



Project: Documenting COVID-19: Stony Brook University Experiences

Title: Oral History Interview with Jason Macagnone – Transcript

Narrator: Jason Macagnone (JM)

Interviewer: Chris Kretz (CK)

Date of Interview: 10/19/2020

Location: Zencastr (remote)

Transcriber: Chris Kretz

Length: 00:22:38

Summary: Jason Macagnone is a Service Desk Agent in the Department of Information Technology (DoIT) at Stony Brook. In this interview, he relates his experiences contracting COVID-19, including receiving the diagnosis and isolating himself at home. He discusses the impact it had on himself and his family as well.

00:00:02

CK: Okay. Today is Monday, October 19. This is Chris Kretz of the Stony Brook University Libraries interviewing Jason Macagnone for the COVID19: Documenting Stony Brook University Experiences Project. Jason, first off, thank you for sharing your experiences with us.

00:00:22

JM: You're quite welcome. I'm happy to be here to be able to do it.

00:00:26

CK: And can you tell us to start, how long you've been at the university and what your position is?

00:00:33

JM: Well, that's a lengthy answer but I started out as a—actually, I started out at Stony Brook going to the old sci fi conventions that used to be on campus when I was a little kid.

And because of that experience, I came to Stony Brook as a student for an embarrassingly long amount of time.

And then I've been a professional employee now for just under three years.

00:00:57

CK: Okay. And what area of the university are you working in?

00:01:01

JM: The department of IT [Information Technology], aka DoIT/client engagement and support. Help Desk.

00:01:07

CK: And what's like a typical day for you? What's your typical duties that you're dealing with day to day?

00:01:13

JM: That's a loaded question, Chris. There's a lot.

Right now, a lot of it has to do with helping students work through the time option payment plan online because there's some issues with Chrome. But usually, day to day is a lot of remote support, helping install software updates, remoting into somebody's computer to help troubleshoot an issue that perhaps they don't have the technical jargon to fully describe (phone rings) over the phone. Or password resets for either your NetID or your solar login. And then also getting people in touch with other departments, if that department is better suited to help troubleshoot the issue.

00:01:59

CK: Okay. So if you think back, when do you remember first hearing about the coronavirus?

00:02:06

JM: I think it was late December or January, when it was first breaking in China.

I don't remember when the news reports—off the top of my head, I don't remember their release dates for those. But I know it was, you know, a lot sooner than we started seeing it in the US because I—I don't know if it's a bad habit, perhaps perceived by some, but I listen to the news a lot.

00:02:30

CK: And so where are you getting your news from, during the—

00:02:34

JM: News 12. I have News 12 playing in the morning when I get ready for work, and I tend to watch it a bit during lunch.

Newspapers. I see newspapers occasionally. On the internet.

I have some friends that are very tied in to—I want to say data centers but that's the wrong word. But they're tied into data that may not be publicly consumable just yet, but it's out there. That doesn't make a lot of sense. I apologize.

00:03:09

CK: No, that's okay. Was this—did you have any particular feeling about it as we got closer to, say March, when it had more of an impact on campus?

00:03:21

JM: Oh, sure. Well, just hearing about it was scary to begin with.

But it really got scary once they—it made it to Europe. And then the first known case in New York, which very—almost uncannily followed the plot for the movie *Contagion*.

That's when I really started getting worried about it making it out onto the Island. And then, sure enough, it hit campus. I don't think the campus released the numbers of how many infected were discovered on campus. I know I'd be one of those numbers because I got insanely sick, the middle of March.

00:04:08

CK: So before that, running up to the announcement about spring break, how did that affect your area, your department?

00:04:16

JM: We're here through the breaks. We don't shut down.

So, I think the spring break cancellation—and I think the semester's been extended by a week, right? Or it's been shortened by a week to make up for the lack of spring break, I think. I don't remember which way it was split.

But we're here no matter what because there's still administrative offices, there's still professors, there's still research going on. The hospital never shuts down. We help them out with passwords and some software.

So that really didn't impact me because I was going to be here anyway, whether there was people on campus or not.

00:04:56

CK: Did it change what you were doing, though? As other people were getting ready to leave, did you have to take on more? Or were you doing things to prepare for that?

00:05:04

JM: Well, it came in a tidal wave as soon as some departments started sending their offices home.

