IPOG COVID-19 SURVEY REPORT

APRIL 1ST 2020

-IN COLLABORATION WITH ANZPO, APOG, IAPO, PENTAFRICA, ESPO AND ASPO-

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Dear Friends and Colleagues,

We are dealing with an unprecedented pandemic where local, regional, and national rules and regulation are being revised on a daily basis.

This initiative started 5 days ago in collaboration with IPOG (International Pediatric Otolaryngology Group) and all six major pediatric otolaryngology societies in the world (ANZSPO, APOG, ASPO, ESPO, IAPO, PENTAFRICA).

The response has been extraordinary, indicating the in-depth collaboration of the societies and sense of urgency surrounding the COVID-19 pandemic. We have responses from 306 pediatric otolaryngology departments/institutions worldwide, which, to the best of our knowledge, is unprecedented.

We remain aware that the situation is ongoing and evolving on a daily basis. Neither the timing nor the content of this initiative will fully satisfy everyone's needs with respect to adequate length, level of detail, and timing. It is clear to all of us that, if some of the best and largest pediatric centers around the world are facing major challenges with patient management in the setting of equipment shortages, absence of clear guidelines/policies, and the decreasing workforce, it is difficult to imagine what other challenges smaller pediatric centers in remote parts of the world are facing. Despite all the potential shortcomings of our approach, if we can help only a few of our colleagues and patients, we feel it is worth a try.

We hope the results included below give institutions already dealing with the pandemic some perspective on how to adapt their current approaches moving forward. In parallel, institutions at the early stages of facing this disease might find insight into how best to PREPARE.

We thank each institution for taking the time to participate in this initiative and for the helpful comments and suggestions we have received.

Regards,

Reza Rahbar DMD, MD On behalf of IPOG (International Pediatric Otolaryngology Group)

ANZSPO (Australian and New Zealand Society of Pediatric Otolaryngology) Paul Walker, MD (President); Kelvin Kong, MD (Secretary)

APOG (Asia Pacific Pediatric Otolaryngology Group) Nguyen Thi Ngoc, MD (President); Wei-Chung Hsu, MD (Secretary) ASPO (American Society of Pediatric Otolaryngology) Anna Messner, MD (President); Reza Rahbar, DMD, MD (Secretary)

ESPO (European Society of Pediatric Otolaryngology) Ann Hermansson, MD (President); Martin Bailey, MD (Secretary) IAPO (Interamerican Association of Pediatric Otolaryngology) Federico Murillo, MD (President); Tania Sih, MD (Secretary)

PENTAFRICA (Pediatric Ear, Nose & Throat in Africa)
Chris Prescott, MD (President);
Shazia Peer, MD (Secretary)

Acknowledgement

We particularly want to thank Erika Mercier, MD (Pediatric Otolaryngology Fellow, Boston Children's Hospital) and Natasha Dombrowski, BA (Research Assistant, Department of Otolaryngology, Boston Children's Hospital) for all the work done with creation of the survey, collection of data, and putting this report together.

SURVEY RESULTS

These results will be posted on the respective websites of each society for members to access. We would like to thank every participating society and institution. Details of contributing institutions are at the end of the document.

TOTAL PEDIATRIC OTOLARYNGOLOGY/CHILDREN'S FACILITIES INCLUDED WORLDWIDE: 306

Africa	3	Europe	58	North America	79
South Africa	2	Belarus	1	Canada	7
Sudan	1	Belgium	4	Costa Rica	9
Asia	56	Bulgaria	2	Dominican Republic	4
China	5	Finland	1	El Salvador	2
Hong Kong	1	France	6	Guatemala	1
India	2	Germany	1	Honduras	5
Indonesia	1	Greece	1	Jamaica	1
Israel	3	Hungary	1	Mexico	5
Japan	1	Ireland	2	Nicaragua	3
Kazakhstan	1	Italy	7	Panama	2
Malaysia	12	Latvia	1	United States	40
Saudi Arabia	3	Netherlands	1	South America	102
Singapore	2	Poland	1	Argentina	10
South Korea	10	Portugal	3	Bolivia	4
Taiwan	5	Romania	2	Brazil	43
Thailand	2	Russia	4	Chile	3
Turkey	3	Serbia	1	Colombia	10
United Arab Emirates	1	Spain	3	Ecuador	3
Vietnam	4	Sweden	2	Paraguay	4
Australia/Oceania	8	Switzerland	1	Peru	5
Australia	7	Ukraine	1	Uruguay	5
New Zealand	1	United Kingdom	12	Venezuela	15

^{**}Please note that the results presented in this document are only a reflection of practices reported to us by most institutions and are not to be taken as statistically accurate**.

INSTITUTIONAL PRACTICES

Outpatient

clinics

Testing

protocol

Urgency of cases seen in

Employees are tested if....

at home preventively if...

Employees are asked to stay

clinic

Urgent cases (67%)

Urgent + Time-sensitive cases (41%)

Airway pathology/trach care, Acute infections (deep neck infection and neck mass, mastoiditis,

