I. Background Information

It's been two weeks since New York City imposed its “Stay At Home” Order. The Stay at Home order was implemented in New York City on March 20, 2020. This case takes place the week of March 30, 2020. (The Guardian, 2020)

Emma Thomas releases a sigh of relief, “We found him. Ann, you think he has the virus?” Emma nervously asks her older sister, Ann Thomas over the phone. After calling multiple Emergency Rooms across New York City (NYC) over the past 48 hours, they finally found their older brother, Robert Thomas, in a Downtown Manhattan hospital. The CDC has listed individuals with underlying conditions such as Diabetes are at high risk from severe illness from COVID-19. (CDC, COVID-19, 2020).

Robert Thomas’ electronic medical record (EMR) states the following information: “Robert Thomas is a 56 y/o Black Male with a history of HTN and 20 year history of T2DM, who presents to the ER Friday night after being found unconscious following a hypoglycemic episode and subsequent fall. In the ED, T 98.6, RR 20, O2 sat 100%. On Sunday, the patient tests positive for SARS-CoV-2, but is asymptomatic "with the virus.”

Dr. Anthony Benard, an Internal Medicine resident, reads over the ER notes on Robert Thomas. Robert Thomas is one of 20 patients on his floor today, but is considered low priority since he was only admitted for a hypoglycemic episode. Dr. Benard continues to read Robert’s chart:

“Patient lives between two different households: an apartment in Harlem and in Co-op City, Bronx with his 84 y/o father. Saw elderly father several days ago. Recently laid off from his job as a food vendor at MetLife Stadium and Red Bull Stadium. Education level: Masters in Education (M.Ed)”

1. African American adults are 60 percent more likely than non-Hispanic white adults to have been diagnosed with Diabetes by a physician. (U.S. Dept of HHS, Minority Health, 2019).

2. Through the rise of the pandemic, it has been discovered that SARS-CoV-2 virus can be spread through asymptomatic transmission. Asymptomatic transmission of SARS-CoV-2 is the Achilles’ heel of Covid-19 pandemic control through public health strategies we have currently deployed. (NEJM, 2020).

3. The pandemic overwhelmed NYC hospitals as the need for makeshift hospitals were considered as hospital EDs, floors, and even hallways became filled with patients diagnosed with the novel SARS-CoV-2 virus. (ABC News NYC, 2020).

4. Co-Op City, NYC was created on May 14, 1966. Co-op City is the world’s largest co-operative housing development. This development houses 15,000 people over 35 buildings. Co-op City redefined what affordable middle-class workers’ housing could be. (History of Co-Op City NYC, 2018).

5. Due to Stay at Home orders implemented across the country, the unemployment rate has skyrocketed. As of May 2020, 40 million citizens filed jobless claims with the U.S. Department of Labor. This led to the creation of Federal Pandemic Unemployment Compensation program. (US Dept of Labor, 2020).

6. The COVID-19 pandemic has shone a light on inequality and class. People who work in the service industry are in a very different position, to those working in salaried jobs they can do from home.
II. Challenges within Hospitals

As NYC hospitals become overwhelmed with COVID-19 patients, there has been a dire need for more patient beds. 9 Dr. Benard, seeing that Robert Thomas is “stable” compared to his other patients with SARS-CoV-2, recommends Robert for discharge.

“We need the bed,” Dr. Benard explains to his supervising physician, Dr. Romano, a retired private practice physician who volunteered to help fight COVID-19 in NYC. Dr. Romano agrees.10

Dr. Benard calls and explains to Robert Thomas’ sisters that he is being discharged. Ann Thomas says “I understand you need the bed, but I have been watching the news in NYC. Doesn’t he need to test negative from the hospital before you release him?” 11

Dr. Benard sighs, knowing she’s correct, he replies, “Yes, that’s the recommendation from the CDC however… It’s chaotic here and he’s asymptomatic. Testing is not up to par,12 I’m sure if he wears a mask and social distances, he will be okay.”

