Second Wave of COVID-19: Preparatory actions

Fields marked with * are mandatory.

Consultation with Clinicians involved in the management of COVID-19 patients

We are very interested to hear your comments and lessons learned from the COVID-19 crisis and what could be reinforced in terms of EU level cooperation to support preparedness and response to the next waves and to possible future pandemics.

Introduction

Please indicate the membership your organisation represents, if any

* Healthcare professional
  - Nurse
  - Family Medicine/ General practice doctor
  - Infectious diseases specialist
  - Intensive care specialist
  - Rare disease specialist
  - Emergency care specialist
  - Respiratory care specialist
  - Cardiology specialist
  - Anesthesiology specialist
  - Microbiology / Laboratory specialist
  - Other (please specify below)

* Health care provider
  - Public
  - Private
  - All
  - Other (please specify below)

I am answering as individual citizen
  - Yes

Other - please specify
I live in the following country

- Austria
- Belgium
- Bulgaria
- Croatia
- Cyprus
- Czechia
- Denmark
- Estonia
- Finland
- France
- Germany
- Greece
- Hungary
- Ireland
- Italy
- Latvia
- Lithuania
- Luxembourg
- Malta
- Netherlands
- Poland
- Portugal
- Romania
- Slovak Republic
- Slovenia
- Spain
- Sweden

Other country (please specify)

*Please indicate the geographical level you or your organisation represents*

- An EU Member State (or part of an EU Member State)
- EU / Multiple European countries
- International
- Not applicable. I do not represent an organisation

1 Shortages of ICU medicines

1.1 Did you encounter shortage of medicine?
1.1 b If yes, how did you manage them? Please specify

1.2 Having an EU level stockpiling of ICU medicines is good idea

1.2 b If yes, please specify what medicines

1.3 Such stockpiling should be organized at:

1.4 Please specify what products should be prioritized to anticipate a future surge in demand

- Acyclovir
- NORADRENALINE tartrate
- EPINEPHRINE (adrenaline) tartrate
- FENTANYL citrate
- Remifentanil chlorhydrate
- Sufentanil citrate
- Heparin Sodium
- Dalteparin (Heparin)
- Enoxaparin
- Nadroparin
- AMIODARONE hydrochloride
- AMOXICILLIN/CLAVULANIC acid
- AMOXICILLIN
- Amphotericin B
- Ampicillin/ sulbactam
- ATRACURIUM BESILATE
- Mivacurium Chloride
- Pancuronium
- Rocuronium bromide
- Vecuronium
- ATROPINE sulfate
- AZITHROMYCIN
- BENZYLПENICILLIN
<table>
<thead>
<tr>
<th>Drug Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cefepime</td>
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<tr>
<td>Cefotaxime</td>
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<tr>
<td>Ceftazidime</td>
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<tr>
<td>CEFTRIAXONE sodium</td>
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<td>Cefuroxime</td>
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<td>Cisatracurium besilate</td>
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<td>Clindamycin</td>
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<td>Clonidine</td>
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<tr>
<td>Colistimethate Sodium</td>
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<td>Darunavir and cobicistat</td>
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<tr>
<td>DEXMEDETOMIDINE</td>
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<tr>
<td>DIAZEPAM</td>
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<td>Digoxin</td>
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<td>Digitoxin</td>
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<tr>
<td>Dobutamine</td>
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<tr>
<td>Dopamine Hydrochloride</td>
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<tr>
<td>DOXYCYCLINE salt</td>
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<tr>
<td>Favipiravir</td>
</tr>
<tr>
<td>Fluconazole</td>
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<tr>
<td>FUROSEMIDE</td>
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<td>Gentamicin</td>
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<tr>
<td>GLYCERYL TRINITRATE</td>
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<tr>
<td>Haloperidol</td>
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<tr>
<td>Imipenem+ cilastatin</td>
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<tr>
<td>Insuline rapid (Actrapid), rDNA insul</td>
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<tr>
<td>KETAMINE /EsKetamine hydrochloride</td>
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<tr>
<td>Levofloxacin Hemihydrate</td>
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<td>LIDOCAINE hydrochloride</td>
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<tr>
<td>Linezolid</td>
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<tr>
<td>Lorazepam</td>
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<tr>
<td>Meropenem</td>
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<tr>
<td>Metamizole Magnesium</td>
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<tr>
<td>Metaraminol</td>
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<tr>
<td>Methylprednisolone</td>
</tr>
<tr>
<td>METOPROLOL tartrate</td>
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<td>METRONIDAZOLE</td>
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<td>Micafungin</td>
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<tr>
<td>MIDAZOLAM</td>
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<tr>
<td>MORPHINE sulfate</td>
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<tr>
<td>Moxifloxacin hydrochloride</td>
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<tr>
<td>OMEPRAZOLE</td>
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<tr>
<td>Pantoprazole</td>
</tr>
<tr>
<td>PARACETAMOL (acetaminophen)</td>
</tr>
<tr>
<td>PROPOFOL</td>
</tr>
<tr>
<td>Rifampicin</td>
</tr>
<tr>
<td>SALBUTAMOL sulfate</td>
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</tbody>
</table>
1.4a If other, please specify which product?


