Dear Joe Bloggs,

Welcome to your Evidence Update email from KnowledgeShare. The resources listed below have been chosen based on the interests you have provided. I hope they are useful. Please contact me via email if you would like a copy of any of the journal articles. If you would like to change the interests we have listed, stop receiving the notifications, or request a search on a specific topic, please don't hesitate to let me know.

**Covid-19**

**Original Research**

**A Trial of Lopinavir-Ritonavir in Adults Hospitalized with Severe Covid-19.**
[No therapeutics have yet been proven effective for the treatment of severe illness caused by SARS-CoV-2. In hospitalized adult patients with severe Covid-19, no benefit was observed with lopinavir–ritonavir treatment beyond standard care. Future trials in patients with severe illness may help to confirm or exclude the possibility of a treatment benefit.]
*Freely available online*

**Association of Cardiac Injury With Mortality in Hospitalized Patients With COVID-19 in Wuhan, China.**
[In this cohort study of 416 consecutive patients with confirmed COVID-19, cardiac injury occurred in 19.7% of patients during hospitalization, and it was one independent risk factor for in-hospital mortality.]
*Freely available online*

**Opinion**

**Case-Fatality Rate and Characteristics of Patients Dying in Relation to COVID-19 in Italy.**
[After China, Italy now has the second largest number of COVID-19 cases and also has a very high case-fatality rate. This Viewpoint reviews the Italian experience with COVID-19 with an emphasis on fatalities.]
*Freely available online*

**Original Research**

**Clinical and virological data of the first cases of COVID-19 in Europe: a case series.**
Lescure F-X. *The Lancet Infectious Diseases* 2020;:doi.org/10.1016/S1473-3099(20)30200-0.
We illustrated three different clinical and biological types of evolution in five patients infected with SARS-CoV-2 with detailed and comprehensive viral sampling strategy. We believe that these findings will contribute to a better understanding of the natural history of the disease and will contribute to advances in the implementation of more efficient infection control strategies.

**Freely available online**

**Clinical characteristics of 113 deceased patients with coronavirus disease 2019: retrospective study.**
Chen T. BMJ 2020;368:m1091.
[Severe acute respiratory syndrome coronavirus 2 infection can cause both pulmonary and systemic inflammation, leading to multi-organ dysfunction in patients at high risk. Acute respiratory distress syndrome and respiratory failure, sepsis, acute cardiac injury, and heart failure were the most common critical complications during exacerbation of covid-19.]

**Clinical characteristics of 24 asymptomatic infections with COVID-19 screened among close contacts in Nanjing, China**
[This study conducted an epidemiological investigation among close contacts of COVID-19 patients in Nanjing, Jiangsu Province, China and identified 24 asymptomatic carriers. Researchers sought to delineate the clinical characteristics and the transmission potential of asymptomatic infections.]

**Freely available online**

**Clinical characteristics of refractory COVID-19 pneumonia in Wuhan, China**
Clinical Infectious Diseases 2020;:https://doi.org/10.1093/cid/ciaa270.
[This retrospective study aimed to clarify the characteristics of patients with refractory COVID-19. In this study, refractory patient were more likely to receive oxygen therapy, ventilator support and a variety of adjunctive agents, indicating the treatment insensitivity for these patients and resulting in a delay of the clinical course.]

**Freely available online**

**Clinical Features of 69 Cases with Coronavirus Disease 2019 in Wuhan, China**
[This study reviewed 69 patients who were hospitalized in Union hospital in Wuhan between January 16 to January 29, 2020. All patients were confirmed to be infected with SARS-CoV-2 and the final date of follow-up was February 4, 2020.]

**Freely available online**

**Clinical findings in a group of patients infected with the 2019 novel coronavirus (SARS-CoV-2) outside of Wuhan, China: retrospective case series.**
Xu XW. BMJ 2020;368:m606.
[To study the clinical characteristics of patients in Zhejiang province, China, infected with the 2019 severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) responsible for coronavirus disease 2019 (covid-2019).]
Clinical findings in a group of patients infected with the 2019 novel coronavirus (SARS-CoV-2) outside of Wuhan, China: retrospective case series.

