RESULTS OF COOG SURVEY NUMBER 3:
MANAGEMENT OF OCULAR ONCOLOGY PATIENTS
DURING THE COVID-19 PANDEMIC
June 10, 2020

Below are the results of the third survey of the Collaborative Ocular Oncology Group (COOG) to assess ongoing practice patterns and prevailing circumstances at leading North American ocular oncology centers during the COVID-19 pandemic. Our survey is unlike others in that we are a working collaboration of experts with a wide range of practices, both academic and private, representing most of the leaders in ocular oncology from across North America. Some of our centers are located in cities recovering from recent surges, and all are preparing for a possible second surge as most regions start to open back up. We felt that circumstances have changed sufficiently since the second survey results were released on April 13, 2020 that it would be valuable to repeat the survey a third time.

In order to compare responses over time, this 3rd survey is very similar to the previous two.

In this third survey, there has now been a dramatic shift towards seeing new and returning ocular oncology patients promptly with few indicating that they are still delaying care. Many comment that they are back to “business as usual” with appropriate precautions, with a significant increase in the availability of personal protective equipment and SARS-CoV-2 testing.

We hope that this is of value to ocular oncology providers and patients around the world.

Thank you on behalf of the COOG Executive Committee,

J. William Harbour, MD
Professor, Vice Chairman, and Mark J. Daily Endowed Chair, Bascom Palmer Eye Institute
Associate Director for Basic Science, Sylvester Comprehensive Cancer Center
University of Miami Miller School of Medicine

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DETAILED SURVEY RESULTS

Retinoblastoma

How are you prioritizing the timing of initial EUA for patients with newly suspected unilateral or bilateral retinoblastoma?

Responses similar to previous surveys. Few are delaying care.

How are you prioritizing the timing of next EUA in patients with retinoblastoma under active treatment defined as last having had eye-sparing ...or systemic chemotherapy, laser, or cryotherapy)?

No longer delaying care.
Most are no longer delaying care.

Uveal Melanoma

How are you prioritizing initial clinic visits in patients with newly suspected or diagnosed uveal melanoma?

Fewer are delaying care.
How are you prioritizing return visits for patients with uveal melanoma undergoing recent radiotherapy within the past 3 months?

Fewer are delaying care.

How are you prioritizing return visits for patients with uveal melanoma treated greater than 3 months ago?

Fewer are delaying care.
Fewer are delaying care.

How are you managing patients receiving regular intravitreal anti-VEGF injections?

Fewer are delaying care.

How are you prioritizing the timing of enucleation in patients diagnosed with uveal melanoma in whom enucleation is required due to tumor size or extent?

Fewer are delaying care.
High Risk Choroidal Nevus (thickness >2 mm, subretinal fluid, orange pigment)

How are you prioritizing initial evaluation of patients with suspected or newly diagnosed high risk choroidal nevus?

Fewer are delaying care.

How are you prioritizing follow-up for patients with established diagnosis of high risk choroidal nevus?

Fewer are delaying care.
Intraocular Metastasis

How are you prioritizing initial evaluation of patients with newly diagnosed or suspected intraocular metastasis?

- None
- Age > 70
- Compromised
- Symptoms
- Bilateral

How are you prioritizing follow-up visits for patients with previously diagnosed and treated intraocular metastasis?

- None
- Age > 70
- Compromised
- Symptoms
- Bilateral

Fewer are delaying care.
Vitreoretinal Lymphoma

How are you prioritizing initial evaluation of patients with newly suspected or diagnosed vitreoretinal lymphoma?

![Bar chart showing prioritization of initial evaluation](chart1)

**Fewer are delaying care.**

How are you prioritizing follow-up management of patients with intravitreal lymphoma under active treatment for ocular involvement (e.g., intravitreal chemotherapy)?

![Bar chart showing prioritization of follow-up management](chart2)

**Fewer are delaying care.**
Fewer are delaying care.
Benign Intraocular Tumors

How are you prioritizing initial evaluation of patients with newly suspected or diagnosed benign intraocular tumors?

Fewer are delaying care.

How are you prioritizing follow-up visits for patients with treated/stable benign intraocular tumors?

Fewer are delaying care.
Conjunctival Melanoma

How are you prioritizing initial evaluation of patients with newly suspected or diagnosed conjunctival melanoma?

Fewer are delaying care.

How are you prioritizing follow-up visits for patients with conjunctival melanoma undergoing recent or active treatment?