Ann Thomas nervously says “...Okay, but how will he get home? I live in Connecticut and my husband is a Diabetic as well. My sister lives in Westchester county, which is currently under heavy lockdown.” 13

With no other option available, Dr. Benard replies, “I think he can take the subway home.” 14

9 There are about 53,000 hospital beds in New York State, 3,200 intensive-care unit beds, according to the American Hospital Association. Within NYC there are about 20,000 of the beds in the city. (NY Times, 2020)

10 As of March 26, 2020, retired health care workers across the country responded to the call to help in overwhelmed areas by COVID-19. (Time, 2020)

11 Constant changes in guidelines around the novel SARS-CoV-2 virus has played out in the media over the past couple of months leading to misunderstanding and misinformation. Current CDC guidelines recommend for asymptomatic patients the following: after testing positive for SARS-CoV-2, that depending on your healthcare provider’s advice and availability of testing, you might get tested to see if you still have COVID-19. If you will be tested, you can be around others after you receive two negative test results in a row, at least 24 hours apart. In this case Robert, was not able to be tested again. (CDC, 2020)

12 Though NYC led the nation in widespread testing during the pandemic, it has been a challenge nationwide. Early in the pandemic NYC lacked sufficient diagnostic tests and needed to preserve personal protective equipment for health care workers to treat hospitalized patients. City officials shifted to calling instead for testing only the sickest people — often just those needing hospitalization — and encouraging anyone else feeling ill to stay home. (Kaiser Health News, 2020)

13 On March 10, 2020 Governor Cuomo mandated the national guard in Westchester County to ensure residents obey the state at home order in cities such as New Rochelle. At that time, there were 200 cases in New Rochelle alone, and 900 cases in all of New York state. (Military Times, 2020)

14 Here’s an article written by Jeffery E. Harris on The Subways Seeded the Massive Coronavirus Epidemic in New York City. (Massachusetts Institute of Technology, 2020)
Several days go by without Robert’s discharge paperwork being signed, and with an increasingly heavy patient load, Robert Thomas is forgotten by hospital staff. Although his sisters called for status updates daily, the staff do not discover that Robert had not received his insulin until 5 days into his hospital stay even though it had been ordered. 

It’s been a week since Robert Thomas was brought to the hospital when the Mayor announces the opening of “hotel-hospitals”. 

Upon hearing of this option, Dr. Bernard reaches out to the hospital social worker realizing this may be a safer option for Robert than discharge home. The social worker registers Robert to join the first cohort of individuals sent to the hotel-hospital. 

During Robert’s discharge session, he is provided with a 90-day supply of medication for his Diabetes and counseling on how to better manage the disease. However, because COVID-19 was not listed on his discharge summary, the nurse does not provide SARS-CoV-2 counseling to him.

Over the phone, Robert Thomas notifies his sisters explaining that, “They’re going to put me in a hotel to quarantine, call you when I get there”.. Robert is then transported via ambulance to the hotel.
III. Hotel-Hospitals Challenges

At the hotel, no medical personnel are on-site even though it should have been a requirement. 19

“We have guests, not patients” says the hotel manager. He continues, “The hotel staff are only required to provide meals to guests, and if the meal is taken we assume they are fine.”

Several days into his hotel-hospital stay, Robert develops symptoms of COVID-19. He has a significantly decreased appetite and does not eat the meals provided to him by the hotel staff. Yet, no one calls medical personnel on his behalf. 20

Robert Thomas does not own a cellphone. 21

Soon after his arrival, he realized he would have to pay to call his sisters and that he could only dial 911 for free. Since becoming unemployed, he feared the added expense, so he did not use the hotel provided phone.

Robert Thomas’ sisters frequently called the hotel to check up on him, but the hotel staff refused to allow his sisters to talk with him.

