

Covid-19 Abbreviated Surgical Workflow

- Step 1. Confirm patient willing to schedule surgery
- Step 2. Schedule surgery
- Step 3. Schedule COVID-19 testing 2-3 days before date of surgery
- Step 4. Pre-operative testing should proceed while waiting for COVID-19 testing if not already completed
- Step 5. Confirm negative COVID results (follow surgery decision tree for positive or unknown)
- Step 6. Proceed with surgery

COVID-19 Testing

Update as of May 1, 2020 – for Ohio Only

Dear colleagues,

Effective today, COVID-19 testing is now available for all patients with scheduled surgeries and procedures. Below are details about COVID-19 testing for all patients meeting this new criteria.

COVID-19 testing for all patients requiring urgent surgery, in the emergency department (ED), inpatients who are admitted to the ward or Intensive Care Unit (ICU), and for Labor and Delivery patients remains the same as it has been and is not impacted by these new additions for testing.

1. COVID-19 testing is required for ALL pre-operative patients receiving care on or after 5/4/2020 in an ambulatory surgery center (ASC) or operating room before a procedure can take place. For all other patients, COVID-19 testing may be performed at the discretion of the institute / provider.
2. COVID-19 testing is ordered in Epic as “AMB PRE-OPERATIVE COVID TESTING PANEL” and should be performed 2-3 days prior to the surgery or procedure.
3. Patients should take appropriate precautions (i.e., wear a mask, hand hygiene) during completion of preoperative testing and prior to the surgery / procedures to avoid the risk of exposure / infection.
4. For guidance on patients without, unknown, inconclusive, or pending COVID-19 testing results, please see [\(link\)](#).

For further details please see [\(link\)](#)

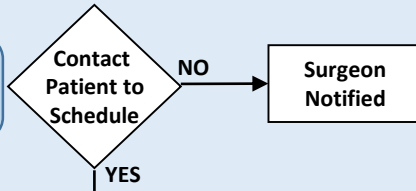
If you have questions, please contact MOR_Team@ccf.org

Surgery/Procedure Reactivation Workflow

Updated: 5/5/2020 @ 1736

Initial Patient Contact – Confirmation

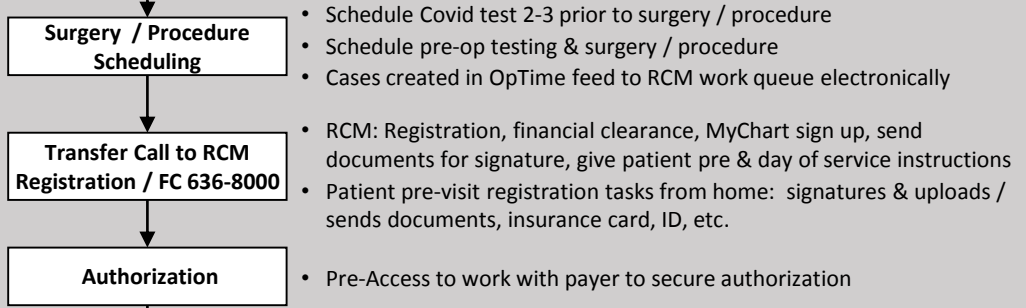
See [Initial patient contact script](#)



* Independent providers w/o Epic: use the [Surgical Case Request Form](#)

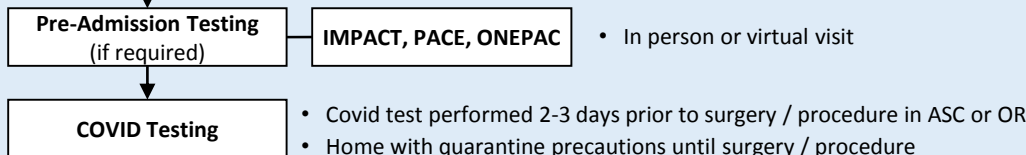
- In person or virtual visit as needed
- Order AMB Pre Op Covid Test Panel & pre-surgery testing (as needed) *
- Confirm H&P (30 days) & consents (6 months) are in place

Pt. Scheduling, FC, Registration



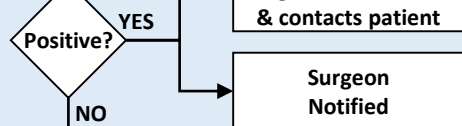
- Schedule Covid test 2-3 prior to surgery / procedure
- Schedule pre-op testing & surgery / procedure
- Cases created in OpTime feed to RCM work queue electronically
- RCM: Registration, financial clearance, MyChart sign up, send documents for signature, give patient pre & day of service instructions
- Patient pre-visit registration tasks from home: signatures & uploads / sends documents, insurance card, ID, etc.
- Pre-Access to work with payer to secure authorization