Fewer are delaying care.
Fewer are delaying care.
Conjunctival Squamous Cell Carcinoma/Ocular Surface Squamous Neoplasia (OSSN)

How are you prioritizing initial evaluation for patients with newly diagnosed conjunctival OSSN?

- Manage as usual
- Delay 1-4 wks
- Telemedicine

Fewer are delaying care.

How are you prioritizing follow-up visits for patients with conjunctival OSSN in active treatment?

- Manage as usual
- Delay 1-4 wks
- Delay >4 wks
- Telemedicine

Fewer are delaying care.
Fewer are delaying care.
Conjunctival Lymphoma

Fewer are delaying care.

How are you prioritizing initial evaluation of patients with newly suspected or diagnosed conjunctival lymphoma?

<table>
<thead>
<tr>
<th></th>
<th>None</th>
<th>Age &gt;70</th>
<th>Compromised</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manage as usual</td>
<td>15</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>Delay 1-4 weeks</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Telemedicine</td>
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</table>

Fewer are delaying care.

How are you prioritizing follow-up visits for patients with treated and stable conjunctival lymphoma?

<table>
<thead>
<tr>
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<th>Age &gt;70</th>
<th>Compromised</th>
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</thead>
<tbody>
<tr>
<td>Manage as usual</td>
<td>10</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Delay 4-8 weeks</td>
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<tr>
<td>Systemic imaging</td>
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<td>1</td>
</tr>
<tr>
<td>Telemedicine</td>
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</tbody>
</table>

Fewer are delaying care.
General

What plans do you have in place for the care of retinoblastoma patients if you are unable to work due to contracting COVID-19? (choose one)

20 responses

March 23, 2020

- I have no plan: 45%
- I have a partner who can manage these patients: 40%
- Refer patients to another center: 10%
- Telemedicine as health allows: 11.8%
- Other: 11.8%

April 13, 2020

- I have no plan: 47.1%
- I have a partner who can manage these patients: 29.4%
- Refer patients to another center: 11.8%
- Telemedicine encounters from home as health allows: 11.8%
- Other: 11.8%

June 1, 2020

- I have no plan: 33.3%
- I have a partner who can manage these patients: 13.3%
- Refer patients to another center: 13.3%
- Telemedicine as health allows: 13.3%
- Other: 40%
What plan do you have in place for the care of adult ocular oncology patients if you are unable to work due to contracting COVID-19? (choose one)

March 23, 2020
- I have no plan: 59.1%
- I have a partner who can manage these patients: 22.7%
- Refer patients to another center: 13.6%
- Telemedicine as health allows: 1.8%
- Other: 1.8%

April 13, 2020
- I have no plan: 43.5%
- I have a partner who can manage these patients: 39.1%
- Refer patients to another center: 8.7%
- Telemedicine encounters from home as health allows: 1.8%
- Other: 1.8%

June 1, 2020
- I have no plan: 55.6%
- I have a partner who can manage these patients: 27.8%
- Refer patients to another center: 11.1%
- Telemedicine as health allows: 1.8%
- Other: 1.8%
What are your current capabilities to perform telemedicine?

23 responses

March 23, 2020
- None: 43.5%
- Phone calls only: 56.5%

April 13, 2020
- None: 50%
- Phone calls only: 36.4%
- Fully equipped video-based telemedicine: 9.1%

June 1, 2020
- None: 61.1%
- Phone calls only: 22.2%
- Fully equipped video-based telemedicine: 11.1%
- Other: 5.6%
What personal protective equipment are you wearing during SURGERY UNDER GENERAL ANESTHESIA? (check all that apply)

22 responses

April 13, 2020

- None: 0 (0%)
- Surgical mask: 18 (81.8%)
- N95 mask: 12 (54.5%)
- Gloves: 21 (95.5%)
- Face shield: 4 (18.2%)

June 1, 2020

- None: 0 (0%)
- Surgical mask: 15 (83.3%)
- N95 mask: 7 (38.9%)
- Gloves: 15 (83.3%)
- Face shield: 2 (11.1%)
What personal protective equipment are you wearing during EXAMINATION UNDER GENERAL ANESTHESIA? (check all that apply)

19 responses

April 13, 2020

- None: 0 (0%)
- Surgical mask: 15 (78.9%)
- N95 mask: 10 (52.6%)
- Gloves: 18 (94.7%)
- Face shield: 3 (15.8%)

