

SPECIFIC OPERATIONAL PROCEDURES

Running Non Covid Patient Services

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SOP - NON COVID SERVICES

(Return to Normalcy)

For use in the Premises of the Medical College and Hospital

These are General Guidelines and Individuals have to update themselves with the latest information as to how they should take adequate care

SAFETY DOES NOT LIE WITH MANAGEMENT ALONE

IT IS THE RESPONSIBILITY OF EVERYONE

Issued by the Management in the interests of all employees and their personal safety

Running Non Covid Patient Services

In The Context of Covid 19 Pandemic

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SOP 1: Making the area fit for Non Covid patients:

Recommended procedure

If the facility was used for Covid Patients or for Quarantine of Covid Suspects,
to make it suitable for Non Covid patients

Terminal Disinfection and decontamination procedures:

Note: The Personnel taking up the Cleaning/ Decontamination procedure should wear personal protective equipment (PPE) and adopting three bucket system as prescribed in the SOP -8

- a. All patient areas: reception, waiting areas, OP chambers, wards, Toilets and wash rooms, Sample collection center, Blood bank bleeding area, Pharmacy outlet, ramps and stair case Spraying of 1% sodium hypochlorite solution (dilution 1:4 from an initial concentration of 4%) to be done on all the surfaces include walls and roof (protecting electrical points/appliances).
- b. Followed by cleaning with a neutral detergent that is used for removing the traces formed by hypochlorite solution.
- c. While cleaning, windows need to be opened in order to protect the health of cleaning personnel.
- d. All frequently touched areas, such as all accessible surfaces of walls and windows, tables, chairs, railings, door knobs, elevator doors and buttons, interior of elevator, the the toilet bowl and bathroom surfaces need to be carefully cleaned.
- e. All linen e.g. pillow covers, bed sheets, curtains, table cloths etc should be first treated with 1% hypochlorite spray and packed and sent to get washed in laundry using a hot-water cycle (90°C) and adding laundry detergent. /
- f. If manual washing, the linen after soaking in Hypochlorite solution must be soaked in detergent in hot water at least for an hour before squeezed dry, rewashed in plain water and sundried
- g. 1% hypochlorite solution should also be sprayed in the PPE doffing area and discard area twice a day on a daily basis.
- h. Mattresses / pillows after spraying with 1% hypochlorite should be allowed to get dry (both sides) in bright sunlight for upto 3 hrs each
- i. Mattresses with rexine covering can be mopped with 1% hypochlorite solution on either side and the sides well before reused.

SOP 2: CLINICAL PRESENTATIONS

They are four groups:

Active Patients / Contacts / Suspects / Carriers

Covid Cases (Active)	Contacts	Suspects
Fever	Persons providing direct care of Patients without PPEs	International travel last 14 days
Cough	People staying in the same environment as a patient	Symptomatic contacts of a lab person or the one who treated a patient
Shortness of breath	People traveling together with a patient	All hospitalised patients with ARDS Pneumonia awaiting lab results
Bilateral pneumonia on imaging		All Contacts with Proven case even asymptomatic
ARDS		
Less common features Sore throat, Rhinorrhea, Cutaneous rash, Diarrhea		

Carriers: There could be many who are carriers, Who do not suffer by themselves, but would have contacted the virus, remain asymptomatic but can transmit the disease. They can be only made out by testing for antibodies.

SOP 2: Personnel Protection:

1. Protection and safety is the responsibility of each health worker irrespective of the cadre.
2. The health worker could act as a transmitting agent and even remain asymptomatic
3. All personnel, irrespective of the cadre shall wear a mask as soon as they leave their house until they return to their house and follow Social Distancing while travelling in a common transport vehicle.
4. They shall maintain social distancing throughout while they are at work.
5. Anyone with fever, cold, cough and breathlessness shall report to the administration by phone and shall not attend to duty and is considered Covid infected until proved otherwise.
6. If anyone has come into contact with any other Covid infected or suspected or contact shall also report to the administration and shall not attend duty.
7. Those who attend ENT, Medicine, Pediatrics, Ophthalmology and Dental departments shall take extra precaution.
8. No Patients are examined without donning the PPE and Gloves if dealing with Oro Nasopharyngeal area
9. Where necessary facial hoods can be handy in other departments
10. First ensure the individual does not come under *COVID patient, suspect or a contact*.
11. Minimise the presence of other personnel in the room to those absolutely needed.
12. Extra care of disposal of all swabs, gauze or other material that comes into contact with the patients, specially in naso oro pharynx (Refer Bio Medical Waste Disposal)
13. Reuse of spatula, mirrors and other material in Dental and ENT shall follow strict sterilisation procedures. Remember we could transmit infection from a non suspect patient to another patient or contact it ourselves. Sterise in Regular steam steriliser / Sodium Hypochlorite / > 70% alcohol (Please consult dept of Microbiology)

