

## Skull Base Surgery During COVID-19 Pandemic

The coronavirus pandemic has caused all healthcare providers to modify practices, particularly Otolaryngologists, Anesthesiologists, and other specialties that are high risk due to the potential for exposure via aerosols. Members of the American Head and Neck Society have kept abreast of changes during this time, communicating suggested practices via the AHNS website <https://www.ahns.info/covid-19-info/>

Endoscopic skull base surgery is one of the areas within otolaryngology with the potential for significant aerosolization due to powered instrumentation in the nasal cavity, sinuses, and nasopharynx. In early 2020 many non-emergent skull base surgeries were postponed significantly due to the potential for exposure and infection of healthcare workers by asymptomatic patients. Given that COVID testing is more widely available and that surgeries cannot be postponed until the end of the pandemic, symptom screening and PCR testing as close to the time of surgery with appropriate PPE has been adopted by most surgeons.

Clinicians may modify the frequency of postoperative debridement, as well as whether or not COVID testing is necessary for these visits. Regardless of vaccination status, clinicians should continue to wear appropriate PPE, including eye protection, when performing these procedures.

There have been rare reports of cerebrospinal fluid leak from nasopharyngeal swab testing. In patients with skull base pathologies and defects, proper swabbing technique or alternate methods of COVID testing should be considered by the clinician.