March 23, 2020

Interim COVID-19 Guidance for Elective and Non-Urgent Health Care Procedures

Background: Health care facilities currently face an enormous challenge in providing safe care to patients during a pandemic. On March 19, 2020, Governor Brown issued Executive Order No. 20-10 to cancel all elective and non-urgent health care procedures that require personal protective equipment (PPE) effective March 23, 2020. Elective and non-urgent procedures can be rescheduled for no earlier than June 15, 2020. This decision was not made lightly, and the Governor recognizes the implications for the health care systems and the financial repercussions. However, this action is necessary given anticipated surges in health care need due to COVID-19, and the importance of preserving scarce PPE and other health care resources such as hospital beds and ventilators for situations in which it is most needed.

Authority: Executive Order 20-10.

Guidance

Which providers or facilities are covered?
The Executive Order applies to hospitals, ambulatory surgery centers, outpatient clinics (including community health clinics and student health centers), dental clinics, veterinary clinics and all clinics in which procedures requiring personal protective equipment are undertaken by any provider. The provider classification does not determine whether procedures are canceled; elective and non-urgent procedures for which the standard of practice requires use of PPE should be canceled.

Which procedures are exempt from the cancellation requirements?
A procedure is subject to cancellation if it is elective or non-urgent and the procedure requires the use of PPE. A procedure is exempt from the cancellation requirement if delay would put the patient at risk of irreversible harm. Risks of irreversible harm include, but are not limited to:

1. Threat to the patient’s life;
2. Threat of irreversible harm to the patient’s physical or mental health;
3. Threat of permanent dysfunction of an extremity or organ;
4. Risk of cancer metastasis or progression of staging; and
5. Risk of rapidly worsening condition (i.e., need for the procedure is time-sensitive).

If you, as a health care provider, believe that a patient will suffer irreversible harm if a recommended procedure is delayed or foregone, then you should provide that care, using as little PPE as is safe and consistent with applicable infection-control guidelines and laws.

**Can I provide care to an individual in order to stop the spread of disease to other humans?**
If you, as a provider of health care believe that a patient or other humans will suffer irreversible harm if the procedure is delayed or foregone, then you should provide that care, using as little PPE as is safe and consistent with applicable infection-control guidelines and laws.

**Can I provide vaccinations?**
Lack of vaccination poses a risk to the patient and to others; therefore, vaccinations are essential and should be provided.

**Can I see patients for wellness visits?**
Yes, if the visit does not require the use of PPE, and with appropriate screening for patients to prevent the spread of disease.

**Should a patient be referred elsewhere to have an elective and non-urgent procedure during the cancellation period?**
No. Patients should be rescheduled and not redirected to other providers, since the Executive Order applies to all care settings. Elective and non-urgent procedures should not be performed while the Executive Order is in effect.

**What equipment falls within the meaning of PPE?**
PPE includes facemasks, N95 respirators, gowns and eye protection. Should exam gloves or surgical gloves be in short supply, non-urgent and elective procedures requiring them would also be canceled.

**Can providers continue to perform elective and non-urgent procedures using exclusive reusable PPE (non-disposable, available for donation or collection, if needed) during the cancellation period?**
No. The Executive Order applies to all elective and non-urgent procedures during the cancellation period that require PPE, whether the PPE can be re-used or not, except as otherwise indicated under this guidance.

**Can providers perform elective and non-urgent procedures without PPE while preserving infection-control practices for both patients and providers during the cancellation period?**
Yes, if it is safe to perform the elective or non-urgent procedure without PPE, and not using PPE for the procedure is consistent with applicable infection-control guidelines and laws.
Can I provide care to animals to stop the spread of disease to animals or humans?
If you, as a veterinarian believe that an animal will suffer irreversible harm if the procedure is delayed or foregone, then you should provide that care, using as little PPE as is safe and consistent with applicable infection-control guidelines and laws.

Can shelters provide care to their animal population?
Shelters are impacted by the economic downturn and people are no longer able to provide care to their animals. Shelters should continue their care activities if re-usable PPE is available. OHA is putting out more specific guidance related to veterinarian care.

Can Veterinarians provide end-of-life care to prevent pain and suffering?
Yes. If you, as a veterinarian, believe that an animal is at the end-of-life, you should provide care to relieve pain and suffering. OHA is putting specific guidance related to veterinarian care.

Where should surplus PPE be donated?
You can go to the following website if you want to donate PPE: https://survey123.arcgis.com/share/3e02947d6e4a46559997feeac473fba6

Does Executive Order 20-10 extend any liability protections to health care providers related to delays in care and diagnosis?
The Executive Order allows health care providers to use their judgment with regard to what procedures must be cancelled or delayed, and what care must be provided to protect a patient’s health and life. The Executive Order does not address liability issues.

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