ICU COVID-19 Tier 2 Pandemic Admission Guideline

Intensive Care Units provide a consultative service for the provision of critical care support. These consultative services will continue to operate in the event of a pandemic.

During a pandemic, ICU admission thresholds will need to be adjusted in accordance with sound ethical principles\(^1\) and apply to patients with or without COVID-19. ICU referrals will be reviewed by Senior ICU medical staff taking into consideration burden of ICU treatment to the individual patient, patient comorbidities, patient preferences, probability of patient response to intervention and available resources.

Senior Intensive Care clinicians will be available 24/7 (by telehealth if required) to discuss cases and support decision making throughout Queensland.

Due to the likelihood of poor outcome, patients meeting one or more of the criteria listed below must be reviewed in person by the consultant of the treating team prior to ICU referral. A decision regarding ICU admission will be made with one or more intensivists working in consultation with the referring team.

- Premorbid Clinical Frailty Scale \(\geq 6^*\) and Age \(\geq 75\)
- Prolonged cardiac arrest > 40 mins irrespective of cause with ongoing cardiovascular collapse and/or poor neurological progress
- Severe chronic cognitive and physical impairment with limited chance of return to baseline function
- Severe and irreversible neurologic event or deterioration
- Advanced untreatable or progressive neuromuscular disease
- Advanced metastatic malignant disease
- Palliative surgery
- Advanced and irreversible immunocompromise with poor prognosis
• Admission for the purpose of organ donation or palliation
• Pre-morbid end-stage organ failure with at least one of the following:

**Cardiac**

• NYHA class IV heart failure *or*
• Housebound and/or with significantly restricted ADL

**Respiratory**

• Oxygen dependent *or*
• Housebound and/or with significantly restricted ADL

**Liver**

• Child–Pugh C *or*
• Concurrent chronic renal failure and/or hepatorenal-syndrome *or*
• Housebound and/or with significantly restricted ADL

**Renal**

• Long term RRT, age > 65 and Clinical Frailty Scale ≥ 6 *or*
• Housebound and/or with significantly restricted ADL

---

**In the event of uncertainty or concern:**
At least 2 Intensivists or Acute Care Clinicians will review the case and provide a final opinion based on:
- Assessment of acute reversibility
- Co-morbidities and Frailty

Usual escalation processes occur including referral to Office of Public Guardian if required.

---


The original documents- Critical Care Resource Allocation in Queensland in COVID-19 Pandemic and ICU COVID-19 Tier 2 Pandemic Admission Guideline were developed by:

The Statewide Intensive Care Clinical Network
Dr James Winearls, Consultant Intensivist, Gold Coast University Hospital
A/Prof Marc Ziegenfuss, Chair, Statewide Intensive Care Clinical Network
Dr Melanie Jansen, Consultant Paediatric Intensivist, Westmead Children’s Hospital
Dr Andrew Semark, Director Intensive Care Unit, Gold Coast University Hospital
Dr Andrew Johnson, Director Medical Services, Princess Alexandra Hospital
Dr Chris Joyce, Director Intensive Care, Princess Alexandra Hospital
Dr Shane Townsend, Director Intensive Care, Royal Brisbane and Women’s Hospital
Prof Bala Venkatesh, Director Intensive Care, Wesley Hospital
A/Prof Brent Richards, Director of Innovation, Gold Coast University Hospital
Dr Siva Senthuran, Consultant Intensivist, Townsville Hospital
A/Prof David Austin, Director Intensive Care, Rockhampton Hospital
Dr Anni Paasilahti, Consultant Intensivist, Mackay Hospital
Dr Alexandra Markwell, Chair, Queensland Clinical Senate
The Queensland Clinical Senate

Information about version 1.0
- Developed and endorsed by consumers and clinicians 27 March 2020. The following groups were invited to participate in this meeting and subsequent provision of feedback:
  - Queensland Clinical Senate
  - Statewide Clinical Networks
  - Hospital and Health Services
  - Executive Directors of Medical Services
  - Executive Directors of Nursing and Midwifery
  - Executive Directors of Allied Health
  - Department of Health
    - Chief Nursing and Midwifery Officer
    - Chief Allied Health Officer
    - Chief Dental Officer
    - Aboriginal and Torres Strait Islander Health Branch
    - Patient Safety and Quality Improvement Service
    - Prevention Division
    - Retrieval Services Queensland
  - Health Consumers
    - Health consumer representatives
    - Health Consumers Queensland
    - Council on the Ageing Queensland (COTAQ)
    - Health Issues Centre (Victoria)
    - Health Care Consumers Association (ACT)
  - State Health Emergency Coordination Centre (SHECC)
  - Palliative Care, including:
    - Palliative Care Queensland
  - Aged care services, including:
    - Bolton Clarke
  - Aboriginal and Torres Strait Islander Healthcare Organisations
• Queensland Aboriginal and Islander Health Council (QAIHC)
• Institute for Urban Indigenous Health (IUIH)
• Northern Aboriginal and Torres Strait Islander Health Alliance
  ▪ Queensland Ambulance Service
  ▪ Queensland Rural Medical Service
  ▪ Pathology Queensland
  ▪ Representatives of various additional clinical streams
    ▪ Pharmacy
    ▪ Infectious Diseases
    ▪ Social Work
    ▪ General Practice
    ▪ Ethicists
  ▪ Queenslanders with Disability Network
  ▪ West Australia Clinical Senate
  ▪ AusHSI (Australian Centre for Health Services Innovation)

- Endorsed by the Queensland Health Pandemic Health Response Implementation Advisory Group 02 April 2020

- Revised to facilitate release of Tier 2 Admission Guideline in isolation; reviewed by PHRIAG 16 April 2020

- Further work is being undertaken to progress Tier 3 and higher pandemic response admission processes.

<table>
<thead>
<tr>
<th>Version</th>
<th>Author</th>
<th>Date</th>
<th>Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>Queensland Clinical Senate</td>
<td>2 April 2020</td>
<td>Endorsed by PHRIAG</td>
</tr>
<tr>
<td>1.1</td>
<td>Queensland Clinical Senate</td>
<td>17 April 2020</td>
<td>Limited to discussion of Tier 2 only</td>
</tr>
<tr>
<td>1.2</td>
<td>Queensland Clinical Senate</td>
<td>28 April 2020</td>
<td>Correction to contributor’s position</td>
</tr>
</tbody>
</table>