

On the Frontlines: “A Deserted Island of Death”

By [TuAnh Dam](#) on March 26, 2020

A look at what it's like for an emergency room doctor as she fights the battle against Covid-19

Coronavirus is spreading like wildfire, with more than 480,000 cases in the world and 37,000 cases in New York alone as of Thursday noon, according to the Governor Andrew Cuomo and the John Hopkins Coronavirus Resource Center. In New York, more than 5,000 people have been hospitalized and over 1,200 patients in the ICU. Battling on the frontlines of this pandemic, emergency room physicians, like Dr. Alyssa Nguyen-Phuc, are tirelessly treating and saving as many patients as possible. Nguyen-Phuc talked to New York City Lens about what it's like being an ER doctor in Brooklyn during this time. Dr. Nguyen-Phuc felt uncomfortable naming the hospital since she is not authorized to speak for the facility.

What was it like being in the emergency room before the pandemic started and what is it like now?

People in general go to the ER for anything. Because they stubbed their toe, because they want to get a pregnancy test, because they hit their head two weeks ago and they feel dizzy. Homelessness, psych problems, normal ER stuff that we deal with on a regular basis. All of it disappeared overnight when the first COVID patients started coming.

An ER is never quiet. But now all you can hear is coughing and beeping everywhere. All of the stretchers are full. Everyone is wearing a mask, including all the patients, all the doctors, all the nurses. It's really hard to do normal things that you do when you're working, like drink coffee. Now, the mood in the ER is just really somber.

Before, resuscitations in the ER was a really communal affair. There's a lot of people in the room, there's a lot of hands to go around. It feels like you're conducting an orchestra. You do this, do this, do this, and things happen. And when it's like, smooth, it's actually a really beautiful thing.

Resuscitating in the COVID era is none of those things. You have as few people in the room as you possibly can. Everyone is in fogged up goggles, trying to move things around.

It just feels like you are on a deserted island of death. Colleagues, who are really experienced and grizzled veterans, they are crying. I cry almost every day and you just shove it down because you have to go to work.

Can you talk about the first COVID-19 patient you treated?

The guy came in with kidney stones. It just so happened that when we got a CAT scan, which is an imaging of his abdomen to look for the kidney stones, it caught a little bit of the lungs which looked suspicious.

He was in the ER on Friday. He got called on Tuesday with the positive coronavirus swab. He was advised at that point to come back and he said 'I feel okay, I just have a fever. I want to stay at home.' And then by Thursday, his doctor called and said 'he is not doing well. He's having trouble breathing. He's coming back.'

I remember scrambling and running around because he was the first one. We're like, what room can we put him in? Who's going to be on the team that takes care of him, trying to coordinate everything so it was organized and so we didn't expose other people.

And then all of a sudden, he shows up. When animals are so scared that their eyes open so wide you can see the whites all the way around; he had that look on his face.

He had a mask on and he was breathing like 60 breaths a minute. It was like he was drowning and he couldn't get enough air. As we wheeled him into the room, he was panicking. He was gasping through this mask.

Me and one other doctor went in to take care of him and intubate him. And it was the scariest situation. My hands were shaking like a leaf, doing procedures that I do all the time and I was shaking so much that I almost like poked myself with a needle.

It was as organized as we could have made it and in retrospect, so disorganized, because we just didn't know – didn't know what we needed, didn't know how sick he was going to be, didn't have the systems in place to properly do what we were doing.

Hospitals and physicians have been preparing for coronavirus for weeks, but was it what you expected it to be when cases started coming in?

It's way worse. The volume of people who are coming in and the volume of people who are sick, it's a lot more than I imagined.

In my mind, I thought there're going to be people who are going to get really sick and the hospital is going to get overwhelmed. But the level of disruption, it's taken on our entire society is a lot more than I had imagined. When it was suddenly happening, and it was affecting every part of your life too, you're like 'Oh, this is overwhelming. It's like completely overwhelming.'

If it overwhelmed the entire health system in China and in Italy, it was going to do the same here.

Governor Cuomo says that the worst is coming. What does that future look like?

I imagine it all the time and it's really hard to not get consumed by it. Every day gets slightly more overwhelming. You have this pit of dread in your stomach like "Where's it going to be in a week? In two weeks? Even a day?"

In terms of how it looks; most hospitals in New York are, at this point, fairly close to or at the point of running out of ventilators and ICU space. My hospital has converted every other ICU to general COVID ICUs. And they're already all full. Now we've started opening up new ICUs, bringing ICU doctors from other places and opening a tent bed ICU here. Those are full too.

Everything is full and more people are coming in. Then, how do you decide who gets the care. It's really hard to imagine that; I've never had to make that choice before. There is going to have to be like some sort of ethics committee who looks at the broader picture and decides who has to come off of that [ventilator] so someone else can go on to it.

The future is so uncertain. The rules change every day, hospital policy changes every day.

What do you think about President Donald Trump and several politicians' idea to re-open the economy?

I think it's a terrible idea. If any of those people who want to open everything up again spent five minutes in the ER, they would not.

New Yorkers have a real sense of like, this is not good. And I think New York is going to stay on lockdown no matter what the rest of the country does.

What it's going to really affect is small rural communities that don't have the resources to fight this.

It's going to be the spring breaker who came back from Miami and goes back to small town Kansas, who then spreads it to his mom and dad, and grandparents, who then inadvertently spread it to their friends and then all of a sudden the local hospital is completely overwhelmed because they have like one doctor on overnight and you can't deal with this wave of illness when you're solo it is just completely overwhelming.

Do you think if the United States had taken this more seriously two months ago, things would be different?

For some reason, we were lulled into a false sense of security through February. We completely missed the boat and containment. If we had been more serious two weeks ago, I think we would have seen far fewer [cases]. The first case was reported on March 1 and it was a traveler who'd returned from Iran.

At that point, if New York had been like 'Okay, everyone, social distancing. This is happening, this is coming. Look at Italy. Look at Seattle. Look at all these places,' it would have made a really big difference to where we are now.

Instead, we waited and more cases popped up. Even the week after that weekend, the number of people that were out that spread this thing around is astronomical. Had you just re-wound that timeline back even 10 days, I think the number of cases would have slowed down.

You hear the story out of Italy. People are saying first it was just people on the news, and then it starts being people you know, and then it starts being your own family. I really hope that we can hold strong to help control the spread of this so that it doesn't end up being our own family members who get sick.