



Resuming Elective Procedures Checklist

The State's partial ban on elective surgeries and nonurgent medical procedures remains in effect until June 25. IMS recognizes the difficult decisions practices must make as they evaluate when to resume provision of these services. These decisions must ultimately be made based upon the circumstances of individual practices and their communities. IMS has assembled a brief checklist of suggested criteria that practices might use to help guide their decisions.

- State of Iowa Further Relaxes or Lifts Statewide Ban**
- Community Has Experienced a Decrease in COVID-19 Incidence for At Least 14 Days**
- Patient & Provider COVID-19 Testing**
 - Widespread testing & related surveillance is in place within community.
 - Practice has policies & procedures in place for patient & provider testing, including testing of all patients no more than 48 hours before a scheduled surgery.*
 - If a COVID-19 test is not available, a hospital or provider should consider alternative methods to determine the patient's probability of COVID-19.
 - Practice has sufficient capacity and supplies to administer timely testing in-line with established policies & legal requirements, or has arrangement in place with another local provider to administer timely testing.
- PPE & Medical Supplies**
 - Practice has sufficient PPE & other medical supplies to sustain additional elective & nonurgent procedures without impacting ongoing COVID-19 testing & treatment.
 - Practice has policies & procedures in place to conserve PPE consistent with guidance from the CDC & IDPH*
 - Practice has access to a reliable supply chain without relying on state or local government PPE stockpiles to support resumed operations and response to potential surge in COVID-19 positive patients.* *(Note: Practices currently receiving PPE from a state or local supply chain may no longer access this supply chain once they resume provision of elective or nonurgent services under the state order).*
- Practice has Sufficient Staffing to Support Resumed Elective Services Without Impacting Ongoing COVID-19 Testing & Treatment**
- Facility Capacity** *(Internal Capacity If Practicing at a Hospital; Community Capacity if Practicing Independently)*
 - Sufficient capacity (at least 10% of ICU beds & 10% of medical/surgical beds available for COVID-19 patients) to resume elective services without impacting COVID-19 services or requiring the transfer of COVID-19 patients to create capacity for elective services.*
- Legal Compliance & Liability Preparation**
 - Practice has policies & procedures in place to monitor compliance with statewide order on elective services & cease providing these services if unable to comply with required standards.*
 - Practice has consulted with legal counsel & implemented supplemental patient consent form.
 - [\(Sample Form Available Here.\)](#)
 - Practice has consulted medical liability carrier & implemented additional recommended compliance & patient education steps.

* Denotes a Required Element of the May 26 order extending the partial ban on elective surgeries & nonurgent medical procedures.

This checklist does not constitute legal guidance. Practices are encouraged to contact their legal counsel and medical liability carrier prior to making determinations regarding the resumption of elective surgeries and nonurgent medical services.

Additional Resources

[Joint Statement on Roadmap for Resuming Elective Surgery](#)

[American College of Surgeons: Guidance for Local Resumption of Elective Surgery](#)

[CMS: Recommendations Reopening Facilities to Provide Non-emergent Non-COVID-19 Healthcare](#)

[COPIC: Suggested Approach for Resuming Elective Surgeries & Procedures](#)

[CDC: Estimated PPE Needs Calculator](#)