Algorithm for Management of Patients with suspected COVID-19

**Adults**

- **Admission to floor**
  - Without O₂ Requirement or Risk Factors:
    - Monitor for worsening of symptoms
  - With O₂ Requirement and/or Risk Factors:
    - Consult ASP/ID for treatment approval
    - Consult MICU for evaluation for new O₂ Requirement

**Pediatrics**

- **Admission to PICU or floor**
  - All empiric treatment decisions should be discussed and approved by pediatric ID

**Definitive Treatment Recommendations:**

- If COVID-19 test returns negative, discontinue treatment.
- If COVID-19 test returns positive in an ICU patient or floor patients with hypoxia and/or risk factors, continue treatment for appropriate duration (see page 3).
- If COVID-19 test returns positive in a floor patient without hypoxia or D-dimer ≤1,000 ng/mL, do not initiate treatment if patient has not become hypoxic and has improved in the absence of therapy.

**Risk Factors:**
- Age >60
- Leukopenia
- Cardiovascular disease
- Diabetes
- Chronic pulmonary disease
- End-stage renal disease
- Immunocompromising conditions* (cancer, HIV, transplant)
- Immunosuppressive medications
- D-dimer >1000
- Healthcare workers
- Pregnancy**

*Consider multidisciplinary team management (ID, pulmonology)

**For treatment approval, page 601-929-0484. ASP on-call will evaluate patient eligibility and discuss with supervising ID attending.

***Consider enrolling patient in: PRIORITY (Pregnancy CoRonavirus Outcomes RegIsTRY), a nationwide registry for pregnant and postpartum individuals with suspected COVID-19 or confirmed diagnosis [https://priority.ucsf.edu/](https://priority.ucsf.edu/)