Additional COVID-19 Informed Consent for Surgeries and Procedures
4/29/2020

Situation:
On March 17, 2020, Dr. Amy Acton, MD, MPH, the Director of the Ohio Department of Health, ordered the cancellation/postponement of elective procedures in an effort to conserve personal protective equipment (PPE) and hospital beds in anticipation of a significant spike in COVID-19 patients.

On April 22, 2020, Dr. Acton and Governor Mike DeWine asked hospital and ambulatory surgical facility providers to reevaluate non-essential/elective surgeries and other procedures that were postponed in response to the COVID-19 pandemic. Per the Ohio Department of Health guidelines, The Ohio State University Wexner Medical Center (OSUWMC) is required to inform patients of the risk of contracting COVID-19 and how this could impact the post-operative recovery process, so that patients are provided with all information necessary to make an informed decision regarding their care, whether surgery / procedure is essential or elective.

Patient Statement of Informed Consent:
I understand that there is community spread of COVID-19. The risk of contracting COVID-19 while at The Ohio State University Wexner Medical Center (OSUWMC) is very low; however, the risk cannot be completely mitigated because of the community spread of the disease.

OSUWMC has taken significant measures to minimize the risk of the spread of COVID-19 within the healthcare setting, including:
- Pre-operative COVID-19 testing for patients having a procedure/surgery
- Daily screening of all OSUWMC physicians, staff and visitors for signs of illness
- Limiting visitation in the various OSUWMC facilities/hospitals
- Using appropriate personal protective equipment (PPE), per CDC guidelines, by all physicians, staff, patients and visitors in all OSUWMC facilities
- Implementing social distancing within the hospital wherever possible
- Continuing emphasis on the importance of frequent hand washing

I further understand that contracting COVID-19 could affect my post-operative recovery process in the following ways:
- Infections with COVID-19 range from very mild symptoms to severe disease requiring hospitalization and risk of death.
  - 80% of patients have mild-moderate disease and recover at home.
  - 20% of patients require hospitalization, including possible intensive care.
  - Patients with chronic health conditions may be at higher risk for severe disease.
• Contracting COVID-19 could negatively affect the post-operative healing process. Additionally, recovering from surgery could make it harder for my body to recover from a viral infection, such as COVID-19.

• I understand that I am at risk for acquiring COVID-19 in the community before and after my surgery. I also recognize the importance of self-isolation of myself and my household contacts for 14 days before my surgery and during my recovery phase, to limit my potential exposure COVID-19.

• I understand that rehabilitation services and post-operative care may be provided utilizing virtual visits or telephone visits to limit in person interactions.

• I understand that I may choose to postpone, reschedule, and/or cancel this procedure/surgery.

I understand all of the above, and have had an opportunity to ask questions and have those questions answered to my satisfaction. I am choosing to have the procedure/surgery at this time.

______________________________________
Patient Name and MRN (sticker)

______________________________________
Patient Signature

______________________________________
Date/Time