

Episode 48: Kimberly got the Coronavirus

Today we're gonna hear first-hand from someone – a doctor actually – who experienced a severe, drawn-out case of the COVID-19 virus. Also popularly known as the Coronavirus.

And of course, I have to preface this with the obligatory disclaimer. What you're going to hear on today's podcast is not medical advice, and you should not interpret it as medical advice. I am not a doctor. My guest Kimberly IS a doctor, but she's not your doctor. She is only recounting her own experience with this virus, and she is not offering any medical advice here. If you have any questions about your health, you should consult your own physician.

As you hear Kimberly talk about what she's been through recently, you'll see that one of her biggest concerns throughout this whole ordeal was the health of her parents. She was extremely concerned about them getting infected, and especially that SHE may have been the one who caused them to somehow contract the virus. Kimberly is just 39 years old, and most infectious disease experts will tell you that it's the senior population who are most at risk with this.

So I decided to get some input from one of those seniors.

Karen

Hello, my name is Karen. I'm 77 years old and I'm Scott's mom.

Scott

Yep, that's my mom. I'm an optimist, and I inherited that from her. She lives about 5 minutes from me, in a condo that she and my dad bought about 3 ½ years ago. They moved in and were only there about 3 days before my dad went in the hospital and passed away shortly after that. So she lives there alone, and we see her pretty regularly, but now we have this virus situation and we all have to stay home. What does she do all day? Well, she stays pretty busy.

Karen

I like to start my day by taking a walk. When I get back home, I sometimes have a list of things that I want to accomplish during the day - sometimes, I do and, sometimes, I don't. I'm retired, so I can do what I want.

Scott

Did I mention, she stays busy?

Karen

I can mop the floors and dust. I can get on my computer and play games. I can call a friend. I can encourage them and get phone calls. I can do jigsaw puzzles on my computer. I can play games on my phone. I'm catching up on my reading.

Scott

But wait, there's more!

Karen

Reading my Bible through this year in chronological order. I'm taking Bible courses on BBN. I do laundry. On Sundays, we have lunch together - I'd have lunch together with family on Zoom. I

do the ladies Bible study on Tuesday night on Zoom. I do another ladies Bible study on Wednesday night on Zoom. On Saturday morning, I do Weight-watchers on Zoom.

Scott

Holy cow, my mom is retired and she's busier than I am!

Karen

(Chuckles) I don't do all that every day.

Scott

At this point, she understands the importance of staying home. But there was this one time a couple of weeks ago...

Karen

One day, on my way home from a doctor's appointment, I thought that I would just stop by a couple of places because I just needed a few things. I went in to stores, got what I wanted, and came home. My mistake was in telling my family what I had done. That was a biggie. I should never have told them what I did because, now, I can't go out of the house.

Scott

So yeah, she understands that now, and in fact her concern now is that other seniors will understand it too.

Karen

I'm concerned for people my age. We have more health issues than the younger people. I just think that people my age should be really careful - that's probably my most concern. I know of a few people that have it but they're not my family - They're just friends from a long time ago.

Scott

Hearing this from my own mom gave me a good context to frame my conversation with Kimberly. Her experience with COVID-19 has been pretty serious, and she had the added stress of worrying about her parents, as well as her husband and their young daughter. She kept a log of what happened each day, and I'll have a link to that in the show notes for this episode, at [WhatWasThatLike.com/48](https://www.WhatWasThatLike.com/48). This whole situation is pretty difficult in different ways for different people. If you or a loved one is dealing with this now, I hope this helps.

Scott

Throughout this ordeal, did you ever have a moment of fear that you wouldn't survive?

Kimberly

I did. It happened a couple of times and it was very scary.

Scott

I know we're gonna go through your symptoms and what you experienced, but what was happening at the time that caused you to have that thought?

Kimberly

Well, I think I had childhood asthma. I mean, I think that was probably just something that a doctor said because I was not a particularly sporty child. When I tried to play sports, I couldn't breathe well but I've never had the experience of an asthma attack or anything like that, fortunately. So, the sensation of what I recently felt was having a belt pulled tightly around your rib cage and the feeling that everything is tightening and closing in on you, and you don't know how far that restriction is going to go. You're feeling yourself forcing air into your lungs. Also, the idea that exhaling is also not easy-- when those intense moments occurred, I did fear that things were going downhill.

Scott

I'm just hearing you describe it. I'm getting a little bit panicky myself. When you can't get your breath-- there's nothing more important at that time.

Kimberly

Right. Also, when these things were happening, hearing stories of thousands of people dying from this did not help.

Scott

Yeah, there's already a level of anxiety. All right. Well, you are a medical professional. Can you describe what you do?

Kimberly

I have my doctoral degree in neuropsychology. I work with patients that have altered mental status. I get consulted all around the hospital. I'm a hospitalist. If somebody comes in and they have difficulty discerning where they are, they're disoriented, they're unable to focus, they're unable to make decisions, and they just don't look quite right, they would call me in. I do lots of consults like that - just kind of quick in and out differential diagnosis types of referrals. That's my main job.

Scott

So obviously, you're familiar with medicine and the hospital environment. You're also affiliated with the CDC emergency team, right?

Kimberly

I am. That really plays into my story because that is the piece that really messes with my own head, if you will. Earlier on in this pandemic, I was already doing things before anyone was even thinking about doing them. People were making fun of me for being so cautious of becoming infected with any type of virus, let alone the COVID-19 virus that hadn't even come to our state yet.

Scott

Would you call yourself a germaphobe?

Kimberly

Not in normal life, honestly. Here's the thing. It wouldn't be so groundbreaking - to me, at least - if I were a germaphobe. I will say, in the context of this situation, 100%. So, when I needed to turn on the germaphobe piece of me, I guess it's in there. It does live in there, but I can turn it on. I'm also someone who loves to go camping - I mean, backcountry camping and being out in the wild with nothing. I'm fine with that. I like that kind of thing. To answer your question, in the

context of what we're talking about, I absolutely did become one. As you pointed out early on, it was because of my work with the CDC right after Ebola occurred in 2013.

Scott

That's what gives you a sort of an unusual or different perspective on this because you were involved with the Ebola outbreak in 2013, in Guinea, West Africa. You were already familiar with stuff like bio containment tents, wearing a hazmat suit, and being fitted for a respirator. I mean, the general public would have no idea about using those things, but you're already familiar with them going into this.

