

# Des Moines Sunday Register

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## ‘WE’RE NOT GIVING UP’

An Iowa hospital staff finds the best way to battle COVID-19 lies within themselves

**After a year on the COVID-19 front lines, Dr. Dan Fulton now understands that when science seems at the end of itself, all that’s left is to care.**

Courtney Crowder, Des Moines Register

**D**r. Dan Fulton wasn’t going to wait any longer to be in the presence of the vaccine.

Taking a break from patients, he walks to the hospital’s cavernous auditorium, where syringes are set for Mary Greeley Medical Center’s ceremonial first jab. He isn’t scheduled to get his first dose for a few days, but he wants to be there. Just to take part in history, he says.

He’d been anticipating this day since his sister, a pediatrician, texted him Pfizer’s vaccine efficacy data weeks earlier. She followed up with a link to the “Lord of the Rings” scene where the heroes light a beacon to call for help. One after another, beacons across the kingdom respond, each lighting to answer the summons.

“Hope is kindled,” the wizard Gandalf says as the horizon illuminates.

Still in bed at 5:30 a.m., Fulton cried watching the clip on his small phone screen, hoping not to wake



Infectious disease specialist Dr. Dan Fulton holds the hand of a COVID-19 patient as they talk in the ICU at Mary Greeley Medical Center in Ames on Dec. 16.

his wife. The tide was turning.

Kristine Waugh, a respiratory therapist, sits in an office chair near the large hall’s back aisle. After a year in the hot zone, intubating and nebulizing the sickest patients, she will get shot No. 1.

As Fulton greets the gathered, Kristine looks over, finding the doctor’s

eyesight.

“Am I going to be OK?” she asks.

Since the coronavirus started pummeling this central Iowa hospital a year ago, Fulton’s answered that question more times than he can count.

“Yes, you’ll be OK,” he had told the ICU nurse swabbing the first COVID-19-positive pa-

### ABOUT THE SERIES

Over the past few months, Mary Greeley Medical Center opened its doors to the Des Moines Register, allowing us to tell stories of dedication, sacrifice, exhaustion, loss, pain and joy from inside the hospital. This is the last of an occasional series.

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Dr. Dan Fulton,

tient. “Yes,” he said to the COVID-19 floor nurse putting on PPE to care for a dying grandfather. “Yes,” to the housekeepers cleaning rooms. “Yes,” to the door screeners taking visitor temperatures. “Yes,” to the family members who want to say goodbye but don’t want to lose any more loved ones.

Floor by floor, department by department, he’s helped his staff tap new reservoirs of resilience. He’s been the coach in the corner when colleagues faced COVID-19, looked inward and asked: *Can I handle*

this?

“Yes,” he told Kristine. “You’ll be OK.”

As an infectious disease specialist, Fulton believes there will be more pandemics to come, more curves to bend. What will get him and his colleagues through that next outbreak and the next and the next starts with the science, he knows.

But COVID-19’s capricious nature has been a relentless teacher of “humility in medicine,” he says. And after a year in the trenches, he now knows viscerally what he always understood intellectually: When science seems at the end of itself, when nothing works and answers elude, all that’s left is to *care*.

For all the medical journals, the papers and the data on this new disease, the essence of healing doesn’t take an M.D. to figure out. Recovery — inside the body and out — starts with something so much more elemental.

“The most important thing that I do when I see a patient in the hospital is hold their hand and tell them that I am there with them, no matter what,” Fulton says.

The caring comes first — *always*. Everything else comes after.

