

Issued: 4/13/20

PEEP Management: COVID-19 Clinical Practice Guideline

- Initial PEEP should be set as explained in PEEP and Mechanics CPG and ARDSnet protocol on Clinician Portal
- If patient is hypoxic with Tidal Volume = 6 ml/kg and ideal PEEP from PV tool, perform the following:
 - Deep sedation, advancing to RASS -5 if needed; if no improvement then:
 - Initiate continuous paralysis (cisatracurium bolus 0.2mg/kg followed by infusion at 0-5 mcg/kg/min titrated to patient-ventilator synchrony); if no improvement then:
 - Initiate prone ventilation (see Prone SOP on Clinician Portal); high consideration for use early in severe ARDS (<36 hours from ARDS onset, start discussion of proning when P:F< 150, prone within 12 hours of FiO2 > 75%)

Author: Dr. Bambra