

To,

The Editor

**Subject:** Submission of Manuscript for publication

Dear Editor,

This is to confirm that the article entitled “**Life, Death And The In Between**” submitted to the Indian Journal of Medical Ethics is original and has been authored by myself the undersigned. I, the author has participated in the work sufficiently to meet the ICMJE guidelines for authorship. I have prepared, read and approved the manuscript. The submission is not under consideration for publication in any other journal.

I have read the terms and conditions of authorship of IJME and accept them. There are no source of funding or conflict of interest. Being the sole contributor, I will be the author for correspondence.

Kindly do the needful and oblige.

Thanking you,

Yours’ sincerely,

Dr Raksha K

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## **Title: Life, Death and In Between**

### **Abstract:**

For life and death are one, even as the river and the sea are one.-Khalil Gibran. CoVID 19  
Pandemic has been a leveller of sorts; across communities, cities, and countries.

### **Article:**

As spring sets in, the famous flowering trees of gulmohurs, jacarandas, cassias, frangipanis, tabebuias and raintrees which adorn the city of Bangalore burst into full bloom. Meanwhile the gloom of the current COVID-19 global pandemic brings in a dark cloud and hovers around you right from the start of the day. It is a mixture of preparedness and panic for a health care worker in the frontline, having to step out of the confines of their house while all the neighbours watch curiously through their windows and balconies every morning and your dear ones wave a goodbye wishing you a good day.

This story that I wish to narrate started on one of those COVID-19 days in my hospital, I finished laboratory reporting and the COVID-19 Task force briefing. This happens every day with our Task force members wherein we look at and discuss our 'To-do' list and 'Action Points' for the day to day pandemic management. The hospital has never been this dynamic with changes in protocols and policies every now and then. All hospital staff despite a hundred challenges is putting their two hundred percent.

The Microbiology Section of the Laboratory receives a call from the Casualty.

"Can I speak to the Microbiologist?" says the Casualty Medical Officer.

"I am on the line" I reply.

"We have a possible CoVID case from a red zone here...and she has expired despite resuscitation. What do we do?"

Decisions at these moments have consequences, for the hospital, for the staff, for the attenders and for the dead. After a moment when my mind went blank, I recalled what I keep telling my hospital staff

**" THIS IS A PANDEMIC, NOT AN EMERGENCY"**

Therefore, we need to follow the set rules and guidelines. I make a call to our Public Relations Officer to find out the procedure. He speaks to the government health officials and the local administration. We decide to follow the new protocol as mandated; we plan on collecting a

nasopharyngeal and throat swab from the lady who left the world a few minutes ago. If the test result come negative, her mortal remains are handed over to the family and if found positive the health authorities take over the funeral procedures and contact tracing, so we are told. We explain this to the patient attenders who thankfully understand the situation after a detailed counselling by our Medical Superintendent and me. The Medicine Resident on duty collects the sample and the Laboratory Technician with the Ambulance Driver transports the sample to the designated Laboratory. The Casualty staff look after the mortuary arrangements until the reports come, we have no choice but to wait.

The patient's attender before leaving says with folded hands,

***“Thoda dekhiye na, aap log tho bhagwan saman hai, jo bolenge teek hi hoga”***

***[“Please look at this issue, you are like Gods, what you say must be right”]***

We acknowledge his remark with a sense of responsibility and helplessness which nobody would want to carry on their shoulders.

A day later.

Her report arrives.

**COVID-19 Negative.**

We hand over the deceased to the family.

An end to life.

The wheel turns slowly, but it turns.

We go about our duties. The Microbiology Section of the Laboratory receives a call from the Obstetrics Department.

“Can I speak to the Microbiologist” says the Resident.

“I am on the line” I reply

“Ma'am, the pregnant patient has come, she will get admitted today” she adds.

“Ok, we will collect the swab by afternoon, after the ICMR application procedures” I say.

All armed with viral transport media, swabs, ice packs, transport boxes, personal protective equipment we go to the isolation labour room which is newly designated for asymptomatic pregnant women from containment zones in the city who are to be tested fifteen days prior to their expected date of delivery.

While I speak to the residents on sample collection, new CoVID-19 protocols and infection control measures that are needed I see this lady in her mid-thirties sitting on the bed staring into blank space and lost in deep thought. We go near her and explain her the entire purpose of CoVID-19 testing and the procedure. In the middle of our conversation she breaks down.

***“Dactre, nange yenu roga illa, na mane horgade hogilla”***

***[“Doctor, I do not have any disease, I haven’t gone out of home”]***

We are in a state of responsibility and helplessness again. We try our best to make her understand that this CoVID-19 testing is in the best interest of herself, her baby and the healthcare workers treating her. In fact, the doctors & nurses themselves were quarantined and tested last week, and all are negative. This gave her some solace. The Obstetrics Resident on duty collects the sample, the Laboratory Technician with the Ambulance Driver transports the sample to the designated Laboratory. The Labour Room Staff Nurses looks after the to be mother until the reports come, we have no choice but to wait.

A day later.

Her report arrives.

**COVID-19 Negative.**

She delivers.

A start to life.

The wheel turns slowly, but it turns.

#### **ACKNOWLEDGMENT:**

The author would like to thank the two patients who taught her about life, death, and everything in between.