



क्रमांक : एनओएचपी/2020/1218

दिनांक : 18-3-2020

समस्त प्राचार्य राजकीय चिकित्सा महाविद्यालय,
समस्त प्राचार्य राजकीय एवं निजी दन्त चिकित्सा महाविद्यालय,
निदेशक, ई.एस.आई. जयपुर,
समस्त मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी,
समस्त प्रमुख चिकित्सा अधिकारी,
राजस्थान

विषय: – राष्ट्रीय मुख: स्वास्थ्य कार्यक्रम (एनओएचपी) के अन्तर्गत नोवल कोरोना वायरस (COVID-19) को फैलने से बचाव एवं रोकथाम के संबंध में।

- संदर्भ:— 1. चिकित्सा स्वास्थ्य गुप-2 के पत्रांक प.1(1)चिस्वा/गुप-2/2020 दिनांक 17 मार्च, 2020
2. भारतीय दन्त परिषद के पत्रांक DE-14-Academic-2019/8855 Dated 17 March, 2020

उपरोक्त विषयांतर्गत लेख है कि विश्व स्वास्थ्य संघठन (WHO) द्वारा कोरोना वायरस (COVID-19) के संक्रमण को महामारी घोषित किया गया है। राष्ट्रीय मुख स्वास्थ्य कार्यक्रम (एनओएचपी) के अन्तर्गत उपरोक्त अंकित संदर्भों में दिये गये निर्देशों की पालना में दिनांक 30 मार्च, 2020 तक समस्त आउटरीच केम्प स्थगित किये जाते हैं साथ ही समस्त चिकित्सा एवं चिकित्सा शिक्षण संस्थानों को नोवल कोरोना वायरस (COVID-19) से बचाव एवं रोकथाम के संबंध में अधोलिखित निर्देशों की अक्षरशः पालना करवायी जानी सुनिश्चित करावें:—

1. समस्त दन्त चिकित्सकीय प्रक्रिया जिनमें एयरोसोल निकलते हैं (एयरोटर/अल्ट्रासोनिक स्केलर का इस्तेमाल किया जाता है) का उपयोग कुछ समय के लिए नहीं या कम से कम करना है अथवा केवल आपातकालीन दन्त चिकित्सकीय उपचार किया जाना है।
2. प्रत्येक रोगी का मेडीकल एवं यात्रा विवरण प्रत्येक दन्त चिकित्सा प्रक्रिया से पूर्व पूछा जावे। इस संदर्भ में भारत सरकार द्वारा जारी समस्त गाईड लाईनों की पालना अक्षरशः की जावे।
3. सभी दन्त चिकित्सक एवं उनके सहयोगी कर्मचारी नियमित रूप से साबुन एवं पानी से हाथों को साफ करें साथ ही अल्कोहल युक्त हेन्ड सेनेटाइजर का उपयोग प्रत्येक रोगी की जांच से पूर्व एवं पश्चात् आवश्यक रूप से करें एवं हाथों की सर्जिकल सैक्रबिंग करें व डिस्पोजेबल दस्तानों का प्रयोग भी किया जाना है।

4. चिकित्सकों व सहयोगी स्टाफ को अपने मुह, कान, नाक व चेहरे को छूने से बचना चाहिए।
5. चिकित्सकीय ऑपीडी में आये प्रत्येक रोगी के हाथों को साबुन/हेण्ड सेनेटाइजर से साफ करवाये जावे।
6. प्रतीक्षालय व ऑपीडी के दरवाजों के हेण्डल को अल्कोहलयुक्त डिसइन्फेक्टेंट द्वारा किटाणुमुक्त किया जावे साथ-साथ डेंटल चेयर व अन्य सतहों को दिन में कई बार अल्कोहलयुक्त डिसइन्फेक्टेंट द्वारा किटाणुमुक्त किया जावे।
7. रोगी के मुख को बाहर से आइसो प्रोपाइल अल्कोहल द्वारा स्क्रब किया जावे।
8. दन्त चिकित्सा प्रक्रिया से पूर्व प्रोवीडीन आयोडीन से कुल्ला करवाया जावे।
9. सभी दन्त चिकित्सक एवं उनके सहयोगी कर्मचारियों के द्वारा एन-95 अथवा तीन परत मास्क, हेड केप, आई ग्लासेस एवं फेस मास्क का प्रयोग किया जावे।
10. निश्चित समय अन्तराल से डेन्टल क्लिनिक्स का फ्यूमिगेशन करवाया जावे।
11. दन्त चिकित्सा ओपीडी के बाहर कोरोना वायरस से बचाव से संबंधित आईईसी का प्रदर्शन किया जावे।

संलग्न: उपरोक्तानुसार।

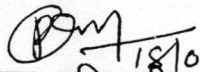
निदेशक (जन स्वास्थ्य)
चिकित्सा एवं स्वास्थ्य सेवायें
जयपुर, राजस्थान

दिनांक : 18-3-2020

क्रमांक : एनओएचपी / 2020 /

प्रतिलिपि :-

1. निजी सचिव, अति.मुख्य सचिव, चिकित्सा एवं स्वास्थ्य विभाग, राजस्थान, जयपुर।
2. निजी सहायक, मिशन निदेशक, एनएचएम।
3. निजी सहायक, संयुक्त शासन सचिव, एनएचएम।
4. निजी सहायक, निदेशक जन स्वास्थ्य, चि.स्वा. सेवायें, राजस्थान, जयपुर।
5. संयुक्त निदेशक, समस्त जोन।
6. समस्त उप मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी (स्वा0)।
7. समस्त जिला नोडल ऑफिसर एनओएचपी, राजस्थान को पालनार्थ।
8. समस्त डी.पी.ओ. द्वितीय, राजस्थान।
9. प्रभारी सर्वर रूम, मुख्यालय
10. रक्षित पत्रावली।


