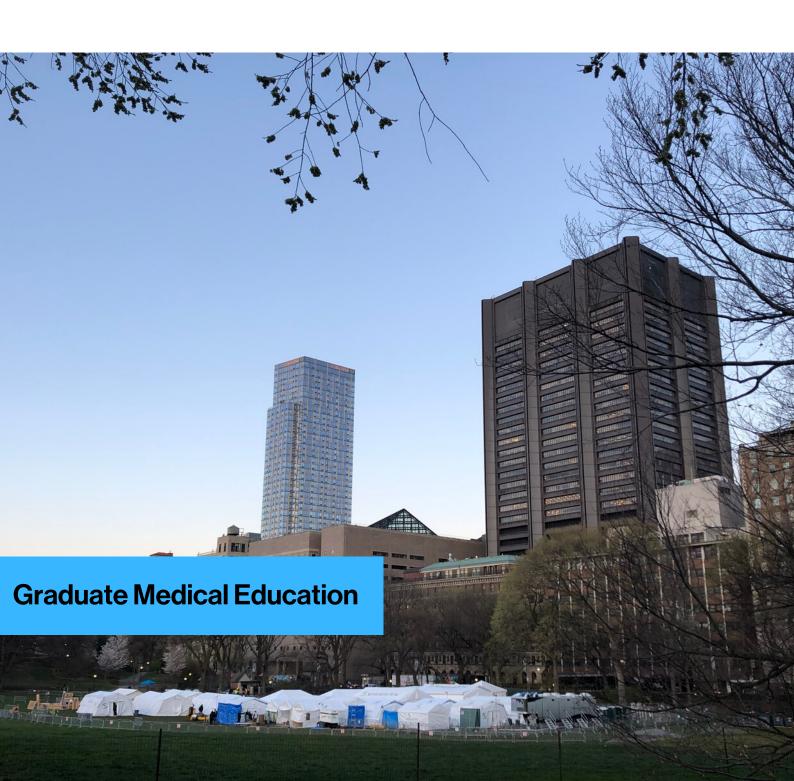


# **Resident & Fellow Appreciation Week**

## **COVID-19 NARRATIVE PROJECT**



# Teamwork Community Recognition Reflections

June 1-5, 2020 the Mount Sinai Health System is celebrating Resident & Fellow Appreciation Week in recognition of the extraordinary work and commitment of residents and fellows across training programs sponsored by the Icahn School of Medicine at Mount Sinai.

In planning for the week and in recognition of the unprecedented response to the COVID-19 pandemic, residents and fellows were invited to submit narratives, photos, and artwork that depict examples of colleagues going above and beyond, teamwork and community that was particularly inspirational, or general reflections. What follows in the pages to come are narratives and images that document the generosity of spirit, hard work, and bravery that was exemplified by the graduate medical education community during a challenging time of tremendous uncertainty and need.



## **Teamwork & Community**



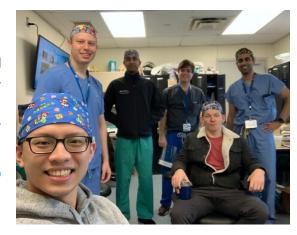
#### Sarah Kidwai, MD, PGY5, MSH Otolaryngology

The COVID-19 pandemic had the Department of Otolaryngology struck with a fog of ambiguity. We are a team that always acts as one, and find a way through tough times. When there isn't a way, we find one. We took the lead by managing a COVID positive floor at Mount Sinai West. Side by side, trainees and attendings acted as internal medicine residents, an unchartered territory. A particularly memorable experience was the profound effort by Dr. Mark Courey, a professor of Otolaryngology and Division Chief of Laryngology, PGY-2 David Lerner, and PGY-2 Rocco Fernandino. Instead of Dr. Courey guiding each resident through the art of laryngoscopy and microsurgery, the roles were now reversed. David and Rocco teaching Dr. Courey the tools of the trade – updating the list, ordering Tylenol, following up labs, and using MDCalc. I found these three individuals the heroes of our efforts at Mount Sinai, working as equals and helping each other master a new playing field.