Cilines		refractory or complicated otitis media, cochlear implant patients), Oncology, Trauma, Epistaxis, Aero-digestive foreign bodies, Acute sensorineural hearing loss, Acute facial paralysis, Post-operative patients, Cholesteatoma
	Fellow and resident	62% participating in clinic duties 24% participating in telemedicine
	participation in clinic	34% participating in phone triage
	COVID-19 screening for	Questionnaire screening (74%)
	patients in clinic	• Fever checks before visits (62%)
	•	Using masks for patient and parents during visits (55%) Adapting visiting reason set via (4666)
		 Adapting waiting room set-up (46%) Limiting number of patients, alcohol gel use, limiting number of
		parents, use of negative pressure rooms
		Isolation areas for suspect/positive patients
	Use of telemedicine	55% of institutions are using telemedicine
	ose of teleffications	40% introduced telemedicine as a result of COVID-19
	Participation of pediatric	Required in 22% of institutions, includes:
	ORL teams in non-pediatric	Adult ORL patient care and call Stiffs in any analysis of the street of the stre
		 Shifts in emergency department, triaging patients COVID-19 sampling
	ORL duties	Relocating from private to public practice
		Participation in ethics committees
Operative	Case selection by urgency	Only performing urgent (82%)
	, , ,	Urgent + time-sensitive procedures (44%)
procedures	Fellow/resident participation	Emergent cases
	in operative cases	41% are involved in all cases 31% are involved only in COVID-19 negative patients
	•	Non-emergent cases
		No participation (65%)
Education	Conference participation	58% of institutions are using virtual conferences only
Luucation	comercine participation	28% of institutions have no conferences at this time
PPE	Surgical mask use in clinic	Required with all patient contact (71%)
(personal	N95/FFP3 use in clinic	 When seeing all COVID-19 suspected (53%) and confirmed (58%) cases (↓ access?) For aerosol generating procedures regardless of COVID-19 status (58%)
protective	N95/FFP3 use in OR	 When operating on COVID-19 suspected (55%) and confirmed cases(57%)(↓ access?) for aerosol generating procedures regardless of COVID-19 status (56%)
equipment)	PPE shortages	• N95/FFP3 (78%)
		• Eye protection (56%)
		Surgical masks (45%)Gowns (43%)
	Reusing PPE	Eye protection (52%)
	redsing i i L	• N95/FFP3 (36%)
	Use of non-hospital provided	28% of institutions have resorted to the following non-hospital provided PPE: Bought online or with own resources, Scuba diving face shield with HPF filter,
	PPE	Homemade, Local donations, Made by university engineering department,
		Welding visor, Speedo goggles
COVID-19	Access to in-house COVID	59% of institutions have in-house access
	testing	 Otherwise sent to outside institutions or centralized labs Government regulated in some institutions
testing	Pre-op COVID testing	65% of institutions do not routinely test for COVID-19 prior to operative procedures
	COVID test turnaround time	1-2 days (38%)
	condition of the condit	Same day (27%)

3-5 days (25%)

Exposed without PPE (22%)
Exposed and symptomatic (51%)

Exposed without PPE (25%)

Exposed and symptomatic (34%)

Exposed under any circumstances (37%)

Exposed under any circumstances (28%)

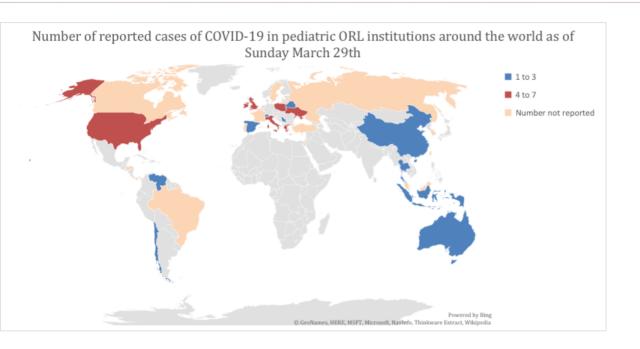
COVID-19 IN THE ORL COMMUNITY

COVID-19+ test in staff	Number of attending physicians	1-2	18 institutions Belgium Brazil (2) Colombia Costa Rica (2) Ireland Malaysia (2)	Saudi Arabia Spain (2) United Kingdom (2) Uruguay USA (2) Venezuela	
		3-5	5 institutions Brazil Ecuador	Italy UK USA	
		6-10	2 institutions Brazil South Korea		
	Number of residents/fellows	1-2	8 institutions Brazil (2) Canada Ireland	Israel Thailand USA (2)	
		3-5	1 institution USA		
Quarantined staff for exposure to COVID-19	Attending physicians	1-2	55 institutions Argentina (3) Belgium (2) Brazil (2) Canada (2) China Colombia (2)	Costa Rica (3) France (2) Israel (2) Malaysia (3) Paraguay Russia Serbia South Korea	Spain (2) Taiwan (2) Thailand (2) UK (5) Uruguay (4) USA (10) Venezuela
		3-5	17 institutions Brazil (2) Canada Chile Colombia Dominican Republic	Ireland Italy Mexico Poland Portugal Saudi Arabia	South Korea Spain UK USA Venezuela
		6-10	4 institutions Brazil Italy	Nicaragua USA	
		>10	2 institutions Brazil (2)		
	Residents/fellows	1-2	42 institutions Argentina (2) Australia Belgium Brazil (5) Canada (2) Chile (2) China	Costa Rica France Ireland Israel Malaysia (2) Paraguay Portugal Saudi Arabia	South Korea (2) Taiwan Thailand UK (3) Uruguay (2) USA (10)
		3-5 cases	6 institutions Canada Italy	Spain Turkey USA (2)	
		6-10 cases	1 institution USA		
	Duration of quarantine	2 weeks (85% of institutions)			

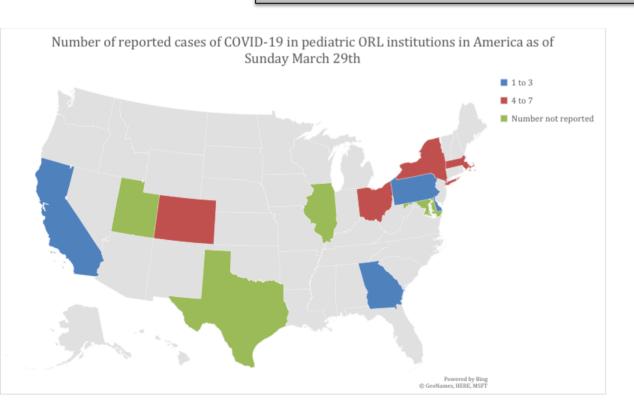
COVID-19 IN PEDIATRIC ORL PATIENTS (<18 Y/O)

COVID-19 + patients (<18 y/o) (total 87 institutions)	1-3 patients	23 institutions Australia (3) Belarus Chile China (4)	Indonesia Ireland (2) Serbia Spain Switzerland Thailand	USA (6) Philadelphia Atlanta Wilmington Stanford San Diego Rochester Venezuela
	4-7 patients	12 institutions Greece Ireland Italy (2)	Poland UK (2) Ukraine	USA (4) Aurora Boston Columbus New York
	Have patients, but cannot report number	52 institutions Australia Belgium (2) Brazil (5) Canada (4) France (5) Honduras (2) Israel (2) Italy (3)	Latvia Malaysia (3) Panama Portugal Russia South Korea (2) Spain (2) Sweden Taiwan	Thailand Turkey UK (5) USA (8) Chicago Jacksonville Houston (2) Philadelphia (2) Salt Lake City Baltimore
Patients requiring ICU care or intubation	1-3 patients	10 institutions Belgium Brazil China Italy (2)	Panama Serbia UK USA (2) Atlanta Boston	
(<18 y/o)	7 patients	1 institution USA NYC		
(total 42 institutions)	Have patients, but cannot report number	31 institutions Belgium Brazil (4) Canada (3) France (3) Honduras Ireland	Israel Malaysia (2) Portugal South Korea Spain (2) Taiwan Turkey	UK (2) USA (7) Colorado Houston NYC Philadelphia (3) Salt Lake City
Patients having passed away (<18 y/o) (total 21 institutions)	1 patient	1 institution China		
	2 patients	1 institution Vietnam		
	Have patients, but cannot report number	Belgium Brazil (5) Canada France	Italy (3) Nicaragua Panama South Korea UK	USA (3) NYC Philadelphia Salt Lake City

