



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

MISSION DIRECTOR (NHM)

23 JUL 2020

New Shimla-9 (H.P.)

CIRCULAR

The revised **Guidelines for Home Isolation of very mild/ pre-symptomatic/ asymptomatic COVID-19** have been received from the Ministry of Health & Family Welfare, Government of India (copy enclosed). In continuation of this office Order No. NRHMHP-IDSP/1/2020-IDSP-Section National Health Mission-HP (Part-3)-3411 dated 23rd May, 2020, the following revised guidelines for home isolation of very mild/pre-symptomatic/asymptomatic COVID-19 cases shall be followed in the State of Himachal Pradesh:

Patients eligible for home isolation:

1. The person should be clinically assigned as a very mild/pre - symptomatic/asymptomatic case by the treating Medical Officer.
2. Patients should be:
 - a) Below 60 years of age
 - b) Should not have any co-morbidity like Hypertension, Diabetes, Heart disease, Asthma, Chronic liver/kidney disease, HIV, Cancer, Transplant recipients, Cerebro- vascular disease etc.
3. Such cases should have the requisite facility such as separate wash room, bed room, which is well ventilated at their residence for self – isolation.
4. No other person in household should have any co-morbidity like Hypertension, Diabetes, Heart disease, Asthma, Chronic liver/kidney disease, HIV, Cancer, Transplant recipients, Cerebro- vascular disease etc. and no other person in the household should be above 60 years of age.
5. A care giver should be available to provide care on 24x7 basis to the patient under home isolation. The care giver should be:
 - a) Between the age of 18-55 years.

- b) Should not have any comorbidity like Hypertension, Diabetes, Heart disease, Asthma, Chronic liver/kidney disease, HIV, Cancer, Transplant recipients, therapy, disease, Cerebro-vascular disease etc.
 - c) Should not be pregnant.
6. The patient agrees to monitor his/her health and regularly inform his/her health status to the District Surveillance Officer or any other Surveillance Personnel assigned to him/her. The patient will fill in an undertaking on self-isolation (Annexure I) and for following home quarantine guidelines.

The Chief Medical Officer/Block Medical Officer of the concerned area shall satisfy himself/herself with respect to the foregoing conditions before allowing home isolation to any COVID-19 positive case. Upon satisfaction, the Chief Medical Officer/Block Medical Officer shall take out an order with instructions to the patient, care taker, attached surveillance personnel and mapped Medical Officer as per the draft at Annexure II.

Instructions for Health Care Providers:

1. Home Isolation Board displaying the name to be placed in front of the house of the person who is home isolated.
2. Surveillance personnel shall:
 - a) Monitor the temperature, cough, SpO₂, on day to day basis and submit the report to mapped Medical Officer.
 - b) Ensure the follow up sample is taken after completion of 10 days.
 - c) Respond to the home isolated person in case of clinical deterioration.
3. Medical Officer mapped shall review the clinical condition of the home isolated person on day to day basis based upon report submitted by the Surveillance personnel.
4. Treatment to be given (as per the Clinical Management Protocol V.5 dated 3rd July 2020)
 - a) Symptomatic treatment such as antipyretic (Paracetamol) for fever and pain, anti-tussives for cough
 - b) Tab Hydroxychloroquine (HCQ) 400 mg BD X 1day f/b 400mg OD X 4 days may be considered for any of those having high risk features for

severe disease (such as age > 60 years; Hypertension, diabetes, chronic lung/kidney/ liver disease, Cerebrovascular disease and obesity) under strict medical supervision, preferably after shifting to DCHC/DCH. Avoid HCQ in patients with underlying cardiac disease, history of unexplained syncope or QT prolongation (> 480 ms).

Instructions for the patient while on Home Isolation:

1. Patient should at all times use triple layer medical 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 freshly prepared 1% Sodium Hypo-chlorite for at least 30 minutes.
3. Patient must stay in the identified room and away from other people in home.
4. Patient must take adequate rest.
5. Patient must drink lot of fluids to maintain adequate hydration.
6. Patient must follow etiquettes while coughing & sneezing all the time.
7. Hands must be washed often with soap and water for at least 20 seconds or cleaned with alcohol based sanitizer.
8. Don't share personal items like mobile phones, utensils, towels etc. with other people.
9. Patient should not indulge in smoking and alcohol consumption during isolation period.
10. Patient should take a balanced diet as per the advice in attached self help booklet.
11. Patient is advised to undertake regular physical exercises and Yoga within his/her room.
12. The surfaces in the room that are touched often (tabletops, door knobs, handles, etc) should be cleaned with 1% sodium hypochlorite solution.
13. The patient must strictly follow the physician's instructions and medication advice.

