

# Case Presentation

ATS COVID Critical Care Training Forum

Ankita Agarwal

Case 1: JO

CC

- Shortness of Breath

# HPI

- 53 yo male was diagnosed with COVID19 pneumonia 6 days prior to presentation to the hospital with complaints of worsening shortness of breath
- He (and his family) are unvaccinated
- Admitted for acute hypoxic respiratory failure to medical wards
- Therapies started:
  - Supplemental oxygen
  - Dexamethasone
  - Remdesivir
  - Tocilizumab
- Hospital day 4 transfers to the ICU

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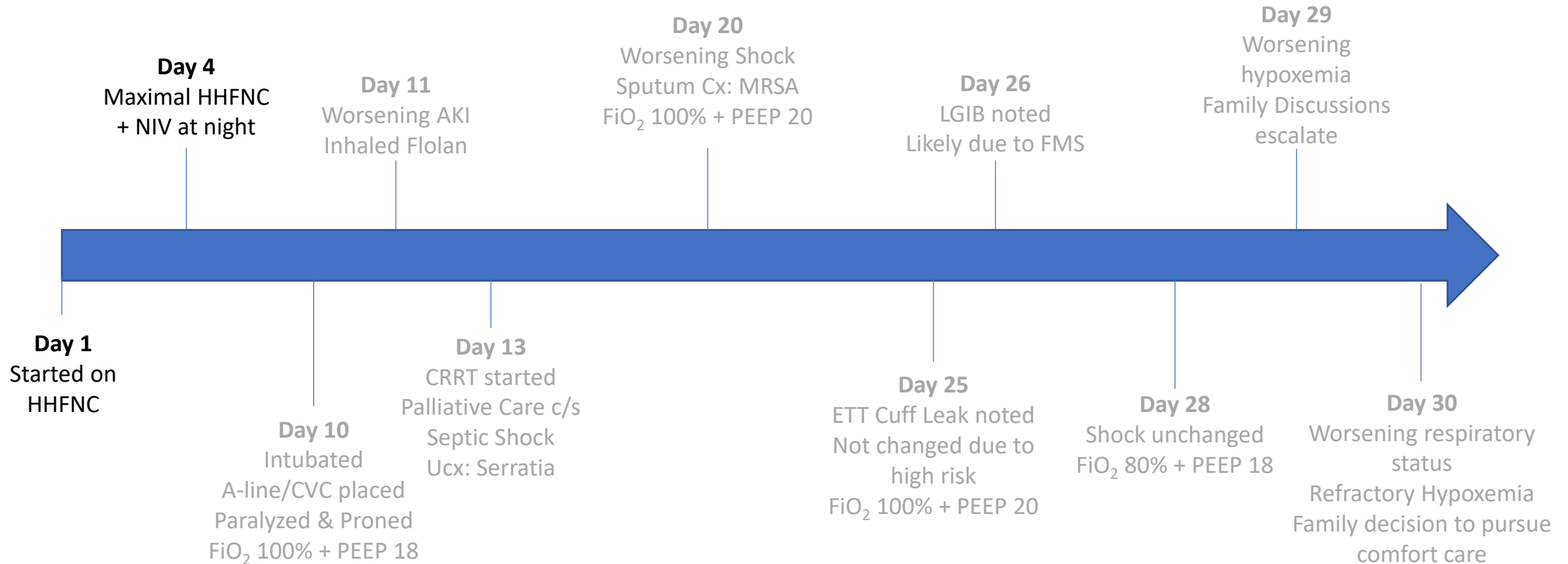
