



Peachies and COVID

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I ended up on the cardiac COVID-19 floor because my sister-in-law got drunk on Peachies.

Allow me to explain.

A Peachie is a drink made with vodka and fresh peaches, a frozen delight the hue of a summer sunset favored by my extended family. About a month ago, my older brother, Phil, and his wife, Lisa, were visiting, and in deference to the pandemic, we'd planned a full weekend outdoors: dinner Friday with my other brother, Michael, and his fiancée, Jerri; biking on Coronado Saturday morning; Sunday brunch. These plans went awry, however, when Jerri arrived for dinner on Friday toting a box of Peachies in clear plastic containers that resembled small IV bags, complete with brightly colored straws, and, despite warnings regarding high alcohol content, Lisa consumed two.

The next morning Lisa was in no condition for cycling, so the Coronado outing was postponed until Sunday, when, unfortunately, Michael woke up feeling poorly, which led to him riding slowly, which, in turn, led to a moment two-thirds of the way around the island when Lisa and I realized we'd gotten too far ahead of the others. Approaching a large fence surrounding a golf course, Lisa turned her head to locate them. My eyes followed hers. I only glanced back for an instant, but when I looked forward again, Lisa and I were on a collision course, leaving me with a split-second decision—take her down or hit the fence.

I chose the fence. The fence, being a large, fixed object, won.

I went down hard, my left leg tangled between frame, pedal, and wheel, my right shoulder crushed against the handlebars. Bruises formed immediately. Another group of bikers began to run over, but stopped, because—COVID. My family surrounded me, squirting my wounds with water, telling me to breathe. Eventually, I got back on a now crooked bike and finished the ride.

Several days later, my chiropractor commented that, like the bike, I was crooked, and my shoulder was out of place.

It was this, and the fact that walking hurt, that led me to make an appointment a week after the accident to get x-rays. Check things out. Move on.

But the night before the appointment, I developed a raging sore throat. My nasal passages were on fire. The morning of, I woke with a fever, feeling like I was wearing a life preserver with a steel lining pulled too tight. I called the doctor's office to reschedule the x-ray, because—COVID. And then, things took an unexpected turn into a figurative

fence, otherwise known as Kaiser Permanente.

Under questioning, I explained the fall, the x-ray, the fever and cough. The tightness in my chest. Pain? Maybe a four. Yes, I had traveled recently; I'd returned from New York two weeks ago.

"Is there someone that can bring you to the ER or do you need an ambulance?" the nurse asked.

"An ambulance?" I said. "Wait, can't I just go get tested?"

No, she explained. I needed to go immediately to the ER, tell them what I told her.

Scenes from MSNBC began looping in my head—hazmat suits, refrigerated trucks, prone bodies attached to ventilators. I went upstairs to grab a few things, just in case: a toothbrush, contact lenses, two unread New Yorkers, an open bag of gummy bears.

As my husband and I went out to the car, the narration accompanying the looping took an ugly turn. "So many patients never said goodbye before they died" the voice intoned, all Morgan Freeman on steroids, which spun my mind towards steroids, and god, and—

"Wait," I said to my husband as we pulled from the curb. "Stop. I need to say goodbye to Olivia." My adult daughter was home, in the backyard. I went through the house, realizing I couldn't hug her, because—COVID, wondering how to say, "I think I should say goodbye, just in case." I decided this sounded bad, but when I opened my mouth, those were the exact words that came out.

"Don't be ridiculous," she said. "You're going to be fine. You'll be back in an hour."

I loved, but did not trust, her optimism. And in the end, she was wrong. Within moments of completing triage outside the ER, I was whisked inside because my EKG was abnormal and—COVID.

The next few days were surreal. Time lost meaning. Events blurred together, yet distinct memories formed: A kind nurse in full PPE with a photo pinned to her scrubs telling me her children's names were Griffin, Bear, and Phoenix as she put in an IV line. Another nurse saying, "COVID's the least of our worries with this one," as she exited my room. Watching a Halloween baking show until a participant began pouring dark chocolate batter into coffin-shaped molds. Peeing into a bedpan that sat un-emptied for hours. Looking for ventilators as they wheeled me to the cardiac floor. Trying to dispel thoughts of Darth Vader upon hearing the fan mounted on my floor nurse's back. Feeling relief when told my COVID test was negative, only to lose my sense of smell and taste six hours later while viewing a Presidential debate so unbelievable, I could not breathe. Breaking down on the phone with my sister, crying, "I can't smell the smelly hospital soap." Envy people in cars with taillights glowing red in the night.

Wondering if my last moments would be in a small, sterile room, by myself.

Clearly, they were not, because I am writing this. But as I write it, and as it is read, people are dying alone in small, sterile rooms. I grieve for them. For their Olivias.

I was lucky, this time. When the results of my radioactive stress test came back, I was released. And standing outside the ER, grateful for another chance at this life defined by chance, I found myself thinking about heart rhythms, falling, fences, family,

and Peaches—and how easily it could have gone a different way.

