

BILH Definitions of Risk Factors for Progression to Severe COVID-19

At least one of the following risk factors for progression to severe COVID-19 is required for treatment with outpatient COVID-19 therapeutics, including remdesivir, nirmatrelvir/ritonavir (Paxlovid), or monoclonal antibody therapy.

Risk Factors for Progression to Severe COVID-19
Age ≥65 years
Autoimmune disease requiring ongoing systemic therapy
Cardiovascular disease or hypertension
Chronic kidney disease
Chronic liver disease
Chronic lung diseases (for example, chronic obstructive pulmonary disease, asthma [moderate-to-severe], interstitial lung disease, cystic fibrosis and pulmonary hypertension)
Diabetes
High Risk Body-Mass Index (BMI): <ul style="list-style-type: none">• 25-30 kg/m² AND not fully vaccinated with primary 1-2 dose series (no vaccination or series completed less than 2 weeks prior)• >30 kg/m² regardless of vaccination status
Immunocompromising health conditions categorized as mild, moderate, or severe (see BILH definitions)
Medical-related technological dependence (e.g. tracheostomy, gastrostomy, or positive pressure ventilation [not related to COVID 19])
Neurodevelopmental disorders (e.g. cerebral palsy, genetic/metabolic syndromes, severe congenital anomalies)
Pregnancy and up to 6 weeks post-partum
Race/ethnicity that is associated with a higher risk of hospitalization or death from COVID-19, including Black or African American, Hispanic or Latinx, American Indian or Alaska Native
Sickle cell disease or other hemoglobinopathy