Kimberly

Yes. And I was. The reason why that stands out so much to me is that I am a sheltered person. I mean, I've never seen anything like that. I never expected to be doing that kind of thing or being around that kind of thing, even within my field of practice. The first time I saw those tents go up - I will never forget it - I thought, "What is that? What is that tent outside of the emergency department?" Then, I remember getting this message. I had to go be fitted for an Alaska American respirator, and I was assigned a hazmat suit, which is lovingly called a bunny suit because it's the big white plastic suit. They have to fit you, obviously, to some degree because there can't be any possibility for error to come in. So, I seriously considered my line of work after that, but I chose to keep going. We made it through, fortunately. I mean, it sounds super cool. I would not say I was doing any type of frontline work with that at the end of the day, but I did get involved after that with the CDC and I became part of their emergency preparedness team, which involves taking calls weekly - they're just group calls - that discusses prevalence rates and things going on around the world. Do we know what are we seeing? What types of infections are popping up? Is this something we need to be concerned about? So I kind of had an "in", if you will, that this thing was not going to be the typical flu season or something that we wouldn't remember.

Scott

You were aware of this before. Like, right now, as we're talking, it's not unusual at all for people to be aware. If you go out in public, you see people wearing masks and gloves, and distancing themselves and everything. But you were aware of that and starting to do those things well before the public was even aware anything was gonna happen. I'd like for you to describe your, sort of, disinfecting process or what you would do, especially at home, to try to avoid some type of an infection coming in.

Kimberly

I have been following the outbreak in Wuhan since January on these calls. In late February, the Director of the CDC got on the call - which never happened - and had really up the urgency and tone of these calls, and eventually told us that he had sat down with his family and had this conversation about how there was going to be a significant disruption to their lives - meaning social isolation was likely going to occur. They talked about tele-education, tele-health services, and really trying to keep certain institutions in place, but not in the public sector. That is when I decided, "Okay, I'm applying these infectious control methods now" because from what I'm hearing in Wuhan and the risk factors - I have two of the dearest people in my life - my parents are at high risk of having severe complications, if not death, and I feared certain death for my father if he were to contract the virus because he meets every criteria of serious underlying health conditions. So, I would probably say that late February or the first week into March was when I became a germaphobe.

So, here are some things I did. I use blue painter's tape - I carried it around with me - and I measured exactly 6.5 feet from my chair or my position in the room to where my patient would be evaluated. If the exam room was not big enough for some reason to complement that new rule of mine, I refuse to do any evaluations there. So, there were two different lines, obviously. No one was able to cross their parts of the line - I stayed on mine. - and I said it was for their safety and mine, which was true. So this was going on right at the beginning of March. I wouldn't even walk in the hallways where someone else was walking or even think about walking. I would stop in the middle of my walk and act like I had a call coming in. I mean, I felt silly, but I was really concerned.

I began sanitizing everything - any surface where this virus could have landed - particularly anything metal or cold. The bathroom is almost 200 feet away from me - I'd go and do their door handles, desktops, keyboards, landline phone, receivers, my cell phone, thermostat buttons, my dictation microphone, and the faucets in the bathroom. When I say sanitized, I'm not talking about the typical spray you can buy at the grocery store. I was using hospital-grade CaviWipes. I mean they're EPA registered and efficacy studied as a product that we use in the OR. Coronavirus has existed for many years. It's a group of viruses and COVID-19 falls within that category on the product. It says that it can reduce human Coronavirus by 99.9% on hard surfaces, so that made me feel good.

I started wearing scrubs to the hospital. When I got home, I had a decontamination area in my garage. I would take every last piece of clothing off - my shoes, my hair tie, everything - and would leave it in the garage for 24 hours. After that, it would go straight right into the washing machine. I showered each and every time I left the house. My hair was and is probably still dry from washing it every day. We would even wipe off our mailbox. People don't think about what they're touching. We would wipe down any touchable surface. My husband was wearing a mask and gloves to the grocery store. We would wipe down our cereal boxes - the cardboard ones - and they would become a very beautiful holographic tie-dye from these wipes.

Of course, I didn't have the CaviWipes at home. I do actually have Cavi spray at home, which is an odd thing, and we did use it. This went on before it was cool to do it with the Coronavirus. I mean, we looked like we were losing our minds. We wore latex gloves when pumping gas. We wore latex gloves to receive mail. We would not touch our mail for 48 hours. We would not touch Amazon packages for 48 hours. Even after that, we would wipe them down. We were trying to apply every preventative measure we could with the idea of keeping my parents alive. I hadn't even let them leave their home for 2 weeks before I even started doing that.

Scott

did they object to that at all?

Kimberly

My father is a Vietnam veteran and a cool, kind of, badass. I apologize for the word "badass". I mean, he deserves to be able to do whatever in the world he wants to do. Well, I have to say that any veteran would qualify for that term. I love my veterans, but he is not one to receive direction well, particularly if it impedes upon the freedom which he has fought for. It took a few times, but I think he could tell that this was not a flexible option. I kind of coined the term "voluntold" - they were "voluntold" that they would begin their home isolation, and they still are now, at least, 45 days into this.

Scott

Were you aware of any exposure that you had to this? Do you know how you might have gotten it?

Kimberly

To this day, I have absolutely no clue. There is no one I know - not one patient, not one colleague, not anywhere on the news that says, "This county..." Oddly enough, the county where my parents live, which is right next to mine, was one of the first to have a big explosion of Coronavirus in South Carolina - community-spread - and we don't go there. I mean, first of all, we don't go out - we have a young child. We really have no life.

Scott

Well, you could've caught it at Chucky Cheese or something.

Kimberly

We don't even do that, to be honest. We're healthy. We're pescetarian. We're picky about our food. I mean, when I just said that about going out, I was thinking about "Where do I stop to pump gas and where do we get our groceries?" - that's what I mean. We don't even pump gas or do our groceries there. That's all we do besides work. So, I have absolutely no clue how in the world could this happened to me. When people would make fun of me, it would make me feel secure and much better. I'd be like, "Haha, look at me. It's so obvious that I am so germ-free, that I have such respiratory hygiene, and all these things." They had no clue that we were wiping down our magazines with bleach at home. I thought how in the world could this happen to me? Maybe, up until even two minutes after I got the call that I had COVID-19 positive findings on my nasal pharyngeal swab, I don't think it sank in. I mean, I think it's still sinking in, even though I feel like I've almost died twice.