14. The patient will self-monitor his/her health with daily temperature monitoring and report promptly to the mapped Surveillance Personnel/attached Medical Officer/104 Call Centre, if develops any deterioration of symptoms.
15. Download Arogya Setu App on mobile (available at: <https://www.mygov.in/aarogya-setu-app/>) and it should remain active at all times (through Bluetooth and Internet).

Instructions for care-givers for a patient of COVID-19 in Home Isolation:

1. The caregiver should wear a triple layer medical mask appropriately when in the same room with the ill person.
2. Hand hygiene must be ensured following contact with ill person or his immediate environment.
3. Hand hygiene should also be practiced before and after preparing food, before eating, after using the toilet, and whenever hands look dirty.
4. Use soap and water for hand washing at least for 20 seconds. Alcohol-based hand rub can be used, if hands are not visibly soiled.
5. 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.
6. Avoid exposure to potentially contaminated items in his immediate environment (e.g. avoid sharing cigarettes, eating utensils, dishes, drinks, used towels or bed linen).
7. Food must be provided to the patient in his room.
8. Utensils and dishes used by the patient should be cleaned with soap/detergent and water wearing gloves. The utensils and dishes may be re-used. Wash hands after taking off gloves or handling used items.
9. Use triple layer medical mask and disposable gloves while cleaning or handling surfaces, clothing or linen used by the patient. Perform hand hygiene before and after removing gloves.
10. The care giver will make sure that the patient follows the prescribed treatment.

11. The care giver and all close contacts 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).
12. Download Arogya Setu App on mobile (available at: <https://www.mygov.in/aarogya-setu-app/>) and it should remain active at all times (through Bluetooth and Internet).
13. The care giver and all close contacts of such cases should take Hydroxychloroquine prophylaxis as per protocol and as prescribed by the treating Medical Officer.

When to seek medical attention:

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

- a. Temperature $> 100^{\circ}\text{C}$
- b. Difficulty in breathing
- c. Dip in oxygen saturation ($\text{SpO}_2 < 95\%$)
- d. Persistent pain/pressure in the chest
- e. Mental confusion or inability to arouse
- f. Slurred speech/seizures
- g. Weakness or numbness in any limb or face
- h. Developing bluish discolorations of lips/face

When to discontinue home isolation:

Patient under home isolation will be tested for COVID-19 after 10 days of symptom onset and no fever for 3 days. If negative, the patient will be advised to continue isolation at home and self-monitor their health for further 7 days. If he/she is positive, he/she will be tested again after 5 days and so on till the report is negative in alignment with the discharge policy already notified vide Circular No. NHMHP-IDSP/1/2020-IDSP-Section-NATIONAL HEALTH MISSION-HP-Part (1)-3281 dated 18th May 2020.



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

MISSION DIRECTOR (NHM)

23 JUL 2020

New Shimla-9 (H.P.)

Endst. No. As above. Dated Shimla-9 the
Copy for information and necessary action to:

1. The Special Secretary (Health) to the Government of Himachal Pradesh.
2. The Director Health Services, Himachal Pradesh.
3. The Director Medical Education & Research, Himachal Pradesh.
4. All the Deputy Commissioners, Himachal Pradesh.
5. All the Chief Medical Officers in Himachal Pradesh.
6. All the District Surveillance Officers in Himachal Pradesh.
7. Project Head, 104 Comprehensive Call Centre with the directions to report the details of any patient on home isolation and informing about deterioration of symptoms to the concerned District Surveillance Officer by the fastest means possible.


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

Annexure I
Undertaking on self-isolation

I..... S/W of, resident ofbeing diagnosed as a confirmed case of COVID-19, do hereby voluntarily undertake to maintain strict self-isolation at all times for the prescribed period. During this period, I shall monitor my health and those around me and interact with the assigned surveillance team/with the call center (104), in case I suffer from any deteriorating symptoms or any of my close family contacts develops any symptoms consistent with COVID-19.