COVID-19 IN PEDIATRIC ORL



Please see the following link for daily updates on covid-19 cases worldwide... https://coronavirus.jhu.edu/map.html



LESSONS LEARNED AND OBSERVATIONS FROM AFFECTED CENTERS

⇒ Be ready! Experiences shared in this survey show that preparation is key.
Anticipating problems and putting in place strategies to combat them early is a lesson stressed by several institutions.

A FEW LESSONS FROM AN EMAIL COMMUNICATION WITH OUR COLLEAGUES AT HÔPITAL NECKER-ENFANTS-MALADES IN PARIS: DRS DENOYELLE, COULOIGNER, GARABEDIAN AND LOUNDON

- o Ubiquitous confinement is crucial
- o Cancel all non-urgent medical activities
- Patients with high BMIs (body mass index), even young adults, are at high risk for more severe forms of COVID-19
- Hydrochloroquine has been widely used at this institution but did not seem to have a significant impact on the severity of pneumopathy

POINTERS ON HOW TO PERFORM A COVID-19 NASAL SWAB:

- This is a procedure that can be difficult to perform as the nasopharynx can prove difficult and painful to reach
- Proper location of the swab however is essential to obtain an adequate specimen
- o As an alternative, the swab could be performed under the middle turbinate
 - · Evidence suggests it is an area of high viral load

USE OF PAPR (POWERED-AIR PURIFYING RESPIRATOR)

- Most institutions face a lack of availability of PAPR for contact with COVID+ cases
- o It has been reported that the use of PAPR makes communication in the OR difficult, <u>especially for</u> airway cases in which communication is critical
- Many institutions resort to an N95/FFP3 mask, face shield, gown and gloves instead
 - However, to the best of our knowledge, these PPE are not equivalent to PAPR when treating a COVID-19 + patient

GET READY

A few suggestions to help prepare if you are at the early stages of the pandemic or if you are already affected and looking to adapt your current practice...

All recommendations are based on survey results and institutional experiences. Every service should adhere to their establishment's local rules/regulations and be mindful of varying availability of equipment.

DIVIDE WORKFORCE INTO TEAMS TO MINIMIZE EXPOSURE

- Outpatient setting (front desk personnel, physician assistant, clinical assistant)
 - Consider dividing the team to minimize exposure
- Inpatient setting
 - Consider splitting in two teams rotating every 1-2 weeks
 - o Each team would include attendings, residents, fellows, any other core members
 - Suggest avoiding contact between teams to avoid contaminating the entire service

PREPARING CLINICS

- Limit to urgent and time sensitive patients
 - Surgical post-ops, oncology, airway
- Have a screening strategy to address potential COVID-19+ patients safely
 - o Pre-visit over the phone or video, survey on arrival, vitals on arrival
- Plan for a different area to see COVID+ or suspected patients
- Avoid unnecessary contact
 - Handshaking
 - Wash hands frequently
- Several institutions are wearing N95/FFP3 mask, gloves and gown whenever possible, at minimum surgical mask and gloves for all patients
- Make use of telemedicine
 - Follow-ups, immunocompromised or vulnerable patients

VIDEO CONFERENCES/EDUCATION

- Avoid in-person meetings
- Prepare a platform allowing for video conferencing from home or isolated office (e.g. Zoom)

EQUIPMENT/PPE

- There are severe shortages of N95/FFP3, eye protection and surgical masks
- Ensure sufficient hand sanitizer and disinfectant wipes on all units
 - Clean phones, keyboards, desks
- Plan back-up strategies to reuse equipment such when possible in case of shortage
- Several centers are resorting to homemade masks or donations
- Practice proper donning and doffing procedures
- PPE management videos from the Anesthesia and Critical Care team at BCH
 - Welch, J. COVID-19 Personal Protective Equipment and Airway Management for the Operating Room. 2020. Online video. OPENPediatrics. https://youtu.be/QZeQSJxu0.

• Welch, J. COVID-19 Personal Protective Equipment and Airway Management for the Operating Room: Demonstration. 2020. Online video. OPENPediatrics. https://youtu.be/d2sHRyAHKql.

PREPARING FOR SURGERY

- Limit surgery to urgent and time-sensitive cases
 - o Have clear criteria
- Limit number of people in the room (single surgeon)
- Limit aerosol-producing procedures to a strict minimum and wear full PPE (if available)
- Proposed PPE for at-risks procedures (aerosol generating procedures) and at-risk patients (potential COVID-19 +): N95 masks, double gloving, face shield for surgeon, scrub nurse and anesthesiologist
- Suggest rapid sequence intubation for at-risk patients
- Consider using video tools for laryngoscopy rather than direct vision
- Consider placing protective drapes around patient's face during aerosol-generating surgical procedures

COVID TESTING

- If possible, plan to have in-house testing
- Consider pre-op testing for patients with symptoms, patients exposed to a positive person, patients coming from abroad or having recently traveled
- The ultimate goal is to test every patient before surgery, however, test being in short supply, this is not always possible

BEDSIDE EXAM AND PROCEDURES

- Wear PPE for oral cavity and nasal exam
 - Suggest mask and gloves (low-risk patient)
 - O Suggest N95/FFP3 if positive for COVID-19 or aerosol-generating procedures on any patient
- Aerosol generating procedure (Flexible endoscopy, tracheostomy change)
 - Only perform absolutely necessary procedures
 - Limit number of people exposed (one person performing exam)
 - O Wear full PPE: N95 mask, gown, face shield, gloves
 - Safe to change to surgical mask 30 minutes after aerosol generating procedures

EXPOSED OR INFECTED TEAM MEMBERS

- Consider 2 weeks quarantine for unprotected exposure to COVID+ patient (based on survey responses), or per institutional protocol
- Consider 2 weeks quarantine for symptomatic personnel
- Quarantine per institutional protocols for positive test

SUPPORT

- Plan to have a person of reference to whom people can address concerns
- Plan to have adequate support systems for team members

RECENT COVID-19 RECOMMENDATIONS FROM PEDIATRIC ORL ASSOCIATIONS

ANOSMIA

AAO-HNS (03/26/2020)

There is rapidly accumulating anecdotal evidence that anosmia with resultant dysgeusia are frequently reported symptoms associated with the COVID-19 pandemic. Similar reports are surfacing from multiple countries around the world including the United States. In an effort to establish the importance of these symptoms in diagnosis and progression of COVID-19, the American Academy of Otolaryngology—Head and Neck Surgery (AAO-HNS) has established the COVID-19 Anosmia Reporting Tool for Clinicians. This tool was developed by the AAO-HNS Infectious Disease and Patient Safety Quality Improvement Committees to allow healthcare providers of all specialties worldwide to submit data to confidentially report on anosmia and dysgeusia related to COVID-19.