Scott

Then, you sort of had a last visit to your parents with you and your daughter. What was that like?

Kimberly

Yeah. I continued to follow these calls, obviously. I mean, I was doing much more than that at that point. I mean, that was my really my only inside knowledge. I mean, anybody could just tell - by watching the news and looking on the maps that show where positive cases are popping up - it was creeping toward the US. It was coming. I mean, there was no denying that. So I kind of did a self-assessment of my symptoms, and I decided that I needed to go see my parents. I hadn't seen them for 2 weeks already. By the way, my daughter just turned four but she was three years old at that time. They would keep her during the day, every day, when we go to work. Of course, because she's three, I can't expect her to practice social distancing, I can't expect her to apply all of these rules that we were applying. So, it just didn't really seem to make sense that we would keep her going to their home. She could be a vessel for the disease to travel. If I or my husband were to get it - of course, I'm at the hospital - then she would get it and take it to them.

Anyway, I felt great. I decided I would go see them, and I did. I think it was Monday, March 16th. My daughter had been going over there every day so until then, so I said, "I'm gonna take you to Happy and Grammy's house" - that's what she calls them - "This is the last day but we'll see them again very soon. So, I dropped her off, which I normally don't do, and I did not go anywhere near them. I was in the house but I didn't touch anything. I know exactly where I stood. I'll never forget it. I kind of leaned up against the counter at one point and I didn't hug

them. I didn't do anything. I obviously had no symptoms - I wasn't coughing or sneezing. I felt fine. When I left, I even said, "Mom, you have to promise me to wipe down the area where I was with Clorox wipes, just in case, because we have respiratory droplets when anyone talks." Okay. I mean, it seemed ridiculous, but she did it. Then, that was it. It just so happened that the next very next day - Tuesday, the 17th, St. Patrick's Day - was my day one of COVID-19 symptoms.

Scott

Tuesday, March 17 - day one. What were your symptoms?

Kimberly

First thing in the morning, I woke up and I had a sore throat. I had a full feeling in both of my ears, very much like you would have when you're getting sick. I did take my temperature and I had a low-grade fever, which kind of fluctuated between 99.8 and 100. I want to make a point about that. For most people - they watch the news and get a message from their doctor - one of the symptoms that everyone is supposed to be looking for is "Do you have a fever?" Take your temperature. What happens if someone doesn't know what to do? They Google it. What is the temperature? How do you know if it's normal? Well, body temperature is a very subjective measurement - we'd say it's idiopathic and it's unique to each person. I run very low in terms of my body temperature. I'm that person who's always cold and annoying. I have very low blood pressure. I'm just, I guess, a Zen person - I don't know. It takes a lot to get me to sweat even when I work out or something. So, 99.8 to 100 was scary to me. I mean, when I say low-grade, it's still technically considered that but that's clearly a symptomatic presentation. I mean, that's not good for me. Beyond that, I had burning in my upper chest which was not like anything I ever had before. It was right under my collarbone on both sides. Every time I would take a deep breath, it was like giving fuel to a fire, if you will. Like, if you blew on some hot coals, you would see them light up. That is the visual I get.

Scott

Would you compare it to heartburn? How was it similar to that, if at all?

Kimberly

For me, heartburn is more centralized. I've had heartburn, kind of, travels up and down. This traveled laterally. It went all the way across the top of my chest and was not centralized at all. It wasn't deep. It was almost very much, like, just right under the skin. For me, heartburn seems to persist at the same level of intensity and it's just there. There's nothing you can do to make it better. It's just, like, "Ughh. What did I eat? I better sit up or take one of those pills." This was clearly exacerbated by respirations or something to do with breathing. Of course, I thought I was being psychosomatic because that is a term I identify with. I'm not necessarily a germaphobe at my baseline, but I am the person who reads the back of the pill bottle and I will have every one of those symptoms. Not only do I know this, everyone who knows me well knows that it's true. I mean, it is almost ridiculous. Here's the thing, psychosomatic people-- it's a real thing. I mean people can have conversions of blindness. I mean, it's just one of those annoying things about me. So, I thought, "Are you kidding me?" I mean, I was so mad at myself for being so ridiculous, so I did nothing.

Here's the thing - I also did not go see any patients - I stayed home. So, in the back of my head, I thought that this is weird and the fever was very odd. I still wanted to see what was going on, so the next day on Wednesday, the 18th - which was day two - I ended up calling my doctor and decided to get a test. This had not gone away, but I could distract myself and feel better. So, I

went. Here's the thing I want to clarify. At that point, particularly, on the 18th of March, it was very difficult to get a test. We didn't have many tests, at least. The reason why I was able to get the tests and also get such a quick turnaround is because of my role as a hospitalist, and that I have a frontline job where I see a lot of patients. It was a different way of processing the test. My test was sent directly to the HEC instead of a private lab, so that kind of explains why that happened so quickly for me, which I'm thankful for. So, I went and did that.

Scott

Can you describe what is the testing process actually like?

Kimberly

Sure. I think I was watching one of those press conferences with the president who had said something about, "It's not a pleasant experience." I thought you are right - it is not a pleasant experience. It's a nasal pharyngeal swab. I would encourage anyone who's not familiar with that to just Google that term, and you'll see how far back this Q-tip-looking thing, which is longer than a Q-tip - add, like, 10 of those and glue them together at the end. It goes through your nose, I guess I should explain. So they take that, pick one a nostril, and it goes back deep back in the nasal pharyngeal region to get a good swab of your mucous membranes. I mean, it's horrible. It's just not a pleasant feeling. It's just counterintuitive to what you want happening to you, particularly when you're not feeling well. Your brain is thinking "That's not supposed to go in there. Okay, that's far enough. That's fair enough. That's fair enough."

Scott

We're going to have the video of when you got the test. I know you have the video - I'll put that on the website. I could see that your head was instinctively backing up because the person kept pushing it further and further back.

