

The mid-afternoon sun beats mercilessly on Dr. Maximiliano Luna, Jr., sweltering in full-length protective gown, latex gloves, facemask, protective goggles, and a White Sox cap. He's standing beside a drive-through coronavirus testing tent in the parking lot of Esperanza Health Centers' California Avenue clinic, the site where the Southwest side community health center was born 16 years ago.

Today the temperature is approaching 90. The humidity is wearying. And it's only the first week of April. Luna briefly removes his cap and wipes sweat from his brow

as he watches the 43rd car of the day pull away from the tent. Car number 44 is pulling in right behind it.

Inside the Ford Taurus is Isabel, a young woman who, like nearly half of those coming to Esperanza for coronavirus testing, has never been to the health center before and has no health insurance. While waiting in the long line of cars, she had her driver's license scanned by Dr. Luna's medical assistant, Veronica Flores, who also printed out a consent form for Isabel to sign. As she pulls her car into the tent, Dr. Luna waves hello. He's probably smiling under the facemask, but it's difficult to tell.

"Hi, Isabel. I'm Dr. Luna." He rolls a small, wheeled table into place beside him, his laptop mounted on top of it. "Can you tell me your date of birth, please? I just want to make sure I have the correct record open." Once it's clear Isabel is indeed Isabel, he continues. "So I just want to ask you a few questions before we do the test, OK? And while we're talking, if you could look straight ahead rather than looking at me, that would be great. I know it's a little weird, but it's the best way to make sure everything is safe." He's trying to reduce the chance that either will inhale the other's respiratory droplets.

"So have you been experiencing a cough?" She has. "What about a fever?" She's not sure. "Ok, any difficulty breathing?" He continues in this vein for another minute or so, typing madly on his laptop when not studying Isabel carefully for signs of congestion, rapid respiration, shortness of breath. "And Isabel, do you have any questions for me?"

Isabel thinks for a moment. "It's just, if I test positive, what do I do about quarantine? I don't know how I can do that." Isabel lives in a three-bedroom apartment with her husband, two children – ages 5 and 2 – and her parents. They have only one bathroom among them.

"You'll do your best," Luna says with a reassuring tone. "You can sanitize all the things in your house that people touch a lot, countertops, doorknobs, medicine cabinet, the TV remote. You can wash your hands several times a day. You can try to limit your contact with everyone else in your house." As a father himself, he knows asking Isabel to have her young children limit contact with their mother is a bit like asking the sun to rise in the west. "And when you are with people at home, it would be great if everyone was wearing masks. There's also a program the city is running that can give you a place to stay, in a hotel downtown. Completely free."

Isabel listens with a stern expression. Something appears to be weighing on her mind. Her husband works in a factory an hour away, and he's had to report to work throughout the state's shelter-in-place order. He's told her that several coworkers have been pretty sick lately.

"Let's not get ahead of ourselves," Luna reassures. "We'll take this one step at a time." He picks up a swab from his rolling table. "This will feel a little uncomfortable, but it's very quick. Just keep looking straight ahead."

He steps a bit closer to the driver's side door and inserts the swab into Isabel's left nostril. She flinches, and in less than half a second the swab is out again. She lets out something resembling a cross between a sneeze and a cough.

"Great job. All done. You did the right thing coming in for a test. We should have the result back in two days, and someone will contact you, OK? Try to do your best to self-isolate until we know the result. And if you feel any new symptoms, or you feel worse at all, please call us right away. Any time, day or night."

Isabel thanks the doctor, but the stern expression hasn't softened during her eight minutes in the tent. As she pulls away, Luna turns to greet car number 45.

§§§§§

Each week has seen more and more cars pulling into the tents. Infection rates on Chicago's Southwest side are skyrocketing, and Esperanza's COVID-19 triage hotline, which screens callers before scheduling them for slots in the testing tents, has been nearly overwhelmed. When the hotline opened in mid-March, the four nurses who staffed it handled about 100 calls a day. Now the hotline's getting well over 1000 each day. Staff managing the hotline have increased to 17.

"When we first started the triage line," recalls Gabriela Alvarez, Esperanza's Nurse Manager,

DAY 30 APRIL 7, 2020

Total # of SARS-COV-2, NAA Ordered to Date

307

Tested Negative to Date

200

of Confirmed Cases to Date
107





"we were thinking when a call comes in we'll just switch from doing our RN work to being on triage for a few minutes. That didn't work. We got so many calls so quickly we just had to suspend our nursing work completely."

The hotline has been critical for getting people in the neighborhoods around Esperanza quick access to coronavirus testing. "Probably 75% of people who call, we make an appointment for them to get a test here," says Alvarez. "Usually on the same day. And so many people tell me they can't find any way to get tested on the Southwest side. One guy, he said he felt sick, went to the hospital, got some Tylenol and was sent home without being offered a test. He's like, 'How do I get a test? Do I have to be dying?'"