राज्य नोडल अधिकारी
(एनओएचपी)



भारतीय दन्त परिषद
DENTAL COUNCIL OF INDIA
(A STATUTORY BODY CONSTITUTED UNDER THE DENTISTS ACT, 1948)

Speed Post - Email

Circular

No.DE-14-Academic-2019/ 8855

Dated the 17 March, 2020

To

The Principal/ Deans of all the Dental Colleges in India

Sub: Precautionary and preventive measures to prevent spreading of Novel Coronavirus (COVID- 19) - Regarding

Sir / Madam,

The Dental Council of India, in addition to the advisory issued by Ministry of Health & Family Welfare, Govt. of India/ State Government/UGC (copy attached), in order to combat the threat of Coronavirus (COVID-19), has also decided to issue this advisory to all the Dental Colleges of the Country to take the following necessary precautions and preventive measures.

1. All the faculty and students of the dental colleges shall avoid their Biometric Attendance till 31.3.2020 and mark their attendance in the attendance register only.
2. The classes of first year to fourth year BDS Course at all the Dental Colleges of the Country shall remain suspended till 31.3.2020 and this period of vacation shall be compensated either from the summer vacation or from any other vacation as the concerned affiliated university may decide in this regard.
3. In wake of COVID-19 outbreak going on in the country, the Dental Colleges shall not hold any seminars, workshops, conferences, camps etc.
4. All the Dental Colleges shall strictly comply with all the advisory issued by Central Government/State Government and UGC from time to time including universal precautions for infection control.
5. Clinical procedures involving aerosol generation (Air rotor/Ultrasonic Scalers) to be avoided/minimized for the time being and only emergency procedures to be performed.
6. A copy of interim guidance dated 25th January, 2020 issued by WHO on Infection prevention and control during health care when novel coronavirus (nCoV) infection is suspected, is attached herewith for ready reference and for strict compliance.

Recommendations for safe clinical practice in dental clinics/hospitals in view of the Covid-19 outbreak, are as under:-

- a) All dentists and support staff should wash their hand thoroughly with soap and water and follow up with alcohol based hand sanitizers before and after every patient. Surgical scrubbing of hands is recommended. Disposal gloves to be used routinely as usual.
- b) Staff and doctors should avoid touching their face specially the ear, nose and mouth.
- c) Every patient who enters and exits the clinic should be provided hand sanitizers.
- d) The waiting room/clinic including the handles and doors as well as dental chairs and other surfaces should be wiped several times in a day with alcohol based disinfectant.
- e) Thorough Medical & Travel history of each Patient should be recorded before any clinical procedures.
- f) Patients should be scrubbed with Iso Propyl alcohol extra orally.
- g) Pre-procedural rinse with Povidone Iodine is recommended.
- h) Wearing of N95 or atleast 3 ply masks and suitable head caps, protective eye wear and face shield is recommended.
- i) Fumigation of clinics periodically is advised.

(Dr. Sabyasachi Saha)
Secretary
Dental Council of India

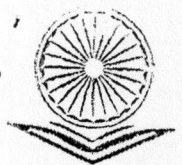
Copy to:

The Secretary to the Govt. of India, Ministry of Health & Family Welfare, Department of Health (DE Section), Maulana Azad Road, Nirman Bhawan, New Delhi-110011 - for information.

(Dr. Sabyasachi Saha)
Secretary
Dental Council of India

C.C.:

1. The President, DCI
2. Act & Regulations Section
3. Server Section- for uploading on website



ज्ञान-विज्ञान विमुक्तये

प्रो. रजनीश जैन
सचिव

Prof. Rajnish Jain
Secretary



सत्यमेव जयते

विश्वविद्यालय अनुदान आयोग
University Grants Commission

मानव संसाधन विकास मंत्रालय, भारत सरकार
(Ministry of Human Resource Development, Govt. of India)

बहादुरशाह जफर मार्ग, नई दिल्ली-110002
Bahadur Shah Zafar Marg, New Delhi-110002

Ph : 011-23236288/23239337

Fax : 011-2323 8858

E-mail : secy.ugc@nic.in

D.O. No.F.No.1-14/2020 (Website)

5th March, 2020

Dear Madam/Sir,

This is in reference to communications received from Secretary, Department of Health and Family Welfare and Joint Secretary (HE), MHRD regarding taking preventive measures to combat the threat of the Novel Coronavirus (COVID-19), as some cases of the virus have been reported in the country. Towards this, a coordinated and collective effort in a mission mode is needed, therefore all universities and their affiliated colleges are requested to take necessary precautions and follow the advisory given below to help in prevention/reduction of the transmission of the virus.

Advisory for Universities and Colleges – Novel Coronavirus (COVID19)

Universities and Colleges are advised to:

- Avoid large gatherings on campus.
- Any student/ staff with travel history to any COVID-19 affected country or in contact with such persons in last 28 days, should be monitored and home quarantined for 14 days.
- Faculty should be alert towards any student with signs and symptoms i.e. fever, cough and difficulty in breathing, and should immediately have the student tested.
- Till advised by the treating doctor the student should not join campus.
- Faculty staff and students should also be advised about simple public health measures of hand and respiratory hygiene.

Hand hygiene: Wash hands frequently and thoroughly with soap & water or use alcohol based hand sanitizer, even when hands are visibly clean.

