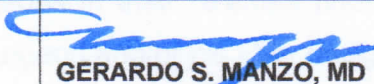
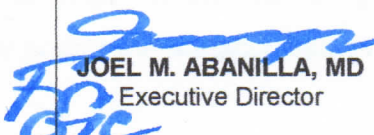

 <p><b>PHILIPPINE HEART CENTER</b> <b>INCIDENT COMMAND POST</b></p>	Document Type	Document Code:
	<b>GUIDELINES</b>	GL-ICP-055
	Document Title	Effective Date:
	<b>PROCESS FLOW FOR ELECTIVE OR SCHEDULING</b>	APRIL 2020
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REVISION HISTORY			
Rev No.	Review Date	Description of Change	Date of Next Review
1	December 2020	Change in Decking Elective OR Cases	June 2022

Reviewed by:	 <b>GERARDO S. MANZO, MD</b> Incident Commander	Approved by:	 <b>JOEL M. ABANILLA, MD</b> Executive Director
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## I. INTRODUCTION

Performance of elective cardiovascular cases in the PHC-Operating Room shall resume on September 1, 2020 following the lifting of the Modified Enhanced Community Quarantine (MECQ) status imposed in NCR last August 19, 2020. From **September 1 to 15, 2020, three (3) cases of adult and two (3) cases of pediatric CPB-requiring cardiovascular case (or alternatively, 1-2 cases of adult and pediatric non-CPB-requiring cardiovascular case)** shall be scheduled daily. This case load does not include short cases which do not require prolonged postoperative stay in the SICU (such as pacemaker insertions, vascular access procedures, tracheostomies, closed tube insertions, pericardiostomy tube insertions, etc.). Caseloads shall be reassessed on a two-week basis and shall be expeditiously ramped up to pre-pandemic levels as soon as it is feasible.

## II. STATEMENT OF THE GUIDELINE

This shall serve as a step-by-step guide in scheduling elective surgeries in the Operating Room. This interim guidance shall be periodically updated and may be subject to change without prior notice.

All elective OR cases shall be decked by the OR Nurse Scheduler in the Operating Room on a **first-come-first-serve** basis as soon as **STEP 1** is carried out completely. Triaging of elective OR cases will cease once full (pre-pandemic) operations has been achieved. Cardiologists (Adult and Pediatrics) must coordinate with the Surgeons in their referrals prior to securing a schedule in the Operating Room. The Surgeon and/or his / her designated secretary and/or the surgical fellows

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are authorized to secure a schedule in the Operating Room after proper coordination with the referring cardiologists (adult & pediatrics).

This guidance does not apply in video-assisted or open thoracic surgeries as well as general surgery cases.

### III. GUIDELINES

#### STEP 1: ELIGIBILITY CRITERIA FOR ELECTIVE OR SCHEDULING:


- A. **COMPLETION** of financial obligation (complete OR downpayment and/or full payment of SPD rates with duly approved contract) to the hospital especially for PRIVATE patients including those who availed of the SPECIAL PACKAGE DEAL (SPD).
- B. Clinical case **APPROVAL** for Z-Benefit from Philhealth and,
- C. PHC approved SERVICE cases (subject to Heart Team case discussions during pre-op conference).

**STEP 2: SUBMISSION** of PRIVATE/ SPD/ Z-BENEFIT and SERVICE case information to the DSA secretaries (Mrs. Meliza Benatiro, Mrs. Lanie Laoang) for OR scheduling processing once Step 1 is accomplished.

Patient and attending physician is informed of pre-admission requirements at this time.

#### PRE-ADMISSION requirements:

- A. Patients should undergo **nasopharyngeal RT-PCR swab test** preferably at the Philippine Heart Center with the **Xpert Xpress SARS-Cov-2** or simply as the **Gene Xpert Test** at least **7-days** prior to admission and/or alternatively, should have a **NEGATIVE RT-PCR** result at least **24-48 hrs** prior to

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admission. If patient turns out positive for RT-PCR, the procedure should be deferred for at least 2-3 weeks with the option of RT-PCR re-testing after 2-3 weeks.

- B. Blood products needed for the operation should be completed, by providing sufficient number of blood donors (at least 6 approved) prior to or during admission.
- C. Accomplishment of PHC Patient and Watchers Health Declaration Form.
- D. Patient's watcher to undergo triage at time of admission of the patient. RT-PCR or serologic testing of patient's watcher is highly encouraged.

**STEP 3:** Once the OR schedule is plotted either for the PRIVATE/ SPD/ Z-BENEFIT or SERVICE case, the cardiovascular surgeon-in-charge (or Division Heads in case of SERVICE cases) and/or patient shall be **NOTIFIED** for confirmation of the schedule.

Requests for scheduling on pre-specified dates shall be entertained provided they are done in advance and do not pose any conflict to existing or prior schedules.