KEY UPDATES:
1) SARS-CoV-2 antigen tests are now considered acceptable for pre-procedure testing (Figure 1).
   Note: NYP laboratories do not offer SARS-CoV-2 antigen tests but such tests performed at outside facilities are considered acceptable.
2) For patients with a positive SARS-CoV-2 test within the previous 90 days, a subsequent negative test is NO LONGER REQUIRED in order to proceed with an elective procedure. The procedure can be performed once the patient meets criteria to discontinue isolation precautions (Figure 4).
   Note: guidance regarding changes in requirements for preprocedural testing for fully vaccinated patients will follow in a future update to this guidance document.

This document provides guidance for (1) initial pre-procedure COVID-19 symptom screening and SARS-CoV-2 testing, (2) personal protective equipment, and (3) subsequent testing and scheduling of patients who have a positive SARS-CoV-2 test.

FIGURE 1: OVERVIEW of Screening, Testing, and PPE for Surgery and Other Procedures

1. SCREEN patient prior to and upon arrival for pre-procedure testing and prior to procedure using questions below:

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Symptoms of COVID-19?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diagnosis of COVID-19 within past 10 days?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exposure to COVID-19 within past 14 days?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel from another country within 10 days?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If YES to any question OR positive TEST DEFERRAL may be required. See footnote 1 and Figure 2.

IF DEFERRAL IS INDICATED BUT NOT FEASIBLE (e.g., emergent surgery), implement COVID-19 precautions. See Table 1, Figure 3, and Figure 4.

2. TEST for SARS-CoV-2
   • Use a nucleic acid detection test (e.g., PCR, NAAT) OR an antigen test. Antibody tests are not acceptable.
   • Perform test on a respiratory tract specimen (i.e., nasopharynx, oropharynx, nasal, mid-turbinate, saliva).
   • Test no more than 5 days prior to procedure date.
   • Patients with a prior positive test within the previous 3 months do not routinely require testing. See Figure 3 (urgent/emergent procedures) and Figure 4 (elective procedures).

3. USE APPROPRIATE PPE
   • Well-fitting surgical mask at all times
   • Eye protection for ALL patient care (regardless of COVID-19 status)
   • N95 respirator for ALL aerosol-generating procedures, regardless of COVID-19 status
   • Implement contact and droplet precautions (N95 recommended [surgical mask is acceptable alternative], gown, gloves, eye protection) for patients with confirmed or suspected COVID-19, exposure to COVID-19, travel-related risk factors, and those for whom SARS-CoV-2 test results are not available at the time of surgery/procedure

Contact Infection Prevention & Control:
NYP-AH: 212-932-5219
NYP-CU and NYP-MSCH: 212-305-7025
NYP-WC: 212-746-1754
NYP-WBHC: 914-997-4377
NYP-LMH: 212-312-5976
NYP-LH: 914-787-3045
NYP-BMH: 718-780-3569
NYP-HVH: 914-734-3950
NYP-Q: 718-670-1255
### Contact Infection Prevention & Control:

<table>
<thead>
<tr>
<th>NYP-AH: 212-932-5219</th>
<th>NYP-CU and NYP-MSCH: 212-305-7025</th>
<th>NYP-WC: 212-746-1754</th>
</tr>
</thead>
</table>

1. **PLEASE NOTE:** CDC and NYSDOH have eliminated certain quarantine restrictions following exposure to COVID-19 and international travel based on vaccination status and/or recovery from COVID-19 infection within the previous 3 months. However, because vaccinated persons are still required to strictly adhere to other interventions (e.g., hand hygiene, use of face coverings) through Day 14 after an exposure to COVID-19 and because adherence to these interventions may not be possible during surgery, procedures and hospitalization, **quarantine is continued through DAY 14 for certain patients undergoing procedures or hospitalization at NYP, CU, and WCM facilities. Deferral of elective procedures may also be required as follows:**

<table>
<thead>
<tr>
<th>Scenario</th>
<th>Patient’s Vaccination Status†</th>
<th>Contact and Droplet Precautions</th>
<th>Deferral of Elective Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exposure to COVID-19</td>
<td>Vaccinated or Unvaccinated</td>
<td>14 days after last exposure</td>
<td>14 days after last exposure</td>
</tr>
<tr>
<td>International Travel†</td>
<td>Fully Vaccinated†</td>
<td>Not required</td>
<td>Defer until SARS-CoV-2 testing on Day 3-5 after arrival to US has been completed</td>
</tr>
<tr>
<td></td>
<td>NOT fully vaccinated†</td>
<td>7 days after arrival to US IF negative SARS-CoV-2 test on or after Day 3 in the US OR 10 days after arrival if no SARS-CoV-2 test performed after arrival to US</td>
<td></td>
</tr>
</tbody>
</table>

2. **“COVID Recovered”** patients (i.e., recovered from documented COVID-19 infection within the previous 3 months) do NOT require contact and droplet precautions or deferral of procedures after an exposure or international travel.

3. **Fully vaccinated:** ≥2 weeks following receipt of the second dose in a 2-dose series, or ≥2 weeks following receipt of one dose of a single-dose vaccine.

