

Inside AANA eNewsletter

March 2020

COVID-19: How is Your Practice Changing as a Result of the Coronavirus Pandemic?

In response to the COVID-19 (coronavirus) pandemic, orthopaedic practices across the globe are changing their processes, guidelines and the way they see patients in order to protect their staff, patients and ultimately themselves.

AANA Leaders and Committee Members provided insight into how their practices have changed due to COVID-19 as well as their advice for creating a safer work environment. Their answers are compiled into 10 helpful tips for you to incorporate into your own practice (if you haven't done so already).

1. **Screen all staff and patients with temperature checks, travel history, known contact with an individual who has tested positive for COVID-19, symptoms of fever, cough, etc.** Brian J. Cole, M.D., M.B.A., Orthopaedic Surgeon and Managing Partner at Midwest Orthopaedics at Rush; AANA First Vice President, states that his team currently wears surgical masks only for those interfacing with patients who clear the initial screening process.
2. **Embrace telehealth initiatives.** Dr. Cole explains that maintaining the core of the business is essential so that when it's safe to evaluate and treat elective conditions, those involved will be better prepared to do so – meaning the ability to evaluate both new and existing patients through telehealth practices is a current and future must.
3. **Shift surgeries performed.** Mark H. Getelman, M.D., Orthopaedic Surgeon at Southern California Orthopedic Institute; AANA Second Vice President, notes that, from a surgical viewpoint, only surgeries that are urgent and emergent are being performed, which would be defined as cases where a delay of 45-60 days would result in a negative impact to overall recovery, including but not limited to: fractures; unstable joints; and certain critical hand, elbow, ankle, foot, knee and shoulder tendon and ligament ruptures needing acute repair.

4. **Practice commonly used hygiene initiatives.** Dr. Getelman says this includes what has become routine for many: washing hands before and after a visit; using hand sanitizer; and wearing protective gloves before, during and after a patient examination. In addition, advanced screening has become routine in the clinic now as well as with patient questionnaires and temperature checks, maintaining social distancing and considering mask use for all clinical personnel at this time.
5. **Implement a “terminal clean policy” for each patient room.** Paul E. Caldwell, M.D., Orthopaedic Surgeon at Tuckahoe Orthopaedics Associates; AANA Board of Directors Member-at-Large and Membership Committee Chair, advises, in addition to personal hygiene initiatives, implementing a policy where a nurse wipes down each room with disinfectant wipes after the patient is seen. He also encourages “elbow bumps” versus handshakes and carrying out patient conversations at a six-foot distance.
6. **Develop a long-term financial plan.** Dr. Caldwell says that this is key from a business standpoint. In addition, he suggests budgeting your resources wisely.
7. **Utilize Physician Assistants (PAs).** Jonathan B. Ticker, M.D., Orthopaedic Surgeon and Shoulder Specialist at Orlin & Cohen Orthopaedic Group; AANA Communications/Technology Committee Chair, explains how PAs at his office are filling a critical screening role and assisting with patient triage for virtual or in-person consultations.
8. **Consider an “on-call” practice as an option.** Dr. Ticker echoes Dr. Cole’s advice on utilizing telehealth initiatives, and notes how his office has temporarily become an “on-call” practice in order to balance the need to be there for patients with the health and safety of staff and the community, offering a mixture of in-person (for urgent and emergent patient needs) and telehealth visits.
9. **Maintain strict distancing between all staff.** Michael E. Pollack, M.D., Orthopaedic Surgeon at MidJersey Orthopaedics; AANA Communications/Technology Committee Member, says that, for those in-person visits, in addition to the appropriate and compulsive hygiene his staff displays, everyone is also maintaining strict distancing – even going down to “A” and “B” shifts in order to have fewer employees in the office at a given time and help decrease overhead to a more sustainable level.
10. **Educate staff and patients to the best of your ability.** Additionally, Dr. Pollack encourages his colleagues to use their platform as trusted providers to educate patients, despite their lack of critical care and pulmonary expertise. Another tip? Continue to communicate with staff daily and in real time so they understand that their safety and the health of society is paramount.

Finally, during these difficult and stressful times, it’s important to be flexible and persevere. Louis F. McIntyre, M.D., Orthopaedic Surgeon for Northwell Health; AANA Immediate Past President, notes that even when state lockdowns end and lives return to normal, the normalcy everyone is used to seeing might not exist for some time, long after hospitals and practices have better control of the situation. One important plus, though: long-term trends for the specialty are still good for doctors and patients alike.

Other Helpful COVID-19 Resources

Coding Facts for COVID-19 (Coronavirus) Telephone Evaluations

Are you currently performing telephone evaluations? Review these coding facts before your next evaluation:

99441 - Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent or guardian not originating from a related E/M service provided within the previous seven days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; five- 10 minutes of medical discussion.

99442 - Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent or guardian not originating from a related E/M service provided within the previous seven days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion.

99443 - Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent or guardian not originating from a related E/M service provided within the previous seven days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion.

