

Current awareness for Nursing

Recent guidelines and reports, articles and websites

March 2021

Items relating specifically to Covid-19 start on page 7

Guidelines

The following new guidance has recently been published:

[Conversations for ethically complex care: A framework to support discussion and documentation of decision making for levels of care in clinical practice](#)

Royal College of Physicians (RCP); 2021.

<https://www.rcplondon.ac.uk/file/28256/download>

[This guidance provides a framework for ethical discussions to support decision making and documentation in clinical practice. It outlines a structured, patient-focused approach suitable for use by all professional groups, specialties and in all care settings. It is intended to be disease- or diagnosis-agnostic and to ensure fair and equitable care for all, without causing harm to their long-term health and wellbeing. Accompanied by an Ethical Care Decision-Making Record (ECDMR)]

Freely available online

[Current recovery and emergency programme standards.](#)

Nursing and Midwifery Council (NMC); 2021.

<https://www.nmc.org.uk/standards-for-education-and-training/emergency-education-standards/>

[The introduction of the new recovery standard allows student nurses to practise and learn through simulated practice learning experiences where clinical practice isn't available or isn't possible. Updated 18 February.]

Freely available online

[Managing concerns: a resource for employers.](#)

Nursing and Midwifery Council (NMC); 2021.

<https://www.nmc.org.uk/employer-resource/>

[A new resource to support employers to effectively respond to concerns about a nurse, midwife or nursing associate's practice.]

Freely available online

[Supporting adult carers.](#)

National Institute for Health and Care Excellence (NICE); 2021.

<https://www.nice.org.uk/guidance/gs200>

[This quality standard covers the provision of support for adults aged 18 or over who provide unpaid care for 1 or more people aged 16 or over with health and social care needs. It describes high-quality care in priority areas for improvement. It does not cover people who provide paid care or do so as voluntary work.]

Freely available online

[The International Federation for Emergency Medicine report on emergency department crowding and access block: A brief summary.](#)

Javidan AP. *Emergency Medicine Journal* 2021;38(3):245-246.

[The IFEM report is a comprehensive document intended to be used in whole or by section to inform and address aspects of ED crowding and access block. Overall, ED crowding is a multifactorial issue requiring systems-wide solutions applied at local, regional, and national levels. Access block is the predominant contributor of ED crowding in most parts of the world.]

Websites

[Update on the CQC's regulatory approach.](#)

24th March 2020

A summary of the CQC's plans and the implications for hospital services.

Awards

[Patient Safety Awards 2021.](#)

Wilmington Healthcare; 2021.

<https://awards.patientsafetycongress.co.uk/>

[Individuals and organisations that are proving successful at initiatives that are driving the quality, clinical efficiency, effectiveness and safety agendas. Deadline: 16th April 2021.]

Events

[Supporting people to work in new ways: what have we learnt from the Covid-19 pandemic?](#)

[PAID EVENT. During the Covid-19 pandemic, health and care staff have been working in different ways to meet the needs of patients and service users, all while under a huge amount of pressure. This conference will take a look at some examples of those changes and how people working in health and care have been working remotely, flexibly and in an agile way to meet the demands created by the pandemic and to develop new and improved ways of working for the future.]

Virtual conference, web-based

From: 7th June, 2021 9:00am Until: 10th June, 2021 4:00pm <https://www.kingsfund.org.uk/events/supporting-people-work-new-ways>

Reports

The following report(s) may be of interest:

[Cost of living and the impact on nursing labour outcomes in NHS acute trusts.](#)

Institute for Fiscal Studies (IFS); 2021.

<https://www.ifs.org.uk/publications/15313>

[This report examines the effect that variation in the cost of living has on the labour supply of existing nurses in NHS acute trusts. The report focuses on Band 5 and 6 nurses, which accounted for 23 per cent of the workforce in NHS acute trusts in 2018. It uses administrative payroll data to examine how trusts and nurses react to changes in the local cost of living, and the impact these changes have on the amount of labour supplied by existing nurses.]

