

# Cape Fear Valley Health Graduate Medical Education

JUNE 2020 NEWS



## Medical Residency in the Midst of a Pandemic

The life of a Medical Resident is, by definition, a time of new experiences, rapid learning and adaptation. For those doing their Medical Residency during the COVID-19 health crisis, those lessons are even greater, bringing to mind the phrase, “trial by fire.” Early in May 2020, when the state’s full Stay at Home restrictions were still in place, we asked a few of our Cape Fear Valley Residents to share their perceptions of working during this extraordinary time. Here’s what they told us ...

### Dr. Scott Syndergaard: 3<sup>rd</sup> Year Resident in Emergency Medicine

*CFVHF: How has your daily routine changed as a result of the COVID-19 pandemic?*

As a result of the pandemic, as with everyone else, protecting myself and my patients means taking time to properly don and doff all PPE [personal protective equipment] at the beginning and end of the shift. I have to give myself additional time prior to the beginning of the shift to change into N95 [face mask], head cover, goggles, face shield, and gown, and I tend to be later getting home to allow removal and cleaning of all this gear – changing out of shoes and scrubs, and doing everything I can to avoid taking potential pathogens home.

*Has this experience changed your view of medicine or of your role as a physician?*

Up to this point I had kept my work and non-work lives quite separate. However, with the current events, it has opened up my view on physician-community interactions to help facilitate broader community health goals. For example, my wife and I are quite involved



in our local church, and we began having conversations with our church leader early on with regards to cleanliness processes to try to avoid spread within the congregation. Once our weekly church meetings were discontinued, we helped create a plan for food distribution to avoid contact as much as possible and ensure appropriate cleanliness. Additionally, my wife and I have made dozens of masks to distribute to our friends and neighbors.

*What has been most surprising or unexpected during this time?*

Not to say that it is “surprising,” but I have been quite impressed with the response by all [hospital] workers, from physicians and nurses to the environmental services teams and cafeteria workers. While in the Intensive Care Unit (ICU), at the time it felt like we were the most affected by the pandemic. There was so much information sharing between the entire staff, and people were willing to try new things on a very rapid basis. It has shown me just how resourceful, innovative and flexible everyone can be with a common purpose of doing what is right for the patient.

*How are you embracing “self care” now?*

I think that everyone is likely struggling with this. I have two school-aged children, and keeping them entertained without school and swim lessons has been a struggle. We have been doing a whole lot of bike rides and other family activities (cooking, board games). On a personal level, I have been doing a lot of yard work, cleaning and organizing in my garage and house.

*What do you miss most during this time?*

I miss eating at restaurants. It’s not a super common event normally, but once restrictions are lifted, I plan to go out and get a big old steak (and leave a large tip, since the restaurant industry has been hit super hard). Also, go to our favorite beach and stop at our favorite BBQ place afterwards.

*Is there anything else you’d like to share about your experiences during this time?*

I just want to say how grateful I am to have been a part of such a great team in dealing with this crisis on the ground level, both in the ICU and the ED. 

**Dr. Ilona Brown: 3<sup>rd</sup> Year Resident in Internal Medicine**

*CFVHF: How has your daily routine changed as a result of the COVID-19 pandemic?*

I’m currently in cardiology services, so I’m not on the front line like in the Emergency Department or one of the COVID floors, but of course, it’s always on your mind. You try to be careful with what you do, how you do things, to stay safe for your own sake and for the sake of the patients. I think hand hygiene and those things have increased tenfold since this all started. I mean, we were always careful, but not on the same order of magnitude. We deal with fluids, we deal with infections of some kind all the time, but that would be with 1 out of 20 patients; now it’s constant.



*Has this experience changed your view of medicine or of your role as a physician?*

Not so much changed as solidified everything that I was thinking about. It just reaffirmed that that's what I want to do, regardless of the dangers. Yes, it's dangerous, but so are many other professions. As a medical professional, this is what we signed up for. We train for it; we know how to use PPE and how to keep ourselves safe.

*How is your family embracing self-care now?*

I have a 15-year-old son at home. He's doing OK. Not being able to hang out with friends – that's the hardest. But we've been doing a lot of things as a family, trying to keep him involved. A 15-year-old doesn't necessarily want to hang out with his parents, but we're doing the best we can.

*What's the first thing you want to do when social distancing restrictions are lifted?*

I definitely want to see some of my friends face to face and go out to dinner and catch up with everybody. Maybe go shopping!

