandemic would play out over the next year. However, I was up for the challenge. I know my wife and kids were especially worried about my health, but I had faith that we would all get through it.



Carlos Salguero, Environmental Services

## Twilight Zone

Dana Sanchez, RN

I don't think I worked in the ED for the entire pandemic. The hospital was pulling anyone with even a small amount of ICU experience upstairs as they tried to turn a 10-bed ICU into a 30-bed unit. I remember there was constant confusion, not enough monitoring equipment, and managers trying to organize it day to day. Each day had different protocols.



Dana Sanchez, RN

I work in the ICU at Yale New Haven Hospital on the weekends, so high acuity respiratory patients were right in my comfort zone. But at Greenwich Hospital, you could feel the stress of the other nurses working around you, and that feeling was contagious. You wouldn't dare transfer these patients for fear of infecting the whole I-95 corridor. But Greenwich Hospital was filling up quickly. Yale New Haven Hospital was very quiet because it was still March – business as usual in the ICU. The difference between the two hospitals was incredible. That made it feel like a twilight zone for me.

At GH, the COVID patients were pouring in from New York, but at Yale they weren't seeing critical COVID patients yet. I was used to wearing a mask but didn't want my Yale coworkers to clear away from me if they found out why I wore one, contrary to our usual practice, and that I had already been working with very sick patients. At Yale, I could hear staff talking and wondering if the virus was really “going to be a big deal.” I joined the conversation and mentioned what was happening to Greenwich in careful terms so as not to alarm anyone. I warned them to just wait about two weeks.

## Doing My Part

Matt Scalzo, Security

My biggest fear was being exposed and potentially spreading COVID to my wife, who was pregnant. I had no conflicts about going to work. I did have concerns about exposure, but it did not hinder me from doing my job. The entire year was memorable. COVID changed our way of living and the way we look at life. It brought people together, giving many a stronger sense of purpose and desire to help. I focused on doing my part to help. I also focused on my health by taking vitamins and working out. My skin was so dry from continuously washing my hands and using so much hand sanitizer. My faith and belief that everything would be okay with God in control sustained me. I was always worried about getting sick, but trusted that everything would be fine. I'd get home after work, take off my uniform in the garage and go straight to the shower. I did get COVID. When I found out, I feared that I had passed it on to my pregnant wife. Thank God, she never tested positive!

## Yep, He's Got It

William Shestak, DO



**William Shestak, DO**

I remember seeing a patient at the very beginning of the pandemic. This was likely before it was even referred to as a pandemic. The guy had just returned from skiing out West. He was young, in good shape and had no other medical issues. He was coughing like crazy in the room and very short of breath. I remember seeing his chest X-ray, and

Jessica, looking over my shoulder, saying “Yep, he’s got it.” I’m now thinking, “Crap, I went in there with no gown or eye protection and little more than a piece of tissue paper covering my face.” I went home thinking I’m going to get this thing too. That’s fine, but I can’t justify giving this to my wife and kids. This is not what I signed up for! His results were sent to the CDC, and I remember checking in daily with Chris until I got the all clear. His diagnosis was pneumonitis due to vaping, but I’m sure that he still had it, and that I dodged the bullet. For that, and so much more, I am truly grateful.

# COVID Hair

Brian Skelly, Technician

Two things I learned early on during the COVID pandemic were the compassion of my coworkers and never to cut my own hair again. I thought I had done a decent enough job of cutting my hair and made it about three hours into my shift without anyone saying a word about my new haircut – until Kelly Mayo saw me as she turned the corner. She looked like she had just witnessed a murder, and her jaw dropped as she let out an “Oh no!” That was when I knew everyone else was just being nice and not making me feel bad about what I had done. I appreciated Kelly’s honesty and wore a headband for the next month or so until it grew back. I want to thank everyone who saw my chopped-up hair and kept to themselves, and I want to thank Kelly for keeping it real and saving me future embarrassment.



**Brian Skelly, Technician**

# Thank You

Veronica Stanton, RN

Thank you to my family, loved ones, and friends – but most importantly, to my work family. It’s been one wild year, and I couldn’t have made it through without all of you. So, thank you.

I know I’m leaving a lot of memories and people out, but there’s too many to write – just know I’ll always be grateful. Here’s just a few of my memories.



**Veronica Stanton, RN**

Glenni: Thank you for turning our PPE bags into artwork and making it on the news! It definitely lifted spirits, and you have an amazing talent.

Maria Galizi: Thank you for teaching Zoom yoga. Dr. Zislis mastered the spider.

Nico: Thanks for becoming a new nurse and training during a pandemic. You showed dedication and continue to make me proud every day.

Michael: Thanks for being you. Your upbeat personality kept us all laughing. PS, you are horrible at playing ukulele.