Freely available online

[Protect, respect, connect – decisions about living and dying well during COVID-19](#)

CQC, March 2021

Review of 'do not attempt cardiopulmonary resuscitation decisions during the coronavirus (COVID-19) pandemic.

[Provider collaboration review: urgent and emergency care](#)

CQC, March 2021

[The report shares the overall learning of the CQC's review of collaboration in urgent and emergency care]

[Securing a positive health care technology legacy from COVID-19.](#)

The Health Foundation; 2021.

<https://www.health.org.uk/publications/long-reads/securing-a-positive-health-care-technology-legacy-from-covid-19>

[This long read examines public and NHS staff experiences of technology during the pandemic, and outlines the action needed to secure a positive technology legacy from COVID-19. The research finds a majority who used technology more during the early phase of the pandemic viewed their experience positively. People also said new technology-enabled approaches were worse than traditional models of care, and these figures were even higher among older people and those with a carer.]

Freely available online

[Supporting urgent and emergency care during winter.](#)

Care Quality Commission (CQC); 2021.

<https://www.cqc.org.uk/news/stories/supporting-urgent-emergency-care-during-winter>

[This month's COVID-19 insight report takes a closer look at how urgent and emergency care services have been affected by the pandemic during the winter, and highlights action CQC is taking to support services under pressure.]

Freely available online

[The impact of the pandemic on urgent and emergency services and Safe and effective use of medicine in NHS trusts](#)

CQC, March 2021

[Reflections on the impact of the pandemic, to learn for the future.]

Articles

The following article(s) may be of interest:

[Building back better: nurses leading our approach to preventing, promoting and protecting All Our Health.](#)

Newland R. *British Journal of Nursing* 2021;30(4):250-251.

[As we enter 2021, the priorities for health and care systems across the globe remain centred on the need to manage the COVID-19 pandemic (Bourgeault et al, 2020). Although, of course, the unrelenting events taking place since early 2020 are things that we would not want to go through again, at the same time this has provided nurses and midwives with first-hand experience of the complex and dynamic nature of public health policy and practice.]

Available with an NHS OpenAthens password for eligible users

[Catheterisation without pain: the HCA challenge.](#)

Burgess P. *British Journal of Healthcare Assistants* 2021;;doi.org/10.12968/bjha.2021.15.1.6..

[No abstract available.]

Contact the library for a copy of this article

[Clinical performance and quality of life impact of an absorbent bacteria-binding foam dressing.](#)

Seckam A M. *British Journal of Nursing* 2021;30(5):S21–S30.

[The aim of this prospective multicentre observational study was to assess the clinical performance and safety of Cutimed® Siltec® Sorbact® absorbent bacteria-binding foam dressing in wound healing and its impact on patients' quality of life (QoL).]

Available with an NHS OpenAthens password for eligible users

[**Comprehensive analysis of cell therapy on chronic skin wound healing: a meta-analysis.**](#)

Dong Y. *Human Gene Therapy* 2021;:doi: 10.1089/hum.2020.275..

[In this study, cell therapy proved effective in decreasing the size of ulcer and improving wound closure rate. Additionally, major amputation rate was decreased in the cell therapy group. However, the symptoms of pain were hardly alleviated by cell therapy in patients with cutaneous ulcers caused by peripheral artery disease-related critical limb ischemia.]

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[**Creating a culture of quality: our experience with providing feedback to frontline hospitalists.**](#)

Becker B. *BMJ Open Quality* 2021;10(1):<https://bmjopenquality.bmj.com/content/10/1/e001141.long>.

[Conclusions: Implementation of a monthly performance feedback report for hospitalists, complemented by peer comparison and guidance on tactics to achieve these metrics, created a culture of quality and improvement in the quality of care delivered.]

[**Deep tissue injury: a narrative review on the aetiology of a controversial wound.**](#)

Wynn M. *British Journal of Nursing* 2021;30(5):S32–S37.

[Understanding the aetiology of DTIs is essential to guide prevention and treatment in addition to ensuring healthcare governance processes deeply tied to pressure injury are effective and efficient. This article presents a narrative review on the clinical and animal study evidence indicating contemporary understanding of DTI.]

