THE GOVERNMENT OF THE REPUBLIC OF THE UNION OF MYANMAR



MINISTRY OF HEALTH AND SPORTS

DEPARTMENT OF MEDICAL SERVICES

SUPPLEMENTARY RECOMMENDATIONS FOR SAFE SURGERY IN COVID 19 PANDEMIC ERA

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Because of the increasing community infection and a rise in number of asymptomatic covid positive patients, the following recommendations are implemented.

1.Regarding emergency surgical cases

All surgical cases requiring emergency surgical procedures must undergo pre-operative Covid screening. (RDT / GXPT)

- 1.1 If the screening test is negative, the patient can go on with surgical procedure as usual.

 Even though screening test is negative, the patient is still suspected for Covid, proceed the operation with level 3 PPE.
- **1.2** If the screening test is positive, the patient must undergo operation at a designated Covid theatre. The surgeon and the whole team must be protected with level 3 PPE. The post-operative patient must be managed at a designated Covid surgical ward.
- 1.3 In a situation where the operation is required immediately (e.g. Bleeding, Tension pneumothorax, upper air way obstruction, etc.), the patient must be operated in a designated Covid theatre by the team fully protected (level 3 PPE) with the result pending.
- **1.3.1** If the screening result came back as negative after the operation, the patient can be managed at a non-Covid surgical ward.
- **1.3.2** If the screening result came back as positive after the operation, the patient must be managed at a designated Covid surgical ward.

2. Regarding the elective cases

All elective surgical patients are advised to follow comprehensive social-distancing and hand-hygiene measures for 14 days before admission.

All surgical cases requiring elective surgical procedures must undergo pre-operative Covid screening. (RDT / GXPT)

- **2.1** If the screening test is negative, the patient can carry on with surgery as a routine procedure within 48-72 hours from the screening test. (Not the time of result issued)
- 2.2 If the screening test is positive, the surgery must be postponed and the patient moved to Covid quarantined center for 11-20 days (according to discharge criteria for Covid 19 confirmed patients Ver 6). After discharged from covid center, elective surgery can be done after one week, either Home isolation or Hospital isolation. If available, the screening test is repeated 2 days prior to operation and the same algorithm is to follow as described above.

3. Regarding Covid-positive patients presenting with surgical symptoms

When a patient in Covid ward presents with surgical symptoms, he/she must be jointly managed by physicians and surgeons.

If the patient needs urgent surgical intervention, it must be done at designated Covid theatre by the team fully protected with level 3 PPE.

4. Special situations

- **4.1** If a post-op patient develops Covid symptoms (e.g. Fever, cough, dyspnea, anosmia, etc.), the screening test is performed and physician consulted immediately.
- 4.1.1 If the screening test is negative, the patient must be treated as non-Covid surgical patient.
- 4.1.2 If the screening test is positive, the patient must be moved to Covid surgical ward and managed. The operation theatre team must be informed and vigorous contact tracing must be done. Theatre facilities need to be sterilized according to the guidelines.
- 4.2 In a facility where screening is not available, the followings are suggested.
- 4.2.1 Surgical emergency cases requiring procedure must be done with full protection of the team (level 3 PPE).
- 4.2.2 Elective surgical cases should be referred to a hospital with screening facility. If the referral is not possible, 14 days quarantine prior to procedure and level 3 PPE protection is advised.
- 4.2.3 Covid patients with underlying surgical diseases (CA breast, Non-obstructive CA colon, etc.) must be treated for Covid-related problems first. Surgical management must be delayed until the patient is Covid free.

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