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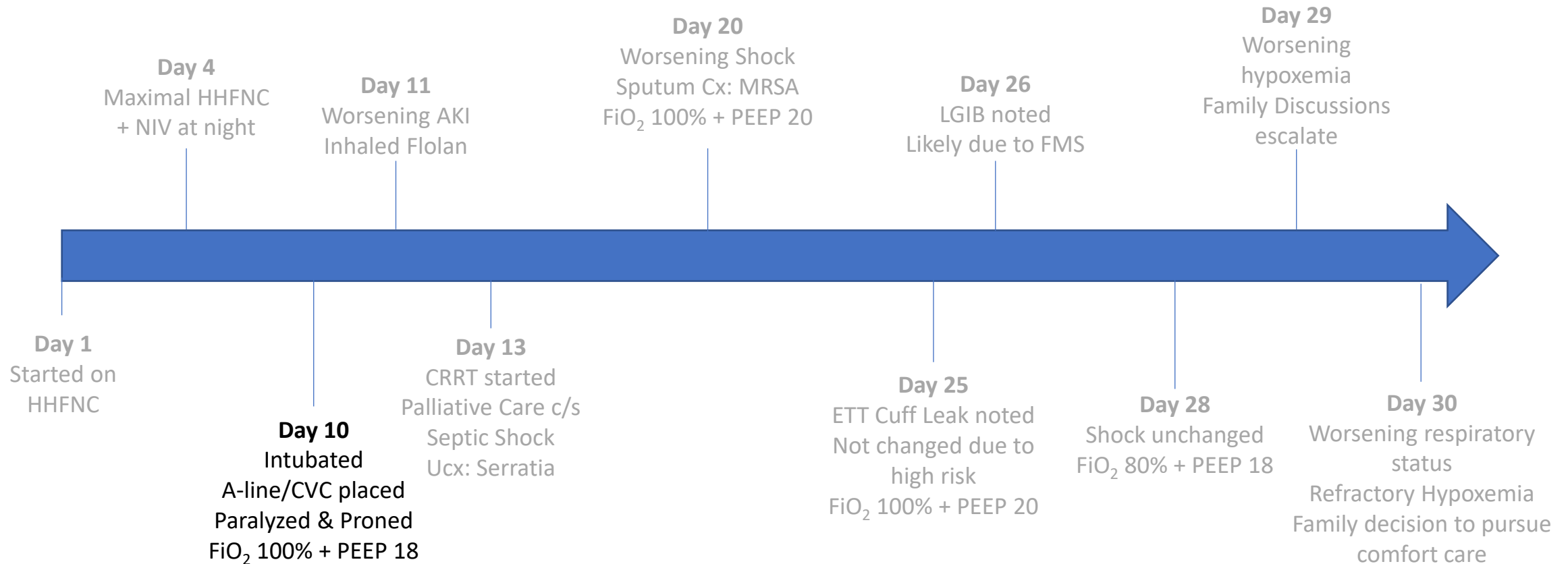
- PMH: hypertension, sleep apnea, prior smoker
- He is married for 15 years, 2 children – 1 adult son and 1 daughter in high school, and 1 grandchild
- He worked as a school bus driver and had strong connections with the local Baptist community
- Unvaccinated as was his wife, daughter, son, & daughter-in-law
- Wife had COVID19 prior to current hospitalization
  - did not need ICU stay and was at home on supplemental oxygen