Kimberly

You're right. It was an instinctive thing. Yeah.

Scott

Yeah. Normally, you don't stick long things into your nose. So, did it trigger something like a gag response or just extreme discomfort?

Kimberly

I'm trying to actually think of what part of the brain I should be able to tell you this. I mean, it would be multiple parts of the brain. I mean, I obviously knew exactly what I was going to do. I even made a comment to my husband - I think that's why he had the video ready - of how horrible this was going to be. It's not like it surprised me. I think the process is just an intuitive retreat - fight or flight response. It's my autonomic nervous system saying that was happening. I don't know if the audio picks it up, but he was in the background saying "Don't pull back." I was like, "Oh, let's do it to you now."

Scott

Yeah. Easy for him to say.

Kimberly

Exactly.

Scott

You didn't get the results that same day, though.

Kimberly

No. Apparently, it was that day when cases started to really pick up in South Carolina. I mean, I think there were maybe 20 cases the day before. I believe it had doubled on the day that I got tested - well, it isn't an exact double but I think it was 48. I remember seeing that number - hopefully, I'm not way off on that. The reason why I'm saying it is that they had a 6-hour turnaround time for the HEC just before I got there. When I got there, they said, "More like 72 hours." It turned out that I got it, I think, within 48 hours or so, but I had to wait. In that waiting period on the 19th of March - which was Thursday and day three of my symptoms - I felt like such a silly-pants. I say that because I have a toddler. We don't say bad words, so I felt like a silly-pants. I felt guilty. I felt embarrassed. I was thinking "This is just I know how you are. You don't have COVID-19." I mean, I had colleagues telling me, "You do not have COVID-19. You are worrying. This is what you do you." and I was reassured. I mean, of course, they didn't tell me with 100% assurance. I mean, I was neurotic. We just all decided that I'm neurotic and that I have wasted a test. No one was being mean to me, but I was being mean to myself. This is ridiculous.

Going into day 4, which was Friday, the 20th, I was waiting all day and there was nothing. I was thinking, "Oh, gosh, they probably got it back. It's negative. They have to call all the poor people who have this." Finally, at 3.30, of course, my symptoms are still there, but I was thinking I'm crazy because I was still watching the news all the time. I was really into this and trying to track what was going on at 3.30 when I got this phone call. I mean, I can hear it right now. It was a colleague of my doctor in the same practice, and he said, "How are you feeling?" I thought, "Okay, he's either asking me that because he's going to, kind of, make fun of me later on or he's concerned about how I'm feeling." It kind of sounded like he was concerned about how I was feeling. I was, like, "What is this? I still have the symptoms. What's going on?" He said, "Well, your results are positive." I said, "What???" The next few minutes are a blur, honestly. I mean, it's not anything like getting a cancer diagnosis by any means - fortunately, I never had anything like that - but I hear stories and patients told me about after they're told about a certain diagnosis - Alzheimer's disease, for example-- I do that very often. That's right up my alley.

Scott

So you always remember that moment when you were told,

Kimberly

Yes. Here's the thing - I'm cognizant of that when I give serious diagnostic feedback to patients and their families. I think that they're not going to remember whatever I'm saying right now. So, I've experienced that to some extent, but I wasn't worried about myself. Of course, he gave me the right instructions of, "You need to go to another room in your house. You are now formally quarantined. You should be eating on paper plates and plastic utensils. You should use a different bathroom. You cannot be around your husband." I mean, something was being said - I'm sure that's exactly what it was. Later on, it was clarified that this is what he said. But all I could say over and over again was "My parents. Oh my gosh, my parents! I was just with them! I have just killed my parents." I mean, this person who called me was so friendly. He said, "Do you want me to call your parents?" I said, "Yes." It was just horrifying. There was nothing I could do. Usually, no matter what's going on, I can call someone who's a specialist in the field or I would have a friend who has a friend who has a friend who I know is at Johns Hopkins or wherever, and can make this happen. We'll get you there overnight. We'll get you admitted.

We'll do this. Now, there was not one thing I could do but wait for 14 days to see if they were going to get sick and likely die. Yeah, that was a very tough day for me.

Scott

So you are immediately isolated from everyone who did the work in your case?

Kimberly

Well, if you've seen the video, which I believe you have - hopefully, the listeners will get a chance to see my lovely video that my husband took - you'll see that I was sitting next to my three-year-old at that time.

Scott

That was during the test?

Kimberly

During the test.

Scott

Right. Because it was a drive-thru and you were in the car.

Kimberly

Yeah, I was in the car. My husband was driving. I mean, she's a three-year-old. Her mommy rocks her to sleep every night. I knew, at that point, the typical onset of symptoms in terms of how they present is usually day five or six after you have contracted the virus. So, thinking back, I've already exposed them to this virus. Now, here's the thing. The rule is that you should quarantine no matter what. We did attempt to do so - I will tell you that it became such a dramatic horrible thing for the three-year-old. I will also say that concurrent with my fever, on day one, my husband and child also had fevers. Toddlers and children, especially, can get very high fevers - she didn't. This was not a high fever. Usually, what my pediatrician friend and her pediatrician told me - and what I have come to know from just being a mom - is you look at their behavior. I mean, you can have a child with a temperature of 101 or 102, but you would never know it unless you took it - that's a good thing. So, she was not lethargic. I mean, she was actually happier than ever because Mommy was around. So, there was no concern in that regard about them having it. We kind of assumed that we just had something else altogether as a family.

Once I got diagnosed, I assume and I still do-- here's the thing, at this point, I would pretty much bet a lot of money. I mean, they certainly have developed the antibodies at this point. They have never become symptomatic. I think that they are two examples of people who would be silent carriers. I had to take their temperature because I wasn't feeling well, and that is how we incidentally discovered that they had fevers. So, we all agreed that they were exposed already. I mean, this thing is so contagious - 10 times more contagious than the flu. There was no way. So, once we gave that a try, it was making things way worse for everyone. We did not follow that. I don't advise anyone else to do what I did - I'm just being honest. Thank goodness, it worked out okay for us. Here's the thing - we have stayed in our home, we haven't left our home, except to go to the hospital twice. So, we're certainly keeping anyone else who hasn't been exposed, but we knew it was in the home. We had already been exposed, so we did not go through the typical quarantine procedure within our own home.

