



Therapy Dosing Recommendations:
 *indicates use of dosing regimens below

- Remdesivir (via EUA):** 200mg IV on day 1 followed by 100mg IV daily on days 2-5 while hospitalized. Courses may be extended up to 10 total days in immunocompromised patients and patients who progress to requiring mechanical ventilation or develop worsening hypoxemia
- Dexamethasone:** - Recommended in ICU patients on mechanical ventilation or requiring supplemental oxygen who are >7 days from symptom onset.
 - Consider using in non-ICU patients requiring supplemental oxygen who are >7 days from symptoms onset consider discussion with pulmonary/critical care)
 Not recommended in pts who do not require supplemental oxygen; less than 7 days from symptom onset, pts with ARDS > 14 days from symptoms onset
Dexamethasone 6 mg IV or PO daily for up to 10 days (or until discharge)
- Convalescent Plasma (EUA):** Currently unavailable.
 1-2 units (200-500ml) IV transfusion once. Managed by the blood bank.

NMH Antimicrobial Stewardship available for dosing questions pg55955