# ICU Course

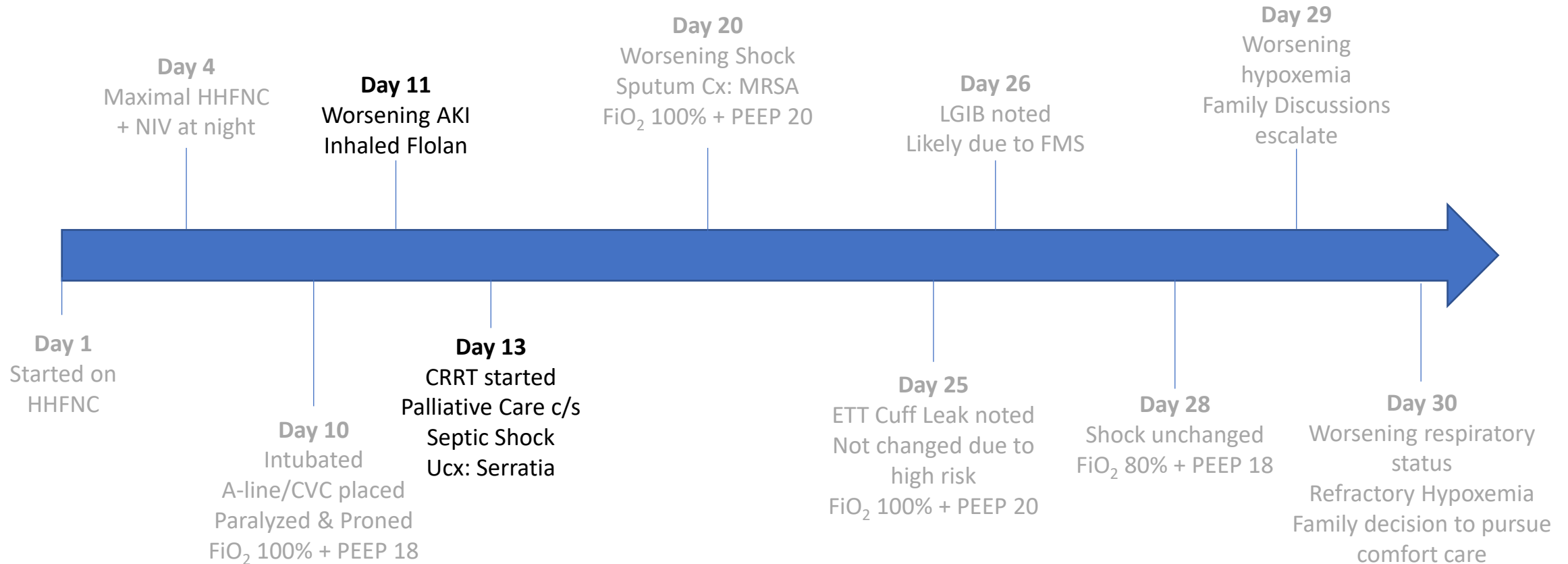




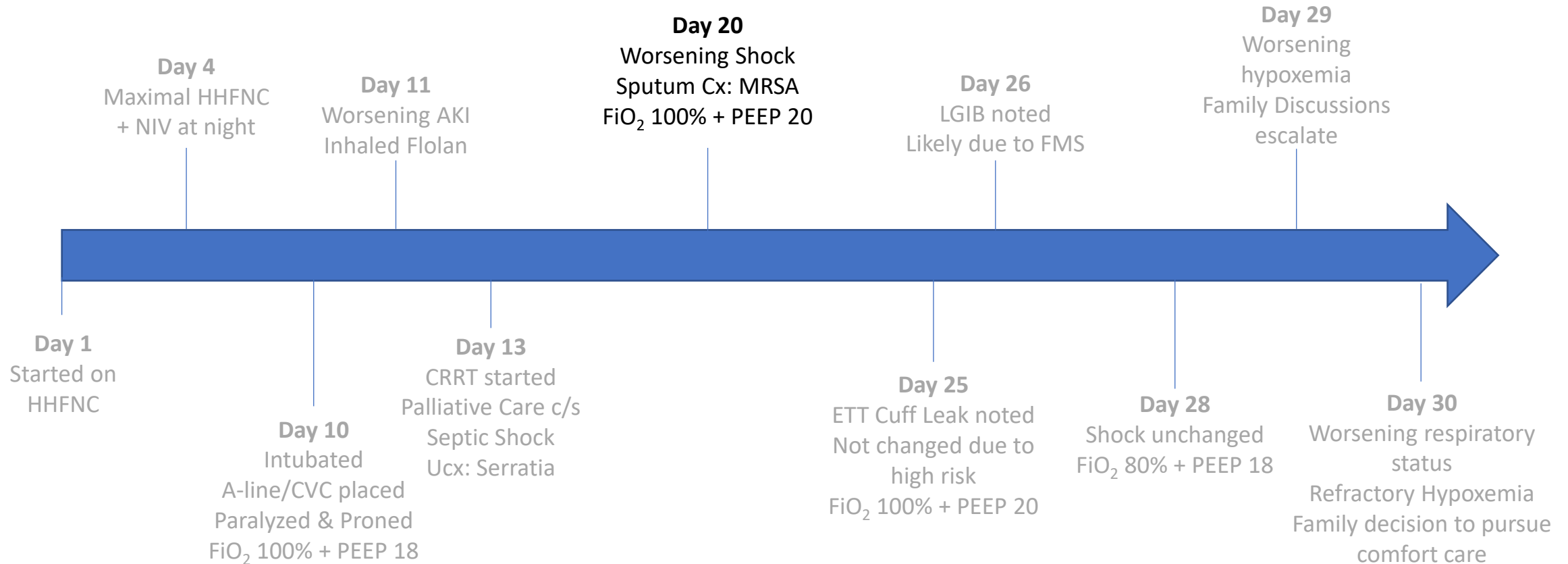
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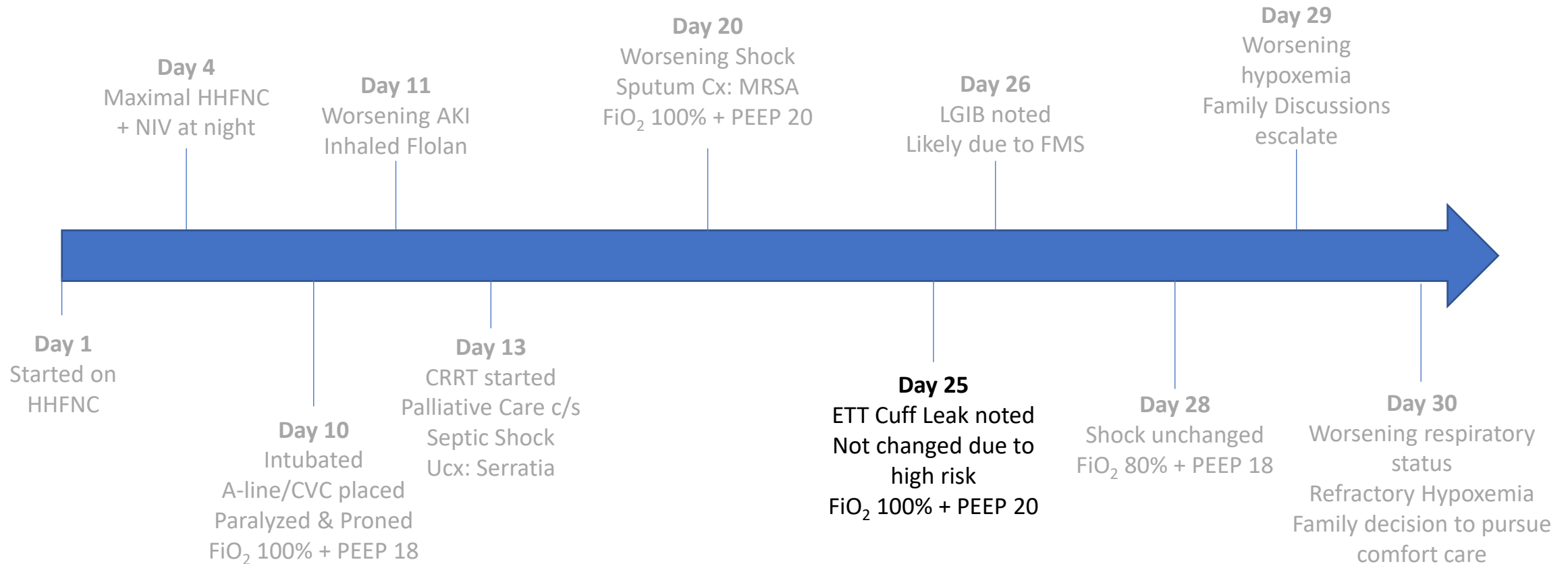
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