## Severe Illness

### Critically Ill Patients

*Hospitalized, ICU-based*

- Patients requiring ventilatory and/or circulatory support; also includes patients requiring high-flow nasal cannula, or higher concentrations of oxygen by mask

### Chloroquine or hydroxychloroquine (with or without azithromycin) is not recommended outside of approved clinical trials or where other indications would justify its use

### Lopinavir/ritonavir is not recommended outside of approved clinical trials

### Remdesivir* is not recommended outside of approved clinical trials

### Empiric therapy with ceftriaxone 1-2g IV q24h x 5 days is recommended if there is concern for bacterial co-infection (Alternative for severe beta-lactam hypersensitivity: moxifloxacin 400 mg IV q24h x 5 days)

### Add azithromycin 500 mg IV q24h x 3 days to ceftriaxone empiric therapy if atypical infection is suspected (azithromycin is not needed if empiric therapy is moxifloxacin)

### De-escalate on the basis of microbiology results and clinical judgment

### Corticosteroids are not recommended outside of approved clinical trials unless there are other indications for its use

### Tocilizumab (IL-6 receptor blocker) is not recommended outside of approved clinical trials. If considered on an individual basis in patients with cytokine storm, it should only be done so with expert consultation (Infectious diseases and Hematology/Rheumatology)

*R currently unavailable in Canada

**e.g. asthma exacerbation, refractory septic shock, obstetric use for fetal lung maturation*  

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## Moderate Illness

### Moderately Ill Patients

*Hospitalized, ward-based*

- Patients requiring low-flow supplemental oxygen

### Chloroquine or hydroxychloroquine (with or without azithromycin) is not recommended outside of approved clinical trials or where other indications would justify its use

### Lopinavir/ritonavir is not recommended outside of approved clinical trials

### Remdesivir* is not recommended outside of approved clinical trials

### Antibacterial therapy is not routinely recommended outside of approved clinical trials or where other indications would justify its use (e.g. suspected bacterial co-infection in COVID positive patients)

### Corticosteroids are not recommended outside of approved clinical trials unless there are other indications for its use

### Tocilizumab (IL-6 receptor blocker) is not recommended outside of approved clinical trials

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## Mild Illness

### Mildly Ill Patients

*Ambulatory, outpatient*

- Patients who do not require supplemental oxygen, intravenous fluids, or other physiological support

### Chloroquine or hydroxychloroquine (with or without azithromycin) is not recommended outside of approved clinical trials or where other indications would justify its use

### Lopinavir/ritonavir is not recommended outside of approved clinical trials

### Remdesivir* is not recommended outside of approved clinical trials

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Note: This document is dynamic and will be updated as changes to recommendations occur. The complete and most up-to-date version of the guidelines is available at [http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/clinical-care/treatments](http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/clinical-care/treatments)

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