A nurse who survived COVID-19 shares her story

Patricia is the poster image for a healthy mature adult: 61 years old, excellent health, doesn't smoke, minimal alcohol consumption, and keeps active. She works as a post-operative surgical oncology nurse and believes a brief encounter with a COVID-positive patient may have been how she picked it up.

On Monday, January 11, Patricia was eager to enjoy time off after working four 12-hour shifts at the hospital—she was feeling more tired than usual.

The next day, she felt unwell with a sore throat, productive cough, and a headache. "I didn't think it was COVID," instead blaming her symptoms on the respiratory infection that hit her every year. She and her husband were in the process of moving so she decided to wait it out at their new place, away from him.

Then she learned that a colleague she'd worked the same shifts with had tested positive. She put the pieces together: the encounter with the COVID-19 patient, her positive colleague and her own symptoms. She took a rapid-response COVID-19 test that same day.

By evening, the taste of food had turned metallic and her sense of smell was gone. "At this point I was thinking, OMG I've got COVID. I couldn't even smell Vicks VapoRub."

Next morning, the bad news was confirmed. Over the following days, her symptoms intensified and now she couldn't take a deep breath. To cope, she slept upright but this didn't stop the audible wheeze coming from her chest. "My chest felt heavy and it hurt all across my upper chest, along my right side, and my back," she said.

By day nine, Patricia suspected she also had pneumonia. Based on her symptoms, she was sent directly to the ER but thorough testing showed there were no other health issues. The only option was to return home and let COVID-19 run its course. The ER physician informed her that around day 9 or 10, a person with COVID either gets better or gets worse.

Patricia got worse. She returned alone to the condo. "I was vomiting now and so horribly tired. Think of the worst flu you've ever had and multiply that by 10." She remembers thinking, "COVID is going to kill me." Her sister Laurie checked on her twice a day, dressed in full PPE. One day she wasn't sure if Patricia was still breathing. She kicked the mattress and the grunt that answered reassured her she was.

Over the next week, Patricia's symptoms slowly decreased and she could make it to the couch to watch a little TV. As she watched chef Rachael Ray make mashed potatoes, she texted Laurie, "I need mashed potatoes with LOTS of butter!" A corner had been turned.

After suffering symptoms for six weeks, Patricia's physician finally declared her fit to return to work. By medical definition, her COVID-19 was considered mild because she wasn't admitted to hospital and didn't have complications. Today, five months later, thoughts of what would happen if she got it again worry her and she struggles with long hauler symptoms of fatigue and shortness of breath. "I think there are many people that still believe mild means 'common cold' rather than the worst flu you've ever had," she said. "This is not something to take lightly. It's no joke. I don't understand people who think this isn't real."
-Catherine Crawford