Respiratory hygiene:

1. Everyone should cover their mouth with a tissue/handkerchief (or their sleeve if there are no tissues available) when they cough or sneeze and wash their hands afterwards.
 2. Do not touch your eyes, nose and mouth.
 3. Everyone should throw away used tissues in a bin and wash their hands after contact with coughing/sneezing.
- Frequently touched surfaces – door knobs, switches, desk tops, hand railings etc, should be disinfected.
 - Provide alcohol based hand cleaners/sanitizers in frequented spots of the universities/colleges.
 - Ensure availability of soap and water in rest rooms at all times.
 - Foot operated pedal bins lined with plastic bag should be provided in each classroom & rest room.
 - In hostels, health status of students as well as the other ancillary staff should be monitored on regular basis. In case, there are suspected cases, the authorized local medical authority should be called for examination.
 - Anybody with signs & symptoms (cough, fever or difficulty in breathing) should call State/UT helpline number or Ministry of Health & Family Welfare's 24x7 helpline at 011-23978046 or visit public health facility with a mask or mouth covered.

An information pamphlet received from the Ministry of Health & Family Welfare to sensitize the students is enclosed

With regards,

Yours sincerely,

Encl: As above

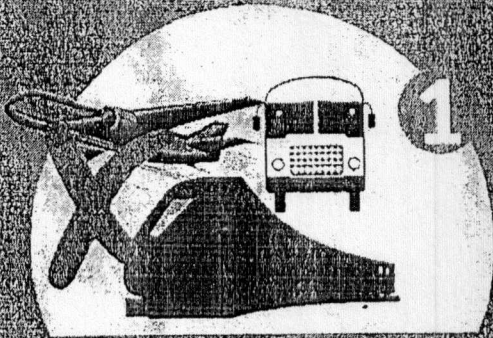
(Rajnish Jain)

The Vice-Chancellors of all Universities

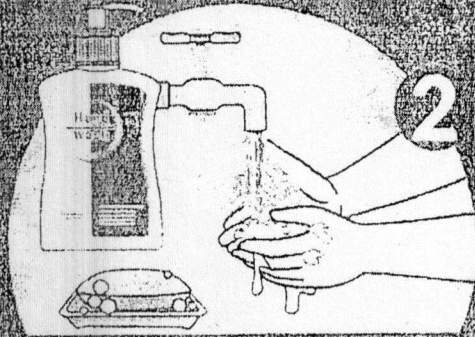


Ministry of Health & Family Welfare
Government of India

Reduce the risk of Coronavirus infection Follow these important precautions



1
Avoid travel if you are suffering from fever and cough



2
Wash your hands frequently with soap and water



3
Share your travel history with your health worker (ASHA/ ANM)



If you have cough, fever or difficulty in breathing, contact a doctor immediately

Stay protected!

Stay safe from Coronavirus!

If you have returned from Wuhan or other affected areas, contact your health worker immediately. If you have returned from other affected areas, contact your health worker immediately. If you develop cough or difficulty in breathing, contact your health worker immediately. For more information, call the Ministry of Health and Family Welfare Helpline.

24x7 +91-11-23978046

or email at ncov2019@gmail.com



Ministry of Health & Family Welfare
Government of India

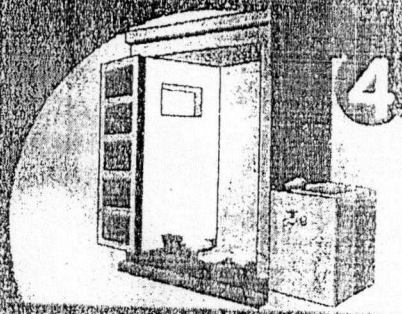
Reduce the risk of Coronavirus infection Follow these important precautions



1

After coughing and sneezing

Remember to wash hands with soap frequently



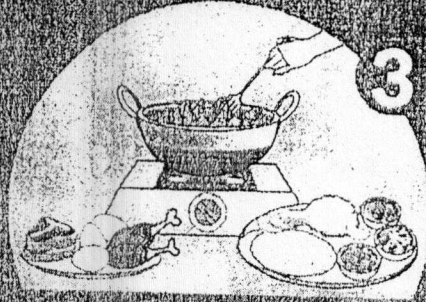
4

After using toilet



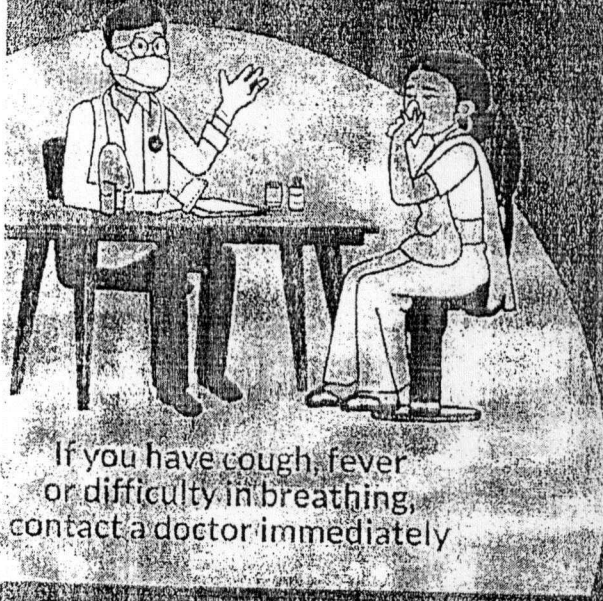
2

Clean your hands before and after caring for sick person



3

Before cooking, after cooking and before eating food



If you have cough, fever or difficulty in breathing, contact a doctor immediately

Stay protected!

Stay safe from Coronavirus!



