

August 13, 2020

AHA, Others Release Joint Update to COVID-19 Essential Surgery Roadmap

The Joint Statement: Roadmap for Maintaining Essential Surgery During COVID-19 Pandemic provides a list of principles and considerations to guide physicians, nurses, and hospitals and health systems for providing essential care during the ongoing public health emergency

The recent resurgence of COVID-19 has many states near or at bed and intensive care unit (ICU) capacity, and health care facilities' ability to meet surgical patients' ongoing needs may be stressed by new influxes of COVID-19 patients admitted to health care facilities.

To ensure health care organizations, physicians, and nurses remain prepared to meet these demands to care for patients who undergo recommended essential operations, the AHA joined with the American College of Surgeons, American Society of Anesthesiologists and Association of periOperative Registered Nurses, released a [Joint Statement: Roadmap for Maintaining Essential Surgery During COVID-19 Pandemic](#), an update to a previous joint statement [released in April](#).

This joint statement provides a list of principles and considerations to guide physicians, nurses and hospitals and health systems as they provide essential care to their patients and communities.

Some highlights include the following principles:

- Facilities should engage in regional cooperation to address capacity and new patients' needs to ensure facilities have appropriate number of intensive care unit (ICU) and non-ICU beds, personal protective equipment (PPE), testing reagents and supplies, ventilators and trained staff to treat all non-elective patients without resorting to a crisis standard of care. Daily forecasting of COVID-19 demand on all resources shall be the base line for determining the ability to add non-COVID-19 cases.
- Hospitals, medical professional societies, and government agencies should work together to ensure adequate supplies of vital equipment and medications.
- Facilities should use available testing to protect staff and patient safety and should implement a policy addressing requirements and frequency for patient and staff testing in accordance with current CDC guidelines.

- Facilities should not provide non-emergent essential surgical services unless they have adequate PPE and medical surgical supplies appropriate to the number and type of procedures to be performed.
- Facilities should establish a case prioritization policy committee consisting of surgery, anesthesia and nursing leadership to develop a case prioritization strategy appropriate to the immediate patient needs.
- Facilities should adopt policies addressing care issues specific to COVID-19 and the postponement of surgical scheduling.
- Facilities should reevaluate and reassess policies and procedures frequently, based on COVID-19 related data, resources, testing and other clinical information.
- Facilities should have and implement a face covering and social distancing policy for staff, patients, and patient visitors in non-restricted areas in the facility which meets current local and national recommendations for community isolation practices.

For questions, please contact the AHA at 800-424-4301.