#### Usmaan Basharat, MD, PGY1, MSH Otolaryngology

When the emergency department and ICUs at Elmhurst City Hospital were overloaded with COVID patients and the hospital was in need of ICU beds, a band of residents from the Mount Sinai otolaryngology department came together and volunteered to open an additional surge ICU to help manage the patient load. The names of the ENT residents are listed below:

Arvind Badhey Doug Worrall, Jaclyn Klimczak, Eli Kinberg, Caleb Fan, Andrey Filimov, Peter Filip, Noel Phan, Kevin Wong, Josh Zeiger, Benjamin Laitman, Christine Barron, Usmaan Basharat



#### Arvind Badhey, MD, PGY5, MSH Otolaryngology

At the beginning of April the Otolarynology service compiled a group of 12 volunteers to staff one of the SURGE/Overflow COVID ICUs at Elmhurst Medical Center. The majority of volunteers were composed of 'junior-level' residents PGY1-PGY3. In the span of a month these junior residents went above and beyond the call of duty to help patients, families, colleagues, and staff fight this crisis. It was both an honor and privilege to work with them and see them demonstrate clinical and emotional acumen far beyond their years of surgical training.

Attempting to assist our colleagues on the front lines was both a fearful and anxiety provoking experience – and I don't think any of us could have done it without each other. Here's to the junior residents of the 'ENT ICU', and to all the services still fighting on the front lines – you inspire us to be better and we're all in this together.



#### Amesh Isath, MBBS, PGY2, MSMW Internal Medicine

I wanted to give a shout out to the whole MICU crew. My co-residents Omar, Suraj and Scott who were excellent and always willing to help each other and whenever there was an active patient, there was always an extra hand A special shout out to the interns Raul, Marcus, Julia and Fatma who amazingly stepped up to the role of residents and took care of work without essentially needing any supervision. Deep and Natasha were our ICU fellows who despite the overwhelming busy schedule, took time for chalk talks and willing to help with any small tasks. And of course, our amazing attendings Dr. Fung, Dr. Narayanswami and Dr. Mohanraj from whom we learned a lot in the multifaceted approach to critical care.

#### Joshua Lampert, MD, PGY5, MSH Cardiovascular Disease-Investigator

The COVID pandemic has brought out the best in our community and may have lasting implications for societal functioning moving forward. During the peak of the pandemic, I had the privilege of working in two of our COVID ICUs with phenomenal teams. What has been the most striking, other than the selflessness and dedication of the nurses, NPs, PAs, BAs, and physicians on the team, is the team structure. For the first time, we have gathered across hospital geography and specialty to care for these patients not as consultants, but as members of the same, cohesive primary team. It is inspiring and rejuvenating to work with all of you.

#### **Anonymous**

My Ob/Gyn co-residents went above and beyond when I was out ill with COVID-19. Maureen French created a buddy system, and my COVID buddy Christine Roy-McMahon checked on me every day and made sure I had everything I needed. Multiple other residents also messaged me daily and offered to bring by food and groceries. Lilly Liu, Natalie Cohen, and Mitch Rosenberg all dropped off medicine, medical supplies and snacks for me while I was quarantined, and Natalie Alvarez even drove me to the hospital when I was no longer infectious but still too weak to walk. I felt so supported by the whole department while I was ill and am so grateful to the amazing team of OB/GYN residents, thank you all!





#### Garred Greenberg, MD, PGY1, MSH Internal Medicine

I'm very inspired by my amazing MICU team. Everyone banded together to help treat the sickest patients in the hospital - my internal med coresidents, critical care fellows and attendings, talented ICU nurses, respiratory therapists, and general surgery reinforcements all taking personal risk to help our patients, and teaching each other how to deal with complex situations. We looked out for each other, picked each other up when we were down, and built a positive energy that enabled us to work through difficult circumstances.

