

HUP Guidelines for ICU Transfer WITH Decision to Test or Retest for COVID-19

Updated: 5/5/2020

Purpose: Establish guidelines for ICU placement (ie COVID ICU or non-COVID ICU) for floor patients who are currently NOT in a COVID unit, who require ICU transfer, and for ED patients in whom COVID retesting is planned and who require ICU level care.

1. Floor transfers deemed greater than low risk for COVID go to **COVID ICUs** (no change from current).
 - a. Please place “COVID-19 Rule Out” Flag
 - b. Order COVID-19 testing in PennChart (sputum sample and/or NP swab) - approval no longer required for testing, and send specimen to lab
 - c. Patients should be maintained on droplet + contact + eye protection, with priority for negative pressure room and airborne precautions for aerosol generating procedures

2. Floor transfers to the ICU with testing planned but low likelihood of COVID can be considered for **non-COVID ICU** (F9, CCU) while awaiting test result (change from current):
 - a. Patients with strong clinical suspicion of alternative diagnosis (e.g., suspect aspiration or flash pulmonary edema but not conclusive), particularly if prior COVID testing negative
 - b. Patients without clinical suspicion but who require testing per guidelines (specifically, non-PUI in whom non-invasive ventilation is requested—must undergo testing per current NIV policy)
 - c. Dependent on availability of AIIR (negative pressure) and agreement by destination unit arbitrator (**for F8, contact CCU fellow who will communicate with attending & nursing**)
 - d. Please place “COVID-19 Rule Out” Flag
 - e. Order COVID-19 testing in PennChart (sputum sample and/or NP swab) - approval no longer required for testing, and send specimen to lab
 - f. Patients should be maintained on droplet + contact + eye protection, with priority for negative pressure room and airborne precautions for aerosol generating procedures
 - g. In unlikely event of COVID+, patient will subsequently transfer to COVID ICU

3. ED patients with an initial negative test but in whom retesting is planned (due to clinical suspicion) go to COVID ICUs pending results of retest (no change from current)
 - a. Please place “COVID-19 Rule Out” Flag
 - b. Order COVID-19 testing in PennChart (sputum sample and/or repeat NP swab in 24 hours) - approval no longer required for testing, and send specimen to lab
 - c. Patients should be maintained on droplet + contact + eye protection, with priority for negative pressure room and airborne precautions for aerosol generating procedures

ALL provider teams continue to have the option of NOT testing for COVID in non-COVID floor-to-ICU transfers when they think testing is not warranted. In such cases, patients are transferred to the appropriate non-COVID unit.