RECOMMENDATIONS ON ORGANIZATIONAL ADAPTATIONS FOR
SCHEDULING, PATIENT FLOW AND USE OF PPE IN AMBULANT SURGERY CENTERS (ASCS) AND COVID19-FREE ZONES IN HOSPITALS

from the International Society of Aesthetic Plastic Surgery

PROVIDED BY THE ISAPS COVID-19 TASK FORCE
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**Entrance:** To minimize contact times and cross contamination between Health Care Providers (HCW) and patients different entrances should be used to separate patient and HCW flow. In case of this not being possible due to structural limitations we recommend to space the entrance times for HCW, patients and deliveries.

**Reception / Admission:** To minimize exposure of seated, non-moving reception staff signaling for at least 1,5 mt distance keeping while waiting is recommended together with physical separation (either face shield use or installed plexiglass wall in between the patient area and receptionist) that keep the load of droplets and airborne smaller.

**Visual information and Signaling:** To avoid the need for assisted guidance to the different areas of the healthcare facility we suggest creation of color-coding signage for patient guidance (ex. Colored dots on the floor, colored lines on the floor or walls, and color-code in each door or area entrance)

**Consultation and Treatment room size:** Room size should be adequately big to allow for movement with safety distance of 1,5 – 2 m between 1-2 HCWs and 1 patient.

**Hand sanitizer:** There should be a hand sanitizer holder in each entrance and also in each area of the ASC that permits sanitizing the hands in between areas

**Surgical mask / Gloves:** We recommend dispensers at the entrance of the department or (staff & patients)

**PPE :** There should be a separated area in changing room for dispensing specific PPE and also a checklist for PPE equipment.
ADAPTATIONS

Adaptation of Agenda

Sufficient spacing between appointments and procedures is necessary to allow for distancing between patients and leave time for decontamination.

Adaptation of Patient Flow

As many corridors in ASCs or specialty clinics do not allow to keep distance of min 1,5 m between 2 people passing, patient flow should be managed by spacing scheduling to minimize inter patient contact. A distance of 1.5 meters must be maintained between the patients sitting in the waiting room.

Adaptation of Schedule:

Take sufficient time for consultations - 30 minutes for checks and 60 minutes for new consultations. Extend the opening hours if necessary. If more than one consultant at the facility, space appointment times.

Reception should perform the pre-questionnaire to decide the suitability of the patient to come for consultation or procedure. If all answers are NO the patient qualifies to come to the clinic. (TABLE1). The patient should be advised that they should come alone (exception only for surgeries that require a companion for post anesthesia care)

Patient arrival

1. Before entering clinic = Hand disinfection with alcohol gel, wear mask. If possible, patients should bring their own mask.
2. Entering and keeping 1.5 m distance from the reception waiting for instructions
3. Temperature check and asked if hand disinfection has been performed.
4. After check-in / Admission, receptionist will direct a color line/CODE to follow
5. In waiting rooms, a safety distance of at least 1.5 metres must be maintained.
6. To minimise the spread of infection from objects, remove all furniture and equipment that is not absolutely necessary, such as magazines, coffee machines, etc.
7. Regularly wash door handles, card terminals, surfaces etc. with disinfectants
8. Increase the temperature of the dishwasher to 70° Celsius
PATIENT CONSULTATION AND TREATMENT

1. CONSULTATIONS

1. During consultation 1.5 m distance should be kept, patient and HCW wear masks, if closer approach is needed PPE (Figure V) should be worn.
2. HCW and patient disinfect the hands upon entering the office/ treatment room
3. In cases where patients need to be examined naked a plastic bag should be provided to put clothes inside during consultation.
4. Patient should repeat disinfection of the hands after getting dressed.
5. Patient should be redirected to reception area, in case the patient came for multiple purposes such as pre-op appointment, HCW should advise the reception that the consultation is over and that the patient will be redirected to another area.
6. Hands of patient and doctor/aesthetician should be disinfected after physical examination and upon leaving the office, all surfaces should be disinfected with alcohol or surface disinfectant. Consider 5-10 min ventilation of treatment/consultation room before next patient.

