



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

**MESSAGE ID:** MSHAN-20200717-00457-ALT (Health Alert)  
**RECIPIENTS:** All Physicians, Hospitals, ERs, ICPs, NPs, and  
Healthcare Providers – Statewide  
**Friday, July 17, 2020**  
**SUBJECT:** COVID-19 State Health Officer Order for  
Outpatient and Inpatient Medical Services

STATE HEALTH OFFICER’S ORDER

Pursuant to Mississippi Code Ann. §§ 41-3-51, 41-3-15 et. seq., 41-23-1 et. seq. and the State of Emergency Declaration by the Governor of the State of Mississippi related to the coronavirus COVID-19 issued on March 14, 2020, I, Thomas Dobbs, MD, MPH, State Health Officer, Executive Director of the Mississippi State Department of Health (MSDH), hereby issue this Order for the provision of Medical Services and Surgical Services effective until August 17, 2020, unless revoked prior to that time, as follows:

Outpatient Medical Services:

In order to meet the medical needs of Mississippi residents, non-emergent and non-urgent outpatient clinical visits may resume under the following guidance:

- 1) Telehealth should be used when possible and as appropriate for medical assessment and treatment.
- 2) In-person clinic visits:
  - a. When telehealth is not an option, all patients must be screened for symptoms of COVID-19 prior to visit, or immediately on arrival and isolated as directed by MSDH guidelines, if needed. Patients with symptoms of COVID-19 should be tested for COVID-19 prior to receiving non-emergent medical care.
  - b. All patients with suspected COVID-19 must be tested in a private location, with appropriate Personal Protective Equipment (PPE).
  - c. Sterilization of N95 masks is available through MSDH and MEMA to support all clinical needs.
- 3) All outpatient services must be conducted to accommodate social distancing recommendations to include:
  - a. Minimum separation of six feet between patients.
  - b. Lower patient volumes should continue in a manner that supports social distancing.



- c. A maximum of one caregiver may attend with patient (if needed).
- d. Hand hygiene resources must be readily available to patients and caregivers.
- e. All patients and caregivers in waiting rooms must wear a surgical or cloth mask.
- f. All medical and office staff must wear a mask at all times.
- g. **Eye protection is now recommended for all clinical encounters consistent with CDC guidance.** <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

#### Surgeries and Procedures:

- 1) All patients must be assessed for COVID-19 prior to surgeries or procedures.
  - a. All patients must be screened for COVID-19 symptoms immediately prior to any surgery.
  - b. Patients with COVID-19 symptoms must be tested for and shown to not have COVID-19 prior to proceeding to surgery or procedure.
  - c. A negative COVID-19 PCR test in the previous 48 hours is the recommended approach for surgeries or procedures requiring general anesthesia and especially those involving the mouth, nose, oropharynx, nasopharynx, respiratory tract, GI tract or requiring general anesthesia. When pre-operative testing for COVID-19 is not practicable, full protective PPE for COVID-19 is required during any potentially aerosolizing procedure (including but not limited to: airway access, endoscopy, or bronchoscopy).
- 2) Access to PPE, Supplies, Equipment and Medicine:
  - a. Prior to initiating elective surgeries or procedures, adequate inventories of approved countermeasures including PPE, supplies, equipment, and medicine must be available. State support of PPE will not be available to facilities performing elective surgeries or procedures.
  - b. A plan for conserving and maintaining PPE, supplies, equipment, and medicine must be in place. This includes access to a reliable supply chain to support continued operations and respond to an unexpected surge in a timely manner.
  - c. To preserve PPE, healthcare personnel should minimize the number of personnel in the operating or procedure room (e.g. avoid swapping personnel for “breaks”, keep scrubbed in personnel to a minimum).
  - d. If appropriate PPE is unavailable to protect the healthcare workers or the supply of appropriate PPE is limited, elective surgeries or procedures must be canceled.
  - e. If there is a limited supply of equipment, supplies, beds or medicine, then the elective surgery or procedure must be canceled.
  - f. Sterilization of N95 masks is available through MSDH and MEMA to support all clinical needs.
- 3) Social Distancing: All services must be provided in a manner designed to accommodate social distancing recommendations to include:
  - a. Less than ten persons per room.



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- b. Minimum separation of six feet between patients.
  - c. Only one caregiver may attend in support of the patient.
  - d. Lower patient volumes should continue in a manner that accommodates social distancing.
  - e. Hand hygiene resources must be readily available to patients and caregivers.
  - f. All patients and family in waiting rooms must wear a surgical or cloth mask.
  - g. All medical personnel and staff must wear a mask at all times in all clinical areas.
  - h. **Eye protection is now recommended for all clinical encounters consistent with CDC guidance.** <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>
- 4) Preventing COVID-19 Transmission:
- a. Every effort should be made to prevent transmission of COVID-19 by following current CDC guidelines and reducing the number of healthcare workers in the surgical suite or office to the minimum necessary to complete the surgery or procedure.
  - b. All healthcare workers must be monitored for illness at least daily, prior to the beginning of the work shift.
  - c. Healthcare workers must be provided with appropriate PPE to perform the elective surgery or procedure.
  - d. If appropriate PPE is unavailable to protect the healthcare workers, then elective surgeries or procedures must be canceled.
- 5) Inpatient Visitation:
- a. All efforts should minimize hospital visitors.
  - b. Visitors should be screened for illness prior to entry.
  - c. All visitors should wear a mask, or cloth face covering at all times or consistent with local hospital guidance.
  - d. Only one caregiver should be present in support of hospital inpatients at any given time. Hospitals may maintain more restrictive visitation policies.
  - e. Hospitals may make special accommodations, with strict adherence to necessary personal protective measures, in special circumstances including but not limited to hospitalized children, pregnancy and end-of-life situations.

**Home Health and Hospice:**

**It is recommended that during all in home encounters, both staff and residents in the home, wear a face covering for the duration on the visit.**

This the 17<sup>th</sup> day of July 2020.

Thomas Dobbs, MD, MPH  
State Health Officer



**Alerting Message Specification Settings**

**Originating Agency:** Mississippi State Department of Health  
**Alerting Program:** MS Health Alert Network (MS HAN)  
**Message Identifier:** MSHAN-20200717-00457-ALT  
**Program (HAN) Type:** Health Alert  
**Status (Type):** Actual ()  
**Message Type:** Alert  
**Reference:** MSHAN-00457  
**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



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**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)).