BMJ 2020;368:m792.

Systematic Review / Meta-Analysis

Salehi S. American Journal of Roentgenology 2020;;doi: 10.2214/AJR.20.23034. [This systematic review of current literature on COVID-19 provides insight into the initial and follow-up CT characteristics of the disease. A combination of chest CT and repeat laboratory testing may be beneficial for COVID-19 diagnosis in the setting of strong clinical suspicion, including individuals showing typical clinical manifestations and those with a history of exposure.]

Freely available online

Original Research

Coronaviruses and the cardiovascular system: acute and long-term implications.
Xiong T-Y. European Heart Journal 2020;;ehaa231. [The present COVID-19 outbreak emphasizes the need for greater awareness of the immediate and long-term cardiovascular implications of viral infection and the significant gaps in knowledge that future research will need to address.]

Freely available online

Opinion

COVID-19 and Angiotensin-Converting Enzyme Inhibitors and Angiotensin Receptor Blockers What Is the Evidence?
Patel AB. JAMA 2020;;doi:10.1001/jama.2020.4812. [This viewpoint reviews speculation that these medicines might worsen clinical outcomes for patients with COVID-19; and summarises guidance from specialty societies to continue these drugs in patients who need them pending more definitive evidence of harm.]

Freely available online

Covid-19 and the Stiff Upper Lip — The Pandemic Response in the United Kingdom
Hunter D J. The New England Journal of Medicine 2020;;DOI: 10.1056/NEJMp2005755. [In the UK, many clinicians and scientists have been pushing the panic button, but the alarm, if heard, was not acted on publicly until the third week of March.]

Freely available online

Original Research

COVID-19 infection in children.
Sinha IP. The Lancet Respiratory Medicine 2020;;doi.org/10.1016/S2213-2600(20)30152-1. [With rates of hospitalisation and mortality from novel coronavirus disease 2019 (COVID-19) increasing, there is understandable concern across the UK for medical professionals and the
general public. We hope to highlight the challenges faced by children and health-care professionals involved in their care, and propose key strategies to address these challenges.

Freely available online

**COVID-19 Infection: Implications for Perioperative and Critical Care Physicians**
Greenland J R. *Anesthesiology* 2020; doi:https://doi.org/10.1097/ALN.0000000000003303.
[This review provides a comprehensive summary of the evidence currently available to guide management of critically ill patients with COVID-19. The authors draw on literature from other viral epidemics, treatment of acute respiratory distress syndrome, and recent publications on COVID-19, as well as guidelines from major health organizations.]
Freely available online

**COVID-19 pandemic: perspectives on an unfolding crisis**
[There are some reports regarding patients with COVID-19 presenting with gastrointestinal symptoms that mimic surgical diseases, specifically a pancreatitis-like clinical presentation.]
Freely available online

**COVID-19: a recommendation to examine the effect of hydroxychloroquine in preventing infection and progression**
[This article discusses the urgent need to identify safe and effective drugs for treatment. Chloroquine (CQ) exhibits a promising inhibitory effect. However, the clinical use of CQ can cause severe side effects. The authors propose that hydroxychloroquine (HCQ), which exhibits an antiviral effect highly similar to that of CQ, could serve as a better therapeutic approach.]
Freely available online

**Effect of gastrointestinal symptoms on patients infected with COVID-19.**
[The study suggests that gastrointestinal symptoms (GI) symptoms are common clinical symptoms in patients with novel coronavirus-infected pneumonia (NCIP). Among nonmedical staff, women are more likely to have GI symptoms, accompanied by higher inflammatory levels and poorer liver function. However, no significant correlation between GI symptoms and clinical features was observed among medical staff.]
Freely available online

