

Marcus Munoz

7/25/20

Ethics and Humanities Sub-I Seminar

Creative Reflection

Please, Wear a Mask

We were nearing the end of our shift on the hematology oncology inpatient unit and got the notification that we were receiving a transfer. The patient was a 60-year-old woman who had recently been diagnosed with Ewing sarcoma and they were found to have widely metastatic disease as well as bilateral pulmonary emboli. Although hemodynamically stable, the senior resident calling to transfer the patient seemed a bit rattled. He knew this person was sick and emphasized that our team should have a low threshold to transfer them to the MICU.

When she got to our floor she was accompanied by her husband. Something I greatly appreciated about my time on the hematology oncology floor before COVID times was getting to know the patient and their family. I learned getting to know a person deeply is crucial when trying to make complex medical decisions in the context of a cancer diagnosis. My senior resident and I introduced ourselves to the patient. Despite requiring eight liters of oxygen per minute, the patient was smiling and had a calming presence.

We started to talk about how she got to our hospital, meticulously going through her presentation of illness and reconfirming the story that the last team had relayed. Then we focused on getting to know Mrs. P. Our patient and her husband had been married for some time and had children and grandchildren waiting for them at home. Both of them had recently retired and had been enjoying spending their days taking care of grandchildren to allow for their parents to work from home. They were generous with their time and they lit up when talking about the rambunctious boys that had taken over their otherwise uneventful retirement life.

The primary oncologist for Mrs. P came to the room and delivered the news of her new diagnosis and what she should expect moving forward. The Ewing Sarcoma was in her bones, abdomen, lungs, and brain. Although the doctor noted that this disease can be curable in children, he let Mrs. P know that this was a serious and life-threatening diagnosis. Mrs. P was seemingly unshaken with this news. Perhaps the exhaustion, pains, and difficulty breathing over the past month had already been telling her this for some time. I could tell that Mr. P, on the other hand, was frightened by this information. The doctor continued to detail the chemotherapy and risks that came with treatment. Both of them agreed they wanted to proceed with therapy.

An attending once told me of a question to help reframe how sick a cancer patient in a given moment. Although morbid, I think it serves a strong purpose: "If your patient were to die in the next two weeks, would you be surprised?" I am not a doctor nor an oncologist, but Mrs. P's vitals and the tone of the wary senior residents made it clear that this patient was very sick. I

swallowed my no away and struggled to be present with the family and provide them with support.

The doctor left while my senior resident and I stayed in the room. It was approaching 5 PM and Mr. P was looking increasingly anxious. We were nervous for Mrs. P from a medical standpoint, but we had to deliver another piece of bad news. In order to reduce exposure to COVID and ensure the safety of both providers and those being cared for, visitor hours were limited from 1 to 5 PM. Mr. P knew this, but all of us recognized the gravity and unfairness of this limitation. Her husband asked with a tremolo in his voice, “you’ll call if anything happens?”

Cancer in the time of COVID is brutal. It steals away the fundamental supports that allow for our patients to go to battle with these diseases. Patient energy and positivity are preyed upon by metastases but rejuvenated by a partner’s hand.

A provider’s well practiced bedside manner is distanced by mask and shield. So too is the virus that would gravely endanger those of the hematology oncology floor.

This reflection is bleak, but I want it to be a reminder and motivation for those within and outside of the medical community to take this pandemic seriously. Our efforts might seem futile. But, by doing our part through social distancing, proper hand hygiene, and use of masks in and out of the hospital, maybe we will be able to lift these restrictions a day earlier.