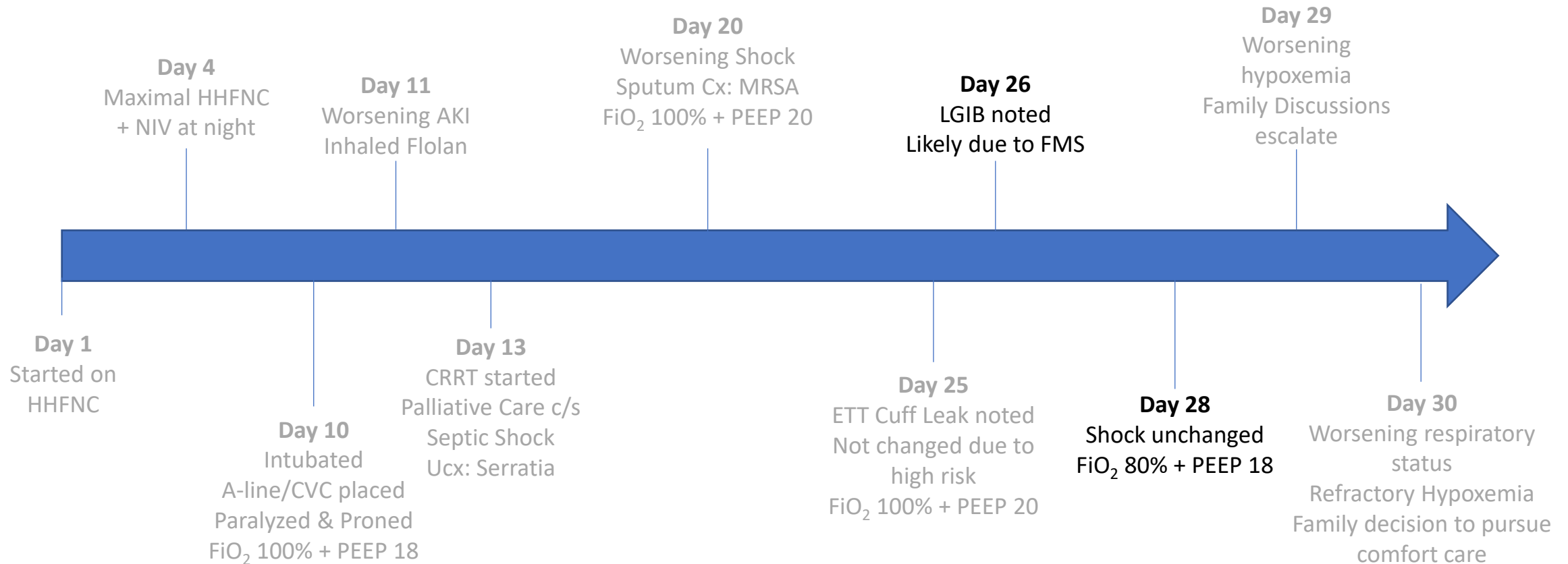
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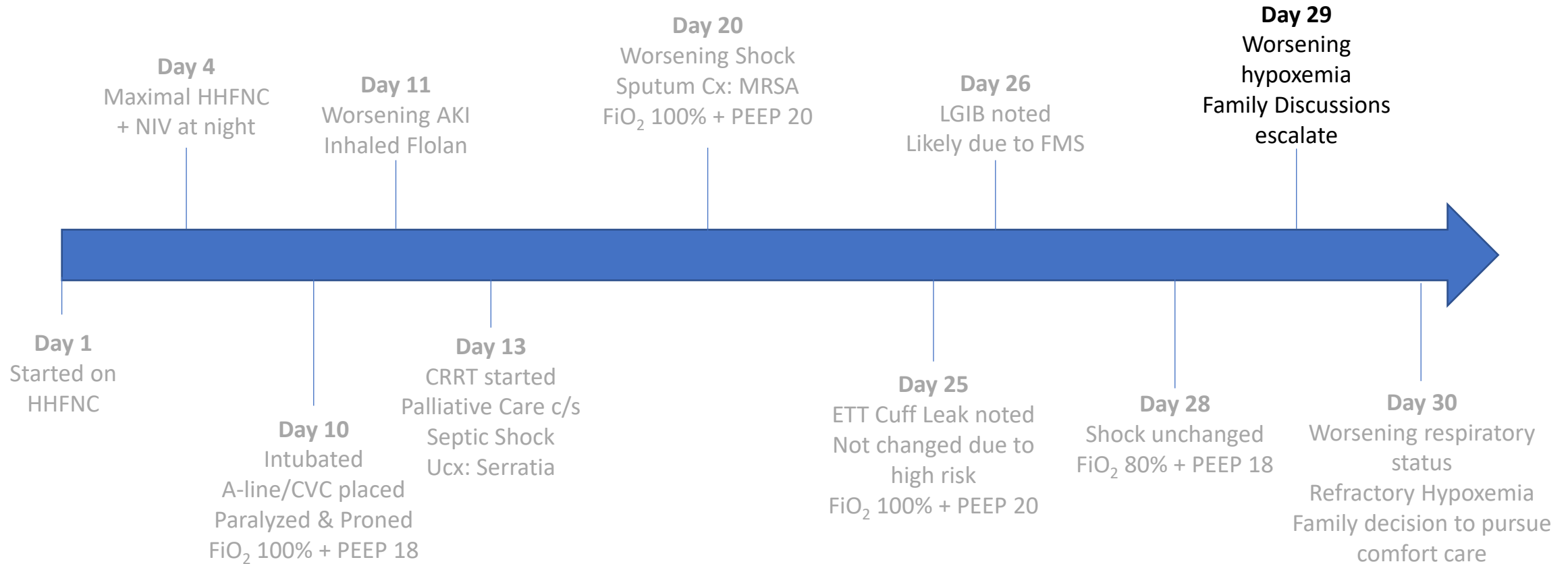
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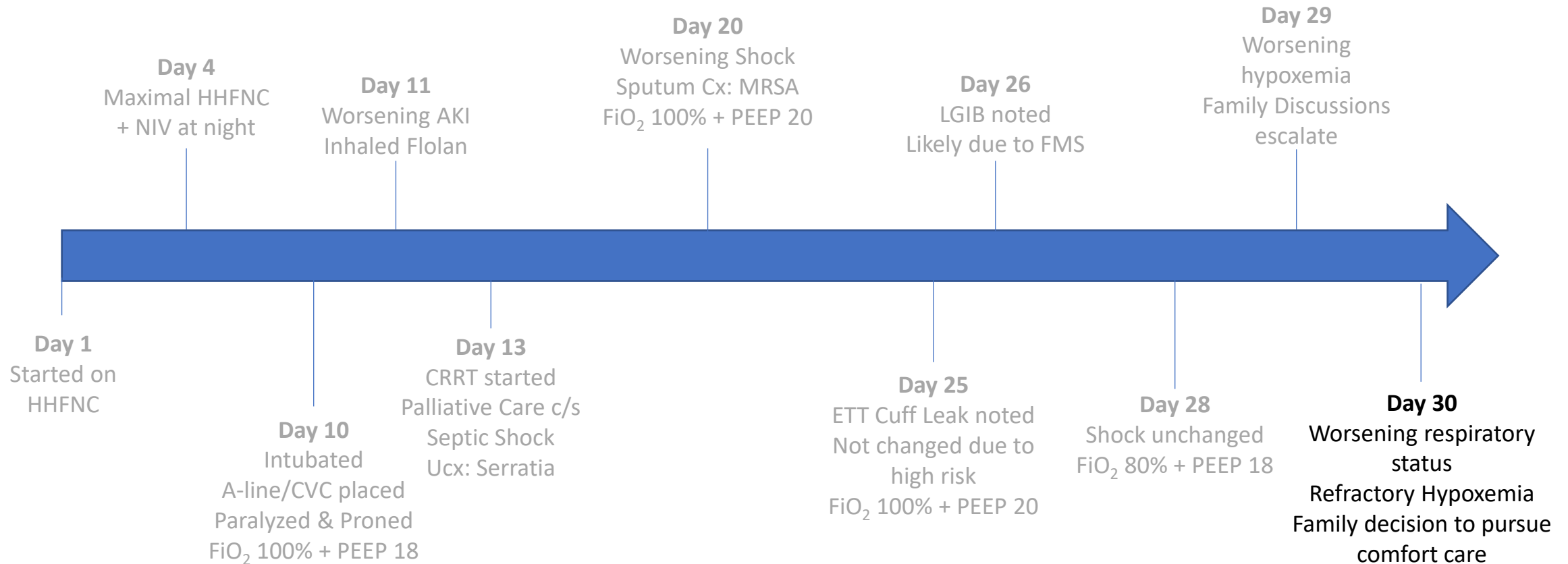
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- Son and daughter-in-law contract COVID19
- 1 year-old grandchild also contracts COVID19
- All recover, son and daughter-in-law do get vaccinated
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- Can healthcare providers be conscientious objectors?
- Is it child abuse the parents didn't get vaccinated and their 1-year-old got COVID19?
- Is it fair to allow an unvaccinated patient 30+ days of intense ICU care when ICU beds are a limited resource?

