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Adaptations during the COVID-19 Outbreak in Radiotherapy Practice

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Dear Editor,

We would like to share ideas on the publication "Surveying the Adaptations during the COVID-19 Outbreak in Turkish Radiotherapy Practice."[1] Sezen et al. [1] concluded that "Our survey revealed the importance of early precautions, communication by other radiation, and the importance of using web-based applications for multidisciplinary tumor boards." We agree that adaption is usually necessary in clinical practice during COVID-19 pandemic. Based on the present report, different adaptations are observed and it is interesting to further probe the underlying reasons for different correspondences. In addition, not all responders mentioned for distancing concept. This might imply that there is still a part of practitioner that might still work at risk due to no distancing. In a previous report from an Asian country, the knowledge of practitioner to COVID-19 might not good and it might result in an inappropriate adaptation to the situation.[2] If there are local standard guidelines, a comparison to the guidelines might give interesting data. In a recent report, the non-concordant practice and adaptation according to the guidelines are not uncommon problems.[3] In addition, the local policies against COVID-19 are also an important factor determining adaptation. In a poor setting, there might be a poor protection to practitioners and the local policies might not support any adaptation.[4]

References

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