

DEPARTMENT OF THE ARMY HEADQUARTERS, TRIPLER ARMY MEDICAL CENTER 1 JARRETT WHITE ROAD TRIPLER AMC, HAWAII 96859-5000

MCHK-DC 22 June 2022

MEMORANDUM FOR Commander, Tripler Army Medical Center (MCHK-HQ) 1 Jarrett White Rd, Tripler AMC, HI 96859-5000

SUBJECT: Revised Visitor Policy

- 1. Effective 17 June 2022, the following visitation policy and restrictions are in effect within the Tripler Army Medical Center (TAMC) facility. This update changes social distancing requirements from "must" to "whenever possible" which mirrors Under Secretary of Defense Memorandum -- Consolidated Department of Defense Coronavirus Disease 2019 Force Health Protection Guidance dated 04 APR 2022. This change ensures that TAMC policy mirrors DoD/DHA guidance.
- 2. Authorized visitors/attendants will self-screen and utilize hand sanitizer at the hospital entrances prior to entry. Signs listing COVID-19 symptoms are clearly posted at all approved entrances, with instructions to not enter the facility if experiencing symptoms (unless the purpose of the visit is a scheduled appointment related to those symptoms). Symptomatic individuals are also directed to contact their PCMs or the COVID Hotline for further triage and evaluation. Persons who experienced any of the following symptoms during the preceding 48 hours, or have had known contact with someone with fever, cough, sore throat, runny or stuffy nose, headaches, fatigue, nausea, vomiting or diarrhea, shortness of breath/difficulty breathing, new loss of taste or smell, muscle or body aches, will not be allowed entry for visitation purposes.
- 3. Visitation is not allowed for patients with, or under investigation for, COVID-19, with the exception of COVID-19 positive laboring mothers on the Labor and Delivery ward who are authorized one (1) visitor/support person. Visitors may drop off items from home (i.e. phone, chargers, etc.) at the hospital entrance. Such items will be disinfected with CaviCide, Clorox Bleach, or 70% alcohol wipes and delivered to the patient by the hospital staff.
- 4. Unvaccinated visitors are discouraged from entering the hospital for visitation due to increased risk of severe infection with COVID-19. COVID-19 vaccination is available for DoD beneficiaries, and is highly recommended for everyone currently authorized or approved to receive the vaccine by the FDA. Booster shots, for those eligible, are also highly encouraged.
- 5. Visitors must check in at the front desk/nursing station of the unit/ward they are visiting.
- 6. The number of visitors authorized to visit immunosuppressed and vulnerable patients

- (e.g., oncology and transplant patients) should be limited. In addition to self-screening at the entrance of the hospital, these visitors may be screened again by staff prior to entry to the unit.
- 7. Visitation is not permitted by any individual who is currently in a quarantine, Restriction of Movement (ROM), or isolation status secondary to COVID-19. A signed TAMC Exception to Policy memo (see paragraph 16, below) would be required for an individual in this status to be allowed to visit.
- 8. Two (2) adult visitors/attendants are authorized for the following inpatient and outpatient areas (for Doulas, see paragraph 12, below):
- a. Pediatric outpatient appointments (visitor/escort must be a parent or legal guardian; recommend only one enter exam room with patient at a time)
- b. Other outpatient appointments where the patient is physically disabled or requires a medical attendant
 - c. Pediatric inpatient ward
 - d. Pediatric Intensive Care Unit (PICU)
 - e. Neonatal Intensive Care Unit (NICU)
 - f. Labor and Delivery (L&D)
 - g. Mother-Baby unit (MBU)
- 9. One (1) adult visitor/attendant is authorized for all other outpatient services and inpatient wards not listed in paragraph 8, above:
- a. For inpatients occupying multi-person rooms, only one patient may have a visitor in the room at a time, and maintain 6 feet of distance from all other patients, whenever possible. If other patients sharing the room have visitors waiting, these visitors shall be limited to 1 hour.
- b. On wards with family waiting rooms, patients in multi-person rooms may request visitation in the family waiting room, if available.
- c. Because waiting room space is limited in many outpatient clinics, patients are encouraged to attend appointments unaccompanied, whenever possible.
- d. Clinics, services, and wards may further restrict the number of visitors/escorts permitted in their area, if safe distancing cannot be maintained.

- 10. Two (2) adult visitors/attendants are authorized during end-of-life care.
- 11. Visitors should generally occupy the same household and make every effort to limit movement around the hospital. It is recommended, but not required, to limit the number of different visitors per patient per day.
- 12. A Doula may serve as the second authorized attendant on the Labor and Delivery ward and Mother-Baby Unit, in support of patients during the peripartum period.
- a. Doulas need to provide evidence of employment/certification as a professional Doula if asked.
- b. Doulas must comply with all TAMC PPE requirements while in the healthcare facility and must supply their own PPE appropriate for the healthcare setting.
- c. Doulas are not required to reside in the same household as the patient in order to perform duties within TAMC.
- 13. Persons 17 years old and under are not currently permitted as visitors, in accordance with Hawaii community standards. This is due, in part, to the variability in vaccination rates in this age group, as well as the greater likelihood of asymptomatic transmission.
- 14. All visitors must wear face masks at all times and whenever possible maintain six (6) feet of social distancing while in the hospital in accordance with Centers for Disease Control and Prevention (CDC), Hawaii Department of Health, and SECDEF guidance, including while inside patient rooms.
- 15. This policy is NOT intended to restrict reasonable access related to healthcare operations to the following groups (the listing of specific companies is not intended to indicate support of any entity over another, rather it is intended to assist in practical guidance for personnel):
 - a. Foster Home Caregivers, Care Home Operators, Boarding Home Operators.
 - b. Case Management Agencies / POCs: CareSift Agency.
- c. Department of Health Developmental Disabilities Branch or Adult Mental Health Division Staff, etc.
 - d. Hospice Agency Liaisons and other End of Life considerations.
 - e. DME vendors: Apria, CalMed, etc.
 - f. Infusion Therapy Agencies: Pharmacare and Option Care clinical liaisons (for

equipment/supply delivery and teaching).

- g. Bed-to-Bed Transport Companies: HPT, Mike's Transport, ABC Transport, etc.
- h. Hands-on Caregiver Training for family members required for discharge.
- i. Legacy of Life.
- j. Victim Advocates escorting SHARP related cases
- k. Behavioral health patients requiring a safety escort (excludes patients requiring escort by TAMC staff outlined in TAMC REG 40-43).
- 16. Written Exceptions to Policy (ETP) may be requested by Licensed Independent Practitioners. Such requests must be clearly written or typed, signed, dated, provide clear guidance on duration of visit, and be provided to the patient for them to present upon entry to the building, ward, or upon request. The approval authority for such ETPs while the MTF is operating in HPCON A-C is the corresponding Deputy Commander. The approval authority for such ETPs while in HPCON D is the Deputy Commanding Officer.
- 17. The point of contact for this policy is the undersigned at 808-433-5781 or at ian.m.fowler.mil@mail.mil.

IAN M. FOWLER CDR, MC, USN Deputy Director