



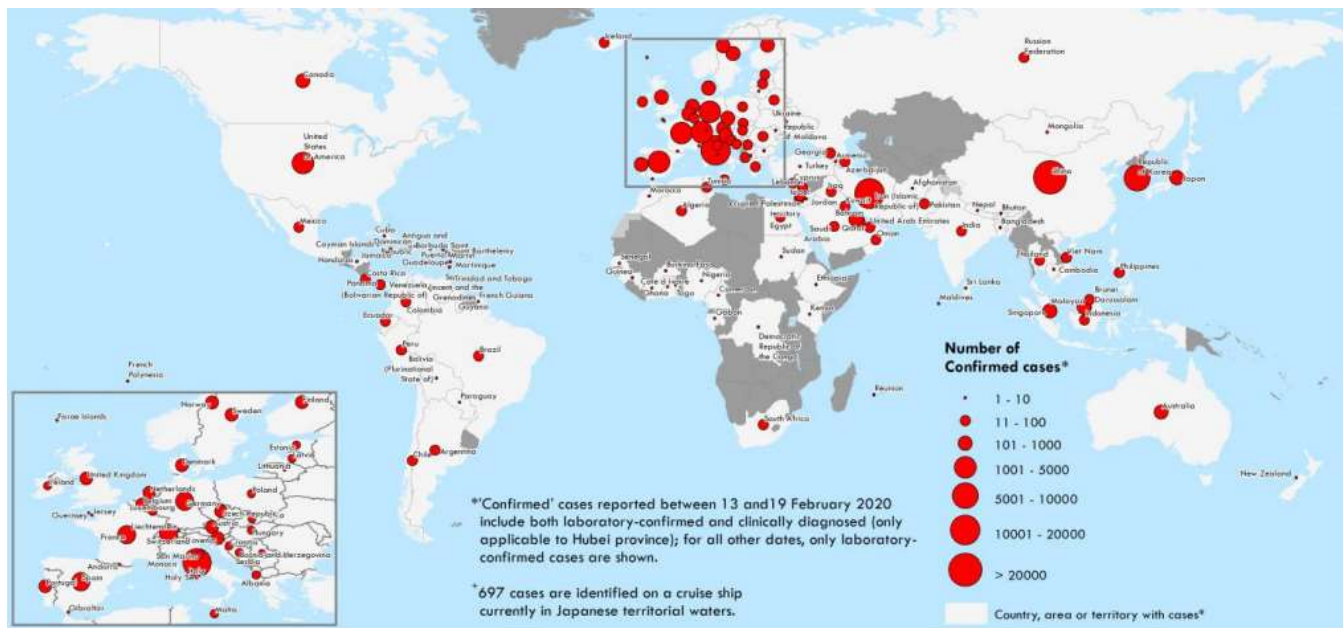
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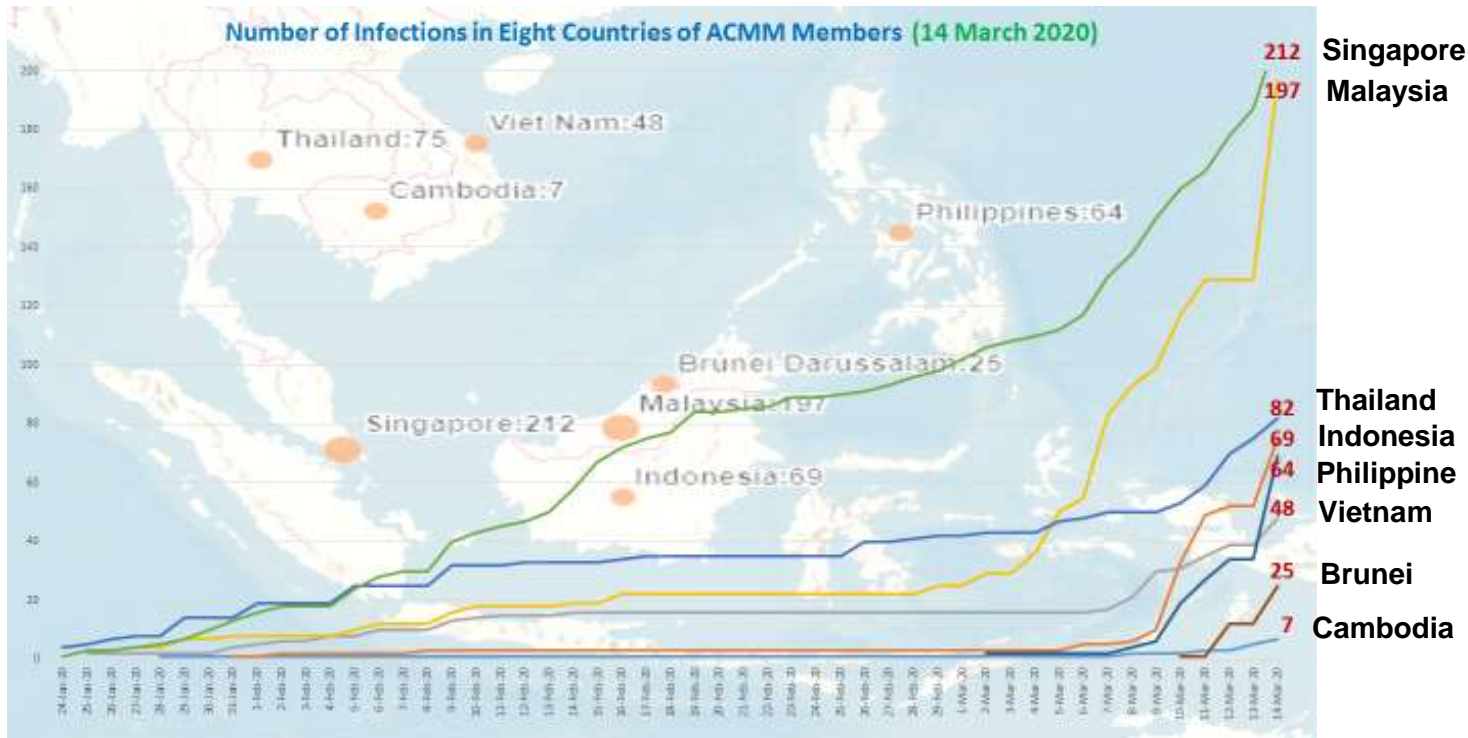
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Spot report : Pandemic of COVID-19



