

If you are taking care of a COVID-19 patient in the ICU, the following events should trigger a call to the ICU attending.

1. Death
2. Code
3. Intubation/Re-intubation/Self-extubation
4. Inability to achieve vent goals:
 - a. Worsening peak pressures or plateau pressures that continue > 2 hours
 - b. Inability to achieve SpO₂>88% after adjusting PEEP/PPlat
 - c. Inability to maintain Low stretch Ventilation strategy
 - d. Inability to achieve pH goals after 2 vent changes
 - e. Inability to achieve sedation/agitation goals
5. Transfusion ≥ 2 units PRBC
6. Acute change in neuro status (signs of stroke)
7. Pressor addition or increase of the following
 - a. Addition of a third pressor
 - b. Increase in epi by ≥ 4 mcg/min
 - c. Increase in norepi by ≥ 8 mcg/min
 - d. Signs of end organ ischemia – anuria, increasing lactate X 4 hours
8. Discussions of the need for any aerosolizing procedure
9. Discussion of the need for any off site trip (CT scan, OR, etc)
10. Transfer into the ICU of a new patient or readmission from the floor
11. Possibility of need for ECMO (per pocket card)

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At the request of family member / care team member regarding goals of care communication