Scott

In some cases, it's just not possible or, like you said, it wasn't feasible. They've already been exposed.

Kimberly

And they already had fevers. Yeah.

Scott

So do you think each of them had a very mild case of it and then recovered?

Kimberly

Yeah. Not even mild - they're asymptomatic. Other than the fever, there was not one cough and not one change in energy level. Nothing.

Scott

You took the brunt of it for the family.

Kimberly

Hey, I would do it a million times and I'm thankful for the way it turned out. Honestly, it's funny that the name of your show is "What Was That Like". I almost feel, like, for this episode, we need to change it to "What Is That Like" because I'm clearly much better. I would not have been able to formulate a full sentence even a week ago. I certainly would not have been able to be so talkative without losing my breath.

Scott

I know you've been through the wringer for sure. Yeah. Can you just kind of take us through from that point? You've had, like, 28 days of symptoms. Obviously, you're a lot better now, but you went through quite a bit. Can you just kind of take us through what happened from that point?

Kimberly

Sure. I'll condense some things. I've been keeping a journal just because, first of all, that's what we would do. If I had a patient, I would ask the patient to do this because this is a novel virus and we're learning about it. I mean, literally, anyone in the world is on this journey with us. Along the way, we've learned so many things. So, I've become an expert and a consumer of this, so I am keeping track of it. So, we move on. In the initial few days, I was just frantically calling my parents every morning. Of course, I have them on a routine where they would take their temperatures and alert me of any symptoms that either of them is having. Their temperatures were beautiful every time they've reported them to me - there's been not one scare. As we get older, our body temperature lowers. I mean, that's just what happens in general. Both of them were running in the low 97 range every morning. They have seasonal allergies. We're originally from Florida. After moving a couple of states up in South Carolina, everything's covered in yellow powder this time of year so that complicates it for everyone. "Oh, I think I have allergies. I'm sneezing." That's been a problem, honestly. Coughs, sneezes, or runny noses were normal. So, there was nothing that was going on. Every morning, I would call and say "What are your symptoms?" That was my main focus. Then, of course, I would focus on myself and think, "Okay, what's going on with me?"

Scott

Yeah, regardless of what's happening with you, hearing that they're still okay is the best news you could get.

Kimberly

Yes. I'm an only child, so I have the fortune of having parents who care so much about me. So, if I'm sick, my mom wants to know if I'm okay. So, I was thinking that the stress of that was going to make her immune system decrease. I was trying to really guard her against anything. Honestly, when we would FaceTime, I would pick certain times of the day when I could breathe well, and I would try to make myself appear like I was okay. I did that for two weeks and it was very difficult. Every day, every morning, I felt pressure around my lungs like something was sitting on my ribs - not my chest, but my ribs. My chest would burn and continue to burn. Something was, like, sitting on my ribs and that would worsen if I were to try and lay back further than a 45-degree angle. Thank goodness, we have one of those beds that, kind of, does all the electronic stuff. We had to have it up all the time I was in bed.

On day 4, that's when the shortness of breath really began. I could not really lay back and breathe at the same time, which was very scary. This continues to go on. I was staying in bed. I was really trying to help my body heal. I mean, not that I could get up and do anything anyway, but I was making sure that I was taking my vitamins and still eating. At that point, I had not lost my sense of smell or taste. Other than that stuff I was doing, I was hanging in there. I thought, "Okay, this is not going to be a big deal because this goes away for people." I mean, I'm seeing it on the news. I'm hearing it in these medical reports that patients my age-- I'm 39. I don't smoke or drink. I have not one health problem. There's nothing. This is supposed to be no big deal.

On day 6, which was the 22nd of March, I called my parents. They're doing all right. I'm like, "Alright, here we go. This is going okay. That was, kind of, a mile marker because most people show symptoms by then." So, that was somewhat of a relief. But I was not going to be relieved until we hit day 14 because that's the true incubation period. I got the call from the HEC on day 6. They said, "We're going to arrest you if you leave your house." They have to send you the formal letter - I've never had a letter like that, so I'll always keep it. It said it was concerning because you can't leave your house until 7 days after symptoms begin and 3 days of having no fever, and it really did not go into much detail. At that point, I was really not feeling well. I was not sleeping well. Obviously, I couldn't lay flat. I like to sleep on my stomach or my side.

I was concerned only because - I followed the course of the virus so, at that point, I knew that - the virus persisted a lot longer than what they were talking about. At that point, there was talk about symptoms worsening on day 8-9 after symptoms had appeared to resolve for a lot of people. So, I thought, "Why are they sending that out to people? People are gonna go back out into the community and reinfect people. But I just didn't have enough energy at that point to combat it. I did send it to some colleagues with concern and hope that they would look into that. Anyway, I got the letter. I started having some nausea. Other than that, symptoms go on.

On day seven, I started getting some nausea and more nausea and chills. I was not doing well on that day. We were a week into it. My husband gets the stethoscope and listens as best as he can. I have something called atelectasis which is, kind of, shattering when I breathe in. That's something that can happen when people are in bed for a long time. We didn't want that to develop into pneumonia, so we called the doctor. We talked about going to the hospital at that point. I couldn't say more than three words without getting dizzy and blacking out. It's amazing to think about what your body does on a normal day, compared to that amount of decompensation. Three words was like a marathon. When I say blackout, it's like how you'd get

peripheral vision loss, so you'd know it's coming. I mean, I didn't particularly pass out, but I would have if I would have tried to push through.

Scott

If you went to the fourth word...

Kimberly

Exactly. Fourth word and you're done.

Scott

I find that amazing. I mean, you could say a whole sentence and it would take zero effort at all. Then, for just a few words, you were obviously pushing air and forming the words coming out of your mouth. So, there's some effort but we didn't even think about it. It's amazing that it could have that effect on you.