Staffing the triage line is "call after call after call," in Alvarez's words. "And I'm surprised, although maybe I shouldn't be, to see how many callers don't have a doctor. I spoke to someone today in his 30s, doesn't have a doctor, never thought he needed one. A lot of us think we're invincible, don't we? I think this pandemic will make a big difference. Maybe one of the ripple effects will be that people see how important it is to establish care. And we'll be here for them."

§§§§§§

Luna volunteered for his spot in Esperanza's first testing tent after coming back to work from a lousy vacation – thanks to COVID-19. "I had a week off in the middle of March," he explains. "It was going to be a staycation. Try different restaurants. Take my kids to various places. And everything is closed. So that was a disaster."

On his first day back, the testing tents were going up. "We were all talking about trying to get as many of us out of the clinics as we could, to work remotely somehow. I just told them I want to be here. When stuff like this comes up, it's where I want to be. Not only for my patients but – this sounds corny but I mean it – for the greater Esperanza community."

For the first few days in the tent, he and his medical assistant spent a fair amount of time improvising. "Initially we were just trying to figure out how to do everything safely and efficiently," he says. "Working out the kinks, you could say. But it doesn't take long to get a system down. And then you know exactly what to do, what to look for. Now every car takes five or ten minutes. That's it. Including a pretty thorough health assessment.

"And sometimes that car is full of people," he says with a little laugh. "So everyone gets a mask, and I do four or five at once."

Another kink that had to be worked out: finding a way for Luna to get a good night's sleep. "LabCorp, who runs our tests, at first they're treating every positive

Dr. Luna's medical assistant, Veronica Flores, helps with COVID-19 testing. test as a critical case," he says. "That means whenever a positive test result comes in, no matter what time, they page the medical provider who ordered it. So I'm working in the tent all day, and then my pager is going off all night long. I'm sure some day I'll look back on that and think it's a little funny."

From his first days in the tent, literally face-to-face with an emerging and potentially lethal virus, Luna says he never felt afraid. "We're always incredibly careful to protect ourselves as best we can," he explains. "Sanitizing our hands. Sanitizing the laptop keyboard. Sanitizing the mouse. Wearing all the gear. We never touch the car. When we give patients a pen to sign their consent form, we don't take the pen back."

Sometimes this abundance of caution can rub patients the wrong way. "I had one patient get a bit upset with me. Well, a lot upset with me." Luna lets out an incredulous laugh. "When he first pulled up, he wanted to get out of his car. I told him, 'No no, you're OK right there.' Then he's angry that I'm wearing all this protective gear, and that I'm taking too much time telling him how to sit properly and face forward to reduce my risk. He was like, 'They should get someone out here who isn't afraid.' I finally said to him, 'Look, I'm gonna do it this way, and if you don't want to do it this way, you can go to another clinic.'" Another laugh, deeper than the first. "He was swearing out the window at me as he drove away."

§§§§§

Luna's work day is nearly over, and he waves goodbye to car number 55 as it pulls away from the tent. He won't have any further contact with the driver, or any of the patient's he's tested today. "Someone else provides the results," he explains. "A nurse if it's positive, a care coordinator if it's negative. It's not how we normally practice medicine, obviously. But the world isn't normal right now. With so many people coming in for testing, this is the best way to do it. *Everyone* gets a personal follow-up by people who are specifically trained to do that."

Doing coronavirus testing full-time also means Luna has had to step away from providing care to his regular patients. "I've been here for seven years, I have long-time patients," he says with a tinge of sadness in his voice. "They call me now and I can't see them. I can't respond to them. Someone else is even checking my inbox. But I know my patients understand why I'm doing what I'm doing. And I know someone else on the Esperanza team is taking care of them, which means they're getting excellent care.

"The way I look at this is, we're managing this crisis as a team. My role is testing. Someone else's role is delivering results. Someone else's role is providing care. We each fit somewhere."

What's been the most difficult part of his experience in the tents? It's not the uncomfortable protective gear, the heat, the cold, the rain, or even the rare profanity-spouting patient. "It's when I have to make the decision to send someone to the emergency room," he says. "Especially when they don't have insurance. I tell them they have charity care at the hospitals, but I can't guarantee they'll get it. They look scared. I have no solutions. And I'm sending probably one or two people every day."

Standing in an amenity-free tent in a parking lot all day is surely not what Luna envisioned when he graduated from medical school. So what's been the best part of the work? "When patients say thank you for doing this. It's nice when people say that."

The longer Luna talks about his new job duties, the more it seems he's answering a calling. "As someone who grew up in a Latino home in Chicago, this is my place," he says with unguarded earnestness. "People coming in are really afraid, and it's comforting to have someone who not only speaks their language but knows their lives to a degree. I'll be here outside as long as I'm needed."





www.**esperanza**chicago.org