



GOVERNMENT OF KARNATAKA

No: HFW 242 ACS 2020

Karnataka Government Secretariat,
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CIRCULAR

Guidelines for isolation of COVID positive person at home

The guideline for home isolation of COVID-19 cases has been issued by Ministry of Health and Family Welfare-Government of India. In view of evolving situation of COVID-19 in the state, the following guidelines are issued:

The persons who have tested COVID positive shall be permitted to be in “home isolation” with the following conditions:

1. Only those who are asymptomatic or mild symptomatic shall be allowed to be in isolation at home
2. They shall be oriented to the protocol of home isolation
3. Health team from district health authority/ BBMP/ authorised private institution/agency shall visit the house and assess the suitability of house for home isolation and also do triage of the person.
4. Dedicated tele-monitoring link shall be established for daily follow-up of the person during the entire period of home isolation
5. The person shall report to the physician/ health authorities about their health status every day
6. The person shall have pulse oximeter, digital thermometer and personal protective equipment (facemasks, gloves) to be used during home isolation.
7. The release of the person from home isolation shall be as per the existing discharge protocol of the state for COVID-19 (vide below sl. no.10)
8. The home isolation shall be with the knowledge of the family members, neighbours, treating physician and local health authorities.

The detailed guidelines for home isolation are as follows:

1. Initial assessment and triage of person by health team at person's house

- After receipt of Covid positive report, the person shall isolate himself/herself at home in a separate room. Health team shall visit and assess the suitability of the house for isolation of the person at home and also do triage of the person
- Ask regarding following symptoms: Fever, cold, cough, throat pain, difficulty in breathing, etc.
- The health staff shall assess the following parameters (Triage)
 - Thermal scanning for fever
 - Pulse oximetry for SpO₂ and pulse rate
 - Glucometer for random blood sugar
 - Blood pressure recording using BP apparatus

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- Enquire for co-morbidities like hypertension, diabetes, obesity, thyroid disease, cancer, kidney disease including persons on dialysis, heart disease, stroke, Tuberculosis, People living with HIV, immune-compromised, on steroids and immune-suppressants, etc.
- Link the person to tele-monitoring centre for daily follow-up
- For further daily follow-up of the person, tele-monitoring through government or private institution/agency shall be arranged as desired by the person.

2. Eligibility for Home Isolation

- The person shall be clinically assigned as asymptomatic/mild case by the treating medical officer/ physician
- Such cases should have the requisite facility at their residence for self-isolation and also for quarantining the family contacts
- A caregiver should be available to provide care on a 24 x7 basis. A regular communication link between the caregiver and hospital is a pre-requisite for the entire duration of home isolation
- Mild fever $< 38^{\circ} \text{C}$ ($< 100.4^{\circ} \text{F}$)
- Oxygen saturation should be $\geq 95\%$
- Age shall be less than 60 years
- If the person has the following co-morbidities- Hypertension, diabetes mellitus, obesity, thyroid disease; they are well managed and under good clinical control as assessed by medical officer/physician
- Shall not have any comorbid conditions like kidney diseases including persons on dialysis, heart diseases, stroke, Tuberculosis, cancer, people living with HIV, immune-compromised, on steroids and immune-suppressants, etc.
- The person shall provide a signed undertaking on self-isolation (Annexure-1) and follow guidelines of home isolation
- The person shall agree to monitor his/her health (Annexure-2) and regularly inform their health status to the physician and District Surveillance Officer (DSO) for further follow up by the surveillance teams.
- Home isolation shall not be applicable for pregnant women 4 weeks before expected date of delivery (EDD)

3. Requisite facility at home for isolation

- Separate well ventilated room with a separate toilet for the person in isolation
- **The person shall stay in the identified room and away from other persons in the home**(especially the elderly and those with comorbid conditions like hypertension, cardiovascular disease, renal disease, etc.)

