



ABSTRACT

COVID-19 – Health and Family Welfare department – Comprehensive Guidelines for COVID-19 – Revised Orders – Issued.

HEALTH AND FAMILY WELFARE (P1) DEPARTMENT

G.O.(Ms) No.319

**Dated: 31.08.2020
Thiruvalluvar Aandu-2051
Sarvari, Aavani - 15**

Read:

- 1 G.O.Ms.No.219, Health and Family Welfare (P1) department, dated 18.05.2020.
- 2 G.O.Ms.No.249, Health and Family Welfare (P1) department, dated 17.06.2020.
- 3 G.O.Ms.No.285, Health and Family Welfare (P1) department, dated 30.07.2020.
- 4 G.O.Ms.No.297, Health and Family Welfare (P1) Department, dated 13.08.2020.
- 5 From the Director of Public Health and Preventive Medicine Letter No.4736/IDSP/2020, Dated 14.08.2020.
- 6 G.O.Ms.No.444, Revenue and Disaster Management (DM.I (2)) Department, dated 27.08.2020.
- 7 Press Release No.182 of Hon'ble Chief Minister, dated 30.08.2020.

In the Government orders first to fourth read above, Guidelines on testing, quarantine and exemption of passengers from other Districts / States / Countries travelling to Tamil Nadu have been issued.

2. In the letter fifth read above, the Director of Public Health and Preventive Medicine has sent a proposal to the Government for issuing the Comprehensive Guidelines for COVID-19 and requested necessary orders in the matter.

3. After careful examination, the Government hereby issue the Comprehensive Guidelines for COVID-19 as detailed below. These guidelines will take effect from 1.9.2020.

1. Testing Strategies (Mandatory Testing)

- i. All International Travelers entering Tamil Nadu without RT-PCR Test (Test taken within 96 hours prior to the arrival)

- ii. All symptomatic (ILI Symptoms) individuals with history of International travel in the last 14 days.
- iii. All symptomatic (ILI symptoms) contacts of laboratory confirmed cases.
- iv. All symptomatic (ILI symptoms) health care workers / frontline workers involved in containment and mitigation of COVID-19
- v. All patients of Severe Acute Respiratory Infection (SARI).
- vi. Asymptomatic direct and high-risk contacts of a confirmed case to be tested once between day 5 and day 10 of coming into contact.
- vii. All symptomatic ILI within hotspots/containment zones.
- viii. All hospitalized patients who develop ILI symptoms.
- ix. All symptomatic ILI among returnees and migrants within 7 days of illness.
- x. No emergency procedure {including deliveries} should be delayed for lack of test. However, sample can be sent for testing if indicated as above (i-viii), simultaneously.

NB:

- i. ILI case is defined as one with Acute Respiratory infection with fever $\geq 38^{\circ}\text{C}$ AND cough.
- ii. SARI case is defined as one with Acute Respiratory Infection with fever $\geq 38^{\circ}\text{C}$ AND cough AND requiring hospitalization.
- iii. All testing in the above categories is recommended by real time RT-PCR test only.

Testing Guidelines

Category A: Persons coming from Other State / Union Territory (Air, Railway and Road)

- i. Thermal screening is mandatory
- ii. All passengers have to undergo home quarantine for 14 days. (During the period, if the individual develops fever, cough, breathlessness they shall visit health facility)
- iii. Testing to be done to only Symptomatic persons coming from other States / Union Territory,
 - If they test positive and they are Symptomatic they will be taken to hospital isolation. If they are positive and asymptomatic they will be taken to COVID Care Centre for Management.
 - If they test negative and they are asymptomatic, they will remain in home quarantine for 14 days.
 - If they test negative and they are symptomatic, they will be taken to Hospital isolation and be decided based on Medical Opinion.

- (iv) Business travelers visiting Tamil Nadu for short stay of 72 hours are exempt from home quarantine norms (As per reference 6th cited above)
- (v) Auto generated TN ePass mandatory (<https://tnepass.tnega.org/>)

Category B: Persons from other countries (Air and Ship)

- (i) Thermal screening is mandatory
- (ii) All the passengers have to undergo 14 days of home quarantine. (During the period, if the individual develops fever, cough, breathlessness they shall visit health facility)
- (iii) **All the passengers who are travelling to Tamil Nadu from other Countries should have negative - RT-PCR Test Report (Test taken within 96 hours prior to the arrival)**
 - As a transition arrangement, passenger coming through Vande Bharat Flights alone will be provided RT-PCR facility in the Airport on arrival for a week. All asymptomatic individuals will be sent for 14 days home quarantine. If the test result is positive, individuals will be asked to report to a medical facility for treatment.
- (iv) All those who have RT-PCR negative certificate (taken within 96 hours prior to the arrival) and who are asymptomatic will be allowed to go for home and remain in quarantine for 14 days.
- (v) Testing to be done for persons coming from other countries with symptoms
 - If they test positive and they are Symptomatic they will be taken to hospital isolation. If they are positive and asymptomatic they will be taken to COVID Care Centre for Management.
 - If they test negative and they are asymptomatic, they will remain in home quarantine for 14 days.
 - If they test negative and they are symptomatic, they will be taken to Hospital isolation and be decided based on Medical Opinion.
- (vi) Auto generated TN ePass mandatory (<https://tnepass.tnega.org/>)