14. Do Not handle your mobile phone without sanitising your hands and let it not touch the mask.

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SOP 3: OUTPATIENT DEPARTMENTS

With the lifting of the lock down stage, al be it partially as of now: The possibility of running the regular OP and starting the regular working of the hospital comes into consideration:

The important issues that need consideration are:

1. Personnel Protection
2. Running the Non Covid OP
3. Sterilising items used in OP
4. Admissions and Routine interventions
5. Keep up the Vigil for Covid Patients

OUTPATIENT for NON COVID patients

A display board is kept at the entrance that the entry is not for patients who show

- 1. Fever, Breathlessness, Cough, Cold**
- 2. Who had an International travel during the previous 14 days**
- 3. Who had a contact with a Covid Patient or Suspect during previous 14 days**

1. The temperature of all patients entering the OP shall be recorded with thermal guns at the entrance itself.
2. Make an inquiry into other symptoms of Covid.

3. Only those afebrile and non Covid Symptoms are allowed to regular OP.
4. Each of the patient is asked if he had come into contact with any Covid Patient, Suspect or Contact during the past 14 days
5. Where possible all patients are encouraged to wear a mask.
6. Whenever a patient comes with fever, upper or lower respiratory symptoms - Such patients are immediately given a mask to wear and are isolated.
7. The attendants of such a patient are not allowed to mix with non covid patients and their attendants
8. **If possible masks can be given to each patient. They are collected as they leave in containers with soap solution allowed to remain in the solution and later sent to steam sterilisation and reused.**
9. Each patient is allowed to have only one attendant.
10. At each OP: The patients are not to line up before the doctors chamber.
11. A patient and Only One attendant is allowed into the doctors chambers.
12. Do not make two doctors sit in a single chamber.
13. If necessary use the Demo Room in each OP as consulting rooms in depts of medicine, surgery Ortho etc since the students are not present.
14. All the non teaching staff at the front office also shall wear masks.
15. All personnel handling the patients, Before and after seeing each patient, thoroughly wash hands with SOAP and water or Hand Sanitiser.
16. Non teaching staff working in offices. MRD, Central stores etc shall avoid contact with patients and their attendants. Unnecessary movement of personnel is avoided.
17. Although it is difficult, canteens shall supply dry food and takeaway food. Service for catering in house is avoided.
18. Pharmacy: shall avoid crowds. Arrangements must be made to collect the prescriptions at one point. The patients or his attendants are asked to sit and called to the window only when the drugs are ready for delivery.
19. The chairs in the foyer are to be used only by the patients or a single attendant. All others are asked to vacate the foyer and wait outside the OP area.
20. Adequate awareness and training of the house keeping staff in the care is absolutely necessary.

SOP 4: INPATIENT WARDS - NON COVID

1. These wards shall be separated from the wards used for COVID patients, suspects and those in quarantine - preferably in a different floor with a separate entry and exit
2. General management principles are the same as practiced earlier.
3. Certain special precautions are necessary in view of the possibility that any one of them could be a carrier for Covid Virus

4. Use only alternate beds unless for patients till such time when an all clear is given.
5. Do not permit more than one attendant. The attendant shall not sit on the couch / bed.
6. After attending to each patient: Physically coming into contact with the patients; like making his bed, checking physically his pulse/ temperature etc, wash hands with SOAP / use Sanitizer.
7. Supervise sanitisation of the ward at least twice in a day.
8. Supervise upkeep of toilets.
9. All precautions of the bio medical waste disposal are strictly enforced.
10. All sheets, bed covers, pillow covers are soaked in 1% Sodium Hypochlorite solution for 1 hour before wash.
11. Mattresses with rexine cover can be cleaned with 1% Sodium Hypochlorite solution and allowed to dry.
12. Sterilisation of BP Apparatus, BP Cuffs, Thermometer and other materials used for a patient shall be sterilized with recommended procedure before and after use of every patient. (Refer Sterilisation Procedures SOP 8*)

SOP 5: Pharmacy

All the Pharmacist shall wear masks

1. Do not allow crowds at the delivery windows
2. Designate One window to collect prescriptions
3. Make the patient / attendant sit while the drugs are picked up from the racks
4. Use another window (s) for delivery
5. When all the items are ready, call the person to collect the items and pay for it.
6. At no time two customers are at the same window.

