MISSOURI DELTA
FOCUSED ON THE FUTURE OF HEALTHCARE

ED Admission Criteria: Admission from ED for COVID-19 Patients and Patients Under Investigation with Respiratory Distress

Purpose: Due to the anticipated rapidly changing environment, the criteria for admission of COVID-19 patients and Patients Under Investigation (PUI) should be considered carefully. The following will serve as principles when considering COVID-19 unit admission.

**** Principles cannot replace personalized evaluation and management decisions based on individual patient factors ****

- **Code status should be established at the earliest feasible time**
- Patients should be admitted/transferred to COVID-19 ICU only after a discussion with patient, and/or their surrogate, confirming the escalation of care desired which may include intubation.
- Depending on hospital census, the COVID-19 unit may consist only of the COVID ICU floor or a combination of the COVID ICU and a COVID non-ICU floor.
- Consider palliative care consult for patients with significant mortality risk

CONSIDER ADMISSION

A. **Medical Criteria for Admission:**
   1. **Comorbid condition with worsening shortness of breath, fever, and/or increasing cough –** Comorbid conditions include congestive heart failure with reduced ejection fraction (EF <40%), coronary artery disease, chronic lung disease (severe asthma, severe COPD, interstitial lung disease, cystic fibrosis), immune suppression/transplant, active cancer treatment, insulin dependent diabetes.
   2. **New oxygen requirement ***
      a. Healthy without lung disease: resting O_2 sat <94% on RA
      b. Patient with cardiac or lung disease WITH worsening DOE, SOB, and/or new O_2 requirement
   3. **Chest x-ray showing new patchy opacities*** - admit for at least 24 hours to ensure stability
   4. **Abnormal respiratory rate** (<10 or >24)
   5. **Temperature** >38.9 ^{o}C if associated with abnormal RR (as defined above), chest x-ray or oxygen requirement
   6. **Confusion** or altered mental status
   7. **Pregnant patient** – admit if meets any of the above criteria, otherwise discuss with OB service

B. **Medical Factors Suggestive of Higher Risk for Severe Disease and/or Decompensation:**
   1. Labs: D-Dimer > 1.0 ug/ml, LDH > 245, CPK > 2x ULN, CRP > 100 mg/L, lymphocyte count < 0.8
   2. BMI ≥ 40
   3. Age ≥ 65

C. **Social/Environmental Factors for Consideration or Admit to Alternative Site if no Medical Criteria Exist**
   1. Inability to care for self
   2. Resident of group facility
   3. Lack of food security

4. Lack of running water/electricity
5. Living with other high-risk people without an ability to isolate (no alternative living situation or only sharing spaces – bedroom/bathroom)

ADMISSION:

- If the patient meets any of the **medical criteria listed in A**, the **patient should be admitted** to the hospital for further observation.
- The **medical factors listed in B** are not individual admission criteria but are **indicative of patients at higher risk to develop significant disease**. When these factors are present, or one is present with medical comorbid conditions, there should be serious consideration for admission and concern for decompensation requiring a higher level of care.
- If **social factors listed in C are present**, social work consult may be needed to determine if the patient can be safely discharged or admitted to an alternative site of care.
- If the patient **does not meet any of these criteria**, he/she can be **discharged to home with a telehealth visit for follow up**.

NOTES:

- Using criteria for oxygen requirement and abnormal chest x-ray may need to be adjusted if bed availability becomes critical and there is the capability to send patients home with oxygen and close telehealth monitoring.
- If D-Dimer is elevated in a patient with concern for COVID-19, PE protocol CT should only be ordered if there is a high clinical suspicion for PE given COVID-19 is associated with elevated D-Dimer and patients with severe COVID-19 disease are more prone to renal failure.

CONSIDER ICU ADMISSION

A. **Medical Criteria for Admission:**
   1. **Respiratory distress***
      a. Requiring O_2 > 5 L/min
      b. Rapid escalation of oxygen requirement
      c. Significant work of breathing
   2. **Hemodynamic instability after initial conservative fluid resuscitation**
      a. SBP < 90, mean arterial pressure < 65, or heart rate > 120
   3. **Acidosis**
      a. ABG with pH < 7.3 or PCO_2 > 50 or above patient's baseline
   4. **Need for intensive nursing care or frequent laboratory draws requiring arterial line**

NOTES:

- Patients with COVID-19 have been known to decompensate quickly from 5 L/min NC to requiring intubation and advanced ventilator settings.