2. Guidelines for Home Isolation of very mild / mild / pre-symptomatic COVID Positive cases.

Eligibility for home isolation

- i. The person should be clinically assigned as a very mild case / mild case / pre-symptomatic 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. Availability of a well-ventilated single-room preferably with an attached/separate toilet is needed.
- iii. A care giver should be available to provide care on 24 x7 basis. Only the assigned care giver alone should access the patient by taking utmost precaution such as wearing triple layer mask, hand hygiene, social distancing etc. A communication

link between the caregiver and hospital is a prerequisite for the entire duration of home isolation.

- iv. The patient shall agree to monitor his health and regularly inform his health status to the District Surveillance Officer for further follow up by the surveillance teams.
- v. The patient will fill in an undertaking on self-isolation and shall follow home quarantine guidelines. Such individual shall be eligible for home isolation.
- vi. 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)
- vii. 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 shall also be followed.

Policy for termination of Home isolation for very mild / mild / pre-symptomatic COVID cases

- i. Discharge after 10 days of tested positive.
- ii. No fever for consecutive 10 days
- iii. No need of testing RT-PCR

3. Demarcation of Containment Zone Strategies for Corona Virus Infection Prevention and Control

- I. Containment zone is formed for areas where cluster of cases or cluster of cases emerges and cluster is defined as area where more than 3 and above index cases are reported or 3 families and more families are affected by COVID-19.
 - i. If there are more than 3 / Index case or 3 households affected
 - a) in case of village, entire village (affected habitation) is demarcated as containment zone
 - b) In Corporation and Municipality affected street or part of the street is demarcated as containment zone depending in ground situation
 - c) In the case of multi storey building the entire affected multi storey building or its part.
 - ii. In case of slums where it is highly crowded, wherein maintaining social distance is a challenge, families of positive cases shall be put in institutional quarantine
- II. In cases of upto 3 index cases or only upto three households having positive cases such of those affected households and their neighbors will be put in home quarantine.

- III. The containment operations shall be deemed to be over in 14 days, if no active cases in this containment zone during this period from the date of last confirmation of positive case.

3.1 Containment zone is the Primary area where intensive action has to be carried out with the aim of breaking the chain of transmission with the following activities:

- Establishment of clear entry and exit point
- No movement to be allowed except for medical emergencies and essential goods and services.
- No unchecked influx of population to be allowed.
- People transiting to be recorded and followed through IDSP.

Stringent action need to be initiated within these containment zones in terms of

- I. Active search for cases through physical house to house surveillance by special teams formed for the purpose. 1 Health Worker to be assigned for the containment zone for every 50 houses in rural area and 1 Health Worker per 100 houses in urban area as appropriate based on local conditions.
- II. Testing of all cases as per sampling guidelines
- III. Contact tracing
- IV. Identification of local community volunteers to help in surveillance, contact tracing and risk communication.
- V. Extensive inter-personal and community based communication.
- VI. Strict enforcement of social distancing
- VII. Advocacy on hand hygiene, respiratory hygiene, environmental sanitation and wearing of masks / face-covers
- VIII. Clinical management of all confirmed cases.

A buffer zone has to be delineated around each containment zone based on local conditions, in case of urban area. In case of rural areas 0.5 Km radius can be defined as buffer zone. It shall be appropriately defined by the district administration / local urban bodies with technical inputs at local level.

The focus of action in the buffer zone includes:

- i. Extensive surveillance for cases through monitoring ILI / SARI cases in Health facilities.
- ii. Identify Health Facilities (Government and Private), Healthcare workforce available (ASHAs/ANM/AWW and doctors in PHC/CHC/District hospital).
- iii. All Health facilities (including clinics) to report clinically suspect cases of COVID-19 on real time basis to the control room at the district level.
- iv. Create community awareness on preventive measures such as personal hygiene, hand hygiene and respiratory etiquettes.
- v. Use of face cover, physical distancing through enhanced IEC activities.
- vi. Ensure social distancing.

The containment operations shall be deemed to be over in 14 days. If no active cases in this containment zone during this period from the date of last confirmation of positive case.

4. Categorization of patients

Patients may be categorized into three groups and managed in the respective COVID hospitals

- I. COVID Care Centers (for mild cases)
- II. COVID Health Centre (for Moderate cases) and
- III. Tertiary and other hospitals with ICUs / Ventilators and oxygen beds with beds allocated for COVID patients and Dedicated COVID Hospitals (Severe cases)

Group 1 – Mild cases: Suspect cases, clinically assigned as asymptomatic / high-risk negative cases (none above 50 years of age or those with co-morbid conditions should be placed here).

