

ABSTRACT

COVID-19 – Health and Family Welfare department – Protocol for Triage in Primary Health Care Setting – Orders – Issued.

HEALTH AND FAMILY WELFARE (P1) DEPARTMENT

G.O.(Ms).No.342

Dated: 06.08.2021 Pilava, Aadi - 21

Thiruvalluvar Aandu – 2052

Read:

- 1. G.O.(Ms).No.319, Health and Family Welfare (P1) Department dated: 31.08.2020.
- 2. G.O.(Ms).No.88, Health and Family Welfare (P1) Department dated: 24.02.2021.
- 3. G.O.(Ms)No.257, Health and Family Welfare (P1) Department, dated: 31.05.2021,
- 4. Mail received from the Director of Public Health and Preventive Medicine, dated:01.08.2021.

ORDER:-

In Government order first read above, the Government have issued comprehensive guidelines for COVID-19. In Government order second read above, modified comprehensive guidelines have been issued for COVID-19 testing strategy, guidelines for home isolation, demarcation of containment zone, categorization of patients and discharge policy for Covid-19 patients.

- 2. In G.O. third read above, treatment protocol for managing COVID-19 cases as recommended by the Expert Committee have been issued for all health facilities other than Medical College Hospitals, Government Hospitals and Dedicated Covid Hospitals.
- 3. The Director of Public Health and Preventive Medicine has sent draft Protocol for Triage in Primary Health Care Setting for approval of the Government.
- 4. The Government have examined the draft Protocol for Triage in Primary Health Care Setting and issue the following Protocol for Triage in Primary Health Care Setting with immediate effect:-

Protocol for Triage in Primary Health Care Setting

Objective

Categorizing RT-PCR positive/ clinically suspected cases for home care, ICCC care, CCC care, GH care or tertiary institution care.

Triage Site

Well ventilated building with adequate space at a strategic location where 50 -100 patients can be screened

Triage team

A site / field triage team consists of one doctor, 3-4 nurses, lab technician, one or two health inspectors, vaccinate/ COVID-19 recovered healthy volunteer in the age group of 18-45 years.

Materials required

The following materials should be provided to triage center.

- · Thermal Scanner, Pulse oximeter, Hand sanitizer
- One home isolation kit (as per the protocol) for each patient
- · Advisory material on home isolation, vaccination and face mask usage
- BP apparatus
- Point of care device for Random Blood Sugar test
- · Cell Counter for complete haemogram
- Lab sample collection kits for CRP, Blood urea, creatinine and any other parameter if required.

Eligibility population for triaging

- Lab confirmed COVID-19 patients reported to Screening Centre
- Any symptomatic or suspected case of COVID-19
- 60 plus contacts of RTPCR positive cases

Step by step Process of the site / field triaging

- Doctor / block staff/ volunteers in the block control room would call the positive patient to inform the Covid-19 test result and explain the triaging process, and ask the patient to come for the triaging
- If the patient was not reachable through phone, area health inspector should inform the case through community contacts
- Health Inspector (HI) of the respective area should prepare the line list of COVID-19 positive cases and allot the cases to the respective triaging center
- Cases can be mobilized to the triage center through vehicles or autos or in own motor cycle or car provided the driver/volunteer is immunized or COVID-19 recovered healthy person in 18-45 years age group
- During the lull period the list of such eligible volunteers or autos or cabs can be prepared and kept ready in case of need
- Same procedure to be followed in urban areas.

Note:

All the cases with COVID-19 symptoms should be tested for COVID-19 by RTPCR test at the screening center.

Triaging Process

 Enumeration of medical history regarding symptoms, duration of symptoms, travel history

- Assessment of co-morbidities like hypertension, diabetes, obesity, thyroid disease, cancer, kidney disease including person on dialysis, heart disease, stroke, tuberculosis, PLHA, immune-compromised states.
- Temperature recording using handheld IR thermal scanner
- Oxygen saturation (SpO2) using digital finger Pulse Oximeter
- Record Blood Pressure using BP apparatus
- Measure Random blood sugar (using glucometer)
- Complete haemogram using ceil counter
- Blood samples to be collected for CRP for all patients and other parameters as indicated

Categorisation of Care after triaging

- 1. Healthy individuals without comorbidities and conducive home conditions may be allotted home care.
- 2. Healthy individuals without comorbidities and but home conditions are not conducive may be allotted CCC/ICCC care.
- 3. Pregnant and feeding mothers should be referred to tertiary care institution for evaluation
- 4. Patients with comorbidities and 60 plus are to be referred to tertiary care center for evaluation and allotment of treatment center at tertiary care institution or secondary care or ICCC or CCC depending on the situation. Upward referral from triaging center to CCC/ICCC/tertiary care facility should be through 108 ambulance or dedicated vehicle allotted for the block and downward referral to secondary care or primary care should also be done in the same way.

(BY ORDER OF THE GOVERNOR)

J.RADHAKRISHNAN, PRINCIPAL SECRETARY TO GOVERNMENT.

To

The Director of Public Health and Preventive Medicine, Chennai – 600 006.

Copy to:-

The Principal Secretary / Commissioner, Greater Chennai Corporation, Chennai – 600 003.

The Director of Medical Education, Chennai - 600 010.

The Director of Medical and Rural Health Services, Chennai – 600 006.

All District Collectors.

The Senior Personal Assistant to Hon'ble Minister (Medical and Family Welfare), Chennai – 600 (The Principal Private Secretary to Chief Secretary, Chennai – 600 009.

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// FORWARDED BY ORDER //

SECTION OFFICER

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