

SAY ANYTHING

HOW HAS YOUR INFORMED CONSENT CHANGED IN THE COVID-19 ERA? WHAT LANGUAGE DO YOU INCLUDE WHEN PROVIDING IMPORTANT PRE- AND POSTOPERATIVE SAFETY CONSIDERATIONS? DO YOU ASK PATIENTS TO ACKNOWLEDGE THAT THEY ASSUME THE RISK OF CONTRACTING THE SARS-COV-2 VIRUS?



**DENISE M. VISCO,
MD, MBA**

■ President and Medical Director, Eyes of York, Pennsylvania

“ When we reopened on May 4 in the midst of the coronavirus pandemic, we considered the necessity of a legal waiver for seeing patients and performing surgeries. Although we knew we were going above and beyond following US Centers for Disease Control and Prevention guidelines, we consulted our attorney, who was adamant about using a waiver. In fact, he drafted a strong one that says in no uncertain terms that we are not liable, as we all know how ubiquitous this virus is becoming (see *Sample Patient Waiver for Treatment Care During COVID-19 Pandemic*). Patients will sign the waiver one time to consent to treatment at the clinic and/or ambulatory surgery center. On subsequent visits, patients are asked COVID-19 screening questions, and their temperature is taken and recorded with their answers in the medical chart. Documentation of the COVID-19 processes and precautions during patient care is also entered into the chart with every examination. We employ the waiver for all patients. Anyone who is not comfortable accepting and signing the waiver is offered the option to postpone their care until after the pandemic is over or to seek care with another provider.”

SAMPLE PATIENT WAIVER FOR TREATMENT CARE DURING COVID-19 PANDEMIC

Dear Patient,

This informed consent has been created to provide you with information about your wish to receive care during the COVID-19 pandemic.

What is COVID-19?

Human coronaviruses were identified in the 1960s. COVID-19 is spread by direct contact (within 6 ft) with droplets from an infected person (these may persist in the air for hours after release) or by touching an infected surface, then touching your face. Eighty percent of people with COVID-19 have a mild form of illness with cold or flu-like symptoms. More severe cases are seen in people over the age of 60 and in people with preexisting conditions. However, severe cases do occur in apparently healthy individuals with no known disease. It is impossible to know how prevalent the disease is in our area.

This RELEASE OF LIABILITY FOR PERSONAL INJURIES AND/OR DAMAGES ("Release") is being signed this day of _____, in response to the current COVID-19 ("Virus") pandemic.

(Print name)

I represent to Eyes of York Cataract and Laser Center, P.C. that neither I, nor a person with whom I reside, am presently experiencing any of the following flu-like symptoms: **fever, headache, dry cough, back pain, nausea, abdominal discomfort, loss of smell and/or taste or smell or loss of appetite**; and, that I and persons with whom I reside, have observed the personal safeguards recommended by the CDC as listed on the CDC website. If I do experience such symptoms after being seen or treated by Eyes of York, I will immediately seek medical attention and testing for the Virus, and not return to Eyes of York until cleared by a physician. **SHOULD I OR A FAMILY MEMBER BE DIAGNOSED WITH THE VIRUS, I WILL IMMEDIATELY NOTIFY THE FACILITY BY PHONE CALL TO 717-767-2000 OF SUCH DIAGNOSIS.**

I acknowledge that despite the exercise of caution, there is a risk of catching the Virus from a person who has no symptoms. In consideration of being seen/treated by Eyes of York, I accept all risks and agree that Eyes of York and its physicians, officers, employees and agents will not be liable for any and all liability, claims or causes of action or demands of any kind or nature whatsoever that may result or arise, by or in connection with my being in the Eyes of York facility for diagnosis or treatment, that is related to the Virus. The scope of this document includes, without limitation, any personal, bodily, or mental injury, economic loss or damage to me or my property resulting from any and all alleged acts of negligence on the part of Eyes of York, and its physicians, officers, employees and agents. This release shall unequivocally release Eyes of York and its physicians, officers, employees and agents from all claims, injuries and damages, present or future, anticipated or unanticipated, resulting from, or arising out of, contracting the Virus.

Patient Signature _____ Date _____

Witness _____ Date _____



ROSA BRAGA-MELE, MD, MED, FRCS

■ Professor of Ophthalmology and Director of Professionalism and Biomedical Ethics, Department of Ophthalmology, University of Toronto, Canada

“ Since the return to both the office and the OR with COVID-19, we have modified our practices and what we discuss with our patients. Patients are called 1 week before any appointment. They are informed that they need to attend their appointments on their own (unless there is a physical or communication-related reason for someone to accompany them inside) and that they need to wear a mask, and the symptoms of COVID-19 are reviewed with them. They are instructed to call and cancel the appointment if they have any symptoms at all. We also inform them to arrive at their designated appointment time and not before or after to avoid crowding in the office.

It is much the same for the OR; however, we also ask patients to quarantine for 2 weeks before their surgery date to minimize any potential exposure. I have also started to consent for bilateral sequential same-day surgery to minimize the number of patients and the number of visits needed. Most patients have been grateful and gracious through the entire process, as it helps make everyone safer.”



ARTHUR B. CUMMINGS, MB CHB, FCS(SA), MMED(OPHTH), FRCS(EDIN)

■ Consultant Ophthalmologist, Wellington Eye Clinic and Beacon Hospital, Dublin, Ireland

“ The COVID-19 pandemic has catapulted the world forward regarding the use of technology to do business and access services, and our practice is no different. We have adapted our informed consent process in the COVID-19 era by reassessing how we educate our patients.

We conduct a previsit virtual appointment with our nurses or technicians for each refractive surgery patient at least 72 hours before the patient's in-clinic visit. During this virtual appointment, the nurse or technician discusses the patient's visual needs, motivations for surgery, assessment of dry eye, the clinic's COVID safety protocols for their visit, the refractive procedures they may be good candidates for, and the differences between these options. This previsit appointment results in a relaxed, reassured, and informed patient arriving to safely meet the team in person.

Before laser vision correction, patients watch a recording of me walking them through exactly what to expect under the laser. This was previously done in person, but everyone prefers the video approach under the pandemic conditions. Postoperative medications and instructions are also provided this way, and patients have access to this information on their phone for later use. Patients watch this video on the day of surgery before discussing any questions with the nurse. This strategy, which is time-saving for the team, provides increased safety considering COVID.

For cataract surgery, we educate patients that the surgery, in most cases, is not urgent and can be deferred if they would prefer, considering the risk of contracting COVID. This is a reassuring reminder for those patients who are vulnerable and/or live with vulnerable family members. Patients are requested to *cocoon* for 14 days before the cataract procedure, and they undergo a COVID swab test 3 to 5 days before surgery, proceeding only with a negative result.

Including a COVID risk assessment is crucial in the patient journey and informed consent process of our new normal. It remains a focus for us in the COVID-19 era as we continue to deliver excellent care to our patients safely. We hope to further improve our process with a move to electronic consent forms soon.” ■