

**GOVERNMENT OF NAGALAND  
DIRECTORATE OF HEALTH AND FAMILY WELFARE  
NAGALAND : KOHIMA**

NO. DHFW/COVID-19/2019-20/450

Dated Kohima, the 23<sup>rd</sup> April, 2020

**CIRCULAR**

It has been observed that there is confusion over the terminologies regarding COVID related symptoms like (ILI / SARI) and health facilities (Quarantine Facility / Isolation Ward / COVID Hospital). Therefore, kindly find in the attachment the clarification in this regard.

For any query, kindly contact HFW COVID Control Room: 9099607609/ 7085444710



**(DR. VIZOLIE Z. SUOKHRIE)**

Principal Director  
Directorate of Health and Family Welfare  
Nagaland : Kohima

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**(DR. VIZOLIE Z. SUOKHRIE)**

Principal Director  
Directorate of Health and Family Welfare  
Nagaland : Kohima

## CLARIFICATION ON ILI/SARI AND COVID FACILITIES

**ILI / SARI:** The ICMR has relaxed the criteria for testing. Therefore, as per the revised strategy for testing issued on 9<sup>th</sup> April, 2020, all SARI cases will be tested [(Fever+ Cough+Shortness of Breath) and (Fever+Shortness of breath)]. ILI (fever, cough, sore throat, runny nose) will be tested only in hotspots, cluster, and in large gatherings/evacuees centres. The technical definition of ILI and SARI may differ in various literatures but the above is for simplicity of facilitating testing for COVID-19.

The following clarification on COVID related facilities are in conformity with the 7<sup>th</sup> April 2020 MoHFW revised guideline. But since the State does not have the infrastructure such as COVID Care Centre, COVID Health Centre, COVID Hospital with ability to house both suspected and confirmed cases with separate entry and exit at all these levels of facilities; the clarification below is based on the availability of the existing infrastructure in the State.

### **1. Quarantine Facility / Observation Centre:**

Quarantine facility is for keeping asymptomatic suspected cases who qualified for testing. They are not sick and do not require hospitalization, but they met the criteria for testing (see ICMR guideline on who should be tested). So they are kept in quarantine facility. The people kept in quarantine facility are preferably kept in single rooms with attached toilet. But if that is not possible, each bed should be 1-2 metres separate, and the room well ventilated. For detailed functional requirements, please refer to MoHFW guideline on quarantine facility. If a person is tested positive, he/she will be transferred to a COVID hospital even if he/she is not symptomatic. If tested negative, there are two ways:

- i. **Negative result but was a High Risk Contact:** The person will continue to be kept in the quarantine facility. Repeat RT-PCR test will be done on the 14<sup>th</sup> day, counting from the *day of contact* with a confirmed case.
- ii. **Negative result and was a Low Risk Contact:** The person will be discharged and will be advised home quarantine to complete the quarantine period. If he/she does not develop symptoms, repeat testing will not be done.

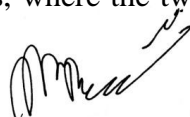
There is another type of quarantine facility for the health personnel who are not sick but needs to be quarantined after working in a COVID hospital for 14 days.

In the future, if COVID hospitals are fully saturated, having a quarantine facility exclusively for the positive asymptomatic patients can be explored.

*Observation Centre* is a new terminology being used for quarantine facility for the next wave of travellers returning to Nagaland after the lockdown is removed.

### **2. Isolation Ward for the Suspected cases (within COVID Hospital)**

This facility is for suspected cases who are sick/symptomatic and require hospitalization. They are suspected cases and their result is not known yet but since they are symptomatic, they need to be isolated. This facility may be a separate hospital as the district decides. But in the present set-up in Nagaland, this is within the COVID hospital but a totally separate block and not to be mixed with the COVID positive patients. So, even in a COVID hospital, there can be two Isolation Wards which is a cause for confusion: Isolation Ward for the suspected cases and Isolation ward for the confirmed cases, where the two are within one hospital but does not mix.



If the test result is positive, the patient will be shifted to a COVID hospital. If the test result is negative, there are two ways:

- i. **Negative result but was a High Risk Contact:** The person will continue to be kept in the same Isolation Ward for the suspected cases. Repeat RT-PCR test will be done on the 14<sup>th</sup> day, counting from the *day of contact* with a confirmed case.
- ii. **Negative result and was a Low Risk Contact:** The person will be shifted to a non-COVID hospital (may be to a private hospital) if the patient require continued hospitalization or discharged.


### 3. COVID Hospital / COVID Isolation Ward for the laboratory confirmed cases

COVID Hospitals are for the laboratory confirmed COVID cases, regardless of their clinical condition. So, some positive cases may be asymptomatic who can be placed in general ward and some may need critical care in ICU. Where a district hospital is not designated as COVID Hospital yet, this same arrangement for positive cases was/is called as COVID Isolation Ward or Isolation Ward for the confirmed cases.

It may be noted that as earlier stated, even within a COVID Hospital, there can be two isolation wards: an *Isolation Ward for the suspected cases* which is not to be mixed with the *COVID Isolation Ward or Isolation ward for the positive cases*. This is in case the district does not have a separate hospital for the suspected cases (which is usually the case). Therefore, the COVID hospitals should continue to admit symptomatic suspected cases which are referred for them for testing and keep them in the Isolation ward for the suspected cases. On receiving the test result, the low risk contact with negative result may be referred to a non-COVID hospital/private hospital. The positive cases will also accordingly be shifted to the confirmed cases areas.

1. Quarantine Facility: For suspected cases being tested and not requiring hospitalization
2. COVID Hospital:
  - a) Isolation ward for the suspected cases needing hospitalization
  - b) Isolation ward for all the confirmed cases

The directive on providing emergency medical services in the hospital until a COVID positive patient is admitted still remains.



(**DR. VIZOLIE Z. SUOKHRIE**)  
Principal Director  
Directorate of Health and Family Welfare  
Nagaland : Kohima