

Purpose

To establish a standard for what is considered an appropriate receiving hospital to provide emergency stabilizing medical treatment for a confirmed Ebola patient that begins to decompensate while in transit. SEMAC has endorsed and recognized as a standard of care that for a confirmed Ebola patient who decompensates during transport, the appropriate hospital to provide emergency stabilizing medical treatment is a New York State Special Pathogen (Ebola) Assessment and Treatment Center (SPTC) due to their extensive training, drilling, protocols, procedures and resources for managing special pathogen patients, and that non-SPTC hospitals are not appropriate in their capabilities or capacities to receive a patient in this condition.

Background

SPTC hospitals have undertaken specialized and rigorous training and capacity efforts to serve in this role, beginning with the large outbreak of Ebola in West African nations in 2014. The NYS Department of Health (NYSDOH) executed, Commissioner Howard Zucker's Commissioner's Order for the Prevention and Control of Ebola Virus Disease (EVD) on October 14, 2014. At the time of the original outbreak the CDC, NYSDOH and the NY City Department of Health and Mental Hygiene (NYCDOHMH) identified 11 SPTCs across the State. Under both the Commissioner's Order and as part of grant deliverables for Federal funding from the Office of the Assistant Secretary of Preparedness and Response (ASPR) received by the SPTCs, they were required to maintain the capacity to test, admit and provide definitive care for persons under investigation (PUIs) or persons confirmed with Ebola virus disease (EVD) and to maintain their biocontainment infrastructure, necessary infection control procedures and protocols, Personal Protective Equipment supply, clinical staff expertise/training and advanced diagnostic laboratory testing to provide the level of care required of these patients.

Of the original 11 SPTCs, 7 remain active in that role at the writing of this Advisory. These remaining SPTCs are: Erie County Medical Center, Strong Memorial Hospital, Westchester Medical Center, Stony Brook/University Hospital, Glen Cove Hospital, Mount Sinai Hospital and Bellevue Hospital Center, which also serves as the Department of Health and Human Services (HHS) Region II Special Pathogens Assessment and Treatment Center, and is one of three (3) hospitals nationwide to establish and maintain the National Emerging Special Pathogens Treatment and Education Center (NETEC).

Emergency Department Readiness

Decompensating Ebola patients have a high probability of being a "wet" patient and body fluids could contaminate areas of the Emergency Department (ED) where patients could be exposed. SPTCs are required to have a planned entry point and alternative route through the hospital to be able to receive an Ebola patient that will protect the patients from potential exposure. Alternative routes through which to move such emergent patients also helps to alleviate any disruption of care in the ED. Non-SPTC hospitals would require a longer period of time to identify staff to don the high level of PPE needed (if that level of PPE is present at the hospital) and conduct JIT procedures to receive the patient if given notice. If no notice is given by the incoming ambulance, the patient could be waiting in the ambulance until the hospital is ready, negating any time saved in travel by going to a closer, non-SPTC hospital.

Limitations

It is recognized that traveling the decompensating patient the additional distance in some cases to move the patient to an SPTC could result in patient death. This advisory weighs this unfortunate circumstance against the harm that could be done by exposure of multiple ED patients, insufficiently trained staff and disruption of other serious, ongoing ED care.

References

1. Commissioner's Order
2. ASPR Grant Performance Measure document
3. ASPR COVID continuing funding for SPTC document.