### NOTE:

As of April 1, 2021, travelers to New York from other US states or US territories are no longer required to quarantine or undergo post-travel testing.

### Symptoms of COVID-19

Symptoms of COVID-19 include fever (subjective or measured ≥ 100°F or 37.8°C), cough, shortness of breath, sore throat, muscle aches, diarrhea, nasal congestion, headache, chills/rigors, new onset loss of smell, and altered sense of taste.

### An exception to the eye protection requirement

An exception to the eye protection requirement is made if a HCP’s essential work cannot be done while wearing eye protection (e.g., a surgeon using an operating microscope and/or eye protection interfering with visualization). **Specialty eyewear (e.g., loupes mounted on safety glasses) is ONLY considered protective if it extends to the brow and covers the sides of the eyes.** Side shields may be worn with specialty eyewear (or prescription eyeglasses, e.g., while performing surgery using a microscope) to provide additional coverage of the sides of the eyes **ONLY** when other forms of eye protection cannot be used. The use of side shields with prescription eyeglasses should **NOT** be used alone as eye protection in other situations. Please note that side shields are suboptimal as compared to other eye protection (e.g., face shields, eye shields, goggles) and should only be worn when other eye protection cannot be worn as above.
<table>
<thead>
<tr>
<th>Type of Surgery/Procedure</th>
<th>Examples</th>
<th>Pre-Procedure SARS-CoV-2 PCR or Antigen Testing</th>
<th>PPE Requirements During Procedures Performed on Asymptomatic Patients WITHOUT Recent Exposure to COVID-19 or International Travel&lt;sup&gt;2&lt;/sup&gt; Based on SARS-CoV-2 Test Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgeries/procedures that require general anesthesia, deep or moderate sedation</td>
<td>Required</td>
<td>N95, eye protection, gown, gloves</td>
<td>Surgical mask, eye protection&lt;sup&gt;3&lt;/sup&gt;, routine PPE appropriate for procedure, +N95 for AGPs</td>
</tr>
<tr>
<td>Aerosol-generating procedures (AGPs)</td>
<td>Bronchoscopy, TEE, upper GI endoscopy, procedures of aerodigestive tract with insufflation of air, some dental procedures, tracheostomy placement, sleep studies that may require NIPPV</td>
<td>Required</td>
<td>N95, eye protection, gown, gloves</td>
</tr>
<tr>
<td>Procedures/tests during which patient cannot wear a surgical mask AND that may increase generation of respiratory droplets</td>
<td>Testing that involves exercise (e.g., treadmill, bicycle, walk test), pulmonary function tests (PFTs)</td>
<td>Consider testing if result would influence decision to delay/perform procedure/test</td>
<td>N95, eye protection, gown, gloves</td>
</tr>
<tr>
<td>Surgeries/procedures that do NOT generate aerosols and do NOT require general anesthesia or deep or moderate sedation</td>
<td>Skin biopsy, transthoracic echocardiography, imaging tests (e.g., CT, MRI)</td>
<td>Not Required or Recommended</td>
<td>N/A&lt;sup&gt;4&lt;/sup&gt;</td>
</tr>
</tbody>
</table>

<sup>1</sup>PPE requirements are the same for all HCP, regardless of COVID-19 vaccination status.

<sup>2</sup>See Figure 1/Footnote 1 (page 2) to determine if a patient with exposure to COVID-19 or recent international travel requires contact/droplet precautions (N95/surgical mask, gown, gloves, eye protection), based on vaccination status and/or prior history of COVID-19 within previous 3 months.

<sup>3</sup>Exemption for eye protection for HCP who cannot perform their essential work while wearing eye protection (see Figure 1/Footnote 3 (page 2) above for more details).

<sup>4</sup>Although testing is not required, if performed and positive or patient is known to have COVID-19 (e.g., was tested due to symptoms), implement contact/droplet precautions with use of N95 respirator.

Contact Infection Prevention & Control:

<table>
<thead>
<tr>
<th>NYP-AH: 212-932-5219</th>
<th>NYP-CU and NYP-MSCH: 212-305-7025</th>
<th>NYP-WC: 212-746-1754</th>
</tr>
</thead>
</table>
Figure 2: INITIAL POSITIVE SARS-CoV-2 PCR or ANTIGEN TEST OR POSITIVE SCREEN for Symptoms, Exposure, or Travel: Timing of Surgery/Procedure

SARS-CoV-2 TEST is POSITIVE or INDETERMINATE OR patient has SYMPTOMS of COVID-19 OR requires quarantine and/or testing due to EXPOSURE to COVID-19 or INTERNATIONAL TRAVEL

No

PROCEED with surgery or procedure.

Yes

Assess urgency of surgery/procedure

Elective

DEFER surgery or procedure. See Figure 4 for patients deferred due to a positive SARS-CoV-2 test.

Emergent or Urgent

Consider risks/benefits to patient and HCP.