Dr. Magnan: Thanks for teaching us the correct way to clean a chair. I always forgot about the wheels.

Elisabeth: Thanks for knowing when I needed a smile and showing me adorable pictures of your puppy. Also, sorry I threw a snowball at you.



Kelly Mayo: Thank you for being one of the unfortunate who learned how lethal a fish tank can be.

I thank everyone who faced a corner in our lounge as we changed out of our hospital clothes to go home “clean.” Also, thanks to the neighbors who didn’t judge those of us who changed on our porches.

Friends and community: Thanks for sending food and showing appreciation. I appreciate the extra COVID 10 pounds that I’m enjoying losing.

COVID: Thank you for making us the trendiest in fashion with PPE.

All joking aside, you are all an important part of my life. I saw you more than my own family this past year. We should look back and laugh at what we went through, but also be proud. Thank you! XOXO.

## In Memory



**Dominicos (Nico) Encarnación, RN**

In loving memory of Dominicos (Nico) Encarnación, a registered nurse who tragically passed away while working in our Emergency Department. Nico exemplified the highest ideal of nursing: compassionate care for his patients. He possessed hope and a healing touch. He lived what he practiced, showing the greatest respect and kindness to all those with whom he worked.



# Fate Led Me to Nursing Kelly Tokarz, RN



**Kelly Tokarz, RN**

She wears a bright yellow gown, her hair wrapped in a blue surgical cap, a respirator, goggles, shoe covers, two pairs of gloves, two eyes peeking through, and beads of sweat dripping from her forehead as she enters the room.

She's speaking, but her words are barely audible through all of her PPE and the loud buzzing of

the HEPA filter in the isolation room. She holds his hand while she checks the monitor and the IV tubing before administering his pain medication. She holds the phone to his ear while he speaks to his wife and family. Then just

before she leaves the room, she fluffs his pillow and leans in to say, "Don't worry, you're going to be alright. I'll be back in a bit to check on you. Good night."

If you portrayed the scenario above as the everyday life of a nurse, I might have chosen a different career path. However, I believe fate led me to nursing, and as one of the many chosen to be at the front lines of this pandemic. The nation has been grateful for healthcare providers placing their lives at risk to care for their loved ones. I have been honked at in the street when I am seen wearing my uniform and have received thank-you notes saying, "You are my hero!" Yet, ever since I was a young girl, I wanted to be a nurse; I never thought of it as heroism. How bittersweet to be considered both and how humorous to look back at myself as a nurse, pre-COVID, wearing one set of scrubs, one stethoscope, one penlight, one watch. How light and dry I must have felt! It was simple to walk into a patient's room and touch a patient's hand back then. I appreciate those moments now.

I look forward to our speedy return to pre-COVID times.

## WOW, this is REAL Nedsky Toledo, Access Operations

WOW, one year of COVID and I count my blessings that I'm still here today working hard with my Greenwich Hospital family and that my family at home remained safe through this pandemic. I got a first look at COVID when I was in Ecuador. I was shopping for some personal items and saw people going crazy, buying rubbing alcohol, gloves and



**Nedsky Toledo, Access Operations**

masks. I asked the lady in front of me in line what was going on. She said the news was reporting that a lady who came from Spain with a virus called COVID had infected her whole family, who were all hospitalized. The PANIC had started. I didn't think much of it and continued with my vacation.

It really hit me when I returned to work and saw all the precautions that were in place. I said to myself, "WOW, this is REAL." As the days and months passed, with my own eyes I saw that this COVID pandemic was going to impact the whole world. I saw firsthand how ED patients were being brought in with the virus; the precautions that staff, nurses, doctors and EMS workers were taking to keep themselves safe.

Looking at the news, people were dying all over the world, especially in Ecuador. There were bodies in the street; people dying in the hospital and in their homes. No one knew what to do with the bodies because no one would come to remove them. Like I said in the beginning, WOW, one year and still counting my blessings. I will continue to count my blessings until this virus is fully controlled and everything is back to normal.

During every moment that seemed dark,  
there was an outstretched hand as if to say,  
“You are not in this by yourself.”

# It Was What We Needed To Do

Edgar Villalva, Facilities

When COVID was first being talked about, we were all afraid of not knowing what it was, when it may arrive. But we had our job to do. Although I was not a nurse or in medicine, I worked in the ED and was around all the same people coming in and being treated for possible COVID. I remember nurses saying, “Don’t go in the room, they are positive” or “We need you to go in the room, so please put on your N95 mask, goggles and gown.”

Wearing an N95 mask all day was not easy while working on physical tasks and equipment that needed repair. But it was what we needed to do to protect others and ourselves. We were all challenged each day. Going home on the train, I would try to relax and decompress from the day. My day was not over. I worried about my family and bringing something home with me, to the point where I would change my clothes as soon as I got home.

