



National Health Mission
SDA Complex, Kasumpti, Shimla-9
Himachal Pradesh
Dated: Shimla-171009, the 7th April 2020

MISSION DIRECTOR (NHM)

07 APR 2020

New Shimla-9 (H.P.)

ORDER

The State has seen a surge in the positive cases of COVID-19 in the past few days, many of them asymptomatic/mildly symptomatic. The isolation facilities for COVID confirmed cases (Category Red) have already been notified by the Director Health Services in the three tertiary level institutions of the State. In order to cater to the health care needs of public at large in the tertiary level institutes of the State, it is imperative to identify and operationalise secondary level dedicated isolation facilities for confirmed (category red) cases of COVID-19 which are asymptomatic/mildly symptomatic. Now, therefore, in exercise of the powers conferred by the **Himachal Pradesh Epidemic Disease (COVID-19) Regulations, 2020** vide notification no. HFW-A-A (3)1/2020 dated 11-03-2020 under the Epidemic Disease Act, 1897, in continuation of the Order of even no - 2526 dated 14-03-2020, the following instructions are issued:

1. The secondary level dedicated isolation facilities for confirmed (category red cases) shall be identified by the Chief Medical Officers of the respective districts. The health facility may be a government run or a privately run institution. The Director Health Services, upon receipt of the proposal shall evaluate the readiness of such facilities and notify the same in accordance with the provisions of the Regulations mentioned ibid.
2. These facilities shall have the basic functional requirements like stethoscope, blood pressure machine, pulse oxymetry, Oxygen cylinder/central oxygen supply, basic investigation facilities such as blood investigation, chest X-ray etc. The logistics
3. Proper training for patient's management and infection control would be imparted to the Health Care workers in such facilities by the identified nodal persons for the same.

4. Patient shall be evaluated for certain clinical parameters if detected COVID positive. If mildly symptomatic or asymptomatic and not vulnerable, the patient shall be shifted to these facilities. If the patient is vulnerable or clinical parameters are suggestive of moderate/Severe infection, the category red patients shall be shifted to tertiary centres for management as per guidelines on clinical management of COVID-19. The detailed clinical protocol as laid down by the notified Clinician Incharge of the State vide office order no. NHMHP-IDSP/1/2020-IDSP-Section-NATIONAL HEALTH MISSION-HP-Part (3)-2540 dated 16th March 2020 and annexed with this Order shall be followed for the purpose.
5. The treating team(s) in these secondary level dedicated isolation facilities for confirmed (category red cases) shall be thoroughly conversant with the treatment, referral criteria and discharge policy etc.
6. In case, the clinical parameters deteriorate, the cases shall be promptly referred to the earmarked tertiary level dedicated isolation facilities for confirmed (category red cases). The referral criteria as laid down by the notified Clinician Incharge of the State and annexed with this order shall be followed.
7. Such identified and notified facilities shall also have a Designated ambulance to shift the patients to nearby/earmarked tertiary level dedicated isolation facilities for confirmed (category red cases) in case of deterioration/need for referral.



Additional Chief Secretary (Health) to the
Government of Himachal Pradesh

Endst no. As Above Dated: 7th April 2020

Copy for information and necessary action to:

1. All Deputy Commissioners, Himachal Pradesh
2. Director Health Services, Himachal Pradesh
3. Director Medical Education, Himachal Pradesh
4. Mission Director, National Health Mission, Himachal Pradesh
5. Director Health Safety and Regulation, Himachal Pradesh
6. All Chief Medical Officers, Himachal Pradesh



7. All Principals, Medical Colleges in Himachal Pradesh
8. All Senior Medical Superintendents in Himachal Pradesh
9. State Surveillance Officer, NHM, Himachal Pradesh



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Guidelines to be followed for patients/person to be admitted to SECONDARY LEVEL ISOLATION for confirmed (Asymptomatic/mild symptomatic) COVID 19 positive

