Rambod A. Rouhbakhsh, MD, principal investigator for Hattiesburg Clinic MediSync Clinical Research and associate program director at the Forrest General Hospital Family Medicine Residency Program, diagnosed the very first COVID-19 case in Mississippi on March 11, 2020.

Nearly a year later, he’s a familiar face and calm voice being broadcast into Hattiesburg-area living rooms regularly on local station WDAM-TV’s news broadcast. Dr. Rouhbakhsh answers viewers’ questions about COVID-19 and keeps the public well informed about all things pandemic. He’s even able to work in a few nonpandemic medical tidbits on occasion.

Dr. Rouhbakhsh, board certified in family medicine and occupational and environmental medicine, talked about how his TV gig came about and how he stays on top of the heavy pace of COVID-19 medical news. Hattiesburg Clinic is an AMA Health System Program Partner.

**AMA:** To start, would you set the scene for our readers on what the pandemic's looked like for you in your area and for Hattiesburg Clinic?
Dr. Rouhbakhsh: It's probably very similar to what's going on around the country. It started with a burst of fear and hypervigilance and it's just blossomed into a prolonged marathon, as opposed to maybe the sprint we had initially anticipated. And we're like most places around the country: Our health care system is stressed in regards to staff, beds—available in the hospital, especially in the ICU—and the emergency room being taxed.

We're very accustomed to dealing with natural disasters like hurricanes and tornadoes, but those are finite events. It lasts several hours and then you spend time recovering. This has been like a prolonged hurricane.

AMA: How did the opportunity to appear on television come about?

Dr. Rouhbakhsh: The origin story really hearkens back to the fact that we diagnosed the very first case in the state. There were a lot of dominoes that fell right after that. I was personally on the phone with the state epidemiologist and the public health officer. “How are we going to handle this?” “How are we going to test for this?”

So, it started with making a press conference announcement to the general community and the medical community. And from there, there was a sea of follow-up questions. The various local news outlets asked for follow up. And, within five days, the hospital and the Hattiesburg Clinic, we had a combined effort to form the very first COVID clinic. That was another press conference, and it just kind of snowballed from there.

AMA: How did you transition to making this into a weekly, or sometimes more than weekly, TV news appearance?

Dr. Rouhbakhsh: I said “yes.” And part of the reason why it was easy to say yes is the medical system was essentially ground to a halt. As we started opening things back up and things got busier, we were able to coordinate it, such that we would do about once a week. And with rare exception, maybe once a month or two, I would give a second interview.

AMA: Now that things have ramped back up, how do you fit this into your busy schedule, especially staying on top of all the news and latest developments?

Dr. Rouhbakhsh: Organization has been my friend. So, falling back on the OCD tendencies that helped many of us become doctors and ramping up organization tactics have been helpful for me. My first thing that I had to figure out is: Where am I going to get information? I compiled the resources that I thought were useful and then I set up a mechanism by which I would get alerted when these things come up.
I made it part of my day to review the information, then I made a running note in my MacBook or in my iPhone, where I would essentially cut and paste this information. It's become by default—something that I'm interested in trying to be on top of.

**AMA:** Was appearing on TV a challenge for you?

**Dr. Rouhbakhsh:** I've had a fair bit of experience doing this, so it wasn't something that I was hesitant in doing. When I was a resident back in Washington state, we had the H1N1 outbreak. It happened to occur when I was a chief resident and they asked for people to go on TV.

My program director pushed me in front, and I couldn't say no. I'll never forget that. I mean, I was so nervous. Then I had other opportunities. It just became easier. I'm an academic doc, so I'm accustomed to getting up in front of our residents and our faculty and giving presentations and it just translated over to television.

I will tell you this, it does help that I don't have the channels that I am appearing on. My kids don't watch it, my wife doesn't see it, and I may not be doing well—but ignorance has been blissful.

**AMA:** What do you see as the most important reasons for reaching the Hattiesburg community through television?

**Dr. Rouhbakhsh:** It became clear that this was not going to be a fire that was put out by the tools we have available in the one-on-one physician-patient interaction. This was really going to require a concerted public health movement. That required some education and some direction.

With the recurring nature of the speaking engagements, I think I became a bit more of a trusted voice. That was my intent. I was hopefully offering up good, reliable information people could trust and was someone local and not necessarily somebody in New York or Washington, D.C., or somewhere else.

**AMA:** How do these appearances fit into Hattiesburg Clinic's broader efforts to establish itself as a source of reliable medical information during this pandemic?

**Dr. Rouhbakhsh:** We are a population health-focused medical system. The Hattiesburg Clinic and our residency program have an accountable care organization, so it's part of our culture to try and take care of a broader group of people than the people just sitting in front of us.

**AMA:** Do you have any tips for other physicians of how they could make this happen in their community?
Dr. Rouhbakhsh: First, say “yes” if you’re interested. Second, compile good resources, find an easy way to stay on top of the data. And then, I think you’ll be a very valuable resource for your local community.

AMA: As this evolves, do you find you’re combating more misinformation, especially as we get into the vaccination phase of the pandemic?

Dr. Rouhbakhsh: This has gone through some ups and downs. There was some misinformation initially about masks, if you recall, and that required some combat. There was some misinformation in regards to the therapeutic interventions, what was effective and what wasn't. ...

And the vaccines had their turn, especially when it went from, "Oh, I hope we get a vaccine," to "Oh, wait, there's a vaccine available now. And I actually have to bare my arm and get it?" There's that initial round of fear.

I feel like we've kind of come down off that a little bit. It feels to me, anecdotally speaking, we've gotten over that hump and we're really at a phase now where people have that fear of missing out and they want to really get the vaccine. So, I hear more now about "Where can I get the vaccine?" than "I'm not going to get the vaccine."

AMA: What is your message to people who are on the fence about getting the COVID-19 vaccine?

Dr. Rouhbakhsh: My messaging is: There are two options. You either become immune because you got this disease or you become immune because you got vaccinated. There's no third option. The question becomes, which is the higher risk of bad outcomes? You're getting the disease, maybe surviving it, maybe not? Maybe having long-term sequelae, maybe not?

Or, what we know about the likely adverse effects of the vaccine? And in my risk-reward ratio, it is by far more evident that the vaccine reward is coupled with far lower risks than the reward of getting natural immunity and the risks associated with that infection.

AMA: Are you seeing any evidence now of pandemic fatigue?

Dr. Rouhbakhsh: That's gone through cycles as well. My hypothesis is these fatigue events seem to fall in line with when people have vacation and holiday time. Where our natural rhythms are such that—OK, I want to do something like I normally do.

My impression right now is that masks seem to be at a higher rate of acceptance here locally than any time I've ever seen. I don't have a sense that people are really trying to get together socially outside of our immediate holidays because I think our numbers post-holiday really scared people. I also get a sense that people have some optimism because the vaccine's around the corner.