Covid Test & Pre-Admission Testing



- IMPACT, PACE, ONEPAC
- In person or virtual visit
- Covid test performed 2-3 days prior to surgery / procedure in ASC or OR
- Home with quarantine precautions until surgery / procedure

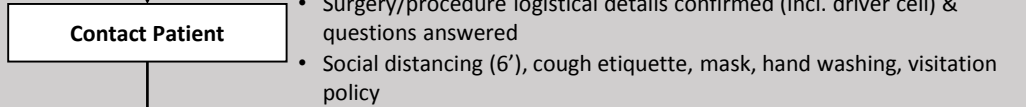
See [Pre-Op Covid+ script](#)



- Results auto released in MyChart
- Provide instructions
- Cancel surgery or If essential / urgent, see [Known or Suspected Covid+ in OR](#)
- Confirm Home Monitoring Team will contact for Covid+ follow up

Day Prior to Surgery / Procedure Call

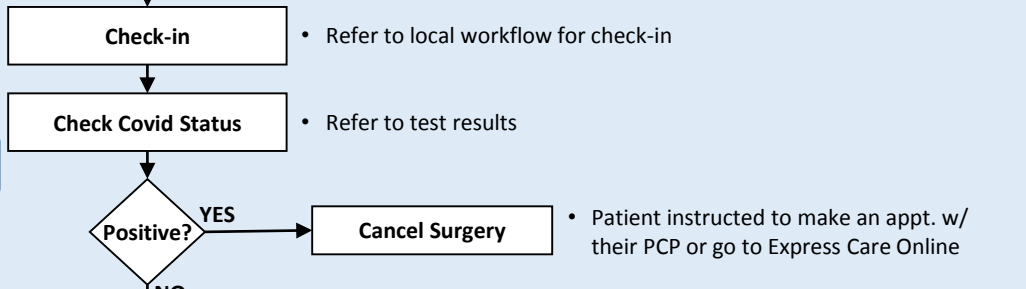
See [Day before surgery script](#)



- COVID negative result provided, screening questions
- Surgery/procedure logistical details confirmed (incl. driver cell) & questions answered
- Social distancing (6'), cough etiquette, mask, hand washing, visitation policy

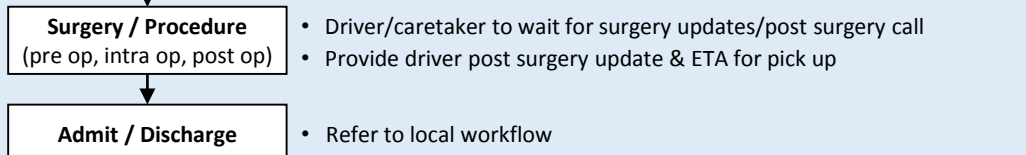
Surgery

See [Surgery Decision Tree](#)



- Patient instructed to make an appt. w/ their PCP or go to Express Care Online

Ensure [EVS protocol](#) is implemented between patients



- Driver/caretaker to wait for surgery updates/post surgery call
- Provide driver post surgery update & ETA for pick up
- Refer to local workflow

Discharge & Post-Op Visit



- In person or virtual

Initial Patient Contact Script

Hello. I'm _____ calling from Cleveland Clinic to reschedule your surgery/procedure that was postponed due to COVID-19.

The safety of our patients remains our top priority and we want to assure you that our facilities are safe to receive care.

If asked **WHAT** we are doing:

For nearly two months, we have taken steps to increase safety by limiting visitors and screening both them and caregivers for potential COVID-19 symptoms. We've been providing essential Personal Protective Equipment for caregivers, practicing physical distancing including adjusting our waiting areas to provide more space in between seating to protect patients, expanding testing capabilities and continuing to clean our facilities extensively. We are also requiring our caregivers to wear masks while at work. And providing masks for all visitors and patients to wear when they enter our facilities and continuing to have them sanitize their hands upon entry. Keeping our patients, visitors and caregivers safe is our top priority.

If **NO** to rescheduling:

We understand your concern during this difficult time. Would you be comfortable with me following up next month to reschedule?

If **YES** to rescheduling:

COVID-19 TEST

For your continued safety and in preparation for your surgery/procedure, all patients will be tested for COVID-19 prior to their surgery. You will be contacted by _____ to book an appointment for your COVID-19 test 2 – 3 days before your surgery/procedure. This will need to be done before you can have your procedure/surgery.

We have two facilities for on-site testing in Ohio located in the garage of the W.O. Walker Building at Cleveland Clinic's main campus (10524 Euclid Ave.), and at Cleveland Clinic's Akron General Health and Wellness Center in Green (1940 Town Park Blvd. in Uniontown).

