

**PPE Recommendations \*Updated 4/2/2020\***

Patient care for patients not suspected for COVID-19	Patient care for patients suspected or positive for COVID-19  *If interaction requires being within 3 feet of the patient, the patient should also wear a surgical mask*	Patient care during aerosol-generating procedures <sup>1</sup> (AGP) on patients suspected or positive for COVID-19	Patient care during airway Procedures* on all patients  *Intubation/extubation, placing tracheostomy, bronchoscopy, sinus surgeries
<p><b>WHEN:</b></p> <ul style="list-style-type: none"> <li>• Patient has no COVID-19 symptoms</li> <li>• Closer than 6 feet from patient for more than 1 minute</li> </ul> <p><b>WHERE:</b></p> <ul style="list-style-type: none"> <li>• Ambulatory Clinics</li> <li>• Emergency Department</li> <li>• Acute Care Units</li> <li>• Intensive Care Units</li> <li>• Procedural Areas</li> </ul> <p><b>PPE Required:</b></p> <ul style="list-style-type: none"> <li>• Surgical/ear loop mask</li> </ul>	<p><b>WHEN:</b></p> <ul style="list-style-type: none"> <li>• Patient has COVID-19 symptoms or has a COVID-19 test pending or with positive result</li> </ul> <p><b>WHERE:</b></p> <ul style="list-style-type: none"> <li>• Ambulatory Clinics</li> <li>• Emergency Department</li> <li>• Acute Care Units</li> <li>• Intensive Care Units</li> <li>• Procedural Areas</li> </ul> <p><b>PPE Required:</b></p> <ul style="list-style-type: none"> <li>• Eye protection/face shield</li> <li>• Surgical/ear loop mask</li> <li>• Gown</li> <li>• Gloves</li> </ul>	<p><b>WHEN:</b></p> <ul style="list-style-type: none"> <li>• During aerosol-generating procedures<sup>1</sup> performed on suspected or confirmed COVID-19 patients.</li> </ul> <p><b>WHERE:</b></p> <ul style="list-style-type: none"> <li>• Ambulatory Clinics</li> <li>• Emergency Department</li> <li>• Acute Care Units</li> <li>• Intensive Care Units</li> <li>• Procedural Areas</li> </ul> <p><b>PPE Required:</b></p> <ul style="list-style-type: none"> <li>• PAPR or N95 Respirator + Face Shield/Eye Protection</li> <li>• Gown</li> <li>• Gloves</li> </ul> <p>Negative airflow/portable HEPA device not required. Ensure door is closed and maintain airborne PPE precautions for 30 minutes<sup>2</sup> after AGP is complete.</p>	<p><b>WHEN:</b></p> <ul style="list-style-type: none"> <li>• During Airway Procedures* on all patients</li> </ul> <p><b>WHERE:</b></p> <ul style="list-style-type: none"> <li>• Ambulatory Clinics</li> <li>• Emergency Department</li> <li>• Acute Care Units</li> <li>• Intensive Care Units</li> <li>• Procedural Areas</li> </ul> <p><b>PPE Required:</b></p> <ul style="list-style-type: none"> <li>• PAPR or N95 Respirator + Face Shield/Eye Protection</li> <li>• Gown</li> <li>• Gloves</li> </ul> <p>Negative airflow/portable HEPA device not required. Ensure door is closed and maintain airborne PPE precautions for 30 minutes<sup>2</sup> after AGP is complete.</p>

**Note for all categories shown: Hand hygiene required upon entry and exit regardless of whether the patient is under isolation or PPE is worn.**

<sup>1</sup> Aerosol-generating procedures include but are not limited to: laryngoscopy, non-invasive ventilation, CPR (not including compressions), open suction, nasotracheal suction, nebulizer treatments  
<sup>2</sup> Shorter timeframes after AGP may be recommended in specific OR/Procedural areas. Consult "Perioperative and Procedural Care of the Unknown, Suspected or Positive COVID-19 Patient" policy  
 PPE for specimen collection: Nasopharyngeal swabs often generate a strong cough reflex. Standard/Contact/Droplet + Eye Protection precautions are recommended.  
 Please see extended and re-use guidelines for N95 respirators.