During this period, _____ will be my care-giver and his contact number is _____. My relation with the care-giver is _____.

I have been explained in detail about the precautions that I need to follow while I am under home-isolation. I am liable to be proceeded against under the prescribed and relevant law/regulation for any non-adherence to home-isolation protocol.

Signature_____

Date_____

Contact Number _____

Countersignature by Treating Medical Officer

ANNEXURE II

File no.
Department of Health and Family Welfare,
O/o Chief Medical Officer, _____, HP

ORDER

With reference to the request received from _____ dated _____ for allowing home isolation, being a COVID-19 positive case, the following directions are accorded:

1. The patient, care giver and other family members shall adhere to all the instructions contained in the self help booklet, annexed with this order, at all times.
2. _____, Mobile Number _____ shall be the care giver for the patient.
3. Dr _____ Mobile No. _____ will be the attached Medical Officer and he/she shall promptly attend to the patient in case deterioration of the symptoms occur. The Medical Officer shall also prescribe Hydroxy chloroquine prophylaxis to the care-giver and other close contacts as per the prescribed protocol after examination.
4. The _____ namely _____, Mobile no. _____ will be the attached Surveillance Personnel and shall ensure daily monitoring of the vitals of the patient which will be taken by the care-giver.
5. Any non-adherence to the instructions shall make the patient liable to prosecuted under the applicable and relevant laws.

Chief Medical Officer,
_____, HP

Endst. No. As above Dated:

Copy for necessary action to:

1. Patient
2. Deputy Commissioner, _____
3. Superintendent of Police, _____

4. Block Medical Officer, _____
5. Medical Officer (Name)
6. Surveillance Personnel (Name)
7. Executive Officer (ULB)/Panchayat Pradhan (Rural area)

Chief Medical Officer,

_____, HP



होम आइसोलेशन की स्वयं सहायता पुस्तिका



राष्ट्रीय स्वास्थ्य मिशन
स्वास्थ्य एवं परिवार कल्याण विभाग, हिमाचल प्रदेश



कोरोना संक्रमित व्यक्ति की होम आइसोलेशन के लिए शर्तें :-



- चिकित्सा अधिकारी यह सुनिश्चित करे कि मरीज को कोई भी लक्षण न हों या हल्के लक्षण हों।
- मरीज 60 वर्ष से कम हो और उच्च रक्तचाप, मधुमेह, हृदय रोग, दमा, क्रोनिक लीवर/गुर्दे की बीमारी, HIV, कैंसर, सेरिब्रो - वेस्कुलर रोग आदि से ग्रसित ना हो।
- रोगी अपने स्वास्थ्य की निगरानी करने के लिए और नियमित रूप से अपने स्वास्थ्य की स्थिति को निगरानी अधिकारी को सूचित करने के लिए सहमत हो।



- होम आइसोलेशन के लिए निवास पर मरीज के लिए अलग से शौचालय एवं हवादार बेडरूम की सुविधा होनी चाहिए।
- घर पर कोई भी व्यक्ति 60 वर्ष से अधिक नहीं होना चाहिए।
- घर के किसी अन्य व्यक्ति को उच्च रक्तचाप, मधुमेह, हृदय रोग, दमा, क्रोनिक लीवर / गुर्दे की बीमारी, HIV, कैंसर, सेरिब्रो - वेस्कुलर रोग आदि नहीं होना चाहिए।



- मरीज के लिए घर पर 24 घंटे 7 दिन तौर पर मदद के लिए देखभाल कर्ता होना चाहिए।
- देखभाल कर्ता की उम्र 18 से 55 वर्ष होनी चाहिए।
- देखभाल कर्ता को उच्च रक्तचाप, मधुमेह, हृदय रोग, दमा, क्रोनिक लीवर / गुर्दे की बीमारी, HIV, कैंसर, सेरिब्रो - वेस्कुलर रोग आदि नहीं होना चाहिए।
- देखभाल कर्ता यदि महिला है, तो वह गर्भवती नहीं होनी चाहिए।