PPE

ENTUK (03/27/2020)

I am pleased to announce that Public Health England has agreed and confirmed in writing to me the following recommendations: upper-airway procedures such as nasal endoscopy, laryngoscopy and other interventions in our specialty are to be considered Aerosol Generating Procedures (AGPs), requiring full prescribed PPE, including an FFP3 respirator. They have also agreed that we are seeing widespread transmission of COVID-19 in the community, and therefore advise that appropriate PPE should be used in relation to AGPs undertaken in ANY patient. Clinicians should plan to group patients requiring these procedures, all of whom should be assumed infected, to avoid changing respirators between patients and thereby preserve stock. In the absence of an FFP3 respirator, the Health and Safety Executive has confirmed that an FFP2 or N95 equivalent respirator would offer adequate levels of protection. However, it is important to note that FFP3 is officially the prescribed rating. Their official letter and guidance are expected shortly, but please be safe and take care of yourselves in the above manner. A useful document on the safe decontamination of endoscopes is linked below, and will be on our website shortly.

AAO-HNS (03/23/2020)

Until the supply of testing materials catches up with the accelerating demand for testing, there will be circumstances that the COVID-19 status of these patients is unknown. Therefore, when a detailed examination or surgical procedure is necessary for urgent or emergent care and the COVID-19 status of the patient cannot be confirmed, then the patient should be handled as if they are COVID-19 positive. This consideration should apply regardless of whether in an office, hospital, or operating room setting. Furthermore, the provider and surrounding staff must have the necessary PPE. Particular attention must be taken to clean contaminated equipment and surfaces with appropriate disinfectants (e.g., \geq 70% alcohol) as recommended by the CDC.

ENTUK (03/24/2020)

We believe that it is imperative that PPE (Personal Protective Equipment: FFP3 masks, visors, gowns and gloves) is available and used for all forms of nasal and throat examination, in both the hospital, outpatient clinic and community settings. We should now assume that all our ENT patients are potential carriers of the virus. This includes those patients who require an endoscopic examination of their nose and throat which exposes both the operator and assistant to aero-digestive tract droplets.

AAO-HNS

The need to flatten the curve of transmission and preserve critical supplies and equipment for those who need it most <u>necessitates limiting care at this time to time-sensitive and emergent problems and the routine use of appropriate PPE when treating patients in all age groups.</u> This policy applies to otolaryngologists in areas currently facing high infection rates as well as those in areas with limited penetration.

SURGICAL MANAGEMENT

CEORL-HNS (03/23/2020)

- 1) Endoscopic examinations should be avoided and only be indicated when necessary.
- 2) <u>Avoid non-urgent and non-cancer surgery</u>. In particular, Endonasal Endoscopic Sinonasal Surgery and Laryngological Surgery (especially jet ventilated orotracheal intubation is more appropriate) seems to be the riskiest procedures.

Tracheostomy is considered to be a particularly high-risk procedure during surgery but also in aftercare which could potentially also increase amount of PPE consumed many folds that are already universally in short supply. The need for tracheostomy in COVID-19 patients should be carefully assessed by a multidisciplinary team.

COVID-19 should be excluded in patients undergoing surgery. If the acute medical condition does not allow it, it is necessary to consider the patient positive until the result is negative.

ASPO (03/23/2020)

- 1. Surgical cases: We have all been asked to postpone elective cases—the debate centers around the issue of the definition of "urgent" cases and this appears to vary between institutions. The COVID-19 virus is spread via nasal and oral secretions. Reports from other institutions indicate that the risk of virus spread is high with sinus surgery and should be avoided. We need to presume that the risk is also high with adenoid and tonsil surgery and nearly all institutions have concluded that these cases should not be performed unless there are extraordinary indications. What about ear tubes? Most institutions are canceling all ear tube cases while others are proceeding with ear tubes in the young children with raging infections in an effort to keep the kids out of their pediatrician's offices and prevent complications. The risks of a short mask anesthesia (with aerosolization of secretions) in a young child are not known at this time. Eventually, I have no doubt that we will get to a place where we can test patients pre-op to see if they are COVID-19 virus positive (as they are doing in S. Korea)- hopefully this will be sooner rather than later.
- 2. Flexible laryngoscopy, nasal endoscopy. It is clear that these procedures are "high risk" for spreading the virus and should be avoided whenever possible. When they need to be performed it is clear that we and any other medical personnel in the room should wear gown, gloves, eye protection and mask. Nasal pledgets

<u>should be used for topical anesthesia instead of sprays</u>. At some institutions the debate is whether a surgical mask is adequate versus an N-95. We definitely know that the virus is in the nasal and oral secretions of asymptomatic children and so <u>an N95 should be the standard of care</u>. Again, we look forward to the day when we can routinely do pre-procedure testing.

3. **Telephone/teleconference patient visits**. I have no doubt that in hindsight one day we will look back on this pandemic as the true birth of video visits. The good news (always need to look for the silver lining) is <u>that</u> federal and state rules re visits are being relaxed so that now we can use non-HIPAA compliant platforms such <u>as facetime and we can now bill for telephone visits</u>. Many of our institutions are rapidly pushing out protocols and platforms for us to utilize so that we can continue caring for our patients.

