

# Obstetrics and Gynecology

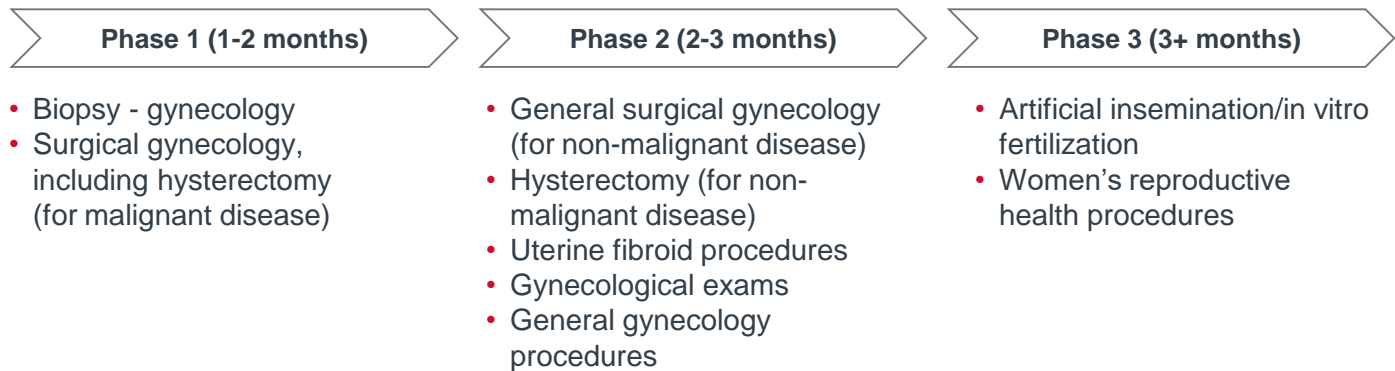
The following considerations can help OB-GYN leaders as they ramp back up traditional services coming out of their Covid-19 curve and work through a backlog of cases caused by postponed procedures.

## Top elective gynecology procedures by volumes<sup>1,2</sup>

- Gynecological exams
- Biopsy – gynecology
- General gynecology procedures
- Artificial insemination/in vitro fertilization
- Women’s reproductive health procedures
- General surgical gynecology
- Uterine fibroid procedures
- Hysterectomy

## Short term considerations for restarting elective services

*Phasing of elective subservice lines based on clinical urgency*



*Barriers to clearing backlog of cases*

- There is likely no backlog for deliveries.
- There is potential backlog for gynecology office visits and gynecologic surgeries.
- Limiting factors to clearing these backlogs will be physician availability and willingness to extend hours for office visits and upstream screenings/referrals for surgery.

## Mid- to long-term demand impacts

- Continued shift to virtual visits for gynecology and prenatal visits
- Accelerated shift to ASC for gynecologic surgeries
- Minor shift to out-of-hospital births due to fear of in-hospital infection and temporary in-hospital birthing attendant and visitor limitations

1. All services shown are estimated to have 50% or greater elective volumes. Any services not shown SSLs not listed 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. Procedures ordered from highest to lowest national volumes. Only procedures with greater than 100K volumes nationally are shown.

Source: Service Line Strategy Advisor research and analysis.

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## Subservice line summary

Subservice Line	Estimated percent elective	Phasing restart by clinical urgency	Estimated drop off in future demand
OP artificial insemination/in vitro fertilization	100%	Phase 3	Medium
OP gynecological exams	90%	Phase 2	Medium
OP hysterectomy <sup>1</sup>	80%	Phase 2	Medium
OP uterine fibroid procedures	80%	Phase 2	Medium
IP general surgical gynecology <sup>1</sup>	80%	Phase 2	Low
OP general gynecology procedures	80%	Phase 2	Medium
OP women's reproductive health procedures	80%	Phase 3	Medium
OP biopsy – gynecology	60%	Phase 1	Low



### 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%