



**LAV AGARWAL, IAS**  
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भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली - 110011  
GOVERNMENT OF INDIA  
MINISTRY OF HEALTH & FAMILY WELFARE  
NIRMAN BHAVAN, NEW DELHI - 110011

DO. No.Z.28015/01/2020-EMR(Pt.)  
Dated the 20<sup>th</sup> March, 2020

Dear Sir/Madam,

In wake of evolving situation of Coronavirus Disease 2019 (COVID-19) in the country, and heavy rush of patients reporting to screening centers in hospitals, the medical infrastructure in the country needs to be prepared for any possible influx of patients on account of COVID 19.

In view of the above, the following interventions for hospital and medical education institutions are proposed up to 31st March 2020:

**Indoor Facilities:**

1. Non-essential elective surgeries should be postponed.
2. Some beds should be set apart and prepared for creating isolation facilities in every public and private hospital.
3. All hospitals should mobilize additional resources including masks, gloves and personal protection equipment. Healthcare personnel should be trained for dealing with any foreseeable emergencies.
4. All doctors, nurses and support staff in different specialities, including pre and para clinical departments, should be mobilized and trained in infection prevention and control practices.
5. Hospitals must procure sufficient numbers of ventilators and high flow oxygen masks in preparation for future requirements.
6. All hospitals must ensure that they have adequate trained manpower and resource pools for ventilator/ ICU care.
7. Hospitals may ensure that stable patients are discharged as early as possible while further new admissions (of stable patients) are also restricted.
8. Number of patient attendants should be strictly restricted to 'one' only.

**IEC Activities:**

9. Patients must be educated about cough etiquette, Do's and Don'ts, proper use of masks instead of using them indiscriminately and inefficiently; and personal hygiene. Hospitals should put up posters etc. to increase awareness amongst patients on Do's and Don'ts regarding COVID 19.
10. Patients must be counselled against attaching any kind of stigma to Corona virus patients or to facilities where such patients are admitted. They must be made aware that quick disclosure of symptoms and undergoing testing if advised is the surest way of battling COVID 19.

**Administrative:**

11. All hospitals should carry out a preparedness drill on Sunday, 22nd March 2020. Guidelines for this drill will be made available on the Health Ministry website.
12. Non-essential audits of hospitals by various regulators and accreditation agencies may be postponed.

- All Addl MS
  - HOD's to communicate to all faculty and staff.
  - Dr Nuban Mehta /CA & E
  - Dr Sunil Saxena
  - CMO /C(P) CMO /C(S)
  - DDA, Registrar, NS
- m  
20/03/20

13. All hospitals must provide treatment free of cost to any medical personnel who pick up infection while treating patients.
14. No suspected COVID 19 patient should be turned away from any hospital and the admission of any such patient should be notified to NCDC or IDSP immediately.
15. Similarly, all pneumonia patients must also be notified to NCDC or IDSP so that they can be tested for COVID 19.
16. Hospitals to ensure social distancing in their premises.
17. All ongoing examinations may be rescheduled after 31.03.2020.
18. All evaluation work may be rescheduled after 31.03.2020.
19. All Educational Institutions and Examination Boards are requested to maintain regular communication with the students and teachers through electronic means and keep them fully informed so that there is no anxiety amongst the students, teachers and parents.
20. Institutions are also requested to notify help-line numbers/e-mails which students can access for their queries.
21. All unauthorized/ authorized shops (excluding pharmacies) and eateries in the vicinity of hospitals should be compulsorily shut.
22. Leave of all kinds (except under emergency and unavoidable circumstances) may be cancelled immediately.

**OPD:**

23. All patients may be advised not to come for routine visits to the OPD if it can be avoided or postponed.
24. OPDs may be organised in such a manner that patients exhibiting flu like symptoms are attended separately from other patients and spaced out so as to avoid overcrowding.
25. Patients suffering from chronic diseases and minor elements may be advised to utilise OPDs in primary/ secondary care facilities rather than crowding tertiary care centres.
26. Pharmacy counters may be increased and queue management systems to be followed by engaging Indian Red Cross/ NDRF volunteers.

These will be reviewed as per the evolving situation.

With regards,

Yours sincerely



(Lav Agarwal)

To,

1. Additional Chief Secretary/Principal Secretary/Secretary (Health) of all States/UTs
2. Director/Medical Superintendents of all Central Government Hospitals and Medical Education Institutions

Copy for information to:

1. PS to Hon'ble HFM / PS to Hon'ble MoS (AKC)
2. Sr. PPS to Secretary (H)