

# NATIONAL INSTITUTE OF TECHNOLOGY, DURGAPUR.

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Office of Senior Medical Officer

## SUB: Treatment plan for COVID-19 positive patient inside campus.

Due to sudden surge of positive cases all over India, the hospital beds are already flooded with people. Whole India is witnessing people suffering due to unavailability of bed, medicines and dying without oxygen. So the government of India has enforced various measures to contain the disease spread and is advising people who got infected and confirmed by a lab can opt for home Isolation if there are mild/no symptoms. If the symptoms worsen, they should visit hospital. In NIT Durgapur also people who tested positive can opt for home isolation as long as they fulfil the following criteria.

### ELIGIBILITY CRITERIA FOR HOME ISOLATION

1. **Very mild symptomatic cases and pre-symptomatic or asymptomatic laboratory confirmed cases** can opt for home isolation if one qualified doctor is available for Tele- Consultation
2. **Patient should be less than 50yrs and without any co-morbidity.**
3. Such cases **should have adequate facility at their residence for self-isolation** and also for quarantine of the family contacts.
4. **A care giver should be available at their residence to provide care on 24 x7 basis.**
5. Patients should take medicines as prescribed by the treating medical officer as per protocol.
6. A **communication link** between the caregiver and hospital for the entire duration is a prerequisite
7. The patient or caregiver will download **Arogya Setu App** from [www.mygov.in/](http://www.mygov.in/) aarogya-setu app on their mobile and the mobile should remain active at all times through Bluetooth and Wi-Fi
8. The patient will **agree to monitor his health**. Patient and the care giver will **regularly inform** his health status to the Medical Unit.
9. The patient will give an **undertaking of self-isolation** (Annexure) and will follow the guidelines
10. Care giver also should use masks all the time and family members including care giver of the positive patients should go for RT-PCR test within five days COVID-19 confirmation test of the initial patient.

**Patients in Home Isolation should monitor the following at regular interval as advised from Medical Unit:**

1. Temperature
2. Pulse
3. Blood pressure
4. SPO2 (Pulse Oximeter)
5. Urine output (Approximate)

**Those patients who do not meet the above criteria may be shifted to Isolation Ward for monitoring.**

All the patients in Isolation ward and Home Isolation are advised for taking oral medicines as advised by Dept of Health and Family Welfare, Govt of West Bengal.

All the students who are tested positive will be kept in Isolation ward and they will be managed according to the situation and severity of the disease.

Patients who will improve with medication in Home Isolation/Isolation ward will be discharged as per Discharge policy of the government.

Those who develop more symptoms (warning signs) need to be hospitalized as soon as possible.

**Warning signs for Immediate Hospitalization (As per protocol of Dept of Health and Family Welfare, Govt of West Bengal.):**

1. SPO2 less than 95% (Room Air)
2. Difficulty in breathing
3. High grade fever
4. Persistent fever for more than 7 days
5. Recurrence of fever after remission for few days
6. Chest pain/tightness
7. Severe cough
8. Or as advised by the treating physician specially in high risk groups

As long as they stay in Isolation ward due to various reasons, they will be given supportive management as far as possible from the Medical Unit as per protocol.

For patient's admission, the Medical Unit and Administration will try to get them admitted in any of the Tie-up hospitals. In case there is no bed available there, patient may shift himself/herself to any hospital on their own.

**In spite of the best efforts from the Medical Unit, any patient may get worsen at any time. All the concerned population must understand the ground reality and must face the pandemic in a united way.**

**UNDERTAKING ON SELF-ISOLATION (Annexure )**

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 Medical Unit, 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 \_\_\_\_\_