



A STATE OF EMERGENCY



We have a limited resuscitation team, so each of us is now an expert multi-tasker. We have learnt to play multiple roles.

*Dr. Gina &
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We have re-organised our systems to deal with the challenges of the COVID-19 pandemic efficiently. Because of lockdown, patients are struggling to reach CMC. The poor are not able to come, even in an emergency. In April 2020, we saw very few patients but now as lockdown is being eased, we see over 170 patients each day. **But because of the stigma around COVID-19, those who reach us are terrified to speak the truth, especially if they have a history of fever or live in a containment zone.**

We follow very strict protocols to protect our teams. Initially, we had a shortage of PPE and our critical care students began stitching masks. Now we have adequate protection and equipment. Our seniors and CMC's administrators are very supportive. They have restructured our work and schedules.

Patients come to us with many problems – heart attack or chest pain, infections, fractures, pregnant mothers, even people who have committed self-harm. Usually we see a lot of trauma and accident cases but lockdown has reduced that tremendously. But since the day alcohol shops opened in Tamil Nadu, we are seeing many patients, especially men, with injuries resulting from excessive intoxication.

The peak of the pandemic lies ahead of us. Things are running smoothly now with smaller numbers, and the major load falls on General Physicians and those in Emergency Medicine. While we hope that numbers stay at a manageable limit, we are prepared to face the worst.

As doctors it is our duty to stand at the frontlines. We go forward prayerfully and reach out to everyone of our colleagues for help and support during this crisis.