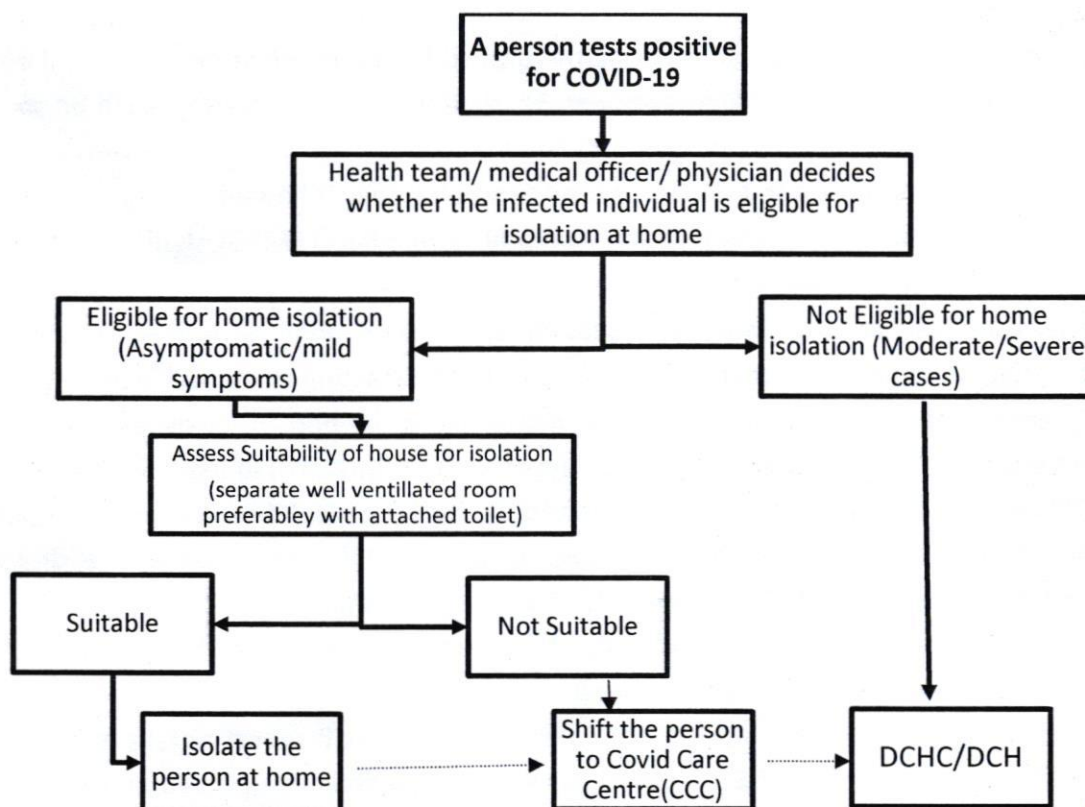
If the person does not fit to the above criteria for home isolation or the house is not suitable for home isolation, then isolation at a facility (CCC/DCHC/DCH) is recommended

The following criteria shall be used for shifting the person to CCC, DCHC or DCH as applicable:

Criteria	COVID care Centre* (CCC)	Dedicated COVID Health Centre(DCHC) (Beds with Oxygen facility)	Dedicated COVID Hospital (DCH) (ICU Beds Available)
Clinical condition	Asymptomatic or Mild	Moderate	Severe
Measure Oxygen Saturation with fingertip Pulse oximeter	SpO ₂ more than 94%	SpO ₂ between 90 to 94%	SpO ₂ less than 90%
Pulse Rate	<100/ min	100-120/min	>120/ min
Systolic Blood Pressure	-	-	<100 mm Hg
Respiratory Rate	< 24/ min	24-30/min	>30/min
Co-morbid Conditions	Hypertension, diabetes mellitus, obesity, thyroid disease under good clinical control as assessed by medical officer/physician Without any other comorbid conditions	With co-morbid conditions Pregnant women- 4 weeks before expected date of delivery (EDD)	with comorbid conditions

Note: * when the house is found not suitable for isolating the person at home; besides, shifting of the person may also be considered if the asymptomatic person opts for CCC

Algorithm for deciding Home isolation



4. When to seek further medical advice

Further medical advice shall be immediately sought if the following symptoms and signs develop;

- Difficulty in breathing
- Oxygen saturation $\leq 94\%$ using fingertip pulse oximeter
- Persistent fever of $\geq 38^{\circ}\text{C}$ (100.4°F) for more than 24 hours
- Persistent pain/pressure in the chest
- Mental confusion or inability to arouse
- Slurred speech/seizures
- Weakness or numbness in any limb or face
- Developing bluish discolorations of lips/face
- Any other symptom the person considers serious
- As advised by treating physician