Available with an NHS OpenAthens password for eligible users

[**Factors influencing retention among hospital nurses: systematic review.**](#)

Marufu T C. *British Journal of Nursing* 2021;30(5):302–308.

[This review comprehensively compiled an update on factors affecting retention among hospital nursing staff. Conclusion: Identified turnover factors are long-standing. To mitigate the impact of these factors, evaluation of current workforce strategies should be high priority.]

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[**Human factors in escalating acute ward care: a qualitative evidence synthesis.**](#)

Ede J. *BMJ Open Quality* 2021;10(1):DOI: 10.1136/bmjopen-2020-001145.

[Conclusions: Early Warning Scores have clinical benefits but can sometimes impede escalation in patients not meeting the threshold. Staff use other factors (soft signals) not captured in Early Warning Scores to escalate care. The literature supports strategies that improve the escalation process such as good patient assessment skills.]

[**Implementation and evaluation of a palliative and end-of-life care peer-learning initiative.**](#)

Buono M. *British Journal of Nursing* 2021;30(4):244-249.

[Palliative and end-of-life care skills for nurses in acute care are dependent on the level of training received. Hospices are seen as fountains of knowledge in end-of-life and complex care issues. This study evaluated peer learning between registered nurses (RNs) at West Suffolk Foundation Trust and St Nicholas Hospice Care. Six acute and six hospice nurses spent 1 week each, over a 6-month period, shadowing in the opposite of their usual acute or hospice setting.]

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[**Implementing receiver-driven handoffs to the emergency department to reduce miscommunication.**](#)

Huth K. *BMJ Quality & Safety* 2021;30(3):208-215.

[Conclusions: Implementation of a receiver-driven intervention to standardise clinic-to-ED handoffs was associated with improved communication quality. These findings suggest that expanded implementation of similar programmes may significantly improve the care of patients transferred to the paediatric ED.]

[**Leadership and management for nurses working at an advanced level.**](#)

Wood C. *British Journal of Nursing* 2021;30(5):282–286.

[Leadership and management form a key part of advanced clinical practice (ACP) and work in synergy with the other pillars of advanced practice. Advanced clinical practitioners focus on improving patient outcomes, and with application of evidence-based practice, using extended and expanded skills, they can provide cost-effective care.]

Available with an NHS OpenAthens password for eligible users

[Learning the lessons from patient safety incidents.](#)

Tingle J. *British Journal of Nursing* 2021;30(4):254-255.

[The author discusses some key reports and sources of information that can help inform patient safety teaching and learning. Nobody is perfect and we all make mistakes. In health care some degree of error is inevitable. Care is a multifaceted process often involving complex procedures, treatment regimens and equipment. We are dealing with human interaction and the exercise of human skill and judgment.]

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[LGBTQ+ people living with dementia: an under-served population.](#)

British Journal of Healthcare Assistants 2021;;doi.org/10.12968/bjha.2021.15.1.26..

[The aim of this applied practice paper was to produce an introductory summary of some of the challenges and considerations facing LGBTQ+ people living with dementia. This is the second in a series of clinical articles on dementia in underserved populations.]

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[Medication review interventions to reduce hospital readmissions in older people.](#)

Dautzenberg L. *Journal of the American Geriatrics Society* 2021;;doi.org/10.1111/jgs.17041.

[Medication review in combination with medication reconciliation, patient education, professional education and transitional care, was associated with a lower risk of hospital readmissions compared to usual care. An effect of medication review without co-interventions was not demonstrated. Trials of higher quality are needed in this field.]

Freely available online

[Prevalence, incidence, length of stay and cost of healthcare-acquired pressure ulcers in pediatric populations: A systematic review and meta-analysis.](#)

Triantafyllou C. *International Journal of Nursing Studies* 2020;;doi: 10.1016/j.ijnurstu.2020.103843..

