

लोक स्वास्थ्य एवं परिवार कल्याण विभाग
मध्यप्रदेश शासन
मंत्रालय बल्लभ भवन, भोपाल

क्रमांक / 2020 / NHM / 5945

भोपाल, दिनांक 26 / 03 / 2020

—: आदेश :—

विषय:— COVID-19 (कोरोना वायरस) के आवश्यक प्रबंधन हेतु जिला स्तरीय टेलीमेडिसीन की सुविधा हेतु दिशा निर्देश।

संदर्भ:— बोर्ड ऑफ गवर्नर्स द्वारा एम.सी.आई एवं नीति आयोग द्वारा जारी Telemedicine Practice Guidelines मार्च 2020।

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वर्तमान में कोरोना वायरस बीमारी का प्रकोप होने के कारण इसके संक्रमण की संभावनाएँ अधिक हो गयी हैं। इसके संक्रमण को रोकने हेतु सरकार द्वारा प्रभावी स्तर पर व्यापक उपाय किये जा रहे हैं। कोरोना के संक्रमण से संभावित व्यक्तियों की सतत स्वास्थ्य निगरानी हेतु टेलीमेडिसीन की सुविधा निम्नानुसार उपलब्ध करायी जा रही है:—

1. समस्त 51 जिला चिकित्सालय में टेलीमेडिसीन यूनिट की स्थापना की जानी है, जिस हेतु आवश्यक संसाधन की व्यवस्था जिला स्तर से संलग्न दिशानिर्देश के अनुसार की जानी है।
2. टेलीमेडिसीन यूनिट का दायित्व होम क्वरेंटाइन व्यक्तियों जिनमें संक्रमित होने की संभावना अधिक है उनके स्वास्थ्य की सतत निगरानी करना है।
3. होम क्वरेंटाइन व्यक्तियों को चिन्हित करते समय ही उन्हें जिला अस्पताल में स्थापित टेलीमेडिसीन यूनिट का दूरभाष नम्बर प्रदान करें जिससे वे आवश्यकता होने पर टेलीमेडिसीन यूनिट पर आवश्यक सलाह प्राप्त कर सकते हैं।
4. कोविड-19 पोर्टल पर उपलब्ध सूची में प्रदर्शित होम क्वरेंटाइन व्यक्तियों से टेलीमेडिसीन यूनिट द्वारा सम्पर्क कर आवश्यकतानुसार चिकित्सीय परामर्श दिया जाये।
5. यदि होम क्वरेंटाइन व्यक्तियों में कोरोना वायरस से संबंधित लक्षण परिलक्षित होते हैं तो ऐसे स्थिति में तत्काल जिला की रिपेड रेसपोन्स को सूचना दी जाये।
6. टेलीमेडिसीन यूनिट द्वारा दैनिक रूप से एण्ट्री स्टेट कोविड पोर्टल के टेलीमेडिसीन मॉड्यूल में की जाये।

उक्त निर्देशों का पालन सुनिश्चित कर जिला अस्पताल में टेलीमेडिसीन सेंटर तत्काल स्थापित करें तथा इसकी सूचना दूरभाष नम्बर के साथ मैदानी स्वास्थ्य कार्यकर्ताओं एवं प्रशासकीय अम्ले को प्रदान करें।

संलग्न:— उपरोक्तानुसार

P. L. J.
26/3

(डॉ. पल्लवी जैन गोविल)

प्रमुख सचिव, मध्यप्रदेश शासन
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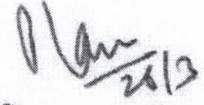
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क्रमांक / 2020 / NHM / 5946

प्रतिलिपि — सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित।

भोपाल, दिनांक. 26. / 03 / 2020

1. स्वास्थ्य आयुक्त, संचालनालय स्वास्थ्य सेवायें, म.प्र।
2. मिशन संचालक, न.एच.एम., भोपाल, मध्यप्रदेश।
3. समस्त जिला कलेक्टर, म.प्र।
4. समस्त संचालक, संचालनालय स्वास्थ्य सेवायें/आई.ई.सी.ब्यूरो, म.प्र।
5. समस्त उप संचालक/कार्यक्रम अधिकारी, राष्ट्रीय स्वास्थ्य मिशन/संचालनालय स्वास्थ्य सेवायें, म.प्र।
6. समस्त मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी/समस्त सिविल सर्जन सह मुख्य अस्पताल अधीक्षक, म.प्र।
7. समस्त जिला कार्यक्रम प्रबंधक, मध्यप्रदेश।



प्रमुख सचिव, मध्यप्रदेश शासन
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भोपाल, मध्यप्रदेश

Annexure-A

Guidelines for tele-medicine for COVID-19 management through 51 District hospitals in Madhya Pradesh

