

Gastroenterology

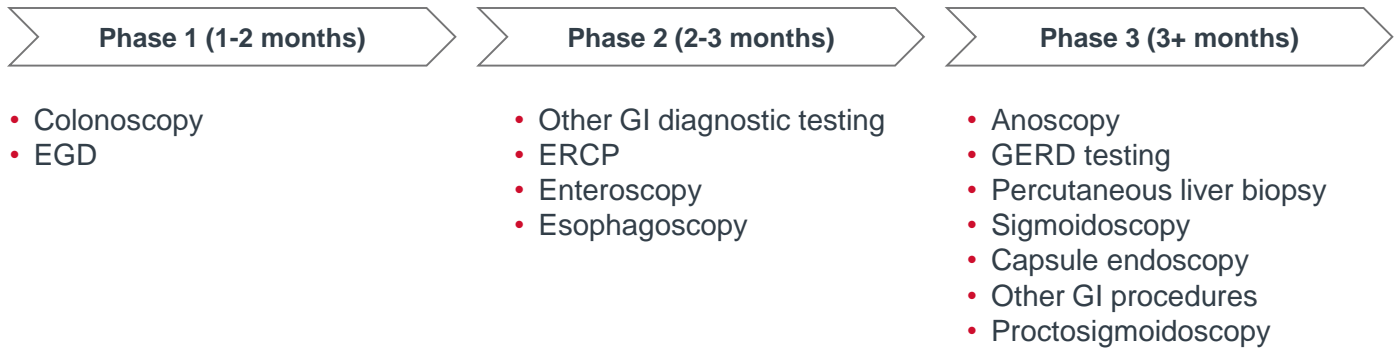
The following considerations can help Gastroenterology leaders as they ramp back up traditional services coming out of their Covid-19 curve and work through a backlog of cases caused by postponed procedures.

Top elective gastroenterology procedures by volumes^{1,2}

- Colonoscopy
- EGD
- Other GI diagnostic testing
- Other GI procedures
- Anoscopy
- Sigmoidoscopy
- Percutaneous liver biopsy
- GERD testing
- ERCP
- Enteroscopy

Short term considerations for restarting elective services

Phasing of elective subservice lines based on clinical urgency



Barriers to clearing backlog of cases

- PPE supply levels, and procedural room and physician availability may be limiting factors to clearing procedure backlogs
- More complex surgeries dependent on upstream screening services/referrals and ventilator availability³
- Restart date for screenings will lag behind diagnostic and therapeutic services, to the extent which they can be scheduled

Mid- to long-term demand impacts

- Patients may delay screenings and opt for at-home stool tests over the next few years
- Accelerated shift out of the hospital setting to ASCs and endoscopy centers
- Potential adoption of telehealth for medical management of chronic conditions
- Potential adoption of open access endoscopies
- Availability of upstream services like PCP referrals may limit return of volumes to pre-COVID levels

1. All services shown are estimated to have 50% or greater elective volumes. Any services not shown are ones considered non-elective because less than 50% of their volumes are estimated to be elective. The definition of elective used is on the following page.
 2. Services shown estimated to have over 100,000 annual volumes nationally.
 3. See General Surgery for more complex GI surgeries.

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Subservice line summary

Subservice Line	Estimated percent elective	Phasing restart by clinical urgency	Estimated drop off in future demand
Other GI diagnostic testing	80%	Phase 2	Medium
Anoscopy	80%	Phase 3	Medium
Capsule endoscopy	80%	Phase 3	Medium
GERD testing	80%	Phase 3	Medium
Other GI procedures	80%	Phase 3	Medium
Percutaneous liver biopsy	80%	Phase 3	Medium
Proctosigmoidoscopy	80%	Phase 3	Medium
Sigmoidoscopy	80%	Phase 3	Medium
Colonoscopy	70%	Phase 1	Medium
Esophagogastro-duodenoscopy (EGD)	70%	Phase 1	Medium
Endoscopic retrograde cholangiopancreatography (ERCP)	70%	Phase 2	Medium
Enteroscopy	70%	Phase 2	Medium
Esophagoscopy	70%	Phase 2	Medium



DEFINITIONS

- **Estimated percent elective:** estimated portion of each subservice line that is both scheduled in advance and may be delayed for a short period of time without significant worsening of the condition.
- **Phasing restart by clinical urgency:** recommended prioritization of restarting services based solely on clinical urgency or importance for identification of higher acuity services. Services in earlier phases are more urgent. Phase 1: immediate, Phase 2: 2-3 months, Phase 3: 3+ months
- **Estimated drop off in demand:** decrease in demand over the next 1-2 years due to lingering patient fear. Low: 5-15%, Medium: 16-30%, High: 30%+, None: 0%