respiratory infection (SARI) and respiratory

distress, shock or hypoxaemia. Patients with

SARI can be given conservative fluid therapy

only when there is no evidence of shock.

Empiric antimicrobial therapy must be started

to manage SARI. For patients with sepsis,

antimicrobials must be administered within 1

hour of initial assessments. The WHO and CDC

recommend that glucocorticoids not be used in

patients with COVID-19 pneumonia except

where there are other indications (exacerbation

of chronic obstructive pulmonary disease).°?

Patients’ clinical deterioration is closely

observed with SARI; however, rapidly

progressive respiratory failure and sepsis

require immediate supportive care

interventions comprising quick use of

neuromuscular blockade and sedatives,

hemodynamic management, nutritional

support, maintenance of blood glucose levels,

prompt assessment and treatment of

nosocomial pneumonia, and prophylaxis

against deep venous thrombosis (DVT) and

gastrointestinal (GI) bleeding.®° Generally, such

patients give way to their primary illness to

secondary complications like sepsis or

multiorgan system failure.\*°