

**No. 31/8/2020-M**  
**GOVERNMENT OF MANIPUR**  
**SECRETARIAT: HEALTH DEPARTMENT**

**NOTIFICATION**

Imphal, the 15<sup>th</sup> August, 2020

**Standard Operating Procedure for Home Isolation of asymptomatic/very mild COVID-19 Positive cases**

WHEREAS, most of the persons tested positive for COVID-19 infection are either asymptomatic or have very mild symptoms and do not require medical treatment in hospitals or COVID Care Centres and these patients would be better served if they are in home isolation with regular monitoring by health care workers;

2. WHEREAS, the hospitals and services of the healthcare professionals need to remain available for treatment of severe symptomatic COVID-19 patients or other non-COVID ailments, medical procedures, emergency cases, etc. to avoid medical complications and sometimes death due to delay or unavailability of the required medical treatment;

3. WHEREAS, the Ministry of Health & FW, Government of India had issued 'Revised guidelines for Home Isolation of very mild/ pre-symptomatic/asymptomatic COVID-19 cases' (2<sup>nd</sup> July, 2020);

4. WHEREAS, many States have adopted Home Isolation for mild/asymptomatic cases. For instance, in Delhi about 50% of active COVID cases are on 'Home Isolation' and has provided a stable and sustainable framework for tackling COVID-19 pandemic;


5. WHEREAS, for every patient under home isolation the following items may be provided by the Health Department:

- (a) Fingertip Pulse Oximeter (returnable at the end of 'Home Isolation').
- (b) Consumables like triple-layer masks.

6. Now, therefore, the following procedure is prescribed for 'Home Isolation' in respect of those asymptomatic/very mild symptomatic Covid-19 positive cases who are willing or wish to stay in home isolation. This is an optional arrangement to be adopted wherever the COVID positive person is eligible and willing to go for 'Home Isolation'.

**(i) Patients eligible for home isolation**

- (a) The Chief Medical Officers (CMOs) will designate a medical team to examine and identify the COVID-19 positive cases eligible for Home Isolation.
- (b) Minors (below 10 years of age) or babies who are asymptomatic will be considered on priority for 'Home Isolation'.
- (c) Pregnant lady where EDD (Expected Date of Delivery) is atleast one month and asymptomatic will be considered on priority for 'Home Isolation'.
- (d) Patients with mild symptoms who do not have any other co-morbid conditions also may be considered for home isolation, if there is provision of supervision by trained health staff.
- (e) Asymptomatic elderly patients (60 years and above) and persons with any of the following ailments: hypertension, diabetes, heart diseases, chronic

  
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lung/ liver/kidney diseases and patients who are immuno-compromised due to Cancer, HIV, and Organ Transplant shall be allowed 'Home Isolation' only after proper evaluation by the medical team.

- (f) An adult care giver should be available to provide care on 24x7 basis. A communication link between the caregiver and hospital is a pre-requisite for the entire duration of home isolation.
- (g) The patient shall agree to self-monitor his health in the prescribed monitoring formats and regularly inform his health status to the medical team for further follow up by the surveillance teams.
- (h) Signing of prescribed undertaking as at **Annexure-I** and shall follow 'Home Isolation' guidelines.

**(ii) Eligible Home/ Houses**

- (a) Separate bed room and bathroom for patient. Two patients of the same family can also share a room if size of room is suitable.
- (b) House where majority of family members are positive will be eligible provided other conditions are available.
- (c) Shared bathroom also allowed subjected to strict infection control measures.
- (d) Availability of adequate disinfectants (e.g hand sanitizers, sodium hypochlorite, phenyl, dettol, detergents/soaps) and sufficient quantities of mask and gloves.
- (e) The required instructions for the patient and the care giver as detailed in **Annexure-II** shall be also followed.

**(iii) When to seek medical attention**

Patient/Care giver will keep monitoring their health. Immediate medical attention must be sought if serious signs or symptoms develop. These could include:

- (a) High fever,
- (b) Difficulty in breathing,
- (c) Persistent pain/pressure in the chest,
- (d) Mental confusion or inability to arouse,
- (e) Developing bluish discolorations of lips/face; and
- (f) In case of confusion, it should be reported to the identified health personnel.