It was—since that was a few months ago, I feel like it was condensed into maybe three weeks with a lot of the campus making the decision to work from home or at least work remotely from somewhere else.

And that came at us like a tidal wave. I think that's been one of our busiest times that I can recall, were those couple weeks leading up to everybody moving off campus.

00:05:41

CK: And what did you find—did you find yourself doing anything to keep calm during that time or—

00:05:46

JM: I'm a pretty calm individual to begin with. (laughs)

I've been involved in the customer service industry since '96 and my previous career to this was doing help desk for Microsoft.

And that was people in my face and in person with certain demands. So I'm used to high volume. I'm used to people that may be stressing out on the other end of the line.

However, I did find a love for coffee, I think. At the time. Flavored coffee, unfortunately. I hate to admit it. I'm not a purist. I don't drink my coffee black. It's kind of off-white by the time I'm done with it. (laughs)

00:06:32

CK: So you mentioned getting sick. Can you walk us through how that hit you?

00:06:38

JM: A little background on me.

I'm a little embarrassed to admit it. And I don't know why I'm embarrassed, but I think it's because I grew up in an old school household where you didn't really talk about your faults and whatnot. But I found out last year that I'm immunosuppressed through just bad genetics that somehow activated later in life. And that means I'm not making all the immunoglobulin—the three different types that you should—in your white blood cells.

I have a very, very low poor response for the IgGs, the IgMs and the other one. I think it's IgB or—I don't remember. [ed. note: IgGs, IgMs and IgBs are immunoglobulins]

So I found that out late last year, and what led me up to that is—I was getting sick like crazy throughout the past few years.

Like, I would get a cold that some people get over in twenty-four to forty-eight hours and I'd have it for three weeks. And then start getting over it at the end of the three weeks.

So that terrified me about COVID. Hearing about the death counts in Europe, and how it was just wrecking people. And then I finally got it, which was utterly terrifying to find out that I had it. And for me, it started out somewhere mid-March with crushing flu symptoms. You know, it was kind of like somebody took the flu amp and cranked it up to eleven.

And I had just severe, severe body shakes and muscle and joint pain. At some point, I couldn't even get out of bed anymore because I couldn't move from it.

And I might have been delirious, because my fever hit 106. And it came back down and I'm sure I still have most of my brain cells left, but that lasted—those symptoms alone lasted for about three weeks.

And in my day-to-day life—and I'm an asthmatic—and in the fourth week of those symptoms coming down, I started getting severe asthma symptoms and then got diagnosed with pneumonia and bronchitis, all at the same time.

So it was pretty scary.

00:08:57

CK: Were you at home through all of this, or—

00:08:59

JM: I was at home. I did go—there was a—

You're going to have to give me a second here because it's still scary.

00:09:06

CK: Sure.

00:09:07

JM: There was one night—I think it was a Friday night, like late night going into Saturday—

I'm still here. Just need a sec.

00:09:22

CK: It's okay. No, take your time and if you want to move on, we can move on.

00:09:25

JM: No, no, no. I think it needs to get out there.

All right. Okay. All right, so it was a late night Friday going into Saturday. [I] pretty much told my wife goodbye and went to the hospital.

And I got to the hospital and it was a very eerie experience because on the news, everything was, The hospitals are overcrowded, The waiting rooms are madness.

I got to my local hospital and the waiting room was completely empty. I was the only pending patient.

And at the local hospital by me, they have these glass triage rooms. Prior to COVID, it's something they did with their design.

And I'm sitting in this glass cube looking out at the doctor's station. Just sitting there.

I waited for about an hour in the waiting room. Waited another half hour to see the doctor, and the doctor finally came in and I was already sitting down. And she took some basic metrics from me.

And looked me in the eye and said, "There's nothing we can do for you here" and "Go home and wait it out."

And it was pretty clear at the time what was being said between the lines.

I was in pretty bad shape. I was hardly breathing.

My asthma medications that I had for home use were not giving me any relief whatsoever. And then, as I said, I had pneumonia on top of that and the bronchitis.

So I was really not in a good place.

10:55

CK: And which hospital was this?

10:56

JM: I don't want to say. I don't want to give anybody a bad reputation.

10:58

CK: (speaking at same time) Okay. No problem.

11:00

JM: I don't want it to be perceived ill of them, you know.

