<table>
<thead>
<tr>
<th>Title of Paper</th>
<th>Journal</th>
<th>Pub. Date</th>
<th>Category</th>
<th>Article highlights</th>
<th>Problem/Background</th>
<th>Design</th>
<th>Groups, for clinical studies</th>
<th>Results</th>
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<tbody>
<tr>
<td><strong>Ongoing Clinical Trials for the Management of the COVID-19 Pandemic</strong></td>
<td>Trends in Pharmacological Sciences</td>
<td>Journal Pre-proof</td>
<td>Treatment</td>
<td>Summary for currently registered intervention clinical trials for the treatment and prevention of COVID-19</td>
<td>Summary and insights for global response to COVID-19 are lacking</td>
<td>Systematic review</td>
<td>Two tables summarizing clinical trials registered up to 3/20/20, describing their way of intervention, size, whether randomized, whether blinded, recruiting status, and country of origin. Trials for both treatments and preventions are included.</td>
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<tr>
<td><strong>Level of IL-6 predicts respiratory failure in hospitalized symptomatic COVID-19 patients</strong></td>
<td>medRxiv</td>
<td>4/20</td>
<td>Prognosis</td>
<td>Small, single-center study suggests moderately elevated IL-6 levels above 80pg/ml may be sufficient to identify COVID-19 patients with a high risk of respiratory failure.</td>
<td>Most individuals infected with COVID-19 are minimally symptomatic. However, some individuals develop severe disease progression. Here the authors investigate for variables that allow the prediction of patients with a high risk of respiratory failure and need of mechanical ventilation.</td>
<td>Cross-sectional study</td>
<td>40 individuals with RT-PCR-confirmed COVID-19</td>
<td>Symptoms: 13.1% of children had lymphopenia, vs 96.1% of adults. The most prevalent symptom in children was fever (16.3%), followed by cough (14.4%), nasal symptoms (3.6%), diarrhea (2.7%) and nausea/vomiting (2.5%). One hundred forty-five (12.9%) children were diagnosed with pneumonia and 43 (3.8%) upper airway infections were reported. Computed tomography: Abnormalities were reported in 62.7% of cases. The most prevalent abnormalities reported were ground glass opacities, patchy shadows and consolidations. Overall: Children are typically asymptomatic or have mild disease, but are important in community spread. Some evidence that fecal virus shedding can continue for weeks after symptoms have ameliorated.</td>
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<td><strong>Clinical Manifestations of Children with COVID-19: a Systematic Review</strong></td>
<td>medRxiv</td>
<td>4/3/20</td>
<td>Diagnosis &amp; Prevention</td>
<td>Symptoms differ between pediatric cases and adults. Children are less likely to have fever, lymphopenia, or radiologic abnormalities</td>
<td>Review of how pediatric populations present with the condition</td>
<td>Systematic review</td>
<td>Articles included had patients less than 18 years old, cases of COVID-19 confirmed with RT-PCR, and descriptions of symptoms</td>
<td>If 1) most severe COVID-19 cases are admitted to the hospital, 2) access to health service is good, 3) hospitals reports cases and deaths regularly, and 4) hospital admission criteria are broadly similar, than COVID-19 ICU admissions and mortality are good indicators of COVID-19 spread. These data should be interpreted with an understanding that hospital admissions occur on average 7 days after symptom onset and around 12 days after exposure.</td>
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<td><strong>Monitoring the COVID-19 epidemic in the context of widespread local transmission</strong></td>
<td>Lancet Respir Med</td>
<td>4/20</td>
<td>Epidemiology</td>
<td>Monitoring of COVID-19 ICU cases and mortalities are the most reliable surveillance measures.</td>
<td>Given disparate testing, reporting, and criteria, how can spread of SARS-CoV-2 be monitored? How does this change when local infections become predominantly community spread?</td>
<td>Ideas, editorials, reviews or opinions</td>
<td>Total plasma exchange has been associated with decreased mortality in the setting of sepsis in multiple studies, including those with pneumonia at the etiology of the sepsis. The authors suggest considering total plasma exchange earlier in the disease course rather than as a rescue therapy.</td>