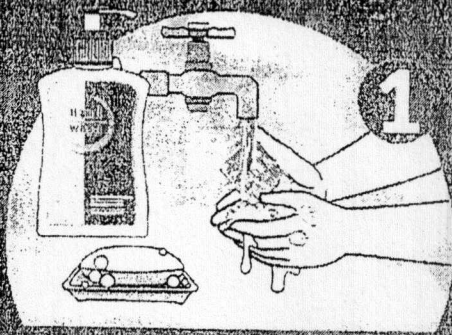
+91-11-23978046

or email at ncov2019@gmail.com



Ministry of Health & Family Welfare
Government of India

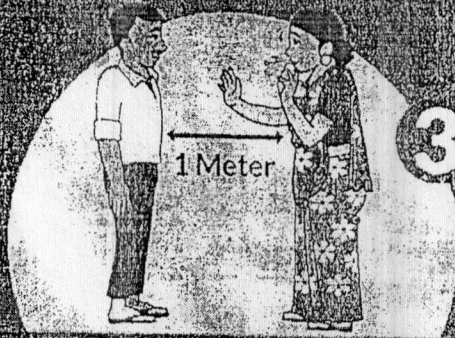
Reduce the risk of Coronavirus infection Follow these important precautions



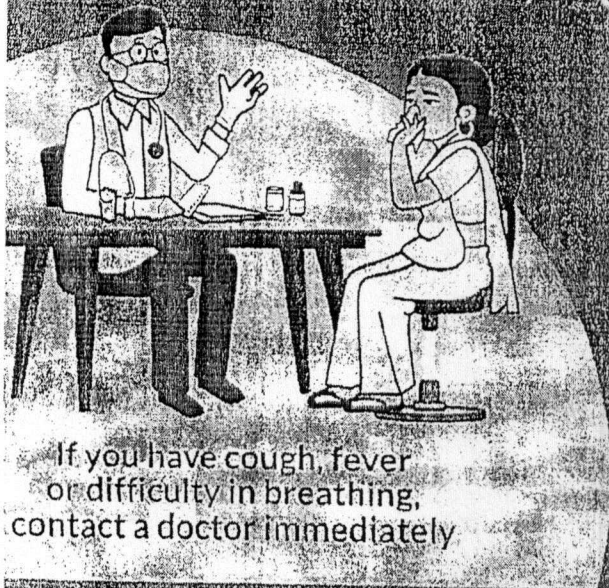
1
Wash hands with soap and water frequently



2
When coughing and sneezing, cover mouth and nose with handkerchief, tissue or elbow



3
Avoid close contact with anyone with cold, cough or flu like symptoms



If you have cough, fever or difficulty in breathing, contact a doctor immediately

Stay protected!

Stay safe from Coronavirus!

For more information, visit the website www.moh.gov.in or call the toll-free number 1800-11-1474. For more information, visit the website www.moh.gov.in or call the toll-free number 1800-11-1474. For more information, visit the website www.moh.gov.in or call the toll-free number 1800-11-1474.

 +91-11-23978046

or email at ncov2019@gmail.com

Infection prevention and control during health care when novel coronavirus (nCoV) infection is suspected

Interim guidance

25 January 2020



Introduction

This is the first edition of guidance on infection prevention and control (IPC) strategies for use when infection with a novel coronavirus (2019-nCoV) is suspected. It has been adapted from WHO's *Infection prevention and control during health care for probable or confirmed cases of Middle East respiratory syndrome coronavirus (MERS-CoV) infection*,¹ based on current knowledge of the situation in China and other countries where cases were identified and experiences with severe acute respiratory syndrome (SARS)-CoV and MERS-CoV.²

WHO will update these recommendations as new information becomes available.

This guidance is intended for healthcare workers (HCWs), healthcare managers and IPC teams at the facility level but it is also relevant for the national and district/provincial level. Full guidelines are available from WHO.²

Principles of IPC strategies associated with health care for suspected nCoV infection

To achieve the highest level of effectiveness in the response to an 2019-nCoV outbreak using the strategies and practices recommended in this document, an IPC programme with a dedicated and trained team or at least an IPC focal point should be in place and supported by the national and facility senior management.³ In countries where IPC is limited or inexistent, it is critical to start by ensuring that at least *minimum requirements* for IPC are in place as soon as possible, both at the national and facility level, and to gradually progress to the full achievement of all requirements of the IPC core components according to local priority plans.⁴

IPC strategies to prevent or limit transmission in healthcare settings include the following:

1. ensuring triage, early recognition, and source control (isolating patients with suspected nCoV infection);
2. applying standard precautions for all patients;
3. implementing empiric additional precautions (droplet and contact and, whenever applicable, airborne precautions) for suspected cases of nCoV infection;
4. implementing administrative controls;
5. using environmental and engineering controls.

1. **Ensuring triage, early recognition, and source control**

Clinical triage includes a system for assessing all patients at admission allowing early recognition of possible 2019-nCoV infection and immediate isolation of patients with suspected nCoV infection in an area separate from other patients (source control). To facilitate the early identification of cases of suspected nCoV infection, healthcare facilities should:

- encourage HCWs to have a high level of clinical suspicion;
- establish a well-equipped triage station at the entrance of health care facility, supported by trained staff;
- institute the use of screening questionnaires according to the updated case definition ([https://www.who.int/publications-detail/global-surveillance-for-human-infection-with-novel-coronavirus-\(2019-ncov\)](https://www.who.int/publications-detail/global-surveillance-for-human-infection-with-novel-coronavirus-(2019-ncov))) and
- post signs in public areas reminding symptomatic patients to alert HCWs.

The promotion of hand hygiene and respiratory hygiene are essential preventive measures.

2. Applying standard precautions for all patients

Standard precautions include hand and respiratory hygiene, the use of appropriate personal protective equipment (PPE) according to risk assessment, injection safety practices, safe waste management, proper linens, environmental cleaning and sterilization of patient-care equipment.

Ensure that the following respiratory hygiene measures are used:

- ensure that all patients cover their nose and mouth with a tissue or elbow when coughing or sneezing;
- offer a medical mask to patients with suspected 2019-nCoV infection while they are in waiting/public areas or in cohorting rooms;
- perform hand hygiene after contact with respiratory secretions.