After calling various departments within the hotel, Ann and Emma Thomas were finally able to convince a sympathetic housekeeping staff member to check on him.

“I noticed it took him several minutes to unlock the door, he didn’t look too well. I told him to keep the door unlocked in case I have to come back in to check on him”.

19 Though less symptomatic and asymptomatic patients of COVID-19, can manage symptoms at home, it is important to still remain in contact with health care providers if symptoms do present. (CDC, Symptoms of COVID-19, 2020)

20 During a press conference, Mayor DeBlasio did mention the opening of hotels for less severe patients with COVID-19. However, he did not mention whether health care staffing at these facilities would be present in order to maintain the continuity of care. This left patients such as Robert, without follow-up care. (Transcript of NYC Hotel Hospital Announcement, 2020)
Within the same timespan, Robert’s elderly father, Charles Thomas, contracted bilateral pneumonia due to SARS-CoV-2. As a result, both Emma and Ann’s daily routines became consumed with frequent conference calls with physicians about the health of their father, and continual calls to the hotel, to check on their brother.

IV. Challenges within the African American Community

As seen with many diseases, African Americans’ health outcomes are often worse than those of other racial groups in America. This unfortunate phenomenon has also been demonstrated with the novel SARS-CoV-2 virus.

**Historical Trauma**

Past public health models have not included the role historical traumas (physical and psychological violence, segregation, economic deprivation, and cultural dispossessions) have played in current racial/ethnic health disparities, and disease prevalence in these populations. These traumatic events have left an impression on this community leading to strong feelings of unresolved grief, persecution and distrust that can also be seen within the health care system.

According to Pew Research Center, lack of access to technology in the US still remains a problem. Low income individuals are less likely to have access to smartphones, tablets, and high speed internet. *(Pew Research Center, 2019)*

Elderly individuals were the initial vulnerable population SARS-CoV-2 was known to impact. It was not yet known that this population would present with abnormal symptoms towards the virus. It was discovered elderly patients typically had a fever, insistent cough, and shortness of breath. This population is most likely to experience severe illness from the virus. *(Kaiser Health News, 2020)*

In a study focused on sex-specific characteristics the risk of death from COVID-19 is 2.4 times higher in men than in women. *(PLOS Pathogens, 2020)*

Though, Ann and Emma Thomas have each other for support through this time, caregiver burnout still can occur. Learn the signs of Caregiver Burnout *(Caregiver Burnout, 2019)*

Here’s an article, about the Conceptual Model of Historical Trauma: Implications for Public Health Practice and Research *(Journal of Health Disparities Research and Practice, 2020)*
Access to Health Care & Health Disparities
Though health disparities were present prior to the pandemic, their presence has placed Black Americans at a greater risk of succumbing to the severe effects of COVID-19 when compared to other populations.

Additionally, Black Americans across the country have been denied access to coronavirus testing and/or treatment, which has led to many premature deaths. These high mortality rates among Black Americans have led to calls for increased collection and analysis of racial data.  

Prevalence of Chronic Diseases
Initially, COVID-19 was assumed to only impact elderly populations, but we have learned that those with chronic diseases are also at significant risk. Chronic diseases have higher prevalence rates among minority communities, especially Black Americans.

Both the increased incidence and prevalence rates of chronic diseases as well as challenges with access to quality health care have contributed to the extreme vulnerability with which Black Americans have contracted and died from the SARS-CoV-2 virus.

Physical Distancing Challenges
In urban areas such as NYC, physical distancing can be a challenge as social and residential places are communal areas. Co-op city is a high communal area where residents enter communal spaces before reaching their residence. (Elevators, hallways, ventilation system, laundry are all shared)  

27 Black Americans have died from COVID-19 at a rate of 50.3 per 100,000 people (1 in 1,500), compared with 20.7 for whites, 22.9 for Latinos and 22.7 for Asian Americans. (APM Research Lab, 2020).

