

The SARS Experience

Diary of a Wound-Care Clinician



BY Nancy Parslow

I first became aware of the serious consequences of SARS in March 2003 when I tried to meet with a patient and family for discharge teaching at the Grace site of the Scarborough Hospital. When I arrived I noticed that everyone was wearing masks, and so I stopped to inquire about the situation. I was immediately ushered into an infection control command centre. I was pulled aside to a private room by a public-health representative and was interviewed about my contacts at the hospital. They told me that some patients and, subsequently, staff were becoming ill with SARS and that I must leave the hospital immediately, wear a mask wherever I went and cancel a seminar I was planning to lead the next day.

Due to my recent contact with nurses on an affected unit I was sent home into quarantine for 10 days. I felt shock and fear and couldn't believe what was happening. I made immediate arrangements for my son to stay elsewhere for two weeks. Isolating yourself from your family within your own home is a challenge, especially for parents who must struggle to provide care while wearing a mask and staying a safe distance away. My life was turned upside-down. I missed my son and I couldn't go anywhere. I

cancelled my participation in everything that I had previously committed to and missed several opportunities.

Others in this situation had to cancel vacations and a co-worker even had to rearrange her daughter's wedding. Friends dropped off needed supplies on my porch. The only contact I had with others was by telephone or e-mail. I felt dirty, isolated and alone — as well as helpless to help my co-workers cope with this crisis.

Navigating and successfully overcoming the SARS crisis at the Scarborough Hospital in Toronto is an outstanding example of the heroism, courage and dedication that health-care providers bring to their place of work every day. Despite personal fear, anxiety and frustration, care providers persevered to meet the needs of patients and each other. Responsibilities frequently fluctuated, as we were redeployed to unfamiliar areas that required assistance. Stress levels remained high. Even break-time was strained as everyone was forced to sit at least two arm-lengths apart for fear of possible transmission of any infection.

Patients within the hospital became trapped as surgeries, investigations and many treatments were cancelled, and they

became cut off from the support of family and friends. I had been involved in caring for a middle-aged woman who was deaf and relied on lip reading to understand what others were saying. With everyone wearing masks it was impossible for her to understand what was being said unless it was written out for her, which she found to be very time-consuming and frustrating.

Getting to and from work was a real challenge. Use of public transit wasn't permitted unless a mask was worn. Some buses would just drive by without stopping if they saw someone with a mask on. Some taxis declined to come to the hospital. Careful planning was required to ensure that stops for gas could be avoided.

Despite feeling like outcasts many of us got together to organize car pools to support each other to get to work. Some hospital clinics and services even relocated outside the hospital to minimize disruptions for employees and patients.

Throughout the experience we were all witness to the true spirit and resilience of health-care providers as we struggled to learn many valuable lessons and we became stronger as a group as we triumphed over this overwhelming crisis. ☺

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