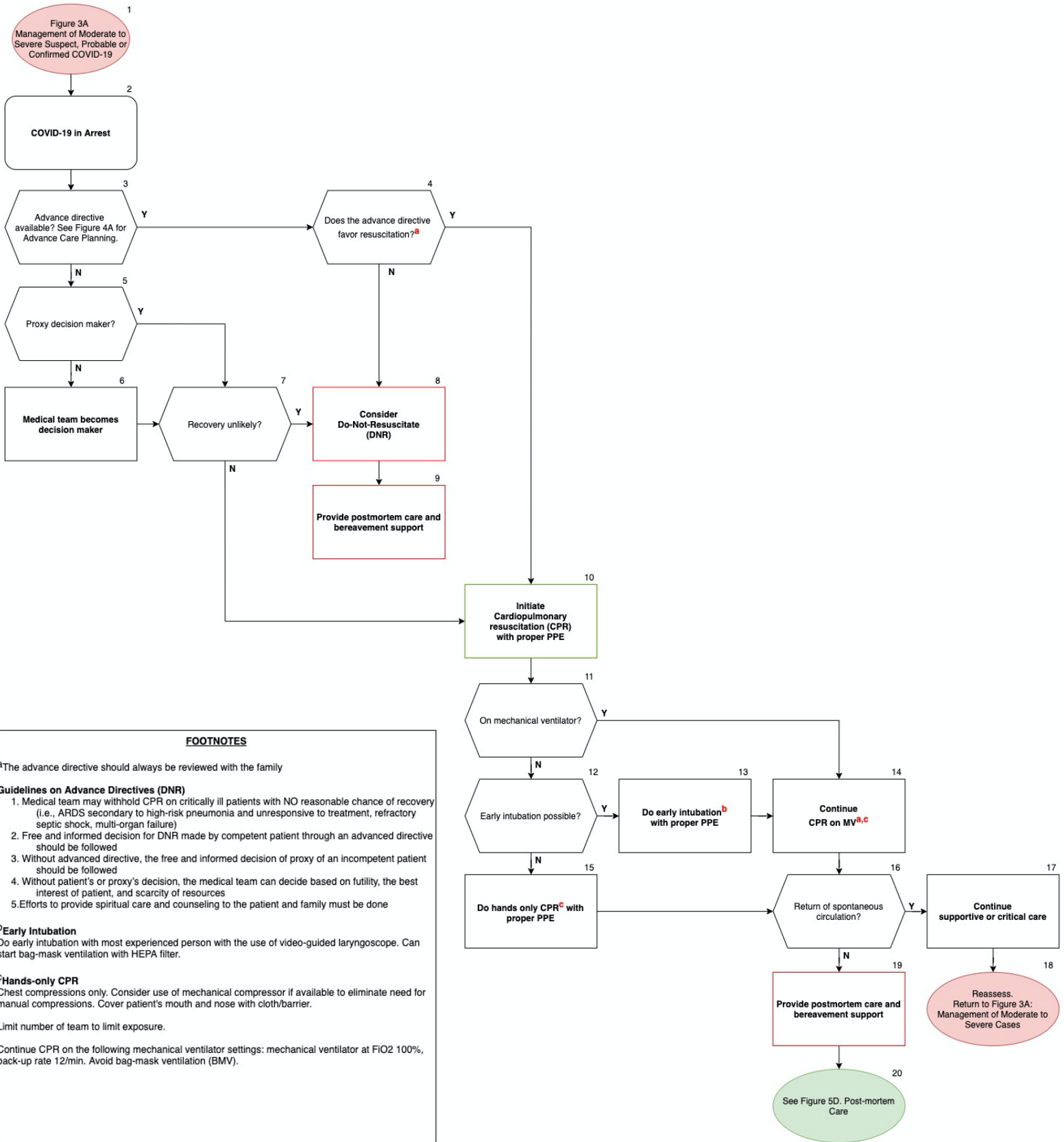


# FIGURE 3B. ADVANCED CARDIAC LIFE SUPPORT FOR CASES OF COVID-19

NOVEMBER 7, 2020



**FOOTNOTES**

<sup>a</sup>The advance directive should always be reviewed with the family

**Guidelines on Advance Directives (DNR)**

1. Medical team may withhold CPR on critically ill patients with NO reasonable chance of recovery (i.e., ARDS secondary to high-risk pneumonia and unresponsive to treatment, refractory septic shock, multi-organ failure)
2. Free and informed decision for DNR made by competent patient through an advanced directive should be followed
3. Without advanced directive, the free and informed decision of proxy of an incompetent patient should be followed
4. Without patient's or proxy's decision, the medical team can decide based on futility, the best interest of patient, and scarcity of resources
5. Efforts to provide spiritual care and counseling to the patient and family must be done

**<sup>b</sup>Early Intubation**

Do early intubation with most experienced person with the use of video-guided laryngoscope. Can start bag-mask ventilation with HEPA filter.

**<sup>c</sup>Hands-only CPR**

Chest compressions only. Consider use of mechanical compressor if available to eliminate need for manual compressions. Cover patient's mouth and nose with cloth/barrier.

Limit number of team to limit exposure.

Continue CPR on the following mechanical ventilator settings: mechanical ventilator at FIO2 100%, back-up rate 12/min. Avoid bag-mask ventilation (BMV).