

Hospitalized but Does Not Require Supplemental Oxygen	Hospitalized and Requires Supplemental Oxygen	Hospitalized and Requires Oxygen Delivery Through a High-Flow Device or Noninvasive Ventilation	Hospitalized and Requires Invasive Mechanical Ventilation (IMV) or Extracorporeal Membrane Oxygenation (ECMO)
<ul style="list-style-type: none"> <li>COVID-19 Treatment Guidelines Panel recommends against the use of <b>dexamethasone</b> (AIIa) or <b>other corticosteroids</b> (AIII) [if corticosteroids are prescribed for an underlying condition, continue this therapy]</li> <li>There is insufficient evidence to recommend either for or against the routine use of remdesivir. For patients at high risk of disease progression, <b>remdesivir</b> may be appropriate.</li> </ul>	<ul style="list-style-type: none"> <li>For patients who require minimal supplemental oxygen: Use <b>remdesivir*</b> (BIIa)</li> <li>For patients who require increasing amounts of supplemental oxygen: Use <b>dexamethasone plus remdesivir*</b> (BIII)</li> <li>When combination with remdesivir cannot be used or is not available: Use <b>dexamethasone</b> (BI)</li> </ul>	<ul style="list-style-type: none"> <li><b>Dexamethasone</b> (AI) or <b>dexamethasone plus remdesivir*</b> (BIII)</li> <li>For recently hospitalized patients (e.g., within 3 days of hospital admission) with rapidly increasing oxygen needs and systemic inflammation:               <ul style="list-style-type: none"> <li>Add <b>baricitinib</b> (BIIa) or <b>IV tocilizumab</b> (BIIa)</li> <li>If baricitinib or IV tocilizumab is unavailable or not feasible to use, use <b>tofacitinib</b> instead of baricitinib (BIIa) or use <b>IV sarilumab</b> instead of IV tocilizumab (BIIa)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li><b>Dexamethasone</b> (AI)</li> <li>For patients who are within 24 hours of admission to the ICU:               <ul style="list-style-type: none"> <li><b>Dexamethasone plus IV tocilizumab</b> (BIIa)</li> <li>If IV tocilizumab is unavailable or not feasible to use, use <b>IV sarilumab</b> (BIIa)</li> </ul> </li> </ul>

Drug Name	Dosing Regimen	Comments
Remdesivir	Remdesivir 200 mg IV once, then remdesivir 100 mg IV once daily for 4 days or until hospital discharge	<ul style="list-style-type: none"> <li>Treatment may be extended for up to 10 days if there is no substantial clinical improvement by Day 5.</li> <li>If patient progresses to more severe illness, complete the course of remdesivir.</li> <li>eGFR &lt;30 mL/min/1.73 m<sup>2</sup>: Remdesivir is not recommended.</li> </ul>
Dexamethasone	Dexamethasone 6 mg IV or PO once daily for up to 10 days or until hospital discharge	<ul style="list-style-type: none"> <li>If dexamethasone is not available, an equivalent dose of another corticosteroid may be used.</li> </ul>
Baricitinib	Baricitinib dose is dependent on eGFR; duration of therapy is up to 14 days or until hospital discharge	<ul style="list-style-type: none"> <li>eGFR ≥60 mL/min/1.73 m<sup>2</sup>: Baricitinib 4 mg PO once daily</li> <li>eGFR 30 to &lt;60 mL/min/1.73 m<sup>2</sup>: Baricitinib 2 mg PO once daily</li> <li>eGFR 15 to &lt;30 mL/min/1.73 m<sup>2</sup>: Baricitinib 1 mg PO once daily</li> <li>eGFR &lt;15 mL/min/1.73 m<sup>2</sup>: Baricitinib is not recommended.</li> </ul>
Tocilizumab	Tocilizumab 8 mg/kg actual body weight (up to 800 mg) administered as a single IV dose	<ul style="list-style-type: none"> <li>In clinical trials, a third of the participants received a second dose of tocilizumab 8 hours after the first dose if no clinical improvement was observed.</li> </ul>
Tofacitinib	Tofacitinib 10 mg PO twice daily for up to 14 days or until hospital discharge	<ul style="list-style-type: none"> <li>Use as an alternative if baricitinib is unavailable or not feasible to use (BIIa).</li> <li>eGFR &lt;60 mL/min/1.73 m<sup>2</sup>: Tofacitinib 5 mg PO twice daily</li> </ul>
Sarilumab	Use single-dose, pre-filled syringe (not pre-filled pen) for SQ injection. Reconstitute sarilumab 400 mg in 100 cc 0.9% NaCl and administer as IV infusion over 1 hour	<ul style="list-style-type: none"> <li>Use as an alternative if tocilizumab is unavailable or not feasible to use (BIIa).</li> <li>In the United States, the currently approved route of administration for sarilumab is SQ injection. In the REMAP-CAP trial, the SQ formulation was used to prepare the IV infusion.</li> </ul>

\*Complete remdesivir course even if disease progresses

**Rating of Recommendations:** A = strong; B = Moderate

**Rating of Evidence:** I = One or more randomized trials without major limitations; IIa = Other randomized trials or subgroup analyses of randomized trials; III = Expert opinion

**Key:** eGFR = estimated glomerular filtration rate; IV = intravenous; PO = oral; SQ = subcutaneous

**REFERENCES:**

- COVID-19 Treatment Guidelines Panel. Coronavirus Disease 2019 (COVID-19) Treatment Guidelines. National Institutes of Health. Updated August 25, 2021. <https://www.covid19treatmentguidelines.nih.gov/>