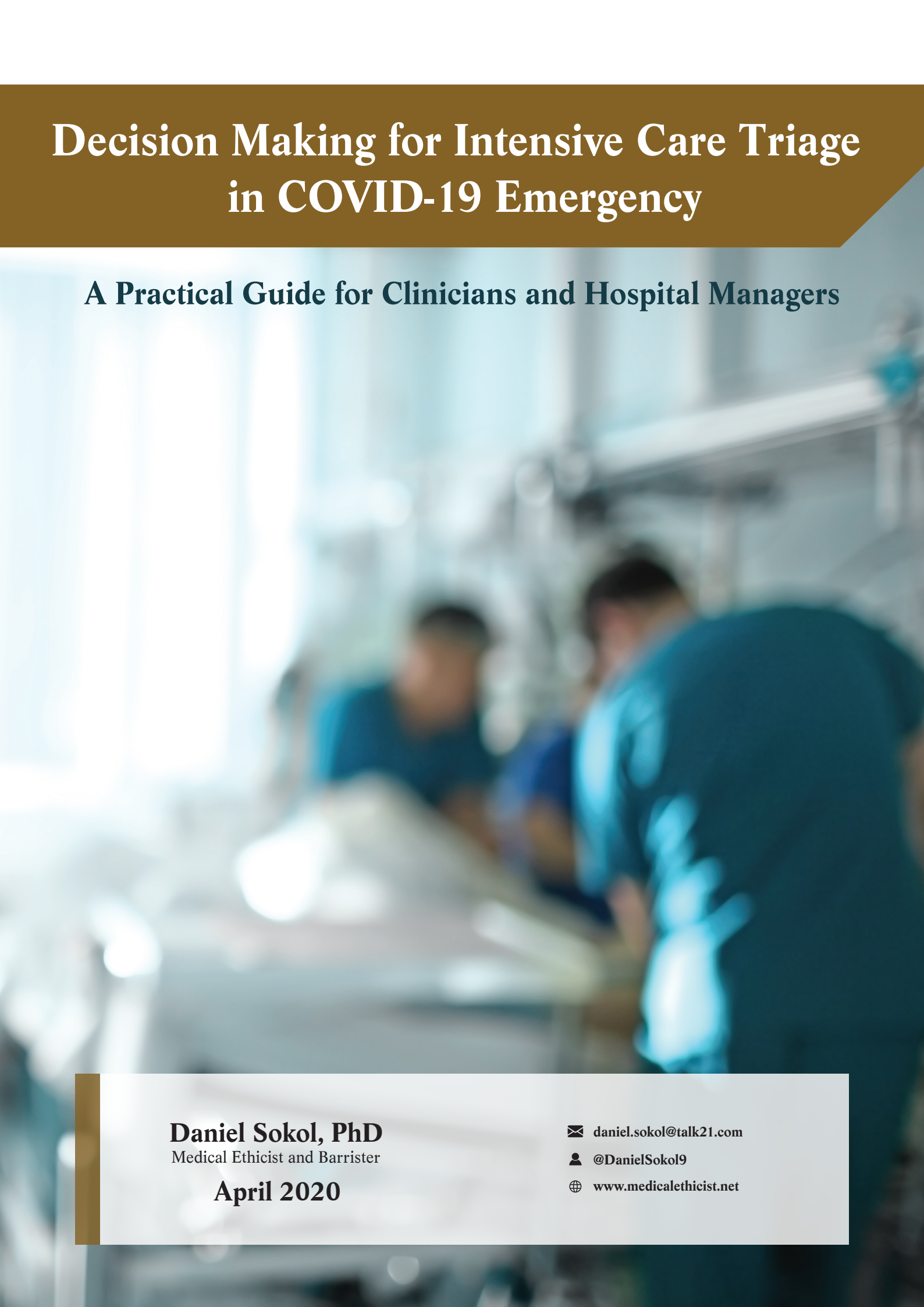
Decision Making for Intensive Care Triage in COVID-19 Emergency

A Practical Guide for Clinicians and Hospital Managers



Daniel Sokol, PhD
Medical Ethicist and Barrister

April 2020

daniel.sokol@talk21.com
@DanielSokol9
www.medicalethicist.net

If intensive care capacity is overwhelmed, triage decisions will be necessary.
The aim of triage is to save as many lives as possible.
Triage teams, which should include at least two intensive care doctors, will be responsible for making decisions using the following criteria:

1. **Clinical suitability for ICU admission (high, moderate, low)**
2. **Likely duration of stay in ICU (short, medium, long)**

CLINICAL SUITABILITY FOR ICU ADMISSION

This refers to the likelihood of surviving to hospital discharge. The assessment should be based on a clinical judgement of the patient's physiological reserve and ability to recover.

The patient should be classified into one of 3 priority groups:

1. High
2. Moderate
3. Low

This will determine which patients get admitted first. Low priority patients should be treated on the medical ward.

If several patients fall within either the 'high' or 'moderate' category, assess the patients' likely duration of ICU stay to determine who gets priority within each group.

LIKELY DURATION OF ICU STAY

The triage team should estimate how long a patient will require intensive care facilities. There are 3 categories: short (2 days or less), medium (3-7 days), long (8 days+).

Most COVID-19 patients will fall in the 'long' category.

Within the same 'clinical suitability' priority group, those with the shortest anticipated ICU stay will be admitted first.

If patients have the same priority category and the same length of ICU stay, the decision should be based on the date of admission to the institution. Patients admitted earlier should get priority.