11:03

CK: Did you ever—did you actually get tested for COVID at that point?

11:06

JM: Oh yes. I knew I had it at that point, by the time I went to the hospital. I found out I was COVID positive—I think it was March 30th was when I got the results.

And I tried to stick it out and tried to stick it out.

And finally, I had to get myself to the hospital when I was in a seriously bad-news shape.

And it was bad enough that I actually typed up a letter for my wife with all the information she could possibly need about our accounts, down to the handyman phone number in case something goes wrong at the house.

Because I wasn't sure if I went to the hospital and they took me in—I wasn't sure I was coming back. It was pretty heavy.

11:54

CK: (speaking at same time) And how did you—how were you able to keep quarantined at home? What did you have to do to—

12:00

JM: I locked myself in a spare bedroom.

I would only come out once everybody else had gone to sleep to, you know, hit the bathroom or get something to drink. I carried around a spray bottle with rubbing alcohol in it so anything I touched, I sprayed. I kept the mask on twenty-four/seven.

It was already warming up around that time when I got it. So in the spare bedroom, I kept the windows open to try and ventilate.

So that, you know, when I opened the door, hopefully what I was exhaling wouldn't be blowing into the rest of the house. So I just locked myself in the spare bedroom and I stared at the four walls and a ceiling

12:41

CK: Could you do anything to pass the time or anything that helped you —

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JM: I had my laptop with me. I lost track of how much Amazon Prime and YouTube and Netflix that I binged through.

But that was really it. I didn't want to be anywhere near my family.

[Section redacted. ed. note : Macagnone expressed fear about infecting his three-year-old daughter as well as his eighty-three-year-old mother who lived in the house and an aunt who was staying with them at the time.]

The irony being is that—we haven't met in person, but until I got sick I was a very serious gym person. Very serious gym guy, four or five nights a week.

Building up my endurance, working out like a madman. And then I got floored for seven weeks with this virus.

00:13:23

CK Were you keeping in touch with what was happening at Stony Brook at all, or on campus?

00:13:28

JM: I would—really, the only people I was keeping in touch with were my colleagues and my managers to let her know was happening. I knew about the shutdown on campus. I knew about the sudden order for students to leave the dorms. I knew about the military tents going up and also the expanded, temporary hospital going up in the basketball courts by the Pritchard Gym—sorry, it's now the Federal Arena.

So I knew about that. I didn't see any of it, because I obviously wasn't on campus. But I was trying to keep abreast of what was going on, yeah.

00:14:07

CK: And just about your general neighborhood, how did that fare or were you able to keep—

00:14:13

JM: (talking at the same time) We live in a very quiet area. I know of one neighbor's mother [that] died from COVID but I don't think it struck that hard where I am.

Which is ironic because a bunch of my neighbors are nurses and medical assistants and physician's assistants and doctors and police officers and whatnot. So they're out in the public, whether they want to be or not.

[Section redacted.]

So it was—it was close. It was very close, but it never seemed—other than me getting it really bad—it didn't really strike home.

00:14:46

CK: And when did it feel like you turned the corner on it?

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JM: When I was able to breathe again.

That was a sudden—it almost came on suddenly, too. It was a fantastic relief just to be able to draw full breath. And that was towards—that was really towards the end of April.

And even after that, I still had fallout, leftovers, symptoms, residuals—whatever you want to call it. I still have a hacking cough. I get nailed with these waves of exhaustion and weakness. And I still get random muscle ache and joint pain. Especially now, with the weather we just had this past weekend—my knees were killing me.

And I've never been afflicted with anything like that before.

00:15:37

CK: And when did you come back to campus?

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JM: Well, I'm working remotely, thank goodness.

00:15:41

CK: Okay.

00:17:07

JM: I don't know what I would do if I was ordered back to campus. I wouldn't feel comfortable coming back.

Luckily, our department, our office was given the option to continue working remotely. And there's still a bunch of offices and departments that are working remotely too.

It's very lucky that I was able to keep my job and also my wife kept hers. You know, we're some of the lucky few that were able to retain our income through this. So at least there was that, that we didn't have to worry about paying the mortgage or making the car payments.

00:16:20

CK: Right. And just with your background in science fiction, did anything come close to predicting this or, you know, in terms of things you had seen or read or—having lived through it, how do you look back on it now?

