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Commentary: Coronavirus disease 2019 (COVID-19): Art imitates life—save the population

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*“History’s so strong”*¹

In this issue of *Open*, Nguyen and colleagues² discuss the effect that the first wave of the coronavirus disease 2019 (COVID-19) pandemic had on their hospital and their thoracic surgery service. After a decline in thoracic surgical cases during the initial surge, surgical volumes returned to greater than baseline in the second half of their post-COVID time period. They were able to perform oncologic operations safely and protected their patients from COVID infection; within 14 days of discharge after surgery, zero patients reported COVID symptoms.

*“I put my cards upon the table”*¹

They were able to prioritize urgent diseases, and once reopening was a reality, they were able to use predictive models to help adapt and pivot during the process. The COVID-19 pandemic has changed many things about our society and has changed the way we practice medicine. In the public health realm, population health refers to the health status and healthy outcomes within a group of people rather than considering the health of one person at a time.

*“Eyes wide with revelation”*¹

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CENTRAL MESSAGE

Implementing population health strategies allows for safe delivery of thoracic surgery during the pandemic.

The University of Miami Health System implemented predictive models to “estimate COVID-19 cases in upcoming weeks” and to ensure safe reopening. Using adaptive alignment of resources, segregation of COVID-19 cases, stringent preventive measures and directives from state and county public health departments, they put the group ahead of the individuals.²

Similarly, Romani and colleagues³ used population health strategies to “support hospital and intensive care unit resiliency during the COVID-19 pandemic.” Statistical models were developed to assess intensive care unit use versus available capacity. Romani and colleagues³ discuss surge planning, patient monitoring dashboards, use of telehealth, as well as remote patient monitoring, which aided the health system while optimizing workforce and health-care worker safety.

Dynamic adaptation to an uncertain pandemic allowed health care systems to adjust, resources to be allocated, and ultimate recovery of necessary surgical services to safely provide surgical care for those in need. Deep-dive granular evaluation of the processes that were fundamental to the safe reopening of surgical services during the pandemic will provide the playbook for all systems and service to provide optimal care when we navigate the next global healthcare crisis. Share the playbook and

*“Stay all night, we (will) save the population”*¹

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