

By e-mail

**DIRECTORATE OF HEALTH SERVICES, ODISHA,  
BHUBANESWAR**

No. 8456 /

Bhubaneswar, the 28<sup>th</sup> Marh, 2020.

To

All the District Collectors  
Director, Capital Hospital, Bhubaneswar  
Director, RGH, Rourkela,  
All CDM & PHOs

**Sub: Guidelines for general hospitals and nursing homes for COVID – 19 detected cases**

Madam/Sir,

Please find enclosed herewith the guidelines for general hospitals and nursing homes in which a case of COVID – 19 will be detected. This may please be widely circulated amongst all health care set ups in your jurisdiction for implementation. I would also like to request you to form task force units to monitor different institutions in this regards.

Thanking you.

  
**Director, Health Services, Odisha**

Memo No. 8457 /

Date 28/3/20

Forwarded to the Principal Secretary to Govt. in Health & Family Welfare Dept. for information .

  
**Director, Health Services, Odisha**

Memo No. 8458 /

Date 28/3/20

Forwarded to the Joint Secretary to Govt. in Health & Family Welfare Dept. for information

  
**Director, Health Services, Odisha**

Memo No. 8459 /

Date 28/3/20

Forwarded to the DMET/DPH for information and necessary action

  
**Director, Health Services, Odisha**

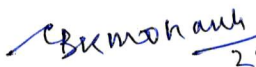
## **GUIDELINES FOR GENERAL HOSPITALS AND NURSING HOMES IN WHICH A**

### **CASE OF COVID-19 DETECTED**

1. When a COVID-19 case is detected, in the hospital, the facility should notify the Health Department immediately.
2. The patient must be segregated to an isolated area, preferably a single cabin with attached toilet.
3. If patient is critically ill in ICU, other patients in the room may be shifted to another section of the same building. These patients will be considered as contacts and will be followed for COVID – 19 symptoms for fourteen days. The guideline for COVID testing must be followed for these patients as per the ICMR protocol or else the patients confirmed COVID patients may be isolated into another isolation ICU created by relocation of the equipments.
4. Other patients so segregated must be followed up for at least 14 days in the hospital itself and should not be discharged.
5. Other patients in the hospital should be shifted to other section of the hospital and to be kept under observation.
6. Aggressive disinfection protocol must be started in the same room and also the same floor. The patients in other cabins or wards must be shifted to other isolated areas of the hospital or to other hospitals.
7. All health care & outsourcing personnel who had history of contact with the patients or deployed in the same block of the hospital must be identified, reported, quarantined and monitored for 14 days. For the staffs likely to be non-compliant or for whom home quarantine is not possible, the hospital authorities will be responsible for keeping them under quarantine and monitoring under their arrangement. Aggressive contact tracing must start from the hospital itself. Data collection must be initiated at the hospital level and be furnished to State IDSP cells for further continuance of surveillance.

8. All relatives & contacts must be sensitized on self monitoring, quarantine and standard precautionary measure, including hand-washing & social distancing.
9. The hospital should practice aggressive visitor restriction & also should enforce sick leave policy in the facilities.
10. No further admission to this section of hospital is allowed unless being a confirmed COVID -19 cases and the hospital is prepared to convert the section to the COVID-19 care unit.
11. Unless the section is independent & isolated, the hospital should stop admitting any cases except during life threatening emergency who may be admitted on compassionate ground. This must be done only with prior information & explanation to the attendants of the patient.
12. After discharge of the patient, the isolation room, all clinical areas & Laboratory, where the patient has visited along with accessories, equipments, injection & dressing trolleys etc. must be disinfected as per the NCDC guidelines, before allowing other patient to be admitted. If the area of the hospital is not independent, the hospital must take up aggressive disinfection of the whole hospital before allowing other patients for admission.
13. Government reserves the right to cancel the registration of the hospital, in case of any violation of the SOP or to initiate any legal action as deemed proper.
14. Other essential services will continue maintaining infection control guideline.

  
**D.H.S., Odisha**

  
**D.M.E.T., Odisha**