

BAETS Prioritisation advice for Adult Endocrine Surgery during Covid-19 crisis

Priority level	1a	1b	2	3	4
Thyroid	Acute Airway Obstruction from Thyroid pathology		<p>Tumour or goitre causing mild or moderate stridor</p> <p>Undifferentiated /poorly differentiated thyroid cancer amenable to surgical treatment</p> <p>Medullary thyroid cancer</p> <p>Thyroid cancer with metastatic nodal disease</p> <p>Uncontrolled thyrotoxicosis where medical treatment or radio iodine not suitable</p> <p>Uncontrolled Graves' in Pregnancy</p> <p>Patients with sight threatening thyroid eye disease</p>	Other thyroid cancers (including diagnostic lobectomy)	Surgery for uncomplicated benign thyroid disease
Parathyroid			<p>Hyperparathyroidism associated with corrected calcium > 3.0 mmol/l who cannot be controlled with medical management</p> <p>Suspected parathyroid carcinoma.</p> <p>Repeated hospital admissions for medical management of hyperparathyroidism</p> <p>Pregnant women with significant hypercalcaemia (C.Ca> 2.85mmol/L) ideally in 2nd trimester</p> <p>Post Transplant hypercalcaemia with deteriorating renal function</p>	Patients with recurrent and symptomatic renal stones +- associated sepsis	Other parathyroid surgery
Adrenal			<p>Adrenal Cancer or Highly Suspicious Masses – includes malignant pheochromocytoma</p> <p>Indeterminate Masses > 6cm especially those that have been shown to be increasing in size or hot (and non-functional) on PT scan</p> <p>Adrenal pathology requiring urgent surgery for severe endocrine complications e.g. refractory Cushing's; Pheochromocytoma with heart failure</p>	<p>Indeterminate Masses > 4cm, < 6cm with adrenal androgen excess or cortisol hypersecretion</p> <p>Adrenal Metastases -Rescan at 3 months and re-prioritise if progressing</p>	Other adrenal surgery

Priority level 1a Emergency - operation needed within 24 hours to save life , **Priority level 1b** Urgent - operation needed with 72 hours

Based on: urgent / emergency surgery for life threatening conditions such as obstruction, bleeding and regional and / or localised infection permanent injury / clinical harm from progression of conditions such as spinal cord compression

Priority level 2 Surgery can be safely deferred for up to 4 weeks - elective surgery with the expectation of cure

Based on: urgency of symptoms / complications such as local compressive symptoms / biological priority (expected growth rate) of individual cancers

Priority level 3 Surgery that can be delayed for up to 3 months with no predicted negative outcome

Priority level 4 Surgery that can be delayed for more than 3 months with no predicted negative outcome

Disclaimer: This document is intended to help BAETS members when planning services during the Covid-19 pandemic. It will be subject to change and updating over time. It is not comprehensive, and members should take into account other healthcare resources when planning services. The legal responsibility for local decisions is through local governance structures and local healthcare organisations. No liability is accepted by BAETS, including the BAETS executive team, other contributors to this document, and those undertaking work on behalf of BAETS to distribute this document, for any errors or omissions in this document, or for any direct or indirect loss to third parties related to the advice given in the document.