COVID-19 SEVERITY SCORING TOOL USER GUIDE

The **COVID-19 Severity Scoring Tool** aims to quickly help determine which patients presenting to Emergency Units with suspected or confirmed COVID-19 require oxygen or mechanical ventilation. It aids frontline providers in classifying patients into one of three severity categories: critical, severe and moderate/mild. Critical patients are most likely in need of mechanical ventilation. Severe patients are expected to require oxygen, while moderate/mild patients probably do not.

The tool was derived via machine learning from 13,500 COVID-19-positive patients in multiple countries. An early assessment suggests that the tool correctly classifies 93.6% of patients, overestimating 5.7% and underestimating 0.8% of patient severities.

Reference Notes

COMORBIDITIES

- **Cardiovascular disease**: a history of atherosclerosis, heart attack, stroke, heart failure, arrhythmia, heart valve problems, peripheral artery disease.
- Hypertension: a history of hypertension, not current high BP.
- Diabetes: a history of diabetes, not current high blood sugar level.
- Tuberculosis (TB): a history of pulmonary (lung) TB.
- Chronic obstructive pulmonary disease (COPD)/asthma: emphysema, chronic bronchitis or asthma.
- **Current smoker**: >100 cigarettes in lifetime and a current smoker.

MOBILITY/ACTIVITY

- Walks independently: Can walk on their own without any help.
- Walks with assistance: Needs help to walk.
- Requires stretcher ("gurney"): Cannot walk at all, even with help.

MENTAL STATUS ASSESSMENT (APP ONLY)

- **A = Alert +/- Oriented**: Patient opens eyes spontaneously, responds to examiner and environment, can follow commands and track objects.
- **V = Responds to Voice**:Patient's eyes do not open spontaneously. Eyes open in response to a verbal stimulus (voice).
- **P** = **Responds to Pain**: Patient's eyes do not open spontaneously. Patient responds to application of painful stimuli with motion, moan or cry.
- **U = Unresponsive**: Patient does not respond spontaneously or to verbal or painful stimuli.

AUSCULTATION (APP ONLY)

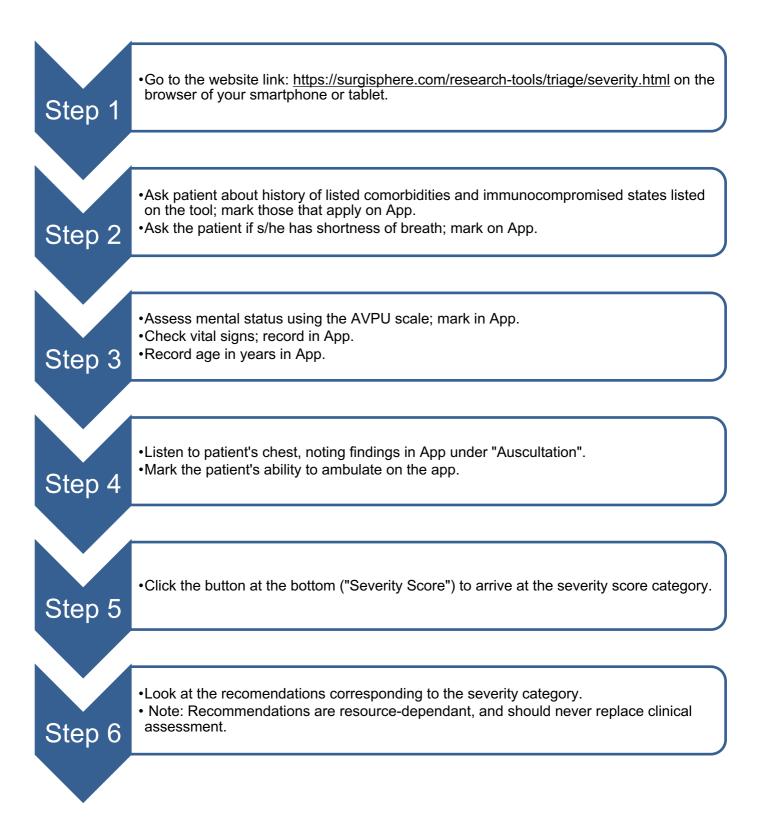
- Minor findings bilaterally: Mildly diminished breath sounds, mild crackles, mild wheezing.
- Severe findings bilaterally: Severely diminished breath sounds, severe crackles, severe wheezing, rhonchi, bronchial breath sounds, pleural rub, etc.

NOTES ON RECORDING PATIENT DATA

- Record age in years (App only).
- Record DOB in DD/MM/YY format (paper form only).
- Record temperature in degrees Celsius.
- Record pulse rate per minute.
- Record respiratory rate per minute.
- Record whether or not the patient is experiencing shortness of breath (difficulty or laboured breathing)

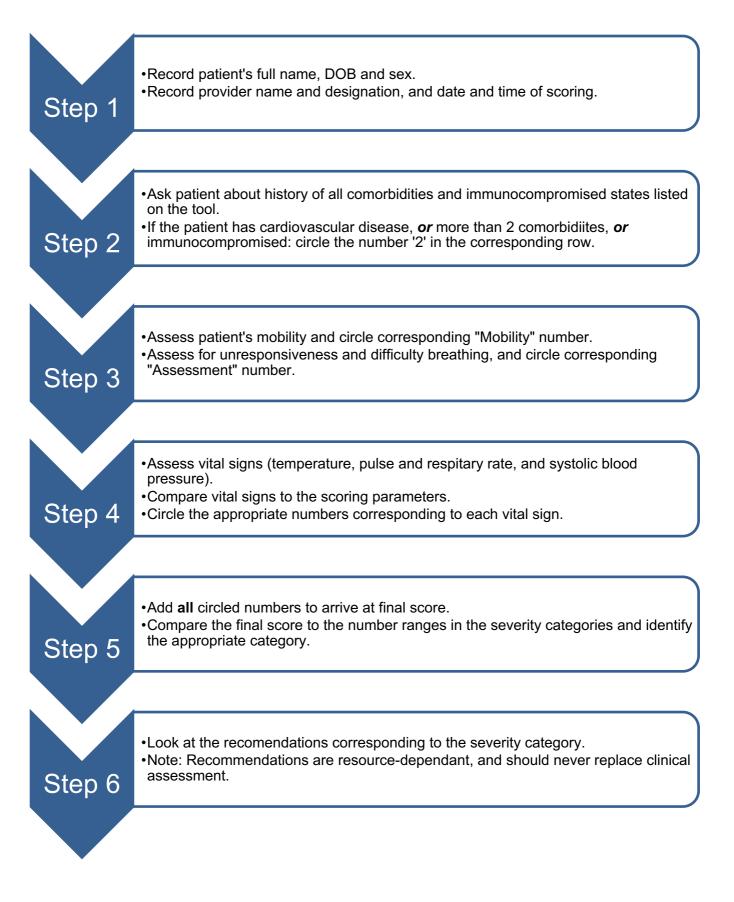
Note: The COVID-19 Severity Scoring Tool is a <u>guide</u> to inform clinical decision making. It is NOT intended for use as a<u>replacement</u> for clinical decision making or diagnostic investigations.

HOW TO USE THE COVID-19 SEVERITY SCORING TOOL - APP



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HOW TO USE THE COVID-19 SEVERITY SCORING TOOL – PAPER



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