HCWs should apply the WHO's My 5 Moments for Hand Hygiene approach before touching a patient, before any clean or aseptic procedure is performed, after exposure to body fluid, after touching a patient, and after touching a patient's surroundings.⁵

- hand hygiene includes either cleansing hands with an alcohol-based hand rub (ABHR) or with soap and water;
- alcohol-based hand rubs are preferred if hands are not visibly soiled;
- wash hands with soap and water when they are visibly soiled.

The rational, correct, and consistent use of PPE also helps to reduce the spread of pathogens. The use of PPE effectiveness strongly depends on adequate and regular supplies, adequate staff training, appropriate hand hygiene and specifically appropriate human behaviour.^{2,5,6}

It is important to ensure that environmental cleaning and disinfection procedures are followed consistently and correctly. Thoroughly cleaning environmental surfaces with water and detergent and applying commonly used hospital-level disinfectants (such as sodium hypochlorite) are effective and sufficient procedures.⁷ Medical devices and equipment, laundry, food service utensils and medical waste should be managed in accordance with safe routine procedures.^{2,8}

3. Implementing empiric additional precautions

3.1 Contact and droplet precautions

- in addition to using standard precautions, all individuals, including family members, visitors and HCWs, should use contact and droplet precautions before entering the room where suspected or confirmed nCoV patients are admitted;
- patients should be placed in adequately ventilated single rooms. For general ward rooms with natural ventilation, adequate ventilation is considered to be 60 L/s per patient;⁹
- when single rooms are not available, patients suspected of being infected with nCoV should be grouped together;
- all patients' beds should be placed at least 1 m apart regardless of whether they are suspected to have nCoV infection;
- where possible, a team of HCWs should be designated to care exclusively for suspected or confirmed cases to reduce the risk of transmission;
- HCWs should use a medical mask^a (for specifications, please see references 2);
- HCWs should wear eye protection (goggles) or facial protection (face shield) to avoid contamination of mucous membranes;
- HCWs should wear a clean, non-sterile, long-sleeved gown;
- HCWs should also use gloves;
- the use of boots, coverall and apron is not required during routine care;
- after patient care, appropriate doffing and disposal of all PPE's and hand hygiene should be carried out.^{5,6} Also, a new set of PPE's is needed, when care is given to a different patient;
- equipment should be either single-use and disposable or dedicated equipment (e.g., stethoscopes, blood pressure cuffs and thermometers). If equipment needs to be shared among patients, clean and disinfect it between use for each individual patient (e.g., by using ethyl alcohol 70%).⁸

- HCWs should refrain from touching eyes, nose or mouth with potentially contaminated gloved or bare hands;
- avoid moving and transporting patients out of their room or area unless medically necessary. Use designated portable X-ray equipment and/or other designated diagnostic equipment. If transport is required, use predetermined transport routes to minimize exposure for staff, other patients and visitors, and have the patient using a medical mask;
- ensure that HCWs who are transporting patients perform hand hygiene and wear appropriate PPE as described in this section;
- notify the area receiving the patient of any necessary precautions as early as possible before the patient's arrival;
- routinely clean and disinfect surfaces which the patient is in contact;
- limit the number of HCWs, family members and visitors who are in contact with a suspected and confirmed 2019-nCoV patient;
- maintain a record of all persons entering the patient's room, including all staff and visitors.

3.2 Airborne precautions for aerosol-generating procedures

Some aerosol-generating procedures have been associated with an increased risk of transmission of coronaviruses (SARS-CoV and MERS-CoV), such as tracheal intubation, non-invasive ventilation, tracheotomy, cardiopulmonary resuscitation, manual ventilation before intubation, and bronchoscopy.^{10,11}

Ensure that HCWs performing aerosol-generating procedures:

- perform procedures in an adequately ventilated room – that is, natural ventilation with air flow of at least 160 L/s per patient or in negative pressure rooms with at least 12 air changes per hour and controlled direction of air flow when using mechanical ventilation;⁹
- use a particulate respirator at least as protective as a US National Institute for Occupational Safety and Health (NIOSH)-certified N95, European Union (EU) standard FFP2, or equivalent.^{2,12} When HCWs put on a disposable particulate respirator, they must always perform the seal check.¹² Note that if the wearer has facial hair (i.e., a beard) it may prevent a proper respirator fit;¹²
- use eye protection (i.e., goggles or a face shield);
- wear a clean, non-sterile, long-sleeved gown and gloves. If gowns are not fluid resistant, HCWs should use a waterproof apron for procedures expected to have high volumes of fluid that might penetrate the gown;²

^a Medical masks are surgical or procedure masks that are flat or pleated (some are like cups); they are affixed to the head with straps²

- limit the number of persons present in the room to the absolute minimum required for the patient's care and support.

4. Implementing administrative controls

Administrative controls² and policies for the prevention and control of transmission of 2019-nCoV infections within the healthcare setting include, but may not be limited to: establishing sustainable IPC infrastructures and activities; educating patients' caregivers; developing policies on the early recognition of acute respiratory infection potentially caused by 2019-nCoV; ensuring access to prompt laboratory testing for identification of the etiologic agent; preventing overcrowding, especially in the emergency department; providing dedicated waiting areas for symptomatic patients; appropriately isolating hospitalized patients; ensuring adequate supplies of PPE; ensure the adherence of IPC policies and procedures for all facets of health care.

4.1. Administrative measures related to healthcare workers

- provision of adequate training for HCWs;
- ensuring an adequate patient-to-staff ratio;
- establishing a surveillance process for acute respiratory infections potentially caused by nCoV among HCWs;
- ensuring that HCWs and the public understand the importance of promptly seeking medical care;
- monitoring HCW compliance with standard precautions and providing mechanisms for improvement as needed.

5. Using environmental and engineering controls

These controls address the basic infrastructure of the health care facility.¹³ These controls aim to ensure there is adequate ventilation⁹ in all areas in the healthcare facility, as well as adequate environmental cleaning.