Case 2: RS

CC

- Shortness of Breath



# HPI

- 31 year-old female with history of asthma presented with shortness of breath without relief from inhalers
- COVID19 rapid test is positive but clear chest Xray
- PMH: asthma on maintenance inhalers
- Social: never smoker
- Unvaccinated

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# ER course

- Decompensated with hypoxemic respiratory failure + altered mental status
- Intubated and admitted to the ICU for status asthmaticus

# ICU Day 1 – hour 1

- Initial ventilator settings
  - PC 32/R18/PEEP 6/FiO<sub>2</sub> 60%
  - -> Auto-PEEP -> required ventilator disconnection, BVM ventilation
  - Sedation optimized, neuromuscular blocked started
  - Steroids & nebulizers started
- Mother (nok) notified of admission

# ICU Day 1 – hour 3

- Worsening hypercapnia
- Ventilator settings changed to VC, Heliox added
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# ICU Day 1 – Hour 6

- Successfully cannulated for V-V ECMO
  - Initial Settings: Flow 3.5 LPM, Sweep 4.5
  - Ventilator Settings: PC 10/10/10/40%
- Admitted to the cardiothoracic ICU

# Hospital/ICU Course – Day 2 onward

- Extubated day 4
- ECMO decannulation day 5
- Floor transfer day 6
- Discharged home with steroid taper day 8

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# On day of floor transfer...

- Patient asked if she had been vaccinated, against her wishes, for COVID19
- Stated that she would “sue the hospital and everyone” if she had
- She was not vaccinated

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- Should advanced, resource limited, resource using, therapies (like ECMO) be offered to unvaccinated patients?

# Questions to Percolate

- Should we be able to vaccinate people hospitalized with COVID19 against their wishes?
  - Do we even have to tell them?
- Should advanced, resource limited, resource using, therapies (like ECMO) be offered to unvaccinated patients?
- If 'no' then who makes that decision and where do we draw the line?