

New Recommendations Regarding Urgent and Nonurgent Patient Care

Due to the COVID-19 pandemic, the American Academy of Ophthalmology now finds it essential that all ophthalmologists cease providing any treatment other than urgent or emergent care immediately.

We now live and practice in a critically different medical reality—a rapidly evolving viral pandemic that is projected to, if unchecked, kill millions of Americans and tens of millions around the world. Public health experts agree that we must do two things on an urgent basis:

First, we must reduce the risk of the SARS-CoV-2 virus transmission from human to human and the rate of new case development. Only in that way can we flatten the curve and not overwhelm our very limited supply of hospital beds, ICU beds, ventilators and extracorporeal membrane oxygenation (ECMO) machines. We have already hit that stage in a few hard-hit metropolitan areas.

Second, we must as a nation conserve needed disposable medical supplies and focus them to the hospitals where they are most needed.

This disease is now in every state and the number of new cases is currently doubling every one to two days. Already, a handful of our ophthalmologist colleagues have died from COVID-19. It is essential that we as physicians and as responsible human beings do what we can and must to reduce virus transmission and enhance our nation's ability to care for those desperately ill from the disease. Public health experts unanimously agree that our window to modify the spread of disease is a narrow and closing one.

Accordingly, the American Academy of Ophthalmology strongly recommends that all ophthalmologists provide only urgent or emergent care. This includes both office-based care and surgical care. The Academy recognizes that "urgency" is determined by physician judgment and must always take into account individual patient medical and social circumstances. Each of us has a societal responsibility to not function as a vector of a potentially fatal disease—and one for which a widely available treatment or vaccine does not currently exist.

All other factors—business, finance, inconvenience, etc.—are remotely secondary. This is an existential crisis. We as physicians must respond to it and support our colleagues and our communities. Be safe.

For additional information go to aao.org/coronavirus.

Medical Professionals



Public and Patients



© American Academy of Ophthalmology

This email is a service offered to you by the American Academy of Ophthalmology.

655 Beach Street | San Francisco, CA 94109

Phone: +1 415.561.8500 | aao.org