



Kentucky Hospital Association Consensus Statement Regarding Recommendation on Cancellation of Elective Procedures

On March 14, 2020, Governor Andy Beshear recommended that Kentucky hospitals stop performing elective procedures as of close of business, Wednesday, March 18, 2020, as part of a mitigation strategy to curb the spread of COVID-19.

Because “elective procedures” is not defined, there is potential to greatly limit necessary and lifesaving care for thousands of residents. Many Kentucky facilities provide specialty services unavailable elsewhere. This statement is intended to provide further guidance about how to operationalize the Governor’s recommendation.

Modeling predicts a surge of the number of serious COVID-19 cases who potentially need hospital care. However, the hospital system must continue to balance the needs of caring for patients with COVID-19 while also continuing to provide vital services to others in the community who need care. Hospitals must continue to treat many patients with emergency needs: people with heart attacks, strokes, mental health crises or who have been in car accidents.

“Elective” simply means a procedure is scheduled rather than a response to an emergency. For example, “elective” surgeries could include replacement of a faulty heart valve, removal of a serious cancerous tumor or a pediatric hernia repair. Often, if these types of procedures are delayed or canceled, the person’s condition gets rapidly worse. The resulting decline in their health could make them more vulnerable to COVID-19.

A blanket directive to cancel elective procedures based on COVID-19 does not reflect the varying capacity of hospitals to provide care at this moment. Many hospitals, including specialty hospitals, have not yet been affected.

Consensus statement:

All Kentucky hospitals are implementing cancellation of procedures that, if delayed, in the physician’s judgment will not cause harm to the patient, delay diagnosis, or negatively impact the patient’s life expectancy. Examples include: cataract surgeries, cosmetic surgeries, and some orthopedic cases.

Hospitals will continue to provide needed procedures as it is safe to do so, prioritizing care that if delayed could negatively affect the patient’s health outcome, harm the patient, or lead to disability or death.

This is a fluid and changing situation and these standards may change to meet community care needs.

Elective procedures, both those in an operating room and in other procedural areas of hospitals, will be performed based on evaluation of the following factors:



- Current and projected COVID-19 cases in the facility and in the surrounding area.
- Supply of personal protective equipment, staffing availability and bed availability.
- Urgency of the procedure, with maintenance of procedures most urgent. The least urgent procedures or those with the least long-term impact will be cancelled first.
- Effectiveness of steps to reduce inpatient hospital load such as:
 - moving pediatric patients in general hospitals to pediatric hospitals to vacate beds for critically ill adult patients;
 - moving psychiatric patients from medical/surgical hospitals to freestanding psychiatric hospitals; and
 - moving hospitalized patients not in need of acute care to a lesser level of care.
- Daily availability of total hospital beds, ICU beds, ventilators, and surge capacity.
- Likely length of stay of the patient post-procedure and the ability to discharge the patient efficiently, with the goal of not tying up hospital beds for lengthy stays. In particular, hospitals will consider delaying procedures for patients who need to be discharged to post-acute care.
- Whether the patient is well enough for a procedure, including age and underlying health factors, particularly given the risks of COVID.
- Clinical judgement of patient needs and the situation at hand.

The KHA recommends a similar position be taken in all ambulatory surgery centers and other freestanding facilities where procedures are being performed which consume personal protective equipment.

KHA, March 15, 2020