**Opinion**

**How do we plan hematopoietic cell transplant and cellular therapy with the looming COVID-19 threat?**
[In this commentary, the authors discuss that it is still too early to forecast the risk of infection and disease severity of COVID-19 in HCT patients, but it likely to follow the deleterious course previously reported by other community-acquired respiratory viruses.]
Freely available online
Evidence-Based Summary

Little P. BMJ 2020;368:m1185.
[Reasonable evidence exists of a link between NSAIDs and both respiratory and cardiovascular adverse effects in several settings, but so far we have no evidence relating specifically to people with covid-19. Pending further research, a pragmatic and cautionary approach would be for the public to avoid these plausible harms: regular NSAID use should probably not be recommended as the first line option for managing the symptoms of covid-19.]

Original Research

Planning and provision of ECMO services for severe ARDS during the COVID-19 pandemic and other outbreaks of emerging infectious diseases.
[This review highlights 10 key components of an ECMO action plan considering organisation of equipment, facilities, and systems, with practical recommendations for health centres to ensure appropriate training, capacity, and planning, depending on local priorities and resources.]
Freely available online

Evidence-Based Summary

Potential Effects of Coronaviruses on the Cardiovascular System: A Review.
[Coronavirus disease 2019 is associated with a high inflammatory burden that can induce vascular inflammation, myocarditis, and cardiac arrhythmias. Extensive efforts are underway to find specific vaccines and antivirals against SARS-CoV-2. Meanwhile, cardiovascular risk factors and conditions should be judiciously controlled per evidence-based guidelines.]
Freely available online

Original Research

Prepare to adapt: Blood supply and transfusion support during the first 2 weeks of the 2019 Novel Coronavirus (COVID-19) pandemic affecting Washington State.
[This brief report describes the response from the hospital, the regional blood center, and the hospital-based transfusion services to the events that took place in the community during the initial phases of the pandemic.]
Available with an NHS OpenAthens password for eligible users

Recommendations for the prevention, mitigation and containment of the emerging SARS-CoV-2 (COVID-19) pandemic in haemodialysis centres.
[This article highlights that the management of patients on dialysis affected by COVID-19 must be carried out according to strict protocols to minimize the risk for other patients and personnel taking care of these patients. Measures of prevention, protection, screening, isolation and distribution have been shown to be efficient in similar settings.]

Freely available online

Report

**Recurrence of positive SARS-CoV-2 RNA in COVID-19: A case report.**
Chen D. *International Journal of Infectious Diseases*
2020;https://doi.org/10.1016/j.ijid.2020.03.003.
[This article reports a confirmed case of COVID-19 whose oropharyngeal swab test of SARS-CoV-2 RNA turned positive in convalescence. This case highlights the importance of active surveillance of SARS-CoV-2 RNA for infectivity assessment]

Freely available online

Original Research

**SARS-CoV2: should inhibitors of the renin–angiotensin system be withdrawn in patients with COVID-19?**
[This article tries to shed light on what is known and unknown regarding the RAAS and SARS-CoV2 interaction. Based on currently available data and in view of the overwhelming evidence of mortality reduction in cardiovascular disease, ACE-I and ARB therapy should be maintained or initiated in patients with heart failure, hypertension, or myocardial infarction according to current guidelines as tolerated, irrespective of SARS-CoV2.]

Freely available online

**Skin damage among healthcare workers managing coronavirus disease-2019**
Lan J. *Journal of the American Academy of Dermatology*
2020;doi.org/10.1016/j.jaad.2020.03.014.
[This study demonstrated that the prevalence of skin damages of first-line healthcare workers was very high. Researchers found that longer exposure time was a significant risk factor, which highlights that the working time of first-line staff should be arranged reasonably. Besides, prophylactic dressings could be considered to alleviate the device-related pressure injuries, according to a prior study.]

Freely available online

**Successful recovery of COVID-19 pneumonia in a renal transplant recipient with long-term immunosuppression**
[This study reports the clinical features and therapeutic course of the first reported renal transplant recipient with confirmed COVID-19 pneumonia.]