Defer non-emergent procedures if possible. If procedure is performed, implement Contact/Droplet precautions and use PPE appropriate for patients with COVID-19 (see Table 1).

---

1See Figure 1/Footnote 1 on page 2 of this document for more information about requirements after exposure and international travel.

2Deferral is generally recommended for non-emergent surgery/procedures if the patient has had either international travel (if not fully vaccinated) within 10 days OR exposure to COVID-19 within 14 days. See Figure 1/Footnote 1 on page 2.

3Surgeries and procedures related to the diagnosis of cancer (e.g., lumpectomies, biopsies), the treatment of intractable pain, or other diagnostic and treatment services for highly symptomatic patients are NOT considered to be elective.

4For patients who test positive for SARS-CoV-2, NYSDOH requires deferral of elective procedures until the patient has met criteria for discontinuation of isolation. See Figure 4. For patients with international travel or exposure to COVID-19, please refer to Figure 1/Footnote 1 on page 2 for the duration of deferral.

---

Contact Infection Prevention & Control:

NYP-AH: 212-932-5219  NYP-CU and NYP-MSCH: 212-305-7025  NYP-WC: 212-746-1754
Repeat testing of patients with a positive SARS-CoV-2 PCR is NOT REQUIRED in order to proceed with emergent or urgent surgeries and procedures. The timing of such procedures should be based on clinical need. When possible, deferral of surgery and procedures for at least 10 days after onset of symptoms or a first positive test for SARS-CoV-2 should be considered. Routine pre-procedure testing for SARS-CoV-2 should be performed for those with a more remote (i.e., >3 months) history of a positive test for SARS-CoV-2. See figure below and Infonet COVID Recovered Calculator to determine whether isolation is required.

1. **Severely immunocompromised**: bone marrow or solid organ transplant recipient, receipt of cytotoxic chemotherapy for cancer, untreated HIV infection with CD4 count <200, combined primary immunodeficiency disorder, and receipt of prednisone >20mg/day for >14 days.

2. **Severe or critical illness**: SpO2 <94% on room air, respiratory failure, septic shock, and/or multiple organ dysfunction.

**Contact Infection Prevention & Control:**

- **NYP-AH**: 212-932-5219
- **NYP-CU and NYP-MSCH**: 212-305-7025
- **NYP-WC**: 212-746-1754
- **NYP-WBHC**: 914-997-4377
- **NYP-LMH**: 212-312-5976
- **NYP-LH**: 914-787-3045
- **NYP-BMH**: 718-780-3569
- **NYP-HVH**: 914-734-3950
- **NYP-Q**: 718-670-1255

---

**Figure 3: EMERGENT AND URGENT SURGERY/PROCEDURES and POSITIVE SARS-CoV-2 PCR or Antigen Test within Previous 3 Months: Scheduling and PPE/Isolation Requirements**

- **Is patient severely immunocompromised?**
  - **No**
    - Did patient have severe or critical COVID-19 illness?
      - **No**
        - Are the following criteria met?
          - >10 days since date of positive test
          - Afebrile ≥24 hours
          - Marked improvement in other symptoms (if patient had symptoms of COVID-19)
          - **Yes**: Isolation is NOT required. Testing is NOT required.
          - **No**: Are the following criteria met?
            - >20 days since date of positive test
            - Afebrile ≥24 hours
            - Marked improvement in other symptoms (if patient had symptoms of COVID-19)
            - **Yes**: PPE and isolation for COVID-19 are REQUIRED
            - **No**: Are the following criteria met?
              - >10 days since date of positive test
              - Afebrile ≥24 hours
              - Marked improvement in other symptoms (if patient had symptoms of COVID-19)
              - **Yes**: Isolation is NOT required. Testing is NOT required.
              - **No**: Isolation is NOT required. Testing is NOT required.

**Isolation is NOT required. Testing is NOT required.**
DEFERRAL FOR 21 DAYS IS NO LONGER REQUIRED for patients who test positive for SARS-CoV-2 at the time of pre-procedure testing or within the previous 3 months. ADDITIONALLY, WITH THE EXCEPTION OF SEVERELY IMMUNOCOMPROMISED PATIENTS, REPEAT TESTING IS ALSO NO LONGER REQUIRED. Procedures may be scheduled and performed once the patient meets criteria for discontinuation of isolation (see figure below and Infonet COVID Recovered Calculator).

1Surgeries and procedures related to the diagnosis of cancer (e.g., lumpectomies, biopsies), the treatment of intractable pain, or other diagnostic and treatment services for highly symptomatic patients are NOT considered to be elective.

2Severely immunocompromised: bone marrow or solid organ transplant recipient, receipt of cytotoxic chemotherapy for cancer, untreated HIV infection with CD4 count <200, combined primary immunodeficiency disorder, and receipt of prednisone >20mg/day for >14 days.

3Severe or critical illness: SpO2 <94% on room air, respiratory failure, septic shock, and/or multiple organ dysfunction.

Contact Infection Prevention & Control:
NYP-AH: 212-932-5219  NYP-CU and NYP-MSCH: 212-305-7025  NYP-WC: 212-746-1754