*Is there anything else you'd like to share?*

I just want to say thank you for the support and thoughtfulness that the community has provided for us. It's just wonderful and amazing. I'm really grateful and humbled by how people came together as a community. 

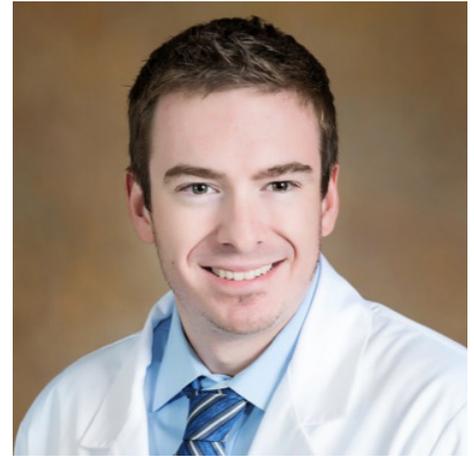
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## Dr. Chris Benton: 3<sup>rd</sup> Year Resident in Emergency Medicine

*CFVHF: How has your daily routine changed as a result of the COVID-19 pandemic?*

The first and most obvious is the change to wearing masks/respirators, goggles and other PPE at all times. The second biggest



change would be the decontamination process after each shift, which consists of deep cleaning all personal equipment from my ID badge to trauma shears to cell phones and respirators – as well as ensuring that you get your clothing that was worn in the hospital into your washer as soon as you get home to reduce the risk of infecting your family.

*What are your current duties?*

I am in the Adult ED [Emergency Department], seeing COVID and non-COVID patients.

*Has this experience changed your view of medicine or of your role as a physician?*

I have a greater appreciation for the risks all healthcare workers face on a daily basis.

*What has been most surprising or unexpected during this time?*

The most surprising thing to me during this time has been the generosity and unwavering support that the public has given to health care workers.

*What's the first thing you want to do when social distancing restrictions are lifted?*

Once lifted, I am planning to visit family, specifically my parents. 

## Dr. Elizabeth Roe: 2<sup>nd</sup> Year Resident in Internal Medicine

### *CFVHF: How has your daily routine changed as a result of the COVID-19 pandemic?*

Now at the hospital, we are all wearing scrubs and PPE. Our faces are pretty much all covered up. I haven't had to wear makeup. I'm not worried about blow drying my hair because it's under a scrub cap. You just put on scrubs and go. I think it's actually simplified my daily routine. So that's been great! Anytime you can simplify things in life, that's nice.



### *What are your current duties at the hospital?*

Every four weeks we are assigned to a different rotation, and for the last couple of months I've been working in the hospital. Last month [in April] I was working up on 6 South which is the cancer/geriatric/inpatient hospice floor. So I was there when they transitioned [that floor] from being a regular medical telemetry ward to an isolation unit.

### *What exactly does that mean?*

In an isolation unit, the doors to the unit are closed. You get off the elevator. You have to put on your full yellow gown. You're already wearing a mask and respirator. The majority of us are wearing respirators 100 percent of the time while we're in the hospital. Then we

also have our scrub caps. We glove up. A lot of us have purchased goggles. We look like we just came from chem lab. And then for the entire time that you're on that unit, you're wearing that, changing gloves, of course.

### *How long is your shift?*

Our shifts start at 6:30 in the morning. If it's a regular day, you usually end around 5. I think a lot of us have been working a bit longer because we've been working really hard to keep the family members updated. You know, the families can't come and see their loved ones right now in the hospital, except in certain circumstances. So we've been working hard to call families and make sure they're up to date with what's going on.

### *Has this experience changed your view of medicine or of your role as a physician?*

I think it has definitely changed. I was reading an article this morning talking about this exact thing – that it's in crisis that we realize we are no different than our patients. I think it humanizes the whole situation. We have the same fears and trepidation as our patients, so it's been humbling to be part of this but also a good reminder that we're all human and that we're all in this together.

### *What has been most surprising or unexpected during this time?*

When this all started, a lot of us had a lot of anxiety because we didn't know how this was going to change our daily routine. But I think what's been most surprising is that for the Residents, it's still business as usual: our didactics still happen, they're just over the computer instead of in person. Everyone still has their sense of humor. We still work well together as a team. So a lot has changed, but at the same time, not a lot has changed, which is comforting. 