Freely available online

**Temporal Changes of CT Findings in 90 Patients with COVID-19 Pneumonia: A Longitudinal Study.**
[This prospective longitudinal study systematically described the temporal changes of CT findings in COVID-19 pneumonia and summarized the CT findings at the time of hospital discharge.]

Freely available online

**The clinical characteristics of pneumonia patients co-infected with 2019 novel coronavirus and influenza virus in Wuhan, China**
[This study describes the clinical characteristics of patients who got infected with COVID-19 as well as influenza virus. Common symptoms at onset of illness included fever (5 [100%] patients), Cough (5 [100%] patients), shortness of breath (5 [100%] patients), nasal tampon (3 [60%] patients), pharyngalgia (3 [60%] patients), myalgia (2 [40%] patients), fatigue (2 [40%] patients), headache (2 [40%] patients), and expectoration (2 [40%] patients).]

Freely available online

**The Effects of Social Support on Sleep Quality of Medical Staff Treating Patients with Coronavirus Disease 2019 (COVID-19) in January and February 2020 in China**
[This observational study showed that medical staff in China who were treating patients with COVID-19 infection during January and February 2020 had levels of anxiety, stress, and self-efficacy that were dependent on sleep quality and social support.]

Freely available online

**There may be virus in conjunctival secretion of patients with COVID-19**
[This article discusses that the main route of transmission is through respiratory droplets and contact (Burki 2020). It is not clear whether the 2019-nCoV is transmitted through the mucous membrane of the eye. The human cornea and conjunctiva express ACE2 receptor, which can theoretically bind to the 2019-nCoV and cause infection.]

Freely available online

**Transmission potential and severity of COVID-19 in South Korea**
[This study reported estimates of the transmission potential of COVID-19 in Korea based on the trajectory of the epidemic, which was reconstructed by using the dates of onset of the first reported cases in Korea. The results indicate early sustained transmission of COVID-19 in South Korea and support the implementation of social distancing measures to rapidly control the outbreak.]

Freely available online

**What Should Gastroenterologists and Patients Know About COVID-19?**
[This study aims to provide a brief overview of COVID-19 for the gastroenterology community based on currently available information to help assist with addressing our
patients’ questions and concerns. Of note for gastroenterologists, Patients may complain of gastrointestinal symptoms such as nausea or diarrhea.

Available with an NHS OpenAthens password for eligible users

Professional Development

**Respironics V60/V60 Plus Ventilator: User Manual.**
Philips Healthcare; 2020.
http://incenter.medical.philips.com/doclib/enc/11191054/Respironics_V60_V60_Plus_Ventilator_User_Manual_(ENG._NON-USA)_-_1047358_U.pdf%3ffunc%3ddoc.Fetch%26nodeid%3d11191054
[This manual is a reference only. It is not intended to supersede your institution’s protocol regarding the safe use of assisted ventilation.]

Freely available online

Guideline

**Advice on COVID-19 in patients with Sickle Cell Disease and Thalassaemia**
National Haemoglobinopathy Panel ; 2020.
[V6 21st March 2020]
Freely available online

**BSG expanded consensus advice for the management of IBD during the COVID-19 pandemic**
British Society of Gastroenterology (BSG); 2020.
[Updated 23rd March 2020]
Freely available online

News

**Chloroquine and Hydroxychloroquine not licensed for coronavirus (COVID-19) treatment.**
Medicines and Healthcare Products Regulatory Agency (MHRA); 2020.
[Chloroquine and hydroxychloroquine are not licensed to treat COVID-19 related symptoms or prevent infection. Until we have clear, definitive evidence these treatments are safe and effective for the treatment of COVID-19, they should only be used for this purpose within a clinical trial.]
Freely available online

Evidence-Based Summary

**Chloroquine and hydroxychloroquine: Current evidence for their effectiveness in treating COVID-19.**
Further research should address the optimal dose and duration of treatment, and explore side effects and long-term outcomes. There is a higher risk of side effects in the presence of renal and liver impairment, and there have been isolated reports of COVID-19 disease-causing renal and hepatic injury. Over twenty in vivo clinical trials have already been registered to test the use of chloroquine and hydroxychloroquine for the treatment of COVID-19.