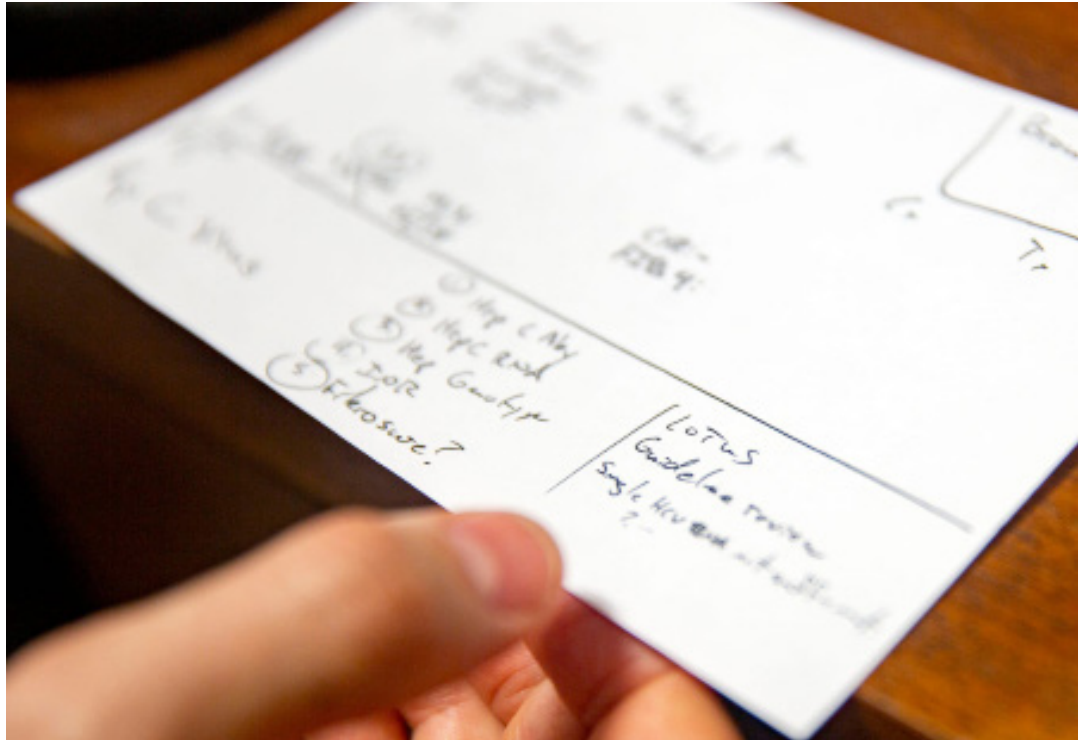
## BUT FIRST: ‘THIS IS WATER’

What you need to know about Dr. Fulton is that when he wants to reorient, he listens to author David Foster Wallace’s “This is Water” speech. Given as a commencement address in 2005, the lecture starts with a didactic parable about three fish.

*“There are these two young fish swimming along and they happen to meet*



Infectious disease specialist Dr. Dan Fulton, left, checks on a COVID-19 patient in the ICU at Mary Greeley Medical Center in Ames on Dec. 16, 2020.



Infectious disease specialist Dr. Dan Fulton of Mary Greeley Medical Center holds a handwritten card that he makes for each patient, photographed on Feb. 25, 2021.

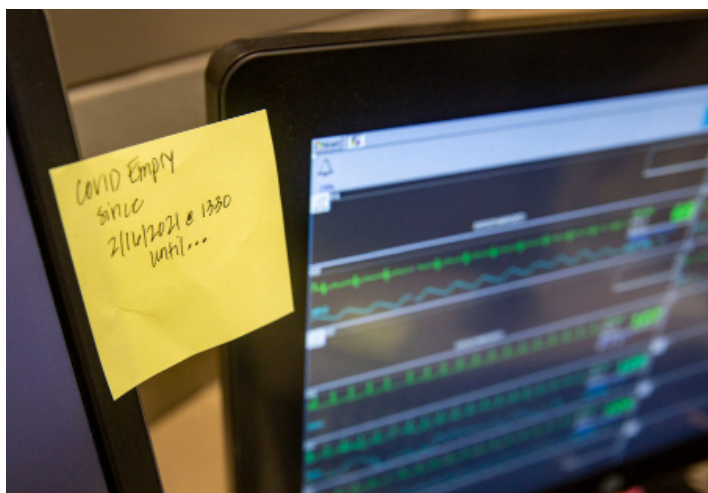
**“If you think about your community in any level, and you think about how you act, and then you ask yourself: If everybody acted like this, what would our community look like?”**

Dr. Dan Fulton,

*an older fish swimming the other way, who nods at them and says, ‘Morning, boys. How’s the water?’ The two young fish swim on for a bit, and then eventually one of them looks over at the other and goes, ‘What*



Infectious disease specialist Dr. Dan Fulton talks with the family of a patient in the ICU at Mary Greeley Medical Center on Dec. 16, 2020.



