


Greater Toronto Area (GTA) Clinical Practice Guidelines for Antimicrobial and Immunomodulatory Therapy in Adult Patients with COVID-19

Recommendations in this document apply to patients >18 years of age. For recommendations in special populations, refer to the [complete guidelines](#).

 There is limited clinical evidence to guide antiviral management for ill patients with COVID-19.



The guidelines recommend that infectious diseases consultation (where available) be obtained before any investigational treatment is offered to a patient with COVID-19 outside of a clinical trial, and that informed consent be obtained from the patient or substitute decision-maker.

SEVERITY OF ILLNESS

ANTIVIRAL THERAPY

ANTIBACTERIAL THERAPY

IMMUNOMODULATORY THERAPY

Critically Ill Patients

Hospitalized, ICU-based

Patients requiring ventilatory and/or circulatory support; also includes patients requiring high-flow nasal cannula, non-invasive ventilation, or higher concentrations of oxygen by mask

No recommendations can be made on use of **chloroquine** or **hydroxychloroquine** outside of approved clinical trials or where other indications would justify its use

Lopinavir/ritonavir is **not** recommended outside of approved clinical trials

Remdesivir* is **not** recommended outside of approved clinical trials

Empiric therapy with **ceftriaxone 1 g IV q24h x 5 days** is recommended if there is concern for bacterial co-infection (Alternative for severe beta-lactam hypersensitivity: moxifloxacin 400 mg IV q24h x 5 days)

Add azithromycin 500 mg IV q24h x 5 days to ceftriaxone empiric therapy if *Legionella* infection is suspected (azithromycin is not needed if empiric therapy is moxifloxacin)

De-escalate on the basis of microbiology results and clinical judgment

Corticosteroids should **not** be offered outside of approved clinical trials unless there are other indications for its use

Tocilizumab (IL-6 receptor blocker) should **not** be offered routinely outside of approved clinical trials; may be considered on an individual basis in patients with cytokine storm (with expert consultation)

Moderately Ill Patients

Hospitalized, ward-based

Patients requiring low-flow supplemental oxygen

Chloroquine or **hydroxychloroquine** (with or without azithromycin) is **not** recommended outside of approved clinical trials or where other indications would justify its use

Lopinavir/ritonavir is **not** recommended outside of approved clinical trials

Remdesivir* is **not** recommended outside of approved clinical trials

Antibacterial therapy is **not** routinely recommended outside of approved clinical trials or where other indications would justify its use

Corticosteroids should **not** be offered outside of approved clinical trials unless there are other indications for its use

Tocilizumab (IL-6 receptor blocker) is **not** recommended outside of approved clinical trials

Mildly Ill Patients

Ambulatory, outpatient

Patients who do not require supplemental oxygen, intravenous fluids, or other physiological support

* Currently unavailable in Canada

Note: This document is dynamic and will be updated as changes to recommendations occur. The complete and most up-to-date version of the guidelines is available at www.antimicrobialstewardship.com/covid-19.

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