# Care Collaborative

## COVID-19 TRIAGE WORKSHEET

<b>SCREEN</b> <b>LOW RISK</b> - See guidance below	<b>ADMIT</b>	<b>TRANSFER</b>
<ul style="list-style-type: none"> <li><input type="checkbox"/> Screened or pending COVID-19 test</li> <li><input type="checkbox"/> No history of exposure</li> <li><input type="checkbox"/> Front line worker with URI symptoms/fever</li> <li><input type="checkbox"/> Minimal risk factors as identified below</li> </ul> <p><b>TREATMENT GUIDELINES</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Discharge home with supportive care recommendations and regular follow-up via phone. Return to ED if sx's worsen. Notify them of test results and recommend they remain self-quarantined until results back</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Admit if concerning symptoms (SOA, dyspnea, wheeze, worsening condition. Negative or PUI COVID-19)</li> <li><input type="checkbox"/> Unable to maintain at home – ex: O2 sats with less than 5 l/min by NC or maintaining O2 sats &gt;92% on non-rebreathing face mask. Minimal risk factors for SEVERE COVID-19 with cough/fever/myalgias. (May show signs of sepsis with abnormal labs indicating organ dysfunction.)</li> </ul> <p><b>TREATMENT GUIDELINES</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Admit locally with sepsis protocol guidance &amp; our COVID-19 order set. Consider Hydroxychloroquine +/- azithromycin +/- zinc supplement. Failure to improve or signs of worsening respiratory status – prepare for immed. transfer</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> COVID-19 positive or proven COVID-19 with High Risk Factors in respiratory distress.                             <ul style="list-style-type: none"> <li>*Respiratory rate is 35-40 breaths per minute,</li> <li>*Unable to maintain O2 sats &gt;92% and/or PaO2 &lt;65 on 6 l/min NC or NRB</li> <li>* Non-COPD with PaCO2 &gt;50 with pH &lt; 7.3</li> </ul> </li> <li><input type="checkbox"/> Any patient requiring ventilatory support.</li> </ul> <p><b>TREATMENT GUIDELINES</b></p> <p>See Surviving Sepsis Campaign guidance on “Summary of recommendations on the management of patients with COVID-19 and ARDS”</p>
<p><b>Patient-related risks</b></p> <p>Age &gt; 60 -Immunocompromised (oncology, transplant, immunosuppressive meds, HIV, other known immunodeficiency) -Pregnancy -Chronic lung disease -Cirrhosis -Cardiovascular disease -End stage renal disease -Diabetes</p>	<p><b>Environmental risks</b></p> <p>-High-risk travel or known COVID-19 exposure within 14 days                      -Health care workers                      -Institutional home setting (nursing home, dormitory, shelter, prison, etc), outpatient dialysis center patient -Living with immunocompromised person(s)</p>	



# 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 P<sub>plat</sub> < 30 cm H<sub>2</sub>O

 **DO:**  
Investigate for bacterial infection

 **DO:**  
Target SpO<sub>2</sub> 92% - 96%

 **CONSIDER:**  
Conservative fluid strategy

 **CONSIDER:**  
Empiric antibiotics

 **UNCERTAIN:**  
Systemic corticosteroids

### COVID-19 with mod to severe ARDS

 **CONSIDER:**  
Higher PEEP

 **CONSIDER:**  
NMBA boluses to facilitate ventilation targets

 **CONSIDER:** if PEEP responsive  
Traditional recruitment maneuvers

 **CONSIDER:**  
Prone ventilation 12 -16 h

 **CONSIDER:** if proning, high P<sub>plat</sub>, asynchrony  
NMBA infusion for 24 h

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

 **CONSIDER:**  
Short course of systemic corticosteroids

 **UNCERTAIN:**  
Antivirals, chloroquine, anti-IL6

### Rescue/adjunctive therapy

 **UNCERTAIN:**  
Antivirals, chloroquine, anti-IL6

 **CONSIDER:** if proning, high P<sub>plat</sub>, asynchrony  
NMBA infusion for 24 h

 **CONSIDER:**  
Prone ventilation 12 -16 h

 **CONSIDER:** STOP if no quick response  
A trial of inhaled nitric oxide

 **CONSIDER:** follow local criteria for ECMO  
V-V ECMO or referral to ECMO center

Mod = moderate  
ARDS = adult respiratory distress syndrome  
P<sub>plat</sub> = plateau pressure  
SpO<sub>2</sub> = peripheral capillary oxygen saturation  
PEEP = positive end-expiratory pressure  
NMBA = neuromuscular blocking agents  
ECMO = extracorporeal membrane oxygenation

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A to Z Topic Listing

## Hospital Resources

- Grantee Information ▶
- Exercise & Training Program ▶
- Resources ▶
- Standard Operating Guides
- Preparedness Full Scale Exercise **NEW**
- Preparedness IT Systems ▶
- Contact Us

### Hospital Preparedness Program Award Materials

- [2019-2020 Technical Assistance & Visitation Report - PDF](#)
- [HPP Performance Measures](#)
- [Coalition Surge Test Manual](#)
- [Evac Tool](#)
- [LEAD Tool](#)
- [Reimbursement Affidavit](#)
- [HCC Membership Template](#)
- [KDHE AAR IP for HPP](#)
- [KDHE AAR - HCC Regional Coordinator Checklist](#)
- [Meeting Report Form](#)
- [Redundant Drill Program Measure Data](#)
- [2017-2022 Health Care Preparedness and Response Capabilities](#)

### HPP Ebola

- [Ebola Preparedness Measurement Implementation Guidance](#)
- [HPP Ebola Program Measures](#)

### Kansas Crisis Protocols of Care Guidelines

- [Kansas Crisis Protocols of Care Guidelines During Public Health Emergencies](#)



## Guidelines for the Use of Modified Health Care Protocols in Acute Care Hospitals During Public Health Emergencies

Originally Published November 2009  
Revised August 2010  
Second Revision September 2013

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