A post-it note lists the last time a COVID patient was in the ICU at Mary Greeley Medical Center in Ames, photographed on Feb. 25, 2021.

*the hell is water?’’*

One moral of the story goes that the most obvious reality can be the hardest to see. Wallace expands the lesson: It’s not that reality is simply hard to see, it’s that you can actively choose how you see the world, he says.

But then comes the harder part: In your active choosing, you have the option to pick a selfless path. You can choose to see the best in people, you can choose to care, and you can choose to sacrifice for others.

Except choosing to be

conscious of your place in the big picture isn’t easy, he says. Intentionally choosing to see good takes constant reminding. Constant reorienting.

*This is water.  
This is water.  
This is water.*

## **SECOND: THE THREE RULES**

You should also know that Fulton, 39, wakes up before sunrise most days, taking the first shift with his eight-month-old twins, the fourth and fifth of his five daughters.

As he walks downstairs for a morning cup of coffee, he passes under a painting of the Fulton Family Motto. Originally written as guidelines for his children should they find

themselves in trouble, the maxim’s bold, black letters stand out against a light blue and green watercolor background.

*Don’t panic.  
Be positive.  
Kindness counts.*

Last February, when Fulton and the rest of the infection control crew were deep in emergency planning mode, the motto kept surfacing in his mind. The entire exercise of planning was a choice to be intentional about *how* they would do things, but maybe these three rules could be the basis of the *why*.

His colleagues weren’t just building care plans, Fulton says, they were creating a culture that was going to weather the storm he saw on the horizon — the sort of culture that could



A family photo from 2020 sits in front of patient cards in Dr. Fulton's office. He's the father of five daughters, including twins born during the pandemic.



A photo of the line for the polio vaccine at McFarland Clinic in Ames in 1956 hangs on Dr. Dan Fulton's office wall at Mary Greeley Medical Center in Ames.

withstand the grief and loss and stress of a once-in-a-century pandemic.

A culture that doesn't sugarcoat, he cautions, but proactively seeks the bright side.

"It could potentially be hard," he said at a March 2020 town hall, his voice catching a bit. "And if it is hard, we are all in this together."

The three rules spread like a living meme. They were printed at the end of emails, said in hallway passings and intoned when meetings wrapped.

*This is water.*

### THIRD: OH, AW OR AWESOME

You should also know that curiosity was a part of Fulton family culture as far back as Dan remembers.

Growing up on a lake in northern Minnesoooota — which he always says in a heavy Midwestern accent, drawing out the Os — his mother, a science teacher, had a rule: "You never say Ick, Ugh or Gross. You say Oh, Aw, or Awesome."

Mix that with his lifelong tendency to be "painfully and annoyingly log-

ical" and his deep pull to serve "people on the margins," and a career in medicine was almost predisposed, he says.

Coming of age during the AIDS crisis, the duality of viruses struck him. How something so small could rip such large holes through

**"All these experiences are experiences that someday need to be unpacked. ... But when the next wave is coming, you just pack it away. We'll deal with that later."**

Dr. Dan Fulton,

families and through societies. And how ridding someone's body of an infection was never the end of their relationship; there was always work to be done to stitch a patient's life back together when the course of antibiotics was over.

He dove into the infectious disease specialty, work that is "high stakes and low certainty." It's like being a detective with a doctorate: You look at the whole body, slowly whittle a list of suspects until you find the culprit and bring the full weight of modern medicine to bear against it.

In medical school, a resident told him to learn one

new thing — clinical or emotional — from every patient. He kept track of the learnings in the right-hand corner of patient charts, the LOTUS box, he called it — Learning Opportunities, Teaching, Understanding and Sharing.