28 Here’s a video of Dr. Fauci confirming COVID-19 is shining a bright light on unacceptable health disparities among African Americans. (Dr. Fauci, 2020)

29 In 2003 In 2016, the U.S. HHS Office of Minority Health reported, Black Americans are 60% more likely to be diagnosed with Diabetes than White Americans. Those with Diabetes were 3.5x more likely to be diagnosed with End Stage Renal Disease, and 2.3x more likely to be hospitalized for lower limb amputations compared to White Americans. Lastly, Black Americans are 2x more likely to die from complications of Diabetes than White Americans.

30 With chronic disease among African Americans has been like with increase stress response due to societal factors such as racism, poverty, and discrimination. (AMA Journal of Ethics, 2020).

31 In New York City alone, 8 out of the 10 highest hit areas based on zip code, were majority Black and Latinx communities. These rates were compared to wealthier, White-predominant areas such as Manhattan where no deaths from the virus were reported. (New York Times, 2020).

32 As of May 20, 2020 155 residents in Co-op City died from COVID-19. This is roughly 1 of every 282 residents. (Fox5NY, 2020)

V. Post-COVID Trauma
Within a week of being at the hotel, Robert’s health rapidly declined. And on a Saturday morning, he was found dead in the hotel room by the staff. When police arrived, his discharge summary did not include his COVID-19 positive status.
Emma and Ann Thomas found themselves unable to deal with their sudden grief over the loss of their brother, as the health of their father began to deteriorate. Within a week of Robert’s passing, Charles Thomas' health had taken a turn for the worse.  

48 hours after Charles was intubated, he was placed in the ICU where his kidneys began to shut down. 

Dr. Zavala, ICU attending, somberly explains,“We need to talk about changing your father’s code status from Full Code to DNR, and Comfort Measures Only. He is at stage 3 chronic kidney disease. At this point, dialysis along with intubation will place too much strain on his heart.” . 

After weighing out the options, Ann and Emma Thomas agree to forgo providing dialysis. Within 48 hours, their father, Charles, also passes away. 

At this time, NYC’s medical examiner office and funeral homes were overloaded with bodies from those that had succumbed to SARS-CoV-2. Though Charles Thomas had provided Emma access to his bank accounts and knowledge about documents for his life insurance policy, Robert did not have this. 

The medical examiner’s office informed Emma and Ann that their brother’s body could only be at the city morgue for 14 days before he would be taken to Hart’s Island. 

VI. Case Conclusion

Having no financial means to bury two relatives at the same time, Ann and Emma Thomas made the difficult choice to cremate Robert’s body and bury him with Charles Thomas in Ferncliff Cemetery. 

The sudden loss of a loved one can be devastating but losing more than one within a day’s span is heartbreaking. It is important that one’s mental health and self-care is also taken care of during this time. (Mental Health America, 2020) 

Since late December 2019, it has been apparent that disease prognosis has largely been influenced by multi-organ involvement. It is common to see severe patients experience renal failure, acute respiratory distress syndrome, heart failure, renal failure, liver damage, shock and multi-organ failure precipitate before death. (Curr Probl Cardiology, 2020) 

End of life planning decisions can be challenging to make within the moment. It is always best to talk with patients about planning ahead of time in order to prepare loved ones on how to handle these situations. (National Institutes on Aging, 2020) 

Hart’s island also known as Potter’s field, is the public burial ground for unclaimed bodies. Prior to the pandemic, over 1 million NYC residents were buried here. (Business Insider, 2016) 

16,000+ NY state residents have passed away from COVID-19. This has placed a heavy burden on funeral homes. With the economy also in decline, funeral homes are no longer taking credit or insurance payments for burial. This impacts minority families already impacted by the virus. (Health Education & Behavior, 2020) 

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This case was based on true events found in the news story: New York Puts Recovering Virus Patients in Hotels. Soon 4 were Dead. (New York Times, 2020).