One

February 23, 2020, 7:36 A.M.

Our newborn son was fast asleep in the bassinet next to the hospital bed. Yogita and I had just fallen asleep. We'd been up all night, coordinating feeding, changing diapers, going through different hospital assessments. The new morning nurse poked her head in to say hi and put her name on the dry-erase board. Barely awake and groggy, Yogita smiled and whispered hello. My eyes were dry from sleeping with my contacts in, and my throat felt scratchy from the hospital air. I could see the outline of my wife's head leaning against the headrail with the small light near the sink. She was sleepy but still had that glow as she looked down at our baby boy. Even though we'd been through this before with our daughter, on this quiet morning it all felt brand new.

Though nauseous from a combination of exhaustion, stress and adrenaline, underneath were the soft symptoms of new parenthood: wonder, tenderness, gratefulness, joy. With the arrival of Kaveh, our new son, at last our family of four felt complete. A promising year lay ahead, and with it, a sense of hope, enlightenment and excitement.

I had just enough time to grab a coffee from the hospital lobby before I was due back to my wife and son. That morning we were to meet with the lactation consultant and prepare for discharge the following day. In the background, *Good Morning America* was on the small TV mounted on the wall, the chyron breaking news about a novel coronavirus.

Kaveh was in my arms, wrapped in a few swaddle blankets too many, opening and closing his dark brown eyes while my wife ate odorless oatmeal. The TV screen kept cutting to images of the *Diamond Princess*, a cruise ship now quarantined with coronavirus cases; and more new cases were beginning to appear in Seattle and Oregon. I'd heard about the situation in

Wuhan and Italy, and even now, seeing it in the western corner of the United States, it just seemed far away. It wouldn't make its way to Georgia. This would be quickly contained.

Coronaviruses, I knew, are here already. I'd seen different forms of the virus in pediatric populations during my training. It manifests with routine symptoms and is categorized as the common cold. I continued watching *Good Morning America,* assuming that this new coronavirus would be no different. As a doctor and director of hospital medicine and a leader to other physicians, I felt I would know if this were truly worrisome.

A story, after all, is always *breaking news*; how better to capture our attention and keep us riveted? This breaking news reminded me of a promise I'd made, that these next ten days were going to be different. My family had just grown, and I was determined to not be consumed by competing problems and situations at the hospital. I had supremely talented and capable colleagues covering me. This was my time with family. As the news went to commercials, my thoughts went to my son. *I love you.* I gazed down at him. *I will always protect you.*

That morning, I experienced the routine of hospital dynamics and flow but from the other side: nurses, a visit from the pediatrician and OB-GYN, paperwork. The number of hospital workers who entered our room—upwards of twenty, each with a different job to do, all within twenty-four hours—was uncanny. We all interacted happily with one another, with smiles and handshakes, as in any other normal day.

Our room was almost always full. Kaiya, our four-year-old daughter, had visited the previous day with both sets of grandparents. When I took her in to meet her new brother, her eyes grew wide and she gripped my hand tighter. With a big smile and a squeal, she started jumping up and down then hurried to the bassinet and gently whispered, "Hi Baby. I'm your big sister." My wife and I locked eyes as the new big sister gently patted her new brother.

When it was time for a feeding, Kaiya—who had been holding the baby under close supervision—refused to give him up, thinking she could do it as she did with her dolls at home. Worried about her adjustment, we made sure to give Kaiya extra love in those first early days.

I noticed that at one point, we had six adults, a four-year-old child and a brand-new baby crammed into one small room. Remodeled yet still tiny, the room was designed for a new mother and her baby, with one side couch for a family member. On ours, the grandparents were all jammed together, passing the baby from one to the other. I was nervous about germs and exposures. (A newborn's immune system has yet to develop.) While the baby was being held by one of the grandmothers, my father let out a dry cough. Taking no chances, I requested that he wash his hands immediately and sanitize with alcohol. That we were packed together in a hospital room, breathing on one another while admiring this new baby, was nerve-racking. From my work in pediatrics, I had seen a fair share of newborns sick in the first weeks of life and I worried that my son would be one of them.