Since WHO announces COVID-19 outbreak as pandemic on 12 March 2020, 12 new countries/territories/areas have reported cases of COVID-19 in the past 24 hours. The Europe has now become the epicenter of the pandemic, with more reported cases and deaths than the rest of the world combined, apart from China. Thus, many countries are now acting on the eight pillars of WHO’s Strategic Preparedness and Response Plan. Moreover, WHO published guidance on clinical management of severe acute respiratory infection (SARI) when COVID-19 disease is suspected. The document provides clinicians with updated interim guidance on timely, effective, and safe supportive management of patients with suspected and confirmed COVID-19.



ACMM have been closely monitoring the ongoing of pandemic with all member countries. The number of people worldwide infected with the coronavirus has almost 142,539 with the vast majority of cases occurring around the world. On 14th March 2020, eight countries member of ACMM reported the infection case by SARS-CoV-2; Cambodia (7 cases), Brunei (25 cases), Vietnam (48 cases), Philippines (64 cases), Indonesia (69 cases), Thailand (82 cases) Malaysia (197 cases) and Singapore (212 cases).

Actions Taken:

- **Malaysia reported by 2 LTC Saifulsyahira binti Jaaman**
- **MALAYSIAN ARMED FORCES HEALTH SERVICES RESPOND TO COVID-19**
 1. They follow Malaysian Ministry of Health guideline. All personal who came back from China are to be quarantine for 14 days at stipulated place.
 2. Total of 15 Navy personal and 6 family members who came back from China in January 2020 were quarantine in ward at Hospital Tuanku Mizan Kuala Lumpur for 14 days.

Daily vital sign monitoring was done by infectious control nurse at the hospital. They were all asymptomatic and well.

3. Total of 32 Malaysian Airforce Personal went for Singapore Airshow from 8 February 2020 till 17 February 2020. Public Health Contingency Plan was carried out due to Singapore announced DOCSCON Orange. At present (Day 10 today) all 32 personals are well and healthy.

- **Public Health Contingency Plan for COVID-19 Institute of Aviation Medicine**

1. Pre-flight medical briefing
2. Pre-flight medical screening – vital sign, body temperature
3. Self-monitoring of body temperature while at Singapore. Infrared thermometer was given to them. Daily body temperature and their health wellness was reported to PH Specialist via WhatsApp group. Daily information regarding COVID-19 was also sent via WhatsApp.
4. Audience should be 3 meter away from static display.
5. Upon coming back, quarantine place was establish (if needed).
6. On arrival post-flight medical briefing was given.
7. Medical Personals wearing PPE when examining the aircrews.
8. Post flight medical screening using post screening form by MOH. They were discharge with health alert card and self-monitoring form at home. Self-monitoring at home for 14 days. They were allowed to go to work. The WhatsApp group still maintained until Day 14.
9. Aircraft disinfectant by Engineering Team.

*There was no specific guideline from Malaysian MOH regarding people who come from Singapore. The only guideline is people who come from China.

