

**GOVERNMENT OF ASSAM  
HEALTH & FAMILY WELFARE DEPARTMENT  
DISPUR :: GUWAHATI-6**

No.HLA.310/2020/99

Dated Dispur, the 23<sup>rd</sup> March, 2021

**ORDER**

**Subject : Guidelines and Standard Operating Procedure for Revised Strategy  
for COVID-19 testing and treatment to prevent re-emergence of  
COVID- 19**

The Government in the Health and Family Welfare Department has decided to take appropriate steps and measures for strengthening the screening, testing and treatment for COVID- 19 pandemic in the State in view of the increasing trend observed in many parts of India.

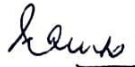
As part of the mainstreaming exercise, the existing facilities and manpower under various directorates of Health & Family Welfare Department shall be primarily utilized.

The objective of the Department is to optimally utilize the available resources and make the screening, testing and treatment facilities easily accessible to the citizens in order to have effective and early identification, isolation and treatment of the infected persons.

This Guideline & Standard Operating Procedure will be the framework of the COVID-19 Screening, Testing & Treatment protocol to be operationalized in all the Districts of the State.

**1. COVID-19 Screening at Entry Points:**

- 1.1. Screening of all incoming passengers in all the entry points including Airports, Railway stations and International land/river ports along with random checks at bus stations shall continue as per Government order No HLA.310/2020/92 dated 26-02-2021.
- 1.2. The necessary manpower for screening at the entry points will be deputed by the Joint Director of Health Services of the concerned district, with mobilizing available health care workers including lab technicians, Multi Purpose Workers and Surveillance workers.
- 1.3. However, in case of Data Entry Operators, necessary assistance from AMTRON may be sought for with detailed justification.
- 1.4. Necessary materials for testing including VTMs, gloves, BMW disposal requirement must be calculated in advance and intends to be submitted to NHM for timely supply.

  
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1.5. Rapid Antigen Test of all incoming passengers and RTPCR of all RAT negative passengers must be undertaken as per the Government guidelines in this regard.

1.6. The RAT negative passengers, awaiting RTPCR results must be advised to undergo Quarantine until the RTPCR results are available and found negative.

## 2. COVID-19 Testing

2.1. Testing facility will be made available in all the Government Hospitals including Medical Colleges, District Hospitals, SDHs, CHCs, FRUs, Model Hospitals, up-to the level of Primary Health Centre (PHC), other than the aforesaid entry points mentioned.

2.2. Adequate trained staff, adequate space (Rooms), collection of samples, temporary isolation of positive patients till their shifting and timely reporting of all tests shall continue in all the institutions without fail.

2.3. Joint Director of Health Services shall plan and allocate adequate testing staff (Laboratory Technicians) at the Centers. Trained ANM, GNM or MPW may also be used for the purpose of administering the RAT on suspected patients.

2.4. The relevant data entry related to COVID testing shall be done by these staff only and no additional/ extra temporary data entry operators shall be allowed in these institutions. However, any Computer Operator, data entry operator, or personnel who has necessary knowledge of data entry and is currently working in the Health Institutions shall be utilized for the purpose of data entry work at the testing centers.

2.5. The health officials made responsible for each of these institutions will be notified by the concerned Joint Director of Health Services with a copy marked to DHS, NHM, Deputy Commissioner of the district and Health Department.

2.6. Rapid Antigen Tests (RAT) would be conducted on the intending persons as per the established protocol. All persons visiting the testing center and undertaking the tests shall be advised to maintain safe physical distance amongst themselves during the duration of their stay at the center.

2.7. On detection of positive patients, they shall be kept separately in a well-ventilated room till they are transferred to ear-marked hospitals/ home (in case of patients opting for home isolation) through designated ambulances.

2.8. The requirement of various consumables in the form of RAT Kits, VTM, Gloves, Masks, Sanitizers, PPE etc should be carefully assessed by the Jt Director of Health Services along with the District Drug Store Manager and requirement thereof submitted to NHM.