A. Infrastructure requirements at district hospital

1. Site for tele-medicine consultations hub will be District Hospitals of all 51 districts (DH)
2. Human Resource (HR) requirement at DH (HUB)
 - a. Medical Officers (MO)- Number of MOs to be decided based on requirement
 - b. Data supporting staff
 - c. Paramedic staff- for collecting history and complaints
3. Working hours-24*7 (in rounds of 8 hours each with three MO and three supporting staff).
4. Logistic requirement at DH (HUB)
 - a. Equipment's- Desktop, LCD, Tablets, smart phone, speakers, head phone, camera, printer, fax machine, internet connection
 - b. Other logistics- separate room with electricity connection, table, chair, printouts of prescription
 - c. Email IDs for DH, three authorized mobile/whatsapp numbers, fax number, SKYPE ID, ZOOM ID other online platforms as per local needs/availability
5. Connectivity platforms
 - a. SKYPE/zoom/other online platforms as per local needs/ availability
 - b. WhatsApp
 - c. Video calling
 - d. Emails
 - e. Fax
 - f. Telephone/ mobile calls

B. Prescription protocol

1. Use of standardized prescribed format
2. MO shall issue a prescription as per the Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations and shall not contravene the provisions of the Drugs and Cosmetics Act and Rules.
3. Drugs-The categories of medicines that can be prescribed are listed below:

List O: It will comprise those medicines which are safe to be prescribed through any mode of tele-consultation. In essence they would comprise of Medicines which are used for common conditions and are often available 'over the counter'. For instance, these medicines would include, paracetamol, ORS solutions, cough lozenges etc. Medicines that may be deemed necessary during public health emergencies.

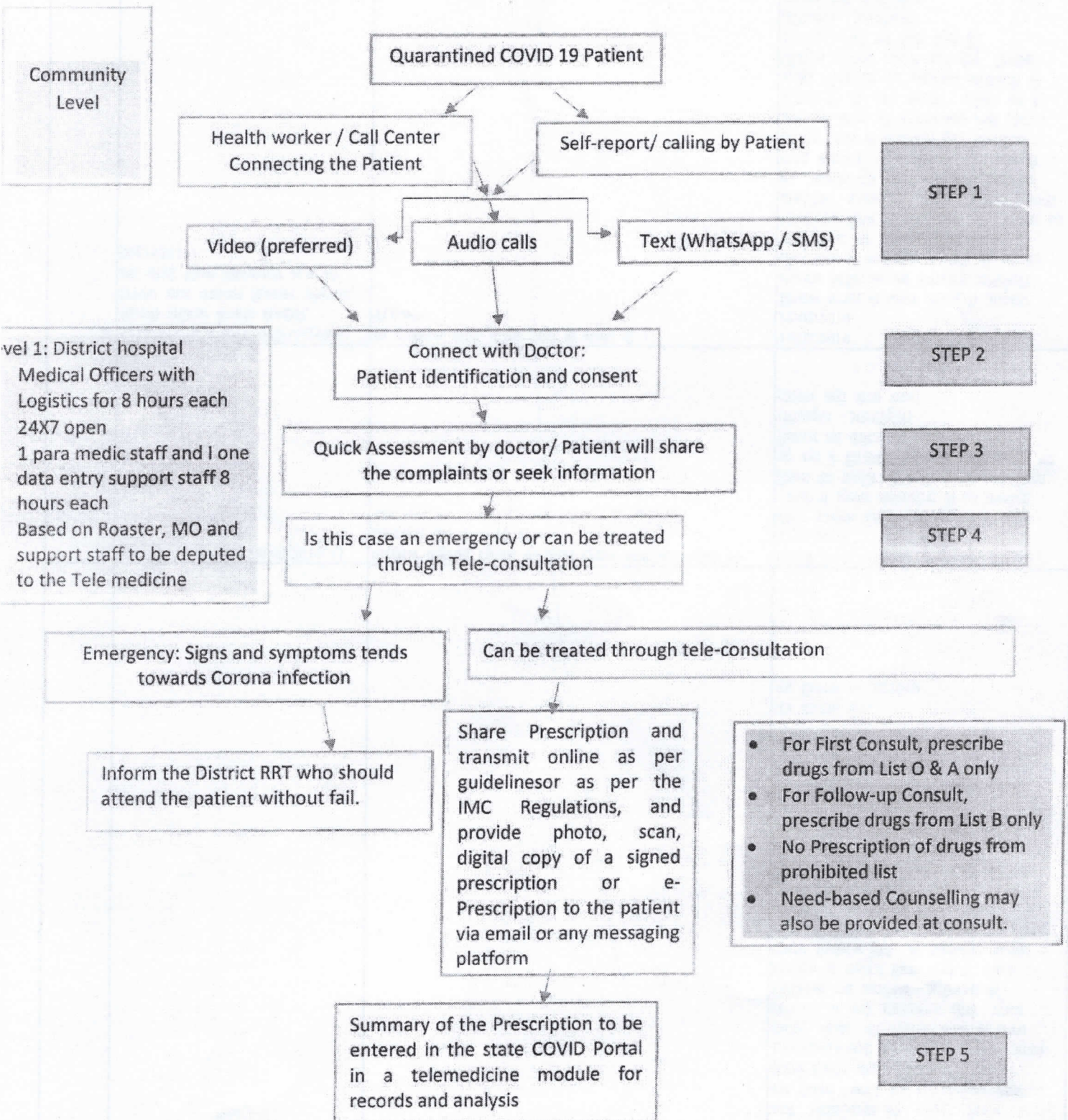
List A: These medications are those which can be prescribed during the first consult which is a video consultation and are being re-prescribed for re-fill, in case of follow-up. This would be an inclusion list, containing relatively safe medicines with low potential for abuse. Is a list of medication which MO can prescribe in a patient who is undergoing follow-up consult, as a refill.