[The results of this meta-analysis indicate that hospital-acquired pressure ulcers occur frequently in pediatric populations with a great variation across different age groups. Moreover, although limited data are available, it seems that hospital-acquired pressure ulcers have significant economic implications for the healthcare systems since they prolong patients' hospitalization stay; these findings further highlight the need for implementation of patient-based prevention strategies.]

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[Rare health conditions 42: clinical supervision and its importance.](#)

Barber C. *British Journal of Healthcare Assistants* 2021;;doi.org/10.12968/bjha.2021.15.1.16..

[The purpose of this series is to highlight a range of rare health conditions. Rare health conditions are those that affect no more and usually fewer than 1 person in every 2000 and many healthcare assistants and nurses will encounter some of these conditions, given the high number of these conditions. This article will briefly explore a range of issues that are associated with providing care and support to those with rare health conditions, Looking at disability models and how they impact those with rare health conditions.] *Available with an OpenAthens login*

[Scale-up and sustainability of a personalized end-of-life care intervention: a longitudinal mixed-methods study.](#)

Takaoka A. *BMC Health Services Research* 2021;21(1):218.

[Scaling-up and sustaining healthcare interventions can be challenging. The objective was to describe how the 3 Wishes Project (3WP), a personalized end-of-life intervention, was scaled-up and sustained in an intensive care unit (ICU).]

[Series 5, chronic wounds; part 4h. Pressure ulcer care of the obese patient.](#)

Lloyd Jones M. *British Journal of Healthcare Assistants* 2021;;doi/full/10.12968/bjha.2021.15.1.22..

[In 2014, 41 million children and adolescents aged 5–19 were overweight or obese (WHO, 2020). Thankfully, by 2016, the number had reduced, but was still high, at over 340 million. As a healthcare provider, with the number of people with weight problems continuing to increase, you are very likely to have to care for a patient who is either overweight or obese. The aim of this article is to consider the needs of obese patients with regards to pressure ulcer prevention and treatment.]

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[Smart Dressings for Wound Healing: A Review.](#)

Barros Almeida I. *Advances in Skin and Wound Care* 2021;;doi: 10.1097/01.ASW.0000725188.95109.68..

[This review demonstrates the lack of studies examining wound dressing sensors. New studies are required to assess sensors that allow not only wound monitoring, but also the application of drugs in a single dressing, providing a better and more cost-effective treatment for wounds.]

Freely available online

[The assessment and management of hypergranulation.](#)

Mitchell A. *British Journal of Nursing* 2021;30(5):S6–S10.

[Hypergranulation (also known as overgranulation) during the proliferation phase occurs when granulation tissue over grows beyond the wound surface. Such wounds have a discoloured, raised or swollen appearance and bleed easily. The cause may be infection, the effects of friction on the wound area, nutritional deficit or stress. Treatments will depend on the cause. There is a lack of studies on treatments for hypergranulation and more research is required.]

Available with an NHS OpenAthens password for eligible users

[The economic impact of pressure ulcers among patients in intensive care units. A systematic review.](#)

McEvoy N. *Journal of Tissue Viability* 2020;;doi: 10.1016/j.jtv.2020.12.004..

[There was a significant difference in the cost of PU prevention and treatment strategies between studies. This is problematic as it becomes difficult to accurately evaluate costs from the existing literature, thereby inhibiting the usefulness of the data to inform practice. Given the methodological heterogeneity among studies, future studies in this area are needed and these should use specific methodological guidelines to generate high-quality health economic studies.]

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[The effect of reverse Trendelenburg position versus semi-recumbent position on respiratory parameters of obese critically ill patients: A randomised controlled trial.](#)

Hassan EA. *Journal of Clinical Nursing* 2021;;10.1111/jocn.15645..

[J Clin Nurs. 2021 Jan 12. doi: 10.1111/jocn.15645.]

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[The knowledge and skills required of advanced level practitioners for accreditation and safe practice.](#)

Gloster A. *British Journal of Nursing* 2021;30(3):168–171.

