

Compliance Tips With Hospital Spine Surgery Scheduling, during Covid-19 From Dr. Jeffrey D. Gross, MD.

The coronavirus pandemic certainly disrupted hospital spinal surgeries from moving forward as normal for many good reasons. Safety compliance is now the focus.

NEWPORT BEACH, CA, UNITED STATES, June 30, 2020 /EINPresswire.com/ -- Adapting practice policies to re-instituting inpatient hospital spine surgeries is essential to the avoidance of cancellations and to improve scheduling expectations. As patients and their surgeons weigh their declining fears of entering a hospital in the Covid pandemic epidemiological tail with their clinical need for surgery, the successful and agile surgeon's office must adapt to ongoing additional steps required for both their office and their patients requiring adherence. With these challenges as the backdrop, smart and local minds are providing much needed guidance.

[Dr. Jeffrey D. Gross](#), spine fellowship trained neurological surgeon, through the Newport Beach (CA) Covid Safe Commerce Task Force has developed hospital compliance tips to avoid surgery cancellation.

First, newly created hospital policies require Covid-19 testing, followed by a period of patient self-quarantine. This additional testing/behavioral step can be performed at the usual pre-op lab testing and is best offered by the hospital where the surgery is to take place. The patient must be advised as to self-quarantine restrictions as to avoid a cancellation on the date of surgery when questioned in a pre-operative holding area as required by most EMR checklists recently added.

Second, it is best to provide as part of the informed consent, the possibility of cancellations/postponements of a scheduled surgery in order to breed understanding and reduce disappointment on account of Covid-19 related changes. Besides positive viral tests (or absence of testing), or poor-self-quarantining, hospital census (and/or ICU/respirator utilization), hospital supply limitations, and/or funding/staffing issues may also force a surgical schedule change at the last minute. Even in the absence of a second epidemiological spike, these challenging factors may still exist. Hospital income has declined, and such will be reflected in staffing and supplies as the health care system tries to recover in taking on desired elective surgical cases. It is important to review and comply with the individual hospital facilities' policies. Most physicians have received a larger number of communications from hospitals in the last few months than ever before, and those related to re-instituting surgical scheduling cannot be ignored.

Lastly, it is also important to review new visitation limitations with both patients and their families. Many facilities are not allowing visitors. Others have mask and other PPE requirements. Expectations are best managed ahead of time.

Dr. Jeffrey Gross performs inpatient spinal surgeries for patients in need at Hoag Hospital in Newport Beach California, Chapman Global Medical Center in Orange, California, and Henderson Hospital in Henderson, NV. Dr. Gross is the chairperson medical volunteer for the Newport Beach, California Covid Safe Commerce Task Force. His team is spearheading the investigation and implementation of safe practices in the re-opening of medical commerce to best serve patients in his community.

For more information of Dr. Gross's practice be sure to visit <https://ifixspines.com>.

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