Additionally, spatial separation of at least 1 meter should be maintained between all patients. Both spatial separation and adequate ventilation can help reduce the spread of many pathogens in the healthcare setting.¹⁴

Ensure that cleaning and disinfection procedures are followed consistently and correctly.⁸ Cleaning environmental surfaces with water and detergent and applying commonly used hospital disinfectants (such as sodium hypochlorite) is an effective and sufficient procedure.⁷ Manage laundry, food service utensils and medical waste in accordance with safe routine procedures.

Duration of contact and droplet precautions for patients with nCoV infection

Standard precautions should be applied at all times. Additional contact and droplet precautions should continue until the patient is asymptomatic. More comprehensive information about the mode of 2019-nCoV infection transmission is required to define the duration of additional precautions.

Collecting and handling laboratory specimens from patients with suspected 2019-nCoV infection

All specimens collected for laboratory investigations should be regarded as potentially infectious. HCWs who collect, handle or transport any clinical specimens should adhere rigorously to the following standard precaution measures and biosafety practices to minimize the possibility of exposure to pathogens.^{15,16,17}

- ensure that HCWs who collect specimens use appropriate PPE (i.e., eye protection, a medical mask, a long-sleeved gown, gloves). If the specimen is collected with an aerosol-generating procedure, personnel should wear a particulate respirator at least as protective as a NIOSH-certified N95, an EU standard FFP2, or the equivalent;
- ensure that all personnel who transport specimens are trained in safe handling practices and spill decontamination procedures;⁷
- place specimens for transport in leak-proof specimen bags (i.e., secondary containers) that have a separate sealable pocket for the specimen (i.e., a plastic biohazard specimen bag), with the patient's label on the specimen container (i.e., the primary container), and a clearly written laboratory request form;
- ensure that laboratories in health care facilities adhere to appropriate biosafety practices and transport requirements, according to the type of organism being handled;
- deliver all specimens by hand whenever possible. DO NOT use pneumatic-tube systems to transport specimens;
- document clearly each patient's full name, date of birth and suspected nCoV of potential concern on the laboratory request form. Notify the laboratory as soon as possible that the specimen is being transported.

Recommendation for outpatient care

The basic principles of IPC and standard precautions should be applied in all health care facilities, including outpatient care and primary care. For 2019-nCoV infection, the following measures should be adopted:

- triage and early recognition;
- emphasis on hand hygiene, respiratory hygiene and medical masks to be used by patients with respiratory symptoms;
- appropriate use of contact and droplet precautions for all suspected cases;
- prioritization of care of symptomatic patients;
- when symptomatic patients are required to wait, ensure they have a separate waiting area;
- educate patients and families about the early recognition of symptoms, basic precautions to be used and which health care facility they should refer to.

Acknowledgements

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WHO: Benedetta Allegranzi, April Baller, Ana Paula Coutinho, Janet Diaz, Christine Francis, Maria Clara Padoveze, Joao Paulo de Toledo, Maria Van Kerkhove

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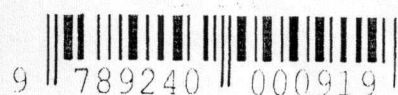
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WHO continues to monitor the situation closely for any changes that may affect this interim guidance. Should any factors change, WHO will issue a further update. Otherwise, this interim guidance document will expire 2 years after the date of publication.

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राजस्थान सरकार
चिकित्सा एवं स्वास्थ्य विभाग

क्रमांक: प.1(1)चिस्वा/मुप-2/2020

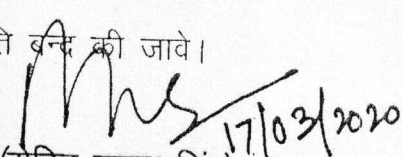
जयपुर, दिनांक : 17.03.2020

कोरोना संक्रमण (COVID-19) की रोकथाम ही इस बीमारी से बचाव का सर्वोत्तम उपाय है। इस हेतु यह आवश्यक है कि लोग आपस में मिलते समय सुरक्षित दूरी रखें व यथासंभव भीड़भाड़ वाले स्थानों पर जाने से बचे। इसके द्वारा जो लोग बीमारी से संक्रमित हैं तथा जो बीमारी से संक्रमित नहीं हैं उनके मध्य बीमारी फैलने की दर को कम किया जा सकता है अथवा रोका जा सकता है। साथ ही मिलते समय आपस में दूरी बनाये रखने के प्रभावी क्रियान्वयन से समुदाय में इस बीमारी के फैलाव (Spread), अस्वस्थता (Morbidity), मृत्यु (Mortality) को कम किया जा सकता है, अथवा रोका जा सकता है। इस हेतु COVID-19 बीमारी के फैलने की रोकथाम के लिए विभाग द्वारा निम्नानुसार एडवायजरी जारी की जाती है:-