Freely available online

Guideline

**Clinical guide for the management of rheumatology patients during the coronavirus pandemic**
[Published 16th March 2020]
Freely available online

Report

**Clinical management of severe acute respiratory infection when novel coronavirus (nCoV) infection is suspected.**
World Health Organization (WHO); 2020.
[This WHO document is intended for clinicians taking care of hospitalised adult and paediatric patients with severe acute respiratory infection (SARI) when a nCoV infection is suspected. It is not meant to replace clinical judgment or specialist consultation but rather to strengthen clinical management of these patients and provide to up-to-date guidance.
Best practices for SARI including IPC and optimized supportive care for severely ill patients are essential.]
Freely available online

Systematic Review / Meta-Analysis

**Cochrane Special Collections: Coronavirus (COVID-19): evidence relevant to critical care.**
Cochrane Database of Systematic Reviews; 2020.
[This Special Collection has been created in response to the COVID-19 pandemic, and is regularly updated. It aims to ensure immediate access to systematic reviews most directly relevant to the management of people hospitalized with severe acute respiratory infections. It includes reviews that are relevant to the WHO interim guidance, those identified as relevant by Cochrane Acute and Emergency Care, and also draws on the knowledge of Cochrane groups in affected regions.]
Cochrane Special Collections: Coronavirus (COVID-19): infection control and prevention measures
Cochrane Database of Systematic Reviews; 2020.
[This Special Collection has been created in response to the COVID-19 pandemic and is regularly updated. It aims to ensure immediate access to systematic reviews most directly relevant to the prevention of infection. It includes reviews that are relevant to the WHO interim guidance, as well as other potentially relevant reviews from three Cochrane Networks and also draws on the knowledge of Cochrane groups in affected regions.]
Freely available online

Evidence-Based Summary

Comparative accuracy of oropharyngeal and nasopharyngeal swabs for diagnosis of COVID-19.
[The only current COVID-19 specific data comparing OP and NP comes from two low quality, non-peer-reviewed studies and should be viewed with caution. It is not possible to accurately assess sensitivity from the existing data and there are no data to assess the diagnostic impact of combining both tests.]
Freely available online

Guideline

Coronavirus (COVID-19) infection and pregnancy
Royal College of Obstetricians and Gynaecologists (RCOG); 2020.
[Version 4: Published Saturday 21 March 2020 - guidance for healthcare professionals on coronavirus (COVID-19) infection in pregnancy, published by the RCOG, Royal College of Midwives, Royal College of Paediatrics and Child Health, Public Health England and Health Protection Scotland.]
Freely available online

Professional Development

Coronavirus: learning for the health and care workforce.
Health Education England (HEE); 2020.
https://www.e-lfh.org.uk/programmes/coronavirus/
[This programme has been created by Health Education England e-Learning for Healthcare (HEE e-LfH) in response to the Coronavirus (COVID-19) global pandemic. The programme includes key materials to help the health and care workforce respond to Coronavirus. Courses in the Coronavirus programme currently include:
Guideline

**COVID 19 technical guidance – Providing care for children with acute respiratory infections.**
World Health Organization (WHO); 2020.
[WHO has developed some guidelines, materials and apps which frontline health-care providers may find useful when providing care for children with severe acute respiratory infections when COVID-19 is suspected. The WHO “Pocket book of hospital care for children” is available in several languages.]

