

April 6, 2020

## Update on Munson Healthcare's Response to Executive Order 2020-17 | Temporary Restrictions On Non-Essential Medical And Dental Procedures

On March 21, Munson Healthcare changed its surgical case boarding criteria to comply with the Governor's executive order [2020-17](#) restricting non-essential medical and dental procedures. The restriction is necessary "to mitigate the spread of COVID-19, protect the public health, provide essential protections to vulnerable Michiganders, and ensure the availability of healthcare resources."

**Here is the case boarding criteria that Munson Healthcare is following: Patient has risk to losing life or limb between 2 and 30 days if the surgery is not performed.**

Examples include, but are not limited to:

- **CANCER HEALTH:** Tumor resection to address imminent vascular, neural, intestinal, or organ compromise, surgeries related to subacute infection treatment.
- **CARDIOTHORACIC:** Inpatient NSTEMI or STEMI on IV heparin with controlled ischemia, controlled active endocarditis, valvular heart disease rescued from heart failure, heart failure dependent on IV inotropes.
- **ENDOSCOPY:** All other inpatient endoscopy, some urgent outpatient cases.
- **ENT:** Anaplastic thyroid cancer.
- **GENERAL:** Acute cholecystitis/severely symptomatic cholelithiasis, acute appendicitis, debridement of infected wound, diverticulitis unable to be resolved with antibiotic therapy, inguinal hernia repairs for patients <2 years of age, feeding tube placement, partial bowel obstructions/intra-abdominal infection related to inflammatory bowel disease.
- **NEUROSURGERY:** Resection of brain or spine tumor with mass effect, laminectomy/fusion for decompression of spinal cord with significant mass effect and neurological deficit, removal of infected hardware including spinal cord stimulator, brain implants, and all other spine or brain implants.
- **OB/GYN:** scheduled C-section, scheduled cerclage, acute severe ongoing gynecologic bleeding not requiring transfusion and uncontrolled by medical management.
- **ORTHOPAEDICS:** Most long bone fractures, hip fractures, acute soft tissue infections, acute total joint infection.
- **PODIATRY:** Incision and drainage of abscess, partial foot amputation (partial ray, TMA, toe amputation) for wet gangrene without evidence of sepsis.
- **UROLOGY:** cystectomy patients with aggressive bladder cancer, T2+ kidney cancer, large or high risk TURBT, orchiectomy for testicular cancer, ureteral stones with uncontrolled pain and

prolonging hospitalization/repeated ED visits, nephroureterectomy for high risk urothelial cancer of the kidney, penile cancer.

- VASCULAR: symptomatic carotid artery disease, thoracic aortic aneurysm > 6.5cm, asymptomatic AAA > 7.0cm, amputation for wet gangrene without signs of sepsis, graft infections requiring explant, severe PAD with worsening tissue loss/rest pain, some ECMO decannulations, fistulograms in threatened AV fistulas with urgent need for dialysis, clotted AV fistulas, and other dialysis-related procedures

There have been inquiries from patients downstate who are seeking surgical interventions at Munson Healthcare. The same criteria to schedule a case applies to all patients.

If a provider has questions regarding whether a case meets criteria, they can bring a specific request to their local CMO or discuss with Dr. Walt Noble, Chief Surgical Services Officer, MMC.