#### Carlos Mares MD, PGY4, MSH Medical Genetics

Despite being in a field that has nothing to do with viruses or infections, the Genetics/Metabolic service has also dealt with COVID patients. Unfortunately, some of our patients presumably died from COVID, like a 9 year-old boy with a rare metabolic condition, who passed away at his home surrounded by his family. We have also admitted metabolic patients who tested positive because they are at very high risk of becoming metabolically decompensated due to the infection. We have teamed up with Pediatrics and Medicine teams to manage them in conjunction. Our service, which includes doctors, nutritionists, NPs, and social worker, has been actively and closely monitoring the vast population we manage. I have been inspired by their teamwork and their commitment to always keep learning for our patients and their families. I feel very grateful to be part of this amazing team, especially in times of crisis and uncertainty.



### Sarah Alsamarai, MD, PGY4, MSH Infectious Disease

As a first year fellow in Infectious Diseases, I could have never imagined what my first year of fellowship held—and still holds—in store. The COVID-19 pandemic crept up slowly, and then quickly overtook nearly all of our clinical work. I will never forget the initial pages I received as the fellow at Elmhurst Hospital in March. The Sinai and Elmhurst residents across different specialties were brave, empathetic, innovative, and resilient in the face of indescribable uncertainty. Surgery and Medicine residents alike kept in close contact to check in with me, as the lone ID fellow at the time, to discuss patients, but notably also to say hi and see how I was doing. These same residents knew the medical details and social histories of each of their patients inside-out. They inspired me every day. I hope that the closeness and warmth between trainees at different levels of practice will endure when the pandemic becomes just a bitter memory. Attached is a picture of residents enjoying a delivery from The Migrant Kitchen, an organization that mobilized to feed healthcare workers during the pandemic. The other picture is of artwork by a local artist, thanking healthcare workers outside of Elmhurst Hospital.

## **Anonymous**

On 5/12/20, residents from internal medicine, psychiatry, and ob/gyn performed a dance outside of West during the 7pm cheer to celebrate our colleagues at Mount Sinai West and Morningside, and everyone on the frontline. Thank you to everyone who came to watch and support!

https://www.bollyshake.com/video/resident-physicians-bollywoodlatin-frontline-tribute-dance



On Mar 27, 2020, at 9:56 AM, Dunleavy, Katie <Katie.Dunleavy@mountsinai.org> wrote:

Dear Residents and Fellows,

It was lovely to hear from so many of you at the GME House Staff Town Hall last night. I'd like to thank Dr. Leitman, Dean Charney, and the house staff that took the time to submit and answer questions.

There's no doubt, these are scary and uncertain times. Yesterday, we surpassed China for the highest number of cases in the world, and with that a tidal wave of fear, for ourselves, our loved ones and our patients, has landed upon our shoulders. While none of us have ever seen anything like this, I know much of our success will depend on our attitude and our teamwork.

For many of us, medicine is a vocation and one that only a select group of people in this world are qualified and brave enough to practice in this pandemic. Our families, friends, and loved ones are worried about our well-being and that is a burden we must carry. There are new challenges we face every day taking care of patients with COVID-19 and I suspect we will all discover an inner strength we never knew existed, but that doesn't mean we don't need help. In fact, this means we need more support than ever before. House Staff Council and GME is here to help provide this support along with institutional services, department and program leadership. We must help each other.

I share with you lessons my mentors have taught me in times of uncertainty.

- Don't compare yourself to others, it doesn't matter who appears to be doing more, or less, just give your best and be proud of your
- Find small victories, and notice the people who contributed to them. It takes a team.
- Change is constant and breaks are essential in order to sustain your own momentum.
- Forgive yourselves and those above/below/around us who will
  make mistakes as we all learn how to make the best of an
  impossible scenario.
- Lastly, please hold me accountable to the same.

I'm proud to serve with you. Please email us anytime with any thoughts, questions or concerns.

Katie Dunleavy, HSC Secretary (Internal Medicine)



Dear Residents and Fellows,

I look back with you over these last few months and can hardly account for the time. The chaos of our days has lessened and with it we navigate a new landscape in medicine, though still treading lightly. In medical school, we had hundreds of classes on how to fight off death, and not very many on how to go on living. This is the phase we now face together with our colleagues, our patients, their families and our own families. We must go on living, though I know, because I feel it every day, that it is hard. All the optimism in the world cannot change this fact.

