

# COVID-19 Adult Inpatient Management and Treatment [4400]

This order set is intended for treatment of COVID-19 patients by authorized Pulmonary, Critical Care, and Infectious Diseases service line providers.

URL:  
"https://fparchives.com/houstonmethodist/documents/HM%20COVID%20algorithm.pdf"  
URL: "\appt119 Precautions.pdf"

## General

### Isolation

	<b>ACUTE CARE PATIENT WITH NO AEROSOL GENERATING PROCEDURES</b>	<b>PATIENT WITH INTERMITTENT AEROSOL GENERATING TREATMENT/PROCEDURES</b>	<b>CRITICAL CARE PATIENT WITH CONTINUOUS AEROSOL GENERATING TREATMENT/PROCEDURES</b>
Precautions	Standard + Droplet + Contact + Eye Protection	Standard + Modified Droplet + Contact + Eye Protection	Standard + Airborne + Contact + Eye Protection

Acute care patient with no aerosol generating procedures

Droplet isolation status Include eye protection

Contact isolation status Include eye protection

Patient with intermittent aerosol generating treatment/procedures

Modified droplet isolation status Include eye protection

Contact isolation status Include eye protection

Critical care patient with continuous aerosol generating treatment/procedures

Airborne isolation status Include eye protection

Contact isolation status Include eye protection

## Nursing

### Vital signs

Vital signs - every 2 hours Routine, Every 2 hours

Vital signs - every 4 hours Routine, Every 4 hours

Vital signs - every 8 hours Routine, Every 8 hours

Vital signs - per unit protocol Routine, Per unit protocol

### Activity (Selection Required)

Strict bed rest Routine, Until discontinued, Starting S

Bed rest with bathroom privileges Routine, Until discontinued, Starting S  
Bathroom Privileges: with bathroom privileges

Up with assistance Routine, Until discontinued, Starting S  
Specify: Up with assistance

Activity as tolerated Routine, Until discontinued, Starting S  
Specify: Activity as tolerated

### COVID-19 Position Care

ICU proning interventions Routine, Until discontinued, Starting S

Return patient to supine post-proning Routine, Until discontinued, Starting S

### Nursing

<input checked="" type="checkbox"/> Limit repeated entry to room	Routine, Until discontinued, Starting S For Until specified Batch all care and work with pharmacy and providers to limit repeated entry to patient care room.
<input type="checkbox"/> Intake and output every shift	Routine, Every shift
<input type="checkbox"/> Incentive spirometry	Routine, Once
<input type="checkbox"/> Telemetry	<b>"And" Linked Panel</b>
<input type="checkbox"/> Telemetry monitoring	Routine, Continuous Order: Place in Centralized Telemetry Monitor: EKG Monitoring Only (Telemetry Box) Reason for telemetry: Can be off of Telemetry for tests and baths? Yes
<input type="checkbox"/> Telemetry Additional Setup Information	Routine, Continuous High Heart Rate (BPM): 120 Low Heart Rate(BPM): 50 High PVC's (per minute): 10 High SBP(mmHg): 175 Low SBP(mmHg): 100 High DBP(mmHg): 95 Low DBP(mmHg): 40 Low Mean BP: 60 High Mean BP: 120 Low SPO2(%): 94
<input type="checkbox"/> Daily weights	Routine, Daily

## Medications

### General COVID-19 Treatment

HM actively DISCOURAGES the combination of Azithromycin (+) Hydroxychloroquine as a treatment for COVID-19. The use of Hydroxychloroquine/Chloroquine for COVID-19 at HM should only be done in the context of a clinical trial. Contact Clinical Pharmacy with questions.

