ASCA Statement on Resuming Elective Surgery as the COVID-19 Pandemic Recedes

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Ambulatory surgery centers (ASCs) have played a vital role in delivering safe, cost-effective care to millions of patients. As the nation struggles with the novel COVID-19 virus, ASCs have maintained their commitment to serve the needs of communities by partnering with hospitals to assist them with surge capacity, providing excess resources and releasing staff and equipment to aid in the crisis.

Adhering to regulatory and clinical guidance for the protection of the public to minimize the spread of COVID-19 and to preserve the supply of personal protective equipment (PPE) for higher acuity needs, all elective non-urgent surgical procedures have been postponed. While this decision was the correct one at the time, it has resulted in a pent-up demand of patients who deferred needed care and are at increased risk of experiencing a negative clinical outcome. As examples, a deferred cataract surgery increases the possibility of a fall and a delayed colonoscopy allows cancer to grow undetected.

The good news is that the country's commitment to social distancing and shelter-in-place actions is reducing the spread of COVID-19. As that happens, it is prudent for health care providers to seek ways to cautiously resume activities and serve the growing healthcare demands in communities around the country.

We support lifting the prohibition of elective, non-urgent surgeries as outlined in the *White House Guidelines for Opening Up America Again* and its reliance on gating criteria that focus on a sustained reduction in COVID-19 cases. The reality is that regions across the nation are impacted by COVID-19 to varying degrees. There are some communities that are ready for a strategic restart of deferred healthcare at this time, while continuing to focus on limiting COVID-19 spread.

ASCs should resume elective surgeries if two conditions are guaranteed. First, the community must be ready. The prevalence of COVID-19 in the community must be low or declining and the community must have sufficient bed capacity and PPE supplies to accommodate the potential needs of COVID-19 infected patients.

Second, ASCs should open only if the safety of patients and the broader community can be guaranteed. Every ASC must ensure patient health and the prevention of virus spread by applying the following principles:

- Screening patients before visits and monitoring their health prior to starting surgery as part of the pre-operative procedure
- Requiring staff to self-monitor and screen for viral symptoms daily
- Continuing to use PPE per the latest Centers for Disease Control and Prevention (CDC) recommendations for all procedures
- Following waiting room spacing guidelines, social distancing, face masking and other recommended procedures for patients and visitors prior to entering the facility
- Ensuring heightened disinfection to prevent and mitigate risk of spread
- Ensuring patients have been medically cleared by their primary care physician where applicable

In addition to these cautions, there are other factors to consider that will permit ASCs to reopen in a prudent and safe manner, balancing the needs of patient care with the risk of providing that care:

- Geographic considerations: starting in states where the COVID-19 trendline follows gating criteria and expanding
 to other states as the situation improves
- Patient prioritization: starting with patients who have lower co-morbidities and surgical risks
- Procedure types: starting with procedures that are lower risk with regard to airborne transmission and those with minimal risk of unintended hospital admissions
- COVID-19 testing considerations: consider testing where feasible and if it would change the clinical decision to proceed with the procedure

Because COVID-19 has evolved differently across the nation, state governments have taken a variety of actions to manage the crisis that now hinder ASCs' capacity to resume care. As the pandemic recedes, states should lift restrictions on elective surgery and return decisions about care to treating physicians, patients and their families, letting clinical judgment prioritize time-sensitive surgical or procedural cases.

In conclusion, ASCs are an integral part of our nation's healthcare delivery system, providing cost-effective, high-quality surgical and procedural care. As always, we remain committed to working with federal and state policymakers to provide our communities with the help they need during the COVID-19 pandemic and beyond.