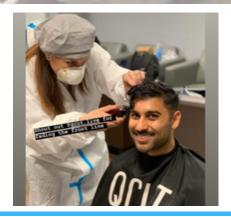
As scientists we are taught to rely on evidence, numbers, certainty, though after day one on the wards during intern year we realize that certainty is a spectrum. During the time of COVID, certainty seemed like an impossible dream, as unattainable as the definition of grief. In many ways, I now see grief all around me – in the eyes of my patients, my colleagues, my attendings, fellow New Yorkers and in the mirror. As someone who has experienced much personal loss in my early life, I don't fear grief, but see it as essential and on occasion, transformative. I mourn the loss of my dear patients, the overwhelming burden of this disease and havoc it has played on our hearts and our minds.

I am comforted by something a patient's husband said to me the other day about balancing grief with kindness, fear and discomfort with hope. We have all done our best, that is all that we could do. There are days where our best felt miraculous, and others where it felt hopeless, but the effort is what counts. While grief and disappointment abounded at times, it was overcome by the kindness, generosity and compassion I saw and felt from so many individuals. Knowing that we have the power to change how people feel, even when we cannot change the outcome of their disease, is the most impactful aspect our job. As Hippocrates said, "Cure sometimes, treat often, and comfort always."

Let us rebuild together, reaching out as we reflect on these last few months and show an abundance of kindness and good will to all.

Thank you kindly,

Katie Dunleavy, HSC Secretary (Internal Medicine)



"Many thanks to Michelle from QCut Live who agreed to help out ED staff by providing desperately needed haircuts during the shut down. Her positivity and generosity will not be forgotten."

## Recognition



#### **Anonymous**

Osama El Shamy is a third year nephrology fellow who has focused on home dialysis modalities. We quickly learned that Covid 19 did not spare the kidneys, and found that many patients had acute kidney injury and required dialysis. As we felt a strain on our ability to be able to keep up with the growing demand for dialysis, Osama helped develop an acute peritoneal dialysis program. This program offloaded constraints for hemodialysis. Additionally, he went above and beyond in helping transition this program to be as seamless as possible.

He stayed longer hours than expected, and prepared dialysate and machines to help offset some of the increased workload of our nurses. He made himself available to troubleshoot any challenges that arose to help patients and staff. He remained gracious, and professional throughout this time and his selfless attitude helped him emerge a leader within Mount Sinai.

### **Anonymous**

Il would like to recognize Sarah Alexandra Levy, a second year neurology resident at MSH. During the worst period of the covid pandemic many consultants were doing video visits and finding was to stay a safe distance from the ED, however Sarah always came to see the patient and gave them excellent care. Her careful clinical exam actually lead to a clinical save that ultimately may have preserved a patient's ability to walk. She went above and beyond to help the ED team when we were busy and worked along side us even when it felt dangerous to do so. Thank you Sarah, you are appreciated.

#### Anonymous

Michael Dolinger, a soon to be 3rd year Peds GI fellow, went above and beyond during the covid19 crisis not just for his patients, but for his colleagues, the health system and his family. Without hesitation, Mike stepped up to role of Chief Pediatric Fellow to organize support among the fellows in typically very separate divisions. He has advocated for patient discharges to minimize their exposures and assisted in them personally. Mike participated in a study with hospital leadership to map spatial design to help with hospital infection control, with a Go Pro in hand walking voluntarily through covid19 units. Mike has taken sacrifices himself, and would never complain, not even for one second. He has taken extra call and service time, all while separating for the last few months from his wife with chronic disease, and with no end in sight. Mike is a wonderful doctor and a great friend to us all and I will always appreciate his generosity, enthusiasm and humanism.



#### **Anonymous**

Pranai Tandon, PGY 5 Pulmonary and Critical Care Fellow MSH, is always willing to help his colleagues and the COVID pandemic was no exception. Even after grueling clinical days working with the most critically ill COVID patients, he would stay late to pull information from the EMR to help the department understand how to better serve the patients on ventilators throughout the hospital. There was no request he didn't answer, even though it meant he slept less. Days off were spent compiling and organizing information and somehow, he did it all with a smile on his face.