5. Instructions to health staff monitoring the person in home isolation

- Ensure strict enforcement of isolation of person at home
 - Home isolation notice shall be pasted on the front door of the house
 - Hand stamping shall be done for the person in home isolation for a duration of 17 days
 - Quarantine watch app shall be downloaded and used for daily monitoring
 - Inform at least two neighbours regarding isolation of person at home
 - Three member team in the ward/ village/ booth level/ resident welfare or apartment owners' association shall oversee compliance of the person to isolation at home
 - If the person is found violating the protocol of home isolation, action will be taken under the Disaster management Act read with IPC and he/she shall be shifted to CCC.
 - Link the person to tele-monitoring centre for daily follow-up
 - IVRS outbound calls through Apathmitra helpline (14410) shall be made to the person on a daily basis
- The caregiver and all close contacts of such cases shall take Hydroxychloroquine prophylaxis as per protocol and as prescribed by the treating medical officer/physician
- Telephonically or using tele-monitoring mode, check the person for development of new symptoms or fever or deterioration in oxygen saturation ($<94\%$) at least once daily
- Gloves, masks, and other waste generated during home isolation are placed in a closed bin in the person's room before disposing of it as infectious waste. The disposal of infectious waste shall be the responsibility of the local municipal authority.
- Inform the neighbours to be kind to the person in isolation and his/her family and not to stigmatise the person in isolation/family
- Concerned area medical officer (PHC/UPHC/CHC/GH) shall report details about patients under home isolation to DSO on daily basis. The same shall be updated on GOI-COVID-19 portal and facility app by DSO every day

6. Instructions to the person in home isolation

- The person shall wear medical facemask/ N-95 facemask at all times. The mask shall be discarded after 8 hours of use or earlier if it becomes wet or visibly soiled.
- Mask shall be discarded only after disinfecting it with 1% sodium hypo-chlorite solution
- The person must stay in the identified room only and maintain a physical distance of 2 meters/ 6 feet from other people in the home, especially elderly and those with comorbid conditions like hypertension, cardiovascular disease, renal disease, etc.
- The person shall take rest and drink a lot of fluids to maintain adequate hydration. Drink atleast 2 litres of water per day. Use boiled and cooled water for drinking.
- Shall follow cough etiquettes at all times
- Hands shall be washed often with soap and water for at least 40 seconds or cleaned with an alcohol-based sanitizer.
- Do not share personal items like utensils, towels, etc. with other family members. Keep them separate.
- Clean surfaces in the room that are touched often (table-tops, doorknobs, handles, etc.) with 7% Lysol or 1% sodium hypochlorite solution
- Clean and disinfect bathroom and toilet surfaces at least once daily. Regular household soap or detergent should be used first for cleaning, followed by 1% sodium hypochlorite solution.
- The person shall strictly follow the physician's instructions and medication advice (Annexure-3)
- The person shall self-monitor his/her health with a fingertip pulse oximeter and digital thermometer daily
- The person shall report promptly if he/she develops any worsening of symptoms, as mentioned above (Sl no. 4)
- The person shall take healthy and nutritious diet. A Model diet plan is given vide annexure-4
- Smoking, chewing tobacco and alcohol intake shall be strictly avoided
- The person shall receive counselling services when necessary
- Download Arogya Setu App on mobile (available at <https://www.mygov.in/aarogya-setuapp/>) and it should remain active at all times (through Bluetooth and Wi-Fi)

7. Instructions to caregivers

- The caregiver shall wear medical facemask/ N-95 facemask appropriately when in the same room with the ill person. The front portion of the mask should not be touched or handled during use.
- If the mask gets wet or dirty with secretions, it shall be changed immediately. Discard the mask after use and perform hand hygiene after disposal of the mask into separate closed bin.
- He/she shall avoid touching eyes, nose or mouth.
- Hand hygiene shall be ensured following contact with the person.

- Hand hygiene shall be practised 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 40seconds. 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.
- Exposure to a person: Avoid direct contact with body fluids of the person, particularly oral or respiratory secretions. Use disposable gloves while handling the person. Perform hand hygiene before and after removing gloves.
- Avoid exposure to potentially contaminated items (e.g. avoid sharing food, utensils, dishes, drinks, used towels or bed linen).
- Food must be provided to the person in his/her room.
- Utensils and dishes used by the person shall 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.
- Person's clothes, bed linen, and bath and hand towels shall be washed separately using regular laundry soap and warm water or machine wash at 60–90 °C (140–194 °F) with common household detergent, and sundried thoroughly.
- Gloves and protective clothing (e.g. plastic aprons) shall be used when cleaning surfaces or handling clothing or linen soiled with body fluids. Single-use gloves shall be used and discarded after each use. Perform hand hygiene before putting on and after removing gloves.
- The caregiver shall make sure that the person follows the prescribed treatment.
- The caregiver shall ensure counselling services to the person, whenever necessary.
- The caregiver and all close contacts will self-monitor their health with daily temperature monitoring and report promptly if they develop any symptom suggestive of COVID-19 (fever, cough, cold, sore throat, difficulty in breathing, etc.)

