

# COVID-19 Oxygen Requirements at Henry Ford Hospital for patients and care units

- Patients who have been admitted to the ICU, placed on mechanical ventilation, and successfully extubated can be transferred to the GPU on  $\leq 10$  Liters after being at this level of oxygen for 24 hours.
- Patients who are DNAR/DNI and currently on an Optiflow™ (Heated High Flow Nasal Cannula - HHFNC) device should be converted to a Salter® (high flow) device or a Venti-mask for transfer to the GPU.
- Patients who are DNAR/DNI and not currently on high flow oxygen should be maintained on a GPU with oxygen titrated up as needed to a Salter® device but should not be placed on a HHFNC device.
- For patients currently on the GPU who have worsening oxygen needs  $\geq 6$  Liters, the provider should notify the MICU triage fellow; however, these patients might not transfer to the ICU immediately given ICU bed availability.
  - Pre-COVID at HFH a patient requiring non-rebreather mask had a 2-hour time limit to resolve or be transferred from a GPU to an ICU bed. In this COVID epidemic this is no longer the case. They may not be transferred depending on the situation.
- Consider awake prone positioning if no contraindications; please consult with the Critical Care Pulmonary Fellow for further guidance.