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<td><strong>A novel treatment approach to the novel coronavirus: an argument for the use of therapeutic plasma exchange for fulminant COVID-19</strong></td>
<td>Critical Care</td>
<td>4/20</td>
<td>Legal, Ethics &amp; Management</td>
<td>Total plasma exchange may be a treatment for the host response to COVID-19.</td>
<td>Host response to SARS-CoV-2 is emerging as an important contributor to the morbidity and mortality associated with COVID-19. Therapeutic plasma exchange can remove inflammatory cytokines, stabilize endothelial membranes, and reset hypercoagulable states.</td>
<td>Ideas, editorials, reviews or opinions</td>
<td>Ferrets with direct infection (6), direct contact (6), indirect contact (6), PBS control (6) were included in the study. Infected ferrets presented elevated body temperatures that went back to normal by 8 day-post-infection (dpi). Occasional cough and reduced activities detected, yet no body weight loss or fatalities. Viral RNA can be detected in nasal washes, saliva, fecal and urine samples before 8 dpi. After 12 dpi, high titers of neutralizing antibodies can be detected in direct infection and direct contact groups.</td>
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<td><strong>Infection and Rapid Transmission of SARS-CoV-2 in Ferrets</strong></td>
<td>Cell Host &amp; Microbe</td>
<td>Journal Pre-proof</td>
<td>Biology</td>
<td>Infected ferrets show elevated body temperature and viral replication. Both direct and indirect transmissions seen between ferrets.</td>
<td>Animal model for SARS-CoV-2 infection and transmission is needed</td>
<td>Basic science</td>
<td>Ferrets with direct infection (6), direct contact (6), indirect contact (6), PBS control (6) were included in the study. Infected ferrets presented elevated body temperatures that went back to normal by 8 day-post-infection (dpi). Occasional cough and reduced activities detected, yet no body weight loss or fatalities. Viral RNA can be detected in nasal washes, saliva, fecal and urine samples before 8 dpi. After 12 dpi, high titers of neutralizing antibodies can be detected in direct infection and direct contact groups.</td>
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<td>Diabetic Patients with Severe Coronavirus Disease During Covid-19: A Meta-analysis</td>
<td>J Medical Virology</td>
<td>4/3/20</td>
<td>Prognosis</td>
<td>In a meta-analysis of six studies from China, neutrophil-to-lymphocyte ratio and lymphocyte-to-C reactive protein ratio was significantly decreased.</td>
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<td>Detection of Antibodies against SARS-CoV-2 in Patients with COVID-19</td>
<td>J Medical Virology</td>
<td>4/3/20</td>
<td>Legal, Ethics &amp; Management</td>
<td>In a small sample of patients from Wuhan, IgG and IgM titers appeared to trend down in association with improvement on CT. Further studies focusing on antibody detection will help profile the COVID-19 spectrum.</td>
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<td>Transmission Potential of SARS-CoV-2 in Viral Aerosol Shedding Observed at the University of Nebraska Medical Center</td>
<td>medRxiv</td>
<td>3/26/20</td>
<td>Epidemiology</td>
<td>Should patients with COVID-19 be under droplet or airborne isolation protocols?</td>
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<td>Aerodynamic Characteristics of SARS-CoV-2 Aerosol in Wuhan Hospitals during COVID-19 Outbreak</td>
<td>bioRxiv</td>
<td>3/10/20</td>
<td>Biology</td>
<td>The virus aerosol deposition on protective apparel or floor surface and their subsequent resuspension is a potential transmission pathway.</td>
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<td>Trends in Immunology</td>
<td>Treatment</td>
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<td>Neutralizing antibodies (nAbs) may serve as a potential treatment option against SARS-CoV-2 infection and nAbs specific to other coronaviruses may also have cross-neutralizing activity against SARS-CoV-2. Because there are no current vaccines or treatments against SARS-CoV-2, researchers are exploring other forms of treatment to slow the spread of the virus.</td>
