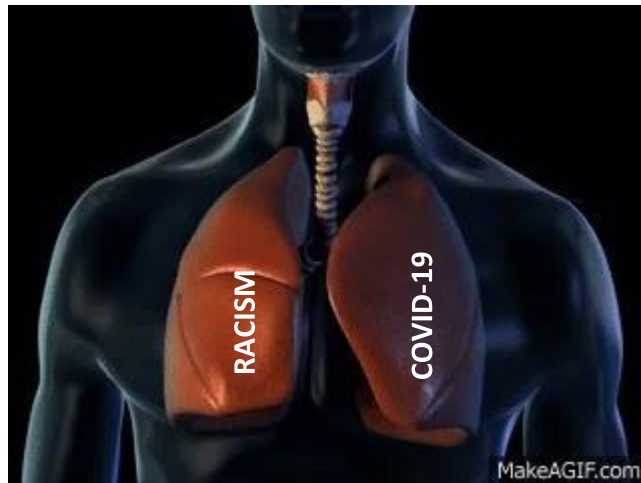


My baby Brother

# STILL Can't Breathe!



By Carolyn V. Chang, Esquire

The weekend of March 21, 2020 should have been an uneventful one; however, I heard from my youngest sibling and he wasn't feeling well. Under normal circumstances I would not have been concerned, after all, he is a young, robust, somewhat physically fit Corrections Officer and an all-around healthy man; however, this was pandemic season, Drew is asthmatic and I was worried! Thus began "the hunt" for a thermometer. My children are now millennial and members of generation X, so it had been a while since I had to take their temperatures. The ONLY thermometer in my home needed a new battery. I spent Saturday, March 21. going from pharmacy to pharmacy searching for either a new thermometer or a replacement battery. Thermometers and replacement batteries were SOLD OUT! I called just about everyone I knew in North and Central Jersey desperately seeking a thermometer. Not a single friend or colleague had a thermometer in their home.

By Sunday, March 22, 2020, I suggested to my brother that he gargle with some over proof white rum to help with his sore throat. I had heard from my friends in the medical field that Ibuprofen should not be used as a fever reducer for COVID-19 patients – so I reminded my brother to take only Tylenol if his fever spiked.

### I Can't Work

On Monday morning March 23, Andrew texted that he was feeling better “so the hunt for the thermometer was not as grave”. I cautioned Andrew not to return to work right away simply because he was feeling better. Andrew said “I can't go back to work until test results come back ruling out COVID”. I checked on Andrew via text early Monday afternoon and he advised that he was lying in bed because he was feeling nauseous. He wanted to go to the store to purchase ginger tea and crackers; however, I was able to convince him to stay home (it was cold, raining and he may be contagious) and I would have a friend from the Jamaica Organization of New Jersey drop-off some supplies to his home. My friend, Jazz dropped-off a care package to Andrew's front porch later that night.

### I Can't Get Medical Help

On Tuesday morning, March 24, Andrew received the news that he was COVID-19 positive. By now he was in respiratory distress. He called JFK Hospital which is closest to his home, but was adamantly told by staff that they would not receive a COVID-19 patient. He had to wait at home for the hospital to call him back with further instructions. He had to wait for JFK hospital to notify another medical facility. He was finally directed to go to the emergency room at Robert Wood Johnson University Hospital – Somerset in Somerville, approximately twenty minutes away from his home. Despite respiratory distress, Andrew drove himself to the ER at RWJ and was admitted at approximately 10:25 AM on Tuesday, March 24, 2020. **I did NOT hear from Andrew again for 12 hours; not until 10:26 PM on Tuesday.** Andrew, my take charge and be in command of everything brother, remained not in control of his circumstances in a sterile emergency room from Tuesday morning, March 24, 2020 until approximately 2:00 PM on Wednesday, March 25, 2020 when staff was finally able to find him a hospital bed.

### I Can't Walk

By late Tuesday, after lingering in the emergency room for hours, Andrew could not walk to the bathroom without getting winded. He was placed in a room with another COVID-19 patient who was much older than he. He was terrified and felt that he would become more gravely ill if he were to remain in that room with another COVID-19 positive patient, especially one who was so ill that he could not walk. Andrew was placed on oxygen and was receiving intravenous (IV) fluids.

### I Can't Do This Alone

As Andrew is a robust young man who has never been married and has no children, the idea of a getting a Power of Attorney, Advanced Health Care Declaration and a Last Will and Testament were somewhat foreign to him—the necessity of them never crossed his mind. However, he was astute enough to list his three older sisters on his Medical Chart as contact persons and as his representatives to make medical decisions for him in the event he was unable to do so. Further, Andrew advised me, via text, that one of his fraternity brother's wife was an ICU Nurse at RWJ and he gave that Nurse his sisters' phone numbers and in turn gave me the number of that Nurse.

Within hours Andrew was asked to sign a consent form to become a part of the Clinical Trial for the drug, Remdesivir. Andrew texted the consent form to me for my review and I advised him to sign same. There is always a ram in the bush.

Thursday morning, March 26. Andrew is now violently coughing and his cough is non-productive. He is moved into a private room. By Friday morning, March 27. Andrew can no longer type in full sentences; it was as if he only had sufficient strength to just text single words in just about every ensuing text message. I asked him whether he was given the drug Remdesivir and he responded “NO”, they brought wrong meds to him. Further he said: “no doctor interacting”. I assumed he meant that he had no contact with a doctor for a while. I responded: “keep fighting Andrew. You have LOTS to live for!

Get up every once in a while, and FORCE yourself to move around, even if you get winded – do it anyway”. There was very little response from Andrew.