USEFUL LINKS AND DOCUMENTATION

COVID-19 MANAGEMENT RECOMMENDATIONS:

- 1. ENT UK COVID-19 information for health professionals: www.entuk.org/covid-19
- 2. Handbook of Covid-19 from the First Affiliated Hospital, Zhejiang University School of Medicine: https://www.britishlaryngological.org/news/covid-19-important-quidance
- 3. CDC recommendations on how to extend the life of N95 masks: https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html

mbers+05.03.20&utm_campaign=73aadcea8d-

4. Guidelines for naso-endoscopy: <a href="https://mcusercontent.com/e386d81be4a76bada89909666/files/24995686-7386-4260-a5a6-e56aff56970c/Nasal endoscopy and laryngoscopy examination of ENT patients.pdf?utm source=ENT+UK+Me

EMAIL CAMPAIGN 2020 03 23 05 26&utm medium=email&utm term=0 b992aea106-73aadcea8d-118550865

- 5. Aerosol Generating Procedures in ENT: <a href="https://mcusercontent.com/e386d81be4a76bada89909666/files/b384cf30-e622-4469-9d9f-7d2932b35330/Aerosol generating procedures in ENT.pdf?utm source=ENT+UK+Members+05.03.20&utm cam paign=73aadcea8d-EMAIL CAMPAIGN 2020 03 23 05 26&utm medium=email&utm term=0 b992aea106-73aadcea8d-118550865</p>
- 6. Tracheostomy Guidance: https://mcusercontent.com/e386d81be4a76bada89909666/files/a34a3934-d546-46e0-afff-fcb3de7c9dfa/COVID tracheostomy quidance.pdf?utm source=ENT+UK+Members+05.03.20&utm campaign=73a adcea8d-EMAIL CAMPAIGN 2020 03 23 05 26&utm medium=email&utm term=0 b992aea106-73aadcea8d-118550865
- 7. Remote triaging of head and neck cancer patients:

 https://mcusercontent.com/e386d81be4a76bada89909666/files/7479ddef-359a-4b25-9b32c99d7a858e89/Remote triaging of urgent suspected head and neck cancer referrals during Covid 19 pande
 mic FINAL.pdf?utm source=ENT+UK+Members+05.03.20&utm campaign=73aadcea8dEMAIL CAMPAIGN 2020 03 23 05 26&utm medium=email&utm term=0 b992aea106-73aadcea8d-118550865

SCIENTIFIC ARTICLES

8. COVID-19 shedding in symptomatic vs asymptomatic

patients: https://urldefense.proofpoint.com/v2/url?u=https-

3A__www.nejm.org_doi_full_10.1056_NEJMc2001737-3Fquery-3DTOC&d=DwlFAg&c=ZQs-KZ8oxEw0p81sqgiaRA&r=YVK9ucsKVuhN_CL0l7G0tQ&m=r7WxtCuTNeLrlrbVzHvJor3oM7oncxxVt3z2L 6CQHxs&s=jsJ6Lr1dr1Lajp392mlRrsw5U2fpn4cKFsGNTaEOs-k&e=

RESOURCES

- 9. AAO-HNS Resources: https://www.entnet.org/content/coronavirus-disease-2019-resources
- 10. Stanford Covid-19 town hall (Available Streaming Online via ZOOM):

https://stanford.zoom.us/rec/share/4o9bIJTU8F1LZIXKzHzPRqMHAdvLeaa80CcZqfdbnR0clnG_taBOr68Z2TMwNU-2

https://stanfordmedicine.box.com/s/unke9g5pllmdmp09yeyiq2qgkif100qq

- 11. Easy way to contact patients with your cellphone without revealing your number: https://www.doximity.com/app
- 12. Risk calculator for head and neck cancer patients: https://urldefense.proofpoint.com/v2/url?u=https-3A entuk.us6.list-2Dmanage.com track click-3Fu-3De386d81be4a76bada89909666-26id-3D2aa586bf9d-26e-3Dfdd2757341&d=DwMFaQ&c=qS4qoWBT7poplM69zy 3xhKwEW14JZMSdioCoppxeFU&r=h-OQOtdm22Ta9xatFu-

<u>kD1OC5oeSZ4Son4znIJzn0B8qSTZk7PLkGQpqzZJkI5Z&m=twP2ktheCedSLA9BUWRF4OMI6WfstYXKMEoIN3H</u> UfVc&s=hIV-qKG9LxVPOoVMzfNzQ6-7I 4Udzk3QUtDwaHLjKU&e=

IN THE NEWS

- 13. Keeping healthcare workers safe: https://www.newyorker.com/news/news-desk/keeping-the-coronavirus-from-infecting-health-care-workers
- 14. ORL makes the New York Times: https://www.nytimes.com/2020/03/22/health/coronavirus-symptoms-smell-taste.html

DISEASE STATISTICS AND PROJECTIONS

- 15. Map of global COVID-19 cases: https://coronavirus.jhu.edu/map.html
- 16. Number of cases: https://www.worldometers.info/coronavirus/
- 17. Projections for COVID-19 cases in the United States: https://covid19.healthdata.org/
- 18. Global statistics: https://www.statista.com/topics/5994/the-coronavirus-disease-covid-19-outbreak/

INSTITUTIONS BY CONTINENT AND COUNTRY*

*We apologize in advance if there are any spelling errors or omissions in the names listed here. Please email natasha.dombrowski@childrens.harvard.edu or erika.mercier@childrens.harvard.edu with any corrections.

Africa

South Africa:

- Red Cross Children's Hospital & University of Cape Town
- Universitas Academic Hospital/University of the Free State

Sudan:

Africa ENT Hospital

Asia

China:

- Beijing Children's Hospital, Capital Medical University
- Children's Hospital of Shenzhen
- Shanghai Children's Hospital
- Shanghai Children's Medical Center
- The Children's Hospital at Zhejiang University School Of Medicine

Hong Kong:

 Hong Kong Children's Hospital/United Christian Hospital KEC Hong Kong

India:

- Manipal Hospitals
- Nanavati Hospital

Indonesia:

Universitas Airlangga

Israel:

- Private Practice
- Samson Assuta Ashdod University Hospital
- Tel Aviv Sourasky Medical Center

 Innan:

 Innan:

Japan:

 National Center for Child Health and Development

Kazakhstan:

 West Kazakhstan State Medical Academy

Malaysia:

- Hospital Raja Perempuan Zainab II, Kota Bharu
- Hospital Sultan Abdul Halim, Kedah
- Hospital Sultanah Bahiyah Alor Setar
- Hospital Tengku Ampuan Afzan
- Hospital Tunku Azizah (Women and Children's Hospital), Kuala Lumpur
- Hserdang Malaysia

