

APR 28, 2020

# Ophthalmic ASC Reopening Guidance

**Guidance from the American Academy of Ophthalmology, the American Society of Cataract and Refractive Surgery and the Outpatient Ophthalmic Surgery Society for reopening ambulatory surgery centers.**

The country's commitment to social distancing and shelter-in-place rules is reducing the spread of COVID-19. We are flattening the curve. It is now time to consider the process of cautiously reopening ophthalmology care and serving the growing healthcare needs of patients who deferred needed care and are at increased risk of experiencing a negative clinical outcome. To facilitate the safe reopening of surgical capacity, our three organizations today released an [Ophthalmic ASC Reopening Checklist](#).

While the ophthalmic community closed routine practice nationally, we will open locally. The decision to reopen more normal practice will be based on local and regional conditions, on public health authorities interpreting local patterns of disease, on testing availability, on institutional policies and ultimately on individual ophthalmologists.

To support the safe reopening of care, the American Academy of Ophthalmology, the American Society of Cataract and Refractive Surgery, and the Outpatient Ophthalmic Surgery Society, developed the checklist. This checklist details specifically how to approach and manage some of the key decisions in reopening more normal practice in the COVID-19 era.

With respect to COVID-19 testing, facilities should adhere to state and local guidance. For cases at low risk for aerosolizing bodily fluids and performed under monitored anesthesia/conscious sedation, such as cataract surgery, routine preoperative RT-PCR testing should not be mandatory. However, this may be considered for patients with risk factors on an individual basis.

We would like to thank the Ambulatory Surgery Center Association (ASCA) for its substantial contribution to the development of this checklist.

This virus is still with us. We simply must use our accumulated experience and scientific information and adapt to it. We must be thoughtful and careful—for our patients, our staff and colleagues, and for ourselves and our families.