**COVID-19 - guidance for paediatric services**
Royal College of Paediatrics and Child Health (RCPCH); 2020.
https://www.rcpch.ac.uk/resources/covid-19-guidance-paediatric-services
[This guidance has been prepared to provide members / health professionals working in paediatrics and child health with advice around the ongoing outbreak of COVID-19. It also provides signposts and links to further information.
We will update this guidance on a regular basis as new data becomes available. We'll work with others to bring together the best available information. Advice and guidance should be used alongside local operational policies developed by your organisation.]
*Freely available online*

**COVID-19 -Identifying patients for shielding in England**
British Society for Rheumatology; 2020.
[See also Risk stratification of patients with autoimmune rheumatic diseases at https://www.rheumatology.org.uk/Portals/0/Documents/COVID19_risk_scoring_guide.pdf?ver=2020-03-24-171133-657]
*Freely available online*

**COVID-19 Airway Management Principles**
Faculty of Intensive Care Medicine (FICM); 2020.
https://icmanaesthesiacovid-19.org/airway-management
[This is a consensus document brought together at short notice to advise on airway management for patients with COVID-19. It applies to all those who manage the airway (‘airway managers’). It draws on several sources including relevant literature but more
immediately from information from clinicians practicing in China and Italy, and airway experts in the UK.
Faculty of Intensive Care Medicine, Intensive Care Society, Association of Anaesthetists and Royal College of Anaesthetists]

Freely available online

**COVID-19 Guidance: Provision of Sexual Services to the Community**
British Association for Sexual Health and HIV (BASHH); 2020.
[Guidance from the British Association for Sexual Health (BASHH) been informed through joint working with national reproductive health and HIV partner organisations.]

Freely available online

**COVID-19 rapid guideline: critical care.**
National Institute for Health and Care Excellence (NICE); 2020.
https://www.nice.org.uk/guidance/ng159
[The purpose of this guideline is to maximise the safety of patients who need critical care during the COVID-19 pandemic, while protecting staff from infection. It will also enable services to make the best use of NHS resources.]

Freely available online

**COVID-19 rapid guideline: delivery of systemic anticancer treatments.**
National Institute for Health and Care Excellence (NICE); 2020.
https://www.nice.org.uk/guidance/ng161
[The purpose of this guideline is to maximise the safety of patients with cancer and make the best use of NHS resources, while protecting staff from infection. It will also enable services to match the capacity for cancer treatment to patient needs if services become limited because of the COVID-19 pandemic.]

Freely available online

**COVID-19 rapid guideline: dialysis service delivery.**
National Institute for Health and Care Excellence (NICE); 2020.
https://www.nice.org.uk/guidance/ng160
[The purpose of this guideline is to maximise the safety of patients on dialysis, while protecting staff from infection. It will also enable dialysis services to make the best use of NHS resources and match the capacity of dialysis services to patient needs if these become limited because of the COVID-19 pandemic.]

**Evidence-Based Summary**

**COVID-19: a living systematic map of the evidence.**
EPPI-Centre; 2020.
[A living map of the evidence of studies on COVID-19 identified in MEDLINE and EMBASE,
that groups the evidence into broad themes.]
Freely available online

Toolkit

**COVID-19: information for the respiratory community.**
British Thoracic Society (BTS); 2020.
[Information, guidance and resources to support the respiratory community during the COVID-19 pandemic. This page is updated as new information becomes available.]
Freely available online

News

**EMA gives advice on the use of non-steroidal anti-inflammatories for COVID-19.**
European Medicines Agency; 2020.
[There is currently no scientific evidence establishing a link between ibuprofen and worsening of COVID-19. EMA is monitoring the situation closely and will review any new information that becomes available on this issue in the context of the pandemic.]
Freely available online

Guideline

**GI Endoscopy Activity and COVID-19: Next steps**
British Society of Gastroenterology (BSG); 2020.
[Version 2.1, updated 26th March 2020
The BSG has produced recommendations based on the best available evidence from China, Italy and the USA that show:
The virus causing COVID-19 is potentially present in all GI secretions.
That all endoscopic procedures, but particularly upper GI endoscopy, are aerosol generating procedures. (AGP)
That transmission can occur at the time of endoscopy.
The BSG has recommended that all but emergency procedures should stop immediately.
Updated]
Freely available online

**Guidance for antenatal screening and ultrasound in pregnancy in the evolving coronavirus (COVID-19) pandemic**
Royal College of Obstetricians and Gynaecologists (RCOG); 2020.
Freely available online
Guidance on routine immunization services during COVID-19 pandemic in the WHO European Region (2020).
World Health Organization (WHO); 2020.

