



DATE: May 4, 2020
TO: All MultiCare Leaders, Physicians, APPs and
MultiCare Connected Care Providers
FROM: David Carlson, DO, Chief Physician Officer
SUBJECT: Re-evaluating postponed surgeries, procedures and diagnostic
tests

A few weeks ago, we shared with you the good news that our operational picture as it related to COVID-19 has improved. Our social interventions have helped flatten the curve. While we still need to follow our PPE conservation measures, we are in a better position to ensure sufficient supplies to take care of our patients.

Evidence also indicates that the surge in COVID-19 cases in our communities has passed, giving us capacity to handle more surgeries and procedures. **We have the ability to perform procedures safely for both our patients and staff.**

We asked that you review postponed procedures and **schedule any - which may include imaging, lab, interventional procedures and surgeries - that in your clinical judgment you believe would cause your patients harm if further delayed.**

Thank you for conducting that work. We have been able to reschedule some procedures for our patients, ensuring that they get the timely care they need. We also believe there's more we could be performing.

Last week, Gov. Jay Inslee provided some clarification about the clinical considerations we should use when evaluating surgeries, which was consistent with the guidance we provided two weeks ago. The governor reiterated that the assessment of harm is up to the individual clinician. To assess harm, clinicians should consider if a patient's illness or injury is causing significant pain, significant dysfunction in their daily life or work, or is either progressing or at risk to progress. He provided the following criteria:

- **Expected advancement of disease process**
- **Possibility that delay results in more complex future surgery or treatment**
- **Increased loss of function**
- **Continuing or worsening of significant or severe pain**
- **Deterioration of the patient's condition or overall health**
- **Delay would be expected to result in a less-positive ultimate medical or surgical outcome**
- **Leaving a condition untreated could render the patient more vulnerable to COVID-19 contraction, or resultant disease morbidity and/or mortality**

- **Non-surgical alternatives are not available or appropriate per current standards of care**
- **Patient's co-morbidities or risk factors for morbidity or mortality, if inflicted with COVID-19 after procedure is performed**
- **Postponement could create a financial hardship**

We hope this updated guidance helps you in your decision-making process. Any cases now deemed necessary should be scheduled through our normal process. This will allow us to get patients the care they need as soon as possible. The clinical judgment supporting the scheduling and treatment determination should be documented in patient records. We will develop a smart phrase in Epic.

We also want to take this opportunity to remind you that **it's appropriate to schedule new surgeries, procedures and diagnostic tests for patients you are currently seeing** if the delay has the potential to cause harm.

In keeping with the governor's order, we will continue to postpone truly elective surgeries, procedures and diagnostic studies system-wide

We will closely monitor our PPE, testing supplies and COVID-19 activity in our communities and facilities to ensure we are practicing as safely as possible. If we have a surge in COVID-19 activity that jeopardizes patient safety or PPE availability we will communicate appropriately as to any steps necessary to adjust our scheduling and treatment activities.

Please share this information with others who need to be aware of this guidance. Thank you for your ongoing dedication and hard work during this uncertain time.

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