Screen patients for benefit of inclusion in HM COVID Investigational Protocols

URL:

"<https://fparchives.com/houstonmethodist/documents/HM%20COVID%20algorithm.pdf>"

URL: "<https://covidtrials.houstonmethodist.org/>"

URL:

"<https://fparchives.com/houstonmethodist/documents/COVID-19%20Anticoagulation%20Guideline.pdf>"

### lopinavir-ritonavir (KALETRA) (Single Response)

<input type="checkbox"/> lopinavir-ritonavir (KALETRA) tablet	2 tablet, oral, 2 times daily Reason for Therapy: Viral Infection Documented Indication: Other Specify: COVID-19 New initiation of treatment for COVID-19 therapies are RESTRICTED to Infectious Diseases, Pulmonology and Critical Care Medicine providers. Are you an ID, Pulmonology or Critical Care provider?
<input type="checkbox"/> lopinavir-ritonavir (KALETRA) oral solution	5 mL, oral, 2 times daily Reason for Therapy: Viral Infection Documented Indication: Other Specify: COVID-19 New initiation of treatment for COVID-19 therapies are RESTRICTED to Infectious Diseases, Pulmonology and Critical Care Medicine providers. Are you an ID, Pulmonology or Critical Care provider?

### Immunomodulatory Agents

<input type="checkbox"/> tocilizumab (ACTEMRA) IVPB	400 mg, intravenous, once, For 1 Doses RESTRICTED to infectious diseases, pulmonary, or critical care specialists. Are you a specialist or ordering on behalf of one?
<input type="checkbox"/> anakinra (KINERET) subcutaneous syringe	100 mg, subcutaneous, every 8 hours, For 9 Doses

inFLIXimab (REMICADE) IVPB 5 mg/kg, intravenous, for 120 Minutes, once, For 1 Doses

### Pharmacy consult for remdesivir

Remdesivir via the FDA's EUA is subject to drug availability at HM

URL: "file://\appt1.pdf"

URL:

"https://fparchives.com/houstonmethodist/documents/HM%20EUA%20RDV%20Criteria.pdf"

Pharmacy consult for remdesivir

Routine, Until discontinued, Starting S

Physician contact number:

Remdesivir prescribing is RESTRICTED to Infectious Diseases, Pulmonology and Critical Care Medicine providers.

Are you an ID, Pulmonology or Critical Care provider?

### Dexamethasone PO or IV (Single Response)

-Dexamethasone should only be used in COVID-19 patients (a) requiring oxygen supplementation or (b) requiring ventilator support.

-Caution in using steroids early in COVID-19 disease (i.e. symptoms less than 7 days).

dexamethasone (DECADRON) tablet

6 mg, oral, daily, For 10 Doses

dexamethasone (DECADRON) IV

6 mg, intravenous, daily, For 10 Doses

dexamethasone 4 mg/mL oral suspension

6 mg, oral, daily, For 10 Doses

### sodium chloride 0.9% bag for line care

sodium chloride 0.9% bag for line care

250 mL, intravenous, PRN, line care

For flushing of extension tubing sets after administration of intermittent infusions. Program sodium chloride bag to run at the same infusion rate as medication given for a total volume equal to contents of tubing sets used. Change bag every 24 hours.

## Laboratory

### Laboratory-Repeat

CBC with platelet and differential

AM draw repeats For 3 Occurrences

Comprehensive metabolic panel

AM draw repeats For 3 Occurrences

Additional Daily labs-Critical Illness/Clinical Deterioration

Consider these daily repeat labs with Moderate/Severe Illness in COVID-19 positive patients.

Troponin

AM draw repeats, Starting S+1 For 3 Occurrences

D-dimer

AM draw repeats, Starting S+1 For 3 Occurrences

C-reactive protein

AM draw repeats, Starting S+1 For 3 Occurrences

LDH

AM draw repeats, Starting S+1 For 3 Occurrences

Ferritin level

AM draw repeats, Starting S+1 For 3 Occurrences

### Laboratory-Critical Illness/Clinical Deterioration

CBC with platelet and differential

STAT For 1 Occurrences

Comprehensive metabolic panel

STAT For 1 Occurrences

Prothrombin time with INR

STAT For 1 Occurrences

Partial thromboplastin time, activated

STAT For 1 Occurrences

BNP

STAT For 1 Occurrences

Troponin

STAT For 1 Occurrences

Myoglobin

STAT For 1 Occurrences

Procalcitonin

STAT For 1 Occurrences

C-reactive protein

STAT For 1 Occurrences

Interleukin 6

Once For 1 Occurrences

Ferritin level

STAT For 1 Occurrences

D-dimer

STAT For 1 Occurrences

Methemoglobin

STAT For 1 Occurrences

<input type="checkbox"/>	Carboxyhemoglobin	STAT For 1 Occurrences
<input type="checkbox"/>	LDH	STAT For 1 Occurrences
<input type="checkbox"/>	Triglycerides	STAT For 1 Occurrences
<input type="checkbox"/>	Fibrinogen	STAT For 1 Occurrences