#### **Anonymous**

Dr. Jeffrey Bloom, Dr. Michelle Lee, and Dr. Mona Fayad are three preliminary internal medicine PGY-1s who helped organize over 1,000 donated meals to Mount Sinai Hospital. While taking care of some of the sickest patients in the intensive care unit and COVID inpatient units, they spent their free time working with the NYC community and fundraisers to keep local small food businesses running while also fueling frontline hospital workers, nurses, managerial, and janitorial staff in their hospital.



#### **Anonymous**

I want to share a story about my colleague and good friend Ciro Tramontano, a PGY-2 Anesthesia Resident. Dr. Tramontano was working in the ICU. He had a patient with COVID-19 who now had a trach and was unable to speak. When Dr. Tramontano went into the patients room, he could tell the patient was trying to say something but having difficulty. Ciro sat with him to try and figure out what was wrong. Eventually, Ciro figured it out. The patient mouthed the word "lonely". His patient felt alone and isolated. Understandable given the current situation. Ciro showed him his badge, so that the patient could see who was behind the

mask and explained that he was here with him- that he was not alone. However, Dr. Tramontano knew that he was no replacement for this man's family and friends. So he set up a call between the patient and his mother- and then spent the rest of the evening trying to locate one of his patients good friends for a video chat. He reached the patients mother, let them speak, and then with her help came up with a list of a few of his patients closest friends. He took the list into the room and the patient pointed to one of the names. Dr. Tramontano then set up a video call for the two of them. In all of the chaos, Dr. Tramontano gave his patient some light. Dr. Ciro Tramontano is an incredible physician, a true healer- and one that brings humanity back to the bedside.

#### Elana Siegel, MD, PGY3, MSH Pediatrics

I want to acknowledge all the fantastic cardiology fellows who deployed to the Neuro ICU on KCC9 and patiently helped confused pediatric residents adjust to adult medicine. Why all the amiodarone all the time? I especially want to shout out Dr. Mike Gavalas, who taught me to put in a central line on a 56 year old at 3am. He explained each detail of the kit, and even showed me how to screw on the doodad that measures CVP. I will likely never place a central line again and he will likely never teach a pediatrician again - but it was so kind, educational, and went above and beyond what I expected from my deployment. Shout out to Gennaro, Luke, Ben, Iman, Ed, Waqas and the many others.

#### Alexander Small, MD, PGY7, Urology-Advanced Minimally Invasive

I am writing to recognize my college and friend, Dr. Harry Anastos (Urology PGY-2), for his hard work during the COVID response. Harry went above and beyond the call of duty to help during the peak of the surge in early April. That week Harry was busy covering urology call on the night shift, but he reached out to me to volunteer his weekend days off to help me on the "Line Service" at Mount Sinai Beth Israel. Over two busy days together, we supported the amazing ICU teams by placing over 20 central lines, arterial lines and dialysis catheters. Harry subsequently recruited several more urology residents to help out with line placements over the next month. He and the rest of the urology team stepped out of their comfort zones, volunteered to help out and made a big difference.



#### Anonymous

David Lin, PGY 2 Internal Medicine MSH, like many of his internal medicine resident colleagues, went above and beyond to help in the MICU during the peak of the COVID pandemic. When the census in the MICU reached more than 20 patients, the team of residents, which normally covers a maximum of 14, acknowledged how much harder it was to care for the increased number of patients. David, who was not scheduled to work, volunteered to come in and help the team. He was eager to be at the bedside helping patients and always offering to assist the nurses while he was there. He led some of the most difficult family discussions with incredible compassion. He puts his entire heart into his work and that dedication was inspiring to our entire MICU team.

#### Natalie Cohen, MD, PGY1, MSH Obstetrics and Gynecology

Lilly Liu has always stood out as a chief, mentor, and friend. Throughout the weeks of COVID she not only maintained a level of thoughtfulness and attention to detail to her care of patients I admire and aspire to, but also led our team tirelessly and created a bond and strength between us that allowed us to keep going. Being on her Beluga pod is something I will always cherish. Thank you chief!