होम-आइसोलेशन कर रहे मरीजों के लिए आवश्यक निर्देश



मरीज हमेशा ट्रिपल लेयर मेडिकल मास्क पहन कर रहें तथा 8 घंटे तक एक मास्क का उपयोग करें। यदि मास्क गीला या गन्दा हो जाता है, तो इसे तुरंत बदल दें।

मास्क को फेंकने से पहले ताजा तैयार किये गए 1% सोडियम हाइपोक्लोराइट घोल में 20 मिनट के लिए डाल दें और इस तरह कीटाणु रहित करने के बाद ही मास्क को एक बंद कूड़ेदान में फेंके।



अपने कमरे की खिड़कियाँ खुली रखें, ताकि आपको ताजी हवा मिल सके।

आप केवल अपने लिए चिन्हित शौचालय का ही प्रयोग करें और यदि आपके शौचालय की सीट पर ढक्कन है, तो हमेशा फ्लश करने से पहले ढक्कन को बंद करें।



होम-आइसोलेशन के दौरान अपने कमरे में ही रहें, घर के अन्य कमरों में न जाएं। दरवाजे, खिड़कियाँ, टेबल जैसी चीजों को छूने से बचें। ऐसा करने पर आप घर के अन्य सदस्यों को भी कोरोना संक्रमण से बचा सकते हैं।

खूब आराम करें।



किसी भी स्थिति में शरीर में पानी की कमी न होने दें। हाइड्रेशन बनाये रखने के लिए जरूरी है कि तरल पदार्थ जैसे पानी, सूप, जूस इत्यादि पीते रहें।



मरीज खांसते / छींकते समय अपने मुँह को कोहनी से ढकें एवं शिष्टाचार का पालन करें।

हाथों को साबुन और पानी से कम से कम 20 सेकेंड तक धोएं या फिर अल्कोहल युक्त सैनिटाइजर से साफ करें।



घर के अन्य लोगों के साथ व्यक्तिगत वस्तु जैसे बर्तन, तौलिए आदि को साँझा न करें।

मरीज आइसोलेशन के दौरान शराब न पिए और धूम्रपान न करें।



प्रतिदिन कम से कम तीन बार कम कार्बोहाइड्रेट एवं उच्च प्रोटीन युक्त आहार का सेवन करें। इसी के साथ-साथ उपयुक्त मात्रा में सब्जी और फलों का सेवन भी सुनिश्चित करें।

मरीज अपनी दिनचर्या में योग व व्यायाम सम्मिलित करें।



1% सोडियम हाइपोक्लोराइट घोल से घर की सफाई एवं अक्सर छुए जाने वाले सतह जैसे स्विच, बोर्ड, खिड़कियाँ, चेयर, डाइनिंग टेबल, अलमारी इत्यादि को साफ कर सकते हैं। मेटैलिक सतह जैसे सिक्योरिटी लॉक, दरवाजे के हैंडल इत्यादि को साफ करने के लिए सैनिटाइजर का प्रयोग करें।



डॉक्टर के निर्देशों का पालन करें। दवाइयाँ नियमित रूप से लेते रहें। मरीज अगर किसी अन्य बीमारी की दवाइयाँ लेता है, तो डॉक्टर की सलाह जरूर लें।

मरीज स्वयं के तापमान व पल्स दर का निरीक्षण जरूर करें और इसे पुस्तिका में दिए गए पेज न. 12 पर दर्शाये गए चार्ट पर लिखें। और यदि कोई लक्षण पाए जायें, तो 104 अथवा चिन्हित चिकित्सा अधिकारी/निगरानी अधिकारी से संपर्क करें।



मानसिक तनाव को कैसे दूर करें ?

