

USANZ UPDATE ON EASING OF RESTRICTIONS TO ELECTIVE SURGERY IN AUSTRALIA 23/4/20

The Federal Government has announced a cautious, staged increase in elective surgical activity starting 27th April.

This, in part, is in response to

- Decreased COVID 19 community infection rate
- Improved PPE stock and availability

Since the COVID 19 crisis began permissible cases have been restricted to category one and urgent category

- 2. The application of this guide and interpretation of previous USANZ advisories has, by necessity varied
 - over time
 - between and within states and territories as well as
 - between and within public and private systems

depending on many factors including local infection rates, PPE availability and their putative roles in managing projected COVID case numbers.

An initial 25% increase available operating lists over the following month has been advised. The calculation will take in to account pre COVID 19 activity and capacity and recent activity. Please talk to your local institution for their interpretation and application of the 25% ruling. A standard list is 4 hours. General principles of the expanded case selection include

- Category 1 and urgent category 2 cases will still have priority.
- Other cases to be performed at the discretion of operating surgeon and their facility
- Emphasis on cases that are
 - o high value for the patient
 - o low risk to surgeon and staff
 - o low risk of needing ICU/HDU or prolonged admission.
- There is no need to test all patients for COVID 19 preoperatively given the currently extremely low community infection rate in Australia. This does not exclude selective testing of at risk patients in whom surgery cannot be delayed.
- Equity of access for both patients and surgeons across specialities.

The increase in activity will be closely and regularly monitored by government with close scrutiny of

- Intensive Care bed usage
- Consumption of PPE
- Incidence of COVID 19 infections in institutions
- Adherence to guidelines

Institutions have significant incentives to make this work as noncompliance may jeopardise private institutions' access to the National Viability Guarantee and an outbreak of COVID 19 infections in their hospital and staff would severely curtail activity.

USANZ encourages our members to work closely with their individual institutions. If we do the right thing now and the current infection trends continue a gradual return to full activity may be achievable over coming months.