

A Positive Attitude to Negate a False Positive Test Result: An Intern's Experience with COVID-19

Vanessa N. Youmbi.¹

The Experience

I am an intern at a tertiary referral hospital in the Democratic Republic of Congo (DRC). On March 19, 2020, during a night shift at the emergency department, I received a 23-year-old Caucasian female who had been volunteering at a local pediatric health center for two weeks. She had presented with dyspnea, tachypnea, and was desaturating. Given her substantial travel history and the current public health emergency of international concern, we suspected her symptoms were consistent with COVID-19. This suspicion came after we had examined her without the appropriate personal protective equipment (PPE). At the time, the DRC had not registered a case of COVID-19 and thus hospital administrations had not yet made PPE available to all personnel.

As soon as we reported our findings to our consultants, drastic measures were taken. All personnel who had been in contact with the patient were immediately isolated. We were placed in separate rooms, away from the rest of the hospital. The room that I was allotted was chilly. My knees became weak, and I found it hard to breathe. The room was bounded by security tapes that read, "Caution, do not enter." The tapes designated a "red zone" in which no one was to leave or enter without clearance. I am an active and sociable person. Being in this room was a stressful experience. I spent my days imagining my colleagues at work, I was eager for this to be over, and I could not help but wonder what will happen if I had contracted the novel coronavirus.

We were told that the results of the patient's swab would be available in 48 hours. This moment was the most prolonged 48 hours of my life! I was impatient yet courageous at times. I thought to myself: "a positive attitude will lead to a negative result." Things became scary when the result came back positive. My first thought when I heard the news was, "I was silly for infecting myself and putting the rest of my team in danger." Upon reflection, I should have handled this better.

The next days were painful. Colleagues with whom we had shared a close bond avoided us as much as possible. It was the right thing for them to do physically, but it just did not feel right mentally. I felt ostracized. Once in a while, a few of our colleagues would stop by to cheer us up – from a distance. I received calls and texts from acquaintances, but the feeling of rejection, loneliness, and stigma was overwhelming. I remember once, to send us our medication, they pushed the tray on the floor. It was the last straw – I cried my heart out in this new prison. The thought of being an outcast in the hospital I had worked in took a toll on me.

A new test was ordered to confirm the previous result of the patient, and a few days after this, the results came back. The results read – negative(!) The first test was a false positive. We were liberated from our holding cells but not from our new status. In the corridors, the uneasiness was palpable and audible. We became known as the "corona doctors." Unfortunately, the impact of COVID-19 is not limited to medical students like myself who are on the frontline.¹⁻⁵ The resulting stress due to uncertainty is taking a mental toll on student-physicians.⁶

As physicians, when we chose medicine, we know that we will be exposed to several challenging situations including risks. However, if these risks are preventable, we should avoid them. Emergency department staff are at higher risk of developing COVID and adverse psychiatric outcomes.^{7,8} Singapore, for example, has recognized this and have integrated psychological interventions in their national COVID-19 response.⁹

I have experienced isolation, and I understand that some of my patients went through this without ever complaining. The feeling of rejection can be as much of a problem as the actual disease and we physicians should do a better job at preventing and managing that.

¹ BS. Faculty of Medicine, Bel Campus University of Technology, Kinshasa, Democratic Republic of Congo.

About the Author: *Vanessa Nono is currently a seventh-year medical student at the Bel Campus University of Technology, Kinshasa, DRC of a 7-year program. She is also a recipient of the Dean's Award for academic excellence.*

Correspondence:

Vanessa N. Youmbi

Address: 17, 8ème Rue Limete / Quartier Industriel, Congo - Kinshasa

Email: yumbi06vanessa@gmail.com

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References

1. Zitoun OA. COVID-19 Pandemic: Other Perspective. Saudi Arabia. Int J Med Students. 2020 Jan-Apr;8(1):64-5.
2. López-Ruiz E. Studying Medicine in Barcelona During the COVID-19 Pandemic. Int J Med Students. 2020 Jan-Apr;8(1):60-1.
3. Siraj A, Khan MW. Uncertainty in the Air: In the Emergency Room with COVID-19 in Pakistan. Int J Med Students. 2020 Jan-Apr;8(1):54-5.
4. Biavardi NG. Being an Italian Medical Student During the COVID-19 Outbreak. Int J Med Students. 2020 Jan-Apr;8(1):49-50.
5. Adebisi YA, Agboola P, Okereke M. COVID-19 Pandemic: Medical and Pharmacy Education in Nigeria. Int J Med Students. 2020 May-Aug;8(2):162-4.
6. Komer L. COVID-19 amongst the Pandemic of Medical Student Mental Health. Int J Med Students. 2020 Jan-Apr;8(1):56-7.
7. Koh D. Occupational risks for COVID-19 infection. Occup Med (Lond). 2020 Mar 12;70(1):3-5.
8. Naushad VA, Bierens JJ, Nishan KP, Firjeeth CP, Mohammad OH, Maliyakkal AM, et al. A Systematic Review of the Impact of Disaster on the Mental Health of Medical Responders. Prehosp Disaster Med. 2019 Dec;34(6):632-43.
9. Ho CS, Chee CY, Ho RC. Mental Health Strategies to Combat the Psychological Impact of COVID-19 Beyond Paranoia and Panic. Ann Acad Med Singapore. 2020 March 16;49(3):155-160.

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