8. Instructions to the family members of person in home isolation

- Do not panic. Do not stigmatise.
- Keep the person cheerful and boost their morale
- Ensure that the person is in strict home isolation
- Maintain a physical distance of at least 2 metres/ 6 feet
- Visitors are strictly not allowed until the person has completely recovered and has no signs or symptoms of COVID-19
- Remember, the fight is against the disease and not the person
- For any assistance, please call Apthamitra helpline – 14410

9. Instructions to neighbours of persons who are home isolated

- Do not panic. Do not stigmatise.
- Support the person and his/her family by providing essential items like medicines, rations, vegetables, etc. until they get cured as may be required
- Keep a vigil on the person in home isolation to ensure strict home isolation.
- Maintain a physical distance of 2 metres/6 feet.
- Remember, the fight is against the disease and not the person
- For any assistance, please call Apthamitra helpline – 14410

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10. When to release the person from isolation at home

- Person under home isolation shall end home isolation 17 days after onset of symptoms (or date of sampling, for asymptomatic cases) and no fever for 3 days.
- They shall be released if the following criteria are met:
 - No symptoms
 - No fever (recorded temperature $\leq 37.5^{\circ}\text{C}$ or $\leq 99.5^{\circ}\text{F}$)
 - Maintains saturation above 95%
 - Respiratory rate less than 24 per minute
- There is **no need for the RT-PCR/CBNAAT/True-NAT test** after the home isolation period is over.
- The person shall be allowed to resume duty only after satisfactory completion of home isolation.
- A fitness certificate shall be issued by the concerned area medical officer (PHC/UPHC/CHC/GH)/ treating physician. (Annexure-5)
- If the person in home isolation is under consultation/daily monitoring by private hospital, the concerned private hospital shall report to district surveillance officer (DSO) regarding release of person from home isolation
- Disinfection of the house: After completion of home isolation, disinfect all the commonly touched surfaces and objects inside the house with 7% Lysolor 1% sodium hypochlorite solution. Spraying the 1% sodium hypochlorite solution on the floors, walls above 6 feet, ceiling and open places shall not provide any benefit. The floors shall be wet mopped with common household detergent.

Jawaid 4/7/20
(Jawaid Akhtar)

Additional Chief Secretary to Government
Health & Family Welfare Department

To,

1. All Deputy Commissioners.
2. All CEOs of Zilla Panchayats.
3. All District Health Officers.

Copy for information:

1. Chief Secretary, Government of Karnataka
2. Commissioner, BBMP, Bengaluru.
3. Additional Chief Secretary to Govt., Health & Family Welfare Dept.
4. Principal Secretary to Govt., Horticulture Dept. & Special Officer, COVID Care Centre
5. Principal Secretary to Govt., Cooperation Dept. & Special Officer – Management, Designated COVID Health Centre
6. Commissioner, Health & Family Welfare Services
7. Mission Director, National Health Mission

Annexure 1: Undertaking on home-isolation

I S/W of, resident ofbeing diagnosed as a laboratory confirmed/positive of COVID-19, do hereby voluntarily undertake to maintain strict home-isolation at all times for the prescribed period. During this period, I shall monitor my health and of those around me. I shall co-operate with the physician and the surveillance team and with the call centre (14410). In case I suffer from any deteriorating symptoms or develop new symptoms or any of my close family members develop any symptoms consistent with COVID-19, shall immediately inform the physician and surveillance team.

I have been explained in detail about the precautions that I need to follow while I am under home- isolation.

I hereby declare that I have the following comorbid conditions (encircle):

- 1. Hypertension
- 2. Diabetes Mellitus
- 3. Thyroid disorder
- 4. Obesity
- 5. Others (specify).....

I hereby declare that I do not have the following comorbid conditions: kidney diseases, heart disease, stroke, Tuberculosis, cancer, HIV, immune-compromised conditions, etc.

I am liable to be acted on under the prescribed law for any non-adherence/violation to home-isolation protocol.

