

# NCCP patient pathway for admission for scheduled cancer surgery during the COVID-19 pandemic

## 2 weeks prior to admission for cancer surgery

- Patients should be advised the best way to minimise their risk of COVID-19 exposure is to cocoon for two weeks prior to surgery in line with public health advice.
- As no test can rule out a COVID-19 infection, the patient should be given information on the importance of cocooning.
- Patients should be advised to pay special attention to hand hygiene, social distancing and mask wearing advice.
- The extent of cocooning should take into account the potential benefits and harms of COVID-19 infection and delaying surgery.
- Patients should be asked to note any COVID-19 signs or symptoms in a diary.

## Up to 72 hours prior to admission for cancer surgery

### Hospital to contact the patient to confirm:

- Does the patient have any signs or symptoms of COVID-19?
- Has the patient been identified as a close contact of someone diagnosed with COVID-19?

All patients should have an RT-PCR COVID-19 test up to 72 hours prior to admission

**Virus detected on RT-PCR results**  
Patients should have surgery deferred.

**Virus not detected on RT-PCR results**  
A consultant may consider performing a non-contrast low dose chest CT based on clinical judgement for certain high risk groups:

- Patients undergoing oesophageal surgery
- Patients undergoing major thoracic surgery
- Patients undergoing complex head and neck surgery

## Decision to admit patients for cancer surgery

Patients should not be admitted until they have received their RT-PCR results and the team have made a decision regarding surgery. The decision to proceed to surgery should take the following into account:

- Signs and symptoms of COVID-19,
- Close contact with someone diagnosed with COVID-19,
- RT-PCR results,
- CT results if performed.

There is no test or tests that can rule out COVID-19 infection in asymptomatic patients.

If the patient has been identified as a close contact of someone diagnosed with COVID-19 consider deferring their surgery for 14 days unless it is deemed necessary that the surgery should proceed by the treating Consultant, considering the risk:benefit ratio of surgery.

## Admission

- On admission the patient is screened for signs or symptoms of COVID-19.
- A patient may wear their own mask or they will be provided with a mask if they choose to wear one.
- Any person accompanying the patient should wait outside if possible.
- No children are permitted to accompany the patient.

The patient will be admitted directly to the specialist planned care ward occupied only by patients who have similar pre-procedural planning, screening and testing.

## Procedure

Procedure takes place

## Following surgery

Postoperative surveillance/ protocols should be in place to prevent and identify any postoperative infection.