**PATIENT DATA**

Weight: null Kg

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**REFERENCE**

**Adult Coronavirus Disease 2019 Guidance Document**

***No drugs are FDA-approved for the treatment of Coronavirus Disease 2019 (COVID-19). The therapeutic agents included below are supported by limited, poor-quality data. Their clinical impact and ideal place in therapy in terms of severity and timing are still unknown. At this time, use of these medications for COVID-19 should be restricted to Infectious Diseases after careful consideration of potential risks, benefits, and interactions. Supplies of these drugs are limited. Reserve use for confirmed cases (positive SARS-CoV-2 PCR) or cases with very high clinical suspicion. These recommendations do NOT necessarily apply to pregnant patients.***

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**SEVERITY OF ILLNESS**

- **Mild Illness**
  - (No hypoxia or radiographic evidence of pneumonia)

- **Moderate Illness - No Risk Factors**
  - (Need for supplemental O2 or presence of radiographic evidence of pneumonia, but not critically ill) + No Risk Factors (age > 60 years; d-dimer > 1000 ng/mL; or comorbidities such as immunocompromised state, underlying structural lung disease, cardiac disease, hypertension, and diabetes)

- **Moderate Illness at least 1 risk factor**
  - (Need for supplemental O2 or presence of radiographic evidence of pneumonia, but not critically ill) + At Least One Risk Factor (age > 60 years; d-dimer > 1000 ng/mL; or comorbidities such as immunocompromised state, underlying structural lung disease, cardiac disease, hypertension, and diabetes)

- **Critical Illness**
  - ICU status, intubated, >50% lung involvement

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**CONSULTS**

- Physician Consults
  - Infectious Disease Consult for Coronavirus is required and will be submitted

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**MEDICATIONS**

**Mild**

- Provide Supportive care

**Supportive Care**

- Acetaminophen 650 mg PO q6h PRN fever and tolerating PO meds
- Acetaminophen oral solution 650 mg NG q6H PRN fever and tolerating PO meds

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**MEDICATIONS**

**Moderate - No Risk factors**

- Provide Supportive care

**Supportive Care**

- Acetaminophen 650 mg PO q6h PRN fever and tolerating PO meds
- Acetaminophen oral solution 650 mg NG q6H PRN fever and tolerating PO meds
### MEDICATIONS

#### Moderate with Risk factors

**Hydroxychloroquine**
- Hydroxychloroquine 400 mg PO BID with meals x 1 day, followed by 200 mg PO BID with meals x 4 days
- Hydroxychloroquine oral suspension 400 mg NG BID x 1 day, followed by 200 mg NG BID x 4 days

**Azithromycin**
- Azithromycin PO tabs 500 mg PO x 1, followed by 250 mg PO daily x 4 days
- Azithromycin IV 500 mg IV daily x 3 days

**ARDS patients only**
- Methylprednisolone 0.5 mg/kg/dose [ ] IV q12h x 3 days

#### Supportive Care
- Acetaminophen 650 mg PO q6h PRN fever and tolerating PO meds
- Acetaminophen oral solution 650 mg NG q6H PRN fever and tolerating PO meds

### MEDICATIONS

#### Critical

**Hydroxychloroquine**
- Hydroxychloroquine 400 mg NG BID x 1 day, followed by 200 mg NG BID x 4 days

**Tocilizumab**
*Use tocilizumab cautiously. It should be considered only for confirmed SARS-CoV-2 infection and ARDS. Contraindications include active bacterial, fungal or TB infection; immunosuppression; AST or ALT > 5 x ULN; ANC < 500/mm³; platelets < 50,000/mm³; and pregnancy.*

- Normal LFTs:
  - Tocilizumab Weight 50-60 kg: 400 mg IV once
  - Tocilizumab Weight > 60-85 kg: 600 mg IV once
  - Tocilizumab Weight > 85 kg: 800 mg IV once