1. आपस में मिलते समय हाथ मिलाना तथा गले लगने जैसे अभिवादनों से बचे, स्वच्छता तथा सुरक्षित शारीरिक दूरी बनाये रखें।
2. कोरोना वायरस (COVID-19) के संक्रमण की रोकथाम एवं बचाव हेतु प्रदेश के समस्त सार्वजनिक स्थलों (यथा पर्यटन स्थल, संग्रहालय, ऐतिहासिक स्मारक, किले, हटवाडे, पार्क, खेल मैदान, चिडियाघर, स्पा, अभ्यारण्य, सार्वजनिक मेले, स्वीमिंग पूल, सांस्कृतिक एवं सामाजिक केन्द्र आदि) पर 50 से अधिक व्यक्ति एकत्र न हो। इस हेतु आवश्यक आदेश जारी कर दिये गये हैं।
3. प्रदेश में सभी शिक्षण संस्थान दिनांक 30 मार्च, 2020 तक बन्द कर दिये गये हैं। विद्यार्थियों की परीक्षाओं को देखते हुए ऑन लाइन शिक्षा को बढ़ावा दिया जावे।
4. जिन संस्थानों में बोर्ड एवं वार्षिक परीक्षा का आयोजन किया जा रहा है, उनमें छात्रों के मध्य एक मीटर/सुरक्षित दूरी सुनिश्चित करने के बाद ही परीक्षा आयोजित की जावे।
5. निजी क्षेत्र के संगठन/नियोक्ता कर्मचारियों को यथा संभव घर से कार्य करने की अनुमति प्रदान करें।
6. बैठकों का आयोजन यथा संभव वीडियो कान्फ्रेंस के माध्यम से किया जावे। साथ ही ऐसी बैठकें जिनमें बड़ी संख्या में प्रतिभागी शामिल हो, ऐसी बैठकों को यथा संभव पुर्ननिर्धारित करें।
7. रेस्टोरेंट अथवा होटल/ढाबों के प्रबन्धक यह सुनिश्चित करें कि बार-बार छूने वाली सतहों की सफाई तथा हैंड वॉश प्रोटोकॉल का पालन हो। साथ ही दो टेबलों के मध्य कम से कम एक मीटर दूरी/सुरक्षित दूरी का फासला रखें एवं ग्राहकों को यथा सम्भव खुली हवा में बैठने के लिए प्रोत्साहित करें।
8. आमजन पूर्व नियोजित शादियों एवं समारोह में आगंतुकों की संख्या यथा संभव सीमित रखे।
9. सभी आयोजक गैर आवश्यक सांस्कृतिक तथा सामाजिक समारोह को यथा संभव स्थगित रखें।

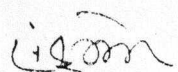


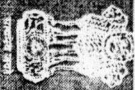
10. स्थानीय अधिकारियों द्वारा खेल आयोजन तथा प्रतियोगिताओं के आयोजकों से संपर्क एवं संवाद स्थापित कर ऐसे होने वाले कार्यक्रमों को यथा संभव स्थगित करने हेतु अनुरोध किया जावे।
11. स्थानीय निकायों के चुने हुये जनप्रतिनिधि/अधिकारियों के द्वारा व्यापारी संघ तथा अन्य संगठनों के साथ संवाद स्थापित कर व्यवसायिक स्थल यथा सब्जी मण्डी, अनाज मण्डी, अन्य बाजारों में क्या करें व क्या नहीं करें का अभियान चलाया जावे, साथ ही यथा संभव इनका कार्य समय सीमित करें। बाजारों में अधिक भीड न हो, इस हेतु उपाय किये जाये। साथ ही सभी व्यवसायिक गतिविधियों में ग्राहकों के मध्य एक मीटर की दूरी रखी जावे।
12. आमजन गैर जरूरी यात्राओं से बचे एवं सार्वजनिक परिवहन यथा बस, रेलगाड़ी, हवाई जहाज में सुरक्षित दूरी बनाकर यात्रा करें। साथ ही संबंधित अधिकारी इनकी सतहों को नियमित तथा उचित रूप से विसंक्रमित (Disinfect) करना सुनिश्चित करें।
13. समस्त चिकित्सा संस्थानों द्वारा कोरोना वायरस से सम्बंधित समस्त प्रोटोकॉल का पालन किया जावे एवं मरीज से मिलने वाले परिजनों, मित्र एवं बच्चों को प्रतिबंधित किया जावे।
14. ऑनलाइन सेवा प्रदाता कम्पनियों में होम डिलेवरी का कार्य करने वाले पुरुषों और महिलाओं के लिए विशेष सुरक्षात्मक उपाय अपनाएं जावे।
15. नोटों एवं पत्रावलियों के पृष्ठ पलटने के लिए पानी के स्पंज का उपयोग किया जावे तथा इसे दैनिक रूप से विसंक्रमित किया जावे।
16. सभी निजी क्षेत्र के कार्यालय/चिकित्सालयों में बायोमेट्रिक्स उपस्थिति बन्द की जावे।


 (रोहित कुमार सिंह)
 अतिरिक्त मुख्य सचिव

प्रतिलिपि निम्न को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित है:-

1. निजी सचिव, मा. मुख्यमंत्री महोदय।
2. निजी सचिव, मा. मुख्य सचिव महोदय।
3. विशिष्ट सहायक, मा. चिकित्सा मंत्री महोदय/मा. चिकित्सा राज्य मंत्री महोदय
4. निजी सचिव, समस्त अतिरिक्त मुख्य सचिव/प्रमुख शासन सचिव, शासन सचिव, विशिष्ट शासन सचिव, राज.
5. निजी सचिव, महानिदेशक पुलिस, राज.
6. समस्त संभागीय आयुक्त, राज.
7. समस्त जिला कलक्टर, राज.
8. समस्त विभागाध्यक्ष, राजस्थान
9. समस्त निदेशक, चिकित्सा एवं स्वास्थ्य सेवाये राज. जयपुर
10. निदेशक, सूचना एवं जन सम्पर्क विभाग
11. जन सम्पर्क अधिकारी, चिकित्सा एवं स्वास्थ्य सेवाएँ, राज. जयपुर।
12. निजी /रक्षित पत्रावली


 (संजय कुमार)
 शासन उप सचिव 17.3.20



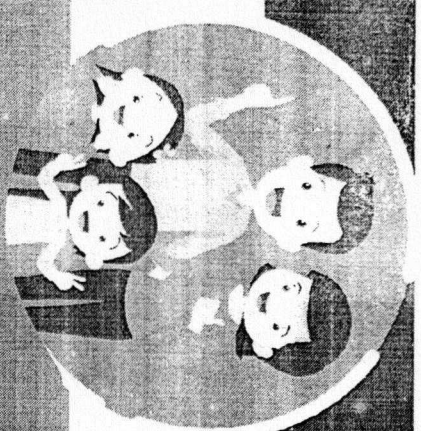
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
भारत सरकार

Help us to
help you

नोवल कोरोनावायरस (COVID-19)

मास्क पहनें या न पहनें ?









हर किसी को मास्क पहनने की आवश्यकता नहीं है



मास्क केवल तभी पहनें जब

- आपमें COVID-19 के लक्षण (खांसी, बुखार या सांस लेने में कठिनाई) हों
- आप COVID-19 से प्रभावित व्यक्ति/मरीज की देखभाल कर रहे हों
- आप एक स्वास्थ्य कार्यकर्ता हैं और आप इन लक्षणों से प्रभावित मरीज की देखभाल कर रहे हों

मास्क पहनते समय यह अवश्य ध्यान रखें

- | | | | | | | | |
|---|---|---|--|---|--|---|--|
|  | मास्क के प्लैट को खोलें;
ध्यान दें कि खोलते समय
दह नीचे की तरफ खुले |  | अपनी नाक, मुँह और लोड़ी के ऊपर
मास्क लगाएं और सुनिश्चित करें कि
मास्क के दोनों ओर कोई गैप न हो,
ठीक से फिट करें |  | मास्क का उपयोग करते
समय मास्क को छूने से
बचें |  | मास्क को गर्दन पर लटकता
हुआ न छोड़ें |
|  | मास्क के गीला होने पर या
हर 6 घंटों में मास्क को
बदलते रहें |  | डिस्पोजेबल मास्क का पुनः प्रयोग न
करें और प्रयोग किए गए मास्क को
कीटाणुरहित कर बंद कूड़ेदान में जाल दें |  | मास्क को उतारते समय
मास्क की गद्दी बाहरी
सतह को न छुएं |  | मास्क को हटाने के बाद
अपने हाथों को साबुन और
पानी या अल्कोहल आधारित
हैंड रब से धोएं |

हम सब मिलकर कोरोनावायरस से लड़ सकते हैं

अधिक जानकारी के लिए
स्वास्थ्य एवं परिवार कल्याण मंत्रालय,
भारत सरकार के 24x7 हेल्पलाइन नं.
पर कॉल करें

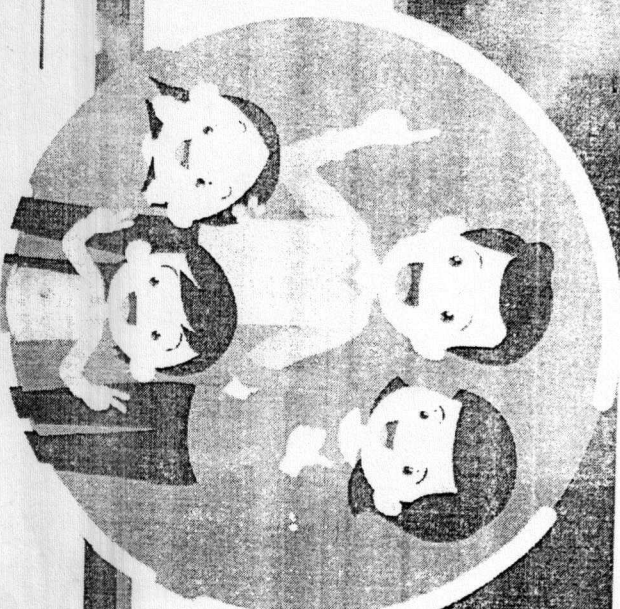
1075 (टोल फ्री) | 011-23978046
ई-मेल करें ncov2019@gmail.com

davy 17102/13/0024/1920



Help us to
help you

नोवेल कोरोनावायरस (COVID-19)



खुद रहें सुरक्षित, दूसरों को रखें सुरक्षित

क्या आपको COVID-19 की जाँच की आवश्यकता है?

- यदि आपको खांसी, बुखार या साँस लेने में कठिनाई जैसे लक्षण नहीं हैं तो आपको COVID-19 की जाँच करवाने की आवश्यकता नहीं है
- यदि आपमें उपरोक्त लक्षण हैं और आपने इटली, ईरान, कोरिया गणराज्य, फ्रांस, स्पेन, जर्मनी, या संयुक्त अरब अमीरात, आदि किसी भी COVID-19 प्रभावित देश की यात्रा की है या आप प्रयोगशाला से प्रमाणित COVID-19 के किसी रोगी के संपर्क में आये हैं, तो तुरंत राज्य हेल्पलाइन नंबर या स्वास्थ्य और परिवार कल्याण मंत्रालय, भारत सरकार की [24X7 हेल्पलाइन 011-23397 8046](tel:011-233978046) पर संपर्क करें
- हेल्पलाइन सेवा आपके संपर्क विवरणों को नोट करेगी और COVID-19 के परीक्षण प्रोटोकॉल के साथ आपसे संपर्क करेगी
- प्रोटोकॉल के अनुसार यदि आपको जाँच की आवश्यकता है तो आपकी जाँच केवल सरकार द्वारा अनुमोदित प्रयोगशाला में की जायेगी

- सरकार द्वारा अनुमोदित प्रयोगशालाओं की सूची <https://www.icmr.nic.in/> पर उपलब्ध है
- वर्तमान में, COVID-19 के परीक्षण के लिए कोई भी निजी अस्पताल/निजी प्रयोगशाला अधिकृत नहीं है

हम सब साथ मिलकर कोरोनावायरस से लड़ सकते हैं

अधिक जानकारी के लिए स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के [24X7 हेल्पलाइन नं. +91-11-233978046](tel:24X7) पर कॉल करें या ई-मेल करें ncov2019@gmail.com