2. AESTHETIC NON-SURGICAL PROCEDURES

1. During consultation/treatment 1.5 m distance should be kept, patient and HCW wear masks, if closer approach is needed PPE (Figure V) should be worn
2. HCW and patient disinfect the hands upon entering the office/treatment room
3. Hand disinfection should be done upon entering and leaving the room
4. Used instruments should be put in a plastic sealable bag for transport to decontamination area
5. It is not allowed to reuse any material or to bring any material from outside clinic
6. In case of body treatments, a plastic drape will be put under the patient and the therapist needs to wear a FFP2 mask, gown and gloves. (Figure V)
3. **SURGICAL PATIENT**

**Admission**

1. Patient and max 1 companion will follow color codes /signing to pre-operative area /ward.
2. Both will disinfect the hands upon arrival and when leave the room.
3. Room preparation – A Kit for each patient should be left in the bed with a surgical mask and gloves added. Patient clothes should be put in a plastic bag while in surgery.
4. After taking off the clothes and putting them in a plastic bag the patient should pull the hair with elastic bands and wear a hair cap, disposable gown and foot protection.
5. Patient marking – if applicable, surgeon should be alone during marking and wearing PPE. (Figure V)
6. Transport to OR – HCW and Patient should be wearing PPE, while transporting the patient to the OR. (Figure V)

**Surgery**

1. All HCWs need to disinfect the hands before and after changing areas between ORs, induction preparation areas and recovery area.
2. Anesthesia Induction – should be performed with minimum number of HCWs necessary in the OR when intubation is required and a plastic drape should be placed over the head and chest isolating the intubation area, anesthetist should wear double gloves and PPE equipment.
3. Instruments used during anesthesia and surgery should be sealed in a bag for transporting them to sterilization room.
4. If surgery is performed on the body a plastic drape should be put under the head and another plastic drape should be placed above the chest to create a tent isolating the face area. For sedation procedures surgical field/ drape may be adapted to cover oral/nasal cavities. (except for eyelid procedures)
5. After surgery is finished, all the bags should be closed to transport reusable instruments.
6. All HCWs should stay at least 1,5 m apart while taking off non reusable PPE and placing it in protected bins.
7. Hand disinfection should be done after surgery and after all reusable PPE has been placed in a plastic box inside OR for decontamination.
8. Time between surgeries should be longer than usual allowing the correct disinfection and decontamination times for all contact surfaces
9. Not more than one patient should stay in post-operative care area or should be separated by a protection wall.
10. After determined time the patient will be transported by HCW wearing PPE to the room
Discharge of patient:
At discharge the patient should be discharged from its room directly without necessity to pass by reception. All instructions, medications / prescriptions should be available at time of discharge in the patient’s room.

4. **RECEPTION**

**Office administration**
Mail and Packages:

1. Packages should be delivered at the door and not enter in the clinic.
2. The packages and mail should be put in a closed box to be open by the receptionist in a proper time when the clinic has no patient flow and proper disinfection can be performed.

Lab and pathology:

1. All samples for lab analysis and pathology will be kept each with the request inside a sealed bag and all bags inside a closed box.
2. The collection should be booked for the end of day and only once a day.
3. Receptionist should place all small bags in a big sealed bag.
4. Receptionist should give the sealed bag to the collector that should be wearing gloves and mask.

**Patient administration:**

1. Prescriptions: The creams / medications will be handled by the receptionists, put in a bag along with the prescription printed for for the aesthetic/consultation patients to take home. For surgical patients the bag should be left in the room before patient leaves.
2. Payments: Payment should be done in reception preferably with contactless or with card. If not, money and change should be passed on by putting it on the counter, avoid touching of hands when handling money. (Admins staff needs to change or disinfect the gloves after handling money). In surgical cases the payment should be ideally done in full by money transfer before surgery, or upon arrival in the facility to avoid that the patient needs to return to reception to pay after surgery.
3. New appointments should be primarily given by email / phone / whatsapp to avoid patient congestion at reception.

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