



GUIDANCE ON THE PRACTICE OF DERMATOSURGERY AND COSMETIC PROCEDURES DURING THE COVID-19 (SARS-COV-2, CORONAVIRUS) PANDEMIC (UPDATED JUNE 2020)

Given that the SARS-CoV-2 virus is primarily transmitted through by close contact to infected persons via respiratory aerosols they shed, and can survive on inanimate surfaces for more than 72 hours (NEJM March 17, 2020), we recommend that elective and cosmetic procedures such as laser hair removal, soft tissue augmentation with injectables, chemical peels, etc performed in health facilities be postponed for a later date to prevent transmission.

Likewise, for dermatosurgery procedures, we suggest elective procedures (defined here as skin lesions which will not be of imminent danger to the patient if not surgically treated within 3-months) are postponed to a later date based on regular clinical evaluation. Skin lesions not qualified as elective according to the above definition, for example melanoma, atypical melanocytic lesions, cutaneous abscess drainage that cannot be postponed for weeks should be evaluated case by case and in principal promptly managed with surgical intervention under standard safe sterile practices in line with health and operative guidelines of your local health authorities.

Optimal safety protocols should be implemented in the medical facility to prevent the risk of transmission of the SARS-CoV-2 virus. This includes, but is not limited to, regular disinfection of facility amenities with close attention given to the reception, patient waiting areas, consultation rooms, elevators and door handles with documentation of disinfection processes. Hand disinfectants and sanitizer should be provided at the facility entrances, and reception areas. Patient awareness for hand washing to prevent the transmission of infection should be promoted.

Furthermore, it is recommended to ensure that risks of transmission in waiting-rooms and the facility are minimized by ensuring that a minimum distance of two meters is kept between patients, and minimizing the number of patients in waiting rooms and the waiting time (pre-reserved appointments with optimal timing)

The use of patient questionnaires for patient-triage (ideally by phone for private practices, onsite for hospitals) and/or telemedicine so as to reduce exposure of patients and employees to patients who may potentially be contagious is also recommended.

A questionnaire can be used for this purpose such as the one shown on the follow page.

Resources and further information:

- World Health Organization:
 - General: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
 - Country & Technical Guidance: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance>
 - EPI-WIN: WHO information network for epidemics: <https://www.who.int/teams/risk-communication>
- American Academy of Dermatology: <https://www.aad.org/member/practice/managing/coronavirus>
- British Association of Dermatologists: <http://www.bad.org.uk/healthcare-professionals/covid-19>
- European Dermatology Forum: <https://www.edf.one/home/Guidelines/Guidelines.html>



Questionnaire for Patient-Triage

- | | | |
|---|-----|----|
| 1. Do you currently have symptoms of a cold?
(Runny nose, cough, etc.) | Yes | No |
| 2. Do you currently have an elevated body temperature / fever? | Yes | No |
| 3. In the past 14 days, have you been in areas considered to be
at risk for COVID-19 disease ¹ ? | Yes | No |
| 4. Have been in contact within the past 14 days with people suspected
of having a COVID-19 disease that is present/has been confirmed? | Yes | No |

¹ Please check the situation in specific countries on <https://experience.arcgis.com/>