याद रखें,
होम-आइसोलेशन की प्रक्रिया
शारीरिक आइसोलेशन है,
भावनात्मक आइसोलेशन नहीं

ऐसे करें अपने स्वास्थ्य की निगरानी



दिन में कम से कम दो बार (सुबह और शाम) या जब कभी आपको बुखार महसूस होता है, तो स्वास्थ्य परीक्षण जरूर करें। थर्मामीटर से अपना तापमान लें। आश्रित मरीजों के मामले में, देखभाल करने वाले तापमान चेक कर सकते हैं। तापमान जाँच करते समय मास्क और डिस्पोज़ेबल ग्लव्स का प्रयोग करें।



प्रतिदिन अपनी पल्स दिन में 2 बार एक मिनट के लिए जाँचें। मरीज या देखभालकर्ता द्वारा पल्स की जाँच के लिए अपनी तर्जनी (पहली उंगली) और मध्यम उंगलियों को अपनी कलाई - अंगूठे के आधार पर रखें। सेकेंड को गिनने वाली घड़ी का उपयोग करके बीट्स को गिनें कि आप 1 मिनट में कितने बीट्स महसूस करते हैं। आप 30 सेकंड तक बीट्स गिनकर, उस संख्या को 2 से गुणा भी कर सकते हैं। जाँच के बाद तापमान, पल्स रेट इत्यादि लक्षण को पेज नं० - 12 पर दर्शाये गए परिक्षण चार्ट पर लिखें।



अगर आपका तापमान 100°F (37.8° C) से ज्यादा हो या पल्स 100 बीट्स प्रति मिनट से अधिक हो, तो इसकी सूचना 104 अथवा चिन्हित चिकित्सा अधिकारी / निगरानी अधिकारी को तुरंत दें।



बुखार के अलावा, कोविड-19 के नीचे दिए गए लक्षणों के लिए सतर्क रहें, क्योंकि इन संकेतों के मिलते ही डॉक्टर की सलाह पर मरीज को तुरंत हॉस्पिटल ले जाना पड़ सकता है, जैसे कि -

- ▶ सांस लेने में कठिनाई।
- ▶ मानसिक भ्रम।
- ▶ छाती में लगातार दर्द या दबाव।
- ▶ होंठों/चेहरे का नीला पड़ जाना।



यदि ऊपर बताए गए लक्षण हो तो इसकी सूचना कृपया हेल्पलाइन नंबर -104 अथवा चिन्हित चिकित्सा अधिकारी/निगरानी अधिकारी को तुरंत दें।

यदि आप डॉक्टर से संपर्क करना चाहते हैं तो **eSanjeevaniOPD** (<https://esanjeevaniopd.in/>) के माध्यम से कर सकते हैं।

eSanjeevaniOPD
STAY HOME OPD

घर बैठे लें निःशुल्क डॉक्टरी परामर्श

अब आप घर बैठे-बैठे अपने मोबाईल पर ई-संजीवनी ओ पी डी मोबाईल ऐप के माध्यम से निःशुल्क स्वास्थ्य सम्बन्धी सलाह ले सकते हैं।



घर पर रहें, स्वस्थ रहें

- एक ही पंजीकृत मोबाईल नंबर पर **परिवार के अन्य सदस्य भी** परामर्श ले सकते हैं।
- अब मोबाइल नंबर पर बीमारी के अनुसार **दवाई की पर्ची पाएं।**
- दवाई की पर्ची **सभी मेडिकल स्टोर / सरकारी संस्थानों में मान्य होगी।**

यहाँ से डाउनलोड करें:-



राष्ट्रीय स्वास्थ्य मिशन
स्वास्थ्य एवं परिवार कल्याण विभाग, हिमाचल प्रदेश



होम-आइसोलेशन पर मरीज के देखभाल कर्ता के लिए जरूरी निर्देश



मरीज की देखभाल करते समय हमेशा ट्रिपल लेयर मेडिकल मास्क और डिस्पोजेबल ग्लव्स पहनें।

मरीज के थूक, लार या छींक के सीधे संपर्क से बचें।



बिना हाथ धोए अपने चेहरे, नाक या मुंह को न छुएं।

शौचालय जाने के बाद, खाना बनाने से पहले और बाद एवं मरीज के कमरे में जाने व संपर्क में आने के उपरांत अपने हाथों को धोने के लिए साबुन और पानी का इस्तेमाल कम से कम 20 सेकेंड के लिए करें अथवा अल्कोहल युक्त हैंड सैनिटाइज़र का इस्तेमाल करें।



मरीज को भोजन देते समय मरीज के सीधे संपर्क में न आएं। मरीज द्वारा उपयोग किए गए बर्तनों को साबुन या डिटर्जेंट से साफ करें और उन्हें साफ करते वक्त डिस्पोजेबल ग्लव्स पहनें। मरीज को उसका भोजन उसी के कमरे में दिया जाना चाहिए।