[Any disruption of immunization services, even for short periods, will result in an accumulation of susceptible individuals, and a higher likelihood of vaccine-preventable diseases (VPD) outbreaks. Such outbreaks may result in VPD-related deaths and an increased burden on health systems already strained by the response to the COVID-19 outbreak.]

Guidance: COVID-19: background information
Public Health England (PHE); 2020.

[This document contains information for clinicians and the public on the epidemiology and virology of COVID-19, the infection caused by SARS-CoV-2.]
Freely available online

Guidance: COVID-19: infection prevention and control
Public Health England (PHE); 2020.

[This guidance outlines infection control procedures for healthcare providers assessing possible cases of COVID-19. It should be used in conjunction with local policies.]
Freely available online

Guidance: COVID-19: investigation and initial clinical management of possible cases
Public Health England (PHE); 2020.

[Information on case definitions, and the initial assessment and investigation of possible cases of COVID-19 infection.]
Freely available online

Guidance: COVID-19: personal protective equipment use for aerosol generating procedures
Public Health England (PHE); 2020.

[Guidance on the use of personal protective equipment (PPE) for aerosol generating procedures (AGPs). This guidance covers the donning (putting on) and doffing (taking off) of personal protective equipment (PPE) for aerosol generating procedures (AGPs).]
Freely available online
**Guidance: COVID-19: personal protective equipment use for non-aerosol generating procedures.**
Public Health England (PHE); 2020.

[Guidance on the use of personal protective equipment (PPE) for non-aerosol generating procedures (APGs). This guidance covers the donning (putting on) and doffing (taking off) of personal protective equipment (PPE) for non-aerosol generating procedures (AGPs).]

*Freely available online*

**Hospital readiness checklist for COVID-19.**
World Health Organization (WHO); 2020.

[This checklist has been prepared with the aim of supporting hospital managers and emergency planners, defining and initiating actions needed to ensure a rapid response to the COVID-19 outbreak. Hospitals at risk of increased health service demand should be prepared to initiate the implementation of each action promptly. The section on “Recommended reading” lists selected tools, guidelines and strategies relevant to each component, as well as other supporting documentation.]

**Information, guidance and resources supporting the understanding and management of Coronavirus (COVID-19)**
Faculty of Intensive Care Medicine (FICM); 2020.
https://icmanaesthesiacovid-19.org/

[Clinical guidance for intensive care and anaesthetics from the Faculty of Intensive Care Medicine, Intensive Care Society, Association of Anaesthetists and the Royal College of Anaesthetists]

*Freely available online*

**ISTH interim guidance on recognition and management of coagulopathy in COVID-19**
International Society on Thrombosis and Haemostasis (ISTH); 2020.
https://b-s-h.org.uk/media/18175/ith.pdf

[This pragmatic statement should be considered as interim guidance since clinical experience of managing this pandemic is increasing. The authors are certain that this statement will be modified with developing knowledge and therapeutics in managing COVID-19. The aim of this document is to provide risk stratification at admission for a COVID-19 patient and management of coagulopathy which may develop in some patients, based on easily available laboratory parameters.]