PICTURES DURING COVID-19 CONTINGENSY PLAN (AIRFORCE PERSONALS SINGAPORE AIRSHOW)



Pre-flight medical briefing



Post flight medical screening



History taking using post screening form



Post flight medical briefing



Body temperature taken at the hotel lobby in Singapore

- **Coordination of military resources to support civil authorities.**

1. So far COVID-19 in Malaysia is under controlled.
2. We used Malaysian MOH guideline on COVID-19.
3. There are 21 designated hospitals in Malaysia for COVID-19. These hospitals are capable to handle all the cases.
4. If the scenario worsen MAF Health Services may open level 1 field hospital if needed. As for now the 21 hospitals are more capable to handle all the cases.
5. Preparedness on COVID-19 must be at high level at all time.
 - Awareness on COVID-19 to all citizens (important of personal hygiene, CME on COVID-19).

➤ **Indonesia reported by LTC Dadang Hidayat**

- **The evacuation activities of Indonesian citizens as follow:**

1. Government prioritizes prudential principle in handling Repatriation of Indonesian Citizens at Diamond Princess
2. The government is certain to carry out the evacuation of 188 Indonesian citizens from the World Dream cruise ship
3. The Indonesian government strives for the best scheme for Indonesia citizens, who are on the Diamond Princess and World Dream cruises

4. Indonesian Navy successfully evacuated 188 Indonesia Citizens of the World Dream to KRI Dr. Soeharso,

5. The number of people who participated in the evacuation missing consisting of element of the TNI, Police, BNPB, MOH, MOF

Severity ranking of the concerns effect in the ASEAN region.

Section	Ranking	Issues identified	Recommendations
Pandemic of COVID-19	R	-Quarantine and screening measures have been enhanced for travelers from foreign countries at the point of entries (PoE). -Using the guidance on clinical management of severe acute respiratory infection (SARI) by WHO	The ACMM keep on monitoring and update the pandemic and medical information.

Remarks:

R: Severe Situation: Urgent intervention required.

Y: Situation of concern: Surveillance or assistance may or may not require, intensive monitoring

G: Relative normal situation or local Government can cope with the crisis, monitoring and no action required.

N/A: Lack of /unreliable data: Further assessment required.

ACMM Recommendations,

As a consequence, ACMM and all member countries had closely monitored the situation. In addition, ACMM recommend military medical services of ASEAN Member State be prepared to support EOC of each Country in case the outbreak have been progressed to phase III. Follow the advice and guidance from WHO, your healthcare provider, your national public health authority or your employer for accurate information on COVID-19 and whether COVID-19 is circulating where you live. There are the guideline for field hospital set up in EIDS outbreak.

Guideline for Field Hospital Set up in EIDs Outbreak

Specific Objective	Practice guidelines
<p>1.Prevent the spread of germs from patients to staffs.</p>	<p>1.1 Prepare adequate protective equipment.(PPE) 1.2 Review safety protocol training to every personnel. 1.3 strictly safety protocol practice with specific auditor</p>
<p>2.Prevent the spread of germs from patients to patients.</p>	<p>2.1 Divide patients into groups according to severity. (Cohort Ward) 2.2 Use separate rooms for severe groups. 2.3 maximum distance design between each patient 2.4 Focus on changing gloves and washing hands before & after take care of each patient.</p>
<p>3.Prevent the spread of germs from patients to communities.</p>	<p>3.1 Strictly control the area with security guards. 3.2 Decontaminated every vehicle, personnel and belonging that exit from the area. 3.3 Closely Cooperated with Local Communities & Authority</p>

Choosing the location

1. Should be far away from the community.
2. Should be near the point of collecting patients, such as epidemic area airports, border crossing,.
3. Should be in a place that controls security easily.
4. Should be near medical resources, such as the existing general hospital supplies and laboratory facilities.

Guideline for Field Hospital Set up in EIDs Outbreak

Site preparation

Should be a permanent building, Spacious Airy Area with facilities such as bedrooms, canteen, recreation facilities, shower - toilet, kitchen and laundry. For example :

If it is an **previous Hospital** - will be the best.

(Which have transferred the normal patient to other place already)

If it is an **previous Hotel** – will be more comfortable

(the advantage is plenty of separate rooms with complete facilities.)

If it is an **previous Military Barracks** – will be most available & rapid respond (even the facilities are not as luxurious as a hotel but the advantage is that Military Barracks are distribute all over the country and evacuate military personnel to empty the Barracks is not much difficult.)

Personnel

Specification

- Should be medical personnel who perform regular tasks in the hospital.
- Should be knowledgeable and understanding about infectious diseases and good practice.
- Should be well trained on using protective gear. (PPE).
- Should be volunteer and self-sacrificing, courageous, highly disciplined and strict in following instructions.

Position and number

- Depends on the number of beds and the severity of the patient

Medical equipment & Supplies

- Depends on the number of beds and the severity of the patient,
- Special focus on estimation of amount that need and continuous logistic systems.

References:

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