मरीज के कमरे, बाथरूम और शौचालय की सतहों को रोजाना कम से कम दो बार साफ करें। सफाई के लिए पहले घरेलू साबुन या डिटर्जेंट का उपयोग करें, इसके बाद 1%हाइपोक्लोराइट घोल से डिस-इंफेक्ट करें।



मरीज द्वारा उपयोग की गयी वस्तुएँ जैसे कि कपड़े, तौलिए, बेडशीट की सफाई या हैंडलिंग करते समय टिपल-लेयर मेडिकल मास्क और डिस्पोजेबल ग्लव्स का उपयोग अवश्य करें। मरीज के कपड़े, बिस्तर, लिनन, तौलिये इत्यादि को गर्म पानी व डिटर्जेंट में अलग से धोएं एवं इन्हे धूप में अच्छे से सूखा लें।

देखभाल कर्ता सुनिश्चित करे कि मरीज निर्धारित उपचार का पालन करें एवं दवाइयों का नियमित रूप से सेवन करें।



देखभाल कर्ता को अपने स्वास्थ्य की निगरानी करना अनिवार्य है। अगर वे कोरोना के किसी भी गंभीर लक्षण को पाते हैं, तो इसकी सूचना 104 अथवा चिन्हित चिकित्सा अधिकारी / निगरानी अधिकारी को तुरंत दें।

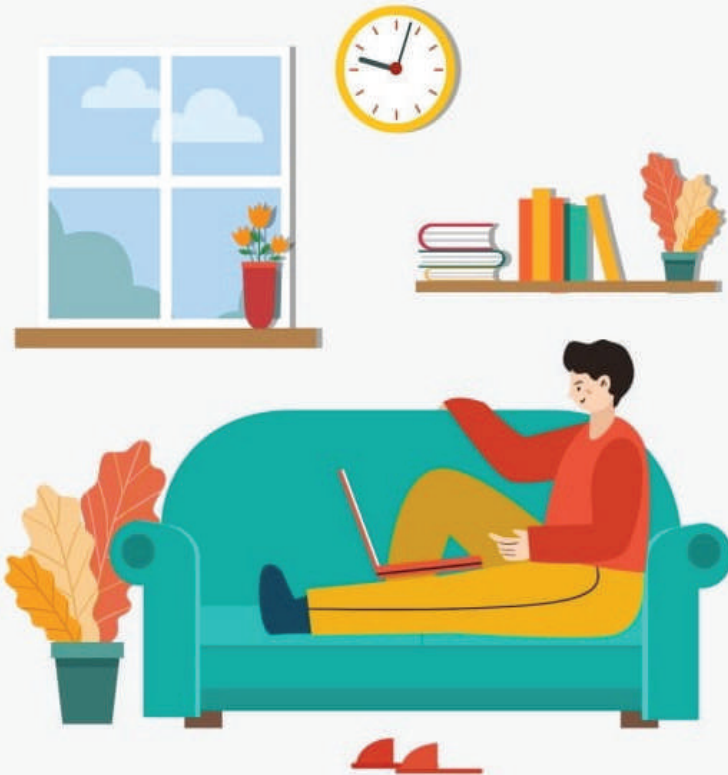
देखभाल कर्ता अपने मोबाइल फोन पर आरोग्य सेतु ऐप डाउनलोड करें (जोकि www.mygov.in/aarogya-setu-app/ पर उपलब्ध है) और यह हर समय ब्लूटूथ और इंटरनेट के माध्यम से सक्रीय रहनी चाहिए ।



देखभाल कर्ता और मरीज के नज़दीकी संपर्क में आने वाले व्यक्तियों को हाइड्रोक्सीक्लोरोक्वीन प्रोफाइलेक्सिस डॉक्टरी सलाह के अनुसार ही लेनी चाहिए।

होम आइसोलेशन को कब बंद करें:

