

**GOVT. OF NCT OF DELHI**  
**DIRECTORATE GENERAL OF HEALTH SERVICES**  
**PUBLIC HEALTH WING-IV**  
3rd Floor, DGD Building School Block, Shakarpur, Delhi-110092  
Ph: 011-22482016, Email: [idsdpdelhi5@gmail.com](mailto:idsdpdelhi5@gmail.com)

F.No.154/DGHS/PHW-IV/COVID-19/2020/2292-2329

Dated: 30.04.2020

**Sub: Guidelines for Home Isolation of very mild/ pre-symptomatic COVID-19 cases.**

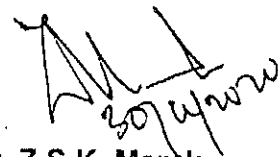
I am directed to convey the approval of Competent Authority for Home Isolation of laboratory confirmed cases of very mild/pre-symptomatic cases of COVID-19.

May please find the attached Standard Operating Procedures along with requisite annexure for facilitation of Home Isolation.

Necessary action in this regard may be initiated immediately by the concerned authorities at the district level.

Annexure

1. Standard Operating Procedures
2. Annexure-I : Undertaking
3. Annexure-II : Precautions
4. Annexure-III : Matter for stamping

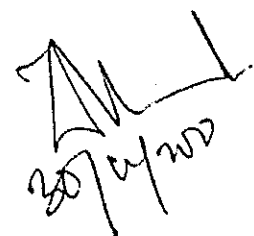
  
Dr. Z.S.K. Marak  
Addl. Dir. PHW-IV  
DGHS, GNCTD

F.No.154/DGHS/PHW-IV/COVID-19/2020/2292-2329

Dated: 30.04.2020

**Copy to:**

1. All DCs
2. All CDMOs
3. All DSOs
4. Dr. K.S. Bhagotia, AD MHS, Nodal Officer for COVID Centres, DGHS
5. OSD to Hon'ble MoH
6. SMO, WHO, NPSU
7. PS to Health
8. PS to DGHS, GNCTD

  
Dr. Z.S.K. Marak  
Addl. Dir. PHW-IV  
DGHS, GNCTD

**Directorate General of Health Services**

**Government of NCT of Delhi**

**STANDARD OPERATING PROCEDURES FOR HOME ISOLATION**

**A. COVID-19 TESTING STRATEGY**

The following categories of people are being tested for COVID-19 as per the revised testing strategy in India (Version 4, dated 09/04/2020) (ICMR)

- i. All symptomatic individuals who have undertaken international travel in the last 14 days.
- ii. All symptomatic contacts of laboratory confirmed cases.
- iii. All symptomatic health care workers.
- iv. All patients with Severe Respiratory Illness (fever and cough and/or shortness of breath)
- v. Asymptomatic direct and high-risk contacts of a confirmed case should be tested once between day 5 and day 14 of coming in his/her contact. Direct and high risk contact includes:
  - (a) one those who live in same household of a confirmed case.
  - (b) Health Care Workers who examined a confirmed case without proper use of PPE Kit as per recommendations.

**In hotspots/cluster (as per MoHFW) and in large migration gatherings/evacuees centers**

- i. All symptomatic ILI (fever, cough, sore throat, runny nose)

**Note 1:** Any patient who thinks that he/she might be having symptom/s of COVID-19 may contact at COVID-19 testing centre or flu centers identified by the Govt. of NCT of Delhi. Decision to take the sample of such patients will depend on the discretion of Medical Officer or Incharge of the flu centre or COVID testing centre.

**Note 2:** All suspects (symptomatic/pre-symptomatic) tested in COVID testing centre will return to his/her home after sampling.

