

Surviving Sepsis Campaign®

SURVIVING SEPSIS CAMPAIGN: GUIDELINES ON THE MANAGEMENT OF CRITICALLY ILL ADULTS WITH CORONAVIRUS DISEASE 2019 (COVID-19)

INFECTION CONTROL AND TESTING RECOMMENDATIONS CHART

RECOMMENDATION #1	STRENGTH & QUALITY OF EVIDENCE
For healthcare workers performing aerosol-generating procedures on patients with COVID-19 in the ICU, we recommend using fitted respirator masks (N95 respirators, FFP2, or equivalent) , as opposed to surgical/medical masks, in addition to other personal protective equipment (i.e., gloves, gown, and eye protection, such as a face shield or safety goggles).	Best Practice Statement
RECOMMENDATION #2	STRENGTH & QUALITY OF EVIDENCE
We recommend performing aerosol-generating procedures on ICU patients with COVID-19 in a negative pressure room.	Best Practice Statement
RECOMMENDATION #3	STRENGTH & QUALITY OF EVIDENCE
For healthcare workers providing usual care for non-ventilated COVID-19 patients, we suggest using surgical/medical masks, as opposed to respirator masks, in addition to other personal protective equipment (i.e., gloves, gown, and eye protection, such as a face shield or safety goggles).	<ul style="list-style-type: none">• Weak• Low-Quality of Evidence

RECOMMENDATION #4	STRENGTH & QUALITY OF EVIDENCE
For healthcare workers who are performing non-aerosol-generating procedures on mechanically ventilated (closed circuit) patients with COVID-19, we suggest using surgical/medical masks, as opposed to respirator masks, in addition to other personal protective equipment (i.e., gloves, gown, and eye protection, such as a face shield or safety goggles).	<ul style="list-style-type: none"> • Weak • Low-Quality of Evidence

RECOMMENDATION #5	STRENGTH & QUALITY OF EVIDENCE
For healthcare workers performing endotracheal intubation on patients with COVID-19, we suggest using video-guided laryngoscopy, over direct laryngoscopy, if available.	<ul style="list-style-type: none"> • Weak • Low-Quality of Evidence

RECOMMENDATION #6	STRENGTH & QUALITY OF EVIDENCE
For COVID-19 patients requiring endotracheal intubation, we recommend that endotracheal intubation be performed by the healthcare worker who is most experienced with airway management in order to minimize the number of attempts and risk of transmission.	Best Practice Statement

LABORATORY DIAGNOSIS AND SPECIMENS

RECOMMENDATION #7.1	STRENGTH & QUALITY OF EVIDENCE
For intubated and mechanically ventilated adults with suspicion of COVID-19: For diagnostic testing, we suggest obtaining lower respiratory tract samples in preference to upper respiratory tract (nasopharyngeal or oropharyngeal) samples.	<ul style="list-style-type: none"> • Weak • Low-Quality of Evidence

RECOMMENDATION #7.2	STRENGTH & QUALITY OF EVIDENCE
For intubated and mechanically ventilated adults with suspicion of COVID-19: With regard to lower respiratory samples, we suggest obtaining endotracheal aspirates in preference to bronchial wash or bronchoalveolar lavage samples.	<ul style="list-style-type: none"> • Weak • Low-Quality of Evidence