

**TO: Vermont Health Care Providers**  
**FROM: Mark Levine, MD, Health Commissioner**

**Pre-operative/Pre-procedure COVID-19 Testing Guidance**

This Health Update supersedes the following Vermont Department of Health guidance:

- [Resuming Inpatient Surgeries and Procedures](#) (May 22, 2020)
- [Outpatient Services: Clinic Visits, Diagnostic Imaging, and Limited Outpatient Surgeries and Procedure](#) (May 22, 2020)

**Background:**

The Vermont Department of Health continues to examine the requirements for testing as the response to COVID-19 evolves. In May 2020, the State produced guidance for reopening non-emergent care in outpatient and urgent inpatient settings. This updated guidance changes the recommendations for pre-procedure testing in light of the incidence of COVID-19 in Vermont, and the very low prevalence of COVID-19 identified through pre-procedure testing to date. The full guidance can be found [here](#).

**Requested Actions:**

Screen all patients for [COVID-19 symptoms](#) prior to entering a health care facility or receiving health care services of any type.

Require all people to wear masks or facial coverings that cover the mouth and nose, provided by the patient or by the facility, when in public areas and treatment rooms except when patient examination makes wearing a mask or facial covering impossible.

**Outpatient pre-procedure testing (with SARS-CoV-2 PCR) of asymptomatic patients:**

- **Providers shall provide pre-procedure testing** for high-risk procedures including surgery requiring instrumentation of the airway (e.g., those requiring general anesthesia such as intubation, extubation, manipulation of the respiratory epithelium).
- **Provider may consider utilizing pre-procedure testing** for procedures that carry a high risk of cardiopulmonary arrest and the need for intubation (i.e., cardiac catheterization).
- **Pre-procedure testing is not recommended** for procedures typically requiring regional or other forms of anesthesia such as conscious sedation (with the provision to escalate to airborne precautions (N95, face shield) if having to transition or divert to general anesthesia via endotracheal tube). Pre-procedure testing should also not be utilized for interventional radiology procedures, exercise treadmill testing, and other procedures not requiring airway instrumentation.

**Inpatient pre-procedure testing (with SARS-CoV-2 PCR) of asymptomatic patients (in addition to the guidance listed above):**

- Providers may choose to test patients scheduled for a procedure at the provider's discretion.

If pre-procedure testing is utilized, testing should take place **no more than 7 days prior to the procedure**. Patients must then socially isolate until the test and the procedure. SARS-CoV-2 PCR assay results should be communicated to the patient by the provider prior to the procedure.

If you have any questions, please contact the HAN Coordinator at 802-859-5900 or [vthan@vermont.gov](mailto:vthan@vermont.gov).

### **HAN Message Type Definitions**

*Health Alert:* Conveys the highest level of importance; warrants immediate action or attention.

*Health Advisory:* Provides important information for a specific incident or situation; may not require immediate action.

*Health Update:* Provides updated information regarding an incident or situation; unlikely to require immediate action.

*Info Service Message:* Provides general correspondence from VDH, which is not necessarily considered to be of an emergent nature.