### Laboratory-Inflammatory Bundle

<input checked="" type="checkbox"/>	C-reactive protein	Once
<input checked="" type="checkbox"/>	Interleukin 6	Once
<input checked="" type="checkbox"/>	Ferritin level	Once
<input checked="" type="checkbox"/>	D-dimer	Once
<input checked="" type="checkbox"/>	LDH	Once
<input checked="" type="checkbox"/>	Triglycerides	Once
<input checked="" type="checkbox"/>	Fibrinogen	Once
<input type="checkbox"/>	Prothrombin time with INR	Once
<input type="checkbox"/>	Partial thromboplastin time, activated	Once

### Laboratory-Type and Screen

<input checked="" type="checkbox"/>	Type and screen	STAT For 1 Occurrences
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## Respiratory

### Respiratory

Avoid BiPAP and CPAP to avoid aerosolization of virus

URL: "\appt1Hypoxemia Algorithm.pdf"

<input type="checkbox"/>	Oxygen therapy	Routine, Continuous Device: High Flow Nasal Cannula (HFNC) Rate in liters per minute: Rate in liters per minute: O2 %: O2 %: Titrate to keep O2 Sat Above: 92% Indications for O2 therapy: Keep HFNC flow under 30L/min
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## Cardiology

### Cardiology

ECG on admission to ICU for baseline QTc and daily if on multiple agents that prolong QTc.

<input type="checkbox"/>	ECG 12 lead	Routine, STAT For 1 Occurrences Clinical Indications: Rate/Rhythm Interpreting Physician:
<input type="checkbox"/>	ECG 12 lead	Routine, Daily For 3 Occurrences Clinical Indications: Interpreting Physician:
<input type="checkbox"/>	Transthoracic Echocardiogram Complete, (w Contrast, Strain and 3D if needed)	Routine, 1 time imaging

## Imaging

### Imaging

<input checked="" type="checkbox"/>	XR Chest 1 Vw Portable	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Daily XR Chest 1 Vw Portable	Routine, Daily imaging, Starting S+1 For Until specified Consider daily CXR for the following patients: Age > 70, BMI > 40, or Increasing O2 requirements on the floor.

## Physician Consults

### Physician Consults

Consider using these consults to assist with management of the COVID-19 positive patient.

<input type="checkbox"/> Consult Infectious Diseases for moderate to severe COVID-19 patient	Reason for Consult? Management of COVID-19 positive patient Patient/clinical information communicated?
<input type="checkbox"/> Consult Hematology and Oncology for suspected Cytokine Storm	Reason for Consult? Management of COVID-19 positive patient with suspected Cytokine Storm Patient/clinical information communicated?
<input type="checkbox"/> Consult Pulmonary/Crit Care for respiratory insufficiency	Reason for Consult? Management of COVID-19 positive patient with respiratory insufficiency Patient/clinical information communicated?
<input type="checkbox"/> Consult Nephrology/Hyperten	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated?

## Ancillary Consults

### Ancillary Consults

<input type="checkbox"/> Consult to Palliative Care Service	Priority: Same Day Reason for Consult? Assistance with clarification of goals of care Order? Name of referring provider: Enter call back number:
<input type="checkbox"/> Consult to Nutrition Services	Reason For Consult? Purpose/Topic:
<input type="checkbox"/> Consult to Spiritual Care	Reason for consult?
<input type="checkbox"/> Consult to Social Work	Reason for Consult:
<input type="checkbox"/> Consult to Case Management	Consult Reason: