

ཡིག་ཡང་། རི་ ༣། ༢༠༡༩་་་་ ༢༠༢༠། ༢༥༢༡

༡༡། །མཚུངས་མེད་ས་གནས་འགོ་འཛིན་དང་སློན་ཁང་འགན་འཛིན་ལྷན་ཁྲིམས་ལ།

ཆེད་ལྷན།

དབུས་པོད་མིའི་སྐྱིལ་འདུགས་འཕྲོད་བསྟེན་ཁྲིམས་ཁང་ཆེ་འབྲིང་ཚུང་གསུམ་ནང་ནད་
ཡམས་གསར་པ་དང་འབྲེལ་བའི་སློན་ཁང་གི་འཛིན་སྐྱོང་དང་འབྲེལ་ལས་ཡོངས་ཀྱི་བྱེད་སྒོ་རྒྱུ་
གཞག་གནང་སྟོགས་ཀྱི་ལམ་སྟོན་ཡིག་ཆ་ཞིག་འདི་མཉམ་ཟུར་འབྲུལ་ལྷན་ཡོད་པས་དེ་དོན་ཕུག་
ལྟར་དགོས་ཚུའི་གསལ་བརྒྱགས་སུ་དབུས་པོད་མིའི་སྐྱིལ་འདུགས་འཕྲོད་བསྟེན་ལས་ཁུངས་ནས་
ཕྱི་ལོ་ ༢༠༢༠ ཟླ་ ༩ ཚེས་ ༡༩ ལ།

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ལྟར་འབྲུལ། རད་ཡམས་གསར་པ་དང་འབྲེལ་བའི་ཕུག་ལྟར་གནང་སྟོགས་ཀྱི་ལམ་སྟོན།

COVID-19 MANAGEMENT GUIDELINE FOR TVHA PHCs/CLINIC

Transmission

- Transmission occurs through person-to-person contact, either between people who are in close contact with each other (within 2 meters)
- Through respiratory droplets produced when an infected person coughs or sneezes.
- It may also be transmitted by touching a surface contaminated with respiratory droplets from an infected person and then touching your eyes, nose, or mouth

Symptoms

Can appear anywhere from 1-14 days after exposure.

- Fever
- Cough
- Shortness of breath
- Sore throat
- Myalgia
- Fatigue
- Severe case: pneumonia, severe acute respiratory symptoms

Vulnerable group

- Older adults
- People with underlying comorbidities

Prevention

- Stay home if you are sick
- Avoid close contact with people who are symptomatic (*coughing or sneezing onto your hand*)
- Avoid touching your eyes nose, and mouth
- Cover your cough or sneeze with a tissue or the crook of your elbow
- Wash your hands frequently with soap and water or hand sanitizer (e.g. Before and after eating, after coughing or sneezing, after going to the bathroom)
- Regularly disinfect frequently touched objects (e.g. tables, hard-backed chairs, doorknobs, light switches, remotes, handles, desks, toilets, sinks)
- Regularly clean and disinfect toilets
- Wear a mask only if you are symptomatic, or are caring for someone who is symptomatic

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- All are advised to maintain social distancing and self-monitoring for signs of illness. If symptoms occur immediately visit nearest health facilities at the earliest. Avoid public gathering and unnecessary travelling plans.
- In case of urgent public gathering, the places should have a proper ventilation

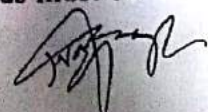
Diagnostic Criteria

- Fever OR signs/Symptoms of lower respiratory illness (e.g. cough or shortness of breath) in any person who has had close contact with a known COVID-19 patient within the past 14 days
- Fever AND signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath) requiring hospitalization in any person with a history of travel from an affected geographic area within the past 14 days
- Fever WITH severe acute lower respiratory illness (pneumonia, ARDS) requiring hospitalization in any patient without an alternative diagnosis such as influenza

TVHA Branch Facilities Patient Care Plan

- All patients should be screened on arrival for symptoms including fever, cough, and shortness of breath. Patients who report these symptoms should be further screened for travel and contact history
- Any patient who reports any of these symptoms together with relevant travel or contact history should immediately issue surgical mask and attended at the earliest by the doctor. Thus other patients pending further evaluation by a physician.
- TVHA facilities will contact districts level centres for further evaluation on suspected cases of COVID-19. The Executive Secretary of each branch facility need to procure all the detail information on how to test and report the suspected cases as per the protocols issued by the Government of India.
- The facilities need to create an Airborne Infection Isolation Room (AIIR) for suspected cases until they are transferred to the designated centres through hospital ambulance or private vehicle and avoid public transportation.
- Patients who are admitted unless necessary may not have a care attendant with them. The care attendant should be provided with mask.
- The immediate family of the suspected cases and patients who are mildly symptomatic with no significant underlying comorbidities should be encouraged to stay at home and the patient must wear a surgical mask when interacting with any other people.
- All staff interacting with confirmed or suspected cases must use personal protective equipment (PPE) (c.g. masks, gloves and etc.,) Hands must be

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- washed with soap and water before entering the room, after leaving the room and whenever required.
- Any equipment removed from the room (e.g. stethoscopes, oxygen concentrator, IV pole) must be cleaned and disinfected.
 - Hospital surface areas including bannisters, tables, beds, chairs, etc. should be regularly disinfected.
 - After discharge, the patient's room must be thoroughly disinfected.

Expectations for Hospital Staff

- Appropriately screen and triage patients on arrival
- Ensure appropriate isolation of suspected cases
- Wear N95 mask and other personal protective equipment during any encounter with a suspected or known case
- Wash hands before and after each patient encounter either with soap and water for at least 20 seconds, or with alcohol based hand sanitizer.
- Follow appropriate reporting protocols as per the Indian Government
- Maintain proper reporting and recording of COVID-19 suspected and confirmed cases.

Hospital Preparedness

- Maintain adequate stock of PPE and alcohol based hand sanitizer
- Alcohol based sanitizers should be available at each entrance and in all common areas
- Ensure availability/creation of AIIR (Airborne infection isolation room)
- Signs are posted at entrances with instructions to individual with symptoms of respiratory infections to put on mask and ensure separate consultation area for such cases
- All staff should be continually updated and trained on latest information (visit mohfw.gov.in)
- Provide hospital/staff contact numbers to camp leaders and public to address regular monitoring issues
- Follow the local district health protocol on notification and follow up of a suspected case
- Maintain proper ventilation at hospital especially OPD and patient waiting area
- Follow proper colour coded waste segregation and management

