

**Date:** 15 November 2023  
**To:** All Surgical Teams  
**From:** Surgery Strategic Clinical Network Infection Prevention & Control Working Group  
**RE:** Guidance for Surgery After Viral Respiratory Infection (including COVID-19)

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**Key messages:**

1. The document entitled *Guidance for Surgery After COVID-19 Infection: Timing of Surgery Following Recovery from COVID-19 to Reduce Risk of Postoperative Mortality* was rescinded in April 2023.
  - This guidance document was developed in January 2022 and, therefore, was based on pre-Omicron variant COVID-19 data.
  - There is now more information available about how the Omicron sub-variants affect patients peri-operatively.
  - In addition, the patient population is generally more immune to COVID-19 due to infection or immunization or both.
2. Clinicians should follow the [American Society of Anesthesiologists \(ASA\) and Anesthesia Patient Safety Foundation \(APSF\) Joint Statement on Elective Surgery and Anesthesia for Patients after COVID-19 Infection – June 2023](#) in a shared decision-making model with the patient when determining timing of surgery following recovery from COVID-19 infection.
  - The clinical team should use best judgement based on all available information for that patient.
  - Surgeries should not be delayed or cancelled based on COVID-19 immunization status alone. COVID-19 immunization status is only one component of the risk assessment that should be done pre-operatively.
3. Use a similar risk assessment and approach for patients with recent non-COVID-19 viral respiratory infection.
  - Many patients with respiratory infection symptoms do not have test-confirmed COVID-19 infection (i.e. unknown COVID-19), or have infections due to viruses other than SARS-CoV-2.
  - Clinical decision-making should be based on patient disposition and urgency of surgery (e.g. do not cancel surgery due to post-viral cough).

Please contact:

- [Surgery.SCN@ahs.ca](mailto:Surgery.SCN@ahs.ca) for general questions about this provincial guidance.
- Site Surgery and/or Anesthesia leads for patient- or site-specific questions.