My daughter had a baby during the pandemic, my granddaughter. We are so happy for her and her health. But I stayed away from her for a year because of COVID. I’m glad



**Edgar Villalva, Facilities**

to see things starting to get better and vaccinations being given out. I was able to hug my granddaughter for the first time in over a year in June 2021.

# Gates of Hell

Kim Van Camp, Radiology

As we were entering our second month of full-blown COVID lockdown and abject terror of the disease, I needed to work through a problem with Epic in the ED. I was teaming up with a colleague from another department and needed to demonstrate the issue in the ED. As we approached the doors to the ED, I noticed he fell back and was walking more slowly. I swiped my ID card and the doors opened to the ED.

I looked back to see where he was. He stood about 10 feet back from the door with an expression of panic. It was as if he were looking through the gates of hell, and he obviously had NO INTENTION of joining me in the inferno. I paused and looked at him for a moment and realized that his reaction wasn't that far from the truth at the time.



Kim Van Camp, Radiology

# #inthistgether

Barbara Weinschenk, PA

March 2020: There was talk about COVID. We had our PPE ready. And then the New Rochelle cluster happened, and it hit home that this is real. That reality hit with our first patient and how it was not the presentation we expected. The atmosphere became very tense and very stressful, and stayed that way for several weeks at least. There were mixed messages and daily changes in protocol. We should wear masks; we shouldn't. No N95s outside the patient rooms or in the nurses' station. We worried about who next to us may have it. Our workstations suddenly seemed very small and overcrowded. Donning and doffing – are we doing it right? Are we contaminating ourselves? We were told to save the N95s – we may have to reuse them. Most of us stripped at the door upon arriving home and headed straight to the shower, so afraid of bringing “it” home to infect our family. It was stressful.

And then non-COVID patients stopped coming. And the food started. The camaraderie began, and the phrase “We're in this together” was very true. Glonni made us bags for our PPE. We shared our own way of donning and doffing. Face shields were donated, and many ordered their own helmets. The Greenwich Hospital dress code went out the window and was replaced by hospital scrubs and fun, colorful surgical caps. We covered our skin in all ways possible. It was exhausting, even though we were seeing fewer patients. We learned to call patients to review history, limiting our exposure time. We relied on O2 sat for disposition, rather than working up every patient. We protected each other through the stress, the sadness, and the outright fear.

Although most would have preferred to stay home and quarantine, this was our job, and we all came to work. The only people on the road. This was all that was on the



**Barbara Weinschenk, PA**

news – rising case numbers and so many deaths. There were countless stories of infected healthcare workers, and we started to be called “heroes,” although I doubt any of us felt that way. The community felt helpless, but grateful knowing we were there to help. Food came in daily. At first pizza, pizza, pizza. Then some really good food. Individually wrapped food several times a day. We, as coworkers, shared this food along with stories of our families, patients, and how we were coping. We talked about coworkers who were infected and worried about their health, and quietly wondered if we would be next. And when many of us were pulled away from our families, we became a different type of family, experiencing this together. Situations beyond running out of toilet paper that no one else would understand. And we often talked about how and when this would ever end.

And although we came together, there was always an air of sadness. Young, healthy people were dying. No-visitor policies prevented loved ones from being by the patient’s side. Patients were scared and alone. Families said goodbye when the ambulance left their homes. We heard stories of other nearby NYC hospitals overflowing into the convention center, of trucks being made into morgues, of overwhelmed funeral homes, of families not being able to grieve together. There were many discussions over the possibility of running out of vents. We were told to choose carefully who was put on a vent. We were told we may run out of PPE. Our lockers filled with the N95s we wore that day in preparation to start reusing them. We did our best to carry on.

The hospital as a whole also came together. Very early on, an outside tent was erected for testing, limiting those coming into the ED. Beds and units were created throughout the hospital, and although we never used them, the Noble, Garden Cafe and ED parking lot were set up as makeshift units, to prevent holding in the ED. We started to see providers from all specialties start to work as hospitalists and intensivists as their practices were closed. Telemonitors were placed in the ED rooms for communication to patients without being in the room.

Things began to ease throughout the summer and a sense of relaxation and hope of reprieve was evident. When a new wave started, it was very hard to rev up again and give it our all. Was the public being careless? If they were tired of masks, what about us? But we did continue to care for one and all, never letting our guard down. And as we get vaccinated, the numbers continue to drop, and there is hope that all of us can get that vacation we have all been waiting to have.

Our COVID experience is so much different than the “quarantine” experience of the general public. We are forever changed. We stayed together, and together we persevered.

