



MISSISSIPPI STATE DEPARTMENT OF HEALTH

**This is an official
MS Health Alert Network (HAN) Alert**

MESSAGE ID: MSHAN-20220130-00554-ALT (Health Alert)

RECIPIENTS: All Physicians, Hospitals, ERs, ICPs, NPs, and
Healthcare Providers – Statewide

Sunday, January 30, 2022

SUBJECT: ICU Rotation

STATE HEALTH OFFICER'S ORDER

Pursuant to Mississippi Code Ann. § 41-3-15 et. seq.; Mississippi Code Ann § 41-9-1; Mississippi Code Ann § 41-9-17; Mississippi Code Ann § 41-23-1 and the Mississippi State Department of Health (MSDH) COVID System of Care Plan, I, Thomas Dobbs, MD, MPH, State Health Officer, Executive Director of the Mississippi State Department of Health, hereby issue this statewide Order making participation in the Mississippi COVID System of Care Plan mandatory for all licensed hospitals in Mississippi effective **from 12:00 noon, January 30, 2022 until 11:59 p.m. on February 2, 2022**, unless revoked prior to that time, as follows:

Due to the current wave of COVID-19 Mississippi has reached a point where hospitals can no longer accommodate acute clinical demands. To address the limited availability of ICU capacity the Mississippi State Department of Health is requiring mandatory participation in the Mississippi COVID-19 System of Care Plan to allow the most critically ill patients to be transferred for definitive care, while not burdening any one hospital.

Focused ICU rotation:

- Transfers for certain critical care services that cannot be accommodated by the normal referral processes will be routed through Mississippi MED-COM. Sending facility should call Mississippi MED-COM at (601) 984-4367.
- All licensed hospitals in Mississippi are required to submit ICU status reports to Mississippi MED-COM twice daily, seven days per week through the Statewide Acute Care Capacity Status System (SACCSS). Reporting is to be completed no later than 0800 and 2000 each day. As a reminder, available beds indicate a staffed bed that is ready to receive a patient.
- Patient criteria for entry into the Focused ICU rotation:
 - STEMI
 - CVA within an interventional window, post tPA candidates
 - Multisystem or complex trauma
 - Intracranial hemorrhages requiring immediate neurosurgical intervention or SAH, SDH/EDH with any shift or GCS <15 (SOC physician to review)



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- Transplant patients with complications related to their transplant or that put their transplant at risk
- Ventilated patients at a hospital without an ICU or respiratory therapy or a ventilator
- Hospitals may transfer within their own network or directly however, if the accepting facility would like “credit” for the transfer in rotation they will need to notify MED-COM of the acceptance.
- Mississippi MED-COM will direct patients to available beds, and, when no beds are available, to hospital destinations on a rotating basis based on geography and resource availability.
- Due to the lack of beds across the state, not every transfer request will meet the criteria for acceptance. Sending hospitals will not be allowed to transfer patients because they don’t have beds.
- The timing of a transfer may be triaged based on available resources.
- Mississippi MED-COM will make best efforts to follow the rotation however, in instances when following the rotation would potentially cause harm to the patient due to a time sensitive emergency Mississippi MED-COM may select the most appropriate facility based on service line and geography. If this occurs, the receiving facility will receive “credit” for the transfer and be adjusted in the rotation.
- Following stabilization, patients will be transferred back to the hospital of origin, or another licensed Mississippi hospital based on capacity and capabilities as directed by MED-COM.
- Mississippi MED-COM will utilize bidirectional patient flow allowing high-level centers to transfer patients to lower-level centers to create additional capacity.
- All patients accepted by higher level facilities will be accepted by the ED physician.
- Provider to provider and nurse to nurse communications shall be maintained by sending facility.
- Mississippi MED-COM will monitor hospital capacity and capability related to providing care to ICU level patients.
- Rotation only applies to transfers originating in Mississippi.
- Any refusal or deviation from the Focused ICU rotation or the COVID-19 System of Care Plan will be investigated by MSDH.

This the 30th day of January 2022.

Thomas Dobbs, MD, MPH



Alerting Message Specification Settings

Originating Agency: Mississippi State Department of Health
Alerting Program: MS Health Alert Network (MS HAN)
Message Identifier: MSHAN-20220130-00554-ALT
Program (HAN) Type: Health Alert
Status (Type): Actual ()
Message Type: Alert
Reference: MSHAN-00554
Severity: Unknown
Acknowledgement: No
Sensitive: Not Sensitive
Message Expiration: Undetermined
Urgency: Undetermined
Delivery Time: 600 minutes

Definition of Alerting Vocabulary and Message Specification Settings

Originating Agency: A unique identifier for the agency originating the alert.

Alerting Program: The program sending the alert or engaging in alerts and communications using PHIN Communication and Alerting (PCA) as a vehicle for their delivery.

Message Identifier: A unique alert identifier that is generated upon alert activation (MSHAN-yyymmdd-hhmm-TTT (**ALT=Health Alert**, **ADV=Health Advisory**, **UPD=Health Update**, **MSG/INFO=Message/Info Service**)).

Program (HAN) Type: Categories of Health Alert Messages.

Health Alert: Conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation; may not require immediate action.

Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.

Health Info Service: Provides Message / Notification of general public health information; unlikely to require immediate action.

Status (Type):

- Actual: Communication or alert refers to a live event
- Exercise: Designated recipients must respond to the communication or alert
- Test: Communication or alert is related to a technical, system test and should be disregarded

Message Type:

- Alert: Indicates an original Alert
- Update: Indicates prior alert has been Updated and/or superseded



Cancel: Indicates prior alert has been cancelled
Error: Indicates prior alert has been retracted

Reference: For a communication or alert with a Message Type of “Update” or “Cancel”, this attribute contains the unique Message Identifier of the original communication or alert being updated or cancelled. “n/a” = Not Applicable.

Severity:

Extreme: Extraordinary threat to life or property
Severe: Significant threat to life or property
Moderate: Possible threat to life or property
Minor: Minimal threat to life or property
Unknown: Unknown threat to life or property

Acknowledgement: Indicates whether an acknowledgement on the part of the recipient is required to confirm that the alert was received, and the timeframe in which a response is required (Yes or No).

Sensitive:

Sensitive: Indicates the alert contains sensitive content
Not Sensitive: Indicates non-sensitive content

Message Expiration: Undetermined.

Urgency: Undetermined. Responsive action should be taken immediately.

Delivery Time: Indicates the timeframe for delivery of the alert (15, 60, 1440, 4320 minutes (.25, 1, 24, 72 hours)).