

# Surviving Sepsis Campaign COVID-19 Guideline Statement



Aerosol-generating procedures should be performed in a negative pressure room and health-care workers are recommended to wear fitted respirator masks. For all other care, regular masks are adequate.



Resuscitation in patients with COVID-19 should preferably be done with balanced crystalloids using a conservative fluid strategy similar to ARDS. Empiric antimicrobials are recommended.



Norepinephrine should be the first-line agent, with the addition of vasopressin for refractory hypotension and dobutamine if there is persistent shock with evidence of cardiac dysfunction despite fluids and vasopressors.



Supplemental oxygen should target SPO<sub>2</sub> between 92% and 96%. HFNC can be considered over NIPPV. The risk of potential transmission with NIPPV to health-care workers is unknown. Early intubation should be considered.



Customary ARDS care should be provided to mechanically ventilated patients with COVID-19, including prone positioning, low TV (4-8 mL/kg of predicted body weight), P<sub>plat</sub> <30 cm H<sub>2</sub>O, high PEEP strategy, neuromuscular blockade, etc.