# We Were at War

Jan Zislis, MD

As I write this, it's hard to imagine what we went through in the past year. Today is actually the last possible day to submit our stories and experiences for this "yearbook." I've tried several times to sit down and write down my story, but I didn't know where to begin. There are so many thoughts, so many memories, and so many emotions that run through one's mind, that it's difficult to put it all down on paper. We were challenged with performing our duties as physicians while keeping ourselves and our families safe. We were fighting against an unknown entity, and we had absolutely no idea what we were up against. This virus didn't care about age or gender or race. Nobody was safe, and we had no idea why it affected some and not others. We were scared and took extreme measures to protect ourselves and our loved ones. The acronym, PPE, became vernacular as everyone scrambled to get N95 masks, gowns, face shields, gloves, etc. There were shortages of everything, and equipment had to be reused and recycled. People were making homemade hand sanitizer from rubbing alcohol and aloe gel, and homemade masks that we could wash and reuse.

We were at war and truly fighting for survival. The days became weeks, and weeks became months, and every day there was new information, new treatments, new protocols, new restrictions, and new guidelines. I was tired and COVID fatigue became a reality. I couldn't sleep at night anymore and the anxiety of our new COVID-restricted lives began to take its toll. Taking care of patients was challenging, as we sometimes could not distinguish between COVID and non-COVID symptoms. The hospital was stretched beyond its max capacity and the possibility of ventilator shortages became a reality. I recall having to make the decision to intubate a 90-year-old female in respiratory distress, knowing that there were limited ventilators left in the hospital – a ventilator that could have been used for a younger patient. How could I possibly make a decision not to intubate someone and allow



Jan Zislis, MD

them to die when it goes against everything I was trained to do as a physician? These were the decisions we were being asked to make.

Slowly but surely, things started to improve, and it feels that we are on our way to recovery. It was only through teamwork, love, compassion, tenacity, and bravery that we were able to get through it. Not just me, but all of us! I wouldn't want to be in the trenches with any other group of people!

# A Testament to Incredible People

Anonymous

I was about 33 weeks pregnant when the pandemic hit Greenwich. Early on, we were just wearing paper-thin masks. The hospital's Infection Control team came down to watch us do and doff these masks. I remember being told that since I touched the outside of the mask while taking it off, I had now contaminated myself. I was terrified for myself, my husband, and my unborn son. We were hearing stories of women in NYC who were subjected to delivering by themselves, without their partners present, because of COVID restrictions. Furthermore, if mom had COVID, she would be separated from her newborn baby. Every moment in the ED was filled with fear that this would happen to us. Additionally, the effects of COVID on pregnant women and unborn children was unknown. I cried frequently, fearing that I could lose my baby. When I removed myself from my remaining shifts prior to maternity leave, I was embarrassed and ashamed. I felt as if I was abandoning my colleagues to fight this fight on their own. Instead, I was met with overwhelming support from my colleagues and administration, particularly from Dr. Karen Santucci. I felt so grateful. It was truly a testament to the incredible people I work with.

# The Best and Worst Experience

Anonymous

Working in the ED during the pandemic was the best and worst experience. I constantly worried over the health and well-being of everyone, specifically my family. Still, I was inspired by the staff who showed up to work every day, knowing the full extent of the dangers and difficulties that awaited them. I wanted to continue working to support them in whatever way I possibly could. The ED is special because it's comprised of a wonderful group of people who keep one another grounded. What has been so remarkable to me is everyone's ability to keep each other's spirits lifted. The people here try to keep one another smiling and laughing, and I cannot imagine a better group to have worked with throughout the pandemic.





# Modern-Day Superheroes Anonymous

I was living alone throughout the first three months of the pandemic. I did not see any family or close friends. It became very lonely most days. I would pick up extra shifts in the ED because it felt rewarding to work on the front lines of this pandemic, and it took away from the loneliness at home. I became close with a lot of individuals in the ED from working alongside them day in and day out. They became the

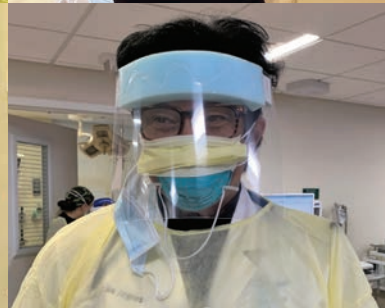
family and friends I was missing dearly through the first three months. So, I wanted to use this opportunity to thank all of you. Thank you for creating such a caring work environment and for keeping me company through some very difficult times. Most importantly, thank you for continuing to save lives every day. You all are modern-day superheroes!







your saying so many lives also my brother had a broken arm so then they went to the hospital but I got stitches on my chin so I went to a hospital to get stitches and it was Vermont too.  
thank you for saving are life.  
Thank you



Thank you for all your generosity & kindness! Your gifts have made such a huge impact on our daily well-being and brought smiles to our hearts!  
We love & appreciate you all!  
The Greenwich Hospital Emergency Department Team