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<td>Diabetic and COVID-19</td>
<td>Trends in Immunology</td>
<td>In Press</td>
<td></td>
<td>nAbs target the various domains of the spike (s) protein, including the S1-RBD, S1-NTD, or the S2 region, in order to block RBD binding to host cell receptors or S2-mediated cell membrane fusion or entry into the host. While no current SARS-CoV-2 specific nAbs have been reported, there is a potential of cross-neutralizing activity from nAbs against SARS-CoV and MERS-CoV, but very few of these nAbs have gone to clinical trials, so vigorous testing of all nAbs would still be required.</td>
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<td>1) RNA concentration of SARS-CoV-2 in aerosol: 19 copies m^-3 in patient mobile toilet room, 18-42 copies m^-3 in the Protective Apparel Removal Rooms (both in Fangcang hospital); viral copies in PARRs dropped with reduced staff and more stringent sanitation; over 3 copies m^-3 in crowd gathering sites (Renmin hospital). 2) Size of particles carrying viral RNA peak at 0.25-1.5μm in PPARs, and above 2.5μm in staff office. 3) Area normalized deposition rate inside ICU is between 31 - 113 copies m^-2 hour^-1.</td>
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Individuals with diabetes not only face increased risk of mortality from Covid-19, but their regular access to medical care becomes more difficult as well. As more appointments transition to online and face to face medical care is reduced, diabetic patients will feel that they have less support when needing advice and help accessing critical medication like insulin.

All patients tested positive for IgG against virus, 47 tested positive for IgM; IgG titers > IgM. In a subset, repeat titers at 1wk showed decrease, along with negative RNA tests and improvement on CT findings - suggesting antibody detection could act as indicator of the stage of COVID-19 progression.
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<tr>
<th>Title</th>
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<th>Date</th>
<th>Section</th>
<th>Summary</th>
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<tbody>
<tr>
<td>The Italian coronavirus disease 2019 outbreak: recommendations from clinical practice</td>
<td>Anaesthesia</td>
<td>3/27/20</td>
<td>Diagnosis &amp; Prevention</td>
<td>- impact of covid19 on regional and national healthcare infrastructure - recommendations of clinical management, safe oxygen therapy; airway management; PPE; caring for diagnosed covid19 patients No existing experiences and recommendations published during the Italian outbreak. To supplement clinical data from the Chinese outbreak. Ideas, editorials, reviews or opinions</td>
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<tr>
<td>Behavioral and Emotional Disorders in Children during the COVID-19 Epidemic</td>
<td>The journal of pediatrics</td>
<td>4/3/20</td>
<td>Legal, Ethics &amp; Management</td>
<td>commentary by China-EPA-UNEPSA working group to raise awareness of children's psychological needs during epidemics raise awareness of children's psychological needs during epidemics emphasizing the role of families and caregivers in the timely recognition and management of negative emotions Ideas, editorials, reviews or opinions</td>
</tr>
<tr>
<td>Abdominal and testicular pain: An atypical presentation of COVID19</td>
<td>The American Journal of Emergency Medicine</td>
<td>03/31/20</td>
<td>Prognosis</td>
<td>Case report of a man referred to the ED for abdominal and testicular pain and subsequently tested positive for covid19. Inadequate studies and understandings on asymptomatic and atypical presentations of covid19 patients. Raise awareness of updated patient and health care worker management of individuals outside of &quot;flu-like symptoms&quot; Case reports/series</td>
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These summaries were prepared by medical and graduate students at Washington University in St. Louis
Please note that medRxiv and bioRxiv articles have not yet been peer-reviewed.
All WashU Med faculty/staff currently have free remote access to full-text literature via their WUSTL Key at login.beckerproxy.wustl.edu/login