



Guidelines for Respiratory Management of PUI/ COVID+ pediatric patients

The following are a series of recommendations based on mitigation practices followed internationally balanced with pediatric considerations. There are currently no data driven recommendations for mitigation beyond what the DOH and CDC recommend for isolation and infection prevention.

This information is available on the COVID-19 Staff Resources Website

<https://www.mountsinai.org/about/preparedness/coronavirus/staff-resources/staff-clinical-guidelines-information>

Guidelines for Respiratory Management of PUI/COVID+ Pediatric Patients

- For children requiring aerosolizing treatments such as: nebulized treatments, deep suctioning, and chest physiotherapy, wear an N95 respirator, gown, and gloves. See MSHS PPE Guide that can be found on the [COVID-19 Staff Resources Website](https://www.mountsinai.org/about/preparedness/coronavirus/staff-resources/staff-clinical-guidelines-information).
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- Routine nursing and physician care should be coordinated to minimize staff physical presence in the room.
- When possible, use albuterol treatments administered via HFA with spacer to reduce virion aerosolization.
- Attempt to maintain a 0.5 meter (2 feet or more distance from the patient's mask) when in the room.
- Nebulized treatments should be stopped (turn off flow) during physician examination, routine nursing care and during chest physiotherapy.
- Whenever possible, do not use high flow nasal cannula (HFNC) on these patients. Non-invasive support should be restricted to CPAP or BIPAP administered by full/partial face mask. A surgical mask can be placed on patients using a BIPAP/NCPAP mask to reduce aerosolization.
- There is **NO** recommendation for early intubation in pediatric patients. Routine clinical practice and individual clinical judgement should be followed. Non-invasive ventilation is an effective strategy to reduce the likelihood of intubation.
- There is **NO** recommendation for rapid sequence induction (RSI).

This policy is subject to change based upon updated information from the CDC, NYS Department of Health, and other sources.

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