Kimberly

Right. Even then, I thought, "There's no way this is going to be so bad for me." I mean, I have to say, too, that I really did not want to go to the hospital because I was worried that my parents would worry. This is not a good self-care skill, by the way. Do not do what I do. I couldn't live with the idea that they would know I'm in the hospital where you can have no visit. I mean, it would just have been horrible. There's no one that they could call to even see if I'm still alive. So, I was trying to really push this thing and stay at home. I mean, I couldn't walk and talk at the same time at all. So, I don't go to the hospital. The next day comes and the symptoms persist. It was day 9 when I started having almost, like, a mix between disorientation and hallucinations at night. Of course, this is really right up my alley. I was assessing myself as this was happening. Sometimes, I was thinking, "Is this delirium?" It was scary. I was scared. It was scary stuff, misperceptions of things.

Scott

This is while you were sleeping with these dreams? Or were you awake when this was happening?

Kimberly

That's the part that was so disturbing. I was having very vivid dreams, but this was happening. It would start around 9 o'clock at night, and I would not fall asleep until midnight. So, you would think that you see something out of the corner of your eye, but you would misperceive. I'll give you an example. One time I looked, when I was rocking my three-year-old, I looked down at her and her eyes looked like they were 10 times bigger than they were. I mean, I can laugh about it now, but I'll tell you that my heart started racing when it happened. I knew it wasn't real when it was happening. I thought, "What is my brain doing?" They looked like the LOL surprise doll eyes you'd see on TV. It was just remarkable to be going through that. It would worsen as the night would go on. Then, I would come out of it in the early morning hours. I was almost embarrassed to tell anyone that because I had not heard of anything like that.

Scott

That's not a symptom that you hear about for most people who had COVID-19.

Kimberly

Right. But I will say that we are starting to hear about it now. This virus is a multi-systemic traveler in the body, so it has been known to affect people cognitively in multiple different ways

now. But at that point, I was really embarrassed that this was happening. By the way, I did not have a high fever. It was not true delirium. It was not dreams, per se. I think it was something called hypnopompic and hypnogogic hallucinations - 2 very long and nerdy terms. That has since dissipated and gone away, so I don't have that anymore, but that did start at that point, which was not a nice thing to layer on top of everything else.

Scott

When that happened, were you more scared at what you were perceiving? Or were you intrigued from a clinical point of view as a doctor?

Kimberly

Yeah, I'd have to say the latter on that. I was analyzing this process. I was discussing it with a select couple of colleagues who I trust very much and we were, kind of, just processing it. Is this a dopaminergic process in the brain? I would definitely say the latter. I mean, it was kind of exciting to think about. As long as this doesn't go overboard, I kind of have some insight into what patients experience when they are psychotic.

Scott

Yeah, it gives you a unique perspective into what they might be experiencing. Yeah, that's interesting.

Kimberly

Absolutely. I'll just kind of get to the exciting parts of my timeline. The next day, I went to the hospital. This is not the typical go to the hospital that we're all used to. You got to call ahead and say, "I'm one of these positive cases." Fortunately, I had a few N-95 masks, so I was able to wear one. I wore a surgical mask over that. I wore gloves. I mean, I kind of suited up to protect the doctors and caregivers there at the hospital before I went in. I woke up that day and my pulse oximeter had measured that I was not getting good oxygen - it was in the low 90s. I was just not doing well. So, I needed to go. Before I left the house, my saturation - which is how much oxygen you have in your system - was down in the 80s, which is not good. I had fatigue and dizziness. I was in a lot of respiratory distress. So, I got to the hospital and they did a chest X-ray, they did an EKG - they did a really good workup - they took my blood, and I stabilized. It was, like, an episode I had all morning. Then, once I got to the hospital and got settled, the tests were being run. I kind of evened out and got back to my baseline, I guess, on day 11 - whatever that was. I mean, I wasn't back to normal by any means, but I wasn't in such distress. I didn't have pneumonia or anything. It was remarkable at that point.

Scott

They got you stabilized, so you didn't have to be admitted.

Kimberly

No, I stayed there in the IDI. They watched my pulse ox and it would go down if I were to move around or if I were to do anything. They did say, "We can observe you overnight." and I said, "Now, I'll come back if I need to. In any other situation, I certainly would have probably been admitted and kept, but they didn't want people in and out unless it was dire because they never knew when they would get an influx of patients. Also, my immune system was compromised at that point and I didn't want to pick up anything else from the hospital. So, moving into that weekend, I really start to try and move around as much as I can. I did have atelectasis which was a positive finding on my exam. So, we didn't want that to move into a pneumonia presentation that weekend, which was the 28th and 29th of March - that was day 12 and 13.

That's when the loss of smell and taste began. I started also having pain in my neck and my back, as well as severe headaches every single morning. Of course, I lost my appetite because nothing was exciting anymore. That has persisted - maybe, not at the same level of severity. I still don't have my taste and smell back.

Scott

I've heard from other people that it takes a while for that to come back, even after recovery.

Kimberly

Wow, how long do they say?

Scott

Well, I think it varies.

Kimberly

Yeah. Well, clearly that's the way this virus is. So, that's been the least of my problems, but it's just another odd thing. With the cortical activity and the brain being involved, is it my taste buds or is it the smell? I mean, what's the source of the impairment? Is it based on the brain? Of course, this is my thinking. I mean, instead of saying, "That doesn't taste good", I started thinking, "What's going on critically in the brain?"

Scott

Right. I mean, if you hold your nose while you eat something, you can't taste it, right?

Kimberly

Absolutely. Those things are very much interrelated. Certain strokes and conditions can cause one or the other. But you're right - if your smell isn't there, things are not going to taste the same. Anyway, going into the next week, which was Monday, the 14th, was doctor's day, which was not very exciting for me. I remember that, last doctor's day, I was presented with a nice little gift and I was with my staff. Anyway, it's just a very different day but I started feeling better. I started feeling a little better that day. I was up and I was actually doing some things around the house - not anything crazy. I would take my cup to the sink, which is a big deal and just progress. I felt better. I had a little energy. Of course, I had this whole discussion with my husband that, "I am developing the antibodies. I am not going to be immune. I'm going to volunteer for frontline work in New York City. I am going to go to the hot zones. I'm so optimistic." I was just having these exciting plans and ideas because I was starting to feel better, not because I was manic or anything. I just felt better. I slept well. I was able to fall asleep easily. I didn't have any of those weird experiences. So, things were going well.

