

# Bowling's Own Heroes

These pro bowlers do not wear capes. Here's why the COVID patients they treat may well think they should.

**BY GIANMARC MANZIONE**

**O**ne sure way to know that the world has changed is when the nature of those changes compels you to update your will.

That was the situation for USBC Hall of Famer and 16-time PWBA Tour champion Kim Adler, a nurse practitioner since 2011.

"This week, I have updated my will," she said in her April 2 appearance on The Bowlers Journal Podcast. She is not the only one.

"That is a common conversation that we're hearing in the office. When somebody initiated that conversation, everybody looked around the room and said, 'Oh, we all did that, too.'"

It is one thing to be a nurse practitioner when the globe is gripped by a pandemic. It is another to hold that occupation in your area's designated "COVID-19 hospital," in a state that routinely ranks in the top 10 in the nation for coronavirus infections.

As of April 10, Florida, where Adler works out of the Rockledge Regional Medical Center in Rockledge, ranked eighth in the U.S. with more than 17,000 confirmed COVID-19 infections and 390 deaths. Nationally, more than 17,000 had died, with nearly half-a-million cases recorded. April 10 also happens to have been the day the global death toll hit 100,000. The dead include nurses and doctors.

"You take an oath," Adler said. "I got



**Heart of Gold:** "I got into this work because my heart wanted to help people," Kim Adler said. "There may be times when whatever's going on in your life is not a priority."

into this work because my heart wanted to help people ... There may be times when whatever's going on in your life is not a priority. That patient is a priority."

For Adler, concerns about the supply of personal protective equipment (PPE) at her facility are paramount because, as Adler explained, "We are designated the COVID hospital among our hospital group for three hospitals nearby, so the other two hospitals transfer all their COVID patients to us.

"Every day for the last two to three weeks, I've had a lot of [patients presumed to have COVID]. Just not knowing, you take the precautions that are necessary."

Adler does not just take those precautions for herself. When she gets home from work, she returns to two loved ones there: Eight-year-old daughter Emma and her husband of 25 years, Tommy.

The first thing Adler does when she

gets home is make sure she closes the garage door. She then closes herself off in a corner of the garage no one in the house but her is permitted to occupy, a place she calls her “decontamination area.” There, she has a stash of gloves, hand cleaners, and a laundry basket reserved only for her with plastic bags in which she places her clothes before dumping it all into the laundry right away.

“I’m not touching the cats,” she adds. “I’m going directly into the shower without touching anything.” She always wears clean gloves as she enters the house, which she wears until stepping into the shower and turning it on. “Then I throw those gloves out, and those gloves get thrown away in a designated bin as well.”

Inside the hospital, Adler says she herself has not yet experienced the rending stories nurses are telling in even more heavily affected parts of the country.

“The things that are breaking my heart right now ... would be the reports out of, say, Detroit, Michigan, the videos of [nurses] here in America having to make decisions about which patients get the ventilator and which patient dies. These are not decisions that we should have to make as providers.

“But,” Adler noted, “when you’re in the trenches as that patient is coding, your only thought is to do what you can do with what you have to save that patient ... And then when we go home to kind of debrief or decompress from the day, that’s when we all go to our corners, and I don’t know what my cohorts are doing at this point when they go home.”

In Adler’s case, she says she has made it a point “to speak to somebody emotionally on a week-to-week basis, at least on a telephone call, as a kind of psychological debriefing, because we all have to take care of ourselves as well.”

PWBA Tour champion Erin McCarthy did not yet know what her emotional needs might be in the two hospitals in Omaha, Neb., where she works as a registered nurse. There, the haunting silence feels like an omen.

“Right now, we’re kind of seeing a lower census in the hospitals. It’s almost kind of eerie; it’s like the calm before

the storm,” McCarthy said in her April 8 appearance on the *Bowlers Journal Podcast*. “We just don’t know how out of control this gets.”

That is just it — no one knows how “out of control this gets,” or how or when it comes to an end.

“As a paramedic, I kind of prepared for every scenario, but it’s a short-term scenario,” said Adler. “You know, you’re working in the field, working in a car wreck or something, and you know there’s an end point. I have the capability of being prepared; but who is prepared for a long haul like this?”

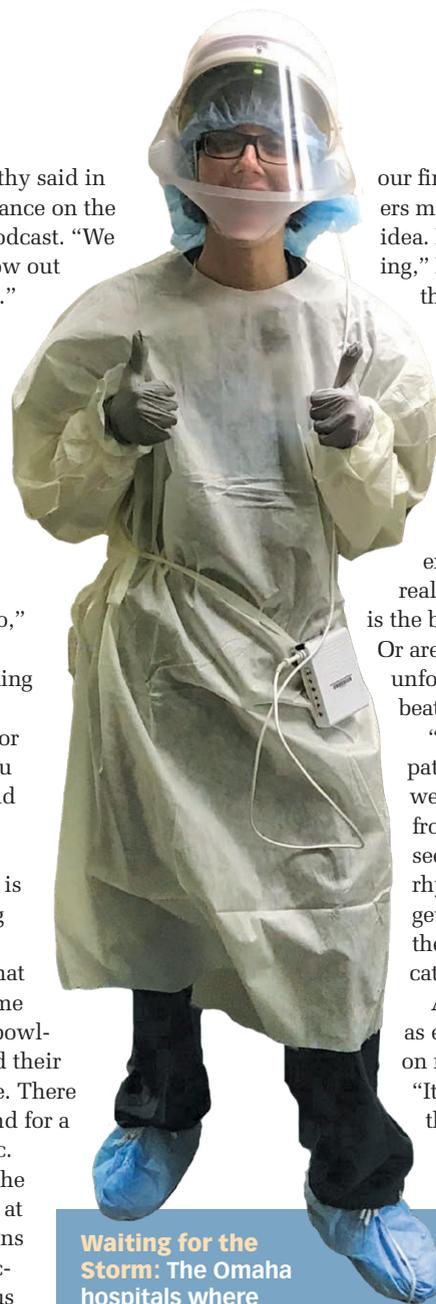
The answer to that question has become painfully clear to bowling proprietors and their employees: No one. There is no rainy-day fund for a 100-year pandemic.