Review additional coding facts

Helpful Links:

- [Centers for Disease Control and Prevention](#)
- [U.S. Department of State – Travel Advisories](#)
- [Travel Advice \(World Health Organization\)](#)
- [AMA Resource Center for Physicians](#)
- [AAOS COVID-19 Member Resource Center](#)



Research Sharing Tips

Looking for a way to continue sharing your research amid social distancing? Check out AANA's latest blog post, "[**Physically Distant, but Socially Connected: How to Continue Sharing Research and Pearls with Colleagues.**](#)"

EXPLORE AANA EVENTS

AANA20 Cancellation Announcement

The AANA Executive Committee has made the critical and necessary decision to cancel the AANA 2020 Annual Meeting scheduled for May 7-9, 2020 in Grapevine, Texas. [Read the full statement from AANA President Larry D. Field, M.D.](#)

2020 AOSSM/AANA Specialty Day

Due to the cancellation of Specialty Day 2020, an online offering of previously planned content will be available to registrants so that they can benefit from the valuable faculty insights and information. **All registrants should have received more information and will receive access details to Specialty Day 2020 content soon. For additional questions, please email specialtyday@aana.org.**

Advanced Lab Courses

Dates Vary | Rosemont, Illinois

*As of March 15, 2020, the CDC has recommended "that for the next 8 weeks, organizers cancel or postpone in-person events that consist of 50 people or more throughout the U.S." – this does not impact the June 12-14, 2020 AANA Lab Course. If you have any concerns, please email covid19@aana.org.

2020 Advanced Lab Courses

Designed for the advanced practicing surgeon, AANA Advanced Lab Courses feature hands-on cadaver lab practice coupled with interactive lectures for the ultimate learning experience.

Register for a 2020 Advanced Lab Course:

Advanced Knee: Ligament, Meniscus, Articular Cartilage and Osteotomy

June 12-14, 2020 | [Register Now](#)

Small Joint Lab Course

July 17-19, 2020 | [Register Now](#)

Arthroscopic and Open Shoulder: When and How to Treat Shoulder Pathology

In partnership with the American Shoulder and Elbow Surgeons

August 21-23, 2020 | [Register Now](#)

Knee/Shoulder Lab Course

November 13-15, 2020 | [Register Now](#)

Emerging Techniques in Hip Arthroscopy: Innovations and Controversy

November 20-22, 2020 | [Register Now](#)

Did you know? **You could be eligible for the Early Careerist rate for AANA Lab Courses, as low as \$1,999**, if you're within five years of Residency/Fellowship completion!

EDUCATION FOUNDATION

Make an Impact in 2020

Your gift makes an impact. The AANA Education Foundation is 35% towards meeting its 2020 educational funding goal. With your help, 2020 can be our best year yet – [make your gift today!](#)

MEMBER NEWS

NEW! AANA Announces Partnership with OrthoLive

AANA is pleased to announce its new partnership with OrthoLive, a comprehensive telemedicine and communication service dedicated to orthopaedic patients and providers. Practice benefits include decreased call center wait times; mobile and web-based communication; improved patient satisfaction and more! **BONUS: AANA Members receive a discounted rate!** [Learn more.](#)

2020 ON Foundation Clinical Fellowship Application Window Is Almost Closed

The ON Foundation's new education program offers young clinicians a one-on-one experience with two renowned experts in the field of orthoregeneration: Prof. Matthias Steinwachs, Ph.D. and Brian J. Cole, M.D., M.B.A. Accepted Fellows will participate in extensive personal exchanges with the experts and their teams, attend surgeries and more! [The application deadline is April 7 – apply now!](#)

The AANA Health Policy Fellowship Application Deadline Approaching

Applications are being accepted for the 2020 AANA Health Policy Fellowship, an exclusive AANA Fellowship aimed at developing strategies to ensure continued patient access to high-quality arthroscopic care. **The application deadline is April 10.** [Learn more and apply!](#)

Time's Almost Up: Submit an Orthopaedic Arthroscopy/Sports Medicine Grant Application

Fellowship Program Directors and Coordinators are encouraged to apply for a 2020-2021 Orthopaedic Arthroscopy/Sports Medicine Fellowship Grant. The funding provided through this grant supports advancements in medicine through quality fellowship training. **The application deadline has been extended to April 15, 2020. [Apply now.](#)**

Recipients of 2020 International Education Scholarship Announced

AANA congratulates Mohammad Qasem Hamdan, M.D. from Jordan and Erica Kholinne, M.D., Ph.D. from Indonesia for receiving International Education Scholarships for 2020. This annual education scholarship grants two recipients registration to either the AANA Annual Meeting or an Advanced Lab Course along with up to \$2,000 for reimbursement of travel expenses. [Learn more about the International Education Scholarship.](#)

Course Lecture Pearls

Gain insight into what it's like to attend an AANA course – anytime, anywhere – with Course Lecture Pearls. New pearls have been released. [Discover what's new!](#)



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