In the middle of the night, I think I did have some odd dreams, but it wasn't like it was before. The next day, I get up and my fever was the highest I've had. I thought, "Oh, did I overdo it?" I really wasn't doing anything crazy. It was the weirdest feeling. My headache is the worst it had ever been. I have pressure and heat behind my eyes. The pain in my neck and back is intense. I still have no taste or smell. It's the worst it has been. My appetite is gone. I'm very frustrated at that point because I had such a good day the day before. However, at the same time, it was official that my parents were not going to be inadvertently murdered by me. They had met the mile marker of the 14-day incubation period and that got me through that day. I also decided to tell them how bad I felt that day. They were not particularly happy with me keeping it from them, but that was it. That was a remarkable day. Those symptoms persisted. The next night, I actually had to ask for help pulling the blankets over me. I mean, that's how weak my limbs

were. I'm a strong person. I mean, I don't work out every day, but that was just very odd. That has obviously gone away at this point, but that was scary to me. My body was really decompensating. My nausea was horrible at that point.

Moving into the next few days, I was still having these experiences. I was really starting to analyze what is going on and why is this happening to me. Granted, I didn't have a mild case. Particularly, young and healthy people seem to be getting better after two weeks. So, I did not really understand why this was happening. We've moved on to April now. This is still happening. I was losing my, kind of, motivation to be one of these frontline workers. I realized that I cannot call my case mild by any means. Then, we got to April 4 which was my daughter's 4th birthday. I sang Happy Birthday twice and we did it over Zoom on one of those group video calls. I probably should have gone to the hospital that day, but I didn't. I had to go to bed. I could not breathe. I developed a croup cough. If you've ever heard that, it's like a seal barking. That's the day that I could really feel my larynx and my whole trachea tightening and becoming inflamed. It felt like somebody was cutting off my oxygen. I mean, my pulse ox was 91, so it was being cut off. I did not go to the hospital. I was determined to not be in the hospital that day - it was my daughter's birthday.

Scott

I think it's becoming, kind of, clear that doctors really do make bad patients.

Kimberly

Yes, we do. We don't want to be patients. That's exactly right. I woke up again the next day feeling a little better. I had no headache but I could lift my arms. I slept great that night. I mean, it's just a roller coaster of symptoms. Then, all of a sudden, my husband came over to me in the middle of the day and stuck a thermometer in my mouth. My temperature is up over 100 again and I started to have body aches. Here we go downhill. Literally, if you picture yourself on a roller coaster that just goes up and down, I was on it.

Scott

And what day was this?

Kimberly

This was day 20. This went on and on. Fast forward to day 23, which was Wednesday, the 8th, I was getting a new symptom. I had it a little bit the night before. Now, this is a different type of belt around the chest. I could actually see it and I still have this pressure, swelling, and tightness right under my upper ribcage and my upper abdomen area, kind of, where your first two ab muscles are protruding a bit. I'm a pretty thin person, so you can see this. It feels like someone has blown up an inner tube around that area all the way around my back, about one inch below my sternum, and it's a horrible feeling. It's just not a good feeling. It's painful. It's more pain than shortness of breath. So, I did go to the hospital again the next day because of that. My fever continued - that day, it was almost 102, which is not good for me. Previously, before the 8th, which was day 23, I started to be able to lay back a bit in bed and still breathe, which was exciting. However, on day 23, I was right back up to, like, 80 degrees. I could not breathe, so I was very, very frustrated. So, I went back to the hospital.

Scott

Yeah. We had spoken, I think, on Tuesday. You and I were gonna have this conversation for the podcast on Thursday. I think I sent you an email or a text message, but I didn't hear back and I

thought, "Oh, man. I wonder if something has happened." Then, I got your text saying, "Yeah. I had to go back to the hospital."

Kimberly

Yes. Do you remember how certain I was that I was fine?

Scott

Yeah. You were saying, "Yeah, I'm over it now. I can talk about it now because it's all done."

Kimberly

You were being so kind to say, "If you need to take a break..." I said, "I'm not gonna need a break. I'm really feeling better." Then, I had to text you and say, "I'm in the hospital. We'll need to reschedule." So, there I was, again, 93 on the pulse ox. I believe I sent you a picture - you can see the 93 in the background. Then, it went back up to 100. I did get diagnosed with costocondritis and pleuritis which is essentially swelling and inflammation from me forcing breaths for over 3 weeks into and out of my body. So, some things - the lining of my lungs - are swollen and inflamed. It sounds scarier than it is, but it is painful. Honestly, out of all the things that could be, I was happy to have that diagnosis. I was again discharged. I'm still dealing with that. Overall, I'm continuing to improve. As you can tell, my shortness of breath has dissipated significantly. I certainly couldn't talk like this and walk around at the same time, but I'm talking a lot and fine. In general, I'm feeling so much better. I do have the pain but, hey, after everything I just explained, I will take it.

Scott

Even after you got out of the hospital, you said there was a scary episode on Sunday morning, which would have been day 27. Can you describe that?

Kimberly

This was odd. I mean, I would imagine it would be like someone with asthma having an asthma attack. I mean, I don't know. It was like my throat was closing up. I could not get air in and it kept happening and happening. I don't have an inhaler. I mean, no one has. I have not taken one thing until I just got the inflammation diagnosis - nothing. I haven't taken any of these new drugs they're talking about to treat COVID-19 - hydroxychloroquine azithromycin. I haven't taken anything. I didn't get prescribed an inhaler - some patients do, just as a preventative measure, and I'm fine with that. I was scared. I mean, we actually looked up online, "Can we get an inhaler really quick? Where can we go quickly?" I hadn't even thought about it, but it went away after about 15 minutes. That was frustrating again because I have started to feel better again and it was very brief. So, I was hoping that it would, maybe, be the last little blip on the radar for me. I don't know.

Scott

You certainly paid your price. I mean, as we record this, I think today would be day 29. Obviously, you've been able to tell the story. We've been talking here for more than an hour and you sound like you're okay.

Kimberly

Yes, it's nice for me to see you too. Thank you for that. I do feel great. I'll probably pass out when we get off. I'm just kidding.

Scott

Well, I hope not. If you do, don't tell me.

Kimberly

I won't. I signed that release. Don't worry.

Scott

If went back to the beginning and knew what was gonna happen over the next few weeks, would you have tried to have some of that treatment or some of the medication to fight off the infection? Do you think that would have helped?