**Management of pregnant women with known or suspected COVID-19**
Faculty of Intensive Care Medicine; 2020.

[Commissioned from the Obstetric Anaesthetists’ Association (OAA) by the Faculty of Intensive Care Medicine, the Intensive Care Society, the Association of Anaesthetists and
Practical guidance for the prevention of thrombosis and management of coagulopathy and disseminated intravascular coagulation of patients infected with COVID-19

British Society for Haematology; 2020.
https://b-s-h.org.uk/media/18175/jth.pdf

[There is little international guidance on how to manage thrombotic risk, coagulopathy, and DIC in patients with COVID-19. This brief paper provides concise pragmatic guidance on management of both thrombotic risk and DIC. Version: 25th March Updated weekly]

Evidence available online

Rapidly managing pneumonia in older people during a pandemic.

[Conclusions: Interventions that affect mortality in pneumonia are of great significance for public health, particularly during the current pandemic. Rescue prescribing strategies, initiated by the patient at an early stage, could aid effective delivery of antimicrobials, significantly reduce hospital admissions, and reduce mortality.]

Evidence available online

SARS-CoV-2 viral load and the severity of COVID-19.

[We discuss the relationship of viral load and severity of the disease in SARs, SARS-CoV-2 and influenza, and provide a summary of sources that verify mortality of healthcare workers mortality across different countries.]

Scientific Advisory Group for Emergencies (SAGE); 2020.

[The Scientific Advisory Group for Emergencies (SAGE) provides scientific and technical advice to support government decision makers during emergencies. This page will be updated on a regular basis with the latest available evidence provided to SAGE.]

Evidence available online

Guideline

Severe Acute Respiratory Infections Treatment Centre.
World Health Organization (WHO); 2020.
https://www.who.int/publications-detail/severe-acute-respiratory-infections-treatment-centre
[This is the first edition of the practical manual to set up and manage a severe acute respiratory infection (SARI) treatment centre and a SARI screening facility in health-care facilities. The document has been developed to meet the operational needs emerging with the COVID-19 pandemic.]

**Toolkit**

**Specialty guides for patient management during the coronavirus pandemic.**
[These cover management of surgical, trauma and orthopaedic, critical care, acute diabetes, neuro trauma, non-CV, acute burns, cancer, emergency department, paediatric, & rheumatology patients, as well as anaesthesia service reorganisation and use of acute non-invasive ventilation.]
*Freely available online*

**Report**

**The COVID-19 risk communication package for healthcare facilities.**
World Health Organization (WHO); 2020.
https://iris.wpro.who.int/handle/10665.1/14482
[This WHO package of posters contains a series of simplified messages and reminders based on WHO’s more in-depth technical guidance on infection prevention and control in healthcare facilities in the context of COVID-19]
*Freely available online*

**Evidence-Based Summary**

**What is the effectiveness and safety of antiviral or antibody treatments for coronavirus?**
[The current evidence for the effectiveness and safety of antiviral therapies for coronavirus is inconclusive and suffers from a lack of well-designed prospective trials or observational studies, preventing any treatment recommendations from being made. However, it is clear that the existing body of evidence is weighted heavily towards ribavirin, which has not shown conclusive evidence of effectiveness and may cause harmful adverse events ...]

**What is the efficacy of standard face masks compared to respirator masks in preventing COVID-type respiratory illnesses in primary care staff?**
[Evidence provides cautious support for the use of standard surgical masks in non aerosol-generating procedures (AGPs). The studies were not done in COVID-19, and only one was in
the community setting. Masks are only one component of a complex intervention which must also include eye protection, gowns, behavioural and other measures.

Freely available online

**What is the evidence for anosmia (loss of smell) as a clinical feature of COVID-19?**

[The current evidence base to suggest changes in olfactory sensation is a feature of COVID-19 is limited and inconclusive. More evidence is required to establish whether there is a link between changes in olfaction and COVID-19; we therefore encourage clinicians to incorporate questions around loss of olfactory sensation into their clinical practice when assessing patients with suspected COVID-19.]

Freely available online

**Report**

**Coronavirus action plan.**
Department of Health and Social Care (DHSC); 2020.

[What the health and social care system across the UK has done to tackle the coronavirus (COVID-19) outbreak, and what it plans to do next.]

Freely available online