#### Marilee Kiernan, MD, PGY4, MSH Obstetrics and Gynecology

I would like to acknowledge Maureen French, one of our administrative chiefs and an overall incredible co-resident and person. Maureen, along with Andres Ramirez-Zamudio, has been instrumental in creating a COVID pod system for our program in order to best facilitate our department needs and keep our teams as safe and strong as possible during this challenging time. In a refreshingly non-COVID and more personal note, Maureen was there for me in an above and beyond way as a friend and as a doctor when I was having my baby on the Sinai labor floor right before this pandemic. Maureen came back to the hospital to help with my unscheduled C-section, which took place late on a Friday night when she was not on call. There is no one I trust more with my care than the people I trained with, and it was such a special moment that meant so much to me and my family. In addition to that, she reworked our residency schedule to accommodate my

maternity leave after advocating for me to have more time with the baby given the new change in ABOG leave policy, despite the fact that she was not able to benefit from these changes herself, given that she completed her own maternity leave prior to the change. She is truly a selfless and amazing leader, and our program is very lucky to have her.

#### Elizabeth Luebbert, DO, PGY1, MSMW Anesthesiology

Deep Patadia definitely stands out for me as someone who went above and beyond during this crisis. He always had the most positive attitude in the ICU despite staying well beyond his duty hours every single day. He was tireless in his efforts to help every single patient and to assist any resident in need of help. He stayed late to speak to families and to teach residents. He even made a youtube channel to teach residents vent settings during his free time. I am completely in awe of his work effort and his attitude. The amount of people he has helped during this crisis is too great to count. He has all my respect.

#### **Anonymous**

Aryeh Stock worked in the clinical chemistry lab during the pandemic Covid time. Dr. Stock is an excellent person to work with and amazing work has been performed by him and I would like to acknowledge his contributions to core lab chem during the tough times.

#### Anonymous

Abigail Belasen is a PGY-2 in the internal medicine program who was a true advocate for the entire program since the beginning of the crisis. She was outspoken and developed many changes to improve the treatment of COVID patients at MSH and Elmhurst. Her speeches have been inspiring and she has worked non stop for her patients. She organized and developed educational material for the program for the treatment of patients. Without her efforts and diligence we wouldn't have been as united.

#### **Anonymous**

I want to give a special shout-out to one of my co-residents, Abigail Belasen, PGY2 in Internal Medicine at MSH. Abby was one of the senior residents on Elmhurst stepdown at the beginning of the pandemic. She and her team faced impossible challenges as the early and sudden surge in patients triggered an overnight transformation of her team into a Covid-icu team without any warning or preparation. She witnessed more death and suffering in her first 48 hours on that service than should ever be allowed for any MD, yet she and her team created protocols for the other medicine teams (which are still in use), sounded the alarms early to get more backup and support, and stayed late every single day to make sure that her patients received the care they needed and that their families received daily updates. Even when she was out sick after this service, she continued to work from home to create more streamlined guides and protocols for all the Covid Medicine services for her fellow co-residents. She truly represented the best of us with her leadership and constant compassion and dedication to her patients and co-residents.



#### Anonymous

The events of the recent few months tested all of us for professionalism, resilience, commitment and a team spirit. I am proud to say that the Fellows of our Neonatal-Perinatal Program were truly exemplary. Some - like Malorie Mishkati immediately volunteered and were deployed at the peak of the COVID-19 nightmare. Malorie strongly felt that the time came, when her training in Internal Medicine augmented by the skills obtained in a neonatal intensive care were in high demand among the sickest patients regardless of age. Indeed, according to the feedback letters received, she was truly a godsend help.

#### Sheila Rustgi, MD, PGY6, MSH Gastroenterology

I just want to acknowledge my colleagues on the COVID wards, Dr. Ben Schindel (PGY2 pediatrics) and Dr. Natalie Moulton-Levy (attending dermatology). Both volunteered to take care of patients on the COVID wards at a time when the number of cases was rising and PPE, although available, was in short supply. They are selfless, cheerful, and dedicated to patient care. They actively sought to educate themselves on the care of adult covid patients even when it is outside their area of training. It was inspiring and made me want to be a better physician and person! I am so grateful to have been able to work with them.