- Sabah Women and Children's Hospital
- Sarawak General Hospital (Ministry of Health)
- Sunway Medical Centre
- Universiti Kebangsaan Malaysia Medical Centre
- Universiti Sains Malaysia
- University of Malaya

Saudi Arabia:

- King Fahad Specialist Hospital Dammam
- National Guard Hospitals
- Prince Sultan Military Medical City (PSMMC)

Singapore:

- KK Women's and Children's Hospital
- National University Hospital

South Korea:

- Ajou University Medical Center
- Asan Medical Center
- Chungnam National University Hospital
- Ewha Women's University School of Medicine
- Hallym University Medical Center
- Hanyang University Hospital
- Konyang University Hospital
- Korea University College of Medicine
- Kyung Hee University
- Seoul National University Boramae Medical Center

Taiwan:

- Cathay General Hospital
- Chang Gung Memorial Hospital
- China Medical University Hospital
- MacKay Memorial Hospital and MacKay Children Hospital
- National Taiwan University Hospital and Children's Hospital

Thailand:

- Chiang Mai University
- Siriraj Hospital, Mahidol University

Turkey:

- Hacettepe University
- Koc University
- Samsun Research and Training Hospital

United Arab Emirates:

• Al Jalila Children's Hospital, Dubai

Vietnam:

- Children's Hospital 1, Ho Chi Minh City
- Danang ENT Center
- ENT Hospital Ho Chi Minh City
- National Hospital of Pediatrics

Australia/Oceania

Australia:

- John Hunter Children's Hospital
- John Hunter Hospital
- Perth Children's Hospital
- Queensland Children's Hospital
- Royal Children's Hospital
- Sydney Children's Hospital
- The Children's Hospital at Westmead

New Zealand:

Starship Hospital

<u>Europe</u>

Belarus:

 Minsk Pediatric Hospital of Infectious Diseases

Belgium:

- Antwerp University Hospital
- Centre Hospitalier de Mouscron
- Centre Hospitalier de Wallonie Picarde
- Universitair Ziekenhuis Gent

Bulgaria:

- Bulgarian Society of Pediatric ORL
- UMHAT "Tzaritza Joanna-ISUL"

Finland:

Helsinki University Hospital

France:

- Aix Marseille University, La Timone Children's Hospital
- Hôpital Femme Mère Enfant
- Hôpital Necker Enfants Malades
- University Hospital Gui de Chauliac
- University Hospital of Brest
- University Hospital of Lille

Germany:

• Klinikum Bremerhaven Reinkenheide

Greece:

 Agia Sofia Children's Hospital Athens

Hungary:

Hogyi

Ireland

- Children's Health Ireland
- Children's Health Ireland at Crumlin

Italy:

- ASST Spedali Civili
- Azienda Ospedaliera Università di Padova
- Bambino Gesù Children's Hospital
- Institute for Maternal and Child Health IRCCS Burlo Garofolo
- Meyer Hospital
- Ospedale dei Bambini V. Buzzi Milano
- Ospedale Infantile Regina Margherita

Latvia:

 Children's Clinical University Hospital

Poland:

 Karol Jonscher Childrens Hospital, Poznan University of Medical Sciences

Portugal:

- Centro Hospitalar Universitário do Porto
- Hospital de Cascais
- University of Porto Faculty of Medicine Hospital Center S. Joao

Romania:

- CMDTAMP Bucharest
- University of Medicine and Pharmacy "Victor Babes" Timisoar

Russia:

- Clinical Hospital Lapino
- Imma
- Klinika Semeynaya
- National Medical Centre of Otolaryngology of FMBA of Russia

Serbia:

 Mother and Child Health Care Institute of Serbia

Spain:

- Hospital San Rafael, Madrid
- Hospital Universitario Son Espases
- Sant Joan de Deu Children's Hospital Barcelona

Sweden:

- Karolinska University Hospital
- University Hospital Lund

Switzerland:

University Hospital Basel

Ukraine:

 Lviv Regional Pediatric Clinical Hospital OHMATDYT

United Kingdom:

- Barts Health
- Bradford Royal Infirmary
- Evelina London Children's Hospital
- Great Ormond Street
- Imperial College
- Royal Belfast Hospital for Sick Children
- Sheffield Children's Hospital
- St Georges
- University College London Hospitals
 (3)

North America

Canada:

- BC Children's Hospital
- Centre Hospitalier Universitaire Sainte-Justine
- CHEO
- CHU de Québec-Centre Mère-Enfant
- IWK Health Centre
- Montreal Children's Hospital
- The Hospital for Sick Children

Costa Rica:

- Caja Costarricense del Seguro Social
- CCSS
- CCSS San Juan
- Dr. Gago's Private Practice
- Hospital Monseñor Sanabria
- Hospital Nacional de Niños del Seguro Social
- Hospital San Vicente de Paul
- INS
- Ministerio de Salud Costa Rica

Dominican Republic:

- Cedimat
- Hospital Pediátrico Dr Hugo Mendoza
- Hospital Salvador B. Gautier
- Lolo

El Salvador:

- Hospital de Niños Benjamín Bloom
- Instituto Salvadoreno Del Seguro Social/ Hospital Regional San Juan De Dios De San Miguel El Salvador

Guatemala:

Centró Otorrinolaringológico

Honduras:

- AHONORL
- Asociación de Rinologia Honduras
- Honduras Medical Center
- Hospital del Valle
- Hospital San Felipe

Jamaica:

Bustamante Hospital for Children

Mexico:

- Hospital Infantil de Mexico Federico
 Gómez
- Salud Auditiva México SA de CV
- Tecnologico de Monterrey TECSalud
- Instituto Mexicano del Seguro Social

Nicaragua:

- Clinicentro
- Hospital Vivian Pellas
- Hospital Vivian Pellas /Hospital Monte España

Panama:

- Hospital del Niño Dr. Jose Renan Esquivel
- Hospital De Especialidades Pediatricas de la Caja de Seguro Social

United States:

