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**Safely resuming elective surgery as COVID-19 curve flattens:**
ACS, ASA, AORN and AHA develop roadmap for readiness

**CHICAGO** – As the COVID-19 surge wanes in different parts of the country, patients' pent up demand to resume their elective surgeries will be immense. To ensure patients can have elective surgeries as soon as safely possible, a roadmap to guide readiness, prioritization and scheduling has been developed by the American College of Surgeons (ACS), American Society of Anesthesiologists (ASA), Association of periOperative Registered Nurses (AORN) and American Hospital Association (AHA).

In response to the COVID-19 pandemic, the groups joined the Centers for Medicare and Medicaid Services (CMS) and praised their thoughtful tiered approach to postponing elective procedures, ranging from cancer biopsies to joint replacement, that could wait without putting patients at risk. Readiness for resuming these procedures will vary by geographic location depending on local COVID-19 activity and response resources. A joint statement, developed by ACS, ASA, AORN and AHA, provides key principles and considerations to guide health care professionals and organizations regarding when and how to do so safely.

The statement notes facilities should not resume elective procedures until there has been a sustained reduction in the rate of new COVID-19 cases in the area for at least 14 days. The facility also should have adequate numbers of trained staff and supplies, including personal protective equipment (PPE), beds, ICU and ventilators to treat non-elective patients without resorting to a crisis-level standard of care.

The timing for resuming elective surgery is one of the eight principles and considerations to guide physicians, nurses and facilities in their resumption of elective surgery care, for operating rooms and all procedural areas, factoring in: timing, testing, adequate equipment, prioritization and scheduling, data collection and management, COVID-related safety and risk mitigation surrounding a second wave and other issues including the mental health of health care workers, patient communications, environmental cleaning and regulatory issues.

Highlights include:

- Implement a policy for testing staff and patients for COVID-19, accounting for accuracy and availability of testing and a response when a staff member or patient tests positive.

- Form a committee – including surgery, anesthesiology and nursing leadership – to develop a surgery prioritization policy, which factors in previously canceled and postponed cases, and allot block time for priority cases, such as cancer and living donor organ transplants.

- Adopt COVID-19-informed policies for the five phases of surgical care, from preoperative to post-discharge care planning.

- Collect and assess COVID-19 related data that will be used to frequently re-evaluate and reassess policies and procedures.
- Create and implement a social distancing policy for staff, patients and visitors in non-restricted areas in anticipation of a second wave of COVID-19 activity.

ACS, ASA, AORN and AHA continue to monitor COVID-19 to evaluate and manage its impact on members, the health care community, patients and staff. Additional important information on patient care in the COVID-19 pandemic will be regularly updated on ACS, ASA, AORN and AHA websites.

ABOUT THE AMERICAN COLLEGE OF SURGEONS
The American College of Surgeons is a scientific and educational organization of surgeons that was founded in 1913 to raise the standards of surgical practice and improve the quality of care for all surgical patients. The College is dedicated to the ethical and competent practice of surgery. Its achievements have significantly influenced the course of scientific surgery in America and have established it as an important advocate for all surgical patients. The College has more than 82,000 members and is the largest organization of surgeons in the world. For more information, visit www.facs.org.

ABOUT AMERICAN SOCIETY OF ANESTHESIOLOGISTS
Founded in 1905, the American Society of Anesthesiologists (ASA) is an educational, research and scientific society with more than 54,000 members organized to raise and maintain the standards of the medical practice of anesthesiology. ASA is committed to ensuring physician anesthesiologists evaluate and supervise the medical care of patients before, during and after surgery to provide the highest quality and safest care every patient deserves. For more information on the field of anesthesiology, visit the American Society of Anesthesiologists online at asahq.org. For updated information, resources and education related to COVID-19, please visit www.asahq.org/covid19info. To learn more about the role physician anesthesiologists play in ensuring patient safety, visit asahq.org/WhenSecondsCount. Like ASA on Facebook, follow ASALifeline on Twitter.

ABOUT THE ASSOCIATION OF PERIOPERATIVE REGISTERED NURSES
The Association of periOperative Registered Nurses (AORN) supports the professional practice of more than 200,000 perioperative nurses by providing evidence-based research, education, standards, and practice resources—including Guidelines for Perioperative Practice--to keep health care workers safe and enable optimal outcomes for patients undergoing operative and other invasive procedures. For more information, visit http://www.aorn.org.

ABOUT THE AMERICAN HOSPITAL ASSOCIATION
The American Hospital Association (AHA) is a not-for-profit association of health care provider organizations and individuals that are committed to the health improvement of their communities. The AHA advocates on behalf of our nearly 5,000 member hospitals, health systems and other health care organizations, our clinician partners – including more than 270,000 affiliated physicians, 2 million nurses and other caregivers – and the 43,000 health care leaders who belong to our professional membership groups. Founded in 1898, the AHA provides insight and education for health care leaders and is a source of information on health care issues and trends. For more information, visit the AHA website at www.aha.org.

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TO SPEAK WITH A REPRESENTATIVE, CONTACT:

Sally Gameski  
Senior Manager of Public Profile and Visibility  
American College of Surgeons  
312-202-5328  
pressinquiry@facs.org

Theresa Hill  
Director of Public Relations  
American Society of Anesthesiologists  
(773) 330-5273  
t.hill@asahq.org

Gayle Davis  
Director, Corporate Communications  
Association of periOperative Registered Nurses  
(303) 928-9105  
gdavis@aorn.org

Marie Johnson  
Vice President Media Relations  
American Hospital Association  
(202) 626-2351  
mjohnson@aha.org