

The daily evidence digest collates recently released reports and evidence – provision of these links does not imply endorsement nor recommendation.

Diagnostic testing, addressing ICU challenges, correctional facilities

Five statements from the Australian Health Protection Principal Committee (AHPPC) addressing the use of off-label medicines, home isolation, organ donation and transplantation, point of care to detect antibodies and healthcare worker use of PPE [click here](#)

AN article in JAMA provides a perspective from US correctional facilities highlighting the challenges in preventing spread of COVID-19 in prisons, [click here](#)

Two publications on testing:

- A CEBM review of 11 diagnostic tests potentially suitable for testing COVID-19 at the point-of-care [click here](#)
- WHO has listed the first two diagnostic tests for emergency use [click here](#)

A review of evidence for intensive care management was published in the Lancet Respiratory Medicine – addressing the challenges of where evidence is uncertain and how to deal with them [here](#) (Figure 1)

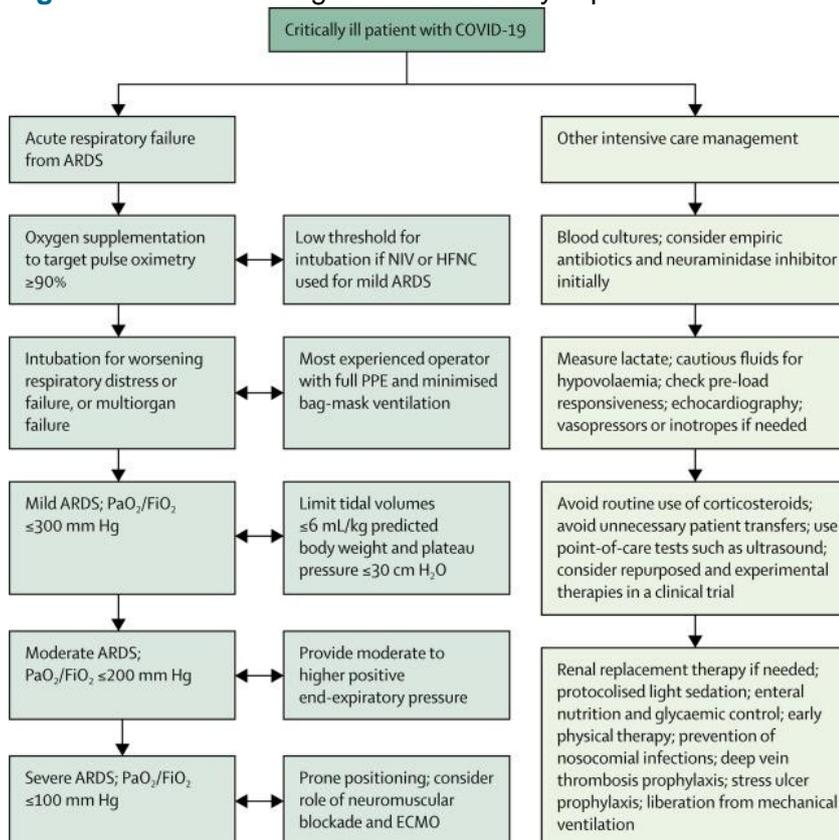
A paper on respiratory rehabilitation in adults with COVID-19 from China provides advice on timing of interventions; intervention measures and rehabilitation for discharged patients [click here](#)

The Australian Government released national ICU bed capacity modelling [click here](#)

Guidance just released:

- NHS has updated speciality guide on use of non-invasive respiratory support in adult patients with COVID-19 (confirmed or suspected) [click here](#)
- Following guidelines released on general surgery, Urological Society Australia and New Zealand has released further guidance on unit configuration and case selection during COVID-19 [click here](#)
- CDC has released guidance for community-based, primary care and outpatient healthcare settings to identify and triage people with COVID-19 in order to minimise disease transmission. Includes advice for preparing for a major surge including staff shortages, and increasing use of telehealth [click here](#)
- Two documents on paediatrics, UK consensus statement highlighting differences in practice from adult guidelines when managing airways for COVID-19 patients [click here](#) and Australian and New Zealand COVID-19 Guidelines for Paediatric Surgery [click here](#)

Figure1: Clinical management of critically ill patients with COVID-19



Twitter

We continue to track key influencers, journals and organisations with up to 200 tweets being reviewed every 24 hours using social media listening tool and identification of key themes through discussion and consensus. Over the last 24 hours the Twitter activity reflects content featured in previous evidence digests. There is an increasing number of tweet chats and webinars occurring through Twitter.

1. The webinar held by @ISQua on ‘COVID-19: Experiences from Seattle Children’s Hospital’ covered:
 - structure and function of the Emergency Operations Centre; communication of information to and from staff;
 - equipment and supply availability and management;
 - containment & mitigation strategies including testing and PPE;
 - and the explicit consideration of quality and reliability principles in the above work details [here](#)
2. Learnings from China regarding convalescent plasma therapy- for lessening the severity or shortening the illness caused by #COVID-19. Health systems now trialling such treatments including Mount Sinai NYC and NHS Blood and Transplant @MountSinaiNYC @MJA_Editor @gailmiflin <https://tinyurl.com/uvyjops> <https://tinyurl.com/roywcxu>
3. An insights piece around challenges related to medication supply in rural and regional pharmacies as highlighted by @MJA_Editor <https://tinyurl.com/wgm3ahq>

