

# NS Health COVID-19 Medication Recommendations

<b>First-line</b>	Baricitinib	Use in individuals with moderate, severe, or critical COVID-19. To be ordered by a designated prescriber while in a prioritization phase <sup>1</sup> .
	Dexamethasone	Use in individuals with SpO2 less than or equal to 94% on room air or supplemental oxygen, or mechanical ventilation (including ECMO).
	Inhaled Budesonide	Use in individuals with non-severe symptomatic COVID-19 (do not require: new or additional supplemental oxygen, intravenous fluids, or physiological support) within 14 days of symptom onset.
	Nirmatrelvir/ ritonavir	Use in individuals with non-severe symptomatic COVID-19, confirmed by a positive COVID-19 test, who are at high risk for progression to severe disease. To be ordered by a designated prescriber while in a prioritization phase <sup>1</sup> . Consider prescribing within 7 days of departure in travelers who meet all non-severe therapy criteria except: a positive test, presence of non-severe symptoms, and symptom onset within 5 days. To be ordered by a designated prescriber while in a prioritization phase <sup>1</sup> .
	Remdesivir <sup>2</sup>	<b>Non-severe disease:</b> Use in individuals with non-severe symptomatic COVID-19, confirmed by a positive COVID-19 test, who are at high risk for progression to severe disease. To be ordered by a designated prescriber while in a prioritization phase <sup>1</sup> after consideration for other available therapeutics. <b>Moderate-severe disease:</b> Use in hospitalized patients with symptomatic moderate to severe COVID-19. To be ordered by a designated prescriber while in a prioritization phase <sup>1</sup> .
	Tocilizumab	Use in hospitalized patients with severe COVID-19, SpO2 less than or equal to 92% on room air or supplemental oxygen, and systemic inflammation (e.g.: CRP >75 mg/L). To be ordered by a designated prescriber while in a prioritization phase <sup>1</sup> .
<b>Do NOT Recommend</b>	Bamlanivimab, Casirivimab/imdevimab, Colchicine, Fluvoxamine, Ivermectin, Sarilumab, Sotrovimab, Tixagevimab/cilgavimab	

**COVID Severity Definitions:** **Asymptomatic:** No COVID-19 symptoms. **Non-severe:** *Mild illness* = COVID-19 symptoms WITHOUT evidence of lower respiratory disease (e.g.: shortness of breath, dyspnea, or abnormal chest imaging) AND SpO2 ≥94% OR no change from oxygen saturation at baseline, *Moderate illness* = Evidence of lower respiratory disease (e.g.: shortness of breath, dyspnea, or abnormal chest imaging) AND SpO2 ≥ 94% OR no change from baseline. **Severe:** SpO2 <94% on room air or supplemental oxygen. **Critical illness:** Respiratory failure, septic shock, and/or multiple organ dysfunction.

**1.** Prioritization phase is in place to ensure sustainability and appropriate use during a time of rapidly changing evidence and supply. **2.** Recommendation for use varies depending on COVID-19 disease severity. **3.** Severe Immunocompromise: Primary immunodeficiency disorder (click [link](#)), Hematologic cancer patients undergoing treatment, Chimeric antigen receptor cell therapy recipients in the last 12 months, Hematopoietic stem cell transplantation in the last 24 months, or if beyond 24 months, currently receiving treatment for chronic graft-vs-host disease, Solid organ transplant recipient currently taking immunosuppressive medication(s), Profoundly immunosuppressive medication(s), i.e.: anti-B cell therapy (monoclonal antibodies targeting B-cell antigens such as CD19, CD20, CD22, CD30 or BAFF [e.g., ocrelizumab, rituximab, ofatumumab, alemtuzumab, obinutuzumab, blinatumomab, daratumumab, basiliximab, brentuximab, belimumab]) or anti-T cell therapy (anti-thymocyte globulins). **4.** Cardiovascular disease: History of myocardial infarction, unstable coronary artery disease, heart failure, coronary artery bypass graft, arrhythmia, cardiomegaly, cardiomyopathy, cardio-respiratory arrest, or other unstable cardiac condition.