YNHHS Treatment Protocol for *Hospitalized Patient with Non–Severe* COVID-19

Disclaimer: There are no FDA-approved treatments for COVID-19, supportive care is standard of care. Limited treatment data are available & clinical judgment is warranted.

**Patient with confirmed positive SARS-CoV-2 by PCR**

*If mechanically ventilated or on ECMO, proceed to Severe algorithm*

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**Presence of:**
- **Oxygen saturation ≤ 93%** on room air OR on chronic O₂ supplementation

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**SUPPORTIVE CARE & CLOSE OBSERVATION with continuous O₂ monitoring**

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**START TREATMENT**

(see treatment below)

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**TREATMENT**

1) atazanavir¹,² AND hydroxychloroquine¹,²

Continuous O₂ saturation monitoring

2) Consult Inpatient Infectious Diseases (ID)

For YNHH: From 8AM - 5PM:
Place EPIC Order for ID Consult
From 5PM to 8AM: call on-call ID fellow

3) If > 3 Liter O₂ requirement, consider starting tocilizumab¹,², inform MICU, ID consult for remdesivir EIND, and proceed to the Severe algorithm

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**COVID-SPECIFIC LABS**

1) Draw at Baseline & every 12 hours:
CRP, Procalcitonin, Ferritin, LDH, troponin, D-dimer, fibrinogen, PT/PTT

2) Draw at Baseline Only:
HIV-1/HIV-2 antibody/antigen

2) Draw at Baseline & every 48 hours:
Cytokine panel

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¹Requires restricted medication request to pharmacy
²Limited data

Algorithm Updated as of 3/19/20 reviewed by YNHHS SAS and YNHH/YSM Ad-Hoc COVID-19 Treatment Team
YNHHS Treatment Protocol for Hospitalized PATIENTS with Severe COVID-19

Disclaimer: There are no FDA-approved treatments for COVID-19, supportive care is standard of care. Limited treatment data are available & clinical judgment is warranted.

Respiratory failure with Mechanical ventilation (including ECMO) PLUS confirmed POSITIVE SARS-CoV-2 by PCR

TREATMENT
1) atazanavir<sup>1,2</sup> & hydroxychloroquine<sup>1,2</sup>

2) Consider tocilizumab x 1 dose

(Additional doses determined by clinical response given the drug’s long half-life in consultation with ID, pharmacy, & critical care)

Consult Inpatient Infectious Diseases to determine eligibility for remdesivir

Infectious Diseases will help to coordinate with Antimicrobial Stewardship/Pharmacy to facilitate emergency IND for remdesivir

Does patient have any Exclusion Criteria for remdesivir IND?

- Evidence of Multi-organ failure
- Pressor requirement to maintain blood pressure
- ALT levels > 5x the ULN
- Cr Clearance <30 mL/min or renal replacement therapy

Use of other treatment agents for COVID19 is allowed if discontinued prior to starting Remdesivir

For refractory disease, advise a multidisciplinary discussion including pharmacy, ID, & primary team for other possible therapies including investigational agents

Algorithm Updated as of 3/19/20 reviewed by YNHHS SAS and YNHH/YSM Ad-Hoc COVID-19 Treatment Team

1Requires restricted medication request to pharmacy
2Limited data

COVID-SPECIFIC LABS

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