Signature of the person in home isolation:

Name:

Age/sex:

Date:

Contact Number:

Signature of the witness (household member):

Name:

Age/sex:

Relationship to the person:

Date:

Contact Number:

Countersignature by Treating Medical Officer/Physician:

Name:

Date:

Annexure 2: Daily Self-Monitoring and Reporting

Day	Date	Pulse rate			Body temperature			Oxygen Saturation (Fingertip Pulse oximetry)			Remarks (if any)
		Morning 7 am	Afternoon 2 pm	Evening 9 pm	Morning 7 am	Afternoon 2 pm	Evening 9 pm	Morning 7 am	Afternoon 2 pm	Evening 9 pm	
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Annexure 3: Management Plan for Home isolation of COVID-19 persons

Recommended Investigations	Complete Blood Count
	Random Blood Sugar
	HbA1C (if known diabetic)
	Electrocardiogram (ECG)

Note: Any other investigations as deemed necessary by the attending medical officer/physician

Recommended Treatment Protocol	
Treatment	Precautions
1. Tab Hydroxychloroquine Sulphate (HCQS) – 400 mg BD for 1 Day followed by 200 mg 1-0-1 for 4 Days 2. Tab Zinc 50 mg 0-1-0 for 7 Days 3. Tab Vitamin C 500 mg 1-1-1 for 7 days	Vitals should be re-assessed regularly Contraindications for HCQS: 1) QT interval > 500ms 2) Porphyria 3) Myasthenia Gravis 4) Retinal Pathology 5) Epilepsy HCQS is not contraindicated in pregnancy

➤ **Additional Medications**

- a. All persons to continue the regular medications for the pre-existing comorbid illnesses like Hypertension, Diabetes Mellitus, Hypothyroidism, etc.
- b. Tab Pantoprazole 40 mg 1-0-0 (empty stomach), if required
- c. Antitussive cough syrups – For dry cough
- d. Tab Cetrizine 10 mg 0-0-1 – For running nose if required
- e. Tab Paracetamol 500 mg/ 650 mg SOS – For Fever

➤ **Tab Hydroxychloroquine Sulphate (HCQS) Prophylaxis** for the Household Contacts/Caregiver of COVID19 Positive Person:

- Tab HCQ 400mg 1-0-1 (BD) on First day followed by 400mg/week for next 3 weeks

However, the treatment protocol as by advised by your physician shall be followed



Annexure 4: Nutrition guide

Model Diet Plan

(Similar diet plan may be suggested as per staple diet suitable locally)

On Rising	Coffee/ Tea/ Milk						
Day	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Break-fast 7:00 AM	Rava Idli	Pongal	Set Dosa	Rice Idli	Bisibele Bath	Chow Chow Bath	Set Dosa
Mid-Morning 10:00 AM	Watermelon	Papaya	Muskmelon	Watermelon	Papaya	Muskmelon	Papaya
	Ragi Ganji	Palak Soup	Rava Ganji	Carrot Soup	Ragi Ganji	Tomato Soup	Rava Ganji
Lunch 1:00 PM	Pulka- 2 nos + Palya + Rice + Dal + Curd						
Evening 5:30 PM	Elaichi Banana + Marie Biscuits – 3 Nos/ Protein biscuits- 2 Nos/ Fresh Dates- 2 Nos + Mango bar (Vit-C rich)						
Dinner 7:00 PM	Pulka- 2 nos + Palya + Rice + Dal + Curd						
Bedtime 9:00 PM	Flavoured Milk						

Do's and Don'ts

Do's

- Eat whole grains such as brown rice, whole wheat flour, oats, millets, etc.
- Include beans, lentils & pulses as these are good sources of protein
- Include fresh fruits & vegetables (Bright coloured fruits & vegetables like red capsicum, carrots, beetroot & greens etc.)
- Drink 8-10 Glasses of water and Hydrate yourself. Water helps to flush out toxins
- Citrus fruits like lemons & oranges are a good source of Vit C which is key in improving immunity levels & to fight off infections
- Include spices like ginger, garlic & turmeric which are natural immunity boosters
- Eat home-cooked food. Use low fat and less oil for cooking food
- Wash fruits & vegetables before use Include Low-fat milk & yogurt as they are good sources of protein & calcium

Don'ts

- Strictly avoid alcoholic drinks



Annexure 5: Fitness certificate for release from home isolation

(To whomsoever it may concern)

This is to certify that..... S/W of, residing at..... has satisfactorily completed home isolation for COVID-19. He/ she is deemed fit to resume his/her duties.

Signature of Medical officer/ Treating Physician

Signature of Medical officer/ Treating Physician

Name:

Date:

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