

## Letter to the Editor: Editorial: Postcards From War Zones—Personal Experiences During the COVID-19 Pandemic

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*To the Editor,*

In a recent editorial, Leopold and Dobbs [1] compiled worldwide experiences with the coronavirus-19 (COVID-19) pandemic. It was a raw but much-needed collection of perspectives from the frontline as we rally together against the challenges ahead. The first author of this letter (SS) reflects on his own journey, which began not even 4 months ago. Nothing was more exhilarating than being accepted to a foot and ankle fellowship at the National University Hospital, Singapore.

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The opinions expressed are those of the writers, and do not reflect the opinion or policy of *CORR*® or The Association of Bone and Joint Surgeons®. (Re: Leopold SS, Dobbs MB. Editorial: Postcards From War Zones-Personal Experiences During the COVID-19 Pandemic. *Clin Orthop Relat Res.* 2020;478:1389-1395).

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All ICMJE Conflict of Interest Forms for authors and *Clinical Orthopaedics and Related Research*® editors and board members are on file with the publication and can be viewed on request.

After almost a year of planning, the day finally arrived for me to commence my fellowship. Apart from the usual beginner's apprehension, each day was like a dream come true, with early-morning academic sessions followed by rounds to review inpatients and a subsequent rush to the operating room for the long list of procedures scheduled for the day.

All of this, however, changed within 2 weeks, when the news of COVID-19 in China hit the shores of Singapore. Little did I realize that Singapore, being a major hub in Asia, would be thrown into this impending pandemic because of the large number of people traveling in and out of Singapore. The first patient with COVID-19 was confirmed on January 23, 2020, when a tourist from Wuhan, China travelled to Singapore [2]. The first instance of local transmission was confirmed on February 4, 2020.

My hospital responded immediately. Team segregation was instituted, and interhospital deployment was also suspended with immediate effect. The change that affected me the most is that my mentor (SDD) was deployed to lead the orthopaedics team in a sister hospital and was not allowed to return to the National University Hospital until the

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situation improved. Adding to my dismay, a stepwise reduction in the elective surgery load was also instituted. Originally, only nonurgent elective procedures necessitating more than 23 hours of admission were postponed. Fortunately, for me, this meant that most of the foot and ankle procedures could continue. However, as the number of patients with COVID-19 continued to surge during the "second wave" of the virus in April 2020, additional stepwise reduction of elective surgery was performed, including the suspension of day surgery. This meant a lot to a fellow whose main objective was to learn as much about surgical interventions as possible.

The silver lining was that while the decrease in the number of elective surgeries limited my exposure, the newly assigned attending surgeon (CCH) on my team ensured that each procedure's educational value was maximized. More time was devoted to discussing the procedures, and the surgical procedures were reviewed in detail before and during the surgery. As trauma, infection, and tumor took the front seat in the pandemic, I also had more opportunities to participate and perform these procedures under the guidance of the attending surgeon. There is now more quality than quantity in the learning process than there was previously because the additional time and exposure allowed me to have a greater understanding of the procedures.

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Through the pandemic, I felt more involved in departmental academic and research efforts. Because members of the department were segregated into teams and not allowed to meet, video conferencing replaced the traditional in-person teachings. I had more opportunities to present several teachings and journal clubs over video conferencing, which further enhanced my learning. Beyond the clinical hours, time was also devoted to honing my research skills amid the pandemic [3, 4]. In addition, as part of my hospital's befrienders and ambassadors initiative, I had the chance to connect with migrant workers who were COVID-19-positive and to reach out to this group of scared and worried people isolated from their usual support networks during this trying period. It was an eye-

opening experience and a privilege to provide a listening ear and encouragement to them.

While of course I wish that the virus outbreak had never occurred, especially not during my tenure as an overseas fellow, I feel at the same time blessed and privileged to be in Singapore during this pandemic because I have forged many valuable friendships over time. The numerous lessons I have learned because of the pandemic will serve as a blueprint for dealing with future pandemics in my native country, India. These experiences gleaned from my fellowship will indeed last forever.

### References

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