Clinical syndromes associated with COVID - 19 infection

Category	Adult	Pediatrics	Site of Care
Uncomplicated	Patients with uncomplicated upper respiratory tract viral infection, may have non-specific symptoms such as fever, cough, sore throat, nasal congestion, malaise, headache. The elderly and immunosuppressed may present with atypical symptoms. These patients do not have any signs of dehydration, sepsis or shortness of breath.	Patients with uncomplicated upper respiratory tract viral infection, may have non-specific symptoms such as fever, cough, sore throat, nasal congestion, malaise, headache. The elderly and immunosuppressed may present with atypical symptoms. These patients do not have any signs of dehydration, sepsis or shortness of breath.	Secondary Level Isolation
Mild Pneumonia	Pneumonia with no signs of severe disease (Respiratory Rate 15 to 30/minute, SpO2 90%-94%)	Child with non-severe pneumonia has cough or difficulty in breathing/ fast breathing: (fast breathing - in breaths/min): 2 months, ≥ 60 ; 2-11 months, ≥ 50 ; 1-5 years, ≥ 40 and no signs of severe pneumonia	Secondary Level Isolation
Severe Pneumonia/ ARDS/ SEPTIC shock	Severe Pneumonia (with respiratory rate ≥ 30 /minute and/or SpO2 $< 90\%$ in room air) or ARDS or Septic shock	Child with cough or difficulty in breathing, plus at least one of the following: central cyanosis or SpO2 $< 90\%$; severe respiratory distress, signs of pneumonia with any of the following danger signs: inability to breastfeed or drink, lethargy or unconsciousness, or convulsions. Fast Breathing (in breaths/min): < 2 months ≥ 60 ; 2-11 months ≥ 50 ; 1-5 years ≥ 40 . The diagnosis is clinical; chest imaging can exclude complications.	Tertiary Level Isolation and ICU

Category of patients: to be isolated in this facility: COVID +ve uncomplicated/mild symptomatic

Maly Sano
7/4/2020

Staffs requirement:

1. Doctors: 3 +2
2. Staff nurses: 3 + 3
3. Safai karmachari: 3+1
4. Security:3

Preferably under supervision of institutional Medical Specialist.

Duty hours: 8.00 AM – 2.00 P.M, 2.00 P.M to 8.00 PM, 8.00 PM to 8.00 A.M

Doctors, nursing staffs and other staffs would be quarantined for 14 days after 7 days of duty. Local quarantine facility should be identified for that.

PPE kits: it should be used as per GOI GUIDELINES issued on 30/03/2020.

Mildly symptomatic patients:

1. Isolation
2. Regular monitoring
3. Hydroxychloroquine (HCQ) should be given on case-to-case after consultation with the State Nodal officer

Management of paediatric cases:

These children have no respiratory difficulty, are feeding well, have SpO₂ >92%.

1. The treatment will be domiciliary.
2. Appropriate antibiotic may be prescribed if bacterial pneumonia is suspected.
3. Supportive care: control of fever using paracetamol (10- 15 mg/kg/ dose SOS/ q 4-6 hourly if required); **Avoid ibuprofen and other NSAIDs**
4. Home isolation
5. Ensure adequate hydration.
6. Danger signs should be explained.

Duration of home isolation:

Afebrile for 72 hours AND at least 7 days after symptom onset
OR
2 negative samples 24 hours apart

DISCHARGE CRITERIA: ON RESOLUTION OF SYMPTOMS

Mild Symptomatic: on resolution of symptoms with a documented virology clearance in 2 samples at least 24 hours apart.

Asymptomatic: documented virology clearance in 2 samples at least 24 hours apart between day 7-10 days

REFERRAL POLICY:

1. Should be transported in a dedicated ambulance.
2. Admitted patients with uncomplicated illness/ mild pneumonia, if progresses to severe pneumonia and/or ARDS / Septic Shock, will be immediately referred to nearby designated to tertiary isolation centre after due intimation.

* In view of evolving evidence, the guidelines may change on daily basis. Therefore, it is recommended that staffs working in these facilities should keep themselves self-updated regularly.

Prady Sarna
7/4/2020