Dear colleagues,

Given the evolving COVID-19 situation, we are taking steps to ensure our clinics continue to have capacity to see our current patients. As a result, our medical leadership is recommending that we temporarily stop scheduling new patients for second opinions if they are:

- Currently under the care of another provider, and
- Already under treatment.

We made this decision in an effort to conserve our resources for the treatment of our current patients. (Please note this does not apply to our transplant and immunotherapy clinics, who have developed other processes that are appropriate for their teams.)

As an alternative, we would offer patients the option of a physician-to-physician phone consult to provide the second opinion (see below for details).

**Process for new patients who are referred for a second opinion but currently receiving treatment elsewhere:**

- If a patient is referred by a physician:
  - Intake will the referring physician know that we’ll be offering physician to physician consults, and connect the SCCA physician and referring physician for consult directly or through Medcon (we will work with Clinical Directors to finalize workflow with each group).

- If a patient is self-referred:
  - Intake would inform the patient we are not currently taking new appointment for patients who are already under the care of another provider. We would offer them the opportunity to connect with their referring provider about a physician to physician consult, or contact us in a few weeks.

- If a patient is already scheduled, Intake would not proactively reschedule their appointment.

**There would be no changes to the below groups:**

- New patients who aren’t under treatment at another facility would be scheduled as they are today.

- New patients who are already scheduled would keep their appointments unless a provider looks at their template and determines that patient should be deferred due to clinical judgement. In this case, provider would need to have that discussion directly with the patient. If the decision is made to reschedule the patient, Intake would do so.

We will maintain this approach until March 27 and reassess at that point, or sooner if needed. Please reach out if you have any questions. Thank you for your consideration and flexibility during this time.