[DOCUMENT TITLE]

This document has been approved by CCOC.

There have been increasing requests for COVID convalescent plasma, which the study group will do their best to accommodate. Please appreciate, circumstances are rapidly evolving.

General Eligibility Considerations:

- Hospitalized patients with hypoxia (oxygen saturation <93% on RA) and/or at high risk for severe disease.
- Preference would be to focus on patients within 2 weeks of COVID diagnosis. However, we will consider patients further out, if COVID testing is still positive and COVID is still felt to be actively driving their critical illness.
- Patients should first be screened for clinical trials (contact Jaclyn Longtine or Robert Finberg through "secure chat" if you have questions about antiviral eligibility); those that are ineligible or who decline will be considered for plasma. Those patients who are currently on antiviral clinical trials typically need to withdraw from the trial to receive plasma (this is per the antiviral trial criteria, even if they have completed the actual drug treatment and are just being followed). Patients are still eligible for plasma, if they have received other therapies.
- **Please ensure that patients have a type & screen this admission before requesting convalescent plasma, so compatible plasma units can be identified.**
- **Please also obtain a standard blood consent from this hospitalization before they can receive plasma (our team will obtain the research consent).**
- Please also ensure that plasma transfusion is consistent with the patient's goals of care and their family's wishes. Patients **cannot be DNI** at present to receive plasma.
- Prior anaphylactic reaction to plasma is a relative contraindication.
- Given that study personnel are unable to personally assess patients due to COVID, we are reliant on the ICU team's evaluation in triaging potentially limited supplies of plasma. Please note that while we try to maintain an inventory of plasma, it could take several days or more to procure, particularly for some blood types.

Process to Request Convalescent Plasma:

Requests should be sent to umasscovidplasma@umassmed.edu and cc Jonathan.gerber@umassmemorial.org. Please also provide the following:

1. **Brief Clinical History:**
2. **Date Positive test for SARS-CoV-2:**
3. **Patient initials:**
4. **Age:**
5. **Weight:**
6. **Allergies:**
7. **Diagnosis:**
8. **Prior therapy:**
9. **Response to prior therapy:**
10. **Reason for request**:
11. **Include an explanation of why the patient lacks other therapeutic options**: [simply list "no FDA-approved therapies at present" and/or whether a candidate for other clinical trials available at UMass]

Treatment with Convalescent Plasma:

- Eligible patients will initially be dosed with one unit of plasma, with consideration of up to 5 additional doses (total 6 doses), based on clinical response (per the daily reassessment by the primary team).
- Most responders appear to show improvement within 72 hours of transfusion of a given unit.
- We are typically transfusing one unit over an hour, after premedication with Benadryl 25mg IV and (when suitable) Tylenol 650mg PO.
- We would recommend trending inflammatory markers (such as CRP and D-dimer), as clinically indicated. We would similarly recommend monitoring COVID PCR weekly, to ensure it is still positive before redosing.
- We are also collecting research blood samples at most sites prior to and then post transfusion of plasma as part of the protocol.
- Please provide a contact number to touch base prior to the transfusion.
- Please also provide at least daily brief updates (preferably by email to Jonathan.gerber@umassmemorial.org) to assist with decisions on repeat dosing and to collect outcomes data.