

## Hospital admission criteria for COVID-19 patients

Version 1.1

### Introduction:

This guidance is for clinicians caring for patients at all healthcare facilities that deal with suspected or confirmed COVID-19 patients. It aims to standardize the hospital admission criteria at healthcare facility caring for COVID-19 patients.

### Targeted population:

Any patient who meets the case definition of confirmed/suspected COVID-19 as stated in MOH/SCDC guidance version 1.2.

### Methodology:

A literature search was performed, focusing on risk factors for severe illness and mortality in patients diagnosed with COVID-19. One hundred eighty-two articles were identified in MEDLINE- . The articles reviewed were randomized controlled trials, prospective observational studies, and retrospective studies. The general evidence for COVID-19 related subjects is currently weak. Most of the studies on risk factors for severe illness and mortality are small, single-center studies of variable quality. Evidence for specific admission criteria does not exist at the time of writing this guideline.

\*\*\*\*This guidance was done with the best available data, and limited evidence. This guidance will be updated with the emergence of higher quality evidence or change in the general clinical situation. \*\*\*\*

**We Recommend to admit any patient meets the case definition of confirmed/suspected COVID-19 as stated in MOH/SCDC guidance version 1.2, who is symptomatic plus any of the following criteria:**

1. Clinical or radiological evidence of pneumonia.
2. Age >65 years.
3. Low oxygen saturation SpO2 < 94% on room air.
4. Acute respiratory distress syndrome (ARDS).
5. Chronic pulmonary disease.
6. Chronic kidney disease.
7. History of comorbidities Diabetes Mellitus or/and hypertension.
8. History of cardiovascular disease.
9. Obesity (BMI ≥40).
10. Use of biological (immunosuppressants) medications (e.g., TNF inhibitors, interleukin inhibitors, anti-B cell agents).
11. History of organ transplant or another immunosuppression disease.
12. History of active malignancy.
13. Other Co-illness that requires admission.

Note:

This is a tool to guide clinicians for the decision of admission and does not replace clinical judgment and decisions.

**References:**

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