VV ECMO CONSULT AND INITIATION GUIDELINES FOR COVID-19 PATIENTS

P/F Ratio <150

- P/F <150 on 70% fio2 or refractory respiratory acidosis pH<7.25 depsite receiving ARDSnet tx (TV 4-6ml/kg, peep>14, Flolan/Nitric, paralysis, proning)

NO →

-Initiate ARDSnet Protocols

-Reassess in 6hrs

Exclusion Criteria

- Age >60, vent>7 days, terminal condition, extra pulmonary coomorbidites outside of mild tranaminitis and AKI
- Diagnoses with very poor outcome in COVID19: CHF, Sepsis, Leukopenia, etc

YES →

No ECMO

Adequate Resources

- Do we have adequate resources to escalate care above what is needed to care for a prone and ventilated patient?

NO →

No ECMO

Initiate ECMO

- Patient continues to deteriorate with P/F <100
- CVICU intensivist group assumes care
- CVICU nursing to staff the patient
- If failling VV consider palliative vs. VA ECMO vs. continue VV