



Endocrine Surgery during the Covid-19 pandemic

The AHNS Endocrine Section felt that it might be useful to have some guidance on endocrine surgery cancellation given the Covid-19 pandemic. These are loosely adapted to those of the ESES.

These are just suggestions as to which patients may need to move forward with surgery now. The specific decisions would be in the context of local hospital and community resources, directives and importantly surgeon judgment. The duration of postponement is not currently widely agreed upon.

Also, with any patient being brought to the OR now or in the future, given that spread is possible from intubation of asymptomatic COVID-19 patients, all patients should be considered for COVID-19 testing.

Thyroid:

- Life-threatening or severely symptomatic Graves' that cannot be controlled medically
- Goiter causing airway compromise with airway symptoms and tracheal narrowing
- Thyroid cancers that are imminently threatening the life or the health of the patient such as those with short double timings or aggressive recurrences.
- Open biopsy to confirm a suspected diagnosis of anaplastic thyroid cancer or thyroid lymphoma in order to direct appropriate treatment.

Parathyroid:

- HPT with life-threatening hypercalcemia that cannot be controlled medically

Pregnant patients:

- Endocrine disorders dangerous to the health of the mother or fetus that cannot be controlled medically

Brendan Stack AHNS Endocrine Surgery Section Vice Chair

Greg Randolph AHNS Endocrine Surgery Section Chair