Memorandum

Massachusetts Hospital Chief Executive Officers

FROM: Elizabeth Kelley, MPH, MBA, Director
       Bureau of Health Care Safety and Quality

DATE: December 22, 2020

RE: Update to Nonessential, Elective Invasive Procedures in Hospitals during the COVID-19 Outbreak

The Massachusetts Department of Public Health (DPH) continues to work with state, federal and local partners on the outbreak of Coronavirus Disease 2019 (COVID-19), caused by the virus SARS-CoV-2, and we continue to appreciate the essential role you have in responding to this evolving situation.

This guidance updates and replaces the Nonessential, Elective Invasive Procedures in Hospitals guidance released December 9, 2020. This guidance does not discourage patients from seeking necessary care at their hospital or from their health care provider.

Pursuant to an Order issued by the Commissioner of Public Health on December 7, 2020, and to focus health care personnel resources on responding to the COVID-19 outbreak, effective 12:01 a.m. on December 26, 2020 all hospitals are directed to postpone or cancel all nonessential inpatient elective invasive procedures in order to maintain and increase inpatient capacity. Hospitals shall make every effort to preserve their inpatient capacity by cancelling nonessential electives and redeploying staff. This suspension does not apply to the cancellation or delay of life sustaining procedures.

Hospitals must support the redeployment of those staff previously conducing nonessential elective invasive procedures to units and facilities that provide essential and necessary inpatient services.
In accordance with this guidance, providers at each hospital shall use their clinical judgment on a case-by-case basis regarding any invasive procedures that must be performed to preserve the patient’s life and health. The ultimate decision about whether a procedure is essential is based on clinical judgement of the patient’s need and should align with the resurgence planning developed by the hospital.

DPH defines inpatient, nonessential, elective invasive procedures as procedures that are scheduled in advance because the procedure does not involve a medical emergency and where delay will not be adverse to the patient’s health; provided, that terminating a pregnancy is not considered a nonessential, elective invasive procedure under this guidance.

Ambulatory and preventative services, pediatric care or immunizations, and necessary inpatient procedures that would lead to high risk or significant worsening of the patient’s condition if deferred should continue.

Additionally, hospitals must suspend the scheduling of any new inpatient nonessential, elective procedures until further notice from DPH. Providers at each hospital shall use their clinical judgment, on a case-by-case basis, to determine whether an elective procedure is nonessential.

DPH strongly encourages all hospitals in Massachusetts to monitor the Centers for Medicare & Medicaid Services (CMS) website and the Centers for Disease Control and Prevention (CDC) website for up-to-date information and resources:


Additionally, please visit DPH’s website that provides up-to-date information on COVID-19 in Massachusetts: [https://www.mass.gov/2019coronavirus](https://www.mass.gov/2019coronavirus).