June 1, 2020

- None: 0 (0%)
- Surgical mask: 12 (70.6%)
- N95 mask: 7 (41.2%)
- Gloves: 13 (76.5%)
- Face shield: 1 (5.9%)
What personal protective equipment are you wearing during RETROBULBAR BLOCK? (check all that apply)
22 responses

April 13, 2020

- None: 0 (0%)
- Surgical mask: 17 (77.3%)
- N95 mask: 12 (54.5%)
- Gloves: 18 (81.8%)
- Face shield: 4 (18.2%)

June 1, 2020

- None: 0 (0%)
- Surgical mask: 15 (83.3%)
- N95 mask: 8 (44.4%)
- Gloves: 14 (77.8%)
- Face shield: 1 (5.6%)
- I do not perform my own peri/retrobulbar: 0 (0%)
What personal protective equipment are you wearing during SURGERY UNDER MAC? (check all that apply)
21 responses

April 13, 2020

- None: 0 (0%)
- Surgical mask: 17 (81%)
- N95 mask: 11 (52.4%)
- Gloves: 21 (100%)
- Face shield: 3 (14.3%)

June 1, 2020

- None: 0 (0%)
- Surgical mask: 15 (83.3%)
- N95 mask: 7 (38.9%)
- Gloves: 16 (88.9%)
- Face shield: 1 (5.6%)
Has your institution experienced shortages in personal protective equipment that you feel have increased your risk of infection?

22 responses

April 13, 2020

- No: 81.8%
- Yes: 18.2%

June 1, 2020

- No: 88.2%
- Yes: 11.8%
How is your institution testing OPHTHALMOLOGY PATIENTS for COVID-19? (check all that apply)
22 responses

**April 13, 2020**
- None: 1 (4.5%)
- Screening for symptoms & exposure: 20 (90.9%)
- All surgical patients: 9 (40.9%)
- Only high risk surgical patients: 5 (22.7%)
- All clinic patients: 2 (9.1%)
- Only high risk clinic patients: 4 (18.2%)
- All patients: 3 (13.6%)

**June 1, 2020**
- None: 0 (0%)
- Screening for symptoms & exposure: 15 (83.3%)
- All surgical patients: 13 (72.2%)
- Only high risk surgical patients: 3 (16.7%)
- All clinic patients: 0 (0%)
- Only high risk clinic patients: 4 (22.2%)
- All patients: 0 (0%)
How is your institution testing OPHTHALMOLOGY HEALTH CARE PROVIDERS for COVID-19? (check all that apply)

22 responses

April 13, 2020

- None: 3 (13.6%)
- Those involved in surgery: 0 (0%)
- Those with possible exposure/symptoms: 19 (86.4%)
- All with direct patient contact: 0 (0%)

June 1, 2020

- None: 2 (11.1%)
- Those involved in surgery: 1 (5.6%)
- Those with possible exposure/symptoms: 14 (77.8%)
- All with direct patient contact: 4 (22.2%)
What COVID-19 tests does your institution currently have? (choose one)
21 responses

April 13, 2020

- None: 57.1%
- PCR test: 28.6%
- Serologic antibody test: 9.5%
- Both PCR and serology tests: 5.8%

June 1, 2020

- None: 55.6%
- PCR test: 44.4%
Have you been tested for COVID-19?
22 responses

April 13, 2020
- No: 90.9%
- Yes: 9.1%

June 1, 2020
- No: 66.7%
- Yes: 33.3%
Are you being asked by your institution to re-deploy and perform duties outside of your normal scope of practice? (choose one)

21 responses

**April 13, 2020**

- No: 76.2%
- Yes, but have not been re-deployed: 23.8%

**June 1, 2020**

- No: 88.9%
- Yes, but have not been re-deployed: 11.1%
Has your institution or state limited or prohibited you from accepting or treating new patients from outside your region/state?

22 responses

April 13, 2020

- No: 77.3%
- Yes: 22.7%

June 1, 2020

- No: 0%
- Yes: 100%
How are you handling ocular oncology patients with urgent need for ophthalmic procedure or surgery who test positive for the COVID19 PCR test?

18 responses

- Proceed with urgent procedure/surgery at usual facility with enhanced precautions (38.9%)
- Proceed with urgent procedure/surgery at tertiary facility with mitigating capabilities such as negative pressure... (27.8%)
- Postpone procedure/surgery until patient tests negative (27.8%)
- Would go to our main hospital ORs with neg pressure rooms if care is urgent....