Discharged and now back home.

As we organized ourselves, unpacking from the hospital, we had the news on in the background. Again, I heard about the novel coronavirus. This time, though, I felt a degree of concern from a world public health standpoint, with cases and deaths increasing around the globe; yet, we've always been so privileged and protected here in the states, and I predicted that would hold. Regardless, my focus now was on my family. They deserved my attention, and I was trying hard to avoid any thoughts related to work. The hospital—and the novel coronavirus—could wait.

At home, I was overwhelmed. I had to learn to navigate and divide my attention; and Kaiya, for her part, wasn't used to sharing the spotlight. That was a challenge. Chaos had become the new normal. Sleepless nights

continued as my son adjusted to life outside the womb, and our daughter would still come running into our room in the middle of the night. Mornings were taken up by first fixing breakfast, getting Kaiya ready and dropping her off at preschool, then helping with the baby's changing, burping and holding. In a blink, afternoon would arrive, before I'd even had coffee. Laundry seemed endless, especially since we washed the baby's things separately with hypoallergenic detergent. Preparing meals without interruption was impossible. All day long I'd be putting out fires, and any kind of planning had to take this into account.

Days blurred together in a sleep-deprived state; every powernap, short-lived. Yogita had the harder role with nursing (and all other maternal demands), clearly adjusting more adeptly than I. Through it all, we were blessed to have grandparents nearby, as well as my mother-in-law, staying for two weeks—which meant, of course, that we didn't learn how to function alone with two children for the first few weeks. I remembered how friends would say, "the first few weeks of newborn life lead to amnesia: when you do it again, it's as if you have no recollection of what it was like." Truer the words.

Yet, despite my attempts to solely focus on things at home, I could feel the outside pressure mounting, that things were subtly starting to change. More and more, my thoughts were of the hospital. My mind would drift when burping Kaveh or loading the dishwasher, and inevitably I would scroll, scanning headlines on my phone, wondering as the buzz became louder about this virus. I did resist the urge to check work email and did not click on the blue envelope for updates. That was a major challenge. *Everyone's* focus, it seemed, was shifting.

As one week of paternity leave finished, coronavirus coverage nationwide increased. What the virus could do and where it was spreading was a subject of much speculation. Around the second of March I began to

worry. My team is on the front line. What would we do if someone had it at our hospital? I started receiving texts from colleagues asking how prepared we were for patients coming in with possible coronavirus. They posed questions to which I had no answers. I said we had to align with the broader health system, and follow all guidance. I reassured team members I would be back the following week, and promised to communicate developments in the meantime. Alarm bells were starting to ring. This was turning into a potentially serious event.

For better or worse, our family usually has the TV running in the background when we're at home. Evenings typically are cartoons that my daughter loves, but during the day, it's news all the time. My wife, although on maternity leave, continued to check her emails and wanted to keep tabs on her work as a physician in physical medicine and rehabilitation. To see her spend hours on patient-related issues outside of work is not at all unusual; she has a passion to give the best patient care and maintain the most professional relationships with her patients and colleagues. We both worked within the same health system, and always chat about the latest happenings.

Knowing my style, she then asked me, "Are you looking at these emails about the coronavirus? Should you be doing something?"

I held her hand, smoothed her hair, and said something about needing to draw boundaries with work during this important time at home right now. She smiled in that way that says *okay,* but raised her eyebrows and semi-smirked, knowing that I was fighting the urge to get to work.

While my mind and energies were focused on my family, admittedly I was

starting to obsess. What if there were COVID cases in the metro Atlanta area? What if a patient who was traveling abroad showed up at our ER with COVID-like symptoms? Still, I felt part of a system that was prepared. A few years earlier, two cases of Ebola were treated at one of our hospitals. If we could

deal with that, we could deal with a coronavirus. We had prepared with a whole triage plan that time; and when I was in residency, I was part of the H1N1 flu outbreak. I had seen these viruses that caused hype and hysteria, and each time, I was always secure and protected.

Why would this time be any different?