Kimberly

I guess we can speculate about a lot. Here's the thing - it has helped a lot of people, and I'm so happy to hear that. I'm very much a research-based individual, both personally and professionally. We don't have the data to support any line of antiviral therapy yet. Who knows? What if it would have made things worse? Honestly, at the end of the day, I'm happy. There are so many people that have lost their loved ones. There are so many people who have perished themselves in a very painful and horrible manner. I'm so thankful that I haven't inadvertently, at least to my knowledge, infected anyone - certainly not my parents to the level that they would have shown symptoms - and that I'm alive. So who knows? There are clinical trials going on now for that and I'm very excited to see where we are.

Scott

Yeah, we're learning something every day. There are some suggestions being circulated on the Internet to boost the immune system like garlic, vitamins, and exposure to sunlight? Do you have any opinion on those things?

Kimberly

Oh yeah. Those things are "Perfect". They totally "work". I have so many people who reached out to me and asked me these questions. I think what people are looking for is hope and that makes us feel safe, just like how being so clean and so sanitized made me feel comfortable. I think that's what those things are, unfortunately. When it comes to true empirically validated scientific research, we do not have data that suggests that any of those new methods, food groups, or vitamins ward off Coronavirus or any virus. But we do know social distancing and washing your hands are things that we can do, at least, for some people that will mitigate the prevalence rates we're seeing,

Scott

Some people might say, "Look at Kimberly. She took all these precautions to stay clear and she still got infected. So, what's the point?"

Kimberly

Right. Well, you have to remember what I do. I see a lot of patients. So, despite my little six-and-a-half foot quarantine within the same exam room with people, respiratory droplets travel. There are people that have this and they are asymptomatic, not because they meant to. I think that's probably how I got it. There was somebody carrying the virus, but the person did not know it. We had a verbal exchange. Research has shown that aerosolization, which means once the virus is in the air, it can stay in the air for hours. So, what if I walked down one of those hallways by myself feeling good and I took a deep breath? Let's say, I didn't have a mask on or I wasn't wearing N-95 masks and I took a breath in when the person had been there two hours prior.

Scott

Or they could have been there 10 minutes prior. You wouldn't have seen them anyway.

Kimberly

Right. So, it could have been there. Unfortunately, I think I just had more opportunities for exposure, but that should not discourage people from following those same guidelines.

Scott

Why did you want to come on here and tell your story?

Kimberly

Not because I want sympathy. Not because I think this is super cool. It's because I still am in disbelief. I think it's important for people to know some of these factors and the messages we're getting, and I'm not blaming anyone-- I mean, I think our country, Canada, is trying to control this to the best of its ability. I think the main messages that people are getting are, "Do you have a fever? Do you have a cough? Have you traveled to China?" Earlier on, I didn't do any of those things. So, people don't know what a fever is for themselves. I just want people to think about this just because you're young. We saw all those people at the beaches on spring break early on and that's really when I decided to do something. We're now day 29 into this, but I started making a timeline. I started making this public on my social media. I'm not a social media person - you can attest to this based on the difficulty I had getting my earbuds things turned on for this interview. I'm private. I don't post pictures. That's not who I am. But when I saw that people think they're invincible - particularly young and healthy people - that's why I wanted to show that you're not and it's not going to be a mild case for everybody even if you're healthy.

Scott

If someone listening to this right now has tested positive, what would you say to them?

Kimberly

I would say that this is a very individualized process. We don't know why it's happening the way it is. We don't know, exactly, when symptoms are going to come, what your symptoms are going to be, or how long it's going to last. Just take it one day at a time and don't jump right back into life the day you feel better. Do not go back out into the community even if it has been seven days since your first symptom, even if you're afebrile, which means you have no fever. I would just encourage them to take it one day at a time.

Scott

You're right. There is no such thing as a typical case, but it seems like your case definitely lasted longer than what we're hearing from most people.

Kimberly

Well, in my first hospital visit, before I left, the IDI doc said, "We're hearing this thing goes on about 30 days." I think the medical community gets information a lot of times before it's shared publicly, which is probably okay. Who knows? What if we're just seeing that in our little area of the hospital? We have to, kind of, have information that seems to be the right information before we share it publicly. But I don't think it's unheard of. I think it's unheard of that it's less normal for a young and healthy person to have this type of response, but who knows? As I said, I'm just really excited to see what we're going to learn in the next several months - even in the coming weeks - from researchers.

Scott

Right. Hopefully, we'll have a vaccine in the long term.

Kimberly

Yeah.

Scott

We'll all get the flu shot and COVID-19 shot.

Kimberly

Yeah. Well, I fear that might be our new normal.

Scott

Well, Kimberly, thanks for coming on. I appreciate that and certainly wish you to have a continued recovery and be completely symptom-free.

Kimberly

Thank you so much for letting me share my story. And I wish everyone good health!

Scott

As I mentioned earlier, you can read Kimberly's article about her day-to-day symptoms. The link to that is in the show notes for this episode.

And for an update on Kimberly, I spoke to her again about a week AFTER we recorded that conversation, and she was still experiencing some symptoms that are keeping her from having a 100% recovery. Hopefully by the time you hear this she has actually fully recovered.

And I wanted to mention a couple of other items –

First, on this podcast I typically decline to cover stories that are primarily medically related. I have done a few early on, but overall I feel that most of them just aren't intriguing enough. Kimberly's story of going through the Coronavirus infection I felt was different because it's something literally everyone in the world is aware of, and all of our lives are being affected by it right now. And by right now, I'm talking about April of 2020. If you're listening to this episode a year from now or 5 years from now, maybe this story gave you a little insight into what it was like.

And the other thing I wanted to mention is that the What Was That Like podcast now has a YouTube channel! So if you like listening to podcasts on YouTube, you'll be able to do that. You won't see the guest and myself talking on the video though – the video portion will be the transcribed words that are being spoken. So far I have maybe a third of the episodes converted to video and loaded on the YouTube channel, and I'm working on getting them all up there but it's kind of a slow process. If you'd like to check it out, you can see it at [WhatWasThatLike.com/youtube](https://www.WhatWasThatLike.com/youtube). And feel free to subscribe!

So stay safe, and I'll see you again in two weeks.