*Sanjay Singh*

*[Signature]*

*[Signature]*

**B. When the patient turns out to be positive**

- i. Criteria for Home Isolation: Person should be clinically assigned as a very mild case/pre-symptomatic case by the treating Medical Officer or by the Incharge of nearby Public health facility.
- ii. Such cases should have the requisite facility at their residence for self-isolation and also for quarantining the family contacts.
- iii. A team comprising of ANM/ASHA and AWW will do the assessment of the suitability/appropriateness of the requisite facility for home isolation of COVID-19 patients, under the supervision of Incharge of nearby Public Health facility.
- iv. A care giver should be available to provide care on 24X7 basis. A communication link between the caregiver and hospital is a prerequisite for the entire duration of home isolation.
- v. The care giver and all close contacts of such cases should take Hydroxychloroquine (HCQ) prophylaxis as per protocol and as prescribed by the treating Medical Officer (detailed given on section of monitoring of HCQ).
- vi. Download Arogya Setu App on mobile (available at: <http://www.mygov.in/aarogya-setu-app/>) and it should remain active at all time (through Bluetooth and Wi-Fi).
- vii. 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.
- viii. The patient will fill in an undertaking on self-isolation (Annexure I) and same will be preserved in official records in softcopy and shall follow home quarantine guidelines. Such individual shall be eligible for home isolation.
- ix. In addition to these guidelines, home-quarantine guidelines are available at:  
<https://www.mohfw.gov.in/pdf/Guidelinesforhomequarantine.pdf>, the required instructions for the care giver and the patient as in Annexure II shall be also followed.
- x. A stamp "COMMITTED TO HOME ISOLATION" will be stamped by the Health Care Worker using appropriate PPE (Matter enclosed at Annexure III).
- xi. The date of release is to be 16 days from the date of sample taking.

*Sanjay Singh*

*LS*

*[Signature]*

- xii. If the two subsequent samples tested are not negative then home isolation will be extended as per prevailing guidelines.

### **C. Monitoring of HCQ to Care Giver**

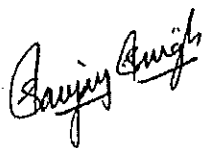
- i. Asymptomatic household contacts of laboratory confirmed cases (as mentioned at B-V): 400 mg twice a day on day 1 followed by 400 mg once weekly for next 3 weeks to be taken with meals.
- ii. The drug is not recommended for prophylaxis in children under 15 years of age.
- iii. The drug is contraindicated in persons with known case of retinopathy, known hypersensitivity to hydroxychloroquine, 4-aminoquinoline compounds and patients with cardiovascular disease on drugs causing QT prolongation.
- iv. The drug has to be given only on the prescription of a registered medical practitioner.
- v. Advise to consult with a physician for any adverse event or potential drug interaction before initiation of medication.
- vi. The prophylactic use of Hydroxychloroquine to be coupled with the pharmacovigilance for adverse drug reactions through self-reporting using the pharmacovigilance program of India (PvPI) helpline/app.
- vii. If anyone becomes symptomatic, while on prophylaxis he/she should immediately inform the Incharge of respective health facility or 24x7 call centre, get tested as per national guidelines and follow the standard treatment protocol.
- viii. All asymptomatic contacts of laboratory confirmed cases should remain in home Quarantines as per the national guidelines, even if they are on prophylactic therapy.

### **D. Daily reporting of patient and his/her care giver's medical condition**

The surveillance team or team authorized by the DSO will actively monitor the medical condition of the patient and care giver telephonically or any other mode which DSO thinks deemed fit.

### **E. When to Seek Medical Attention**

Patient/Care giver will keep monitoring their health. Immediate medical attention must be sought if serious signs or symptoms develop. These could include:



- i. Difficulty in breathing,
- ii. Persistent pain/pressure in the chest,
- iii. Mental confusion or inability to arouse,
- iv. Developing bluish discolorations of lips/face and
- v. As advised by treating Medical Officer or DSO

**Note:** For Medical attention, he will inform to the respective District Surveillance Officer through the Call Centre No: 22391014, 2301028, 22302441, 22307133, 22304568, 22307745, 22307135, 22307145, 22300012, and 22300036.

#### **F. When to Discontinue Home Isolation**

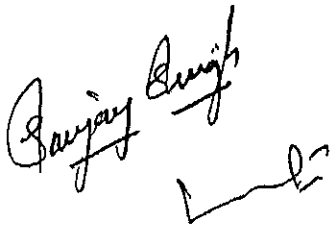
Patients under home isolation will end home isolation if symptoms are clinically resolved and the Surveillance Medical Officer certified him to be free of infection after laboratory testing as prescribed.

