Pediatric COVID-19 or PUI screened in the Pediatric Emergency Department

Place in Negative Pressure Room (if available).
If unavailable utilize portable HEPA filter in room and keep door closed.

Utilize Maximal Precautions
Monitor for work of breathing. Assess for hypercapnia with blood gas.
BiPAP, CPAP, and HFNC can be utilized as indicated; transport only on NC or NIV with minimal/no leak plus filter

If bronchospasm is present, utilize MDIs.
Minimize nebulized medications.

With evidence of oxygenation or ventilation failure refractory to HFNC or NIPPV, plan for rapid sequence intubation (prefer no BMV to minimize aerosolization).

Advanced airway placement/intubation via Rapid Sequence Intubation

Place patient on ventilator with in-line neb/suction with closed filtered circuit.

When evaluating for Extubation and/or Extubation Readiness:

Prefer extubating to simple (non-humidified) nasal cannula or room air only.

Recurrent hypoxic or hypercarbic respiratory failure?

Prepare to re-intubate but may utilize NIPPV/HFNC if needed.

Multi-disciplinary collaboration for all imminent intubations. The most experienced pediatric airway provider available (Pediatric Anesthesia, Pediatric Critical Care Medicine, Pediatric Emergency Medicine) will intubate.

Prefer to use CAPR to intubate.

After intubation, may move to non-negative pressure room.

Minimize travel while ventilated to essential travel only.

If essential travel required, utilize LTV 1200 or Trilogy with filter

Use HMEF filter for any TV under 350 cc (NOT Pall Filter)

When evaluating for Extubation and/or Extubation Readiness:

Prefer extubating to simple (non-humidified) nasal cannula or room air only.

Recurrent hypoxic or hypercarbic respiratory failure?

Prepare to re-intubate but may utilize NIPPV/HFNC if needed.

When evaluating for Extubation and/or Extubation Readiness:

Prefer extubating to simple (non-humidified) nasal cannula or room air only.

Recurrent hypoxic or hypercarbic respiratory failure?

Prepare to re-intubate but may utilize NIPPV/HFNC if needed.
DO NOT USE PALL FILTER (INCREASED DEAD SPACE) FOR ANY TIDAL VOLUME <350 CC (USE HMEF FILTER)

Inter-surgical filter application with the Bag

Limited number of pediatric HMEF available. More on order. Dead space on peds size is 37 ml, infant size is 15 ml.