Patient information Summary of NICE Guidelines for Long Covid

The National Institute for Clinical Excellence (NICE) is a public body responsible for providing national guidance and advice to improve health and social care. It offers evidence-based information on the most effective ways to prevent, diagnose, and treat various medical conditions in the NHS.

This is a short summary of the NICE Covid19 rapid guideline on managing long term symptoms

COMMON SYMPTOMS of Long Covid

People with Long Covid experience a wide range of symptoms. These commonly include but are not limited to:

- Breathlessness, Cough
- Chest tightness, Chest pain, Palpitations
- Fatigue
- Symptoms of anxiety and depression
- Cognitive impairment ('brain fog', loss of concentration or memory issues), Headache, Sleep disturbance, Dizziness, Mobility impairment, Visual disturbance
- Abdominal pain, Nausea, Diarrhoea and reduced appetite
- Joint pain, Muscle pain
- Skin rashes
- Tinnitus, Earache, Sore throat, Dizziness, Loss of taste and/or smell, Nasal congestion

IDENTIFICATION of Long Covid

Your GP should consider 'Long COVID' for symptoms that:

- Develop during or after COVID-19
- Continue for more than 12 weeks
- Are not explained by an alternative diagnosis

These symptoms can fluctuate and change over time and can affect any system in the body.

You should receive advice and written information explaining:

- the most common symptoms people experience
- that recovery time is not linked to severity of acute Covid infection
- that symptoms fluctuate and how to self-manage symptoms
- who to contact about new, ongoing or worsening symptoms

You should receive information on COVID-19 vaccines.

All information should be provided in a way that is accessible and age-appropriate.

If you have ongoing symptoms 4 weeks or more after a COVID-19 infection, you should be offered an initial consultation to decide whether you need further support.

After an initial consultation, your healthcare practitioner should discuss with you whether you need a further assessment. If you have been in hospital with COVID-19, you should be offered a follow-up consultation at 6 weeks after discharge, to check for new or ongoing symptoms.

ASSESSMENT of Long Covid

If you have ongoing symptoms of COVID-19, your GP assessment should consider you as a whole person. The assessment should include:

- Clinical history, along with other health conditions and whether they have been exacerbated
- Assessment of physical, cognitive, psychological and psychiatric symptoms, as well as of your ability to perform activities of daily living
- Health practitioner awareness that people can have wide-ranging and fluctuating symptoms after COVID-19, which can change over time
- Discussion of symptoms and how they affect your life, such as work, education, mobility and independence
- Enquiry into any feelings of worry or distress, which should be met with empathy and acknowledgement
- Support for self-management and monitoring your symptoms

A family member or carer can be present if you would benefit from support.

INVESTIGATIONS AND REFERRAL

You should be offered appropriate tests and investigations, to rule out complications or other diagnoses. Decisions about blood tests should be guided by your symptoms. If another diagnosis is suspected, appropriate investigations and referrals should be offered.

If you have any life-threatening complications from COVID-19, such as severe lung disease or cardiac chest pain, you should be urgently referred to acute services.

Depending on your symptoms and circumstances, you may be offered:

- Self-monitoring of your symptoms at home, including heart rate, blood pressure, pulse oximetry or symptom diaries.
 Note: some pulse oximeters have lower accuracy on borderline saturation levels, and people with dark skin.
- An exercise tolerance test to record breathlessness, heart rate and oxygen saturation
- Lying and standing blood pressure and heart rate recordings
- A chest X-ray (only if you have ongoing breathing symptoms)
- Referral to another service, such as an integrated multidisciplinary assessment service In Sheffield this would be the Long Covid Rehabilitation Hub

If you are experiencing severe mental health difficulties you should be urgently referred for psychiatric assessment.

PLANNING CARE

After your assessment, the practitioner should discuss your options with you and help you make a decision on your support and management. They should take into account:

- The impact of your symptoms on your life
- Whether the symptoms are getting better or worse
- How the symptoms fluctuate

MANAGEMENT of Long Covid symptoms

Your healthcare practitioner should give you:

- Ways to manage your symptoms
- Who to contact if you're worried about your symptoms
- Other sources of advice and support
- Information to share with friends and family
- Support for discussions about returning to education/work, e.g. phased return

REHABILITATION

After your symptoms have been investigated, rehabilitation should include physical and mental health management.

Your health practitioner should work with you to develop a plan for rehabilitation and management of your symptoms, including:

- Areas for rehabilitation identified in your assessment
- Help deciding and working towards goals
- How to manage and monitor symptoms
- What to do if symptoms return or change

FOLLOW UP, MONITORING & DISCHARGE

Your health practitioner should work with you to decide how often you will have follow ups. This should take into account:

- Your needs and which services are involved
- Your symptoms, and how they affect your life and wellbeing
- Whether in-person or remote appointments are more appropriate for you

Discharge plans should be discussed and agreed between you and your health practitioner, and take into consideration your preferences and support.

SHARING INFORMATION & CONTINUITY OF CARE

Your clinical records should be shared promptly between services.

As much as possible, you should have a single point of contact with the same healthcare professional or team.





