Francisco Zamora sits in the spare room of his Ashburn starter home, his laptop open in front of him, his phone to his ear. He is about to deliver bad news.

“Hi, this is Francisco from Esperanza. Is this Cristina? … Hi Cristina, how are you doing today?”

Zamora began working as a registered nurse at Esperanza Health Centers only a few days ago, and like many members of the staff, he’s been assigned to work remotely as the epidemic rages in the neighborhoods around Esperanza’s clinics.

“Can you confirm your date of birth for me? … Great, thank you.”
He’s calling to tell Cristina she’s tested positive for coronavirus. She’s the first patient he has to break the news to. There will be a few hundred more in the months to come. Telling patients they have tested positive is, for now, his full time job.

He’s already gone over everything in Cristina’s medical record, which he accesses remotely on his laptop. *Mid-twenties. Two small children. No diabetes, no hypertension, no serious underlying health conditions, good good. Body mass index is fine. She and her kids have Medicaid, good good good.* She’s about a month overdue for her annual wellness check, but Esperanza hasn’t been doing those since the epidemic hit and all non-urgent in-clinic visits had to be cancelled. The plan is for Cristina’s care coordinator to follow up with her about that wellness check in a month or two, when the clinics hopefully start re-opening for routine care.

“Cristina, I got your lab results for your coronavirus test, and they came back positive.” Zamora sits silently for about ten seconds, listening intently. “How are you feeling today? Do you feel like you have any symptoms? … Any fever? Any coughing? Any shortness of breath? … That’s great to hear. If you start having any symptoms, or feeling sick at all, please call us right away. Let’s talk about how you can –”

He listens intently again, typing on his laptop. “I completely understand your concern,” he says. “First of all, you are doing everything exactly right, you clearly understand how to self-isolate, that’s great. And having a separate area in your house where you’re staying, that’s perfect. I know that must be hard, especially not being with your kids right now… Yeah, I have kids, too.”

He makes another note. “So to answer your question, I think it would be a good idea to think about having your kids tested. I can set up an appointment for them if you want… Sure, that’s fine, call us tomorrow and we’ll get an appointment for them, very easy to do. What other questions do you have right now?”

Zamora types a few more notes into Cristina’s record, listening in silence for quite some time. “Fourteen days, that’s the recommendation. And even though you’re not having any symptoms, I always recommend drinking a lot of hot tea, taking some hot showers and really breathe in the steam. Or just sit in the bathroom and run the shower. Really helps open up your lungs… I know it’s scary, but you’re young, you’re in great health, everything should be OK. And definitely give us a call about an appointment for your kids… Well, thank you for taking care of yourself and your family. And if you do start having any symptoms, make sure to call us right away… We’re here for you, Cristina.”

He finishes his notes and closes Cristina’s record. Then he clicks on a file called “COVID Results,” where all the new coronavirus test records appear. There’s a long list of red names, indicating patients who have tested positive. Zamora selects five. That should keep him busy until lunch.
A few weeks later, Zamora is taking a break in the middle of the afternoon, thinking back on being tossed into the middle of a pandemic from his first moment on his new job. Originally he was hired to provide hands-on counseling and care to patients struggling to keep their diabetes under control. Three other nurses had been doing that work for nearly three years, and the program was so successful that Esperanza decided to expand its capacity by adding an additional nurse. But before his start date, COVID-19 came along and priorities had to shift all across the organization. All of the nurses working in the diabetes program were redeployed. Zamora understood he’d begin his new career with very different duties.

“Hopefully one day this will all come to an end,” Zamora says with a weary tone. “But for now, it’s been all COVID.”

Zamora previously worked at Esperanza as a medical assistant from 2012 to 2016, then went off to get his nursing degree. After a brief move to California (“I needed to do my own thing for a while,” he explains with a laugh) he returned to the Southwest side health center. “I grew up in a Mexican-American family,” he says. “My father was an immigrant. Knowing that I’m here helping my community is really inspiring to me.”

His current role, while not the one he signed up for, is particularly meaningful. “COVID is really scary,” he says. “And especially for a lot of our patients, if they’re undocumented, or don’t have the resources to get the care they need. We are working at the top of our abilities, calling them, staying in touch with them, giving them everything we can. Just staying on the line with them. Our patients really appreciate just having someone out there.
“I’ve had patients pray with me, pray for me, bless my whole family. They are so grateful.”

Zamora is careful about giving patients time to digest the news he delivers. “I tell them the test is positive, and then I just pause, maybe five seconds, maybe more, just to let it sink in. But it can be so difficult to process, when there’s so much anxiety around it. I’ve been on the phone with someone 15, 20 minutes, and after the entire conversation, they say, ‘So I’m positive?’ Then I go back through everything again to make sure they understand.”

Zamora delivers test results to as many as 30 people a day. In addition to providing clinical guidance, he makes it a priority to give everyone what he calls “positive vibes.” That isn’t always easy to do. “I’ve had several patients where everyone in the family comes up positive,” he explains. “Most people can’t really isolate at home, especially in our neighborhoods.

“The city has this program set up, free housing for people who are positive and need to self-quarantine,” he continues. “So I offer it to everyone. Well, not one patient has accepted it. Just knowing that they would have to be away from their family when they’re…” He clears his throat and is silent for a moment. “They tell me, oh no, we have enough room. I know that’s probably not true. There’s fear that your father or your abuela is going to die away from the family. In our culture, you don’t pull away from people who are sick. You stay with them. I couldn’t stay away from my parents.”

Most difficult, though, have been the times he’s had to contact patients who have already lost family members to the epidemic. “That was really a curve ball for me,” he says. “One particular patient, her husband had just passed away from COVID literally an hour before I called. She was in her mid-20s, I think, three kids. She might have been in a state of shock, because she wasn’t crying or anything. She hadn’t told her kids yet that their father had died. She was very scared. She kept asking, ‘How am I going to tell my kids?’

“Then she said, ‘I have three very clean bedsheets. If I wrap my kids in the sheets, and I wear a mask, can I hug them when I tell them?’ And I couldn’t give her the OK for that, because I had to stick to the guidelines.”

Zamora is quiet for a minute. “That was the hardest call I ever had to do. When I was a nursing student, I had three patients die right in front of me. That wasn’t as difficult as this.”