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ISSUE: Recommendations for Deferral of All Non-essential Dermatologic Procedures**Date of Issuance: March 22, 2020****Why Cancel Elective Surgeries:**

- 1) Protect patients, staff, and providers;
- 2) Preserve critically short supplies of PPE

The Ohio Dermatological Association, recognizing we are in a remarkable moment, understands that dermatologists, their patients, and the community at large will experience strain and make significant sacrifices. Our goals are to decrease the exposure of staff, patients, and providers; preserve PPE; and be good stewards of our community by providing essential dermatologic care and actively participating in the mitigation of the spread of SARS-CoV-2.

Resources for Recommendations:

- [NCCN Short-term Recommendations for Cutaneous Melanoma Management during COVID-19](#);
- [Ohio Department of Health Order for the Management of Non-essential Surgeries and Procedures throughout Ohio](#) *;
- [CMS Adult Elective Surgery and Procedures Recommendations](#)

*Per a direct communication between the ODA and the Ohio Department of Health, the Order referenced does apply to all dermatology practices in the state of Ohio.

Additional Resources:

- [For an overview of telehealth visits and relevant CPT codes, click here](#)
- [For other clinical recommendations from the AAD, click here](#)

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What we know:

1. Cough, fever, fatigue, or sore throat are the most common symptoms in adults
 2. Asymptomatic spread can occur during the prodromal phase (the mean incubation period is ~5 days, with a range of 0-14 days), with viral shedding greatest when symptoms begin
 3. Older people and those listed by the CDC as vulnerable populations, including severe chronic health conditions, such as heart disease, lung disease, diabetes, decompensated cirrhosis, HIV with low CD4 counts, and immunosuppression, (including liver and other solid organ transplant recipients) are at higher risk of developing more serious illness. Pregnancy may be a risk
 4. Best protection against virus transmission: Wash hands, Don't touch your face, Cough etiquette, Social distancing, Avoid crowds
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Recommendations:

*As possible, it is beneficial for dermatology offices to remain open to keep the burden off of the emergency rooms, urgent care, and primary care offices in this time of need. This will allow for care of emergent skin issues, and, via telehealth, non-emergent dermatologic care.

*The following are recommendations, not mandates. Each patient should be considered individually.

General Recommendations

1. Minimize patient time in waiting rooms. If possible, have patients wait in their car until a room is ready. If patients must be in a waiting room, space chairs in the waiting room to maintain social distancing of at least 6 feet.
2. Decrease the number of visitors in the office as much as possible (particularly those <16 years old). Consider a policy with no visitors, except in cases that require someone be with the patient.
3. Pre-screen all patients for high-risk exposure or symptoms. Avoid bringing patients into medical facility if they have one of the CDC recognized risks list below (may also consider temperature screen).
 - a. Suggested pre-screen questions:
 - i. Do you currently have cough, fever or flu-like symptoms?
 - ii. Have you travelled in the past 14 days?
 - iii. Have you been in contact with anyone with the above symptoms in the past two weeks?

- iv. Are you concerned that you may have been exposed to coronavirus?
4. Reduce the number of team members in the room to only essential members.
5. Make sure appropriate personal protective equipment is available and worn by all members of the team.
6. Conservation of PPE is critical. Consider extended use of surgical masks if permitted by local guidance and/or institutional guidelines.
7. Consider using dissolvable top sutures, glue, or no top sutures whenever possible to decrease the number of suture removal visits.
8. Consider transitioning all consults and follow-up visits to televisits, if appropriate. Given the relaxation of rules around telehealth and acceptable technologies to complete these visits, telehealth is now available to all practitioners.
9. For patients for whom treatment has been deferred, a system should be created to track each patient systematically.

Surgical Recommendations

10. It is recommended, for malignant melanoma (MM) with <1mm depth, to consider delaying versus a 1 cm wide local excision (consider on a case-by-case basis, while balancing the risk of COVID -19 complications for these high-risk patients). For detailed recommendations from the NCCN, refer to [NCCN's Short-term Recommendations for Cutaneous Melanoma Management during COVID-19](#)
11. It is recommended to defer treatment of melanoma in situ (MIS)
12. It is recommended to only treat cutaneous squamous cell carcinoma with significant risk factors such as: Rapidly-enlarging tumors, poorly-differentiated tumors, perineural tumors, ulcerated and symptomatic lesions; (while balancing the risk of COVID -19 complications for these high-risk patients)
13. It is recommended to defer treatment of all small, low-risk cutaneous squamous cell carcinoma.
14. It is recommend deferring all basal cell carcinomas, except for exceptional cases of highly-symptomatic lesions (while balancing the risk of COVID -19 complications for these high-risk patients).
15. It is recommended that very high-risk skin cancers, such as merkel cell carcinoma and adnexal carcinomas, should be considered on a case by case basis and stratified by risk factor. Surgical removal is to be considered for these cases (while balancing the risk of COVID -19 complications for these high-risk patients).
16. It is recommended to perform biopsy on lesions concerning for high-risk cancer (cutaneous squamous cell carcinoma with significant high-risk factors, malignant melanoma (MM), Merkel cell carcinoma, etc). Attempt biopsy with intent to remove clinical lesion (i.e. saucerization, etc). Additionally, though outside the scope of these

recommendations, biopsy for any life-threatening dermatologic condition is recommended.

17. It is recommended that all cosmetic procedures be deferred.

18. It is recommended that procedures for all benign lesions be deferred.

Given the ever-evolving and fluid nature of this pandemic, CDC and local guidelines continue to evolve. We urge you to continue to follow this evolution and adhere to all CDC recommendations, as well as local guidelines.

The purpose of this communication is to offer recommendations for Ohio dermatologists during the COVID-19 pandemic based on currently available information, with the hope of optimizing patient, staff, and provider safety. These guidelines will be constantly evaluated against state and national recommendations and will be updated as the situation evolves.

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