#### **Anonymous**

Elizabeth Luebbert has been working in the COVID ICU for weeks. She gave up her time off asking to be put to work, and has worked tirelessly caring for critically ill patients. Despite long hours in PPE, she continued to demonstrate positivity towards her patients and colleagues, encouraging and uplifting those around her.

## **Artwork**

#### Huili Zhu, MD, PGY2, MSH Internal Medicine

"Not all superheroes wear capes, some wear masks and carry viruses on their backs" is dedicated to all the frontline providers that the public may not commonly think of. I want to dedicate this to the respiratory therapists, janitorial staff, dietitians and food deliverers, physical and occupational therapists, patient care assistants (PCAs), business associates (BAs), the 1:1 personnels, social workers, and more. The hospital is a giant entity that cannot function well if any of its vital parts are missing, especially during these unprecedented times.



## Camila Castellanos, MD, PGY1, MSH Family Medicine "Blue green therapy in the time of Covid."

#### **Anonymous**

Little was known as the world entered year 2020, in a few months, our lives would change forever; we would wake up to the knock of death at the shores of our city; everything shutting down for months. For those who live in the resident housing, their dawns are declared by ambulances. Never imagined, sounds of ambulances would be tireless, bringing in the message of death endlessly over weeks without a break. Unforeseen difficult times do not come with a big announcement. Like a sudden storm, it just sneaks in through the gaps and wipes off everything that comes in its path; such is the havoc of COVID-19. As we reach the half way mark of 2020, hopefully the grim reapers will take a break from collecting souls and we will move from darkness to the light.



#### Marium Siddiqui, MBBS, PGY3, EHC Internal Medicine

Nevin Varghese has always been a supportive friend, and a compassionate physician. He has immense patience and listens to people every time. He does the best in his capacity to help out his friends. Dawn has always gone above and beyond to help her colleagues, especially in the Covid-19 pandemic!

#### Mona Fayad, MD, PGY1, MSMW Internal Medicine

I would like to recognize Michelle Lee, a fellow intern and friend. Working with her on the COVID-19 team in March was such a pleasure. In the midst of uncertainty and ever changing climate, she exhibited tremendous compassion and empathy for her patients and team. She would go above and beyond for her patients and their families. She was timely when communicating with families. She was meticulous with their care, and she was patient during facetime calls between patients and their loved ones. She was her patients' #1's fan, and she offered calmness in times of fear. Thank you, Michelle, for supporting your patients and those around you.



#### **Anonymous**

Leadership during times of stress is not taught; it is innate. It reveals current leaders embracing their roles and enables future leaders to emerge. All of our Cardiology fellows deserve endless appreciation for their work in our CCU turned COVID ICU, never wavering from the challenges of noncardiac medicine. Special mention is called for two of our fellows, Ashish Correa and Syed Wagas Haider, who

so elegantly captured the strengths of our Department to inspire, uplift, and propel forward despite the darkness that surrounded. With each "Wrap-up of the Week" email, they detailed developments in COVID research, education, community perspectives, and hospital protocols, and created photo collages to praise our team members. Many of us waited for that weekend email, to find closure to a challenging week and reenergize us for another to come. Thank you Ashish and Waqas for your leadership, shining yourself by praising your colleagues' efforts.

#### Kam Ho, MBChB, PGY2, MSMW Internal Medicine

Dr. Jacqueline Sheehan, an Internal Medicine PGY-2, had shown tremendous dedication and compassion towards COVID patients over the last eight weeks when she was assigned to ICU at Mount Sinai Morningside. Having a keen interest in palliative care, she was able to display and utilize these skills at a time of need. Due to the pandemic, many families are not able to visit their loved ones, especially those in the ICU. Often, this leads to anxiety and dissatisfaction from family members. Dr. Sheehan took the initiative to organize video conferences with family members daily (with the hospital iPads) and led as a role model for her co-residents and intern. She has shown the importance of bedside manners and led many difficult family conversations at a time and at a hospital most needed.

#### Daryl Goldman, MBBS, PGY2, MSH Interventional Radiology Integrated

Ram Posham is a PGY3 Interventional Radiology resident at Mount Sinai. At the beginning of March he was redeployed to the COVID-19 ICU until the middle of May. Ram has been an incredible asset to the ICU team. He has helped with placing lines, managing patients, and communicating with patient families. He is truly inspirational and we appreciate all his hard work.