The only exceptions to this rule are:

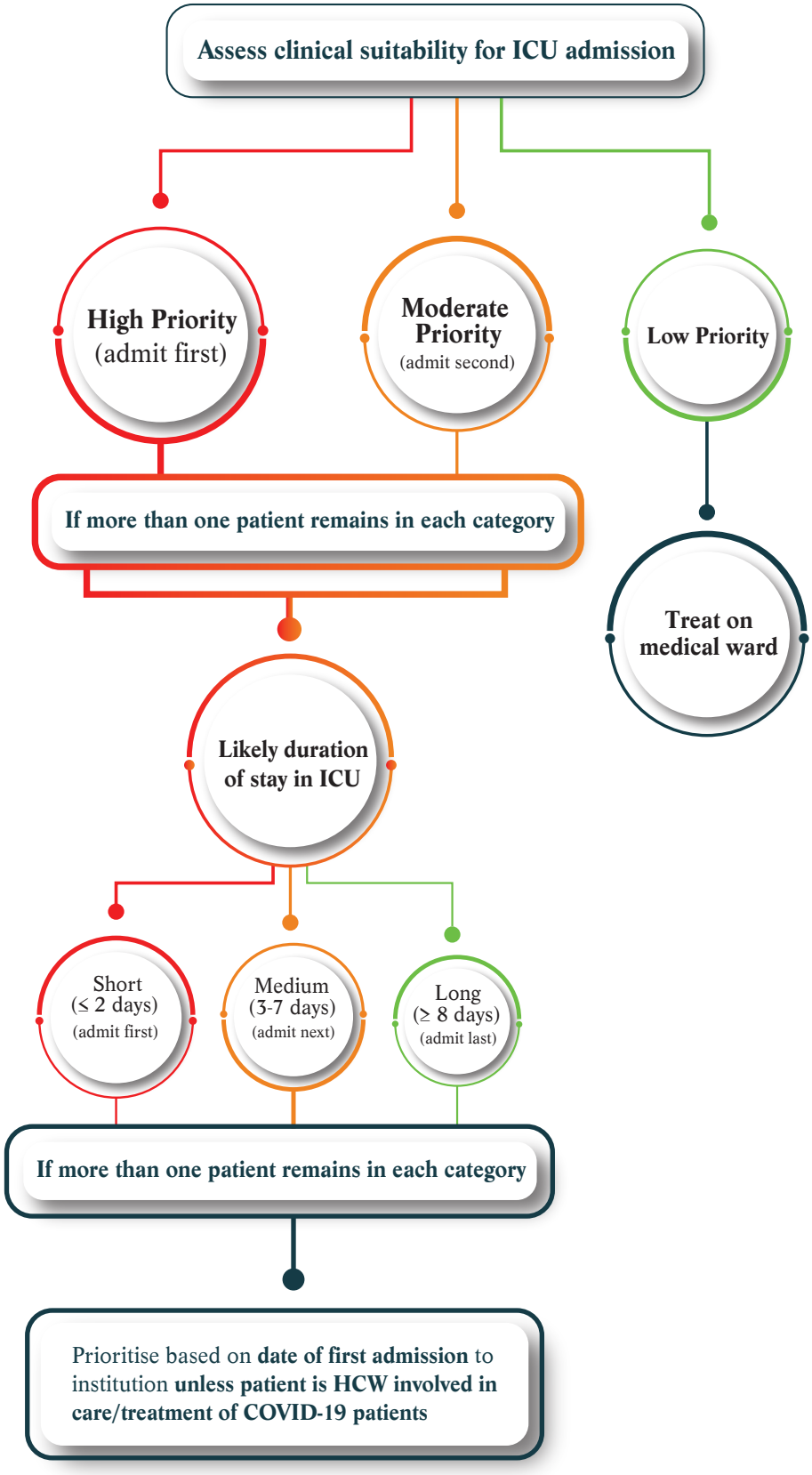
a) A patient with capacity refuses ICU admission or treatment; or

b) The patient is a healthcare worker involved in the care or treatment of COVID-19 patients. The healthcare worker should then get priority.

APPEALS

Any appeals to decisions to withhold or withdraw ICU treatment must be heard promptly by a triage team other than the one who made the admission decision for the patient.

DECISION-MAKING TOOL FOR ICU ADMISSION IF CAPACITY OVERWHELMED



EXAMPLE 1

There is one ICU bed and ventilator available. Patients A, B and C are candidate patients. Patients A and B have high clinical suitability for ICU and so are high priority. Patient C is low priority and will be treated on the medical ward.

Patient A is a post-operative patient and is likely to need 2 days in intensive care ('Short'). Patient B is a COVID-19 patient and is expected to require 7-14 days ('Long'). Patient A gets priority.

EXAMPLE 2

One ICU bed and ventilator. Patients A, B, C, D and E are candidate patients. E is an ICU nurse.

Patients A, B, D and E have high priority. C is low priority and treated on medical ward.

As above, A has 'Short' ICU stay, but B, D and E are all COVID-19 patients with 'Long' expected ICU stays. A gets top priority. B was admitted to the hospital on 2nd April 2020. D the next day and E the day after that. As E is an ICU nurse she gets priority over B and D. Then comes B, who was admitted before D. The final priority order is A, E, B, D, C.

EXAMPLE TRIAGE COMMITTEE NOTES

"Patient X reviewed, clinical condition A,B,C, high priority for ICU care as in need of ventilation and potentially reversible condition; expected length of ICU stay medium – decision, admit and review" "Patient Y reviewed, clinical condition A, high priority ICU as need for monitoring post surgery; expected length of ICU stay short – decision, admit and review." "Patient Z reviewed, clinical condition, D, E, F, G low priority for ICU care as severe liver and renal disease. Low likelihood of survival to discharge - decision, ward level care."

DISCLAIMER

The content of this document does not constitute legal advice and should not be relied on or treated as a substitute for specific advice relevant to particular circumstances.