[Change, for better or worse, seems to be endemic in western societies, and in the past two decades advanced practice has not been exempt. Healthcare leaders and lecturers in the UK have adapted education programmes that are preparing for increasing numbers of health professionals to take on advanced clinical practice roles that meet policy and practice developments emerging from population need and government-influenced changes.]

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[The Pathophysiology of Skin Failure vs. Pressure Injury: Conditions That Cause Integument Destruction and Their Associated Implications.](#)

Bain M. *Wounds* 2020;32(11):319-327.

[Clinicians need to better understand the pathophysiology and classification of integument injuries by underlying etiologies both avoidable and unavoidable. A more accurate diagnosis would lead to more appropriate treatment strategies, an improved quality of care for affected patients, less wasted resources and reduced financial penalties for healthcare providers, and decreased medicolegal claims.]

Freely available online

[The quality and clinical applicability of recommendations in pressure injury guidelines: A systematic review of clinical practice guidelines.](#)

Gillespie BM. *International Journal of Nursing Studies* 2021;;DOI: 10.1016/j.ijnurstu.2020.103857.

[Conclusions: There is disparity in the quality of the included guidelines, however four high quality guidelines are

available. These guidelines could ideally be implemented in daily practice and adapted to local policies.]
Contact the library for a copy of this article

[Transitioning to an ACP: a challenging journey with tribulations and rewards.](#)

Reynolds J. *British Journal of Nursing* 2021;30(3):166.

[The authors discuss the difficulties advanced clinical practitioners face when taking on this new role, and how drawing on their transferable skills can help. Over 70 years, to keep pace with the changing health requirements of the nation, the NHS has needed to adapt to survive. Now, in the 21st century, to meet the complex health demands of an ageing population and to relieve medical workforce pressures, one of the newer roles to emerge is that of the advanced clinical practitioner (ACP).]

Available with an NHS OpenAthens password for eligible users

[Tympanic thermometers support fast and accurate temperature monitoring in acute and alternative care.](#)

Hill B. *British Journal of Nursing* 2021;30(5):288-295.

[This article explores body temperature and the physiological process of thermoregulation. Normal body temperature and body temperature changes are discussed, including comorbidities associated with body temperature and signs of hyperthermia and hypothermia, and the factors that affect intraoperative temperature regulation.]

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[Undertaking consultations and clinical assessments at advanced level.](#)

Diamond-Fox X. *British Journal of Nursing* 2021;30(4):238-243.

[Once deemed the reserve of doctors, 'the medical interview' has since transitioned across professional boundaries and is now a key part of the advanced clinical practitioner (ACP) role. Much of the literature surrounding this topic focuses on a purely medical model; however, the ACPs' use of consultation and clinical assessment of complex patient caseloads with undifferentiated and undiagnosed diseases is now a regular feature in healthcare practice.]

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[Wound assessment and dressing selection: an overview.](#)

Bishop A. *British Journal of Nursing* 2021;30(5):S12–S20.

[Holistic assessment of a wound is essential and can confirm whether healing is progressing as anticipated. Frameworks can assist the clinician to conduct the assessment in a systematic way and to plan appropriate care for the patient. Dressings form a relatively small part of the overall care plan, but with such an array available the choice can be overwhelming. This article provides an update on wound assessment using the TIMERS framework and considers the factors influencing dressing choice.]

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Covid-19

Guidelines

[COVID-19 rapid guideline: managing COVID-19 NICE guideline \[NG191\]](#)

The National Institute for Health and Care Excellence (NICE); 2021.

<https://www.nice.org.uk/guidance/NG191>

[The National Institute for Health and Care Excellence (NICE) has replaced its previous rapid COVID-19 guidelines with a single guideline. The guideline covers management of clinically or lab-diagnosed COVID-19 for children, young people, and adults in all care settings. It covers key symptoms of COVID-19 for identifying patients with severe illness, including confusion, reduced oxygen levels, and shortness of breath.]

Freely available online

[American Society of Hematology 2021 guidelines on the use of anticoagulation for thromboprophylaxis in patients with COVID-19.](#)

Cuker A. *Blood Advances* 2021;5(3):872-888.

