

Transforming surgery in the aftermath of COVID-19

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To restart surgeries cancelled because of the coronavirus disease 2019 (COVID-19) pandemic, Canada needs to adopt single-entry models (SEMs) with team-based care, argues a commentary in *CMAJ* (*Canadian*



Medical Association Journal).

As non-emergent surgical services resume, returning to 'business as usual' will not be acceptable," write Drs. David Urbach and Danielle Martin, Women's College Hospital and the University of Toronto, Toronto, Ontario. "The capacity to perform scheduled surgery will be severely constrained as hospitals are continuously but variably stressed by recurring waves of COVID-19 and grapple with the health care workforce, supply chain of equipment and medications, and potential for virus transmission for the foreseeable future."

Single-entry models provide equitable access for patients, with a single entry point to a queue that directs patients to the next available surgeon based on the urgency of their procedure and their priority in the queue. These models reduce wait times for specialist services. Team-based care further reduces wait times for surgeries, while also providing surgeons with equitable access to operating rooms.

Many hospitals in Europe and the United States use these models, and some Canadian examples include obstetrics, <u>cardiac surgery</u> and transplanation services.

Barriers to adoption include reluctance of surgeons and other <u>health care</u> <u>providers</u>, belief in the importance of the established surgeon-patient relationship, and concerns around professional autonomy and financial security.

The authors acknowlege these concerns, but nevertheless suggest SEMs are fair, efficient and provide a patient-centred approach to the significant challenges we are facing.

"Surgeons should join <u>health system</u> and hospital leaders and public policy-makers in adopting this approach as a surgery recovery plan in the



immediate aftermath of the COVID-19 pandemic, and seize this once-ina-generation opportunity to kindle a broader transformation of surgical services for a sustainable and ethical health system in Canada," the authors conclude.

"Confronting the COVID-19 <u>surgery</u> crisis: time for transformational change" is published May 6, 2020.

More information: David R. Urbach and Danielle Martin. Confronting the COVID-19 surgery crisis: time for transformational change. *CMAJ* 2020. DOI: 10.1503/cmaj.200791; early-released May 6, 2020

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