

# Isolated

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It started with a tickle, then it grew into a sensation of a lump in my throat.

I wanted to stay quiet, and let it pass, but somehow I felt that I had the moral obligation to let others know about it. See, I have been working in Southern Philippines Medical Center (SPMC) as an associate editor in its publication office—a hospital job with no patient interaction—for 3 years now. It was a (new) normal workday in the publication office when it started. I was sharing a pack of potato chips with an unsuspecting officemate. I told him I was feeling sick, feverish at that. We both shrugged it off and laughed.

Then the night came, I was beginning to feel cold, and the tickle, the globus sensation, became a notable seven-out-of-ten pain with congestion.

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The next morning, still contemplating on having myself checked up, I took two puffs of a throat spray, hoping that the pain and congestion would go away.

I've heard quarantine stories of frontliners, how they were taken into the outskirts of the city, and contained in designated holding facilities, but I never paid much attention to those. I only considered those as fragments of an on-going reality—a reality I thought I would never be part of.

I decided to get teleconsulted by the SPMC - Personnel Health Services (PHS) through Facebook messenger. The nurse asked for my consent and made me fill up a personal information sheet, all online. The events of this year had been unreal. Things you thought you only see in movies are happening right before your eyes. Now, medical consultation involves less human contact. If you long for a therapeutic face-to-face interaction with your medical professionals, you will not get it.

My phone vibrated. It was a chat from my officemate checking up on me. I guess he was troubled. Then, the first call came. It was from a Family Medicine doctor. He asked me the usual questions during assessment. I told him when and how my symptoms started, and what I did to somehow alleviate them. I was trying to sound gleeful, just to avoid sending off alarms. Then, the doctor asked me to go right away to the SPMC gym for consultation. He also said that he would be sending me a text message, which would serve as my referral note, to be presented to the triage nurses assigned in the gym. He advised me to pack my things, and bring with me some clothes, food and water. He said I might not go home that day. He delivered his instructions in a pleasant manner. But if he was trying to reassure me, he failed. I was trembling.

I told my mother about the call. She broke down. She thought I was never coming home. I told her it's just the

usual check up, and that, of course, I was coming back. As a nurse, I was taught not to give false assurances, but for this, I had to. Despite the feeling of impending doom, I had to assure my mother. I was going home. I just did not know when or how.

I reached the gym at around 9 am. The sight was not pleasant. A number of plastic chairs were lined up, and a few hospital beds—blanketed with dust—were placed on the far side. I assumed the chairs and beds are for patients who are waiting for their laboratory results. I approached the nurse and showed her the text message I got from the doctor I spoke with on the phone. I was then assessed by a resident doctor who was present in the gym. She told me that, after my nasal swab for the RT-PCR test, I had to stay in the gym and wait for my transport. She further explained that I would be transferred to a facility to wait for my RT-PCR results. Yet, she never mentioned waiting for eternity.

In the SPMC Isolation Facility, I got myself swabbed and x-rayed, and had my blood extracted. I went back to the gym as instructed, and the long wait for my results started. Time dragged as I sat there for what seemed like a lifetime. I received two more calls that day. One was from an Internal Medicine doctor, again informing me of my status and my possible destination, and the other was from a City Health Office personnel, asking for my whereabouts for the past 14 days.

Some other patients came in at around noon, all carrying their essentials. I wondered if they took with them a huge load of patience, because I sure was draining mine—fast. All afternoon, I felt like we were in an episode of a Netflix Original—we would sleep, wake, and walk. Sleep. Wake Walk.

We were withering in that gym. The humidity during that afternoon was tormenting. Hours passed, and there was still no sign of getting transferred to a decent facility, the patients there were already exhausted. A female patient on the far left side of the gym was already lying in bed in fetal position, coughing like there was no tomorrow. At around 8



in the evening, it rained hard. The winds were starting to get colder, as our hopes were starting to fade.

At around 11 that evening, the nurse called my name and told me to prepare for transport and head to the outside tent. I did. I stood in that tent for another 30 minutes or so. No transport. I headed back to the gym, and told the nurse that I preferred to wait inside. Then in the next 15 minutes, my ambulance finally arrived. I was the only one who left. The others had to stay.