[These recommendations were based on very low certainty in the evidence, underscoring the need for high-quality, randomized controlled trials comparing different intensities of anticoagulation. They will be updated using a living recommendation approach as new evidence becomes available.]

Freely available online

[Colchicine in the Management of COVID-19 \(SARS-CoV 2\) Positive Patients](https://icmanaesthesiacovid-19.org/s/Theraputic-alert-Colchicine-in-management-of-COVID-19-Positive-Patients.pdf)

Medicines and Healthcare Products Regulatory Agency (MHRA); 2021.

<https://icmanaesthesiacovid-19.org/s/Theraputic-alert-Colchicine-in-management-of-COVID-19-Positive-Patients.pdf>

[Colchicine should not be used in the management of COVID-19 positive patients other than in the context of a trial, or unless there is an additional licensed indication for its use]

Freely available online

[Convalescent Plasma in the Management of Hospitalised Patients with COVID-19](https://www.cas.mhra.gov.uk/ViewAndAcknowledgment/viewAlert.aspx?AlertID=103152)

Medicines and Healthcare Products Regulatory Agency (MHRA); 2021.

<https://www.cas.mhra.gov.uk/ViewAndAcknowledgment/viewAlert.aspx?AlertID=103152>

[It is now recommended that convalescent plasma is NOT used in the management of hospitalised patients with confirmed or suspected SARS-CoV-2 infection.]

Freely available online

[COVID-19 vaccines and medicines: updates for March 2021.](https://www.gov.uk/drug-safety-update/covid-19-vaccines-and-medicines-updates-for-march-2021)

Medicines and Healthcare Products Regulatory Agency (MHRA); 2021.

<https://www.gov.uk/drug-safety-update/covid-19-vaccines-and-medicines-updates-for-march-2021>

[A summary of advice recently issued by the MHRA relating to coronavirus (COVID-19), up to 18 March 2021.]

Freely available online

[Every action counts.](https://www.england.nhs.uk/coronavirus/publication/every-action-counts/)

NHS England; 2021.

<https://www.england.nhs.uk/coronavirus/publication/every-action-counts/>

[Persuading everyone – staff, patients and visitors – to follow good practice in COVID-19 infection prevention and control is key to keeping healthcare settings as safe as possible. Every Action Counts draws on behavioural expertise to support local NHS organisations with resources on awareness, leadership, morale and wellbeing, training, and operational interventions.]

Freely available online

[Surviving Sepsis Campaign Guidelines on the Management of Adults With Coronavirus Disease 2019 \(COVID-19\) in the ICU: First Update.](https://pubmed.ncbi.nlm.nih.gov/33555780/)

Surviving Sepsis Campaign; 2021.

<https://pubmed.ncbi.nlm.nih.gov/33555780/>

[The Surviving Sepsis Campaign Coronavirus Disease 2019 panel issued several recommendations to guide healthcare professionals caring for adults with critical or severe coronavirus disease 2019 in the ICU. Based on a living guideline model the recommendations will be updated as new evidence becomes available.]

Contact the library for a copy of this article

Reports

[COVID-19 and its cardiovascular effects: a systematic review of prevalence studies.](https://doi.org/10.1002/14651858.CD013879)

Pellicori P. *Cochrane Database of Systematic Reviews* 2021;3:CD013879.

[OBJECTIVES: To assess the prevalence of pre-existing cardiovascular comorbidities associated with suspected or confirmed cases of COVID-19 in a variety of settings, including the community, care homes and hospitals. We also assessed the nature and rate of subsequent cardiovascular complications and clinical events in people with suspected or confirmed COVID-19.]

Articles

[Arterial and venous thromboembolism in COVID-19: a study-level meta-analysis.](#)

Tan BK. *Thorax* 2021;;doi: 10.1136/thoraxjnl-2020-215383.

[Patients admitted in the ICU for severe COVID-19 had a high risk of VTE. Conversely, further studies are needed to determine the specific effects of COVID-19 on the risk of ATE or VTE in less severe forms of the disease.]