McCarthy says she feels “pure shock” at reports of the dozens of doctors who succumbed to the virus in Italy alone, the hundreds who have fallen ill in New York City, the nurses who have died there. “Part of it is lack of PPE.

Another part of it is that, as nurses and doctors and health-care workers, we’re taught to put our patients first. We don’t always necessarily think of ourselves when it comes to helping people.”

For PWBA Tour champion and former collegiate standout Brenda Mack, a registered nurse at Franciscan St. Francis Health in the Indianapolis area, the situation is, at times, harrowing.

“We’ve lost some, and we still have



**Waiting for the Storm:** The Omaha hospitals where Erin McCarthy works as a nurse had not yet seen a surge of COVID patients in April and were quiet. “It’s like the calm before the storm,” she said.

our fingers crossed that others make it, but we have no idea. It’s really very frustrating,” Mack said. “As a nurse,

there’s always some kind of plan. Like, okay, this is their problem and this is how we treat it. Right now, they don’t really know how to treat it. They don’t have an answer.

It’s a lot of guessing and experimenting ... We’re really just waiting to see — is the body going to fight back? Or are they going to be the unfortunate ones who can’t beat it?

“We’ve had [COVID] patients die from strokes; we’ve had patients die from renal failure. It just seems like there’s no rhyme or reason as to who gets what, or what causes them to have those complications.”

As much of a human toll as each patient death takes on nurses, Mack said that, “It’s much, much harder on the families that can’t be there with their family member” because visitors are not allowed.

“They can’t see what’s happening to [their loved ones]. I’ve talked to family members over the phone who are crying, and there’s nothing that we can do. It’s really heart-

breaking. I can’t imagine being in that situation myself.

“It’s just exhausting,” Mack added. “You’re tired by the end of your shift. Your body’s tired. Your mind’s tired. Emotionally, you’re tired. And then, of course, all of us are working extra shifts.”

Mack tosses her scrubs into plastic shopping bags at the end of each 12-hour night shift and showers at work

to ensure she doesn't bring anything home with her. "That's definitely different," she said. "I never even used to think about it."

Both Mack's 13-year-old daughter Lanna and husband Tim, the USBC Hall of Famer and prominent ball rep with Storm, have asthma. Tim, meanwhile, also takes medication for hypertension — health factors said to enhance one's vulnerability to coronavirus.

"He barely leaves the house," Brenda said. "We're not one of the families out walking the neighborhood and staying active outside." Tim also barely sleeps while Brenda is working her night shift at the hospital. He told Lehigh Valley Live in April that Brenda "faces this every day and, of course, I worry about her and don't sleep much while she works all night."

Many within the bowling industry are having a hard time sleeping these days. Proprietors are kept up at night wondering when they will be able to reopen their businesses, or if they will be able to after going months without revenue. Their employees wonder when they might have a job again. Pro bowlers want to know when they will be able to resume their livelihoods.

Both Adler and McCarthy said that the way the bowling industry survives this is the way the world will survive this: by waiting it out at home, however painful that may be for the bowling business in the near term.

"I don't think it's going to be as soon as what people think it might be or want it to be," McCarthy said of when bowling might be back. "I think that all depends on how quickly people understand the message of truly staying home. You might feel fine, but it only takes one person to pass it on to multiple people."

McCarthy acknowledges a hard fact



**Call of Duty:** As an ICU nurse, Brenda Mack has at times been on the other end of phone calls with crying families whose loved ones are succumbing to COVID-19. "It's really heartbreaking," she said (with husband Tim).

that rings truer with each passing day: While bowling itself will recover, some bowling centers will not.

"I cannot imagine being a proprietor right now," McCarthy said. "You have virtually no business, your leagues are shut down, you don't have your open bowlers ... I don't really want to see what's going to happen after things get back to normal, because I know that some centers will have to close their doors."

Adler contemplates the same vision of what bowling might look like on the other side of this, but nonetheless she is optimistic that bowling itself will survive.

"Bowling has been, for some people, their entire lives, and to see that taken

away, it's just heartbreaking," Adler said. "It's not that I think we won't return ... The minute the doors are open, it means that things are returning to normal, so I can't wait for that to happen."

But when it happens, Adler said, things will need to be different.

"To say that, health-wise, things have always been truly the best that they could be [in bowling centers] would be probably inaccurate," she said. "From the cleaning of the shoes and hand-washing. Those types of things. I don't think I've ever seen a house ball cleaned."

For Brenda, very specific strides will need to be made before anyone can think about the bowling business restarting its engines.

"If they don't start testing more people and figuring out who has it and who doesn't, I don't know how they can make a decision to resume normal activity, because I think everybody's going to be worried that they might get it. I think we'll see people wearing

masks for a very long time," she said.

After seeing the worst of COVID-19's impacts as an ICU nurse, Brenda said her threshold for being comfortable with Tim getting back to work as a ball rep is very high.

"I would want to know that we had a vaccine," she said. "If they can come up with some kind of a treatment that works, then I would feel comfortable and then everybody can go back to normal ... I hope that our sport is strong enough to get through all this."

While the bowling world waits to find out how strong it is, Brenda draws strength from her belief that, "they'll figure out something. I'd be shocked if they didn't. There's too many smart people out there, and they're all working on it."