- Abnormal LFTs:
  - Tocilizumab 4 mg/kg [ ] IV mg once

**Azithromycin**
- Azithromycin oral suspension 500 mg NG x 1, followed by 250 mg NG daily x 4 days
- Azithromycin IV 500 mg IV daily x 3 days

**ARDS patients only**
- Methylprednisolone 0.5 mg/kg/dose [ ] IV q12h x 3 days

#### Supportive Care
- Acetaminophen 650 mg PO q6h PRN fever and tolerating PO meds
- Acetaminophen oral solution 650 mg NG q6H PRN fever and tolerating PO meds
COVID-19 SEDATION iForm

SELECT SEDATION PURPOSE

- COVID Rule Out
  Will redirect to ICU protocol iForm. Base sedation choice on patient specific factors.
- COVID Presumed or Confirmed
  Vent Days 1-7
- COVID Confirmed Positive
  Ventilator days beyond 7 days

SELECT RIKER SCALE

- Light Sedation
  A Riker between 3 (sedated; awakens to verbal stimuli or gentle shaking, follows simple commands) and 4 (calm and cooperative, calms, awakens easily, follows commands).
- Deep Sedation
  A Riker of 2 (very sedated, arouses to physical stimuli but does not communicate or follow commands, may move spontaneously).
- Deep Sedation
  A Riker of 1 (Unarousable, minimal or no response to noxious stimuli, does not communicate or follow commands).

MEDICATIONS

Ventilator days beyond 7 days

- Propofol
  Initiate at 20 mcg/kg/min and titrate by no more than 10 mcg/kg/min every 10 minutes to ordered Riker score. Do not exceed 50 mcg/kg/min without physician approval.
- Fentanyl:
  Initiate at 50 mcg/hr when propofol reaches 50 mcg/kg/min and titrate by 25 mcg/hr every 20 minutes to ordered Riker score. Do not exceed 150 mcg/hr without physician approval.
- Dexamethasone:
  Initiate at 0.5 mcg/kg/hr when fentanyl reaches 150 mcg/hr and titrate by 0.1 mcg/kg/hr every 15 minutes to ordered Riker score. Do not exceed 1.5 mcg/kg/hr.

MEDICATIONS

Ventilator Days 1-7

- Midazolam:
  Initiate at 2mg/hr and titrate by 1mg/hr every 20 minutes to ordered Riker score.

 Diazepam
- 5 mg IV every 6 hours for 24 hours
- 5 mg NG every 6 hours for 24 hours
- 2.5 mg NG every 6 hours for 24 hours

- Dexametomidine:
  Initiate at 0.5 mcg/kg/hr and titrate by 0.1 mcg/kg/hr every 15 minutes to ordered Riker score.
## Common Labs

### Lab Draw

**Moderate symptoms, hospitalized**
- [ ] Basic Metabolic Panel
- [ ] CBC with diff
- [ ] Magnesium

**Severe, hospitalized (ICU)**
- [ ] Basic Metabolic Panel
- [ ] CBC with diff
- [ ] CPK
- [ ] Magnesium
- [ ] Troponin

### Nurse Draw

**Every 48 hours x 3 occurrences**
- [ ] CPK
- [ ] C-Reactive Protein
- [ ] D-Dimer
- [ ] Ferritin
- [ ] LDH
- [ ] Liver Battery
- [ ] Triglycerides (if on Propofol)
- [ ] Troponin

**Clinical worsening**

<table>
<thead>
<tr>
<th>Select Priority:</th>
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<tbody>
<tr>
<td>STAT TODAY</td>
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</tbody>
</table>
- [ ] Basic Metabolic Panel
- [ ] CBC with diff
- [ ] CPK
- [ ] D-Dimer
- [ ] Ferritin
- [ ] LDH
- [ ] Magnesium
- [ ] Procalcitonin
- [ ] Troponin

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*April 15, 2020*