Group 2 – Mild – Moderate cases: Suspect and confirmed cases clinically assigned as mild-moderate.

Group 3 – Severe cases & High Risk cases: Suspect and confirmed cases clinically assigned as severe / with Co-morbid conditions / Vulnerable / Elderly.

5. Discharge policy for COVID-19 patients

I. For mild /very mild / pre-symptomatic cases at COVID Care Centre

- Patient can be discharged after 10 days of tested positive / date of home isolation / date of admission at COVID Care Center and no fever for consecutively 3 days.
- No need for testing prior to discharge
- Patient will be advised to follow home isolation for a further period of 7 days after discharge

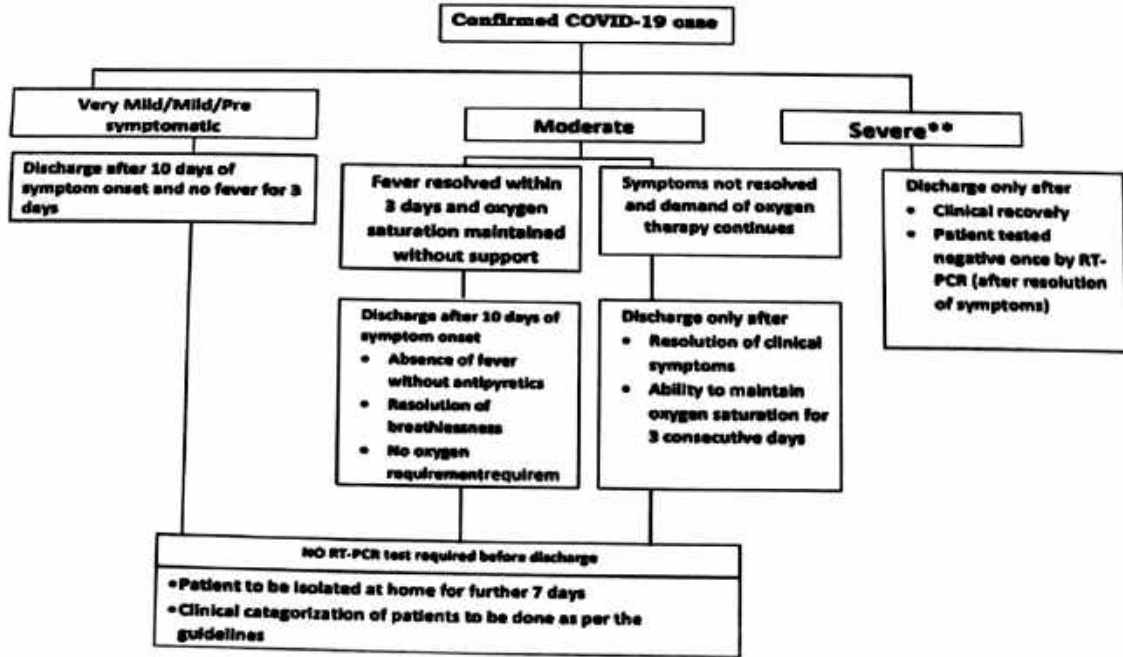
II. For moderate cases

- Patient can be discharged
 - (a) if asymptomatic for 3 consecutive days and
 - (b) after 10 days of tested positive
- No need for testing prior to discharge
- Patient will be advised to follow home isolation for a further period of 7 days after discharge

III. For severe cases

- Clinical recovery
- Patient tested negative once by RT-PCR after resolution of symptoms.

Summary of the Revised discharge policy for COVID-19



(BY ORDER OF THE GOVERNOR)

J.RADHAKRISHNAN,
PRINCIPAL SECRETARY TO GOVERNMENT.

To

- The Director of Public Health and Preventive Medicine, Chennai – 600 006.
- The Director of Medical Education, Chennai – 600 010.
- The Director of Medical and Rural Health Services, Chennai – 600 006.
- All Deans of the Medical Colleges (through the Director of Medical Education, Chennai- 600 010)
- All District Collectors.
- The Commissioner, Greater Chennai Corporation, Chennai – 600 003.
- All Secretaries to Government, Secretariat, Chennai – 600 009.
- All Departments of Secretariat, Chennai – 600 009.

Copy to:-

- The Senior Personal Assistant to Hon'ble Minister (Health and Family Welfare), Chennai – 600 009.
- The Principal Private Secretary to Chief Secretary, Chennai – 600 009.
- The Personal Secretary to Principal Secretary, Public Department, Chennai- 600 009.
- The Health and Family Welfare (Data Cell) Department, Chennai - 600 009.
- Stock File / Spare Copy

//FORWARDED BY ORDER//

31/8/2020
SECTION OFFICER.