Testing is open 11 a.m. - 5 p.m., seven days a week. A Cleveland Clinic electronic provider's order is required for COVID-19 testing.

You will be provided a scheduled date and time for this testing when _____ calls you. All COVID-19 testing is by appointment only.

CHANGES TO FACILITIES

So you are prepared and comfortable on the day of your procedure/surgery, I want to make you aware of several safety measures we've put in place.

When entering our facilities, patients and visitors will be screened for potential COVID-19 symptoms including a temperature scan. You will be asked to sanitize your hands and will be provided with a cloth mask to wear the entire time you are in our buildings. You may choose to bring your own mask from home which is fine.

Additionally, as the furniture has been rearranged to promote social and physical distancing, your visitor may be asked to wait outside of the building or at an alternate location within the Cleveland Clinic facility. This is for everyone's safety and we will ensure the surgical team is able to contact your support team.

We just discussed a number of things. Do you have any questions?

Is there anything else I can assist you with?

Thank you for your time and have a good day/evening.

Day Before Surgery Script

Hello. I'm _____ calling from Dr. _____'s office to provide you with the information for your surgery/procedure tomorrow. Your COVID test result was negative. *[Utilize current Epic screening questions]* Can you please confirm the best number for your driver to be reached at tomorrow for updates?

So you are prepared and comfortable on the day of your procedure/surgery, I want to make you aware of several safety measures we've put in place.

When entering our facilities, patients and visitors will be screened for potential COVID-19 symptoms including a temperature scan. You will be asked to sanitize your hands and will be provided with a cloth mask to wear the entire time you are in our building. You may choose to bring your own masks from home.

Additionally, as the furniture has been rearranged to promote social and physical distancing, your visitor may be asked to wait outside of the building or at an alternate location within the Cleveland Clinic facility. This is for everyone's safety and we will ensure the surgical team is able to contact your support team.

[Surgery / procedure team to provide any specific information necessary for the patient.]

Pre-Op Covid+ Script

Patient will be notified by:

Surgical team (cancel surgery), and CC Home monitoring program

Surgical Team Script:

This is ____ from Dr. ____'s office at Cleveland Clinic. I am following up on your COVID-19 test results. You have tested positive for COVID-19. I'm sure you have questions, and I will do my best to help you.

You will also be contacted by the Cleveland Clinic Home Monitoring Program with specific details about your treatment. Have they contacted you?

If yes:

Good. Please follow their instructions for treatment.

If no:

They will be contacting your soon.

For now, please stay at home, follow appropriate social isolation/quarantine by staying at home with limited contact with your household members and use proper hand hygiene and cough etiquette.

You should only travel for essential reasons like healthcare visits. And please wear a mask at all times when out of your house.

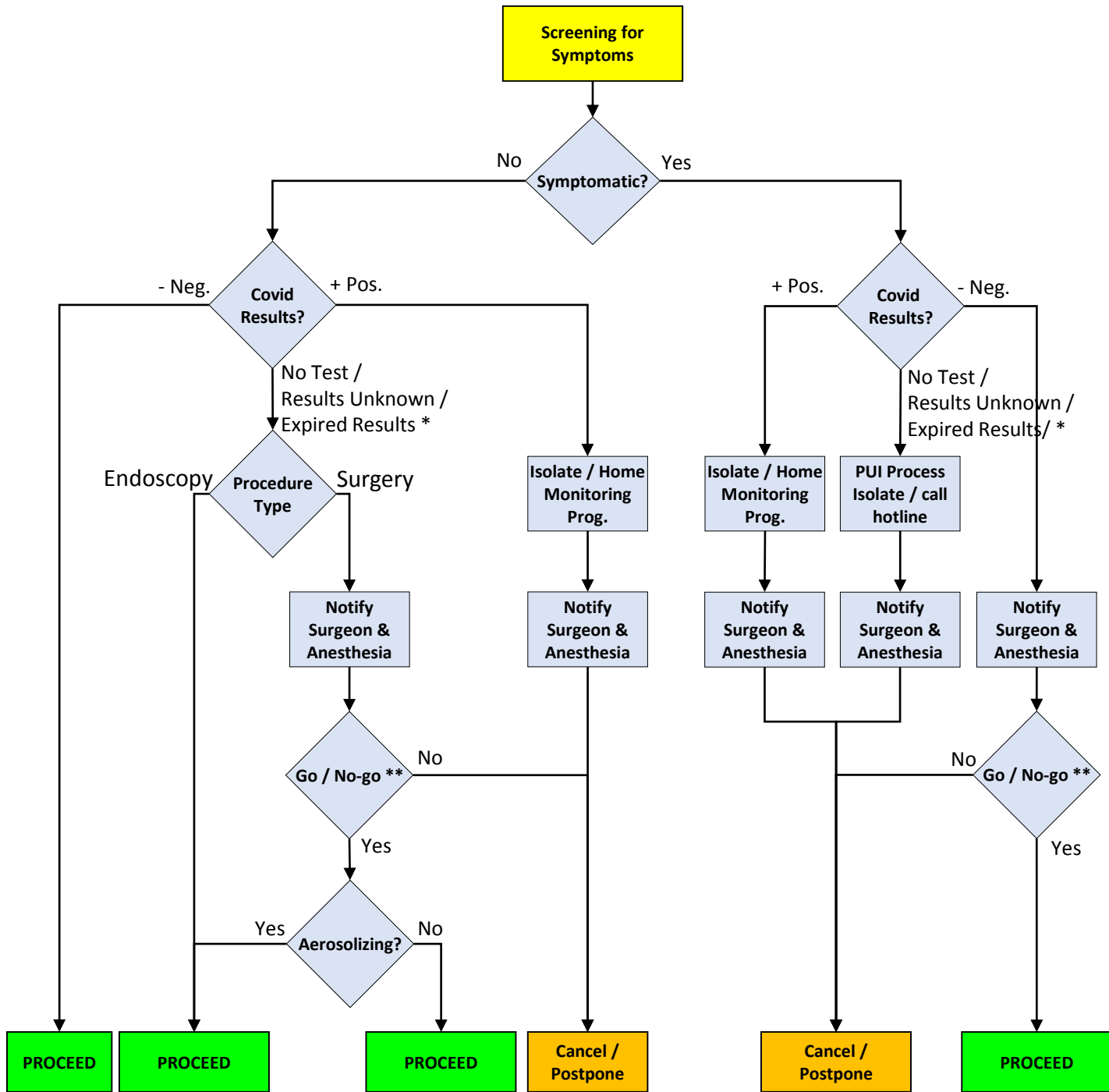
Please await the home monitoring team's phone call for additional information. If you develop any symptoms such as fever, cough, shortness of breath, chills, body aches/muscle pain, headache, sore throat, diarrhea or loss of smell and loss of taste then please call the COVID-19 Hotline at 855.697.3750.