2.9. The compliance of such arrangements and necessary indent for consumables shall be made by the designated time line.

**3. Shifting of Positive patients from testing centers to designated Hospitals/ Home (in case of patients opting for home isolation):**

- 3.1. For the purpose of extending treatment to patients who are detected as COVID positive during testing at the centers, the COVID wards in District Civil Hospital, Sub-Divisional Hospitals shall be utilized.
- 3.2. CHCs, FRUs and Model Hospitals in which institutional deliveries are not performed or separate buildings are available within the same campus, COVID treatment facilities shall also be developed in such hospitals.
- 3.3. Any patient, who is detected as COVID positive during testing at the centers shall be admitted in the above category hospitals/ CCCs in which they are tested.
- 3.4. In the event of the positive patient being tested in CHCs, FRUs, Model Hospitals, PHCs and CCCs in which treatment facility is not available, then the patient shall be shifted to the Designated Hospital.
- 3.5. The districts shall make a referral plan for the shifting of positive patients from the testing centers to designated hospitals as per the geographical proximity, availability of Beds and other factors.
- 3.6. The use of the ambulances available at the districts has to be rationalized with a minimum of two numbers of 108 ambulances earmarked for COVID purpose. The District Coordinator of 108 shall ensure 24 hours availability of these two ambulances with trained manpower and COVID protective materials in every district.
- 3.7. In case of additional requirement in any district, depending up on the number of cases, additional ambulances of 108 may be engaged in COVID duty with proper protocol.

**4. COVID-19 Treatment in Designated Hospitals:**

- 4.1. The District Civil Hospital, Sub-Divisional Hospitals and CHCs, FRUs and Model Hospitals in which institutional deliveries are not performed or separate buildings are available within the same campus, shall be designated as COVID-19 treatment Hospitals.
- 4.2. The Joint Director of Health Services and in charge Medical Officers shall take all necessary steps for creation of Isolation Wards, Doctors Room, Donning and Doffing areas and other facilities in the Designated Hospitals and other peripheral hospitals as mentioned above.
- 4.3. No temporary structures shall be constructed either for treating or housing patients.
- 4.4. Medical infrastructure in the form of Portable X-Ray, Ventilator, Monitor, Oxygen has to be arranged at the designated Hospitals (District Civil Hospital, Sub-Divisional Hospitals) Provisioning of Human Resource in the form of

Doctors, GNM, ANM, Staff, Cleaners etc, has to be done for the designated Hospitals.

- 4.5. Availability of all COVID specific medicines prescribed in the standard treatment protocol by the Director of Medical Education shall be ensured by the Jt. DHS and Medical Officer in charge of the health institution, in case of shortage of supply, weekly intends shall be submitted to NHM for timely replenishment in advance.
- 4.6. The micro-plan of the district in this regard has to be prepared by the Joint Director of Health Services in the prescribed format and submitted to NHM HQ by the designated date.

#### **5. Reorientation of Human resources :**

- 5.1. State level workshops for imparting retraining to Doctors, officials and support staff will be held 20th to 25th March, 2021.
- 5.2. Standard treatment protocol and other aspects of running the testing and treatment centers shall be shared by Medical College Faculty nominated by Director of Medical Education for this purpose.
- 5.3. The Medical College faculty shall hold workshops and training sessions in their respective districts and train the Doctors and other staff regarding operationalizing the testing and treatment centers.
- 5.4. The training programmes are to be completed by the designated timeline.