- Albert Einstein College of Medicine
 & Montefiore Medical Center
- Ann & Robert H. Lurie Children's Hospital of Chicago
- Arkansas Children's Hospital
- Boston Children's Hospital
- Center One Surgery
- Children's Hospital Colorado
- Children's Hospital Los Angeles
- Children's Hospital New Orleans
- Children's Hospital of Philadelphia
- Children's Hospital of PittsburghChildren's National Health System
- Cincinnati Children's Hospital
- Connecticut Children's Hospital
- East Tennessee Children's Hospital
- Emory University
- Johns Hopkins University
- Mary Bridge Children's Hospital
- Medical College of
- Wisconsin/Children's WisconsinMiller Children's Hospital
- Nationwide Children's Hospital
 Nemours/Alfred I. duPont Hospital
- for ChildrenNemours Children's Hospital Orlando, FL
- New York University
- Oregon Health Sciences University
- Penn State Milton S. Hershey Medical Center
- Primary Children's Hospital
- Rady Children's Hospital San Diego
- Seattle Children's Hospital
- Stanford University
- SUNY Downstate Medical Center
- Texas Children's Hospital/Baylor College of Medicine

- University of California, San Francisco
- University of Michigan
- University of New Mexico Children's Hospital
- University of Rochester
- University of Texas Houston
- University of Vermont Medical Center
- UT Southwestern
- Walter Reed National Military Medical Center
- West Virginia University

South America

Argentina:

- COAT Centro Otoaudiologico de Alta Tecnologia
- Consultorio Otorrinolaringologico Buenos Aires
- Hospital Español de Mendoza
- Hospital General de Niños Dr. Pedro de Elizalde
- Hospital Nacional de Pediatria Prof.
 Garrahan
- Hospital Pediatrico Fleming
- Hospital Privado de Nariz Garganta y Oidos
- Sanatorio Allende
- Sanatorio Argentino

Bolivia:

- Caja de Salud CORDES
- Clínica Alemana
- Hospital Arco Iris

Brazil:

- Clínica Crescer
- Clinica Infancia Viva Pediatria
- Clínica Integrada Aragão
- Faculdade Ciências Médicas de Minas Gerais
- FAMERP
- Fundação Ouro Branco
- Hospital da Criança Conceição
- Hospital da Cruz Vermelha Brasileira Paraná
- Hospital das Clinicas da Faculdade de Medicina da Universidade de São Paulo

- Hospital de Clínicas de Porto Alegre
- Hospital de Otorrinolaringologia de Sorocaba BOS
- Hospital Infantil Darcy Vargas
- Hospital Infantil Joana de Gusmão
- Hospital IPO
- Hospital Israelita Albert Einstein
- Hospital Mater Dei Unidade Contorno
- Hospital Municipal Souza Aguiar
- Hospital Paulista
- Hospital Pequeno Príncipe
- Hospital Português
- Hospital Regional de Taguatinga
- Hospital Sao Lucas da PUCRS
- Hospital Unimed Rio Verde
- Hospital Universitário Antônio Pedro
- Hospital Universitário Pedro Ernesto UERJ
- lapo
- Imigrantes Hospital
- Instituto Fernandes Figueira
- Instituto Fernandes Figueira / FIOCRUZ
- Otos
- Private/Independent Practice (3)
- Santa Casa de Campo Grande
- Santa Casa de Porto Alegre
- Santo Antonio Children's Hospital
- Sensorial
- SMS RJ/CF JSH
- Unimed BH
- Universidade de Vassouras
- Universidade Estadual de Campinas
 UNICAMP
- Universidade Federal de São Paulo

Chile:

- Hospital Clínico San Borja Arriarán
- Hospital Regional de Concepcion
- Red Salud Universidad Católica

Colombia:

- Clínica Palermo
- Clinica Portoazul
- Fundación Santa Fe
- Hospital Santa Clara
- Hospital Universitario San Ignacio
- Independiente

- Otofon
- Private Practice Office
- Santa Cñara Hospital ESE
- Universidad de Caldas

Ecuador:

- Hospital Carlos Andrade Marín
- Hospital Kennedy Alborada
- Hospital Metropolitano

Paraguay:

- Hospital de Clinicas
- Hospital de Clinicas U.N.A.
- Hospital General Barrio Obrero
- Hospital Nacional

Peru:

- Clínica Internacional
- Hospital Negreiros de EsSalud
- Independiente
- Instituto Nacional de Salud del Niño de San Borja
- Seguro Social de Salud

Uruguay:

- 1- COMECA
- CASMER- FEMI
- Centro Hospitalario Pereira Rossell
- Comeri
- Cosem

Venezuela:

- Centro de Otorrinolaringología Respira Libre
- Centro Medíco de Caracas
- CHET
- Clínica Calicanto/ Prevaler Maracay
- Clínica de Oídos, Nariz y Garganta Barquisimeto
- Clínica El Ávila
- Hospital de Niños HM de los Rios
- Hospital Domingo Luciani
- Hospital Dr. Luis Gomes Lopez
- Hospital Luis Ortega
- Hospital Vargas de Caracas
- Instituto Auditivo Barinas/ Centro de Oido Nariz y Garganta
- Instituto de Otorrinolaringología y Oftalmologia
- IVSS Ambulatorio El Limon Aragua
- Policlinica Metropolitana

SURVEY RESPONDENTS

(LISTED ALPHABETICALLY BY FIRST NAME*)

*Names Are Written As They Appeared In Survey Responses. We Apologize In Advance If There Are Any Errors In Names Listed Here. Please Email Natasha.Dombrowski@Childrens.Harvard.Edu Or Erika.Mercier@Childrens.Harvard.Edu With Any Corrections.

Adelaida Bock Ahmad Alkurdi Alan Cheng (Palo Alto) Alan Cheng (Sydney) Albert Park Alejandra Corrales Alexev A. Borodin Ali Taghi Alvaro Carlos Calvo

Pereira An Boudewyns Ana Carolina Ana Paula Dualibi Ana Sandoval Valdiviezo

Alvaro Ricardo Fuentes

Anastasiya Anatolii Aneliese Mair Ángela Pérez Ann Hermansson Anna Messner Anna Meyer Anne Doyen Anne Schilder

Antonio Joaquin Ruiz Corona

Araceli De La Guardia Archwin Tanphaichitr

Ariel Ivars

Augusto Peñaranda **Bas Pullens** Bernardo Oliver Blake Papsin

Bong Jik Kim Bruce Maddern Byun Jae Yong Carina Valeriani Carla Napolitano

Carlos De La Torre Carlos Enrique Mena

Canata

Carlos Humberto Cieza

Samillan

Carlos Mena Canata Carlos Muñoz Carol Macarthur Cecilia Jové Cecille Sulman

Cesar

César Franco Peña Cesare Cutrone Chiader Lin Chris Raine

Christian Fernandez Zapata

Claudia Schweiger Claudio Lindemberg Cleverson Aguiar Colleen Heffernan Conor Jackson Cristiane Abdo **Damien Phillips Daniel Choo** David Chi **David Landin David Tunkel** Deepa Shivnani Diana Gomez