**(iv) Home Isolation-meaning**

- (a) No physical contact or proximity with any other person.
- (b) Any item used or coming in physical contact of the patient to be disposed of by following due procedure or after proper disinfection.
- (c) Patient not to move out of the room except for use of bathroom which is not attached to his/her room.
- (d) Patient to self-monitor development of sign/ symptoms and report it to identified health personnel.

**(v) Adherence to Home Isolation**

- (a) Patient to download, install and activate 'ArogyaSetu App' on mobile (available at: <https://www.mygov.in/aarogya-setu-app>) and it should remain active at all times (through Bluetooth and Wi-Fi).

- (b) Download, install and activate 'QuarMon' on mobile.
- (c) The patient shall agree to monitor his health and regularly inform his health status to the medical team identified by the Chief Medical Officer for further follow-up by the surveillance teams.

**(vi) Duration of home Isolation**

- (a) Duration of home isolation will be 14 days.
- (b) The patient and the persons staying in the same house will be tested for COVID-19 with RT-PCR at end of this period. Testing arrangements will be made by the CMO or official designated by CMO.

**(vii) Penalty for violation**

- (a) In case of violating home isolation guidelines, patients or family members or both will be penalized under the Manipur Epidemic Diseases (Enforcement of COVID-19 Guidelines) Regulation, 2020 and other legal provisions


  
**(Dr. Rajesh Kumar)**  
Chief Secretary  
Government of Manipur

Memo No. 31/8/2020-M

Imphal, the 15<sup>th</sup> August, 2020

**Copy to:**

1. Secretary to Chief Minister, Manipur
2. PPS to Minister (Health & FW), Manipur
3. Staff Officer to Chief Secretary, Government of Manipur
4. Staff Officer to Director General of Police, Manipur
5. All Deputy Commissioners, Manipur
6. Director of Health Services, Manipur
7. All Chief Medical Officers, Manipur
8. Notice Boards.

  
**(Vumlunmang Vualnam)**  
Principal Secretary (Health & FW)  
Government of Manipur

**Undertaking by the patient on Self Isolation:**

I.....S/W  
of.....resident of  
..... being tested as positive COVID-19  
infection, do hereby voluntarily undertake to maintain strict self-isolation at home at all  
times for the prescribed period.

2. During this period, I shall monitor my health and those around me and interact  
with assigned surveillance team / with the State Helpline (1800-3453818) in case I  
suffer from any deteriorating symptoms or any of my close family contacts develops  
any symptoms consistent with COVID-19.

3. I have been explained in detail about the precautions that I need to follow while  
I am under self-isolation. I am liable to be penalized and prosecuted under applicable  
laws for any non-adherence to self-isolation protocol.

Signature of patient: .....

Name of Patient: .....

Contact Number: .....

Signature of caregiver: .....

Name of caregiver: .....

Contact Number: .....

Date:.....

Name, Signature, and Contact  
Number of the Medical Team  
Leader

Copy to:

1. District Surveillance Officer
2. Councillor of Municipality, Pradhan of Panchayat, Chairman / Secretary,  
Village Authority
3. The patient/caregiver concerned

**Instructions for the patient**

1. Patient should at all times use triple layer mask. Discard mask after 8 hours of use or earlier if they become wet or visibly soiled.
2. Mask should be discarded only after disinfecting it with 1% Sodium Hypo-chlorite.
3. Patient must stay in the identified room and away from other people in home, especially elderly and those with co-morbid conditions like hypertension, cardiovascular disease, renal disease etc.
4. Patient must take rest and drink lot of fluids to maintain adequate hydration
5. Follow respiratory etiquettes all the time.
6. Hands must be washed often with soap and water for at least 40 seconds or clean with alcohol based sanitizer.
7. Don't share personal items with other people.
8. Clean surfaces in the room that are touched often (tabletops, door knobs, handles, etc) with 1%hypochlorite solution.
9. The patient must strictly follow the physician's instructions and medication advice.
10. The patient will self-monitor his/her health with daily temperature monitoring and report promptly if develops any deterioration of symptom as detailed below.

**Instructions for care-givers****1. Mask:**

- 1.1** The caregiver should wear a triple layer mask appropriately when in the sameroom with the positive person.
- 1.2** Front portion of the mask should not be touched or handled during use.
- 1.3** If the mask gets wet or dirty with secretions, it must be changed immediately.
- 1.4** Discard the masks after use and perform hand hygiene after disposal of the mask.
- 1.5** He/she should avoid touching own face, nose or mouth.

