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Building the house of CARDS by phenotyping on the fly

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Using clinical, pathophysiological and immunological phenotyping of ARDS to refine management of COVID-19 is urgently required to improve outcomes from refractory hypoxia <https://bit.ly/2VvZe1p>

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To the Editor:

Some patients with coronavirus disease 2019 (COVID-19), fulfilling the Berlin criteria for acute respiratory distress syndrome (ARDS), do not respond well to the current treatment paradigm [1]. The perspective by RELLO *et al.* [2] on phenotypes of COVID-19, and the editorial by Bos *et al.* [3], are therefore of great interest. The “responsible” phenotyping of COVID-19 ARDS (CARDS) recommended by Bos *et al.* [3] may be expedited by re-evaluating the existing literature on refractory hypoxia.