Saturday afternoon, March 28, was my very first report from the infectious disease doctor at RWJ. She advised that Andrew was not doing well despite the support he was receiving from the oxygen. Sunday, March 29, Andrew forwarded a text that he received from his employer thanking him for his service to Essex County. It was then that I became aware of the fact that Andrew was exposed to COVID-19 while working in the jail. I also became aware of the fact that many Department of Corrections (DOC) inmates and employees had also contracted the virus.

By Sunday afternoon, Andrew texted that he is weak, he hadn't slept in two days and his “body feels no circulation blood flow”. I asked him to do a FaceTime call to me. He replied: “I don't wanna be seen like this –SCARY”! I asked him to send a picture of himself because I needed to know that he is NOT dying and that despite everything, he is going to be okay – he transmits a selfie. It shows that he is on oxygen, using a Continuous Positive Airway Pressure (CPAP) mask. He appears to be half asleep. I tried to encourage him NOT to give up hope. I text the following to him:

“Andrew – I have been there at least 4 times with pneumonia. I know what it feels like not to be able to catch enough breath to be able to walk any distance, can't talk because not enough breathe there. I KNOW. I know how it feels to be afraid to fall asleep, afraid that I will not wake up. I KNOW! I love you from the time that you were that little guy in that funny winter hat strapped under your chin, waiting for the bus over in Dodd Town and I love you now. You will **NOT** die, you will **RECOVER!**”

Andrew responded: “Carol I hope not ... but I'm becoming less optimistic”

“Nobody can help me outta this ...”

I suggested that he take his recovery one step at a time. He responded: “I'm trying with these setbacks”. Andrew was shortly thereafter moved to the ICU – 225. I had no other two-way communication with Andrew UNTIL Saturday, May 2, 2020—34 days later.

### *Breathe for Me*

ANDREW WAS HEAVILY SEDATED, INTUBATED AND WAS ON A VENTILATOR FOR 32 DAYS. FOR THIRTY-TWO DAYS, ANDREW COULD NOT BREATHE. THE VENTILATOR TUBE WAS REMOVED FROM HIS THROAT THREE TIMES DURING HIS TREATMENT IN THE ICU; HOWEVER, THE EFFORTS FAILED BECAUSE ANDREW COULD NOT BREATHE ON HIS OWN. We learned that the ICU had IPADS and family members are able to FaceTime the patients. My sisters and I FaceTimed Andrew many times while he was sedated and intubated. We were desperate to talk him off the ledge when he became combative after his sedation was reduced. We were told by some nurses that “He is scary!” We were worried that some of the medical staff would **not** treat him well, may give up on Drew, give up on his medical care and just let him die. We worried about this because he is a big, strong (though losing weight incredibly fast), black man who was suffering from delirium. He kicked. He pulled-out his IVs. We asked everyone who knew Drew's sisters to pray for the healing of our baby brother. We never gave up hope and when we became angry because a member of the medical staff was not sensitive to Drew's needs and the needs of the family, we had to straddle the fence of outright fury against the need not to alienate the medical staff in order to keep Drew safe and alive. We were advised by Drew's medical team that the only option to remove him from the ventilator was to perform a tracheostomy at his bedside. The ventilator tube would be removed from his throat and placed directly into his trachea through his neck. The tracheostomy was completed in the ICU and after a few days Drew was able to spend some waking hours off the ventilator. He still needed the support from the machine at night, but he was healing now. For days he could not speak and was too weak to hold a pen to even write short messages on a white board during FaceTime. When he became strong enough to write, the messages were

unintelligible. The medical team advised that his brain would not function properly for a while due to the length of time that he was heavily sedated.

### *Too much death around him*

Andrew became fully aware of his surroundings in late April and began to see other patients in the ICU succumb due to the complications of COVID-19. The nurses closed the curtains in his room to prevent him seeing death, but he could still hear. Despite the fact that he was not well enough for the regular hospital floor, on May 4<sup>th</sup>. we asked the medical staff to remove him from the ICU to insure that he would not see and hear other COVID patients passing away. This still haunts Andrew today and will probably haunt him well into the future.

### *I Have Some Hope on the Horizon*

Andrew was discharged after forty-eight days in the hospital (March 24, 2020 – May 11, 2020); thirty-six days in the ICU (March 29, 2020 – May 4, 2020); and 32 days on a ventilator (March 29, 2020 – April 30, 2020). Drew received a very emotional and supportive “clap-out” from the medical staff at RWJ University Hospital-Somerset, his colleagues from almost all Department of Corrections jails across New Jersey as well as from many of his fraternity brothers from Omega Psi Phi Fraternity, Inc. He was escorted by a caravan of Department of Corrections’ vehicles from Somerville to Kessler Rehabilitation facility in Marlton. He is now home after a slight relapse due to an inability to breath during sleep. For that he was recently readmitted to RWJ University Hospital - Somerset for just a few days to monitor his breathing. Drew still has scar tissue and swelling in his airways. He still has trouble breathing at night. He is no longer COVID 19 positive, but the virus lingers in other ways, some can be seen by a doctor’s scope and others cannot be seen simply by looking. Drew and I speak almost daily now, during our last conversation I reminded him that despite the ordeal he faced, by God’s grace and mercy, HE IS STILL HERE!

My husband, sister and I recently visited Irvington and Newark where my brother once resided and where he has some rental properties. We needed to take care of the physical properties as my brother is not physically able to do so. During our drive through Newark and Irvington, we saw many young Black men walking about, some were on the corners, some partying in back yards, many with no masks. My heart bleeds for these young brothers and hope that they will never experience what Andrew had to endure.