During this COVID-19 pandemic we must face to the increasing emergency presentation of colorectal cancer patients, especially in the referral hospital. Many studies recommended that emergency laparotomy was safe with universal precaution during this pandemic and increasing morbidity-mortality rate. For emergency cases, the gold standard RT-PCR for COVID-19 was not feasible in this scenario, we must depend on rapid test for the screening. The two most common presentation of emergency colorectal cancer patients is large bowel obstruction and intestinal perforation. There were lack of data which already described about the impact of this pandemic on the short term outcome. Study reported the mortality and complication rate of emergency operation are 20-40% respectively.

This is a prospective study in academic hospital (Moewardi General Hospital, Indonesia) during the COVID-19 pandemic as one of the referral hospital. The study started from March until June 2020, all patients with emergency laparotomy colorectal cancer patients will be included, the patients whose could not tolerated for emergency operation or found death on table (DOT) will be excluded. The main outcome for this study are post operative morbidity and 30 days mortality.

During this 3 months period, 35 patients were included on this study, 29 patients had large bowel obstruction due to colorectal cancer and the rest had diffuse peritonitis from intestinal perforation. 15 patients had sepsis condition according to current sepsis guidelines. 1 patient on intestinal perforation has been reported with positive rapid test result. Post operative pneumonia has been found in 3 patients with intestinal perforation and could not survived during this study, the others of 2 patients had prolonged sepsis. Primary resection can be done on 30 cases with sigmoid colon was the most common site.

Emergency operation during this pandemic for colorectal cancer patients did not increasing the 30 days mortality but has an impact on post operative pneumonia especially on intestinal perforation.

**Keywords:** COVID-19 pandemic, emergency colorectal cancer, 30 days mortality