00:16:35

JM: I've given it some thought and I think—I can't remember the author. I think it was called *The Omega Strain* or *The Andromeda Strain*.

*The Andromeda Strain* feels like it maybe could have been a precursor. The movie *Contagion* that I mentioned at the beginning of the interview. As I said, that was eerily, uncannily close to the chain of events that unfolded, that brought COVID around.

I have thought about that question, off and on. And nothing else really comes to mind. I apologize.

00:17:10

CK: No, no. So, what would you like people to know about this time and your experience of it — what you went through?

00:17:20

JM: I don't want to get political, Chris, but I have to say, it's not fake. It's real. It's definitely very relevant and still very present. There's already five zip codes on Long Island alone that are starting to have major increases in positive cases.

And I had a very—I want to say scary, but that might not be the right word. But I had a conversation through a support call with a—one of the head virologists at the Southampton hospital.

And this was, I think, right when I came back to work. So it must have been early May, mid-May, maybe. And he was already predicting a wave two coming. And I think we're seeing it now, with the uptick in cases on Long Island.

[Section redacted.]

And I think it's coming back around. Now, one of the people I know that's plugged into that data community has said that it looks like it's altered a bit. That perhaps this time around, the virus may not be as deadly as the first time around. But I don't want to find out the hard way. And I don't think anybody else should either.

00:18:34

CK: This might be an obvious question, but what have you changed in the way you go about your life? Or have you changed anything in the way you approach things?

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JM: I think I'm eating healthier, but I was already a healthy eater to begin with. I think I'm being even more careful now. Now I take handfuls of vitamins.

And I'm not really joking. It's literally a handful of a wide variety of immune boosters and just healthy stuff all around.

As I said before, I was a very serious gym guy. Back when I was a student, I had actually — I had won the Stony Brook strongman contest a few times in a row.

And as soon as I felt up to it, after I started feeling better in late April, I got on my bicycle and I was barely able to make a half mile around the block. I had to get off the bike and walk it back home.

I think I'm much more paranoid about being around people now. And I am one of the few that's enjoying my isolation.

So that's changed for me. I used to be a very outgoing, extroverted type of person.

And now - you still have to get groceries. So when I go to the grocery store, I make sure there's a wide berth around me. If there's other people down an aisle, I avoid the aisle until it clears.

Yeah. There's been that lifestyle change.

I really don't want to be out in public much at all. Even with—on the news now, they have announced that some movie theaters are opening with only being able to sell X amount of tickets.

You're still in an enclosed space breathing the air. You know, somebody takes their mask off in the middle of the show, then what?

00:20:27

CK: Right. Right. Is there anything in particular that you're looking forward to?

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JM: Well, I—I'm Sicilian. Family's a big deal for me and I was looking forward to the holidays. And that's a tough conversation that my wife and I are having right now is: are we even going to go meet up with family for the holidays? Because this isn't over. And just because they're family doesn't mean that they're safe.

So we're discussing right now about avoiding a really large family gathering for Thanksgiving and probably having a much smaller Christmas celebration than we normally would with really just her, me, and our daughter.

I would have been looking forward to those, but COVID kind of crushed that. I'm just looking forward to it being over. But I don't think it's going to be over. I think it's going to become an underlying tremor in our collective cultural background going forward. And I don't know how to handle that.

00:23:14

CK: (speaking at same time) Well, again we—

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JM: I'm sorry, Chris. I didn't mean to interrupt.

00:21:36

CK: No, no. Go ahead.

00:21:38

JM: I don't know how to handle that going forward because eventually my office will be recalled back to campus and unless—the only way I'm going to feel safe is if there's a general announcement from the CDC [Centers for Disease Control and Prevention] that it's been eradicated. The vaccine is 100 percent successful.

And even then, I still might be a little paranoid.

00:22:01

CK: Right. Well, rightly so, You have the experience to—

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JM: And on top of that, I also missed out on the antibody lottery, too. As soon as I started feeling better, I went and got tested for the antibodies and I had zero.

00:22:20

CK: Hm.

00:22:21

JM: Yeah.

00:22:25

CK: Well, we thank you for adding your memories and your experiences. We're glad you're feeling better—hopefully you're feeling better and we just want to thank you again.

00:22:34

JM: I appreciate it, Chris. Thank you for having me.

[end of interview]