Diana Patricia Romero Lara

Diana Vanessa Sierra

Amador

Dilyana Vicheva Douglas R. Sidell Edgar Arturo Perdomo

Flores

Edilberto Salazar Zender **Edio Junior Cavallaro**

Magalhães Elena Piña

Elise Zimmermann Mathias

Ellis Arjmand Els De Leenheer

Enrique Muñoz Hernandez

Erica C. Bennett Ericka King Estelita Betti Eva Orzan Faruk Unal

Federica Peradotto

Federico Murillo Fedir Yurochko Fernando Silva Chacon Francis Sanchez De Losada Francisco Bonilla Gomez Francisco Medina

Franco Pignatelli Franco Trabalzini Françoise Denoyelle Frida Scharf De Sanabria Gabriella Kupecz

Genaro Revnoso George Evandro Boos

Gadi Fishman

George Reitich George Zalzal **Gerard Corsten** Gerardo Manuel Salas

Rivas

Gerardo Rene Barillas

German Gago

Gheorghe Iovanescu

Gi Jung Im Goh Bee See

Graciela González Franco

Haifaa S. Alnasser Halimuddin Bin Sawali

Gresham Richter

Hamid Daya Harlan Muntz Hashimah Ismail Hassan Ramadan

Hazim Aleid

Heather Herrington Helen Caulfield

Henry Tan KK **Hudson Dutra Hugo Rodriguez**

Huniades Urbina-Medina

Huvnh Ba Tan I Chun Kuo Ian Jacobs James S. Reilly Jaroslaw Szydlowski Jean Pierre Certain Jean-Michel Triglia Jeffrey Koempel Jesus Franco Anzola Jesus Peña Prato Jeyanthi Kulasegarah

Jiarui Chen Jie Zhang Jin-Hwan Kin

Joana Ximenes Araújo

Joerg Ebmeyer

Johanna Nokso-Koivisto Johanna Sembergman

John P. Little John Russell Jonathan B. Ida Jordana Rosignoli Jorge Astocondor Jorge Osorio

Jorge Rafael Villamizar

Jorge Spratley Jose Colmenarez Jose Daniel Pazzetti

José Faibes Lubianca Neto José Manuel Meléndez

García

Juan David Carvajal

Juan Ospina Julie Wei

Julio Ernesto Cardona

González Jungho Bae Karen Mojica Karen Zur

Katherine Kavanagh Kelly Atencia Bueno

Kelvin Kong Kenny H. Chan Kim Chul-Ho Kim Jong-Yeup Kristaps Dambergs Kristien Ghyselen Kuo Sheng Lee

Lan Li

Leandro Brandão Guimarães

Lee Reyes Lei Wu

Leonardo Conrado Barbosa

De Sá

Lilia Dimitrov

Lilian Scapol Monteiro

Liliana Palma Lisa Elden

Lorena Rodrigues Luca Redaelli De Zinis Lucía Arias Asch Luciana Pimentel Oppermann

Luis Jiménez Ferreres

Luz Tobar

Magdalena Roques Revol

Mai Thy Truong
Malba Bastidas
Manoel De Nobrega
Manohar Shaan
Marc Thorne
Marcelo Otsuka
Marcelo Silber

Márcio Emrich Campos Margo Mckenna Benoit María Beatriz Rosales Maria Beatriz Rotta Pereira Mariana Pires De Mello

Valente Mariana Saad Marilena Trozzi Mario Zernotti Marlene Soma Marsha James Matthew Brigger Matthew Bromwich Maura Neves

Maura Neves
Mauro Zernotti
Mayra Coelho Bócoli
Meghan Wilson
Mehmet Umut Akyol
Mercedes Narváez
Meredith Lind
Michael Cunningham

Michael Kuo Michael Rutter Michel Neeff Michelle Wyatt

Miguel Bebiano Coutinho Mihaela Carmen Tomoiu

Moacyr Saffer Mohamed Akkari Moshe Chaitchik Nara Orban Nayara Lacerda Neil Chadha

Nesrettin Fatih Turgut Nguyen Tuyet Xuong Niall Jefferson Nicola (Nikki) Slee

Nicolas Guertler Nicole Bejarano Nina Yoshpe

Noemie Rouillard-Bazinet

Noriko Morimoto Norzi Gazali Nuntigar Sonsuwan

Nurliza Idris Olga Karneeva Oliver Haag

Oscar R.Terraza-Calderon

Ozan Gökler
Pamela Pol Paulino
Patricia Andrade
Patrícia Campos Elia
Patrícia Cristina Berenhi
Patricia Mesquita Vilas

Boas

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Priatharisiny Velayutham Rachel Almeida Pra Rafael Pontes Ribeiro Rania Mehanna

Raquel Gomes De Arvalho

Pinto

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Safeena Kherani

Roy Francisco Acosta

Valerín

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Sarah Morrison
Saraiza Abu Bakar
Scott Rickert
Scott Schoem
Seok Hyun Cho
Sergio Sarradell
Shamina Sara Moses
Sharon Ovnat Tamir

Shazia Peer Shifa Zulkifli Shirley Saavedra Rocabado

Shyan Vijayasekaran Silvia Angela Bentancor

Ramirez Silvia Ventura Sofia Stamataki Soham Roy Sok Yan Tay

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Soraya Garcia
Stella Rowley
Stephen Rodrigues
Steve Maturo
Steven Goudy
Suhaimi Yusuf
Sung Wan Kim

Sonia Ayari-Khalfallah

Suzina Sheikh Ab Hamid

Tagwa Abdalla Tal Marom Tania Maria Sih Teolinda Mendoza De

Morales Thaisa

Thomas Mancinelli
Thuy Nguyen Thi Thanh

Toma Avramov Udayan Shah Valeria Rees Veronica Rodriguez

Victor Abdullah

Victor Rachkov
Victoria Possamai
Victoria Tenías
Vincent Couloigner
Vinicius Ribas Fonseca
Vladan Subarevic
Wei-Chung Hsu
Wu Zebin
Yancy Acosta
Yin Tan Kuei
Yoo-Sam Chung
Yoon Se Lee

Zuleyma Hernandez Rholas

Рита

Youjin Li

Young Ho Kim