**2. Hand hygiene**

Hand hygiene must be ensured following contact with ill person or his immediate environment.

- 2.1 Hand hygiene should also be practiced before and after preparing food, before eating, after using the toilet, and whenever hands look dirty.
- 2.2 Use soap and water for hand washing at least for 40 seconds. Alcohol-based hand rub can be used, if hands are not visibly soiled.

- 2.3 After using soap and water, use of disposable paper towels to dry hands is desirable. If not available, use dedicated clean cloth towels and replace them when they become wet.

**3. Exposure to patient:**

- 3.1 Avoid direct contact with body fluids of the patient, particularly oral or respiratory secretions. Use disposable gloves while handling the patient. Perform hand hygiene before and after removing gloves.
- 3.2 Avoid exposure to potentially contaminated items in his immediate environment (e.g. avoid sharing cigarettes, eating utensils, dishes, drinks, used towels or bed linen).
- 3.3 Food must be provided to the patient in his room.
- 3.4 Utensils and dishes used by the patient should be cleaned with soap/detergent and water. The utensils and dishes may be re-used. Clean hands after taking off gloves or handling used items.
- 3.5 Caregiver should be young and healthy person who has been trained by the Medical Team.
- 3.6 The care giver will wear mask, avoid physical contact and maintain physical distancing when providing care and wash hands frequently

**4. Care of the patient and family members**

- 4.1 The care giver will make sure that the patient follows the prescribed treatment.
- 4.2 The care giver and all close contact will self-monitor their health with daily temperature monitoring and report promptly if they develop any symptom suggestive of COVID-19 (fever/ cough/ difficulty in breathing).
- 4.3 Elderly person (Above 60 years), pregnant women and other family members with co-morbid conditions should not share bathroom with the patient and should not come near the patient's room.
- 4.4 Food and other essential items required by the patient should be kept near the door of the patient's room to be collected by the patient after the person bringing the items move away.
- 4.5 Shared bathroom should be disinfected after each use with appropriate disinfectant: sodium hypochlorite, phenyl, and detergent/soap.
- 4.6 Frequently touched surface will be disinfected frequently regularly with 1% sodium hypochlorite solution or other available disinfectants.
- 4.7 Works of cleaning patient's room and utensils should be done by the patients as far as possible to minimise contact.
- 4.8 Clothes and lines used by the patient should be washed separately using common household detergents and dried fully.
- 4.9 All used face masks and gloves should be kept in a separate bag for disposal.

5. **Role of State/District Health Authorities**

- i. States/ Districts should provide (i) finger-tip pulse oximeter (returnable after home isolation) and (ii) sufficient quantities of consumables like hand gloves and triple layer medical masks to all the patients under home isolation and monitor all such cases. ***The Deputy Commissioners shall identify*** the specific clubs, civil organization/village council etc. which may be the member for the joint inspection team.
- ii. ***The State & District Covid-19 Community Awareness Teams should conduct*** proper awareness to the community before the start of implementation and it should be continued thereafter too.
- iii. The Chief Medical Officers will designate Medical Officers/ Teams for daily evaluation of health status of the patients under home isolation. The clinical status of each case shall be recorded by the field staff/call centre (body temperature, pulse rate and oxygen saturation etc.) using specific monitoring formats. The designated Medical Officers / Team will guide the patient on measuring these parameters and provide the instructions (for patients and their care givers).
- iv. Details about patients under home isolation should also be updated on COVID-19 portal and facility app (with DSO as user). Senior State and District officials should monitor the records updation.
- v. In case of violation of Isolation, the State protocol for detention etc. will be followed or if there is need for shifting or treatment to higher centre, ambulance/ authorised vehicle will pick up and transfer the patient to the Dedicated Covid Health Centre/ Hospital. *The home isolation team of the District shall inform the Referral and ambulance team for proper referral and prior information to the concerned hospital.*
- vi. All family members and close contacts shall be monitored and tested as per protocol by the designated Medical Officers / Teams.
- vii. A tele-consultation unit/ call centre shall be established for every District and will coordinate the designated Medical Officers / Teams going for monitoring visit on giving specific advices.
- viii. Proper Biomedical waste management should be made available by linking with the State and District BMW Management Teams.