If he learned just one

new thing from every person, he'd always be growing.

*This is water.*

### FOURTH: LOOK FOR THE HELPERS

You should also know that Fulton walks to work most days, wearing a red windbreaker. (Think: Members Only but without the patches.)

During the hospital's first couple of infection control meetings, when there was so much uncertainty and so few absolute truths about the disease, Fulton became a fulcrum. He listened, found the con-

sensus, and made the decision.

A team member started calling him the hospital's Mr. Rogers, the person who could take the large and the complex and the scary and make it small and simple and somehow less scary.

*This is water.*

And, by way of cementing the metaphor, Fulton kept repeating one of Fred's most important quotes: "Look for the helpers."

"Here we are, in this disaster, and what do you look for? You look for people who are trying to help, and they're everywhere," Fulton says. "There's people everywhere trying to help, and those are the people you hang on to in order to, one, be able to help yourself and then, two, move forward, make things happen."

Coronaviruses circulated long before 2019, each with a varying degree of lethality. But almost immediately, COVID-19 felt different, Fulton says.

"What caught my attention was the speed with which it had turned from a report about a new virus in China to 'China is building field hospitals,'" he says.



Infectious disease specialist Dr. Dan Fulton talks with a patient in the ICU at Mary Greeley Medical Center in Ames on Dec. 16.

**“It’s that discomfort of being around people that is exactly telling us what we need to do once it’s over: Appreciate each other and care about people.”**

Dr. Dan Fulton,

As the reality of COVID-19 dawned among hospital staff, he saw people grapple with what was best for themselves. *Leave nursing? Sleep in a hotel? Volunteer for a front-line placement?*

Early on, when information was slow and ever-changing, the CDC released guidance that usual surgical masks and eye gear would work against the infection.

Fulton had access to more air-resistant gear, but

he drew a line in the proverbial sand. He wouldn’t wear what wasn’t available to everyone.

“That’s just what it means to be in a community,” he says. “If you think about your community in any level, and you think about how you act, and then you ask yourself: If everybody acted like this, what would our community look like?”

“If my job is to pick up the flag and run forward and expect them to come with me,” he says, we have to have mutual respect.

*This is water.*

### FIFTH: GRAB THEIR HANDS

You should also know that Fulton always holds his patients’ hands.

“No matter what hap-

pens, we’re here with you,” he says, fingers interlaced with a woman who just found out she has leukemia.

“What she’ll remember from that whole discussion is that I held her hand,” he says. “And I just feel like that’s really important ... because I don’t know how she’s going to do. And that’s hard.”

“We’ll be with you the whole time,” he says to a man in a room down the hall whose next stop is likely hospice. The man opened his eyes for Fulton, and the family gathered at his bedside cheered.

He grabs the hand of Thong Sengphirom, the unconscious woman in Room 5, who is on a ventilator as a last-ditch effort to save her from the COVID-19 hardening her lungs.

He reaches for patients’

hands to center himself, in their room, at that exact moment, he says. To center them. To connect.

*This is water.*

Working with infectious diseases, Fulton understands — maybe more than other doctors — that not everyone can be saved. Many times when he’s being called, so is palliative care, he says.

To him, holding people’s hands in comfort, kneeling at the bedside as they pass, is an ever-present reality in his work.

“I wouldn’t have it any other way,” he says. “That’s what it means to be a human, what it means to be a person. And that’s the great privilege of medicine is to get to be with people in those moments, no matter how it turns out.

“That’s also the respon-

## INSIDE COVID'S SIEGE

sibility is that you are there with them.”

The difference with COVID-19, he says, was that the death was happening all at once, and families were separated, grieving in isolation.

This hospital didn't see its first big outbreak until April, when the virus hit nearby meatpacking plants. All day, they took care of COVID-19 patients.

The summer was quiet. A temporary reprieve, they'd find out. In November, the hospital almost exceeded its original emergency plans. The curve kept going up and up and up, creaking like a roller coaster climbing and climbing.

Again, all day, they took care of COVID-19 patients.