Freely available online

[Beyond dexamethasone, emerging immuno-thrombotic therapies for COVID-19.](#)

Jensen MP. *British Journal of Clinical Pharmacology* 2021;87(3):845-857.

[Understanding mechanisms underpinning hyperinflammation & coagulopathy is essential to formulating rationale therapeutic approaches beyond use of dexamethasone. Article reviews pathophysiology thought to underlie COVID-19 with clinical correlates and therapies being investigated.]

Freely available online

[COVID-19 and Obesity: The 2021 Atlas. The cost of not addressing the global obesity crisis.](#)

World Obesity; 2021.

<https://www.worldobesityday.org/assets/downloads/COVID-19-and-Obesity-The-2021-Atlas.pdf>

[Through detailed analyses of the latest peer-reviewed data, we demonstrate how overweight is a highly significant predictor of developing complications from COVID-19, including the need for hospitalisation, for intensive care and for mechanical ventilation. Overweight is also a predictor of death from COVID-19.]

Freely available online

[Major Update: Remdesivir for Adults With COVID-19: A Living Systematic Review and Meta-analysis for the American College of Physicians Practice Points.](#)

Kaka AS. *Annals of Internal Medicine* 2021;;doi.org/10.7326/M20-8148.

[In hospitalized adults with COVID-19, remdesivir probably results in little to no mortality difference but probably improves the percentage recovered and reduces serious harms and may result in a small reduction in the proportion receiving ventilation. For patients not receiving ventilation, a 5-day course may provide greater benefits and fewer harms with lower drug costs than a 10-day course.]

Freely available online

[RCN Independent review of guidelines for the prevention and control of Covid-19 in health care settings in the United Kingdom: evaluation and messages for future infection-related emergency planning.](#)

Royal College of Nursing (RCN); 2021.

<https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/publications/2021/march/009-627.pdf?la=en>

[An independent review of guidelines for the prevention and control of COVID-19 in health care settings in the UK, and an evaluation and messages for future infection-related emergency planning.]

[Signs and symptoms to determine if a patient presenting in primary care or hospital outpatient settings has COVID-19.](#)

Struyf T. *Cochrane Database of Systematic Reviews* 2021;2:CD013665.

[OBJECTIVES: To assess the diagnostic accuracy of signs and symptoms to determine if a person presenting in primary care or to hospital outpatient settings, such as the emergency department or dedicated COVID-19 clinics, has COVID-19.]

[Systematic review and meta-analysis of anakinra, sarilumab, siltuximab and tocilizumab for COVID-19.](#)

Khan FA. *Thorax* 2021;;doi: 10.1136/thoraxjnl-2020-215266.

[Tocilizumab was associated with a lower relative risk of mortality in prospective studies, but effects were inconclusive for other outcomes. Current evidence for the efficacy of anakinra, siltuximab or sarilumab in COVID-19 is insufficient, with further studies urgently needed for conclusive findings.]

Freely available online

[The COVID-19 ibuprofen controversy: A systematic review of NSAIDs in adult acute lower respiratory tract infections.](#)

Vaja R. *British Journal of Clinical Pharmacology* 2021;87(3):776-784.

[In this systematic review of NSAID use during acute lower respiratory tract infections in adults, we found that the existing evidence for mortality, pleuro-pulmonary complications and rates of mechanical ventilation or organ failure is of extremely poor quality, very low certainty and should be interpreted with caution.]

Freely available online

[Thoracic imaging tests for the diagnosis of COVID-19.](#)

Islam N. *Cochrane Database of Systematic Reviews* 2021;3:CD013639.

[BACKGROUND: Our 2020 edition of this review showed thoracic (chest) imaging to be sensitive and moderately specific in the diagnosis of coronavirus disease 2019 (COVID-19). In this update, we include new relevant studies, and have removed studies with case-control designs, and those not intended to be diagnostic test accuracy studies.

OBJECTIVES: To evaluate the diagnostic accuracy of thoracic imaging (computed tomography (CT), X-ray and ultrasound) in people with suspected COVID-19.]

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