पॉजिटिव आने के 10 दिनों के बाद मरीज की COVID-19 के प्रति पुनः जाँच की जाएगी। यदि जाँच में वह नेगेटिव आता है तो उसे आगे 7 दिन के लिए होम आइसोलेशन में रहना होगा। यदि जाँच रिपोर्ट पॉजिटिव आती है तो उसकी पुनः जाँच 5 दिन के उपरांत होगी। यह तब तक होगा जब तक वह व्यक्ति COVID - 19 के प्रति नेगेटिव नहीं पाया जाता। पॉजिटिव आने के 10 दिन उपरांत केवल उन्हीं मरीजों की COVID-19 के प्रति जाँच होगी जिन्हें पिछले 3 दिन से बुखार इत्यादि कोई भी लक्षण नहीं हैं।



जरूरी पोषण चार्ट

सुबह जल्दी 	नींबू की चाय - 1 कप या नींबू पानी - 1 गिलास (गुनगुना पानी) या करेले का रस या तुलसी का पानी या सूखा आंवला पाउडर (1 चम्मच) पानी के साथ / काढ़ा ।	
सुबह का नाश्ता 	दलिया (1 कटोरी) + ब्राउन ब्रेड (2 स्लाइस) + मक्खन या जैम + 2 अंडे या कॉर्नफ्लेक्स - 1 कटोरी + भरवां परांठा 1 + दही + 2 अंडे या चपाती (2) + सब्जी + दही + ओट्स + अंडे	वैकल्पिक 1 कप दूध या - 1 कप चाय।
दोपहर और रात का खाना 	कोई भी दाल (90 ग्राम) + चावल (1 कटोरी) + चपाती- (2-4) + मौसमी सब्जी (1 कटोरी) + खिचड़ी + दही / पुदीना चटनी (यदि उपलब्ध हो) मौसमी सब्जियों के स्थान पर सप्ताह में दो बार पनीर / मांस (120 ग्राम)	हरा सलाद (1 छोटी प्लेट) मौसमी फल (कोई भी)
शाम की चाय 	नींबू / हर्बल / हरी चाय / गिलोय का रस / घर का बना सूप - (1 कटोरी)	
अनुशंसित चिकित्सा की खुराक 	<ul style="list-style-type: none"> ● जिंक की गोली : दिन में एक बार 50 mg ● विटामिन सी की गोली : दिन में एक बार 500 mg ● विटामिन डी की गोली : हफ्ते में दो बार 2000 IU 	

* प्रोटोकॉल के अनुसार आयुर्वेद विभाग द्वारा तैयार काढ़े का सेवन किया जा सकता है।

रिकवरी प्रक्रिया और परिक्षण चार्ट

दिन	दिनांक	पल्स रेट		तापमान (बुखार)		टिप्पणी (यदि कोई हो)
		सुबह	शाम	सुबह	शाम	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						

137313/2020/O/o-SSO

DO NOT VISIT

**यहाँ पर कोविड -19 (COVID-19)
से संक्रमित व्यक्ति है।**

From (Date)**Address :****No. of Persons in Home :**

**राष्ट्रीय स्वास्थ्य मिशन
स्वास्थ्य एवं परिवार कल्याण विभाग
हिमाचल प्रदेश**



Government of India
Ministry of Health & Family Welfare

Revised guidelines for Home Isolation of very mild/pre-symptomatic/asymptomatic COVID-19 cases

1. Scope

The guidelines are in supersession to the guidelines issued on the subject on 10th May, 2020.

As per the guidelines, the patients should be clinically assigned as very mild/mild, moderate or severe and accordingly admitted to (i) COVID Care Center, (ii) Dedicated COVID Health Center or (iii) Dedicated COVID Hospital respectively. In view of large number of asymptomatic cases being detected, the current guidelines have been extended to asymptomatic positive cases also besides very mild and pre-symptomatic cases.

