



COVID-19: KEEPING UP WITH A MOVING TARGET

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Arron Berry, RN, BSN, CCRN, PHRN, CFRN
Johns Hopkins – Lifeline Critical Care Transport
Nurse Clinician III
Baltimore, MD



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Arron Berry, RN, BSN, CCRN, PHRN, CFRN	None

Arron Berry has indicated that she will not be referencing the unlabeled or unapproved use of agents in today's presentation.

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Learning Objectives

- Discuss analgesia/sedation/neuromuscular blockade management in the COVID-19 patient population
- Discuss shock and hemodynamic management in the COVID-19 patient population





Thank You

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Analgesia, Sedation, and Neuromuscular Blockade

- Analgesia
 - Unusually high doses required for effect
- Sedation
 - Unusually high doses required for effect
- Neuromuscular blockade
- Medication shortages
 - Inhaled agents?



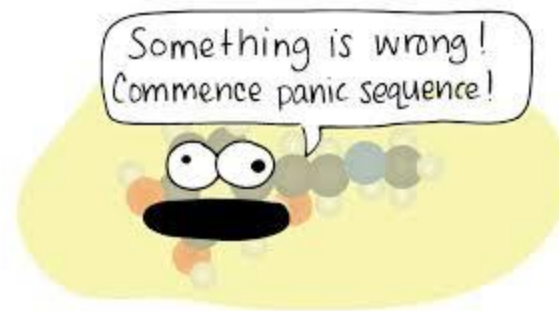
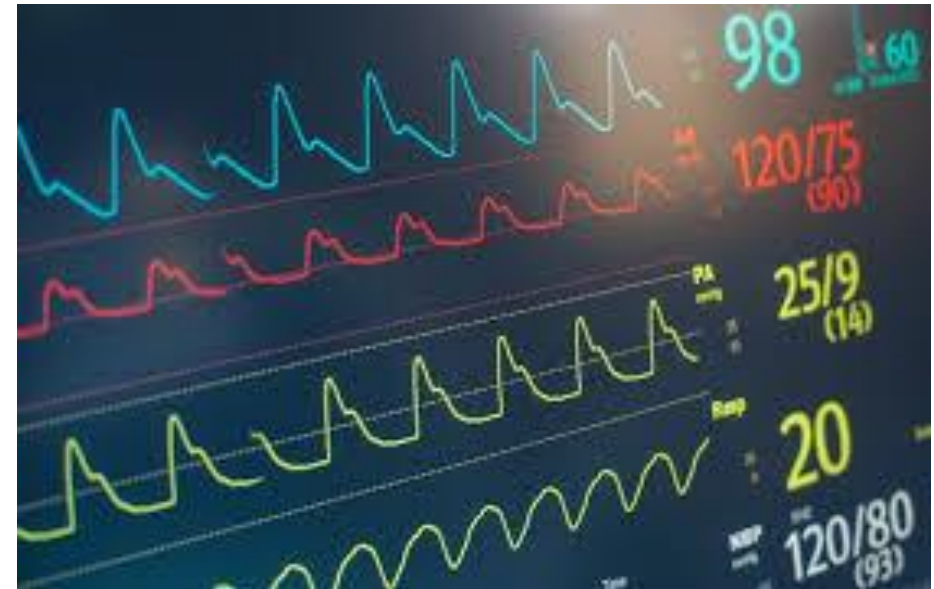
Shock in the COVID Patient

- Distributive shock
 - Sepsis, hyperinflammatory
- Cardiogenic shock
 - Acute cardiac injury
 - RV failure in ARDS
- Obstructive shock
 - PE
 - Hyperinflation
 - Pneumo
- Hypovolemic shock



Hemodynamic Management Strategies

- Hemodynamic goals
 - MAP 60-65
- Fluid resuscitation
 - Conservative and balanced
- Vasopressors
 - 1st line - norepi
 - 2nd line – vaso, epi



When All Else Fails.....



https://www.azfamily.com/news/continuing_coverage/coronavirus_coverage/a-ventilator-wasnt-enough-to-treat-him-for-covid-19-this-machine-became-his-last/article_38c7dc41-b7b9-5126-936d-3d745cd6eafc.html





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What are some complications with using inhaled agents?





For patients requiring neuromuscular blockade – is an infusion better than intermittent push dose?





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