List B: Is a list of medication which MO can prescribe in a patient who is undergoing follow-up consultation in addition to those which have been prescribed during in-person consult for the same medical condition.

Prohibited List: An MO providing consultation via telemedicine cannot prescribe medicines in this list. These medicines have a high potential of abuse and could harm the patient or the society at large if used improperly. Medicines listed in Schedule X of Drug and Cosmetic Act and Rules or any Narcotic and Psychotropic substance listed in the Narcotic Drugs and Psychotropic Substances, Act, 1985. The drugs in the above-mentioned list is summarized in Annexure 2.

- C. **Data consent and privacy:** The MO should ensure that there is a mechanism for a patient to verify the credentials and contact details of the RMP. Principles of medical ethics, including professional norms for protecting patient privacy and confidentiality as per IMC Act shall be binding and must be upheld and practiced. Registered Medical Practitioner would be required to fully abide by Indian Medical Council (Professional conduct, Etiquette and Ethics) Regulations, 2002 and with the relevant provisions of the IT Act, Data protection and privacy laws or any applicable rules notified from time to time for protecting patient privacy and confidentiality and regarding the handling and transfer of such personal information regarding the patient. This shall be binding and must be upheld and practiced. MO will not be held responsible for breach of confidentiality if there is a reasonable evidence to believe that patient's privacy and confidentiality has been compromised by a technology breach or by a person other than MO. The MOs should ensure that reasonable degree of care undertaken during hiring such services.
- D. **Reporting Portal:** State COVID-19 portal has all information about quarantine with phone numbers. Outbound calls should be made to home quarantine for counselling to adhere to the home quarantine protocols with regular tele-health checkup. Self-reporting by quarantine people should also be promoted for their active health surveillance. Any health parameter/Indicator if tends towards corona symptoms then RRT/mobile unit of the district should be informed. The quarantine person should be attended without fail.
- E. For detailed guideline of Telemedicine practice guideline issued by Board of Governor MCI and NITI Ayog kindly refer to <https://www.mohfw.gov.in/pdf/Telemedicine.pdf>

Flowchart describing the flow of events



Sample prescription format

Sample prescription format

Medical officers Name

Qualification

Registration number

Address

Contact Details- Email:

Phone Number:

Date of consultation

Name of patient

Age:

Gender:

Complete Address (including name of village and nearest milestone):

Height:

Weight:

LMP:

(Whatever applicable)

Contact Number/Mobile number:

Chief complaints:

Diagnosis or provisional diagnosis:

Relevant points from history:

Examination /Lab findings:

Suggested Investigations:

Details of counselling provided (if required):

Name of Medicine (all in CAPITAL letters only with generic name), drug form, strength, frequency of administration & duration

1.

2.

3.

Special instructions:

MO signature and stamp:

Medicine list

List O

- **Common over-the counter medications such as**
 - Antipyretics: Paracetamol
 - Cough Supplements: Lozenges,
 - Cough/ Common-cold medications (such as combinations of Acetylcysteine, Ammonium Chloride, Guaifensin, Ambroxol, Bromhexene, Dextromethorphan)
 - ORS Packets
 - Syrup Zinc
 - Supplements: Iron & Folic Acid tablets, Vitamin D, Calcium supplements
 - Etc
- **Medications notified by Government of India in case from time to time on an Emergency basis**
 - Such as Chloroquine for Malaria control for a specific endemic region, when notified by Government

List A

- **First Consult Medications (Diagnosis done on video mode of consultation) such as**
 - Ointments/Lotion for skin ailments: Ointments Clotrimazole, Mupirocin, Calamine Lotion, Benzyl Benzoate Lotion etc
 - Local Ophthalmological drops such as: Ciprofloxacin for Conjunctivitis, etc
 - Local Ear Drops such as: Clotrimazole ear drops, drops for ear wax etc..
 - Follow-up consult for above medications
- **Follow-up medications for chronic illnesses for 're-fill' (on any mode of consultation) such as medications for**
 - Hypertension: Enalapril, Atenolol etc
 - Diabetes: Metformin, Glibenclamide etc
 - Asthma: Salmeterol inhaler etc
 - Etc

List B

- **On follow-up, medications prescribed as 'Add-on' to ongoing chronic medications to optimize management such as for hYpertension: Eg, add-on of Thiazide diuretic with Atenolol**
 - Diabetes: Addition of Sitagliptin to Metformin
 - Etc