2. Patients eligible for home isolation

- i. The person should be clinically assigned as a very mild/pre-symptomatic/asymptomatic case by the treating medical officer.
- ii. Such cases should have the requisite facility at their residence for self-isolation and also for quarantining the family contacts.
- iii. Patients suffering from immune compromised status (HIV, Transplant recipients, Cancer therapy etc) are not eligible for home isolation.
- iv. Elderly patients aged more than 60 years and those with co-morbid conditions such as Hypertension, Diabetes, Heart disease, Chronic lung/liver/ kidney disease, Cerebro-vascular disease etc shall only be allowed home isolation after proper evaluation by the treating medical officer.
- v. A care giver should be available to provide care on 24 x7 basis. A communication link between the caregiver and hospital is a prerequisite for the entire duration of home isolation.
- vi. The care giver and all close contacts of such cases should take Hydroxychloroquine prophylaxis as per protocol and as prescribed by the treating medical officer.
- vii. Download Arogya Setu 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)
- viii. The patient shall agree to monitor his health and regularly inform his health status to the District Surveillance Officer, who will facilitate further follow up by the surveillance teams.
- ix. The patient will fill in an undertaking on self-isolation (Annexure I) and shall follow home quarantine guidelines. The treating doctor should satisfy himself before allowing home isolation.
- x. In addition to the guidelines on home-quarantine available at: <https://www.mohfw.gov.in/pdf/Guidelinesforhomequarantine.pdf>, the required instructions for the care giver and the patient as in Annexure II shall be also followed.

3. 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

- i. Difficulty in breathing,
- ii. Dip in oxygen saturation (SpO2 < 95%)
- iii. Persistent pain/pressure in the chest,
- iv. Mental confusion or inability to arouse,
- v. Slurred speech/seizures
- vi. Weakness or numbness in any limb or face
- vii. Developing bluish discolorations of lips/face

4. Role of State/District Health Authorities

- i. States/ Districts should monitor all such cases.
- ii. The health status of those under home isolation should be monitored by the field staff/surveillance teams through personal visit along with a dedicated call center to follow up the patients on daily basis. The clinical status of each case shall be recorded by the field staff/call center (body temperature, pulse rate and oxygen saturation). The field staff will guide the patient on measuring these parameters and provide the instructions (for patients and their care givers), as detailed in **Annexure II**. This mechanism to daily monitor those under home isolation shall be strictly adhered to.
- iii. 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.
- iv. Mechanism to shift patient in case of violation or need for treatment has to be established and implemented.
- v. All family members and close contacts shall be monitored and tested as per protocol by the field staff.
- vi. Patient on home isolation will be discharged from treatment as per para 6 below. These discharge guidelines shall be strictly adhered to along with issuance of a fitness certificate by the field team.

5. When to discontinue home isolation

Patient under home isolation will stand discharged after 10 days of symptom onset and no fever for 3 days. Thereafter, the patient will be advised to isolate at home and self-monitor their health for further 7 days. **There is no need for testing after the home isolation period is over.**

Undertaking on self-isolation

I S/W of, resident of

being diagnosed as a confirmed/suspect case of COVID-19, do hereby voluntarily undertake to maintain strict self-isolation at all times for the prescribed period. During this period, I shall monitor my health and those around me and interact with the assigned surveillance team/with the call center (1075), in case I suffer from any deteriorating symptoms or any of my close family contacts develops any symptoms consistent with COVID-19.

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 acted on under the prescribed law for any non-adherence to self-isolation protocol.

Signature_____

Date_____

Contact Number _____

Countersignature by Treating Medical Officer

Instructions for the patient

1. Patient should at all times use triple layer medical 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 elderlies 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.

Instructions for care-givers

1. Mask:

- 1.1 The caregiver should wear a triple layer medical mask appropriately when in the same room with the ill 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 mask 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

- 2.1 Hand hygiene must be ensured following contact with ill person or his immediate environment.
- 2.2 Hand hygiene should also be practiced before and after preparing food, before eating, after using the toilet, and whenever hands look dirty.
- 2.3 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.
- 2.4 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.
- 2.5 Perform hand hygiene before and after removing gloves.

3. Exposure to patient/patient's environment

- 3.1 Avoid direct contact with body fluids of the patient, particularly oral or respiratory secretions. Use disposable gloves while handling the patient.
- 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 wearing gloves. The utensils and dishes may be re-used. Clean hands after taking off gloves or handling used items.
- 3.5 Use triple layer medical mask and disposable gloves while cleaning or handling surfaces, clothing or linen used by the patient.
- 3.6 Perform hand hygiene before and after removing gloves.
- 3.7 The waste (masks, disposable items, food packets etc.) should be disposed of as per CPCB guidelines (available at: http://www.cpcbenviis.nic.in/pdf/BMW-GUIDELINES-COVID_1.pdf)

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)