Fulton would remind his colleagues: Each patient is the most important person in the world to someone. For each person's family, *this* is the event of a lifetime. Stay focused. Give them everything.

Then go to Bed 2 and do it again.

“I remember walking through the ICU and talking with nurses and saying, ‘Let's do what we can do. Let's control what we can control. Let's stay positive,’” he says. “We're not giving up on that guy. We're not giving up on that one. We're gonna keep going.”

“Remember, we're on the same team.”

*This is water.*

That amount of focus, that amount of work, it just felt overwhelming, he says.

But you keep moving. You go to Bed 3 and you do it again.

And to protect yourself, you start to put up some walls, Fulton says, to create some separation from you and this reality. Because, “How raw can it be before it

just hurts too much?”

“All these experiences are experiences that someday need to be unpacked and kind of thought through and dealt with from an emotional standpoint,” he says.

“But when the next wave is coming, you just pack it away. We'll deal with that later.”

For Fulton, his personal salve has been family and faith.

As a Catholic, his faith says there's always a resolution. But that in the meantime, you can't let fear crash over you like a wave. You must believe, deep down, that it will be better.

“Our church had closed for several months, and we went back when it reopened with masks on and stuff and I just cried,” he says. “It wasn't because I'm very pious. It was more just for a minute putting the burden down.”

“And then you pick it back up again, pick up the flag and go forward. Because somebody has to.”

*This is water.*

### LAST: LONGANIMITY

You should also know that Fulton has been thinking about May 18, 1956. A lot.

That was when parents waited with their preschoolers in a long line outside the McFarland Clinic in Ames for Jonas Salk's miracle drug.

With supplies low, only the children in that line would leave with the shot, he says.

“Those same kids are now bringing their mom and dad to get their vaccine, and not getting it themselves to protect their parents,” Fulton says, looking at a photo from that day that he's hung beside his desk.

“It's really full circle in a way.”

*This is water.*

On Fulton's walks home, he tries to ready himself for the change from hospital to home. From COVID-19 patient rooms, from difficult conversations, to finger painting and cartoons.

Recently he's found himself thinking about patience. The virtue doesn't seem hefty enough to cover all the waiting we've done this year, and the waiting still to come.

His priest suggested “longanimity,” which he told Fulton meant waiting on God's providence. Webster's says it means “having the disposition to bear injuries with patience.”

It's that you won't just tolerate delays; you will know they're coming and hold the burden of their pain as you wait.

That's closer to what we'll all need as we let everything we've wound up this year unwind, Fulton says.

“Forever it was the polite thing to do to say ‘Hi’ to people, and now the polite thing to do is to cross the street and try to avoid each other,” Fulton says. “But I also think it's that discomfort of being around people that is exactly telling us what we need to do once it's over: Appreciate each other and care about people.”

*This is water.*

There is an awe that during a year of isolation, we've figured out how to stay together, Fulton says. We've still celebrated milestones, just through Zoom screens. We've still met friends, just on outdoor patios. And we've still found ways to be a part of our community, whether with parking lot church, rooftop concerts or drive-thru fair food.

The LOTUS of COVID-19 is that in the midst of our worst cri-

sis, we turn back to our most basic truth — that humans weren't meant to be alone. That we need to know and be known, love and be loved, value and be valued.

And the “capital-T truth,” as Wallace would say, is that we can choose to deepen our relationships with the people in our lives when this is all over. We can intentionally choose to care.

*This is water.*

There is still so much to learn about COVID-19, Fulton says, and we all must still respect its “relentlessness.” He points to a sticky note declaring the ICU “COVID empty” since just after lunch on Feb. 16 as he simultaneously says, “If we found out that we were getting another wave next week, I would not be surprised.”

For Fulton, there's an almost spiritual aptness that we seem to be emerging from the pandemic during the first gasps of spring. White drifts are giving way to green patches. Ice is becoming water.

The thaw continues. Life blooms on.

Keep your mask on and your eyes on the horizon, he says, because here comes the sun.



Crowder



Boyden-Holmes

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