### COVID-19 Resources

**Summary of recommendations of the COVID-19 guidelines therapeutic update**

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<th>Critical COVID-19</th>
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<td><strong>DO:</strong> Pharmacologic VTE prophylaxis</td>
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<td><strong>CONSIDER:</strong> Dexamethasone over other corticosteroids</td>
<td><strong>CONSIDER avoiding:</strong> Remdesivir</td>
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<td><strong>CONSIDER avoiding:</strong> Remdesivir</td>
<td><strong>CONSIDER avoiding:</strong> Convalescent plasma outside of clinical trials</td>
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<td><strong>CONSIDER avoiding:</strong> Full anticoagulation in patients without VTE outside of clinical trials</td>
<td><strong>CONSIDER avoiding:</strong> Convalescent plasma outside of clinical trials</td>
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<td><strong>DON’T DO:</strong> Hydroxychloroquine</td>
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COVID-19 with hypoxia

**Indication for endotracheal intubation?**

- **Yes**: Do it: Monitor closely short intervals
- **No**: Consider: a trial of NIPPV

**Tolerating supplemental oxygen?**

- **Yes**: Do it: Target SpO2 92% to 96%
- **No**: Consider: HFNC

- Not tolerating HFNC or HFNC is not available
  - **Yes**: Indication for endotracheal intubation?
  - **No**: Do it: Minimize staff in the room

**CONSIDER: HFNC**

- **DO IT:** Monitor closely for worsening
- **DO NOT:** Delay intubation if worsening

Note: N-95/FFP-2 are facial masks

HFNC = high-flow nasal cannula
NIPPV = noninvasive positive-pressure ventilation
PPE = personal protective equipment
SpO2 = peripheral capillary oxygen saturation

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COVID-19 Resources

Summary of recommendations on the management of patients with COVID-19 and ARDS

**COVID-19 with mild ARDS**
- **DO:** Vt 4-8 ml/kg and Pplat < 30 cm H₂O
- **DO:** Investigate for bacterial infection
- **DO:** Target SpO₂ 92% - 96%
- **CONSIDER:** Conservative fluid strategy
- **CONSIDER:** Empiric antibiotics

**COVID-19 with mod to severe ARDS**
- **CONSIDER:** Higher PEEP
  - PEEP should be tailored to individual response
- **CONSIDER:** NMBA boluses to facilitate ventilation targets
- **CONSIDER:** If PEEP responsive
  - Traditional recruitment maneuvers
- **CONSIDER:** Prone ventilation 12 - 16 h
- **CONSIDER:** If proning, high Pplat, asynchrony
  - NMBA infusion for 24 h

**Rescue/adjunctive therapy**
- **CONSIDER:** If proning, high Pplat, asynchrony
  - NMBA infusion for 24 h
- **CONSIDER:** Prone ventilation 12 - 16 h
- **CONSIDER:** A trial of inhaled nitric oxide
  - STOP if no quick response
- **CONSIDER:** V-V ECMO or referral to ECMO center
  - follow local criteria for ECMO

**DON'T DO:** Staircase recruitment maneuvers

**Mod =** moderate  
**ARDS =** adult respiratory distress syndrome  
**Pplat =** plateau pressure  
**SpO₂ =** peripheral capillary oxygen saturation  
**PEEP =** positive end-expiratory pressure  
**NMBA =** neuromuscular blocking agents  
**ECMO =** extracorporeal membrane oxygenation

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