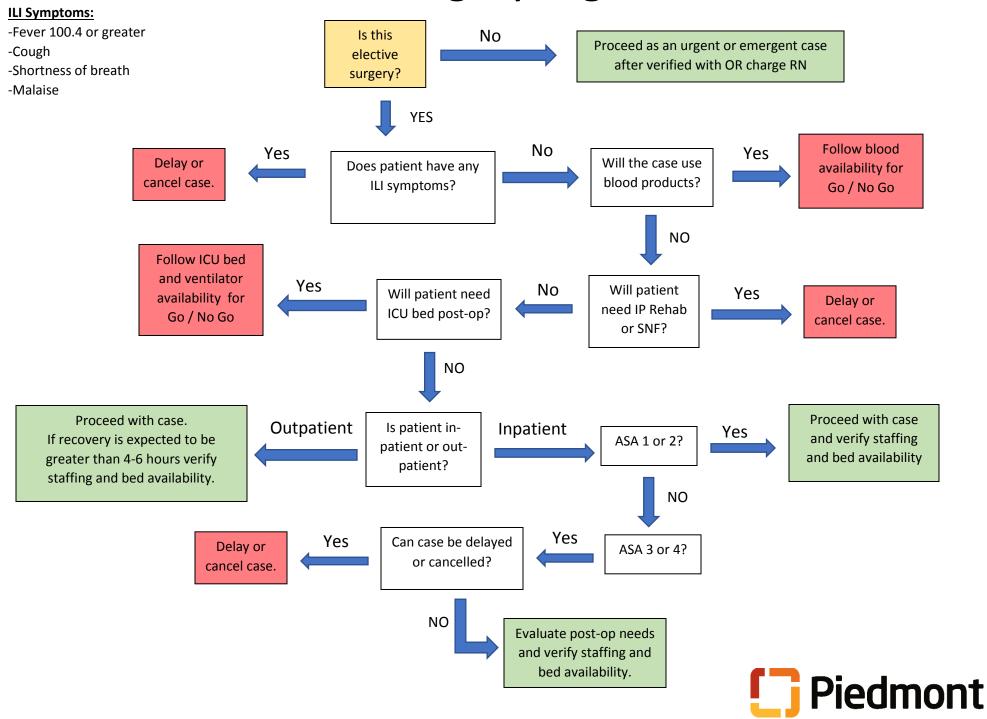
Elective Surgery Algorithm



Elective Surgical Procedures

Patient Arrival

Any patient who arrives with influenzas like symptoms (fever greater than 100.4, cough, shortness of breath, malaise) will not be processed to pre-op short stay areas and will be released to home. If patient is significantly ill-appearing they will be offered to go to the emergency room for evaluation.

Duties of OR Director

A relates to elective surgery - COVID-19

It is suggested that the OR director will review the following in safety huddle with the other directors as to availability in order to list as GO or NO-GO.

- Daily OR Director with a designated team will factor in:
 - Staffing
 - Blood Availability
 - Supplies
 - o ICU Bed Availability
 - Ventilator Availability
 - o Isolation Needs and Availability
 - o Assessment of surgery cancellations as it relates to rooms and the schedule
- A GO or NO-GO will be assigned to each of the above.

A NO-GO for staffing, supplies, and ventilators – ALL CASES ARE DELAYED OR CANCELLED

A NO-GO for blood availability and ICU beds – ALL CASES LISTED AS NEEDING BLOOD OR ICU POST-OP WILL BE DELAYED OR CANCELLED.

A NO-GO for isolation needs – ANY CASE REQUIRING ISOLATION POST-OP WILL BE DELAYED OT CANCELLED.

**If a decision is made to cancel elective cases the OR director will notify their direct line administrator, Chief of Surgery and Chief of Anesthesia.

Surgical Services Status Report

At each entity a Surgery Response Team would evaluate surgery operations based on the situation at each entity and report out surgical services status.

Entity Surgical Response Team Members:

Staffing	Blood Availability	Supplies (masks,	Surgery Operations to
	2.00a / trainability	gowns, etc)	Consider
Stage I	Available	Available	Continue Normal Operations
Hospital is able to maintain staffing levels with existing staff and routine support from system float pool.		Low Supply	Use Elective Surgery Algorithm
		Critical Supply	No Elective Surgery
	Low Supply	Available	Use Elective Surgery Algorithm
		Low Supply	Use Elective Surgery Algorithm
		Critical Supply	No Elective Surgery
	Critical Supply	Available	Use Elective Surgery Algorithm
		Low Supply	No Elective Surgery
		Critical Supply	No Elective Surgery
Stage II	Available	Available	Continue Normal Operations
Hospital is able to maintain appropriate staffing levels with additional resources assigned by the Central Staffing Office		Low Supply	Use Elective Surgery Algorithm
		Critical Supply	No Elective Surgery
	Low Supply	Available	Use Elective Surgery Algorithm
		Low Supply	No Elective Surgery
		Critical Supply	No Elective Surgery
	Critical Supply	Available	Use Elective Surgery Algorithm
		Low Supply	No Elective Surgery
		Critical Supply	No Elective Surgery
Stage III	Available	Available	No Elective Surgery
Hospital consolidates similar patient populations, closes beds and cohorts staff as required to maintain appropriate staffing using all available hospital-based staff and resources assigned by the Central Staffing Office.		Low Supply	No Elective Surgery
		Critical Supply	No Elective Surgery
	Low Supply	Available	No Elective Surgery
		Low Supply	No Elective Surgery
		Critical Supply	No Elective Surgery
	Critical Supply	Available	No Elective Surgery
		Low Supply	No Elective Surgery
		Critical Supply	No Elective Surgery

OR	Normal Operations for		
Status I	Surgical Services		
OR	Use Elective Surgery		
Status II	Algorithm to limit surgical		
	cases		
OR	No elective surgery will be		
Status III	performed due to limited/no		
	resources		

Daily the Surgery response team will factor in:

- Staffing
- Blood Availability
- Supplies
- > ICU beds
- Ventilators
- > Isolation Needs
- > Assess surgery cancellations for room in the schedule