## Reflections



#### Justin Gauthier, MD, PGY5, MSSN Surgery

As I approached the end of my final year of training, I had envisioned this as a time to prepare for practice. Instead, as the chief surgery resident in the heart of this war, I have been on the frontlines, side-by-side my fellow residents, also enlisted to this army of physicians. Since the onset of this kidney-killing virus, our team has placed over 5 HD catheters per day. We have all become so efficient that, from the time of the page to CXR confirmation is never more than an hour. Also, during this month, I have personally placed more pigtails for

Apneumothorax than in my prior 5 years of surgical training combined. I have placed so many, that, using the infamous angle of Louis as a landmark, I could literally 'do it with my eyes closed.' Though effective, us residents have still witnessed the loss of over 300 lives.

#### Alex Yu, MD, PGY1, MSH Anesthesiology

As the humming of our collective preparation crescendoed in sync with the rise in our COVID census, it had all felt like a false dream. Perhaps it had been difficult for me to fully comprehend the size of the undertaking the hospital was about to endure. To this day I am not sure when the situation would have fully solidified in my mind if "the incident" hadn't happened. I had finished rounding early to make my way down to the cafeteria, to find them. But they were nowhere to be found. They, the ones who had helped me get through intern year. They, hard on the outside and soft on the inside just like me. Losing them felt like losing a part of me. This act of war became forever anchored in my memory as the turning point of the pandemic: the tater tots were gone.

#### Alexis Carrington, MD, PGY1, EHC Internal Medicine

During my first COVID night shift, I was in charge of overseeing 80 patients, most were critically ill, requiring oxygen. From my shift at 6pm to 6:30am, we had 15 codes. "Team 700" was announced at least every hour, signifying a code we had to respond to within 5 minutes, on top of overseeing our 80 sick patients, most of whom are acutely sick and can crash at any time. Only 3 of the 15 people survived, some as young as 30. At the end of our shift we gathered in our lounge to process what happened, still in disbelief. While we were doing that, the sun was starting to rise. Then a staff member said "look out the window". Outside the window, in big block green letters were the words "THANK YOU" pinned on the park fence across the street. This brought tears to my eyes. Seeing those simple words of gratitude made me realize people coming together during times of darkness and uncertainty. The biggest thing I learned from that night and all these experiences is love and kindness prevails, and we have the honor to perpetuate that in the medical field.



#### Lesley Wu, MD, PGY2, MSBI Internal Medicine

As a Mandarin-speaking physician, I'm privileged to hear stories of Chinese patients as I update their families. But then they ask, "Would Mama have received better care in China?" a question I might have ignored if I hadn't been asked so often. Why were so many of my patients' families asking this? Certainly, "I can't breathe!" in Mandarin is not addressed with the urgency that it would in English. But more rampant during these panicked times is the sheer racism directed against Asian Americans. Videos detail deplorable subway hostilities, but we can sense mistrusting glares in the streets. It stems from animosity circulated by people of power and repeated by ignorant followers who mutter, "Thanks China," under their breath. Our patients deserve better. As their providers, whether we speak their language or not, we must spend time to hear their concerns and reassure them that we are on their side.

#### Ameesh Isath, MBBS, PGY2, MSMW Internal Medicine

My first day of ICU at the beginning of COVID19 pandemic, I walked in all excited to learn about this "new illness" and do what I was trained to do - save my patients. However, in the next two weeks I soon learned the reality of this terrible illness, with a protracted course and grave prognosis in contrast to the usual patients in the ICU who we are able to "fix". Even when I returned for the second time after a break following first two weeks, I could see most of the patients remained in the ICU. Nevertheless, I witnessed moments which made me believe we would tide over this terrible time. From the amazing charge nurse who took it upon herself to let a grieving husband visit his dying wife despite many obstacles to the camaraderie and teamwork of my amazing critical care colleagues who have been at the front line of this pandemic when faced with tasks requiring multiple hands on deck, I can now say for sure that I know we will overcome this.