Inside the ambulance was another patient. He said he was an employee of a private hospital. He said he was only able to get a few clothes because he was sent to SPMC after his shift. I gave him some of my food supplies because my girlfriend brought me too many.

In the dead of night, we arrived at the facility outside the city. It was another 'gym'—just a whole lot bigger. I never thought gym-hopping was that fun. The admitting nurses were welcoming. They explained to us the house rules, made us sign some documents, and instructed us where 'not' to go.

As we were heading to our rooms, some of the other patients welcomed us, but I wasn't so sure if we were allowed to talk. I just nodded my way through them. By the time this happened to me, netizens on social media have been calling the outbreak a 'scamdemic.' Apparently, not everyone believes that COVID-19 exists. I only wished they saw the dread in the eyes of the patients positive for COVID-19. I only wished they were there.

Waiting for me in my cubicle was a folding bed with two mattresses, pillows and some beddings. An electric fan was standing beside a monobloc table and chair. I was also provided a plastic pail and a kabo (dipper). I put down my backpack and groceries and rushed making my bed. As I lay in bed, I noticed that my cubicle had no ceiling. Inside, there was a tiny lightbulb, which did not

seem to be of any use, either, since the common gym lights apparently stayed on all night.

Although the cubicles for patients with suspected COVID-19 infection were physically separated from those for patients with confirmed COVID-19, mine was near the border. Only an aisle separated my cubicle from the positive zone. I had to lie in bed with my masks on, wary of the air that I had to breathe.

Sleep was a luxury in the facility. The gym lights were too bright. The silence was constantly broken by the violent sounds of hacking cough and expectoration. I did not turn on my fan lest that would make the air I breathe more infectious, and the night breeze was already too cold as it was, anyway.

On the next day, I got up early—around 5 in the morning—to decrease contact with the other people in the gym. I hurried on my way to the common bathroom, and had a shower in a flash. On my way out, a patient stood by the door, stunned. He probably tried to wake up as early as he could, too, and did not expect to see somebody else using the bathroom before him. We stared at each other for a second, then he scampered back to his room. I guess fear of people was also common there. I lay on my bed most of the time that day. I would peek out to assess the situation of the hallway before going to the bathroom. The thought of using my empty plastic bottles as urinals actually came to mind, especially since I did not know how long I was staying.

After cleaning my room, I heard the sound of a nurse on a megaphone, breaking the radio silence. The nurse instructed us to put our chairs outside our rooms so that food could be placed on them. We were also instructed not to go out or approach the personnel on PPE. The nurse repeated the instruction thrice. As hours passed, the place was beginning to feel like a prison. I guess it was indeed meant to just 'hold' patients

and not treat them. Before eating my breakfast, I lined up for hot water at the nurses' station, only to realize that the patients before me were COVID-19-positive. I knew then that I did not want to be there any longer.

At the time I was in the facility, the medical personnel were stationed on the second floor. They also made their announcements through a megaphone from there. When patients were called for their results, they would look up to the second floor like poor souls awaiting God's judgment. From time to time, some patients would be called by their doctors. Some patients would receive good news, while others would not be so lucky. I could only feel for those patients. They probably have some people praying for them outside—parents, sons, daughters and lovers waiting for them to return, waiting for all of us.

At around 6 in the evening, I ate my dinner quickly. I was trying to sleep when a nurse called several patients, all instructed to prepare for transfer. My heart was beating insanely. My name was called, but I was last in the list. I went out of my room, looked up, called upon the gods, and clarified my fate. The nurse said we were to be transferred to a different facility because they were about to take in COVID-19-positive pediatric patients the next day.

It only took me a few minutes to pack again. I fell asleep waiting for the transport. I was woken up by another announcement—again a list of names but, this time, it was the RT-PCR results. Now that felt like Judgment Day, as if I was waiting for a death sentence. I was last on the list again. I walked out of my room and went closer to the voice above. He said, my results were negative.

In the dead of night—at around the same time that I was brought to the facility—I found myself again inside an ambulance, but this time I was heading home. However, my heart goes out to those who are left behind—isolated.

**Contributors**

AIJB contributed to the conceptualization of this article. The author wrote the original draft, performed the subsequent revisions, approved the final version, and agreed to be accountable for all aspects of this report.

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