	Examples of Services for Resumption		
Settings/ Specialty	Column A	Column B	
	For Resumption from 19 May 2020	For Resumption after end of Circuit Breaker period (from 2 Jun 2020)	
	Examples of services (non-exhaustive) that cannot be further deferred for >2 weeks subject to available capacity (manpower/ drugs/ beds), or where continued suspension will lead to adverse outcomes	Examples of services (non-exhaustive) that can be considered for resumption in Phase One	
Primary and preventive care	<ul> <li>In addition to continuing essential services (Annex A):</li> <li>Recommended adult vaccinations (seasonal influenza and pneumococcal vaccination)</li> <li>New referrals for services that cannot be delayed e.g. Child Development, urgent specialist referrals</li> <li>Higher need allied health professional (AHP) services and ancillary services (e.g. diabetic eye/foot screening)</li> </ul>	<ul> <li>As in Column A</li> <li>Other recommended adult vaccinations under the National Adult Immunisation Schedule</li> <li>Cancer screening (high risk patients)/ surveillance services, including scopes</li> <li>Chronic appointments that were deferred by &gt; 3 months</li> <li>AHP and ancillary services supporting chronic disease management</li> <li>Pre-enlistment screening</li> </ul>	
Community services	As per continuing essential services (Annex A)	Home/ physical visits for existing patients, and critical and essential new referrals for services delivered at home settings	
Dental <sup>1</sup>	As per continuing essential services (Annex A)	Ongoing dental procedures including scaling and polishing, fillings, crowns, dentures and orthodontic treatment with appropriate precautions	
Dermatology	As per continuing essential services (Annex A)	Skin cancer surveillance     Treatment for	

<sup>&</sup>lt;sup>1</sup> Dentists should ensure 15 min ventilation of treatment room between patients and should operate on only one dental chair (i.e. each dentist should only operate on one dental chair, regardless of the number of chairs in the dental clinic) for all the above levels.

Settings/ Specialty	Examples of Services for Resumption		
	Column A	Column B	
	For Resumption from 19 May 2020	For Resumption after end of Circuit Breaker period (from 2 Jun 2020)	
	Examples of services (non-exhaustive) that cannot be further deferred for >2 weeks subject to available capacity (manpower/ drugs/ beds), or where continued suspension will lead to adverse outcomes	Examples of services (non-exhaustive) that can be considered for resumption in Phase One	
ENT	Treatment for paediatric time-sensitive conditions e.g. hearing restoration (implants)	As in Column A     Treatment for chronic infections e.g. chronic sinusitis/ otitis media	
General Medicine and other medical specialties	In addition to continuing essential services (Annex A):  Existing patients who require semi-urgent follow-up but whose appointments have been deferred by more than 3 months  In addition to continuing essential services (Annex A):  Existing patients who require semi-urgent follow-up but whose appointments have been deferred by more than 3 months	<ul> <li>As in Column A</li> <li>Resume follow-up for existing patients with TCU of 4-6 months, and who have not been reviewed for 6 months or more; accept new referrals for semi-urgent conditions</li> <li>Treatment for symptomatic conditions to reduce risk of complications or long term sequalae</li> </ul>	
General Surgery and other surgical specialties	As per continuing essential services (Annex A)	Resume procedures for patients whose conditions cannot be deferred for more than 2-4 weeks, including but not limited to: Symptomatic hernias/ cholecystectomies/ venous diseases Perianal procedures Stoma closures Elective organ transplantation counselling Abscesses Treatment for symptomatic conditions (e.g. skin, joints, stable renal stones) requiring procedures All IVF procedures	
Neurosurgery	As per continuing essential services (Annex A)	Treatments for:  Spinal conditions causing neurological deficit (e.g. cervical myelopathy, radiculopathy) or significant pain  Benign tumors causing symptoms affecting quality of life (vision etc)	

	Examples of Services for Resumption		
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	Examples of services (non-exhaustive) that cannot be further deferred for >2 weeks subject to available capacity (manpower/ drugs/ beds), or where continued suspension will lead to adverse outcomes	Examples of services (non-exhaustive) that can be considered for resumption in Phase One	
		Stable unruptured intracranial aneurysms which are large or enlarging	
Ophthalmology	In addition to continuing essential services (Annex A):  Treatment for  Proliferative diabetic retinopathy  Acute glaucoma  Orbital inflammatory disorders e.g. thyroid eye  Childhood refractive errors (amblyopia)  Cornea disorder at risk of ectasia  Vitreous haemorrhage  Cornea grafts for subacute conditions	<ul> <li>As in Column A</li> <li>Treatment for visually significant or advanced cataracts</li> <li>Advanced glaucoma procedures</li> <li>Treatment for symptomatic ectropion/ entropion</li> <li>Treatment for chronic dacryocystitis</li> <li>Macula surgery</li> <li>Surgery to protect vision in patients who are dependent on a single eye to see</li> </ul>	
Orthopaedics	<ul> <li>In addition to continuing essential services (Annex A):</li> <li>Spine surgery with neurological deficit</li> <li>Treatment for conditions not responsive to medications/injections, or unstable joints where procedures should not be delayed further</li> </ul>	<ul> <li>As in Column A</li> <li>Management of sports medicine related conditions</li> <li>Higher need joint replacements</li> <li>Nerve entrapment decompression affecting function e.g. carpal tunnel syndrome</li> <li>Hand surgery</li> </ul>	
Plastic Surgery	As per continuing essential services (Annex A)	<ul> <li>Reconstructive surgery post-surgical resection/trauma (i.e. facial fractures)</li> <li>Corrective surgery in symptomatic patients (i.e. eyelid weighting in facial nerve palsy)</li> <li>Ventral hernia repairs</li> <li>Treatment for conditions which will worsen significantly without intervention, with risk of potential long-term sequelae, such as</li> </ul>	

	Examples of Services for Resumption		
Settings/ Specialty	Column A	Column B	
	For Resumption from 19 May 2020	For Resumption after end of Circuit Breaker period (from 2 Jun 2020)	
	Examples of services (non-exhaustive) that cannot be further deferred for >2 weeks subject to available capacity (manpower/ drugs/ beds), or where continued suspension will lead to adverse outcomes	Examples of services (non-exhaustive) that can be considered for resumption in Phase One	
		severe acne vulgaris where initial medical treatment was unsuccessful	
Psychiatry	As per continuing essential services (Annex A)	Services for schizophrenia, major depression, anxiety disorders, obsessive compulsive disorder or dementia affecting quality of life	
Renal	In addition to continuing essential services (Annex A):     Insertion of catheters/ fistulas for peritoneal dialysis and haemodialysis patients	<ul> <li>As in Column A</li> <li>All fistuloplasty for arteriovenous fistula or graft malfunction</li> <li>Creation of arteriovenous fistula/ graft for those already on dialysis/ needing dialysis immediately</li> <li>Home visits for peritoneal dialysis</li> </ul>	
TCM and Traditional and Complementary Services	As per continuing essential services (Annex A)	TCM needle acupuncture for all conditions     Ayurvedic, chiropractic, osteopathic and other forms of Traditional and Complementary Services for management of medical conditions and relief of symptoms, with appropriate precautions	