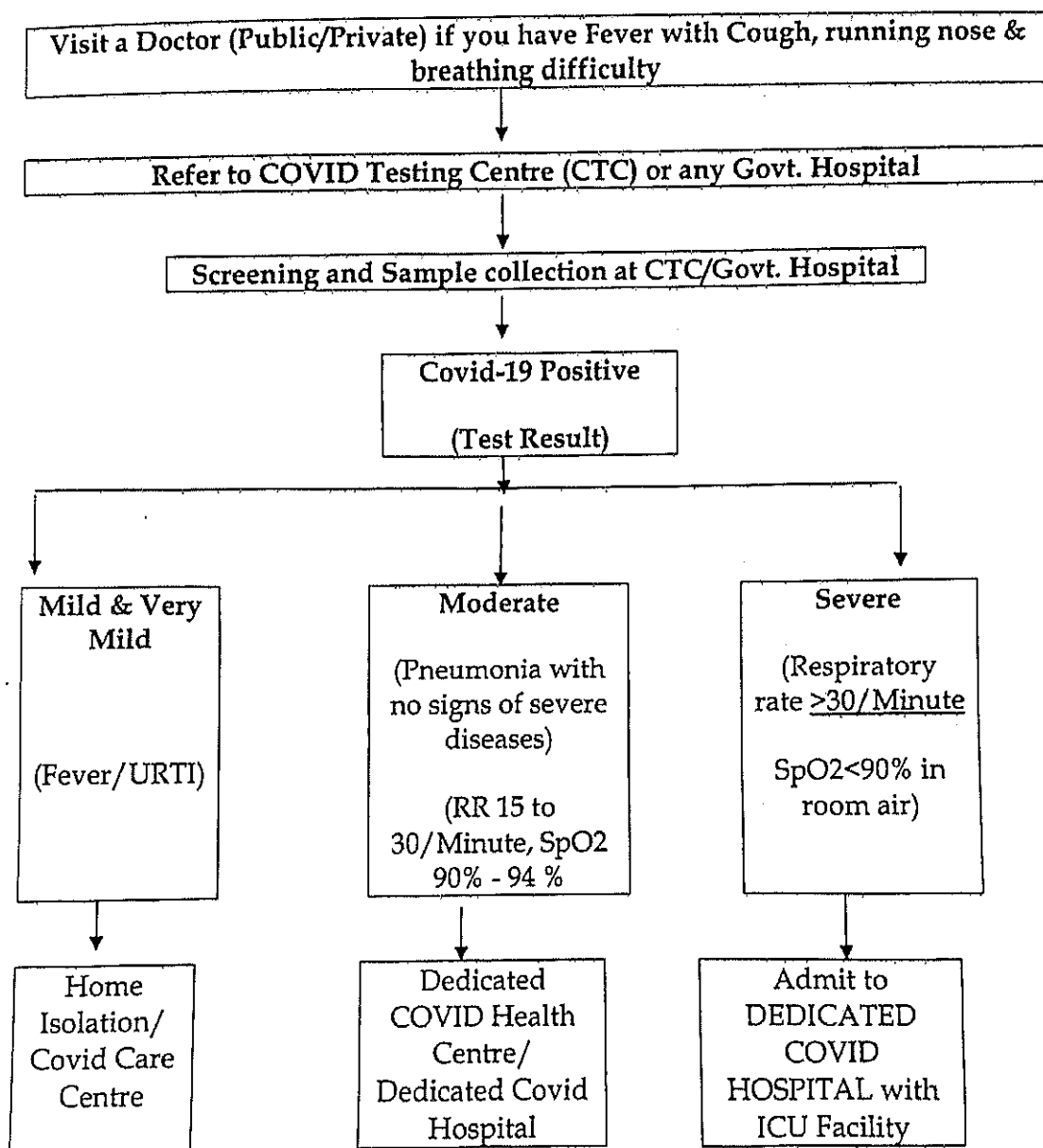
#### **G. Action Afterward of Home Isolation**

The patient and his/her caregiver will be followed up for 14 days after their lab sample comes out negative. And they will under no circumstances attend any social/religious gatherings.

#### **H. Passive Surveillance**

Passive surveillance will continue in and around the area of positive COVID-19 patient as described in Cluster Containment Plan. DSO should facilitate reporting of Flu like symptoms from all the private health facilities of the area.





- Laboratory report received in District Surveillance Unit (DSU)
- Call the patient to enquire about symptoms. If mild, then inform that a team will be visiting him the next day. Meanwhile, he/she should isolate himself/herself in a room. If symptoms are moderate or there is comorbidity, the person will be shifted to COVID Hospital immediately by COVID-19 ambulance.
- The health team under supervision of medical officer of the public primary health care facility will visit the house with appropriate PPE. The team will give him the list of advisory. Stamp his left hand. Get the certificate signed. Keep a photo of certificate as record. Make him download Arogya Setu APP. Paste a sticker of home isolation for the affected person/s outside the residence.
- The linked centre will ensure to call the person on a daily basis.
- On 14<sup>th</sup> day the sample will be collected at home by the private laboratory
- If negative, the person can visit the CTC/Hospital for repeat sample after 24 hours of the first sample.
- If positive on 14<sup>th</sup> days, then stamp on right hand for extension for another 5 days.