I have spoken to Dr. ____ about your test results. As a result, your surgery will be cancelled at this time. Keeping you safe and healthy is our top priority. Once you have been cleared by the Cleveland Clinic Home Monitoring Program, please contact Dr. ____'s office with this update and we will work to reschedule your surgery at that time.

Do you have additional questions?

Thank you for your understanding. I wish you a safe and quick recovery.

Covid-19 Pre-Operative Surgery Decision Tree



- N95 protocol
- All surgical team
- Dedicated team / space

- N95 Anesthesia intubation
- Rest of surgical team in surgical mask
- Dedicated Post-Op space
- Cohorting

* Consider switching case order (last case of the day); Consider rapid testing

** Consult local Surgical Operations Covid-19 Governance Committee

Epic Smart Phrases (Dot Phrases)

Include the following smartphrases (dotphrases) in your note:

- a. .COVID19SURGERY (Ohio) or .COVID19SURGERYFL (Florida)

Select Continued Surgeries.

{COVID19 SURGERY CANCELLED/CONTINUED:2513002}
{CANCELLED SURGERIES.TXT,5002512}
{CONTINUED SURGERIES.TXT,5002513}

COVID 19 SURGERY CANCELLED/CONTINUED FL:124236}
{COVID 19 CANCELLED SURGERIES FL.TXT,100384}
{COVID 19 CONTINUED SURGERIES FL.TXT,100385}

Select a reason. The Ohio smartphrase now includes an additional reason for continuing with the procedure: "there is a risk or presence of severe symptoms causing an inability to perform activities of daily living."

{REASONS:2513001}
there is a threat to the patient's life if the surgery or procedure is not performed
there is a threat of permanent dysfunction of an extremity or organ system if delayed
there is a risk of metastasis or progression of staging if delayed
there is a presence of severe symptoms causing an inability to perform activities of daily living
there is a risk of rapidly worsening to severe symptoms if delayed

- b. .COVID19SURGERYRISKCCHSFLW*

The following text will document your discussion with the patient and the decision.

The patient was offered a surgery/procedure at a Cleveland Clinic facility. The surgeon/proceduralist and patient have discussed in detail the risk of exposure to and/or potential harm posed by the COVID-19 virus with having a surgery/procedure at this time versus the risk of delaying the surgery/procedure. It is not possible to know either the risk of delaying the surgery or procedure or chance of getting an infection with perfect accuracy, but a joint decision was made between the patient and the surgeon/proceduralist to proceed at this time with the scheduled surgery/procedure as indicated on the consent form.

* This smartphrase is also available as a smarttext: COVID 19 SURGERY RISK CCHS & FLW [5002568]