1.5 The Commission is planning to launch a joint procurement process on medicines for ICU, trying to sign framework contracts allowing MS to place orders when they wish. Do you believe that this would be a good idea in order to prepare for the second wave?

- Yes
- No
- Not sure

1.5 b If yes, please specify the areas where such contracts are needed


1.6 What could be done to prepare better for a potential second wave of COVID pandemic?


2 Shortages of PPEs and ventilators

2.1 During the crisis, many solutions related to rapid manufacturing of ventilators were observed in different Member States. How do you evaluate these solutions?

- Good
- Bad

2.1 b If good, could you please mention any successful stories which could serve a purpose in a future crisis toolbox?
2.1 c If bad, could you please give more details why

2.2 While shortages of PPEs, medical masks and ventilators have been at the forefront of the pandemic, the Commission has been recently made aware that availability of medical gloves could start becoming a problem in the near future due to the decreased availability of natural rubber. Do you agree with the sterilization/disinfection practices for extending the life-time of gloves?

- Yes
- No

2.2 b If no, what alternatives would you suggest?

2.3 Please specify what products should be prioritized to anticipate a future surge in demand

- Ventilators
- Masks
- Medical gloves
- Protective garments
- Other (please specify below)

Other - please specify

2.4 What do think should be done to prepare for a second wave, beyond the already ongoing preparatory actions the EU has taken such as the stockpiling mechanism set up through ESI?

2.5 How could your association help in the preparations for a potential second wave?
3 Shortages of hospital ICU beds, hospital organisation and care delivery

3.1 As hospitals rushed to maximise their capacity and number of beds, what were the main bottlenecks encountered along the conversion process of acute and sub-acute hospital beds into ICUs?

- Physical
- Decisional
- Informational
- Other (please specify below)

Other - please specify

3.2 Have emergency makeshift ICU wards set up in non-hospital settings provided a “decent enough” solution to tackle the sudden shortage of hospital beds?

- Yes
- No
- Not sure

3.2 b If no, please explain the main problems

3.3 Was it difficult to set up the emergency makeshift ICU wards set up in non-hospital settings?

- Yes
- No
- Not sure

3.3 b If yes, please explain the main problems

3.4 Do you believe that other alternative emergency solutions should have been devised?

- Yes
- No
- Not sure
3.4 b If yes, please explain which ones

3.5 What should be done differently in this area when the next health crisis comes?

3.6 To what extent have private health care facilities and primary care structures contributed to alleviating pressure on the public health care infrastructure?

Only values between 0 and 100 are allowed

0 = to a low extent and 100 = to a great extent

3.7 Many hospital managers across Europe were mandated to free up beds by postponing non-essential procedures. Through which modalities was the clinical workforce involved in the decision-making process?

- Discussion with the management
- Decision of doctors
- Other means (please specify below)

Other means - please specify

3.8 Have there been cases in which patient discharges were mandated by management in contrast to the doctors’ recommendation?

- Yes
- No
- Not sure

4 ICU training

4.1 Specialist training (residencies, post-graduate, master) for medical doctors and healthcare workers in Europe follows standards that are set both by European Union and the single countries. For doctors in particular who want to become Intensive care specialists, they have to achieve a core curriculum based on EU standards, which could also differ within the countries, based on different National Health Systems' needs. Is this a problem in your practice?

- Yes
- No
- Not sure

4.1 b If yes, please specify why
4.2 Would you revise the core curriculum and main objectives/features of ICU specialty training?
   - Yes
   - No
   - Not needed

4.3 If the standards depend on national healthcare systems, would it be feasible to engage all the actors possibly involved in their full revision?
   - Yes
   - No
   - Not sure

4.3 b If yes, please specify what actors

4.4 Some EU countries experience lack of ICU beds, equipment and trained specialists; would it be possible and desirable to extend the training on some ICU’s specialist competencies to other specialised figures too, such as emergency staff, from surgeons to medicine interns to ER personnel) in order to have a better management of critical patients in cases of emergency?
   - Yes
   - No
   - Not sure

4.4 b If yes, please specify to which specialists

4.5 How could knowledge and standards from your training programmes and diplomas (the international Competency Based Training programme in Intensive Care Medicine for Europe and other world regions the European Diploma in Intensive Care Medicine) be used more widely?
4.6 Do all countries do recognise the European Diploma in Intensive Care Medicine? Do all countries do recognise the European Diploma in Intensive Care Medicine?

☐ Yes
☐ No
☐ Not sure

4.6 b If no, please specify why

4.7 Do you believe that short term mobility of healthcare professionals would be useful to upskill the healthcare professionals?

☐ Yes
☐ No
☐ Not sure

4.7 b If yes, in what area, please specify

4.8 Do you believe that online training courses organised by specialised associations could support the upskilling of health workforce and preparation of a new pandemic?

☐ Yes
☐ No
☐ Not sure

4.8 b If yes, please specify in what area

4.9 Do you consider using ESF+/Health Programme funds for training your staff?

☐ Yes
☐ No

4.9 b If yes, please specify for what area

4.9 c If not, please specify why