*Princy Singh*

*[Signature]*

*[Signature]*

**Annexure-I**

**Undertaking on Self-Isolation**

I ..... S/W/D of  
..... Resident of  
..... being diagnosed as a  
confirmed 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 assigned surveillance team/with the call center  
(22391014, 22301028, 22302441, 22307133, 22304568, 22307745,  
22307135, 22307145, 22300012, 22300036) 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.....

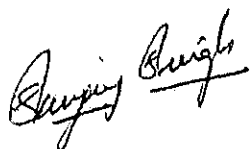
Date.....

Contact Number.....

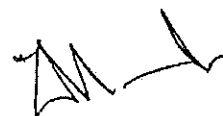
Name of Care Giver.....

Signature.....

Contact Number.....







## Annexure II

### Instructions for care-givers

- **Mask:** The caregiver should wear a triple layer medical mask appropriately when in the same room with the ill person. Front portion of the mask should not be touched or handled during use. If the mask gets wet or dirty with secretions, it must be changed immediately. Discard the mask after use and perform hand hygiene after disposal of the mask.
- He/she should avoid touching own face, nose or mouth.
- **Hand hygiene** must be ensured following contact with ill person or his immediate environment.
- Hand hygiene should also be practiced before and after preparing food, before eating, after using the toilet, and whenever hands look dirty. Use soap and water for hand washing at least for 40 seconds. Alcohol-based hand rub can be used, if hands are not visibly soiled.
- After using soap and water, use of disposable paper towels to dry hands is desirable. If not available, use dedicated clean cloth towels and replace them when they become wet.
- **Exposure to patient:** Avoid direct contact with body fluids of the patient, particularly oral or respiratory secretions. Use disposable gloves while handling the patient. Perform hand hygiene before and after removing gloves.
- Avoid exposure to potentially contaminated items in his immediate environment (e.g. avoid sharing cigarettes, eating utensils, dishes, drinks, used towels or bed linen).
- Food must be provided to the patient in his room
- Utensils and dishes used by the patient should be cleaned with soap/detergent and water wearing gloves. The utensils and dishes may be re-used. Clean hands after taking off gloves or handling used items.
- **Use triple layer medical mask and disposable gloves** while cleaning or handling surfaces, clothing or linen used by the patient. Perform hand hygiene before and after removing gloves.
- The care giver will make sure that the patient follows the prescribed treatment.
- The care giver and all close contact will self-monitor their health with daily temperature monitoring and report promptly if they develop any symptom suggestive of COVID-19 (fever/cough/difficulty in breathing)

*Sanjay Singh*  
*Head*

*[Signature]*



## Instructions for the patient

- Patient should at all times use triple layer medical mask. Discard mask after 8 hours of use or earlier if they become wet or visibly soiled.
- Mask should be discarded only after disinfecting it with 1% Sodium Hypo-chlorite.
- Patient must stay in the identified room and away from other people in home, especially elderlies and those with co-morbid conditions like hypertension, cardiovascular disease, renal disease etc.
- Patient must take rest and drink lot of fluids to maintain adequate hydration
- Follow respiratory etiquettes all the time.
- Hands must be washed often with soap and water for at least 40 seconds or clean with alcohol based sanitizer.
- Don't share personal items with other people.
- Clean surfaces in the room that are touched often (tabletops, door knobs, handles, etc) with 1% hypochlorite solution.
- The patient must strictly follow the physician's instructions and medication advice.
- The patient will self-monitor his/her health with daily temperature monitoring and report promptly if develops any deterioration of symptom as detailed below.
  - i. Difficulty in breathing,
  - ii. Persistent pain/pressure in the chest,
  - iii. Mental confusion or inability to arouse,
  - iv. Developing bluish discolorations of lips/face and
  - v. As advised by treating Medical Officer or DSO

*Sanjay Singh*  
*Dr.*

*[Signature]*

**COVID POSITIVE  
HOME  
ISOLATION  
Till**

**(16 days from day of sample collection)**

**\*Re-stamping if two samples are not  
reported negative**

*Sanjay Singh* 