SOP 6: Central laboratory

All the technicians at the collection point shall wear masks

1. **DO NOT ENTERTAIN COVID SAMPLE REQUEST AT THIS CENTER**
2. All the patients are made to sit at the designated place.
3. All requests for lab work are collected at one window.
4. The patients are called one by one for sample collection.
5. Immediate labelling of the material collected is done
6. While a sample is being collected: the technician shall wear disposable non sterile rubber gloves and change the gloves with each patient.

7. If any spill of the blood is noted, immediately the spill is covered with 1% Sodium Hypochlorite solution for 20 mts. Mop with absorbent paper and dispose of these in Yellow colored bins.
8. Supervise the wash room used to collect Urine samples, and get it cleaned frequently. In case of washroom for women, it is ideal to get it cleaned after every patients visit.

SOP - 7 Sanitisation of the OP IP areas

No Dry Dusting or Use of Brooms

Use Damp Dusters, Damp Mops and Mechanical Vacuum suction if available

Sanitise All Surfaces: Walls, Floor, All furniture, Not just floor alone

Note: Mopping should be done twice a day or more if possible

They shall use reusable vinyl or rubber gloves while working and

will use a soap wash of the gloves after the work

The persons taking up the sanitation work:

Dusting is preferably done with Mechanised Vacuum Cleaners rather than brooms

Shall wear reusable vinyl or rubber Gloves and Masks when dusting & handling the mops

Shall wear a washable plastic apron

Shall wear Shoes

Solutions for Sanitation:

- **Use Three buckets technique for mopping the floor, one with plain water and one with the water and detergent solution and One with Sodium Hypochlorite Solution**
- **First mop the area with the warm solution; water and detergent solution. one bucket for**

- After mopping clean the mop in sodium plain water and squeeze it,
- Mop area again using sodium hypochlorite 1% after drying the area.
- In between mopping if solution or water is dirty change it frequently.
- Mop the floor starting at the far corner of the room and work towards the door.

SOP - 8 Sterilisation:

Remember many items in daily use need attention

Sterilisation is not a matter only for OT to look after

- A. Reusable tools for clinical examination: day to day material like Stethoscope, BP apparatus, BP Cuffs, Thermometer, Knee hammers, Ophthalmoscopes, torch lights, weighing scales
- B. All reusable items used in OP or IP potentially can carry infection from one to the other
- C. Linen: Bed sheets, Pillow covers, Curtains,
- D. Certain special equipment used in each OP/ Ward:
 1. All items used for examination of a patient as mentioned in A above, shall be mopped with detergent solution / alcohol swabs before reuse.
 2. BP Cuffs can be washed and put up for laundry
 3. All metallic objects like spatula, mirrors used in ENT, instruments used in dental departments shall be soaked in trays filled with 1% Sodium hypochlorite **for 20 mts**, washed in detergent and cleaned dry before use.

4. Personnel examining the patient and those sanitising the instruments shall wear non sterile rubber gloves.
5. All linen items shall be soaked in 1% Sodium hypochlorite for 1 hour, washed in detergent and sterilised in steam before reuse
6. All surfaces like table tops, chairs, instrument trolleys, trays, stools, shall be mopped with 1% sodium Hypochlorite solution and detergent solution

SOP - 9 Bio Medical Waste Disposal

Waste Management - Non Covid Patients: running OP / IP wards

Specially ENT and Dental Departments: All swabs and other material from ORO NASOPHARYNGEAL REGION - disposal:

General solid waste generated from quarantine centers or camps should be handed over to waste collector identified by Urban Local Bodies or as per the prevailing local method of disposing general solid waste.

Biomedical waste if any generated from quarantine centers/camps should be collected separately in **yellow colored bags (suitable for biomedical waste collection)** provided by ULBs. These bags can be placed in separate and dedicated dust-bins of appropriate size.

Persons operating Quarantine camps/centers should call the CBWTF operator to collect biomedical waste as and when it gets generated. Contact details of CBWTFs would be available with Local Authorities.

Persons taking care of quarantine home / Home-care should deposit biomedical waste if any generated from suspected or recovered COVID-19 patients, by following any of the following methods as may be arranged by ULBs;

Hand over the yellow bags containing biomedical waste to authorized waste collectors at door steps engaged by local bodies; or - Deposit biomedical waste in yellow bags at designated deposition Centers established by ULBs.

The bag again be stored in yellow bag or container; or - Handover the biomedical waste to waste collector engaged by CBWTF operator at the doorstep.

Persons operating Quarantine camps/centers or Quarantine-homes/Home-care should report to ULBs in case of any difficulty in getting the services for disposal of solid waste or biomedical waste.