

The New Normal for Orthopaedic Surgeons

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As things stand now, India is in third place in the world with more than 25 lakh cases of coronavirus infection with more than 50,000 deaths [1]. The good news is that we have a lower mortality rate compared to many other countries with respect to our population. This itself encourages us to come out of the shackles of lockdown to restart our lives with all the standard precautions and guidelines as prescribed by the Government and health authorities.

The role of Orthopaedic Surgeons in this situation has changed from speciality services to a front line worker. Injuries due to trauma had not stopped even in the lockdown period and Orthopaedic Surgeons had continued to render their services. With the increasing cases, they are now called to be part of the front line care, being deployed for COVID duties along with their peers in ICUs and COVID hospitals. This will be the new norm for many months to come.

The Indian scenario of health care services comprising medical institutions, corporate hospitals, smaller private setups and individual practice has thrown many challenges in health care delivery for patients with COVID infections and associated Orthopaedic pathologies. Each health care service has to create their protocols based on the infrastructure, man-power and expertise available. At the same time, restarting elective surgeries also is challenging for these establishments in their unique ways [2]. The requirements of COVID testing before surgery, the post-operative care and follow up of these patients with options for teleconsultations will be a part of a new practice system which have to be incorporated in our routine workflow. The guidelines are changing constantly as newer epidemiological, public health and health care delivery challenges emerge.

On the academic front, virtual conferences and Webinars are being undertaken with huge enthusiasm and we have to wait and see how much of these practices will hold good in the future. Postgraduates and Undergraduates teaching has entered a new paradigm of online classes but may not completely compensate for bedside teaching.

Rather than accepting the present situation as new normal and not processing the ravage of coronavirus, we need to look at the present situation as a new paradigm and take everyone along this process to emerge with minimal scars once this is pandemic is over.

The present volume of Journal comes in these tough times with dedicated teamwork at the Editorial office. We thank the Karnataka Orthopaedic Association office bearers & the KOA members for their constant support.

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