**Table 1:** Procedures developed at our Department for head and neck cancer patients.

|  |  |
| --- | --- |
| First outpatient  evaluation | -As all patients were considered as potential COVID-19 asymptomatic carriers, Medical Doctors were equipped accordingly\*  -Clinical history on COVID-19-related symptoms was collected  -Any strict contact with COVID-19-positive cases was recorded  -Any swallowing and/or respiratory defect which could exacerbate cough and mucous secretion were minimized  -Any swallowing and/or respiratory deficiency which could increase the risk of ab-ingestis pneumonia was considered  - Medical beds and room equipment were cleaned with alcohol-based disinfectants after each consultation |
| Simulation CT | -All simulation CT were scheduled on a dedicated day  -As all patients were considered as potential COVID-19 asymptomatic carriers, Medical Doctors and Radiation Therapists were equipped accordingly\*  -Thermoplastic masks and mouthpiece assisted bites were cleaned with alcohol-based disinfectants after each use  -CT couches and set-up devices were cleaned with alcohol-based disinfectants following every treatment |
| RT treatment session | -All treatment sessions of HNC patients were scheduled in the morning  -As all patients were considered as potential COVID-19 asymptomatic carriers, Radiation Therapists were equipped accordingly\*  -Treatment couches and set-up devices were cleaned with alcohol-based disinfectants after each treatment session  -Thermoplastic masks and bite were sanitized with alcohol-based disinfectants after each treatment session |
| Clinical evaluation during RT | -Patients received a complete oral cavity and oropharyngeal examination at least once per week to assess acute RT-related toxicities  -A dedicated consultation room was assigned to HNC patients, and sanitized at the end of each day  -As all patients were considered as potential COVID-19 asymptomatic carriers, Medical Doctors and Radiation Therapists were equipped accordingly\*  -Medical beds and room equipment were cleaned with alcohol-based disinfectants after each consultation |
| Nursing care | -As all patients were considered as potential COVID-19 asymptomatic carriers, Nurses and Radiation Therapists were equipped accordingly\*  -Skin medication requiring the removal of patients’ surgical mask were performed only if strictly necessary  -Patients were instructed to perform skin medication by themselves in order to minimize the risk of viral dissemination in the Infirmary  -In case of medication requiring the removal of the surgical mask, access to the Infirmary was not allowed to any other patient  -Medical beds and room equipment were cleaned with alcohol-based disinfectants after each procedure requiring the mask removal |
| Follow-up | -Telehealth surveillance was organized by phone to verify clinical status and results of prescribed radiological examinations |

**Abbreviations:** CT= Computed Tomography, HNC= Head and Neck Cancer, RT= Radiotherapy

\*Personal protection equipment for health professionals managing HNC patients were: filtering facepieces- FFP2/KN95 and FFP3 masks, disposable gloves, disposable gowns, medical caps, goggles or a face shield, aprons.