



As the COVID-19 crisis continues to engulf the nation, the Florida Chapter of the American College of Physicians continues to represent its members and assist in navigating these troubled times. The Governor has issued another executive order and clarification from the Department of Health seems to still allow for evaluation and management of patients but all elective procedures are to be canceled.

We certainly want to ensure that our members are aware of these changes and in compliance with the state orders for the prudent use of available resources which is one of our motives, as well as stopping the spread of the virus and protecting patients. We also want to ensure that we are able to maintain our office practice's and be able to continue to provide safe and necessary service to our patients to make sure that they have their health maintained and prevent unnecessary burdens on this strained health care system. Our General Counsel Chris Nuland can answer specific questions and can be emailed at nulandlaw@aol.com. We certainly thank him and all the staff for their dedication and service. We also want to thank all the physicians of the state for what they do every day in the service of the practice of medicine and the patients who depend on us.

Jason M. Goldman, MD, FACP
Manning Hanline, Jr., MD, FACP, FACEP
ACP Governors, Florida Chapter

CLARIFICATION ON EXECUTIVE ORDER 20-72

The Governor's Executive Order applies to all physicians performing any procedure in a hospital, ambulatory surgical center, office surgery center, or in their office.

The Executive Order prohibits physicians from "providing any medically unnecessary, non-urgent or non-emergency procedure or surgery which, if delayed, does not place a patient's immediate health, safety, or well-being at risk, or will, if delayed, not contribute to the worsening of a serious or life-threatening medical condition."

According to the Department of Health, this order prohibits ANY medically unnecessary, non-urgent or non-emergency procedure performed in a physician's office, not just those procedures that consume essential resources (such as personal protective equipment).

A "procedure" is any medical treatment or operation, including, but not limited to, injections, ablations, laser procedures, physical therapy, cosmetic procedures, allergy shots, etc.

The provision of in-person medical treatment of any nature is a “procedure” and thus must be postponed if doing so does not place the patient’s immediate health, safety or well-being at risk or will not contribute to the worsening of a serious or life-threatening medical condition.

Physicians can continue to see patients for purposes of evaluation and management, including the performance of a physical examination, in order to determine if they have a medical condition that needs immediate attention. Physicians, to the extent possible, should use telemedicine services to pre-screen patients so that those with clearly non-emergency conditions do not have to come to the office for evaluation. Telemedicine, as previously stated, can continue unabated.

Further clarification from the Department of Health does not appear to be forthcoming. The Department currently will only state that:

“While some specific examples of which procedures should be postponed are also contained within Executive Order 20-72, licensed health care practitioners are tasked with exercising reasonable and appropriate professional judgment in evaluating their patients’ specific circumstances, overall health, and the medical necessity of any procedures performed. Therefore, the Executive Order explicitly leaves discretion on proceeding with procedures to the medical professional, based on his or her expertise and the specific factual situation of each patient. Only the medical professional can make that determination.”

Based on this limited direction then, each physician will have to make a judgment call on whether a particular procedure is necessary to avoid putting the patient’s immediate health, safety or well-being at risk or whether delaying such procedure will contribute to the worsening of a serious or life-threatening medical condition. If the physician determines that an interventional pain procedure, ongoing course of treatment, diagnostic test, etc. is necessary under the parameters set forth above, then the physician can perform the procedure. If the physician determines that the procedure can be safely delayed, the procedure should not be done.

DISCLAIMER:

You are receiving this message as a benefit of your ACP Chapter membership and are subscribed as jbaladini@acponline.org. To unsubscribe from your Chapter e-mail list, please [click here](#).

To change your e-mail address or other contact information in our records [click here](#), reply to this email, or call 800-ACP-1915, ext. 2600 or [215-351-2600](tel:215-351-2600) (Monday through Friday, 9:00 a.m. - 5:00 p.m ET).

Your ACP Chapter regularly sends messages about products, programs, and services of interest to our members. ACP respects your privacy and will not sell, lease or share your e-mail address with any other organization. The College and the Chapter will only use e-mail for the purpose of conducting business and

for communicating with members. Please note, unsubscribe requests will remove you from local chapter-specific emails including annual meeting, resident & medical student competitions, legislative updates and more.

©2020 American College of Physicians. All rights reserved.