Outpatient Management of COVID-19

1. COVID prevention for every day
   - The 3 w’s – wear a mask, wait 6 feet apart, wash your hands.
   - The 3 c’s – don’t do closed, crowded or close.
   - Get a flu shot.
   - Low dose Vitamin D (2-5 thousand per day) may help. Consider Vitamin D level in high risk
   - Exercise in a safe environment.
   - Reduce weight if obese.
   - If diabetic, consider agents with potential to reduce severe COVID risk. Diabetes Care May 2020
   - If hypertensive, treat with ACEI/ARB if indicated.

2. Things to do if you have had a COVID test for exposure or symptoms and are waiting for results
   - Zinc (e.g. Zicam) may help, little to no risk
   - ?? Melatonin, Pepcid, etc. have suggested minimal, if any benefit. Consider risk.
   - Self Quarantine.

3. If your COVID test turns positive
   - Continue self-quarantine for 10 days.
   - Contact 252-744-1913 for clinical trial options or monoclonal antibody under EUA
     (Emergent Use Authorization)
   - Follow up with local physician if develop shortness of breath.
   - Consider repeat CRP in 48 hours, if >100 mg/L reevaluate need for inpatient management
   - Timing of therapy is critical. Steroids have only demonstrated benefits in later stages of disease.
     Other therapies (antivirals, plasma and monoclonals) have only demonstrated benefit in
     patients with early symptoms.

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