#### **6. Home Isolation of COVID-19 positive patients:**

- 6.1. The facility of home isolation shall be available for the asymptomatic COVID positive patients who fulfills the eligibility criteria as per Government guideline issued earlier.
- 6.2. Procedure of allowing Home Isolation: Any positive patient from the testing centers expressing their intent to stay under home isolation shall have to submit the undertaking in the prescribed format. A summary enquiry shall be made by the ANM-ASHA-MPW-SW of the testing center regarding the availability of the required facilities at the residence of the positive patient. The assistance of the Gaon Burah/ Ward Member may be sought in this regard.
- 6.3. The permission for home isolation shall be given by the Medical Officer in whose jurisdiction the Testing Center and residence of the positive person falls.
- 6.4. The medicines as per the treatment protocol shall be made available free of cost to the Home isolation permitted positive patient.
- 6.5. Monitoring of Home isolation patients: The ANM-ASHA-MPW-SW of the testing center shall be allocated area wise charge of supervision and monitoring of the patients under home isolation. They shall ensure the adherence of conditions of home isolation and also monitor the health of the home isolated patients for ten days from the date of testing. At the end of ten

days, further to the declaration of Deemed Discharge as elaborated in guideline, the monitoring staff shall further ensure the home quarantine of such patient for seven more days.

6.6. Discharge of Home Isolation Patients: At the end of ten days of adverse event free health condition, names and summary report of such clinically asymptomatic patients shall be submitted to the In-charge Doctor of the Hospital by the monitoring team as mentioned above.

6.7. The In-charge Doctor will in turn submit the names with recommendation of deemed discharge of these patients to the State Discharge Board through the Joint Director of Health Services. On declaration of such patients as deemed discharge by the State Board, the same shall be communicated to the patient by the Monitoring staff. The entire flow of information shall be through email for prompt disposal of such cases.

## 7. Miscellaneous matters :

7.1. Diet/ food for COVID Positive patients: The food/diet of the admitted Covid-19 positive patients shall be as per the regular diet of the health institution only. However, the family of the patients may provide homemade food on demand, maintaining all safety precautions as applicable.

7.2. Non-Covid Treatment for patients: Such Hospitals in which COVID treatment shall be done will also continue to extend treatment facilities (OPD/ IPD) for other diseases and conditions in line with the normal functioning of such hospitals. Adequate arrangements for doctors and staff shall also be made by the District in the respective hospitals for the purpose. However, provision of separate entry and exit shall be made for the COVID testing treatment facility so that there is no inter mingling of the COVID positive patients with the patients coming to the hospital for other ailments.

Time Lines for various activities		
Sl No	Activity	Designated Date
1	Submission of review reports/microplan by Jt. DHS	25-03-2021
2	All infrastructural arrangements at the Entry Screening Points	25-03-2021
3	All infrastructural etc. arrangements at the Hospitals	27-03-2021
4	District Re-Training Completion	30-03-2021
5	Compliance of HR arrangements	30-03-2021
6	Necessary indent for consumables	25-03-2021

7	Revitalized IEC activities in the district, block and village level	30-03-2021
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*Samir K. Sinha* 23/3/21

(Samir K. Sinha, IAS)

Principal Secretary to the Government of Assam  
Health & Family Welfare Department

Memo No.HLA.310/2020/99 – A

Dated Dispur, the 23<sup>rd</sup> March, 2021

Copy to:

1. Chief Secretary, Assam.
2. Additional Chief Secretary to Hon'ble Chief Minister, Assam.
3. Principal Secretary, Home & Political and Social Welfare Department, Assam.
4. Director General of Police, Assam.
5. ADGP (L&O) / ADGP (S).
6. Principal Secretary, Health & Family Welfare Department, Assam.
7. Commissioner & Secretary, Transport Department, Dispur.
8. Chief Executive Officer, Assam State Disaster Management Authority.
9. Mission Director, National Health Mission, Assam.
10. All Deputy Commissioners / Sub-Divisional Officers (Civil).
11. All Superintendents of Police
12. Director of Medical Education/ Director of Health Services, Assam.
13. All Joint Directors of Health Services, Assam.
14. P.S. to Hon'ble Minister, Health & Family Welfare, Assam.
15. P.S. to Hon'ble Minister of State, Health & Family Welfare, Assam.
16. Any other concerned

*Samir K. Sinha* 23/3/21

Principal Secretary to Government of Assam  
Health & Family Welfare Department